

**THE PARTNER ABUSE SHORT TERM (PAST) GROUP
PROGRAM: AN INTERVENTION FOR MEN WHO
BATTER**

By

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in Partial Fulfillment of the Requirements
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Allan Hendrickson-Gracie

A Thesis/Practicum submitted to the Faculty of Graduate Studies of The University

of Manitoba in partial fulfillment of the requirements of the degree

of

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ABSTRACT

The Partner Abuse Short Term (PAST) program, revised in 1995, is a psycho-educational group treatment program for men who have been charged and convicted of a domestic violence crime. In the practicum, two 12-session closed groups were facilitated with male and female co-facilitators applying the PAST program material in groups for men on probation for domestic violence crimes in Winnipeg, Manitoba.

Fourteen of the 25 men who started the groups completed all twelve sessions. They reported that the most valuable part of the program was teaching them about the "warning signs" that they are escalating towards violence and how to use "time-outs" as a means to avoid a violent episode. They also reported that while physical abuse towards their partners decreased during treatment, the incidence of emotional and psychological abuse increased during the same period.

The practicum concludes that further research into the effectiveness of short-term treatment for batterers is required.

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CHAPTER ONE

INTRODUCTION

Rationale

There has been a dramatic increase in the number of family violence cases handled by Manitoba Probation Services since the formation of the Family Violence Unit in December 1992. There were approximately 1,600 adults on probation in Winnipeg for domestic violence crimes in 1995. Almost 90% of these were men.

The Partner Abuse Short Term (PAST) program was first developed in 1992 and was revised in 1995 to reflect changes in the understanding and delivery of services to men who batter. The primary objective of the PAST program is to ensure the safety of women, children, and men in domestic abuse situations. This is accomplished through helping men stop their violent behaviour towards their partners.

From this basis emerge the five service statements of the PAST program:

1. To assist the participant to understand that his acts of violence are a means of controlling the victim's actions, thoughts, and feelings.
2. To increase the participant's willingness to change his behaviour.
3. To increase the participant's understanding of the causes of his violent behaviour.
4. To provide the participant with practical information on how to change his abusive behaviour.
5. To encourage the participant to become accountable to those he has hurt through his use of violence.

Ellen Pence and Michael Paymar (1990) suggest that without intervention the cycle of violence generally escalates across time and is passed from one generation to the next.

Learning Goals

The practicum placement was designed to provide the student with the opportunity to participate in the delivery of an established domestic violence program. Both the literature review and the practicum placement were

considered to be of relevance to Social Work because of the prevalence of domestic violence in families and communities. The treatment model used in the practicum placement provides a framework for the Social Worker to approach domestic violence while considering the broader social or systemic context within which this occurs. The relationship between treatment of the individual and development of community support is introduced in the literature review and discussed in Chapter Four. The student's specific learning goals are outlined below:

1. To expand the student's theoretical knowledge of domestic violence.
2. To increase the student's competence at group facilitation.
3. To apply a theoretical model to practice by participating as a co-facilitator in the delivery of two PAST groups.
4. To gain clinical knowledge and feedback from experienced co-facilitators.

CHAPTER TWO

LITERATURE REVIEW

Introduction

"You are more likely to be physically assaulted, beaten, and killed in your own home at the hands of a loved one than any place else, or by anyone else in our society." (Gelles & Strauss, 1989)

From September 1996 to August 1997, 3250 men appeared on the court docket in Manitoba on charges of domestic violence. This was an increase of over 1000 men from the year before when 2124 men appeared in court on the same charges. It is no wonder that authors such as Klein, Campbell, Loser, and Ghez (1997) refer to domestic violence as an epidemic in their book, Ending Domestic Violence: Changing Public Perceptions/Halting the Epidemic.

The following review of the literature focuses on understanding men who abuse their intimate partners and the prevention and treatment programs available for these men. The literature review is divided into ten sections,

each of which is intended to build on the previous one in an attempt to develop a thorough overview of the issues related to domestic violence.

Section One presents an overview of the long history of legitimized violence against women. Many authors argue that the entire weight of the culture is behind men who batter their intimate partners. We must understand where we have come from in order to have a vision of where we are going.

Section Two explores the issues of defining domestic violence. Few authors deal with this directly and tend to use the terms domestic violence or abuse without clarifying their meanings. How we define domestic violence has a profound impact on what we perceive to be abusive and at whom this abuse is directed.

Section Three is concerned with the theoretical explanations of why men batter. This understanding has gone through an evolution over time. Current models are presented along with a critique of each.

Section Four introduces the Pro-feminist model of why men batter their intimate partners. This model forms the basis for most current treatment programs.

Section Five reviews Elaine Leeder's (1994) model of treatment for men who batter. She argues that we must, as a community, become involved with these issues and engage men who batter at all levels including family, community, legal, and governmental.

Section Six reviews Mary Russell's (1995) treatment model "Confronting Abuse Beliefs". Russell argues that without challenging abusive men's belief systems, sustained change over time is unlikely to occur. Russell's key concepts of the central self, the superior self, and the deserving self are the primary focus of the review.

Section Seven reviews the transition in the literature from attempts at profiling or characterizing men who batter to looking at the type of abuse and at whom it is directed.

Section Eight looks at basic models of prevention and why prevention is so critical in eradicating partner abuse.

Section Nine provides a brief overview of the outcome literature (a more thorough review of this area of the literature follows in the chapter on intervention outcomes in which the student's research findings are also presented).

The last section reviews nine treatment programs currently used in Canada and the United States. This includes the Partner Abuse Short Term (PAST) program currently in use by Manitoba Justice.

Historical Context

Violence against women has been part of everyday life since the beginning of recorded history. The first known written law that sanctions battering dates back to about 2500 B.C. This law proclaimed that the name of any woman who verbally abused her husband was to be engraved on a brick, which was then to be used to knock out her teeth (Macleod, 1980). During the Middle Ages, practices of burning women at the stake if they "nagged" or talked back to their husbands was practiced.

Perhaps the most well known law from 18th century Britain called the "rule of thumb" illustrated a belief system that to the present is very much a part of the batterer's way of thinking. The "rule of thumb" law stated that men could hit their wives, children, or apprentices as long as they used an instrument no thicker than their thumbs. Implied in this law was the belief that the men's actions were reasonable and in fact morally right as sanctioned by law. As the man, he has a responsibility to maintain control over his property, which was clearly defined as his wife, children, and apprentices (Burns, Meredith, & Paquette, 1991).

It was not until 1969 that a woman in Canada could divorce her husband on the grounds of cruelty. It comes as no surprise then that counselling for men who batter began slowly and cautiously in the late 1970's. By the mid-1980's batterer counselling had caught the attention of social workers, psychotherapists, and family therapists. During this early period, cognitive restructuring and behavioral management approaches dominated treatment programs (Gondolf, 1993a).

The late 1980's saw a surge in batterer counselling across Canada and the United States as a result of three significant developments. Firstly, court mandated counselling for batterers became more common as women's advocates put pressure on the court system to recognize violence against women as a legitimate concern. Secondly, many American states adopted a "zero- tolerance" policy, which required police officers to arrest in situations where there was probable cause. The victim was no longer required to press charges for an arrest to occur. (A zero-tolerance policy was adopted in Manitoba in 1983.) Finally, a more recent movement towards probation required that men who batter must attend counselling as part of their sentence (Ferguson & Sunde, 1996; Gondolf, 1993a).

Towards a Definition

Defining the terms "wife assault", "battering", "abuse", "violence", "family violence", and "domestic violence" has been the subject of controversy since work in the field began in the early 1970's. It is an important controversy, however, as terms can reflect implicit values or biases and can influence the way people view reality. The definition of these terms also impacts the way we deliver services and who we perceive to be our clients on both manifest and latent levels.

A number of writers in this field object to the terms "family violence" and "domestic violence". Stordeur and Stille (1989) argue that these terms obscure the fact that men are predominantly violent towards women and children, not the reverse. Further, there is an implicit blaming of the victims as contributors to violence on a level equal to that of men. Hence there is a shared responsibility for ending the violence.

Mullender (1996) argues that these terms do not reflect the extent of men's violence towards women. She argues that the word "domestic" is inaccurate within the context of men's violence towards women. For example, the word domestic implies some sort of co-habitation. This does not reflect the reality of many women who do not co-habitate but are the objects of men's violence. Nor does this adequately address the issue of women who attempt to leave relationships and continue to experience harassment and violence by their ex-partners. The word "violence" also inadequately describes men's "ill-treatment" of women, which can combine together into a pattern of physical violence, psychological terrorism, and sexual abuse.

For the most part, legal definitions have focused on violence as only assaultive acts, which lead to visible injury (Stordeur & Stille, 1989). Gelles (1980) notes that many mental health professionals use more exclusive definitions such as assaultive and non-assaultive acts, sexual abuse, and marital rape.

The National Research Council (1996) suggests that there is still little consensus on how to exactly define "violence" against women. Their research suggests that definitions should be thought of more broadly as "aggressive behaviors that adversely and disproportionately affect women". The National Research Council cites two more accurate definitions of "violence" in their 1993 report. First, from the Committee on Family Violence of the National Institute of Mental Health (1992), they define violence as "acts that are physically and emotionally harmful or that carry the potential to cause physical harm ... (and) may also include sexual coercion or assaults, physical intimidation, threats to kill or to harm, restraint of normal activities or freedom, and denial of access to resources". Second, from the Task Force on Male Violence Against Women of the American Psychological Association, they cite "physical, visual, verbal, or sexual acts that are experienced by a woman or a girl as a threat, invasion, or assault and

that have the effect of hurting her or degrading her and/or taking away her ability to control contact (intimate or otherwise) with another individual".

These definitions reflect the coercive nature of violence and the tactics that men use to maintain power and control over the women in their lives. Without a clear template for understanding and acknowledging the full range of coercive tactics used by men, service providers may unwittingly collude in blaming the victims and/or abdicating men's responsibility for their actions (Strodeur & Stille, 1989).

Theoretical Explanations

The theoretical explanation of why men batter has been debated since battering programs were established in the late 1970's. Adams (1988) reviewed five models for understanding battering behavior and their implications for service delivery.

The Insight Model is a traditional approach to understanding violence. While there are many variations within this framework it essentially suggests that certain intra-psychic factors give rise to violent behavior. These factors include poor impulse control, fear of abandonment,

dependency, underlying depression, and impaired ego functioning. The model follows that these intra-psychic problems have occurred as a result of some developmental trauma and lead the batterer to over-react to real or imagined threats in a violent manner. The goal of the insight model is to help the batterer to become more aware of how his past experiences have affected him; through this understanding he can then change his behavior in the present. As the batterer resolves past injuries, he will begin to feel better about himself and, accordingly, he will no longer have the need to abuse or diminish others.

Adams outlines several problems with this approach. He states that the therapist can collude with the batterer in placing responsibility for today's actions on some previous event rather than to assist him to take responsibility for his actions. He asserts that not all men who have experienced developmental trauma batter their wives or partners. Adams also states that the focus on helping the batterer develop stronger self-esteem can also deflect from the primary goal of batterer counselling, namely cessation of the violence. Finally, Adams states that this approach does not address the broader societal norms towards violence and the belief systems held by men who batter.

The Ventilation Model suggests that violence is a response to emotional repression. This approach was popular in the late 1960's and 1970's and focused on couples learning to "fight fairly" through the use of verbal outbursts, foam bats, and pillow punching. It was believed that through these means, the threat of physical aggression towards the other person would be reduced.

Adams argues that subsequent research has demonstrated that verbal aggression is, in fact, highly correlated with physical aggression but in the reverse. As well, he suggests that this model fails to acknowledge the cultural and gender influences that allow men to be violent and therefore leaves the underlying belief system unchallenged.

The Interaction Model of battering suggests that battering is not one partner attempting to control or dominate the other. Rather, it is the couple's ongoing communication deficits and the attempts of both partners to coerce the other that results in violence. Battering is seen as one aspect of an ongoing dysfunctional pattern of interaction, which is circular in nature. The focus of therapy is to help each of the partners to identify and change how they interact or contribute to the problem. In this model, the responsibility

for violence is shared between the partners. The victims are perceived as having contributed equally to their own abuse.

Adams cites several criticisms of this model including lack of appropriate responsibility for the violence on the batterer and reinforcement of a belief system that encourages violence if the batterer is "pushed too far". He also notes the model's failure to recognize and address the impact which violence has on every aspect of the couple's interaction. How can a couple even begin to change patterns of interaction if the woman is fearful of violent outbursts by her partner? Why would the man stop his violent behavior if he sees his partner as being at least 50% responsible for the violence? This model, rather than providing a template for healthy communication, continues to reinforce a belief system that enables the batterer's violence to continue.

The Cognitive-Behavioral and Psycho-Educational Models focus on violence as the primary issue in treatment. Violence is seen as a learned behavior that is self-reinforcing (social learning theory). It follows, then, that non-violence can also be learned and become self-reinforcing. The goal of treatment under this model is to identify the functional aspects of the

batterer's violent behavior (for example, to temporarily end an uncomfortable situation or to temporarily reduce stress or anxiety). It would then help him to understand how damaging and ultimately self-defeating the violence is. A group process is used to help challenge abusive thought patterns and to engage men in a series of skill building activities. These activities might include the use of "time out", anger logs, safety plans, warning sign logs, relaxation training, and interpersonal skill development.

Central to this approach is the understanding that only the batterer is responsible for the violence and for making the necessary changes. Adams suggests that programs using this model place different emphasis on the degree to which cultural norms towards violence and issues of power and control are addressed. This might vary from briefly mentioning these cultural norms to focusing several sessions on this issue.

The Profeminist Model

The Profeminist Model views battering as controlling behavior that serves to create and maintain an imbalance of power between the batterer and his victim. Because power and control are seen as fundamental issues, therapeutic interventions are provided which directly challenge the batterer's

attempts to control his partner through the use of physical force, verbal and nonverbal intimidation, and psychological abuse.

While this model uses many of the skill building tools of the cognitive-behavioral and psycho-educational models, it has the victim's safety as its primary concern. Early stages of intervention focus on how the victim's safety can be insured through the use of safety plans, restraining and vacate orders, further legal action, advocacy, and/or emergency shelter services. Throughout this model, challenges to the belief system (both micro and macro) are combined with skill building. The batterer is always responsible for his violent behavior.

Elaine Leeder

In her analysis of treating abuse in families, Leeder (1994) proposes a model of intervention that combines many aspects of the cognitive-behavioral, psycho-educational, and feminist models with significant additions. She argues that battering can only be fully addressed with a coordinated and unified treatment plan that incorporates these models. This would include conjoint and/or individual or group therapy, legal and family

involvement (including non-battered family members), and community involvement.

Leeder argues that the label of "victim" carries with it negative connotations and assumptions that often negate the strengths and coping skills of battered women. She suggests that, in fact, women are always seeking ways to modify or to end the abuse. It is this enormous strength within battered women that needs to be worked with to empower them to make their own changes. Learned helplessness develops in some women but only after many efforts for change have failed, according to Leeder.

Leeder states that very little work is being done to deal with domestic violence at the community and family levels. She argues that communities must become involved in the treatment of batterers and suggests that their lack of involvement actually sanctions domestic violence. She recommends that programming in which non-violent men in the community sponsor or mentor the batterer would help to provide "hands on" modeling for non-violence while building connections for the batterer within his community. This would also shift battering from the private to the public or community realm and force the broader community to share responsibility for protecting

its more vulnerable members. At the familial level, Leeder suggests that conjoint therapy and/or group treatment are also important as they provide a forum for role playing, feedback, and even direct confrontation related to the violence (this is only appropriate where safety issues have been addressed especially for anti-social and sociopathic batterers).

Throughout the therapeutic process, Leeder refers to safety issues and supports the use of legal, community, and other sanctions to ensure that women and children are safe. As well, she stresses that it be determined whether or not the woman actually wants the rehabilitation of the relationship or whether coercive factors are involved in her decision to remain with the batterer.

Mary Russell

Russell (1995) states that most current treatment models have been developed out of a deficit model of understanding of men's abusive behavior towards their intimate partners. The underlying assumption in these models is that abusive men are deficient in their ability to control their anger, express their needs assertively, expressing their emotions appropriately and sufficiently, and to positively value women. Russell argues that this

understanding of men's abusive behavior is incomplete in failing to explain why this behavior occurs predominantly at home and predominantly towards their intimate partners. As well, she states that abusive men do not vary significantly from non-abusive men in terms of their traditional attitudes towards women. For Russell, any type of sustained change must occur at the level of men's beliefs because their beliefs direct their thoughts, feelings, and behaviors.

Russell bases her model on her theory of abusive men's self-concepts and their perceptions of their partners. She describes the "central self", "superior self", and "deserving self" as three facets of this self-concept.

The central self is the primary theme in the belief system of abusive men. Russell suggests that it is commonly held that abusive men hold negative or hostile beliefs about women. However, she finds in her research that there is a virtual absence of consideration of women or at best fleeting thoughts that are quickly suppressed. The man is preoccupied with himself as an unhappy or wronged soul; everything and everyone else is secondary to his wants and needs. As a result, the abusive man does not see or perceive that his behavior has had any effect on his partner. When evidence of such

effects arises, the abusive man quickly disregards this information in order to maintain a view of himself as simply a wronged or misunderstood individual who has been pushed too far. Russell argues that this belief in the central self reflects the masculine ideal of autonomy and individuality, which in the extreme precludes consideration of others, namely the woman he is abusing.

The belief in the superior self rests on the assumption by abusive men that all relationships are hierarchical in nature. Male socialization reinforces this notion through male competitiveness and a belief that relationships are defined in terms of who is greater or lesser. However, inherent in any system based on inequality is the threat of rebellion by the "lesser party". Abusive men view any challenge to their superiority (for example, women not accepting their decisions unquestioningly) as just grounds for abusive behavior in an attempt to maintain domination over their partners. Based on this type of system, the abusive man perceives himself as having no other choice. To allow his partner to challenge him and/or change the balance of power within the relationship means that she could have domination over him. The abusive man must strive to maintain his position as the "greater" at any cost.

The deserving self is characterized by men's demands to be cared for and have their needs given priority. Caring, nurturing, supporting, and giving are viewed as a one-way process from the woman to the man. Abusive men believe that the women in their lives should provide whatever they need in order to counter the harsh everyday world. Within this context, the home becomes the man's sanctuary where his needs and only his needs are met. Anything that interferes with his needs being met is seen as grounds for anger and abuse.

Russell suggests that this notion of the deserving self extends to the abuser expecting a "forgive and forget" response by his partner simply because he has acknowledged his abusiveness. The idea that "I have dealt with my behavior so it is over" is a common theme for abusive men. They show little understanding and appreciation that their past behavior has a long term impact on their partners. In fact, Russell states that many men, after completing treatment, are quite resentful of their partner's "inability" to forgive and forget. This belief in the deserving self leads the abusive man back to the central theme of his belief system, "the central self". Unchallenged, this belief system fuels the cycle of violence.

It is from this primary understanding of the abusive man's belief system that Russell has developed a twelve-session treatment program, co-facilitated by male and female therapists. Russell argues that a group setting is the most appropriate milieu for treatment in that it creates numerous sources for input and feedback. It provides men with the opportunity to openly and honestly explore their beliefs about intimate relationships with other men whose experiences and relationships may bear some similarities to their own. It allows the co-facilitators to model respectful interaction between themselves, especially in the manner in which the male facilitator regards and interacts with his female counterpart. Edleson and Tolman (1992) also suggest that men derive particular benefits from their efforts to help other group members. Not only does providing such help reinforce the man's own sense of competence, but it reinforces his own change process as he verbalizes his new awareness.

Typology of Batterers

Early research into characteristics of batterers attempted to develop a profile of the batterer. These early profiles (Dutton, 1988) presented the batterer as an inexpressive, impulse-driven, traditional, and rigid personality with low self-esteem and frequent drug and alcohol problems. However, this

has been refuted in more recent articles. Gondolf (1993a) suggests that Dutton's research is based on limited samples and contradicts itself. Hamberger and Hastings (1991) document that while batterers in treatment have more personality and alcohol problems than non-batterers, they do not (as a group) substantially differ from the general population of men. Further, Hamberger and Hastings assert that personality inventories do not appear to distinguish batterers from other men with problems nor are they predictive of violence.

Gondolf (1993b) and Saunders (1992) have moved away from trying to characterize batterers as different from the general population of men experiencing problems. Their focus is on the formulation of a typology of batterers. In this typology, the batterer's violent behavior is viewed along a continuum of sporadic battering which is occurring in the familial home only, chronic battering which is occurring in the familial home only, anti-social battering which is occurring in the familial home and outside the home to non-family members, and sociopathic battering which occurs inside the familial home and outside the home to non-family members. They suggest that the severity and extent of battering is greatest amongst the latter two typologies. These groups of men are most likely to have more criminal

arrests as well as drug and alcohol problems. They are also more likely to be involved in a subculture of violence which impacts on their response to treatment. These groups are also at higher risk to drop out of treatment groups and to re-offend. The implications for identification, referral, service delivery, monitoring, and follow-up are far-reaching based on this research.

Prevention

"The primary prevention of battering requires a recognition that battering is fundamentally a social problem with roots in a clearly delineated set of social arrangements that mirror and generate specific cultural values and beliefs." (Tifft, 1993)

Hamby (1998) states that the number of prevention programs has increased in recent years. These programs have been developed on two levels. Primary programs have been developed for implementation at the community level. Secondary programs are offered only to high-risk individuals. While many of these programs are still unpublished and inaccessible, they represent important tools in addressing men's violence towards women.

Hamby advocates the use of primary level programs because she asserts that if cessation of men's violence towards women is to be achieved, we must address and reduce societal tolerance and acceptance of this violence. She suggests that professionals in this field must advocate for changes in attitudes that tolerate partner violence. Professionals must liaise with churches, workplaces, schools, and the media in order to increase public awareness and to develop a community response.

The Pennsylvania Coalition Against Partner Violence has published fifteen citizen action steps, seven of which are directed at the community in following Hamby's views on primary level prevention programs. These steps recommend that efforts to prevent violence start with basic values towards men and women in the home and must extend to schools, churches, community organizations and ultimately to the political system.

Tifft (1993) states that any prevention strategies must be both structural and economic in nature if they are to be successful. He argues that violence and the acceptance of violence permeates our culture in all spheres of interaction. Exploitation of individuals occurs through labour practices, social customs, the feminization of poverty, and in our social institutions. It

is these elements that ultimately lead to the occurrence of partner violence as they inform and shape our understanding of the world and, by extension, our behavior. Tiff's analysis is based on a belief that as a society we must move away from the current gender based patriarchal and hierarchical model towards an egalitarian model in which all individuals are valued regardless of gender or other characteristics.

The development of an early education model of prevention is indicated if we hope to move closer to an egalitarian model. Hamby (1998) reviewed several programs for teens at the junior and high school levels. These programs attempted to educate teens about violent behavior in order to reduce its incidence in this population group. These programs looked at the definition of violence and examined violent relationships, myths about violence, societal messages about gender roles, power, and violence. They used brainstorming, role-playing, and peer counselling as means to involve the teens in examining these issues. One of these programs, The Minnesota School Curriculum Project (1991), focused training on teachers rather than students so that more students could be reached via their teachers.

Secondary level programs which look at the individual and the family are the focus in the prevention of violence. Our tolerance of various forms of familial violence plays a crucial role in teaching people to accept partner violence, according to Tifft (1993). He states that corporal punishment often begins in infancy before speech is developed. Children learn that those who love and care most deeply about them use physical violence or the threat of it as a way to exercise power, discipline, and control over them. The implicit lessons are that the use of force or physical violence is an acceptable method for "getting one's way" and that "might makes right". The normative response to conflict then becomes verbal attacks, withdrawal, anger, and violence rather than negotiation, apology, accommodation, understanding, compromise, and change. Tifft (1993) suggests that his research, along with others, demonstrates a linkage between this type of parenting and some men's use of violence in their intimate relationships. As noted earlier, Tifft believes that these connections and lessons are further legitimized by our social institutions and are expanded to legitimized international violence. From Tifft's analysis, it follows that parenting must be re-examined as a most basic effort to prevent violence.

Finally, Hamby (1998) reviews work being done with couples in which the man has engaged in psychological aggression (but not physical violence) prior to marriage. Several researchers, including Murphy and O'Leary (1989) and Hamby, Strauss, and Sugarman (1996), note that these men are at increased risk for violence in the early months of marriage. They suggest that teaching communication and conflict resolution skills early in the relationship can help to prevent future violence. This approach uses basic cognitive-behavioral techniques to teach skills as opposed to specific components of a partner abuse program.

Outcome

Outcome literature related to the treatment of batterers is currently quite limited. Burns, Meredith, and Paquette (1991) reviewed 16 studies (all of the published outcome literature to that date). While administering pre- and post-group testing to men who had completed the program was relatively straightforward, almost all groups experienced high dropout rates, which markedly reduced sample size. Several programs made contact with program completers and non-completers to administer the post-group test in order to raise sample size.

Pre- and post-group testing was also administered to the batterer's partner in several of the programs reviewed by Burns, Meredith, and Paquette (1991) as well as the in the subsequent study by Davies et al (1995). Davies, Holmes, Lundy, &Urquhart (1995) recommend that a female interviewer administer the pre- and post- group testing to the batterers' partners but do not indicate the impact of this on outcome.

Gondolf (1999) suggests that there are several issues to be considered when reviewing the outcome studies completed to this time. Many of the studies have small sample sizes, are done in unique locales, and have varying follow-up periods. As well, many of the studies use different measurement instrument and methodologies in their approaches. Gondolf also suggests that many of the studies tended to neglect the broader systems of court procedures, batterer counselling, and additional services that comprise batterer intervention in its totality. As a result, outcomes may be attributed to a particular program when in fact the outcome may be related to the intervention system as a whole rather than just the particular program.

Gondolf's own outcome study looked at four programs in Pittsburgh, Denver, Dallas, and Houston with a total sample of 840 men (210 per site).

These programs utilized a cognitive-behavioural model and had been in operation for at least five years. They did differ in terms of their range of components however.

The Pittsburgh program relied on pre-trial referrals, required three months of weekly sessions, and made referrals for court identified substance abuse or mental health issues. The Dallas program used post-conviction referrals. It consisted of three months of discussion-oriented sessions with individual assessments, individual counselling, and women's groups to supplement the batterer group sessions. The Houston program was based on a post-conviction, 6- month didactic program with efforts to contact and offer support groups to the battered women. Referrals were also made for the batterers to substance abuse programs. The Denver program represented the most comprehensive combination of components. It relied on a mandatory sentencing for counseling as part of the conviction, nine months of weekly group counselling, extensive clinical evaluation, in-house alcohol treatment, and individual psychotherapy for mental health issues.

Gondolf's findings are outlined below:

- Severe re-assault and repeated assault rates in the two 3-month programs were twice as high as in the 9-month program (12% in Denver versus 23% in Pittsburgh and 26% in Dallas).
- General re-assault rates were relatively equal across the four sites.
- Alcohol treatment and its implications for program outcome needs further investigation, given Gondolf's findings related to its presence during re-assaults.
- The shorter wait for programming, between the 3-month pre-trial referral process and the 9-month post-convictions referral, may offset some of the consequences of the shorter program.
- Gondolf suggests that in any outcome research, the distinction between statistical significance and clinical significance is extremely important for victims of domestic abuse. While 8% variance from one program to another may not be statistically significant, it has very real implications for the victims at those two sites.

Program Review

The student reviewed 9 programs, including the PAST group program used in Manitoba Probation Services. All of the programs shared a definition

of violence that included physical, sexual, and psychological violence. They also all included cognitive- behavioral and psycho-educational components. Excepting PAST which uses self-talk work sheets, all programs used "time-out", personal plans for non-violence, warning signs, and anger logs. A common theme in the nine programs was that violence is a tool for power and control. However, the extent to which this was emphasized in the programs did vary significantly. For example, the Duluth program (1990) emphasizes this theme as the basis for its twenty-four sessions. The Learning to Live Without Violence program (1989), which is more of a self-help program and designed as a workbook for violent men, only mentions power and control briefly in the introduction and then focuses on skill building and psycho-educational tools for cessation of violence.

Challenges to the belief system which supports violence against women, children, and other men is also a common theme in all of the programs reviewed. Again, the degree to which this issue is addressed ranges from the entire program focusing on the batterer's belief system (Confronting Abusive Beliefs, 1990) to a brief mention in Learning to Live Without Violence (1989). Several programs including those developed in

Duluth (1990), Colorado (1993), Minneapolis (1990), and Toronto (1987) challenge the batterer's belief system throughout the entire program.

The length of programming or number of sessions also ranges across the programs. While PAST is designed to be a short-term program, the twelve sessions can be delivered in a number of combinations including once per week for twelve weeks, two sessions per day (one day per week) for six weeks, or two sessions per day in a 6-day block. The Duluth (1990) program runs for twenty-four weeks. Proponents of this program would argue that it is only across time that the defense mechanisms and denial systems of the batterer can be challenged. As well, they argue that the batterer needs time to integrate and practice what he is learning. The Amend program (1993) delivers a 24-week program with extensive follow-up. This program views treatment for the batterer as a one to five year process.

The most significant difference in the programs is their involvement of the community in containment of the batterer and the degree to which the safety of the batterer's partner is given attention. Of the programs reviewed, the Duluth model is the most comprehensive in both respects. In this model, nine agencies came together under the umbrella of the Domestic Abuse

Intervention Project (DAIP) to provide a unified community response to domestic violence. While most of the programs allude to the need for such a unified program, few articulate the theoretical basis that would support such a far-reaching program model. As well, none of these programs address the gap between what they acknowledge is required to ensure safety and what they have actually incorporated into the program.

Several important issues in the treatment of men who batter their intimate partners emerged from the literature review and led the student to selecting the PAST program for the practicum. Russel (1995) and Leeder (1994) argued that one of the most critical components in treatment is to challenge abusive men's belief systems. The PAST program devotes Session #10 (Self-talk) and Session #11 (Personal beliefs and self-talk) to these issues. Several of the programs identified in the literature review indicate the need for "tools" for abusive men to use if they are going to stop being abusive (Currie 1987, Lindsey, McBride, & Platt, 1993, Pence & Paymar, 1990, Rusinoff, 1990). The PAST program has sessions focusing on warning signs (Session #2) and the use of time-outs (Session #3). It is noted throughout the literature review that men learn to be violent and that they can also learn not to use violence to express themselves. The PAST

program, as a whole, reflects this theme and devotes Session#5 (the cycle of violence) and Session #7 (socialization) to it. Finally, the literature clearly states that men are responsible for their violent behaviour. The PAST program articulates this understanding in its five service statements (noted previously).

CHAPTER THREE

INTERVENTION

Clients:

The client base for the PAST program is drawn from the caseloads of Manitoba Probation Services. All clients are men who have been charged and convicted with a domestic violence offence under The Criminal Code of Canada. As part of the court deposition, they have been mandated to attend, participate, and complete domestic violence programming.

- The clients were men between the ages of 18 and 66.
- The ethnic backgrounds of the clients included Aboriginal, Metis, European, black, and white. (It is noted that Manitoba Probation Services does offer ethnic sensitive groups, including Aboriginal, multi-cultural and cross-cultural; clients are referred to these at their request. Those who do not request these groups are referred to the PAST program.)
- Living arrangements for clients ranged from rooming house accommodation, temporarily sharing with friends or extended family,

apartment living, and living with the victim. Most clients who did not live with the victims had no contact orders preventing them from this. Only one client did not live with the victim because he felt that this was an "unhealthy relationship".

- A range of socio-economic groups was represented, from income assistance to self-employment. The predominant socio-economic group was men on income assistance and the working poor. Approximately 50% of the clients were working when the groups started.
- The educational background of the clients was diverse and ranged from incomplete high school to completion of an undergraduate degree from university. Some clients had literacy issues such as poor reading comprehension, poor writing skills, and English as a Second Language. (These clients' files had previously been flagged by their Probation Officers so that assistance would be provided to them during the groups if needed.)
- One (1) client completed an undergraduate degree at University.
- 56% of clients reported having been charged and/or convicted of a criminal offence other than domestic violence.

- 50% of the clients reported that they were using alcohol and/or drugs at the time of their violent episodes.
- 36% of clients reported that they felt they alcohol or drug problems.
- 40% of clients reported that alcohol was a problem in their families of origin.
- 1 client reported that he had been hospitalized for mental health issues.
- 1 client reported suicidal ideation within the past three months.
- 20% of clients had attempted suicide in the past.
- 32% of clients reported that they had witnessed their fathers' violence towards their mothers.
- 46% of clients had been hit by one of their parents.
- Only 1 client reported being sexually abused as a child.
- 40% of the clients reported that they had physically abused their partners within the last year; 1 of these required medical attention for her injuries. There was a significant range of physical assault, from slapping to broken bones and noses.

While all clients had been charged and convicted with a domestic violence crime, the nature of the violent episode ranged from an open handed slap/hit to a severe beating, which required medical attention. None

of the clients had been charged or convicted of murder of an intimate partner. Clients reported a 6-month to 2-year waiting period for group treatment.

Setting:

The setting for both groups was the group room at Manitoba Probation Services at 470 Notre Dame. This room was directly accessible from the street and was not identified as part of Probation Services. The room was large and serviceable. Coffee was available throughout the day. There was one washroom available for clients. Chairs were organized in a semi-circle with the co-facilitators at the front. The room contained flip charts and audio-visual equipment that were used by the co-facilitators during all of the sessions.

Personnel:

A co-facilitation model was used for both groups. Along with the student, the co-facilitators were a female therapist who had previous experience in group work and domestic violence, a male staff person from Manitoba Probation Services who had extensive experience in developing and facilitating domestic violence groups. He had also participated in

training the facilitators for the PAST program. The same co-facilitators participated in both practicum groups.

Procedures:

The PAST program consists of twelve distinct sessions (of two hours each or twenty-four hours in total) that can be delivered in various formats.

The two formats used for the purposes of this practicum included:

1. Four 6-hour sessions on consecutive Mondays, from 9:00 a.m. to 4:00 p.m. with a 1-hour lunch break and two 15-minute coffee breaks.
2. Eight 3-hour sessions, on consecutive Tuesdays and Thursdays, from 6:00 p.m. to 9:00 p.m. with one 15-minute coffee break.

Student reflections:

The following is the student's reflections on the two 12-session groups that were conducted for the practicum. The objectives of each session, as stated in the PAST program manual, are outlined to provide the context within which the co-facilitators delivered the material. This is followed by the student's own reflections on his experience within the group.

Session #1: Partner Abuse Program Introduction

Objectives:

- Introduction of facilitators and participants
- Title
- Learn rationale and philosophy of program
- Identify individual goals for program and concerns
- Establish ground rules
- Understand confidentiality guidelines
- Understand housekeeping details
- Participation contract
- Program limitations
- Learn definition of Partner Abuse
- Learn definition of Power/Control and its relation to violence.

Reflections:

Session #1 of both groups was remarkable similar in the difficulty of the clients to grasp the concept of choice and to take responsibility for their actions or violent behaviour. They grudgingly stated that they were attending the program because they were "court ordered". They felt that

they had no choice in attending and noted that their Probation Officers advised them that they must attend or risk breaching their probation orders.

In response to these perceptions, the student reflected that approximately 70% of the clients referred to the program actually chose to attend the program and another 30% did not. This provided the first opportunity to challenge the clients' belief systems related to their ability to make choices. Of interest to the student was how resistant the clients were to the notion that they had choices or control over what they do. A second point of interest was that some of the clients attempted to engage the student in a power struggle at this point over the issue of data collection. This occurred in two ways. First, some clients refused to complete any of the forms, stating that any information that they shared would be used against them. Second, they asked questions which were not at all related to the program and then challenged the student on his knowledge of the group content. While only four clients in both groups engaged in this behaviour, the impact on the groups was significant. In both groups, the tone of the group changed immediately with the clients becoming louder, more animated, and moving around the room.

The student responded to this behaviour by providing the clients with a choice regarding their participation in data collection, noting that their refusal to participate would not impact on their participation in the groups. At this point, three of the four clients did agree to complete the questionnaires. The fourth stated that he wanted to take it to his lawyer to "look it over"; he did take the package home and returned it, completed and signed, at the next group session.

In this first session, the introduction of the context in which partner abuse occurs assisted the clients to take their actions out of the range of generalized violence and into the realm of their intimate relationships. This served to introduce the concept of power and control over another human being. The focus remained on the clients themselves and their behaviour or the "choices they make".

The clients generally lacked empathy for their victims and failed to see a connection between their behaviour and consequences such as criminal charges, loss of access to their children, low self-esteem, and loss of respect by others. Rather, these clients saw themselves as victims of their partners, the police, lawyers, courts, zero tolerance legislation, and Probation

Services. They also attempted to rationalize, minimize, and justify their behaviour to themselves, stating: "If she just hadn't pushed me.", "I just hit her once.", "She hit me first.", "What am I supposed to do?" and "I shouldn't be here. I'm not a violent guy.". Only two men did not engage in this type of thinking and recognized that their behaviour did harm their partners and children. This acknowledgement was extremely powerful in that these clients challenged the status quo within the group and therefore the belief system held by most of the other clients. It also reinforced the co-facilitators' own remarks and challenges to the perceptions of the clients.

A critical learning component for the student in this session related to the clients' need for control over the group process. In the first group, the clients made multiple attempts to control the group process and it appeared that the co-facilitators were at risk of losing control of the group at this point. During the second group, the student responded to the clients' disruptive behaviour by stating that they had to make a choice regarding whether they would participate in the group, leave, or stay and be disruptive. The student also asked specific clients what they were attempting to accomplish by being disruptive in the group. While none of the clients were prepared to respond to this, it did provide an opportunity for the student to

make a direct link between this behaviour and the need for control (that is, refusing to participate and being disruptive as attempts to control the group process). This also changed the overall tone of the group as the clients recognized that this behaviour would not be tolerated yet would be dealt with in a non-punitive, non-shaming way.

Session #2: Personal Plans for Non-violence (Warning Signs)

Objectives:

- To learn what a personal plan for non-violence is.
- To learn about warning signs of violence and to look at different types of warning signs.
- To begin to be aware of one's own warning signs.

Reflections:

Session #2 focused on assisting individual clients to develop insight into their own warning signs leading up to violent behaviour so that they can learn to self-monitor and ultimately remove themselves from a situation before they choose abusive or violent. Five warning signs were explored: situations, behaviours, body signs, feelings, and thoughts and mental images.

The process of working through these warning signs was intended to take each client deeper into his own understanding of himself.

The initial process of working through the five warning signs was done as a group activity. Almost all of the clients noted similar situations that were problematic in their relationships. These included money, children, sex, friendships, alcohol, and drugs. They also shared many of the same behavioural precursors including slamming doors or objects, drinking more alcohol, smoking more cigarettes, yelling, or swearing.

In reviewing body signs, the clients began to look at what is happening for them physiologically as they begin to escalate. Most of the clients were able to provide examples of body signs when they were ready to explode noting feelings of "blood boiling", "heat rising", and "being out of breath". However, they struggled with what occurred in them before they reached these states. They each relied on feedback from the other clients to come to some understanding of this process of escalation.

Dealing with emotions also presented difficulty to most of the clients. "Anger", "rage", and "pissed off" were consistently among the first

emotions noted by the clients. Again, the assistance of the group was most effective in helping each client to explore what was behind his anger. Of interest was that none of the clients had any script for expressing hurt in contrast to that which they all seemed to have for expressing anger. The two emotions tended to be confused in their experience. In general, the broad expressions for many of the clients' emotions became violence, abuse, or sexual activity. Very few of the clients saw any other type of communication as an option to expressing their emotions.

The area of mental images was the most difficult for the clients in both groups. The notion of self-talk, or what we say in our heads, was introduced to the group at this point. Most of the clients did not perceive themselves as having any self-talk prior to a violent episode and struggled with this concept. They only began to grasp this when the community co-facilitator shared anecdotes or "stories" from groups that he had previously facilitated. Of particular value to the clients were the questions: "What do you say to yourself that lets you cross the line and be violent? What gives you permission to be violent?" These questions produced a flood of negative self-talk that each of the clients regularly used to give themselves permission to be violent.

Session #2 concluded with each of the clients completing "My warning signs of violence" on a worksheet that was later handed in to the facilitators. The co-facilitators reviewed these worksheets and provided written comments and suggestions for the clients to integrate into their plans. This also provided the co-facilitators with an opportunity to monitor the progress being made by the clients in the group as well as their areas of weakness, which would later be addressed.

Session #2 was divided into halves in each of the practicum groups so that the student would have the opportunity to deliver all of the components of this exercise in one group or the other. This increased the student's knowledge of the program material, his group facilitation skills, and his understanding of group dynamics. In particular, the student became more skilled in drawing out the opinions and reflections of clients, through the use of probing questions, so that he was better able to assist them to integrate the program material in subsequent sessions. It also increased the student's rapport with the clients.

Session #3: Time Outs

Objectives:

- To learn what a “time out” is.
- To develop an individual “time out” plan and include it in one’s personal plan for non-violence

Reflections:

Session #3 was a very complex session as a result of the clients’ difficulty understanding why and when they should use “time-outs”. While developing a “time-out” plan was quite straightforward for the clients, they encountered significant difficulty with how and when to use it. This seemed to reflect their underlying difficulty with changing their belief systems concerning violence. Their struggle brought to mind Mary Russell’s notion of challenging men’s belief systems. One of Russell’s (1995) basic premises is that if men don’t believe that what they are doing is wrong, they will not change their behaviour.

The co-facilitators used a portion of this session to challenge the clients’ belief systems and to suggest that violence cannot and should not ever be used as a means to resolve conflict or unwanted feelings. This was

regarded as a necessary means to assist the clients to develop "time out" plans and to understand how to use them in their plans for non-violence. The student used a situation from a client's experience to explore how this client's beliefs prevented him from using his "time-out" plan. In this case, the client became agitated when he thought that his wife was flirtatious with a man at the bar. The client saw that his only option was to act out his feelings on his wife or on the male involved. He chose to become violent towards his wife because he felt that it was his right to punish her for her inappropriate behaviour. He saw no need for the use of his "time-out" plan because he was justified in his actions. The group was able to see how this client's belief systems resulted in his violent behaviour and his resultant criminal charge.

Session #3 was very useful in making the student aware of the clients' level of isolation from supports that would allow them time and space to calm down to avoid violence. Several of the clients were unable to provide the name of someone positive that they could call to help de-escalate them. For many clients, the only options were calling Klinik or the Booth Centre. Many of the clients did not have an alternative place to stay if they remained too escalated to return home. At this point, focusing on the development of

options or resources for using their “time out” plans was useful in assisting the clients to develop their problem-solving skills. It was also an unexpected means to strengthen group cohesion.

Session #3 was an important learning tool for the student in that it highlighted the clients’ need to have the session material applied to their own lives. In the post-group debriefing session, the student raised the issue of how the clients learn. It appeared to the co-facilitators that the clients were experiential learners and that they could not understand material presented in an abstract form. This raised the student’s awareness of the clients’ learning styles and he paid closer attention to linking their comments to the program material in the subsequent session. This was operationalized by the student using “teachable moments” to reinforce program content in terms of clients’ actual experiences and beliefs. This endeavour, unfortunately, was constrained by the time limits of the program.

Session #4: Types of Abuse

Objectives:

- To define and recognize 10 types of abuse.
- To learn what types of abuse apply to them.

Reflections:

The objective of Session #4 is to assist the clients to reflect on the types of abuse they have used with their partners. Three categories of abuse - physical, sexual, and psychological - are written on the flip chart. The group is encouraged to generate different behaviours that would fit into each category. This process was very easy for the clients in both groups when they focused on the different types of abuse in a third person mode. None of the clients actually acknowledged that they, themselves, had been involved in any type of abusive behaviour at that point but made comments such as: "I've heard that guys do this" or "a friend of mine did this".

The detachment with which the clients regarded abusive behaviour only started to change as the student introduced video vignettes as a means to assist them to link the behaviours on the video with their own experience. The clients who made this link and shared their own experiences with the group became more involved in the discussion and proceeded to look for more ways to apply the program content to their own lives. Many of the clients seemed to be relieved that they were able to share some of their experiences with others. It appeared to the student that they had shared their "secret" and could move slightly ahead in terms of integrating the material

presented in the session. Interestingly, these clients did not find that the subsequent sessions were easier. Rather, they seemed to struggle more with how difficult it was to see themselves as abusive and how difficult it was to stop using old behaviours. This small group appeared to be genuine in their desire for change.

The student found that Session #4 illuminated the clients' need to distance themselves from their violent and abusive behaviour. They struggled with the student's attempts to assist them to personalize the program material and begin to recognize its impact on their partners. They were only able to achieve this when the student asked them to compare their own behaviour with that of the men in the vignettes. They were able to acknowledge that they had also been abusive towards their partners in some of the ways that they saw in the vignettes. This reinforced the student's earlier observations about the clients' learning styles and their need to relate program material to their own lives in a concrete way.

Session #5: Cycle of Violence

Objective:

- To understand the cycle of violence and how each phase of the cycle applies to them

Reflections:

Session #5 was extremely important in assisting the clients to begin to see that there is a cycle to their violent outbursts (tension-building phase, violent outbursts, apologetic phase). Many of the clients had commented that their violent outbursts occurred out of nowhere and that they felt relatively calm until a precipitating factor "set them off". They, in turn, found it very difficult to see how they had consciously escalated towards their violent outbursts.

In the first group, Session #5 was delivered in a lecture format with the co-facilitators exploring the content of each phase in this cycle, as outlined in the program manual. The clients were then given a worksheet that questioned them about their own experience, or which linked the theory with their own experience. This was very difficult for the clients especially as it related to the tension building and apologetic phases of the cycle of violence.

In the second group, the student approached this topic in a slightly different manner. He asked for volunteers to share their stories about the events surrounding their charges. Of the numerous volunteers to do this, one client was chosen to recount the events leading to his charges. John (not his real name) shared that he had come home from work and his wife, Carol, had not cleaned the house or made supper. The children, aged 3, 2, and newborn, were very loud and the older two were running around the house. It was John's opinion that since Carol does not work outside the home, she had ample time to clean the house, cook the meals, and look after the children. When John began to yell at Carol, she responded by yelling back. In no time, the yelling escalated to screaming. John began to accuse Carol of being lazy and good for nothing. She responded with her own name-calling and John hit her with an open hand. A neighbour called the police and John was arrested when they attended.

John initially stated that Carol had really "pissed me off" and that she knew how to "push my buttons" and brought on this violence by her behaviour towards him. He appeared to feel like a victim in this situation rather than seeing that he was responsible for his violence towards his wife. While many of the clients shared his feelings and sympathized with John,

others recognized that their partners were not responsible for pushing them into violent episodes. The student used the insights of these few clients to demonstrate to the larger group that while John faced many stressors, he also made a choice to use violence when he did.

The group was asked to review the events leading up to John's violent episode. When asked what kind of day he had at work, John stated that his entire week was bad. His boss had been riding him all week and there was far more work than he could finish in each day. John felt unable to say anything to his boss for fear that he would be fired. As a result he kept his feelings related to work problems bottled up inside. One day after work, John found his vehicle with two slashed tires. He had to pay to get the car towed and had to replace the tires for another \$100.00. Again, John kept all these feelings bottled up inside. It was noted that John and Carol also had marital problems that were intensified after the birth of their third child.

As each of these tension-building events was identified in the cycle of violence (on the flipchart), John and the other clients could see how John's tension was building during the week. John was also able to see how much closer to the violent episode he had gotten by the time he got home from

work on the Friday of that week. Along with this insight, John realized that he needed to take responsibility for handling his work stressors in a more effective manner. John gained some insight into how he chose to act out his frustration and violent feelings. It appeared to him that he had “saved” it up and then acted it out against Carol when the opportunity arose. This exercise was useful for both John and the other clients who were able to understand that they ultimately made choices regarding their behaviour.

Session #5 was particularly helpful to the student in recognizing the dynamics within the group, especially within the second group. It was clear that John had emerged as one of the group leaders, both in his ability to share and in his willingness to look at his own behaviour. This may have prompted other clients to share their own experiences in subsequent sessions. The student was also able to use John’s experience to link the theory on the cycle of violence with a real life situation, which increased the clients’ understanding of this concept.

Session #6: Myths and Facts About Partner Abuse

Objective:

- To learn myths and facts about battering

Reflections:

Session #6 was implemented differently in the two groups in order to determine whether there was a more effective way to assist the clients to integrate the material. In the first group, the co-facilitators presented the ten myths and facts related to battering. Following this, each client was handed a worksheet that questioned his beliefs about partner abuse or his own ideas related to each myth and fact. In the second group, the clients were divided into three smaller sub-groups, each of which was assigned three questions to work through. The last question (#10) was left for the larger group to discuss when it convened following the small group exercise. In selecting the three sub-groups, careful consideration was given to literacy issues, individual strengths, and ethnic mix. The co-facilitators were available to the sub-groups for consultation or clarification of questions.

It was the student's experience that the particular format did not impact significantly on the quality or content of the material generated by the clients

in the groups. However, it did appear that participating in the smaller sub-groups provided some of the less vocal clients with a greater opportunity to share their ideas and experiences.

The responses of the clients to questions on the worksheets provided insight into their beliefs about abuse as well as an opportunity for the student to challenge these beliefs. The questions are reviewed below to illustrate this process.

Question #1: Battering is a private matter. No one should disrupt family sanctity. “A man’s home is his castle.”

The clients in both groups generally agreed that this myth was false. In fact, one client in the second group suggested that if no one intervenes, the cycle will never be broken but will go on and on. (This client had previously started another PAST program but dropped out after Session 10 and therefore had to repeat it.) Other comments suggested that viewing “a man’s house as his castle” is a traditional belief that was held by clients’ fathers but was no longer applicable. Further, the clients suggested that if

they held on to this belief it would ultimately get them into trouble with the law. They were all speaking from experience.

Question #2: Women “ask for it”. They drive men to violence.

Both groups struggled with this question. While the majority of the clients responded with “false”, there was a vocal minority who suggested that while women don’t “ask for it”, they certainly do drive men to violence by the way they behave and their inability to know “when to leave things alone”. This relates to John’s comment in Session #5... “She knows how to push my buttons”. It was at this point that the clients began to challenge each other’s belief systems.

This exercise was useful to the student in providing insight into each of the client’s belief systems, both those who ascribed to the myths and those who challenged them. It is noted that in the post-group discussion, the co-facilitator from Probation Services stated that in his experience many more of the clients than declared themselves would agree that women “ask for it”.

Question #3: Partner abuse only happens amongst poor people.

Both groups agreed that violence occurs across all socio-economic boundaries. One man's comment summed up the group discussion: "Rich guys do it too; they just don't get caught or they buy their way out".

Question #4: If the man is violent when he is drunk, it's not abuse.

The PAST program suggests that 40% to 60% of abuse situations involve alcohol. In the two groups in which the student was involved, at least 50% of the clients viewed alcohol as a casual factor in their violent episodes. The level of alcohol use ranged from just a few drinks to some of the clients reporting that they were so drunk that they didn't remember the event. They reported that they were only aware of what they did as a result of their partners' descriptions of the events. The uniting factor for this group of clients was that they didn't view themselves as violent men but rather as victims of alcohol abuse. If they didn't drink, they weren't violent.

At this point, the student asked these clients to look at what they were like when they were not drinking. How did they treat their partners then? Did they use violence or abuse at times when they were not drinking? Several of these clients described "less severe" incidents of violence when

alcohol was not involved. The "less severe incidents" consisted of verbal abuse often with sexual content as well as the use of threats and intimidation. This process helped this group of clients to see their violence as independent of their alcohol use.

Question #5: The abused woman shouldn't take the children away from their father.

This question generated a wide range of discussion amongst both groups of clients. Many of the clients had a "no-contact" order related to their partners and their children. As a result, they were either unable to see their children or they had visits supervised by Child and Family Services. This group of clients felt strongly that their partners should not have taken the children away from them. They also assured the group that they would never abuse their children; according to one client, "that is sick".

Other clients challenged this belief, stating that the abuse and violence would ultimately end up directed at their children. At least three of the clients in each of the groups suggested that children would not feel safe if they had witnessed violence in their homes. Both groups seemed to agree

that if men attended a program such as PAST, they should be allowed to see their children regardless of the current status of their relationship.

Question #6: The woman has to lay charges against her abuser.

Both groups had general knowledge related to the zero tolerance legislation. Group discussion related to this question quickly focused on zero tolerance and several of the clients articulated that they had been wronged by this legislation. This shifted the mood of the group very quickly to one of anger and hostility towards the “system”. The co-facilitators had to refocus the discussion away from the relative merits of zero tolerance and the client’s individual experiences to the more global reality that, as a province, we now consider partner abuse to be a crime.

Question #7: The children don’t know that the abuse is going on.

Both groups agreed that the children do know what is going on in their homes. One client commented that his child, who was under one year of age, could sense the tension between him and his wife. Another client, Barry (not his real name), commented that he grew up in a house where

there was both verbal and physical abuse directed at his mother. This abuse spilled over to the children when his father, for example, beat him with a hockey stick; his siblings were also physically and verbally abused. As Barry shared his story, it was very clear that these were not isolated events in his family life. In fact, Barry and his siblings were quite aware of the cycle of violence in their home. They all knew when their father was in a "bad mood" and they stayed out of his way, "walking on egg shells" so he wouldn't get mad. Despite their best efforts, things would escalate and a violent episode would eventually occur (usually on a weekly basis). Afterwards, his father would be "nicer" for a little while but the tension started within another day or two.

For Barry, recounting this experience resulted in a flash of insight as he realized that he was behaving in his own family in the same manner as his father had when he was a child. Barry's story was laden with emotion and, at several points, Barry had to stop and compose himself. The group was also affected by Barry's story as the clients were quiet throughout the entire story and then rallied around Barry in a show of support. Several of the clients acknowledged that they too had grown up in abusive homes. All agreed that it was wrong for their fathers to abuse their mothers and them.

This provided the student with an opportunity to sensitively suggest that these clients had the opportunity to interrupt this generational cycle of violence and to provide their children with a different example of how men should behave.

Question #8: Abusers who say they are sorry will never do it again.

All of the clients personalized this question in their responses. One group of clients felt that, in fact, they would not be physically abusive again. They stated that they had never been violent towards their partners prior to or after the incidents with which they had been charged. This group viewed their violent behaviour as isolated either to the events surrounding the incident (stressors) or related to their partner(s) with whom they are no longer involved. Many of these clients continue to view their partner(s) as the cause of their abusive behaviour. A smaller group of clients felt that they would not be abusive again because they were attending the PAST program. These clients felt that they would learn skills that would help them to avoid violent behaviour in the future. A third group felt that they were not abusive to begin with and there was really nothing to apologize for or to

avoid in the future. A final group agreed that, without intervention, things would remain the same.

Question #9: Abuse relates only to the physical act of beating.

This question or myth relates back to Session #4 in which five types of abuse were described. In response to this statement, the group explored different types of abuse. The clients in both groups were able to identify that abuse could take other forms than physical assault. Several clients felt that verbal abuse was equally as harmful to victims as was physical violence. Few of the clients were able to personalize these behaviours.

Question #10: If it was that bad, women would leave

Most of the clients in both groups believed this myth and did not have an understanding of the barriers that keep women in abusive relationships. Many clients suggested that, in fact, it is the woman's own fault for staying in the relationship. They believed that she is also responsible for the abuse because she stays. Working through the reasons why women stay was very important in helping the group to begin to understand the barriers that

women feel in leaving their abusive partners. These barriers included: cycle of hope, financial needs, isolation, beliefs about children needing a father, and threats and intimidation leading to fear of leaving the abuser. The student questions the extent to which the clients were able to empathize with women in their decision to stay with the abuser.

Session #6 provided the student with two significant learning experiences. First, it was apparent that discussion in the first group was still monopolized by a few vocal clients. In the post-group debriefing, the co-facilitators decided that the student would facilitate smaller group discussions for the next group, as a means to increase the participation of the more quiet clients. This appeared to provide the quiet clients with an increased level of comfort so that they were able to share more information about their own experiences. It also fits with the Duluth model (Pence and Paymar, 1990), which states that clients should be provided with opportunities to build confidence and that positive change should be reinforced while negative belief systems are challenged. Second, the process of selecting the clients for the small groups enabled the student to compare his assessment of each client's strengths and weaknesses with the assessments made by the co-facilitators. These were very similar.

Session #7: Socialization

Objective:

- To understand how men and women are socialized, and the impact this has on promoting violence.

Reflections:

One of the underlying theoretical assumptions of the PAST program is that men's violence towards their partners is socially constructed. That is, if men can learn to be violent they can also learn to be non-violent.

The session was introduced with a question about where our "values" come from, in an attempt to set the context for exploring gender roles and to develop a comprehensive list of the various influences on our early lives. The group was encouraged to examine the earliest messages they were given and the sources of these messages (for example: family, extended family, school, church, television). The co-facilitators did not attach any positive or negative connotations to the messages. Generally, the clients placed more value on the messages they received from family and extended family and discounted the messages from school, church, and the police.

The session next explored the broadening range of influences on people as they reach their teens and early adulthood. In order for the clients to look at those influences or messages in a more specific way, they were asked to identify their male and female "heroes" or role models, and to name some of their characteristics.

Despite the age range in the groups, the clients' lists of male and female heroes were remarkably similar. Male heroes included John Wayne, Mike Tyson, Sylvester Stallone, Bruce Willis, James Bond, and Bill Gates. The qualities attached to these men that made them heroes were: tough, handsome, strong, "always gets the woman", "always the winner", "took no shit", rich, "not gay", and "able to do extraordinary feats of strength". The female heroes were Marilyn Munroe, Pamela Lee-Anderson, and Madonna. The characteristics that made these women their heroes were: sexy (especially long hair), big breasts, skinny, white, seductive, available, submissive to men's desires, and "bad" or evil. One client in the second group suggested that Mother Theresa was a hero because she gave of herself to help the poor. This seemed to be a sharp contrast to the first list of female heroes although the theme of women giving of themselves in a martyr-like fashion, void of their own needs or wants, also appealed to the group

members. This also fit within the model for how women are esteemed within our culture. In response to this, several other clients suggested that they put their mothers on the list as they were always selfless in their devotion to their husbands and families.

The second objective in Session #7 was to help the clients to understand the impact that these ideals or characteristics have in promoting violence. The linkage between the two was very hard for the clients to make. The clients were asked to consider each characteristic and to evaluate whether they could achieve it in their own lives. As the clients began to work through their lists, it became quite evident that most of the characteristics were not attainable. They were able to see that these characteristics exist largely in the movies and that they were not realistic in their own lives. Further, when men outside of the movies attempt to achieve these characteristics, they either fail or win at significant cost to themselves and others.

This notion of winning at any cost was examined within the context of the clients' intimate relationships. As the group began to explore this concept, they realized that this paradigm contains no middle ground; you are

either the winner or the loser. The clients were able to grasp that fear of being the loser can push men to win at any cost. In the context of their intimate relationships, if the men are the winners then their partners become the losers. Further, if they cannot win any other way, they can always use violence as the means to achieve their goal. The clients reported that they felt high levels of frustration and anger when they were unable to win; these feelings were invariably directed at the person viewed as responsible for their failure. In many cases, this person was their intimate partner.

The clients were then asked to repeat this process with their lists of the characteristics of the female heroes. As they began to examine each characteristic they commented on how much of the content was related to women's bodies and sex. Several clients commented that the image presented by the media, through implants or airbrushing, is also very artificial. In general, the clients felt that none of the women in their lives looked like the women in magazines or in movies. They commented on the health risks to women who try to look like those in magazines, stating that women starve themselves in order to be thin and that there are health risks involved in breast implants. The clients also saw that the impact of these ideals on their relationships was significant. They suggested that both

partners may become frustrated when the other does not achieve the desired characteristic. This frustration often turns into arguments, which can lead to abusive behaviour.

Session #7 concluded with a video, "Still Killing Us Softly", which looks at the profound impact that advertising has on both men and women. It describes how advertising defines the ideals of masculine and feminine in our culture and explores the connection between these images and violence. Almost all of the clients had a very hostile reaction to this video and commented that they felt that they were far too smart to be influenced by advertising. The student was able to remind the clients of their lists of "heroes" and the qualities that they had attributed to them. The clients, while initially resistant to this connection, were eventually able to acknowledge that advertising might have some impact on their beliefs.

To conclude this discussion, a homework assignment was given to the clients to assist them to appreciate how prevalent these images are in their everyday life. The clients were instructed to "flip through" magazines and to collect three images of men and three images of women that "caught their eye". They were asked to bring these pictures to the next group for

discussion. (It is noted that, in the next session, the clients were able to articulate that the pictures that “caught their eye” were exactly like those that were portrayed in the video. Further, they were able to make very basic connections between these images, their own beliefs about men and women, their frustration with failing to live up to the images, and violent behaviour.)

The co-facilitators considered Session #7 to be the most difficult to deliver. This appeared to be a result of the complexity of the material and its abstract quality. The clients generally had tremendous difficulty understanding the information presented by the co-facilitators and linking it to their own lives in a meaningful way. For example, while they could acknowledge that most people are influenced by advertising, they stated that they “are too smart” to be influenced in this manner. They also stated that, even if they were influenced by what they saw in the media, it would not affect their behaviour. This illuminated the lack of insight that these clients were struggling with throughout this entire program.

Session #8: Victim Impact: Women

Objective:

- To begin to learn about the impact of domestic violence on women

Reflections:

Session #8 uses a video produced by the National Film Board of Canada called "Loved, Honoured, and Bruised". This video portrays the impact of violence on one woman, Jeanne. It presents her story from birth, to her abusive marriage, and to her eventual departure from the marriage. A large group discussion format was used in both groups to debrief after the video. As the group began to work through the material in the video, the clients were encouraged to move from focusing on themselves and how they have been affected by violence to looking at the other person's perspective.

A number of clients in both groups found it very difficult to look at violence from the other person's perspective or to "put themselves in Jeanne's shoes" even for a brief period of time. When they were asked how they would feel if they were in Jeanne's place, they still reverted to looking at the situation from their own perspectives instead of hers. Their ability to empathize with Jeanne was always blurred by their own experiences.

Several clients commented that if they were in Jeanne's place, they would have just left. They "wouldn't have taken the abuse"; they would have responded to the abuse by using violence. It appeared that these clients still saw themselves in a place of control in this situation and were unable to really put themselves into Jeanne's place.

In the second group, the student asked the question from another perspective: "How do you think Jeanne felt?" While it seemed to be much harder for the clients to look at the situation from Jeanne's perspective, they were able to generate a number of emotional impacts on Jeanne that prevented her from leaving sooner or seeing that she had options. They agreed that Jeanne's self-esteem would be very low because she was always told that she was stupid and useless. They could see that Jeanne went into the marriage feeling that she was bright and worthwhile but after years of being called stupid and useless she began to believe that she was both of those things. Clients were asked to rate Jeanne's self-esteem as a result of the abuse. Most of them suggested that it would be at zero and one client thought it would be in the negative range. Three clients commented that Jeanne's spirit had been crushed and she must have felt hopeless and

helpless to change her situation. They agreed that these feelings could also lead to depression and possible health issues.

As the clients began to look at Jeanne's life from her perspective, they talked about how fearful she must have been, not knowing when the next beating would occur. It was felt that Jeanne was a prisoner in her own home. The clients acknowledged that she must have also felt trapped and isolated because the family lived on a farm. (However, most of the clients thought that she would feel the same way in the city.) Some of the clients began to show a genuine appreciation for the toll that this abuse took on Jeanne.

The next step for the group was to apply this insight into their own relationships. While the PAST program does not actually provide time for this, clients were asked to take a few moments and reflect on how their partners must have felt as a result of their violent behaviour. This resulted in complete silence in the room for at least five minutes while the clients contemplated the question. The clients were not asked to share their reflections with the rest of the group.

Session #8 concluded with a discussion about Jeanne's husband, Farmer Fox, with the goal of assisting the group to understand how Farmer Fox thinks and how he justifies his violent behaviour. The use of Farmer Fox as a concrete example of the material presented in the program is intended to bring the course material to real life. The ultimate goal of this exercise is to help the clients to understand their own lives better.

The student used an open-ended question to start the discussion: "What do you think about Farmer Fox?" A full range of comments was generated by the group and included: "psycho", "dangerous", "in denial", "loser", "sick", and "mentally unstable". All of the clients' comments were negative and many implied some type of pathology; it became clear during the discussion that followed that if Farmer Fox was all of these things, then he could not be responsible for his actions.

The clients were able to identify with a number of Farmer Fox's justifications for his behaviour. These included his sexual frustration and his perception that Jeanne behaved in a child-like manner and therefore he had the right and the responsibility to discipline her. Some clients were able to make the linkage between Farmer Fox's internal feelings of powerlessness

and low self-esteem and his desire to establish feelings of worth and power within his intimate relationship. They saw that this came at the expense of Jeanne and their children. Two clients commented that his violence wasn't about Jeanne but that he just used her as an excuse to justify his behaviour.

The group generated a list of Farmer Fox's own issues or problems that would have contributed to his choice to use violent behaviour. This list included: low self-esteem, sexual problems, family of origin issues, anger, jealousy of the children, lack of understanding, and stress. Some of the clients agreed that they have experienced some of these issues in their own lives and that they are in many ways like Farmer Fox. They also saw that they had used violence to deal with their own feelings and situations.

In general, the majority of clients tried to distance themselves from Farmer Fox. Several indicated that they would never use such extreme violence in their relationships. They did not see their behaviour as being as harmful as Farmer Fox's or believe that they were as "bad" as Farmer Fox. The co-facilitators used this opportunity to challenge the clients to broaden their perception of violent behaviour and its impact on their partners.

The student found that the clients in both groups were resistant to seeing themselves as abusive men. However, he observed that they were more receptive to the material in the second group when he used his own behaviour as an example to start the discussion. The student described how some of his behaviour toward his own partner could be considered abusive. This not only modelled ownership of one's behaviour but also appeared to break down barriers between the student and the clients.

Session #9: Victim Impact: Children

Objective:

- To begin to learn the impact of domestic violence on children

Reflections:

Session #9 used the National Film Board of Canada video, "The Crown Prince", to portray the impact of domestic violence on children. The video is about two brothers who are growing up in a house where the father is violent towards the mother. While the father doesn't use any physical violence towards the boys in the video, he has historically been physically violent towards the older brother, Billy. He continues to use various forms of intimidation and coercion towards the boys. In the video, the mother

decides to go to a shelter after encouragement from the younger brother, Freddie. While Freddie goes with her, Billy does not accompany them at that time.

Through the course of the video, the group saw that Billy begins to respond to feelings and conflict in the same way as does his father. As his feelings begin to intensify, his ability to manage them decreases and he begins to “tune out” as a means to avoid dealing with his feelings (portraying the tension-building phase in the cycle of violence). Billy begins to exhibit signs that he is building towards a violent outburst and he begins to use physical aggression and verbal abuse including sarcasm and put-downs. The ultimate expression of Billy’s feelings is a violent outburst against his girlfriend and his little brother, depicting the violent episode in the cycle of violence. When he sees this, he decides to join his mother and Freddie at the shelter.

The student used a guided group discussion to debrief after the video. Questions were designed to explore Billy’s emotional and behavioural responses to his father’s violence. Two questions were intended to assist the group to explore the context in which Billy’s violence occurs: How does

Billy learn to be violent? Why does he choose violence? A final question helped the clients to look at the concept of making choices by analyzing Billy's behaviour. While there are no questions directly related to Freddie, he also becomes part of the discussion.

As the group began to work through the questions, the emotional and behavioural impact of the father's violence becomes apparent. The group was able to identify a number of emotional responses through comments that Billy made in the video. This was important as clients were put in touch with their own emotional responses to similar situations. They identified emotions such as shame, hopelessness, helplessness, hurt, frustration, anger, fear, and loneliness.

Many of the clients were able to recognize Billy's "warning signs" as his behaviour began to escalate. They found that they could relate the violence in the video to that which existed in their own families of origin. This was a very new and validating experience for these clients who had never considered their childhood experiences in a violent context. This recognition was also useful in challenging the clients to break the cycle of violence and spare their own children this experience.

The student found that Session #9 evoked the most positive response from the clients, in terms of their ability to relate to the material and in their expressed desire to change their own behaviour. It appeared that the clients had less difficulty relating to this material because of their existing tendency to see themselves as victims. There also seemed to be less stigma in acknowledging their role as victims than as perpetrators. In addition, many of the clients had also experienced abuse in their families of origin and this video evoked an emotional response that resulted in their need to share with the group.

Session #10: Self Talk

Objectives:

- To learn about negative and positive self-talk
- To learn calming and reassuring self-talk statements

Reflections:

Session #10 was one of the most difficult sessions for both the student and the clients for several reasons. First, the material and language in this session appear to be too sophisticated for most of the clients to comprehend. Second, the student's lack of experience with the material limited his ability

to interpret it in a way that made it more meaningful to the clients. Third, the whole notion of an internal conversation was difficult for the clients in both groups to grasp. In general, they seemed to be unaware that self-talk was already occurring for them and that it would have any impact on their behaviour.

The co-facilitators' use of metaphors was helpful in assisting the clients to grasp the concept of self-talk. Self-talk, both positive and negative, was compared to a cassette we play in our heads. A 1-2-3 model of understanding or locating self-talk was integrated into the discussion at this point. One is the situation that is occurring; two is the self-talk about the situation, (either positive or negative); and three is the feelings, behaviours, and consequences that follow. Given that most of the clients in both groups were experiential learners, a 1-2-3 scenario was written out on the flip chart.

In the scenario, their partner goes to the store at 7 p.m. to purchase a few items. They know that the store closes at 9:00. The clients were instructed to monitor their self-talk, feelings, behaviours, and consequences at ½ hour intervals from 8:30 to 10:30 when their partner returned home.

The first group easily identified the negative feelings and self-talk that would occur in each half-hour interval. In particular, the negative self-talk started to escalate between 8:30 and 9:00 when the theme of infidelity ("she's having an affair") became most prominent. By 10:30 when the woman arrived back at home, the clients didn't want to hear any explanations of what really happened; they have become so escalated that the violent episode was imminent.

This exercise was very helpful for the clients to make the linkage between negative self-talk and intense negative feelings and then to violent behaviour. Many of the clients had not previously realized how the three pieces fit together and spiral towards a violent episode when the woman in the scenario returned home.

The clients were asked to repeat the exercise and to replace the negative cassette with a positive one. This was more difficult for the clients in both groups and they required significant coaching by the co-facilitators. Through this process, many of the clients were able to acknowledge their difficulty with positive self-talk because it did not fit with how they viewed

themselves, their partners, or the world in general. This exercise enabled many of the clients to see the need for positive change in their lives.

The student primarily observed the co-facilitators deliver this session for the first group in order to gain more comfort with the material. When the session was discussed in debriefing, the student had an opportunity to share his own reaction to the material and to the responses of the clients in the session. This assisted him to prepare to lead the session for the second group. In the second group, the student followed the format used by the co-facilitators in the first group. As an aid to learning the material, the student asked the clients what they say to themselves "in their heads" when they are angry at work or with someone other than their partners. This assisted them to grasp the concept of self-talk in less emotional situations so that they could then move on to looking at more difficult situations.

Session#11: Personal Beliefs and Self-Talk

Objective:

- To develop realistic and helpful beliefs

Reflections:

The goal of Session #11 was to further deepen the clients' understanding of self-talk and how their belief systems impact on their self-talk and, in turn, on their behaviour. Through a series of work sheets, the clients were guided through some commonly held beliefs of abusive men. They were asked to examine these beliefs and to decide if they were realistic and helpful in terms of their self-talk. The group session was started with the statement "My partner makes me violent". Using the flipchart to record responses, the clients were asked to respond with either a "yes" or "no" to the noted statement. After everyone had responded, the group as a whole discussed the answers. The responses of both groups were very similar. Several clients said "no"; a few said "yes"; and five clients (in the two groups) said "maybe" even though "maybe" was not one of the options. (It is possible that more clients actually agreed with "maybe" but were not comfortable sharing this opinion.) While the large groups explored the five "maybe" answers, it became apparent that the clients felt justified in being violent if their partners either pushed them "far enough" or if their partners' behaviour was "severe enough". For example, while infidelity was "severe enough" for one client, coming home to an empty table was enough for another.

The clients were encouraged to look deeper at these beliefs and to try to understand what was behind them, based on the course material already covered. They were asked to consider the link between their beliefs about power/control and violent behaviour. A small group of clients acknowledged that they did believe that violence was a means to maintain power and control over their partners. However, they agreed that it often resulted in more problems in their relationships and in their lives in general.

The larger groups were then broken down into groups of four so that each client had more opportunity to explore the concept of power and control within his intimate relationships. The clients were asked to identify their own negative beliefs and the self-talk that accompanied them. They were also asked to identify more helpful beliefs and self-talk to replace the negative ones. All of the clients in both groups struggled with this exercise.

In one group, the clients were asked to share their negative beliefs and self-talk with the larger group. The larger group was, in turn, used to challenge these beliefs and to identify more positive ones. The clients in both groups maintained the belief that men should have some control over their partners and that their partners should be meeting their needs. A

number of clients in both groups failed to see their partners as “adults” who were capable of making choices; they referred to them as being child-like or “just not that bright”. This, in turn, gave them the right to administer discipline as they deemed necessary. If their partners objected to being treated in this manner, the clients fell back on violence as a means to have their way. Regarding their belief that their partners should be meeting their needs, many of the clients believed that they came first and other household and parenting responsibilities were secondary.

In attempt to identify some of the client’s negative (self-talk) thoughts regarding their partners, they were asked to break into pairs and complete a work sheet which instructed that these be listed. The pairs were instructed to replace each negative thought with a positive one. This was very difficult for the clients and few were able to replace more than one or two of their negative self-talk statements with positive ones. This portion of the session required more time for completing the worksheets and for debriefing after the exercise was completed.

It was the student’s experience that this session required more than the two hours allotted in the program manual. It therefore appears that the

PAST program may not acknowledge the profound lack of insight that these particular clients bring to the treatment group. The program does not allow the time for the clients to fully explore and change their negative beliefs, as the basis for changing their violent behaviour. Further, if they fail to develop new beliefs, physical violence may decrease but emotional and psychological violence appear to increase (Pence & Paymar, 1990). The deterrent to behaving in a physically abusive manner, then, is their desire to avoid criminal charges rather than to act on a new belief system.

Session # 12: Program Wrap-up

Objectives:

- Program debrief – review.
- Participants to be aware of crisis/follow-up resources
- Review control plans including warning signs, and revise as required.
- Program evaluation by participants

Reflections:

The goal of Session #12 is to wrap up the group while assisting the clients to complete a second plan for recognizing warning signs and for their

“time-outs”. The discussion also included developing formal and informal supports within the clients’ communities.

Session #12 provided a sharp contrast to Session #1 in that several of the clients had begun to integrate the material in a meaningful way and to develop relationships with other clients. For these clients, ending the group represented a significant loss. For others, the end of the group signalled the final step in completing the terms of their probation orders. For yet others, this was the first time they had completed anything. Whatever the personal reasons for attending and completing the group, most of the clients expressed some positive feeling about the group experience and some sadness at the prospect of it ending. Several clients talked about the group as the first place they were able to talk about “these issues” and that they had gained some helpful insights. For most of the clients, information about the cycle of violence, warning signs and time-outs was most helpful.

It became very clear by this last session that most of the clients had no other supports or resources to continue their journeys towards non-violence. In an attempt to deal with this issue, clients were encouraged to make use of their Probation Officers, to seek out other supportive resources such as

Klinik, and to pursue further counselling, if possible. They were also encouraged to make connections with each other beyond the structured group. Several clients had already done this by the last group.

Finally, the clients' expectations of the program, as identified in Session #1, were reviewed as a large group. When they were asked the extent to which they had achieved their goals, some felt that they had done so by "over 100%". Interestingly, these were also the clients that the co-facilitators were most concerned about in terms of their ability to understand the program material. The most resistant client in both groups, who had initially refused to complete any paperwork, stated that he had achieved approximately 65% of his goal because he still had so much work to do. He may have been the most honest. While almost none of the clients made eye contact in Session #1, all of the men shook hands with each of the facilitators at the end of Session #12.

The student observed that there was very little new work done in Session #12. The student found Schulman's (1979) description of the ending phase of group work helpful in explaining that the purpose of this session is to provide closure, rather than to explore new material or rework

material previously covered. The student was satisfied that Session #12 did provide the clients with the opportunity to reflect on their experience in the group and to look forward to the next steps in their efforts to become non-violent.

Recording:

Implementation of Procedures:

Several tools were used during the practicum to assist the student to monitor his clinical experience.

1. The content for each session in the PAST program is clearly outlined in the manual. The student used the PAST program manual as the template for each of the 12 sessions in the two
2. The student met with his co-facilitators before and after each session. The goal for the pre-session meeting was to plan for the next session and included clarifying any material related to program content, organizing the session material, dividing material between the three co-facilitators, and dealing with any issues that may have arisen since the previous session. Post-session meetings provided an opportunity for co-facilitators to debrief after the session, to discuss any issues that arose during the session, to review the participation of the group



members, and for the student to gain clinical feedback from the co-facilitators.

3. The student maintained a reflective journal during both groups.
4. The student met with the PAST program coordinator on a regular basis. This served to clarify program issues related to working in a governmental agency.
5. The clients provided verbal and written feedback to the student.
6. The student reviewed the clients' progress reports that are completed at the end of the program (Appendix H).

Progress of Clients:

The facilitators used six criteria for evaluating the progress of the clients in the PAST program. These are also forwarded to the Probation Officer following completion of the group. They included:

- Participation in the group, either positive or negative;
- Written work – clients are expected to develop pre- and post-group plans for non-violence;
- Clients' understanding of the warning signs that indicate if they are building towards a violent episode;
- Use of the time-out tool during the four week group;

- Verbal acceptance and ownership of their violent and abusive behaviour;
- Self-reporting of current violent or abusive behaviour.

The co-facilitators used a number of methods to monitor the participants' progress during the groups. These included:

1. Written work: At various points in the program, the clients were asked to complete worksheets which were intended to help them to personalize the group material. For example, they were instructed to complete their own lists of "warning signs" and their own plans for "time-out" after these items were reviewed by the group as a whole. They were then asked to hand in their worksheets for co-facilitators to review and to provide comments/feedback to them. While this assisted the clients to develop better plans for non-violence, it also allowed the co-facilitators to monitor the clients' understanding of the material and application to their own situations. If any clients were having difficulty with the material or refuse to engage with a particular concept, the co-facilitator(s) discussed the issues with them individually in attempt to resolve this.

2. **Homework assignments:** At various points in the program, clients were instructed to complete specific tasks or “homework” outside of the group. For example, after the clients have developed their own “time-out” plans, they were asked to practise their plans over the remainder of the sessions and then discuss their experiences in the group. While many of them did practise their “time-out” plans, several did not. This exercise allowed the co-facilitators to monitor the commitment to change demonstrated by the clients in the groups. It also created an opportunity to discuss the barriers to completing the task with more non-compliant clients. Another homework assignment consisted of completing a handout on “Types of abuse that apply to you” and returning it at the following session. This enabled the co-facilitators to review the level of disclosure and ownership amongst the individual clients. A homework assignment in Session #7 requested that each client find three examples of advertising depicting women and three examples of advertising depicting men, to illustrate the stereotypes of men and women in the media. The group created a collage of men and a collage of women from the pictures. They were able to see the stereotypical images of men and women in advertising through this exercise.

3. **Participation during group sessions:** The co-facilitators monitored the participation of the clients with a focus on the content of their comments. This provided an opportunity for the co-facilitators to challenge beliefs held by the clients, which in turn may have created barriers to their integration of the program material.
4. **Pre- and post-session questionnaires:** A series of true and false questions were administered to the clients at the first and last sessions. The intent of this was to compare their responses and therefore the extent to which they integrated the material presented in the sessions.
5. **Final evaluation:** The co-facilitators met after the completion of both groups to write a formal review of each client's participation, based on the preceding points.

CHAPTER FOUR

EVALUATION

Post Intervention Assessment:

The post-intervention assessment includes the clients' evaluation of the group, the student's assessment of the intervention, and a summary of the educational benefits to the student.

Clients' Evaluation:

The clients provided information to the co-facilitators about their experience in the sessions through verbal reports and through a "Participant Evaluation" developed by Probation Services for the PAST program. The "Participant Evaluation" contained four areas for evaluation including: course content, course leaders, audio-visual aids, and open-ended questions. Twelve of fourteen evaluations were completed.

1. Course content: All of the clients agreed that the course content was suitable and that the program objectives were clearly explained and met. Of interest, question #4 of this section asks clients if their

“personal expectations of the program were met”. While they all checked “yes”, only two clients stated that they had learned something. It is possible that completing the group was the primary expectation of these clients, as opposed to actually learning something.

2. Course leaders: Eleven of the clients reported that the co-facilitators were well-prepared, communicated clearly, and encouraged group participation. One client reported that the co-facilitators did not always communicate clearly. On a scale from poor to excellent, seven clients reported that the co-facilitators were “excellent”, four checked “good” for the male co-facilitators, and one checked “satisfactory” for the female co-facilitator.
3. Audio-visual aids: Ten clients reported that the content of the videos related well to program content. Two clients suggested that more current videos would have been helpful.
4. Open-ended questions: There were three open-ended questions in the evaluation. In response to “What was most helpful”, two clients indicated that the information on “warning signs” was most helpful; four clients stated that they had not realized they had a problem; one man stated that “time-outs’ were most helpful; one man gained insight into the “cycle of violence”; and one man commented that this was the

first opportunity he had to talk about these issues. Seven clients had no responses. Question #2 asked the clients "What was least helpful". Only three clients answered this question. One suggested that "time-outs" were least helpful; the second stated that the video related to the impact on children was least helpful because he had no children; and the third stated that the video related to socialization was least helpful. Question #3 asked for suggestions for changes in the way the program was delivered. Four clients responded with suggestions that included: bring in guest speakers such as an abuser and a victim; teach the program in high schools; provide programming to partners; and shorten the group. Generally, the clients' verbal reports were consistent with their responses on the evaluation.

Student assessment of intervention:

It is difficult for the student to assess the impact of the intervention for two main reasons. First, there is currently no process for long-term follow-up of the clients. As a result the recidivism rates are only available to the Probation Officers and the student is not aware of the impact of the group over time. Second, the student had no contact with the clients' partners before, during, or after the group was finished. The student therefore has no

information related to the partners' experiences before, during, or after the group.

Despite these limitations, there does not appear to be any question that the PAST program does impact on the men who attend it. As a psycho-educational model, the PAST program challenges clients both cognitively and behaviourally. At the cognitive level, clients' beliefs are challenged as they are encouraged to deconstruct harmful and destructive beliefs and to replace them with more positive and helpful ones. The clients in both of the groups clearly struggled with this component of the program. The deconstruction and reconstruction of belief systems is a much larger process than can be accomplished in twelve 2-hour sessions. As well, many of the clients operate in both social and work circles that support a belief system of violence against women. The student was aware of the tremendous impact that this has on clients' ability to take group material and apply it to their everyday lives. One client's comment that this group was the first place where he had been able to talk about these issues illustrates both his isolation and the lack of support for change in his own environment. Further, when the clients were asked to identify people that could act as supports in their

effort to change, only half were able to do this. The rest would have to look to a community agency for support.

While the PAST program has been effective in providing the seeds for change on the cognitive level, its ability to create long-term behavioural change is questionable. This kind of change also depends on positive reinforcement or support from within each man's community. Elaine Leeder (1994) supports community involvement well beyond a public statement of "zero tolerance". She suggests that a community sponsor or mentor helps to provide the hands-on modelling of non-violent behaviour while building connections within the batterer's natural environment. From a broader social perspective, this moves domestic violence in a very real way from the privacy of the home into the realm of the community. Leeder's vision of community involvement would play a critical role in supporting the change that has been initiated within the group sessions.

In summary, it appears that the PAST program does impact on the clients to different degrees. While all of the clients did leave the group with information and tools that could help them to stop their violent behaviour, follow-up information was not available to determine whether this occurred.

Educational benefits to the student:

The student was successful in meeting his learning goals through the practicum experience as summarized below.

1. To expand my theoretical knowledge of domestic violence: The research for the literature review provided the student with an opportunity to explore theoretical explanations of the cause and treatment modalities for domestic violence. This is presented in the literature review in Chapter Two.
2. To increase my competence at group facilitation: The student co-facilitated two PAST groups to become familiar with group process as outlined in Schulman (1979). The student also learned to identify and manage individuals who played key roles in the group such as the group leader, scapegoat, and deviant member. The student's competence in delivering the PAST group was confirmed by the co-facilitators and the clients in their evaluations.
3. To apply a theoretical model (PAST) to practise by participating as a co-facilitator in the delivery of two PAST groups: The practicum groups were based entirely on the program description contained in the PAST manual, revised (1995). The twelve 2-hour sessions were

delivered in two different formats, four 6-hour sessions and eight 3-hour sessions, to compare the effectiveness of delivery forms.

4. To gain clinical knowledge and feedback from experienced co-facilitators: The co-facilitator who is employed by Probation Services was available to the student during the research and literature review, program planning, program implementation, and evaluation phases of the practicum experience. He provided direction, support, and feedback related to all phases of this practicum experience. His expertise and constructive teaching style was invaluable in shaping this experience.

Evaluation Procedures:

For the purposes of the student's practicum placement, the agency agreed to the administration of measurement tools by the student. These tools were taken from Re-education for Abusive Men: The Effect on the Lives of Women Partners (Davies et al, 1995) with the permission of the authors. They are contained in Appendices A – J. The psychometric data related to these measures was not reviewed by the student.

The pre-group instruments were administered following the introduction of co-facilitators and clients in the first session of both groups. Attention was given to ensuring that clients understood that PAST participation was not contingent on participating in the student's research. As previously noted, only one client in the first group refused to fill out forms, stating that he wanted his lawyer to review them first. As noted, this client had completed the forms prior to the following session.

The post-group instruments were administered to both groups after all program material was covered. None of the clients in either group expressed concern related to his participation in the study.

The PAST program has no protocol for long-term follow-up with offenders and victims. Given this constraint, the student limited his data collection to the pre- and post-group contexts. Given the small sample size, the student has chosen to use descriptive data to present his findings.

Results of Questionnaire:

Twenty-five men started the PAST program in the two practicum groups. Fourteen out of the 25 men completed the program. The student has made the following observations from the data he collected (N=14):

- 12 clients reported 18 incidents of physical violence on the Abusive and Controlling Behaviour Inventory Pre-Test (Appendix D).
- 6 clients reported 10 incidents of physical violence on the Abusive and Controlling Behaviour Inventory Post-Test (Appendix G).
- 12 clients reported 110 incidents of emotional and psychological abuse on the Abusive and Controlling Behaviour Inventory Pre-Test (Appendix D).
- 11 clients reported 195 incidents of emotional and psychological abuse on the Abusive and Controlling Behaviour Post-Test (Appendix G).
- 7 clients reported 35 incidents of sexually abusive behaviour on the Abusive and Controlling Behaviour Inventory Pre-Test (Appendix D) compared with 57 incidents in the Post-Test (Appendix G).
- 20% of clients reported physically punishing their children and 28% of clients reported spanking their children (8% did not appear to perceive spanking as physical punishment).

- One client who did not report spanking did report that he hit his son across the head with both an open hand and a clenched fist.

After reviewing the data, it was apparent that many of the men may have changed their tactics (to abusive rather than violent behaviour) without giving up their felt need for power and control over their partners. This is congruent with Pence and Paymore (1990) who noted a dramatic increase in emotional and psychological abuse while delivering the Duluth program. In addition, it also appeared that the clients in the practicum groups were similar to those described by Gondolf (1993b) and Saunders (1992) in their typology of batterers. Gondolf and Saunders both suggest that the first two of these four types, the sporadic batterer and the chronic batterer, benefit most from group intervention.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

The purpose of this practicum was to provide the student with an opportunity to study the literature in an area of clinical practise and to apply a theoretical model to a clinical setting. The area of practise was selected by the student because of interest and prior experience in this field. The clinical setting selected was Manitoba Probation Services because of its progressive work in the field of domestic violence, its supportive environment, and its pool of clients with whom to work. The literature review supported the implementation of the PAST program, which was being used at Manitoba Probation Services.

The use of the PAST program was useful in providing a clear outline to follow in facilitating groups for domestic offenders. The PAST program attempts to initiate cognitive and behavioural changes in men who are guilty of abusing their partners. It is flexible in implementation so that the group can be offered in different forms as long as the twelve 2-hour sessions are covered. Its strength lies in its straightforward approach and flexible

implementation format. However, its primary limitation is that it outlines cognitive and behavioural changes that require more time than the group allows and which depend on factors in the community that are outside the scope of the program. Therefore while a good basis of knowledge and behavioural change may be established, long-term outcomes are not known. This provided a significant limitation to the student in evaluating the impact of the intervention. It also created a source of frustration to the student as it fails to "go the distance" in dealing with domestic violence in the community.

The issue of time constraints was particularly limiting in the practicum groups because of the mandated status of the clients. As noted earlier, all clients in the two practicum groups were mandated to attend and to complete domestic violence programming as part of their court sentence. As a result, all of the men who entered the first session of the PAST group articulated that they had no choice in attending the group. They demonstrated an attitude of resistance to treatment that the co-facilitators had to deal with before the clients could really begin to integrate the material. In this context, the co-facilitators referred to Schulman (1979) and chose to overlook the win-lose thinking held by most of the clients. Instead, they attempted to

model a more cooperative approach in which the clients were invited to participate in the group. The clients were provided with the choice of participating in the group or leaving and dealing with the consequences of that choice. The issue of choice also extended to completion of questionnaires, as the student gave the clients the choice to participate in the questionnaires within the group, as homework, or to decline from participating in these altogether. This appeared to reduce the resistance of the clients and to begin to establish a more cooperative and open tone to the group that was built on in the subsequent sessions.

As a result of this slow start, many of the clients were still in the working phase of the group process (Schulman, 1979) when the group ended. This created a strong reaction from several of the clients who expressed frustration that the group was ending and that they still had a lot of work to do. This was also reflected in the participant evaluation as several clients stated that the group was too short to make changes in their belief systems and behaviour.

Despite limitations of the program model, the student was successful in accomplishing his learning goals. The literature review enabled the student

to better understand domestic violence and the issues related to treatment of offenders. The group experience was a valuable learning process in understanding how the theory, or the program, was translated into practise or real life. The willingness of the clients to share their experiences in the group enabled the student to gain a glimpse into the complex and often tragic factors that have gone into shaping their values and lifestyle choices. This also provided the student with the insight into how difficult it is for a group program, in any form, to address the needs of these clients and effect long- term change in their lives.

The co-facilitation model also provided a valuable learning experience for the student. This model of cooperation between the male and female co-facilitators provided a level of teaching to clients that extended beyond the formal program material. For example, the co-facilitators were able to challenge the clients' beliefs about men and women by working together in a way that was not based on gender differences or a win-lose stance but on equality, cooperation, and compromise. This was also consistent with Russell (1995) who suggests that men who batter organize the world in a patriarchal and hierarchical manner and that this must be challenged in order for any sustained change to occur.

Finally, the practicum experience has enabled the student to identify several considerations for future research in the area of domestic violence. First, in relation to the PAST program, the absence of outcome studies is a major limitation in measuring its effectiveness in meeting program goals. Developing long-term follow-up for clients who have completed the PAST program would provide useful information regarding its effectiveness. Second, there do not appear to be "second stage" or transitional programs for individuals who have completed the PAST or other time-limited group programs for domestic offenders. The development of an "after-care" program or follow-up group, which reinforced the positive changes that clients are making in their lives, would be of interest to this student. Finally, further research into the factors contributing to successful behaviour change in the short and long terms would be useful in screening referrals to short-term programs such as PAST or to longer term programs for this population. This could include looking at the client's natural environment and examining the social and cultural determinants, for example, which contribute to successful outcome for those clients.

REFERENCES

Adams, D. (1988). Treatment models for men who batter: A pro-feminist analysis. In K. Yllo & M. Bograd (Eds.), Feminist perspectives on wife abuse (pp. 176-199). Newbury Park, CA: Sage Publishers.

Browning, J. (1984). Stopping the violence: Canadian programs for assaultive men. Ottawa: Health and Welfare Canada.

Burns, N., Meredith, C., & Pacquette, C. (1991). Treatment programs for men who batter: A review of the evidence of their success (WD1991-10b). Ottawa: Department of Justice Canada.

Crowell, N. and Burgess, A. (1996). Understanding violence against women. Washington, D C: National Research Council; National Academy Press.

Davies, L., Holmes, M., Lundy, C., & Urquhart, L. (1995). Re-education for abusive men: The effect on the lives of women partners. project 4 4887-05-91-101. Ottawa: Family Violence Prevention Division, Health Canada.

Dobash, R. P., Dobash, R. E., Cavanagh, K., & Lewis, R. (1996). Research evaluation of programs for violent men. Edinburgh: Crown Copyright; The Scottish Office Central Research Unit.

Dutton, D. (1988). Profiling of wife assaulters: preliminary evidence for a tri-modal analysis. Violence and Victims, 3, 5-30.

Edleson, J. & Syers, M. (1990). The relative effectiveness of group treatments for men who batter. Social Work Research and Abstracts, 26, 10-17.

Edleson, J. & Tolman, R. (1992). Intervention for men who batter: An ecological approach. Thousand Oaks, CA: Sage Publishers.

Ferguson, H. & Sunde, C. (1996). Evaluation proposal: Partner Abuse Short Term (PAST) program. Manitoba Justice Department (Unpublished).

Gelles, R. (1980). Violence in the family: A review of research in the seventies. Journal of Marriage and the Family, 42, 873-885.

Gelles, R. (1993). Family violence. In R. Hampton, T. Evilotta, G. Adams, E. Potter, & R. Weissberg (Eds.), Family violence: Prevention and treatment. Newbury Park, CA: Sage.

Gelles, R. & Cornell, C. (1990). Intimate violence in families. Newbury Park, CA: Sage Publishers.

Gelles, R. & Straus, M. (1989). Intimate violence: The causes and consequences of abuse in the American family. In M. Hansen & M. Harway (Eds.), Battering and family therapy: A feminist perspective. Newbury Park, CA: Sage Publishers.

Gondolf, E. (1988). Research on men who batter: An overview, bibliography, and resource guide. Braderton, Florida: Human Services Institute, Inc.

Gondolf, E. (1993a). Treating the batterer. In M. Hansen & M. Harway (Eds.), Battering and family therapy: A feminist perspective. Newbury Park, CA: Sage Publishers.

Gondolf, E. (1993b). Male batterers. In R. Hampton, T. Evilotta, G. Adams, E. Potter, & R. Weissberg (Eds.), Family violence: prevention and treatment. Newbury Park, CA: Sage Publishers.

Gondolf, E. (1999a). A comparison of four batterer intervention systems. Journal of Interpersonal Violence, 14, 41-62.

Gondolf, E. (1999b). Characteristics of court-mandated batterers in four cities: Diversity and dichotomies. Violence Against Women, 5, 1277-1293.

Gondolf, E. & Foster, R. (1991). Wife assault among V.A. alcohol rehabilitation patients. Hospital and Community Psychiatry, 21, 17-79.

Hamberger, L. & Hastings, J. (1991). Personality correlates of men who batter and non-violent men: Some continuities and discontinuities. Journal of Family Violence, 6, 131-148.

Hamby, S. (1998). Partner violence: Prevention and intervention. In J. Jasinski & L. Williams (Eds.), Partner violence: A comprehensive review of twenty years of research. Thousand Oaks, CA: Sage Publishers.

Hamby, S., Straus, M., & Sugarman, D. (1996). Acts of psychological aggression against a partner and their relations to physical assault and gender. Durham, N.H.: Fifth International Family Violence Research Conference.

Klein, E., Campbell, J., Soler, E., & Ghez, M. (1997). Ending domestic violence: Changing public perceptions/halting the epidemic. Thousand Oaks, CA: Sage.

Leeder, E. (1994). Treating abuse in families: A feminist and community approach. New York: Springer Publishing Company.

Macleod, Linda (1980). Wife battering in Canada: The vicious circle. Ottawa, ON: Ministry of Supply and Services Canada.

Mullender, A. (1996). Rethinking domestic violence: The Social Work and Probation response. New York: Rutledge.

Murphy, C. & Dienemann, J. (1999). Informing the research agenda on domestic abuser prevention through practitioner-researcher. Journal of Interpersonal Violence, 14, 1314-1327.

Murphy, C. & O'Leary, K. (1989). Psychological aggression predicts physical aggression in early marriage. Journal of Consulting and Clinical Psychology, 57(5), 579-582.

Neidig, P. & Friedman, D. (1989). Spouse abuse: A treatment program for couples. Champaign, Illinois: Research Press Company.

Russell, M.N. (1995). Confronting abusive beliefs: Group treatment for abusive men. Thousand Oaks, CA: Sage Publishers.

Saunders, D. (1992). A typology of men who batter: Three types derived from cluster analysis. American Journal of Orthopsychiatry, 62, 264-275.

Schmidt, K. (1995). Transforming abuse: Nonviolent resistance and recovery. Gabriola Island, B.C.: New Society Publishers.

Schulman, Lawrence (1979). The skills of helping individuals and groups. Itasca, IL: F. E. Peacock Publishers, Inc.

Sonkin, D., Martin, D., & Walker, L. (1985). The male batterer: A treatment approach. New York: Springer Publishing Company.

Stith, S., Williams, M., and Rosen, K. (1990). Violence hits home: Comprehensive treatment approaches to domestic violence. New York: Springer Publishing Company.

Stordeur, R. & Stille, R. (1989). Ending men's violence against their partners: One road to peace. Newbury Park, CA: Sage Publishers.

Straus, M. (1991). Physical violence in American families: Incidence, rates, causes, and trends. In D. Knudsen & J. Miller (Eds.), Abused and battered: Social and legal responses to family violence. New York: Aldine De Gruyter.

Tolman, R. & Bennett (1990). A review of quantitative research on men who batter. Journal of Interpersonal Violence, 5, 87-118.

Tift, C. (1993). Battery of women: The failure of intervention and the case for prevention. Boulder Colorado: Westview.

Wilson, K. (1997). When violence begins at home: A comprehensive guide to understanding and ending domestic abuse. Alameda, California: Hunter House, Inc. Publishers.

Programs:

Bathrick, D., Carlin, K., Kaufman Jr., G., & Vodde, R. (1988). Men stopping violence: A program for change. Atlanta, Georgia.

Black-Froman, D., Bowman, W., Jackson, P., Kerr, S., Ogungbemi-Jackson, J., Shorr, H., & Thomasson, D., (1995). Partner Abuse Short Term: Group program. Manitoba Justice.

Currie, D. (1987). The abusive husband: An approach to intervention. Clarke Institute of Psychiatry, Toronto, Canada.

Durphy, M. & Sonkin, D. (1989). Learning to live without violence: A handbook for men. Volcano Press.

Frohberg, J. & Russel, M. (1990). Confronting abusive beliefs: A group treatment program for men who abuse their partners. Family Violence Prevention Division, Health and Welfare Canada, Vancouver.

Kirel, P. (1993). A Hazelden workbook: Men's work (Facilitator's guide). Center City, Minnesota.

Lindsey, M., McBride, R., & Platt, C. (1993). AMEND: Breaking the cycle. Philosophy and curriculum for treating batterers. Gylantic Publishing Company, Colorado.

Pence, E. & Paymar, M. (1990). Power and control: Tactics of men who batter. Duluth, Minnesota.

Rusinoff, J. (1990). Domestic Abuse Project - DAP: Men's treatment handbook, Second Edition. Minneapolis, Minnesota.

Appendix A

LETTER OF CONSENT

I, _____ agree to participate in the study being conducted by the PAST PROGRAM. I understand that this inquiry will focus on my experience in the PAST PROGRAM and changes in my abuse behaviour.

I understand that participation in this study will involve being contacted after I leave the program and completing a questionnaire. I also understand that this questionnaire will be compared to the routine program assessment questionnaires completed while in the program.

I understand that should I have any questions or wish to discuss reservations concerning the study at any point in time, I can call Chris Sunde at 945-3215.

I further understand that I may choose not to participate or may withdraw from the study at any time without losing support and assistance from the PAST PROGRAM.

Allan Hendrickson-Gracie, a Master of Social Work student will be involved in this study as part of his practicum placement.

All information gathered will be strictly confidential only relevant probation staff will have access. All information will be kept in a secure location.

Finally, I understand that the results of the study may be published and that my identity will be kept confidential.

Signed: _____

Dated:

Appendix B

PARTNER ABUSE SHORT TERM INTERVENTION PROGRAM

PRE-EVALUATION

DATE:

Name:		Age:		Marital Status:	
Income Level (Circle)					
\$0 - \$10,000	\$10,000 - \$20,000	\$20,000 - \$30,000	\$30,000 - \$40,000	\$40,000 - \$50,000	Over \$50,000
Educational Level:	Ethnic Origin:	Employed: Yes No		No. Prior Convictions for Partner Assault (Criminal Code):	
Questions					Answers – Circle (T)true or (F)alse
1. Many forms of partner abuse exist, including physical, sexual, psychological, emotional and financial abuse.					T F
2. Men use violence against women to gain power and control.					T F
3. A personal plan for non violence is recognizing your warning signs of violence and knowing what you will do to avoid violence when you notice these signs.					T F
4. A few examples of types of warning signs of violence are the kind of situation we're in, our body signs, and our self talk.					T F
5. It's not important to know what your own warning signs of violence are.					T F
6. There are no steps which can be taken to avoid violence.					T F
7. A good way to stop violence is to get drunk and let your feelings out.					T F
8. A time out is leaving a situation and taking some time to calm down and preparing for what you are going to say and do when you get home.					T F
9. Abuse only occurs if you hit Your partner.					T F
10. Partner abuse includes controlling what your partner does, who she sees and talk to.					T F
11. Emotional abuse can be just as harmful as physical abuse.					T F
12. In a relationship of equality the man talks and acts so that the partner feels safe and comfortable expressing herself and doing things.					T F
13. Women "ask for it", they drive men to violence.					T F
14. If the man is drunk it's not abuse.					T F
15. Abusers who say they are sorry will never do it again.					T F
16. Trying to live up to a male role of being tough can lead to violence towards women.					T F
17. Society has no influence on men's attitudes towards women.					T F
18. We can learn to change our attitudes and behaviour and stop violence.					T F
19. There's no build up to violence, it just happens quickly and then it's over.					T F
20. After an incidence of violence there is a release of tension for the man, followed by a build up of tension, and then another violent incident.					T F
21. The first step in breaking the-cycle of violence is to ask for help.					T F

22. Partner abuse incidents are seldom witnessed by other people.	T	F
23. The emotional impact of partner abuse can include terror, fear and humiliation.	T	F
24. Partner abuse can result in broken bones, miscarriages and death.	T	F
25. Children who witness partner abuse are unlikely to be abusers when they grow up.	T	F
26. Children who witness assault show the same characteristics as those who are assaulted.	T	F
27. If the cycle of violence isn't broken, the violence continues through generations of families.	T	F
28. Our thoughts affect our feelings and behaviour.	T	F
29. A way to help avoid violence is to think that my partner's behaviour and opinion's should always be the way I want it to be.	T	F
30. It's not realistic to think that I should always be right and never make mistakes.	T	F
31. Calming and reassuring self talk can help avoid violence.	T	F
32. Thinking "she deserves to be hit" is a good way to avoid violence.	T	F
33. Thinking "stay calm, just continue to relax" can help avoid violence.	T	F

Appendix C**PAST PROGRAM****INTAKE & ASSESSMENT QUESTIONNAIRE**

Name: _____

Today's Date: D M Y

Name of Probation Officer

Are you waiting to go to Court for an offence against your partner?

Yes No

PERSONAL INFORMATION

Address:

Occupation:

Employer:

Phone: Home

Work Hours:

Phone: Work

Yearly Income:

Birthdate: D: M: Y:

Do you have any problems reading English? Yes No

Do you have any problems writing English? Yes No

PARTNER INFORMATION

Name

Address

Phone: (H):

Phone: (W):

Length of relationship

Length of living together

CURRENT RELATIONSHIP STATUSDating
Common-lawMarried
Separated

Divorced

If separated, who do you live with?:

If separated, nature of contact:

Do you have children from any past relationships? Yes No
 Name: Age: Resides with:
 Name: Age: Resides with:
 Name: Age: Resides with:

Does your partner have children from past relationships? Yes No
 Name: Age: Resides with:
 Name: Age: Resides with:
 Name: Age: Resides with:

Do you have children in current relationship? Yes No
 Name: Age: Resides with:
 Name: Age: Resides with:
 Name: Age: Resides with:

REFERRAL SOURCE

Name: Agency:
 Phone:

ABUSE WITH CURRENT/MOST RECENT PARTNER

1. **Date of most recent physical abuse:** D M Y

During this abusive incident, did you:

grab	choke	push
kick	slap	punch
hit with an object	use a weapon	throw her on floor
other		

Police Involvement:	Yes	No
Charges laid:	Yes	No
Alcohol:	Yes	No
Drug Use:	Yes	No

2. **Date of most serious physical abuse:** D M Y

During this abusive incident, did you:

grab	choke	push
kick	slap	punch
hit with an object	use a weapon	throw her on floor
other		

Police involvement:	Yes	No
Charges laid:	Yes	No
Drug Use:	Yes	No

3 **How often have you physically abused your partner during the past year?**

never	more than once a month	1 - 6 times
7 - 12 times	once a week	once a day

4. What kind of injuries has your partner sustained as a result of your violence?

bleeding	swelling	bruises
scratches	muscle sprain	black eye
miscarriage	needed stitches	needed surgery
broken nose	knocked/choked unconscious	broken bones
wounds from use of weapons		
other:		

5. Has your partner: **Yes** **No** **Don't know**

- a) ever gone to a hospital for injuries as a result of your abuse?
- b) been unable to perform her regular activities as a result of your abuse?
- c) ever moved out of the home as a result of your abuse?
- d) ever gone to a women's shelter?

6. Have you ever been abusive to any of your previous partners? Yes
No

YOUR CHILDHOOD EXPERIENCE

7. Did either your mother or father have a drinking problem? Yes
No

8. Did your father ever hit your mother? Yes
No

9. As a child, were you ever hit by your parents? Yes
No

10. How often were you hit?
daily weekly monthly less than once month

11. As a child, were you ever sexually abused? Yes
No

How old were you? Who abused you?
Have you ever told anyone? Yes No

RELATIONSHIP WITH CHILDREN (if no children, skip this section)

12. Have your children seen or heard you abuse your partner? Yes
No

13. Do you physically punish your children? Yes
No
If yes, how often?

Daily month weekly monthly less than once a

14. In what ways have you physically punished your children?
 spanking on bum slap on face or exposed skin hit with belt
 hit on head hit with object anything else?

15. Has the C.F.S. ever been involved with your family? **Yes**
 No
 If yes, name of worker

16. Have you ever sexually abused a child? **Yes**
 No

OTHER ABUSE ISSUES

17. Have you ever physically abused adults other than your partner? **Yes**
 No
 When was the last time this happened?

18. Do you own or have in your possession any weapons? (guns, hunting knives, etc.) Yes No

19. Have you ever been charged or convicted of a criminal offence? **Yes**
 No

Offence: Date/Year
 Offence: Date/Year
 Offence: Date/Year

20. During an average week, including weekends:

1. How many beers do you drink?
2. How many glasses of wine do you drink?
3. How many ounces of liquor do you drink?

21. Do you take non-prescription drugs? **Yes**
 No

If yes, what types:

If yes, how often: daily weekly monthly

22. Have you ever abused your partner while using alcohol or drugs? **Yes**
 No

23. Has anyone ever expressed concern about your alcohol or drug use? **Yes**
 No

24. Do you believe you have an alcohol or drug problem? **Yes**
 No

25. Have you ever been through treatment for alcohol or drug abuse? **Yes**
 No

26. How often do you buy, read or view pornography?

Never Occasionally Monthly Weekly
 Daily

What type of pornography do you use?

Magazines Strip bars Video Tel. (Fantasy)
 Other

OTHER HEALTH ISSUES**27. Have you ever been in a hospital for mental health reasons? Yes**

No

If yes, where and when:

28. Are you on any form of medication: Yes

No

If yes, please describe:

29. Have you had any suicidal thoughts during the past three months? Yes

No

30. Have you attempted suicide? Yes

No

31. Are you now, or have you ever, attended other forms of counselling? Yes

No

If yes, where and when?

Appendix D

ABUSIVE AND CONTROLLING BEHAVIOUR INVENTORY – MALE

Please indicate how frequently you have displayed the following EMOTIONALLY and PSYCHOLOGICALLY ABUSIVE behaviours towards your partner in the last six months.

- | | |
|---------------------------|--------------------------|
| 0 - Never | 5 - Once or twice a week |
| 1 - Once or twice | 6 - Several times a week |
| 2 - Several times | 7 - Once or twice a day |
| 3 - Once or twice a month | 8 - Several times a day |
| 4 - Several times a month | NA - Not applicable |

How frequently have you:

- Insulted or swore at your partner.
- Criticized her clothes or her physical appearance.
- Stomped out of a room or house or yard.
- Sulked or refused to talk about an issue.
- Been rude to her friends.
- Yelled and screamed at her.
- Demanded a strict account of how your partner spends money.
- Made financial decisions without consulting her.
- Accused her of having an affair.
- Discouraged or interfered with her contact with family or friends.
- Interfered with her working or going to school.
- Embarrassed her in front of others.
- Drove the car recklessly to frighten her.
- Criticised her child are and mothering.
- Threatened to take the children away from her.
- Threatened to call the Children's Aid Society to report her for child abuse.
- Interrupted her sleeping or eating to bother her.
- Blamed her for your abusive behaviour.
- Threatened to hurt yourself or her, if she left you.
- Monitored your partner's time and made her account for every minute.
- Withheld money from her.
- Threatened to call the police on her.
- Criticized her work in the home (cooking, cleaning, laundry, etc).

Please indicate how frequently you have displayed the following **SEXUALLY ABUSIVE** behaviours towards your partner.

- | | |
|---------------------------|--------------------------|
| 0 - Never | 5 - Once or twice a week |
| 1 - Once or twice | 6 - Several times a week |
| 2 - Several times | 7 - Once or twice a day |
| 3 - Once or twice a month | 8 - Several times a day |
| 4 - Several times a month | NA - Not applicable |

How frequently have you:

- Compared her sexually to other women.
- Had an affair.
- Threatened to have an affair.
- Withheld affection from her.
- Withheld sex from her.
- Were insensitive to her needs and desires.
- Pressured her for sex more often than she liked.
- Hurt her sexually.
- Physically forced her to have sex.
- Became angry if your partner did not go along with your request for sex.
- Pressured her to perform any sex act which she was unhappy about.
- Pressured her to perform a sex act which you saw in pornography.

Now, please indicate how frequently you have displayed the following **PHYSICALLY ABUSIVE** behaviour toward your partner in the last **six months**.

- | | |
|---------------------------|--------------------------|
| 0 - Never | 5 - Once or twice a week |
| 1 - Once or twice | 6 - Several times a week |
| 2 - Several times | 7 - Once or twice a day |
| 3 - Once or twice a month | 8 - Several times a day |
| 4 - Several times a month | NA - Not applicable |

How frequently have you:

- Physically harmed a pet.
- Thrown or broken something in your partner's presence.
- Punched a wall/table etc. in her presence.
- Thrown something at her.
- Pushed, grabbed or shoved her.
- Slapped her.

- Kicked her.
- Punched her with a fist.
- Hit or tried to hit her with an object.
- Choked her.
- Threatened her with a knife or gun.
- Used a knife or fired a gun in her presence.
- Beat her up.

Finally, we would like to ask you some questions about the effect of your violence. Over the last **six months**, did it ever happen that:

- Your partner needed medical attention due to injuries you caused?
- Your partner was unable to perform regular activities due to injuries caused by you?
- Your partner was unable to perform regular activities as a result of the distress caused by your abuse?
- The police were involved because of an assault against your partner?
- Your partner had to leave home for her own safety?
- Your partner has gotten support from a women's group or shelter?

Appendix E**PAST PROGRAM ENTRY QUESTIONNAIRE**

1. What was your reason for coming to this group?

2. Describe the most serious abuse that you have done to your partner.

3. Why do (did) you abuse your partner?

4. What effects has the abuse had on your partner?

5. Have you told anyone that you've abused your partner? Explain your answer.

6. Who do you think has more advantages in this society; women, men or they both have the same advantages?

7. What do you think has to happen for women to be safe from violence in our society?

Appendix F

PARTNER ABUSE SHORT TERM INTERVENTION PROGRAM

POST-EVALUATION

DATE:

Name:		Age:		Marital Status:	
Income Level (Circle)					
\$0 - \$10,000		\$10,000 - \$20,000		\$20,000 - \$30,000	
\$30,000 - \$40,000		\$40,000 - \$50,000		Over \$50,000	
Educational Level:		Ethnic Origin:		Employed:	
				Yes No	
No. Prior Convictions for Partner Assault (Criminal Code):					
Questions					Answers – Circle (T) rue or (F) alse
1. Many forms of partner abuse exist, including physical, sexual, psychological, emotional and financial abuse.					T F
1. Men use violence against women to gain power and control.					T F
2. A personal plan for non violence is recognizing your warning signs of violence and knowing what you will do to avoid violence when you notice these signs.					T F
3. A few examples of types of warning signs of violence are the kind of situation we're in, our body signs, and our self talk.					T F
4. It's not important to know what your own warning signs of violence are.					T F
5. There are no steps which can be taken to avoid violence.					T F
6. A good way to stop violence is to get drunk and let your feelings out.					T F
7. A time out is leaving a situation and taking some time to calm down and preparing for what you are going to say and do when you get home.					T F
8. Abuse only occurs if you hit Your partner.					T F
9. Partner abuse includes controlling what your partner does, who she sees and talk to.					T F
10. Emotional abuse can be just as harmful as physical abuse.					T F
11. In a relationship of equality the man talks and acts so that the partner feels safe and comfortable expressing herself and doing things.					T F
12. Women "ask for it", they drive men to violence.					T F
13. If the man is drunk it's not abuse.					T F
14. Abusers who say they are sorry will never do it again.					T F
15. Trying to live up to a male role of being tough can lead to violence towards women.					T F
16. Society has no influence on men's attitudes towards women.					T F
17. We can learn to change our attitudes and behaviour and stop violence.					T F
18. There's no build up to violence, it just happens quickly and then it's over.					T F
19. After an incidence of violence there is a release of tension for the man, followed by a build up of tension, and then another violent incident.					T F

20. The first step in breaking the-cycle of violence is to ask for help.	T	F
21. Partner abuse incidents are seldom witnessed by other people.	T	F
22. The emotional impact of partner abuse can include terror, fear and humiliation.	T	F
23. Partner abuse can result in broken bones, miscarriages and death.	T	F
24. Children who witness partner abuse are unlikely to be abusers when they grow up.	T	F
25. Children who witness assault show the same characteristics as those who are assaulted.	T	F
26. If the cycle of violence isn't broken, the violence continues through generations of families.	T	F
27. Our thoughts affect our feelings and behaviour.	T	F
28. A way to help avoid violence is to think that my partner's behaviour and opinion's should always be the way I want it to be.	T	F
29. It's riot realistic to think that I should always be right and never make mistakes.	T	F
30. Calming and reassuring self talk can help avoid violence.	T	F
31. Thinking "she deserves to be hit" is a good way to avoid violence.	T	F
32. Thinking "stay clam, just continue to relax" can help avoid violence.	T	F

Appendix G

ABUSIVE AND CONTROLLING BEHAVIOUR INVENTORY – MALE

Please indicate how frequently you have displayed the following EMOTIONALLY and PSYCHOLOGICALLY ABUSIVE behaviours towards your partner in the last **four weeks**.

- | | |
|---------------------------|--------------------------|
| 0 - Never | 5 - Once or twice a week |
| 1 - Once or twice | 6 - Several times a week |
| 2 - Several times | 7 - Once or twice a day |
| 3 - Once or twice a month | 8 - Several times a day |
| 4 - Several times a month | NA - Not applicable |

How frequently have you:

- Insulted or swore at your partner.
- Criticized her clothes or her physical appearance.
- Stomped out of a room or house or yard.
- Sulked or refused to talk about an issue.
- Been rude to her friends.
- Yelled and screamed at her.
- Demanded a strict account of how your partner spends money.
- Made financial decisions without consulting her.
- Accused her of having an affair.
- Discouraged or interfered with her contact with family or friends.
- Interfered with her working or going to school.
- Embarrassed her in front of others.
- Drove the car recklessly to frighten her.
- Criticised her child are and mothering.
- Threatened to take the children away from her.
- Threatened to call the Children's Aid Society to report her for child abuse.
- Interrupted her sleeping or eating to bother her.
- Blamed her for your abusive behaviour.
- Threatened to hurt yourself or her, if she left you.
- Monitored your partner's time and made her account for every minute.
- Withheld money from her.
- Threatened to call the police on her.
- Criticized her work in the home (cooking, cleaning, laundry, etc).

Please indicate how frequently you have displayed the following **SEXUALLY ABUSIVE** behaviours towards your partner.

- | | |
|---------------------------|--------------------------|
| 0 - Never | 5 - Once or twice a week |
| 1 - Once or twice | 6 - Several times a week |
| 2 - Several times | 7 - Once or twice a day |
| 3 - Once or twice a month | 8 - Several times a day |
| 4 - Several times a month | NA - Not applicable |

How frequently have you:

- Compared her sexually to other women.
- Had an affair.
- Threatened to have an affair.
- Withheld affection from her.
- Withheld sex from her.
- Were insensitive to her needs and desires.
- Pressured her for sex more often than she liked.
- Hurt her sexually.
- Physically forced her to have sex.
- Became angry if your partner did not go along with your request for sex.
- Pressured her to perform any sex act which she was unhappy about.
- Pressured her to perform a sex act which you saw in pornography.

Now, please indicate how frequently you have displayed the following **PHYSICALLY ABUSIVE** behaviour toward your partner in the last **four weeks**.

- | | |
|---------------------------|--------------------------|
| 0 - Never | 5 - Once or twice a week |
| 1 - Once or twice | 6 - Several times a week |
| 2 - Several times | 7 - Once or twice a day |
| 3 - Once or twice a month | 8 - Several times a day |
| 4 - Several times a month | NA - Not applicable |

How frequently have you:

- Physically harmed a pet.
- Thrown or broken something in your partner's presence.
- Punched a wall/table etc. in her presence.
- Thrown something at her.
- Pushed, grabbed or shoved her.
- Slapped her.
- Kicked her.

- Punched her with a fist.
- Hit or tried to hit her with an object.
- Choked her.
- Threatened her with a knife or gun.
- Used a knife or fired a gun in her presence.
- Beat her up.

Finally, we would like to ask you some questions about the effect of your violence. Over the last **four weeks**, did it ever happen that:

- Your partner needed medical attention due to injuries you caused?
- Your partner was unable to perform regular activities due to injuries caused by you?
- Your partner was unable to perform regular activities as a result of the distress caused by your abuse?
- The police were involved because of an assault against your partner?
- Your partner had to leave home for her own safety?
- Your partner has gotten support from a women's group or shelter?

Appendix H

PARTNER ABUSE SHORT TERM GROUP PROGRAM PARTICIPANT EVALUATION

Please indicate your reaction by checking either Yes or No to the following statements. Space is provided for additional reactions under comments.

Course Content:

- | | | | |
|----|--|-----|----|
| 1. | The objectives of the program were clearly explained.
Comments: | Yes | No |
| 2. | In my opinion, the program objectives were met.
Comments: | Yes | No |
| 3. | The information given was suitable for the subject.
Comments: | Yes | No |
| 4. | My personal expectations of the program were met.
Comments: | Yes | No |

Course Leaders:

- | | | | |
|----|---|-----|----|
| 1. | The course leaders were well prepared.
Comments: | Yes | No |
| 2. | The course leaders communicated clearly
Comments: | Yes | No |
| 3. | The Course leaders encouraged group participation.
Comments: | Yes | No |

Audio/Visual Aids:

- | | | | |
|----|--|-----|----|
| 1. | The videos shown were related to program content.
Comments: | Yes | No |
| 2. | The flip chart presentations were clear and easy to understand.
Comments: | Yes | No |

Time allotted for the program was: Too Short About Right Too Long

Material covered in the program was: Too Short About Right Too Long

I rate the course overall as: Excellent Good Satisfactory Poor

My rating of the course leaders is:

Name of Leader	Excellent	Good	Satisfactory	Poor
Name of Leader	Excellent	Good	Satisfactory	Poor
Name of Leader	Excellent	Good	Satisfactory	Poor

I would recommend this program to others: Yes No

What was most helpful to you about the program? Why?

What was the least helpful to you about the program? Why?

What changes would you suggest for future programs?

PARTICIPANT'S NAME: (OPTIONAL)

Appendix I

PARTNER ABUSE SHORT TERM GROUP PROGRAM PARTICIPATION REPORT

Participant's Name:

Program Start & End Dates:

Session #	Topic(s)	Date	*Attendance
1	Partner Abuse Program Introduction; Partner Abuse. Power & Control Defined		
2	Part 1 - Introduction - Personal Plan for Non Violence Part 2 - Warning Signs of Violence Part 3 - My Warning Signs		
3	Part 1 - Time Outs: Introduction Part 2 - Personal Plan For Non Violence And Time Out		
4	Types of Abuse		
5	Cycle of Violence		
6	Myths and Facts About Partner Abuse		
7	Socialization		
8	Victim Impact: Women		
9	Victim Impact: Children		
10	Self Talk Introduction		
11	Personal Beliefs and Self Talk		
12	Program Wrap Up, After Program - Personal Plan for Non Violence, Program Evaluation		

Mark Attendance As Applicable: (P) - Present; (L) - Late; (A) - Absent

Comments (If Warranted)

Submitted by (Facilitator):

Date:

I have read this progress report (Participant's signature):

Date:

Appendix J

PAST PROGRAM – EXIT QUESTIONNAIRE

1. What was your reason for coming to this group?
2. Describe the most serious abuse that you have done to your partner.
3. Why do (did) you abuse your partner?
4. What effects has this abuse had on your partner?
5. Have you told anyone that you've abused your partner? Explain your answer.
6. How do you feel about attending this program?
7. Which areas do you still need to work on?

8. **Have you done anything in the past 6 months about sexism?**

9. **How do you see yourself staying involved in ending your and other men's violence and abuse toward women after you leave the group?**

10. **Who do you think has more advantages in this society; women, men or they both have the same advantages?**

11. **What do you think has to happen for women to be safe from violence in our society? Any further comments?**