

Revisiting One Size Does not Fit All in Treatment of Perpetrators of Intimate Partner Violence

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Gordon Paul's Epic Question

- ▶ *What treatment, by whom is most effective for this Individual with that specific problem, and Under, which set of circumstances?*

One size does not fit all in treatment of intimate partner violence

AL Cantos, KD O'Leary - Partner Abuse, 2014

Current one size fits all interventions do not do justice to the empirically identified heterogeneity with respect to type of violence and characteristics of perpetrators.

Domestic violence perpetrator
programs: A proposal for
evidence-based standards in the
United States

Partner Abuse, 7(4)

Babcock, J Armenti, N Cannon, C
et al. (2016)

Effectiveness of BIP Programs

- ▶ Neither the earlier nor more recent meta-analytic reviews of traditional BIPs provide convincing evidence of the effectiveness of such programs, especially if the analyses are based on the most rigorous experimental designs. (Babcock, Greene & Robie, 2004; Eckhardt et al, 2013;
- ▶ Quasi experimental groups are more likely to show change but as the methodological rigor of a study increases, the likelihood of obtaining significant effects decreases.
- ▶ At best, one may argue that BIPs may have significant but very small effects (Babcock, Green, & Robie, 2004). Arias, Arce, R., & Vilariño 2014)

Recommendations

- ▶ **Need for the study of moderators of treatment outcome.**
- ▶ The question becomes one of not whether the programs work but under what conditions do they work and for whom.

Differential Treatment

- ▶ Studies have consistently shown that intimate partner violence is not a unitary phenomenon and that instead it varies with respect to the type and severity of violence as well as the characteristics of the perpetrators.
- ▶ There is evidence to support placement of men in different intervention groups based on the severity and generality of the violence, the presence or absence of substance abuse, mental illness or personality type.
- ▶ Although most states have a mandate with respect to the one size fits all treatment approach, there have been some positive attempts providing interventions responsive to the aforementioned heterogeneity which have produced differential outcomes as hypothesized.

▶ There is need for openness to varied theoretical orientations, and some that seem worthy of more extensive evaluation include:

- ▶ individualized treatment and motivational interviewing approaches (Murphy, Meis & Eckhardt, 2009),
- ▶ couple approaches (Hamel & Nichols, 2006; Salis & O'Leary, in press; Stith, McCollum & Rosen, 2011)
- ▶ individual approaches followed by couple approaches (Geller, 1992; Salis & O'Leary, in press; Stith, McCollum & Rosen, 2011),
- ▶ cultural context and family systems approaches (Almeida & Hudak, 2002)
- ▶ acceptance approaches for community members seeking help for coping with emotional problems and difficult relationship who engaged in two or more acts of physical aggression against their partners (Zarling, Lawrence & Marchman, 2015).

Standards

- ▶ **Step 1. Determine the Type of Violence**
 - ▶ Male perpetrated vs female perpetrated
 - ▶ Heterosexual, LGBT, Trans
 - ▶ Self defense
 - ▶ Mutual combat
 - ▶ Intimate terrorism
 - ▶ Severity of the violence
 - ▶ Developmental stage of the violence
 - ▶ History of substantial head injury

Suggested interventions

- ▶ **Step 2. Determine Characteristics of Perpetrators**
 - ▶ Generally violent versus family only
 - ▶ Borderline personality characteristics (generalized affect regulation problems)
 - ▶ Attachment difficulties (relationship specific affect regulation problems)
 - ▶ Impulse/anger control difficulties
 - ▶ Power and control problems
 - ▶ Stage of Motivation to Change
 - ▶ Underclass Variables
 - ▶ Culture (cultural identification)

Suggested interventions

Step 3

- ▶ Determine presence of alcohol or substance abuse and if present refer to treatment prior to proceeding with intimate partner violence treatment

Type of Violence

- ▶ **If Unilateral**

 - refer to intimate partner perpetrator group
for further evaluation

- ▶ **If Intimate Terrorism**

 - refer to power and control group plus close
monitoring probation

- ▶ **If Mutual Combat**

 - refer to couples treatment of intimate
partner violence

- ▶ **If Substantial Head Injury**

 - refer to head injury coping skills group

Unilateral Generally violent (with low stake in conformity)

- ▶ **Casework**
- ▶ **Help With Employment And Income, Basic Needs**
- ▶ **Impulse Control/Anger Control Skills**
- ▶ **Intensive Probation Monitoring**
- ▶ **Motivational Interviewing**

Family Only: Borderline Tendencies


- ▶ **Dialectical behavior therapy**
- ▶ **Mindfulness**
- ▶ **Affect regulation skills**
- ▶ **History of abuse in family of origin**

Characteristics of Perpetrators relevant for matching treatment to perpetrator type

- ▶ 1. Identify disfunctional internal mechanisms (Wakefield's definition of mental disorder: 1992, 2010)
- ▶ 2. Identify targets for intervention
- ▶ 3. Identify general principles of change to address these target for intervention

Characteristics of Perpetrators Assessed

- ▶ Borderline personality features/emotional regulation difficulties
- ▶ Trauma
- ▶ Attachment
- ▶ Alcohol and substance use
- ▶ Readiness to change
- ▶ Family only/Generally violent



Borderline Personality Features/Emotional Regulation difficulties

Borderline personality and IPV

Nicholas A. Armenti and Julia C. Babcock (2018)

- ▶ **trait anger** may be an important factor in the link between borderline personality features and IPV.
- ▶ contextual factors, such as **ambiguous rejection by an intimate partner**, may be especially relevant in activating anger or aggression in individuals with **borderline personality features**

Clinical and Personality Disorders in a Danish Treatment-Seeking Sample of Intimate Partner Violence Perpetrators

Ask Elklit, Siobhan Murphy, Christine Jacobsen,
and Morgan Kezia Jensen

- ▶ IPV perpetrators ($n = 529$) engaging in a treatment program, '*Dialogue Against Violence*'.
- ▶ **High rates of childhood trauma were observed.**
- ▶ **IPV perpetrators have a number of personality traits clinical disorders and traumatic histories that need to be considered within a perspective.**

EMOTION REGULATION AND EXPERIENTIAL AVOIDANCE IN INTIMATE PARTNER VIOLENCE (2009)

Amie Langer and Erika Lawrence

- ▶ examined processes that may elucidate the development of novel, empirically-supported treatments that are more effective than our existing IPV interventions.
- ▶ investigation of emotion dysregulation and experiential avoidance as functionally linked to IPV perpetration.
- ▶ IPV is primarily maintained by negative reinforcement in the form of escape from, or avoidance of, unwanted internal experiences,



Avoidance of Internal Distress and Adult Attachment Patterns: Relevance to Partner Violence in a Court-Mandated Sample (2017)

Daniel A. Goldstein, Ph.D., Steven A. Miller, Ph.D. Arthur L. Cantos, Ph.D.

- ▶ EA and Physical IPV
- ▶ **Experiential avoidance associated with frequency of physical IPV, of Psychological IPV and odds of engaging in sexual coercion over the past year, controlling for number of treatment sessions completed and impression management**

Maladaptive emotion regulation and aggression in adult offenders

Terri Robertona, Michael Dafferna,^b and Romola S. Bucksc (2014)

- ▶ .
- ▶ Results suggest that **offenders with a maladaptive emotion regulation style reported more extensive histories of aggression than those with an adaptive emotion regulation style.**
- ▶ It was also found that **self-reported emotional awareness and access to effective emotion regulation strategies contributed to adaptive emotion regulation.**
- ▶ These findings indicate the potential **utility of including emotion-related modules in treatment programs for violent offending populations.**

Acceptance and Commitment Therapy

- ▶ Acceptance and commitment therapy (ACT) is an action-oriented approach to psychotherapy that stems from traditional behavior therapy and cognitive behavioral therapy. **Clients learn to stop avoiding, denying, and struggling with their inner emotions and, instead, accept that these deeper feelings are appropriate responses to certain situations that should not prevent them from moving forward in their lives.** With this understanding, clients begin to accept their issues and hardships and commit to making necessary changes in their behavior, regardless of what is going on in their lives, and how they feel about it.

A randomized controlled trial of acceptance and commitment therapy for aggressive behavior. (2015)

Zarling A, Lawrence E, Marchman J.

- ▶ One hundred one participants (mean age = 31; 68% female; 18% minority) who endorsed recently engaging in at least 2 acts of partner aggression were randomly assigned to receive **ACT or a support-and-discussion control condition**
- ▶ participants in the **ACT group had significantly greater declines in psychological and physical aggression from pre- to posttreatment and from pretreatment to follow-up**
- ▶ **6-month treatment outcomes were partially mediated by levels of experiential avoidance and emotion dysregulation at posttreatment.**
- ▶ **CONCLUSIONS:**
- ▶ The results of this first trial of ACT for aggressive behavior indicate that the **ACT group significantly reduced both physical and psychological aggression and that these changes were significantly greater than those of the control group, suggesting that an ACT approach to aggression may serve as an efficacious treatment for aggression.**

Evaluation of Acceptance and Commitment Therapy for Domestic Violence Offenders

Amie Zarling, Sarah Bannon & Meg Berta (2017) Psychology of Violence.

the purpose of this study was to examine the **impact of an Acceptance and Commitment Therapy (ACT)-based program on reducing new criminal charges 1 year postintervention compared with the traditional treatment (a combination of the Duluth Model and CBT)**. a sample of 3,474 men who were arrested for domestic assault and court-mandated to a BIP ...

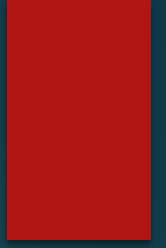
- ▶ **Results: Compared with Duluth/CBT participants, significantly fewer ACTV participants acquired any new charges, domestic assault charges, or violent charges. ACTV participants also acquired significantly fewer charges on average in the 1 year after treatment than Duluth/CBT participants.** This pattern of results emerged for both treatment completers and noncompleters. ACTV had a significantly higher dropout rate.

A Process Evaluation of a Novel ACT-based Batterers Intervention Program: What Mechanisms Lead to Changes in Aggressive Behaviors? (2017)

Amie Zarling, PhD, Sarah Bannon, Ma., Meg Berta, MA

- ▶ examination of participants in an ACT-based BIP provides **preliminary support for experiential avoidance as a feasible mechanism of change in the reduction of aggressive behavior**
- ▶ **Changes in experiential avoidance paralleled changes in IPV following ACT intervention**
- ▶ T-test differences pre-post:
 - ▶ Experiential avoidance was significantly lower at T3 compared to T1
 - ▶ IPV reports were significantly lower at T3 compared to T1
- ▶ Experiential Avoidance at T1:
 - ▶ Predicted levels of psychological aggression at T3 (but not T2)

TRAUMA



Strengths at Home Intervention

- ▶ SAH-C is a **10-week couples group intervention designed to prevent relationship conflict and IPV among military couples.**
- ▶ The program content and delivery are **highly sensitive to** the unique stressors of deployment separation and combat exposure and the **ways that traumatic stress exposure can negatively affect relationships.**
- ▶ The program incorporates elements from couples and noncouples interventions for PTSD (Monson & Fredman, 2012; Resick & Schnicke, 1992) and IPV (Murphy & Scott, 1996).
- ▶ SAH-C targets **social information processing mechanisms** hypothesized to explain the relationship between trauma and IPV and that are commonly used in IPV treatment, **as well as common themes that may underlie trauma reactions** and relationship difficulties emphasized in PTSD interventions.
- ▶ Didactic material includes **modules focused on understanding IPV and the impact of trauma on intimate relationships, conflict management (e.g., “time outs”) and assertiveness skills, listening skills, strategies for enhanced emotional expression, and avoidance of common communication pitfalls.**

Strength at Home” Intervention to Prevent Conflict and Violence in Military Couples: Pilot Findings (2014)

Casey T. Taft, PhD, Jamie Howard, PhD, Candice M. Monson, PhD, Sherry M. Walling, PhD, Patricia A. Resick, PhD, Christopher M. Murphy

- ▶ *Strength at Home-Couples (SAH-C)*, a **10-session cognitive-behavioral couples-based group intervention designed to prevent intimate partner violence (IPV) in military couples.**
- ▶ **Preliminary pilot data were promising with respect to reductions and prevention of IPV in those receiving the SAH-C intervention.**
- ▶ Initial results for the **secondary intervention targets** were less favorable for the SAH-C intervention, with effect sizes suggesting a trend in which **relationship satisfaction increased more in the ST intervention**

Strength at Home Couples Program to Prevent Military Partner Violence: A Randomized Controlled Trial (2016)

Casey T. Taft, Suzannah K. Creech, Matthew W. Gallagher, Alexandra Macdonald, Christopher M. Murphy, and Candice M. Monson

- ▶ **supportive prevention couples group or Strength at Home Couples.** All couples were reassessed at postintervention and at 6 and 12 months follow-ups.
- ▶ **Results: Both service members or veterans and their female partners engaged in fewer acts of reported physical and psychological IPV in the Strength at Home Couples condition relative to supportive prevention, and relative risk of physical violence was lower for both members of the dyad in Strength at Home Couples at follow-up assessments** Exploratory analyses did not find differences between groups on relationship satisfaction.
- ▶ **Conclusion:** Results provide support for the efficacy of Strength at Home Couples in preventing physical IPV and reducing psychological IPV. These results have important implications for preventing violence and associated physical and mental health problems.

PTSD Symptoms Predict Outcome in Trauma-Informed Treatment of Intimate Partner Aggression (2017)

Suzannah K. Creech, Alexandra Macdonald, Justin K. Benzer, Gina M. Poole, Christopher M. Murphy, and Casey T. Taft

- ▶ **PTSD symptoms at intake significantly predicted both physical and psychological IPA use**, even after accounting for the effects of treatment condition, time, and number of sessions attended.
- ▶ **PTSD had a strong association with both physical and psychological IPA.**
- ▶ *Conclusion:*
- ▶ **outcomes could be enhanced through additional direct treatment of PTSD symptoms..**

ATTACHMENT

An Application of Attachment Theory to Court-Mandated Batterers (2006)

Fred Buttell, John Muldoon, Michelle Carney

- ▶ The study collected data from 158 batterers beginning treatment and 25 nonviolent men. Analysis indicated that **batterers demonstrated significantly elevated levels of interpersonal dependency, relative to the nonviolent comparison group.**

Attachment, interpersonal problems, and treatment outcome in group therapy for intimate partner violence. (2009)

By Lawson, David M., Brossart, Daniel F.

- ▶ **(a) pretreatment attachment anxiety and vindictive interpersonal problems predicted posttreatment mild physical abuse and psychological abuse,**
- ▶ **(c) pretreatment attachment avoidance and vindictive interpersonal problems predicted posttreatment total violence severity.**
- ▶ **higher attachment avoidance gain scores (i.e., increasing approaching) predicted lower total violence gain scores**

Avoidance of Internal Distress and Adult Attachment Patterns: Relevance to Partner Violence in a Court-Mandated Sample (2017)

Daniel A. Goldstein, Ph.D., Steven A. Miller, Ph.D. Arthur L. Cantos, Ph.D.

▶ **Attachment anxiety was positively associated with frequency of physical and psychological IPV perpetration, as well as odds of engaging in sexual coercion, over the past year.**

▶ Relationship held after controlling for impression management and number of treatment sessions completed

▶ No significant relationships were found between attachment avoidance and various forms of IPV.

Domestic violence and Attachment: Clinical Applications to Treatment with Perpetrators

D. Sonkiin

- ▶ The development of violent behaviors is a complex phenomenon rooted in a combination of genetics, child development, family and social dynamics. Therefore, attachment theory does not offer a complete picture. However, these findings suggest that incorporating attachment theory into understanding the psychology of perpetrators may help devise interventions that will facilitate the process of adaptive affect regulation capacities (or, in attachment language, earned security). These findings also suggest that different interventions may be necessary for different clients, depending on how their particular form of affect regulation leads to violence.
- ▶ Although the behavioral goal of domestic violence treatment for each of these attachment categories is similar—cessation of violence—how that goal is achieved will differ depending on how each client regulates attachment distress.

Dismissive attachment

D.Sonkin

- ▶ Clients with a dismissing attachment often lack awareness of their present emotional state, have difficulty empathizing, appear emotionally cold, and are disinterested in the psychological workings of intimate relationships. They often vacillate between being passive-aggressive and overtly critical and aggressive. Therapists may note it is difficult to feel empathy for these individuals—perhaps because it is difficult for these clients to feel their own emotions. They present a more analytical, sparse narrative. As one client put it, “I guess I need to incorporate an emotional soundtrack into my life.” Dismissing batterers may become violent when their partner’s emotional demands for intimacy overwhelm their typical coping mechanisms of withdrawal and .
- ▶ interventions need to focus on helping these individuals identify disavowed emotions, and learn constructive ways of representing feelings and needs in a relationship context.

Disorganized or unresolved

- ▶ The disorganized or unresolved batterer will manifest elements of both dismissing and preoccupied patterns. They demonstrate the characteristic approach and avoidance behaviors seen in borderline personality disorder. These clients may move into a dissociative state when traumatic memories triggered by current events overwhelm both emotional and cognitive functions. Resolution of early childhood trauma is key to these individuals learning to manage interpersonal distress in a more adaptive manner. These individuals need to resolve early traumas and losses in order to break the victimizer-victim cycle; otherwise, they will not likely utilize all the benefits treatment has to offer.

Preoccupied Attachment

- ▶ Batterers exhibiting preoccupied attachment experience varying degrees of anxiety in relationships. Therapists usually sense the anxiety and may feel overwhelmed by the emotional material presented. Preoccupied individuals have learned to maintain connection by maintaining negative affect. This may present as frequent complaints about a partner, criticism and anger. Though critical of partners, they will not easily leave, because anger keeps them connected, albeit negatively. When experiencing a threat to attachment, such clients experience anger and criticism more easily than more vulnerable emotions, and are likely to act violently as a means of keeping the partner from leaving.
- ▶ they need to develop emotional self-soothing capacities to better utilize cognitive structures necessary to constructive social problem solving. These individuals are likely to become violent as their emotions begin to overwhelm their usual cognitive inhibitory functions. These individuals need to learn how to self-soothe when activated (to make better use of cognitive strategies) and not depend solely on proximity maintenance with their attachment figures.



Alcohol and Substance Abuse

Genetics Moderate Alcohol and Intimate Partner Violence Treatment Outcomes in a Randomized Controlled Trial of Hazardous Drinking Men in Batterer Intervention Programs: A Preliminary Investigation (2016)
Gregory L. Stuart, John McGeary, Ryan C. Shorey, Valerie S. Knopik

- ▶ **At high levels of the CGS (cumulative genetic score) men in SBP BAI had greater PDA, less physical violence perpetration, and fewer injuries to partners than men in SBP.**
- ▶ **No differences between the groups in PDA, physical violence, or injuries were observed at low levels of the CGS.**
- ▶ **Conclusions:** Findings demonstrate the potential importance of MAOA and 5-HTTLPR polymorphisms in the treatment of IPV and drinking in men in batterer intervention programs

Exploring the Moderating Role of Problematic Substance Use
in the Relations Between Borderline and Antisocial Personality
Features and Intimate Partner Violence (2018)

Nicholas A. Armenti, Alexandra L. Snead, and Julia C.
Babcock

- ▶ Positive relations between both borderline and antisocial features and IPV were stronger in conditions of high problematic alcohol use relative to low alcohol use. Alcohol misuse may be an important factor to consider for IPV reduction in men with these personality features.

Improvements in Empathy and Cognitive Flexibility after Court-Mandated Intervention Program in Intimate Partner Violence Perpetrators: The Role of Alcohol Abuse (2018)


Ángel Romero-Martínez , Marisol Lila , Manuela Martínez , Vicente Pedrón-Rico and Luis Moya-Albiol

This study evaluated potential neuropsychological changes (emotional decoding, perspective taking, emotional empathy and cognitive flexibility) and their relationship with alcohol consumption in a mandatory intervention program for IPV perpetrators, as well as how these variables affect the risk of IPV recidivism.).

IPV perpetrators with HA consumption were less accurate in decoding emotional facial signals and adopting others' perspective, and less cognitively flexible than those with LA consumption before the IPV intervention.

The HA group showed a smaller improvement in these skills and higher risk of IPV recidivism than the LA group. Moreover, improvement in these skills was related to a lower risk of IPV recidivism.

The study provides guidance on the targeting of cognitive domains, which are key factors for reducing IPV recidivism



Readiness to Change and Motivational Enhancement Interventions

Readiness to Change as a Predictor of Treatment Engagement and Outcome for Partner Violent Men (2018)

Ana I. Maldonado and Christopher M. Murphy

- ▶ **Readiness to change significantly predicted client ratings of the working alliance**, but not therapist ratings of the working alliance, CBT homework compliance, or criminal recidivism.
- ▶ **readiness to change is a stronger predictor of positive treatment response for court- versus self-referred individuals and for those with either very low or very high levels of borderline and antisocial characteristics.**
- ▶ **Hence, strategies to enhance motivation to change may be particularly be important for IPV perpetrators with these characteristics.**

Individualized Motivational Plans in Batterer Intervention Programs: A Randomized Clinical Trial (2018)

Marisol Lila, Enrique Gracia, and Alba Catalá-Miñana

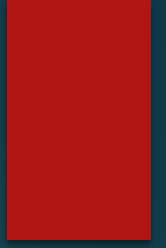
- ▶ **This study examined whether adding an individualized motivational plan (IMP) to a standard BIP (SBIP) increased intervention effectiveness relative to BIP alone.**
- ▶ **Method:** One hundred sixty males convicted of intimate partner violence were randomly assigned to receive 70 hr of either SBIP or SBIP plus IMP. The IMP is based on motivational interviewing, stages of change, and strength-based theory principles..
- ▶ **Results:** Findings indicated that the **SBIP plus IMP participants received significantly more intervention dose, finished the intervention in a more advanced stage of change, reported less physical violence after treatment, and had a higher reduction in recidivism risk than SBIP participants.**
- ▶ **Conclusions:** These results highlight the relevance of alternative approaches, including strategies to increase treatment compliance and motivation for change, in BIPs.

Motivational enhancement mitigates the effects of problematic alcohol use on treatment compliance among partner violent offenders: Result of a randomized clinical trial. (2015)

Crane, C. A., Eckhardt, C. I., & Schlauch, R. C..

- ▶ Findings indicated that **binge drinkers had lower treatment compliance than non-binge-drinking participants**, and that **binge-drinking BMI participants attended more treatment sessions and evidenced lower dropout rates than binge-drinking control participants.**
- ▶ **Conclusions:** Findings highlight the **importance of individualized treatment planning for IPV offenders in order to maximize available resources while accommodating the needs of males at greatest risk for noncompliance and continued violence.** (

Family Only
versus Generally
Violent
Perpetrators



Recidivism in Intimate Partner Violence Among Antisocial and Family-Only Perpetrators (2017)

Joakim Petersson Örebro & Susanne Strand



- ▶ **antisocial perpetrators recidivated to a larger extent than family-only perpetrators** were more prone to recidivate in both physical and nonphysical violence.
- ▶ **antisocial perpetrators recidivated more than family-only perpetrators after the first year.**
- ▶ Key findings consisted of the subtypes' differing propensity to reoffend and their different critical time periods for recidivism

Cantos Lab findings on GV perpetrators

- ▶ Lower on Stake in Conformity Variables: Income, employment, married, less to lose
- ▶ More likely to have experienced both childhood abuse and witnessed IPV together
- ▶ Less likely to complete treatment
- ▶ More likely to recidivate
- ▶ More severe violence predictive of recidivism
- ▶ Therapy has an impact on recidivism if they go

Empathy Impairments in Intimate Partner Violence Perpetrators With Antisocial and Borderline Traits: A Key Factor in the Risk of Recidivism. (2016)

Romero-Martínez Á, Lila M, Moya-Albiol L.

- ▶ 144 IPV perpetrators (mean age = 41 years).
- ▶ **High antisocial and borderline personality traits in this sample were associated with a high risk of recidivism, these relationships being moderated by poor empathy skills.**
- ▶ Moreover, in IPV perpetrators with both antisocial and borderline personality traits, the risk of recidivism was higher than in those with only one of these traits.
- ▶ **importance of empathy deficits** and may help professionals to develop **specific intervention programs focusing on improving empathy skills in antisocial and borderline IPV perpetrators.**

Recidivism risk reduction assessment in batterer intervention programs: A key indicator for program efficacy evaluation (2014)

Marisol Lila, Amparo Oliverb, Alba Catalá-Miñanaa, and Raquel Conchella

- ▶ A significant gain in three intervention targets (responsibility assumption, perceived severity of intimate partner violence against women, and recidivism risk reduction) was found.
- ▶ **Recidivism risk reduction gain score was the best success indicator. It significantly predicted reconviction with the highest effect size.**
- ▶ **recidivism risk reduction was significantly predicted by pre-treatment offenders' anger control, impulsivity, social support, alcohol consumption, and offense seriousness.**
- ▶ Participants changed in the intervention targets analyzed and risk of recidivism reduction played a central role in the prediction of reconviction

Subtypes of intimate partner violent men and treatment outcome depending on anger profiles

Following completion of a cognitive-behavioral therapy program there was a significant reduction in intimate partner violence for both the under-controlled and the over-controlled anger subtypes, although the undercontrolled continue to present with more frequent use of psychological aggression and dominant and jealous tactics at both post-treatment and 6 months follow-up.

both the type of anger profile and therapy produced changes in anger control were differentially predictive of recidivism at 1, 3 and 5 years post treatment.

The establishment of different types of anger profiles in partner violent men represents an important research and clinical development given that it suggests that perpetrators with different profiles would benefit from different types of assessment and intervention

How batterer program participants avoid reassault

Edward Gondolf (2000) Violence Against Women



- ▶ Men recruited for a multisite batterer program evaluation were asked how they avoided violence at each 3-month follow-up interval over a 15-month period (n = 443), and later asked how their sense of women and being a man had changed (n = 120).
- ▶ **More than half (53%) of the men reported relying on interruption methods**, 19% on discussion, and 5% on respect of women at 3 months after intake. These percentages remained constant over the 15-month follow-up period.
- ▶ A fifth of the men reported positive changes in their attitudes toward women, and more than a third changed to a “great extent,” according to their female partners. Men in the longer programs were more likely to use discussion or respect methods and to have changed to a great extent.

Individual Versus Group Cognitive-Behavioral Therapy for Partner Violent Men: A Preliminary Randomized Trial (2017)

Christopher M. Murphy, Christopher I. Eckhardt, Judith M. Clifford, Adam D. Lamotte, and Laura A. Meis, *Journal of Interpersonal Violence*

- ▶ A randomized clinical trial tested the hypothesis that a flexible, case formulation-based, individual treatment approach integrating motivational interviewing strategies with cognitive-behavioral therapy (ICBT) versus standardized group cognitive-behavioral approach (GCBT) for perpetrators of intimate partner violence (IPV)
- ▶ contrary to the study hypothesis, GCBT produced consistently equivalent or greater benefits than ICBT.
- ▶ Participant self-reports revealed significant reductions in abusive behavior and injuries across conditions with no differential benefits between conditions.
- ▶ Victim partner reports revealed more favorable outcomes for group treatment, including a statistically significant difference in psychological aggression, and differences exceeding a medium effect size for physical assault, emotional abuse, and partner relationship adjustment.

Concluding remarks

- ▶ Considerable progress has been made in identifying dysfunctional internal mechanisms and targets of intervention that are relevant for some perpetrators but not others.
- ▶ There has been progress with respect to developing interventions that produce changes in some of these dysfunctional internal mechanisms: e.g: experiential avoidance, anger control, recidivism
- ▶ However, with one or two exceptions, once an intervention is developed it is applied as the new one size fits all panacea
- ▶ There is a continued need to match interventions with perpetrator characteristics and develop RCTs to assess differential outcome of matched interventions compared to one size fits all approaches and not just whether an intervention applied individually is more effective than applied in group.