

Domestic Violence

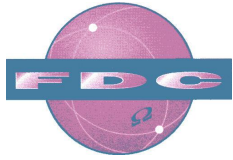


- 4 million American women experience a serious assault by an intimate partner during an average 12-month period
- Each year, an estimated 3.3 million children are exposed to violence by family members against their mothers or female caretakers
- In 1993, approximately 575,000 men were arrested for committing violence against women
- Each man referred to one of these programs represents a family in perpetuity

American Psychological Association. (1996). Report of the American Psychological Association Presidential Task Force on Violence and the Family.

An important opportunity for social action



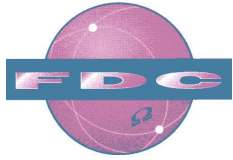


Batterer Intervention



- Most states have established some standard for batterer intervention programs, which are generally offered by the courts as probationary alternatives to incarceration
- Hundreds of intervention programs are offered ranging in length from 12 to 52 weeks
- Every type of intervention theory, approach, and format is represented
- Group intervention is the preferred format cited in 90% of state standards

Austin, J., & Dankwort, J. (1998). A Review of Standards for Batterer Intervention Programs. Violence Against Women.

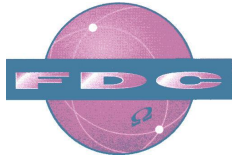


Milestone Research

- In 1990, Geffner and Rosenbaum found relatively few evaluations of men's group
- In 1997, Gondolf counted 30 published single-site program evaluations in total.
- Many had methodological shortcomings such as exploratory research designs.
- Gondolf noted that at this point the "success rates" of batterer programs are comparable to others such as drunk driving, drug and alcohol, and sex offender programs.

Gondolf, E. W. (1997). Batterer programs: What we know and need to know. *Journal of Interpersonal Violence*, 12(1), 83-98.

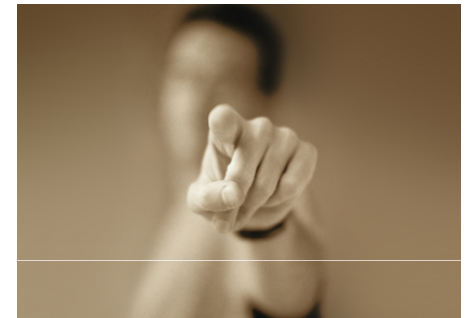
Rosenbaum, A., & Geffner, R. (1990). Characteristics and treatment of batterers. *Behavioral Sciences & the Law*, 8(2), 131-140.



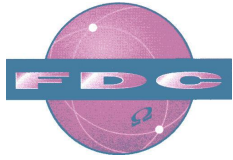
Theories of Intervention

BATTERER INTERVENTION

- Management & control
- Feminist
- Family-based
- Didactic & cognitive-behavioral
- Process & interpersonal
- Psychotherapeutic



Then there is the penal system...



Management & Control

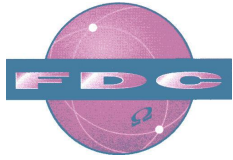


“Batterer intervention is a public safety program, not treatment; you must keep the focus on victim safety. Otherwise, the criminal justice system is only offering the batterer a safe haven to escape the consequences of his offense.”

—Andrew Klein, Chief Probation Officer,
Quincy, Massachusetts, District Court Model
Domestic Abuse Program

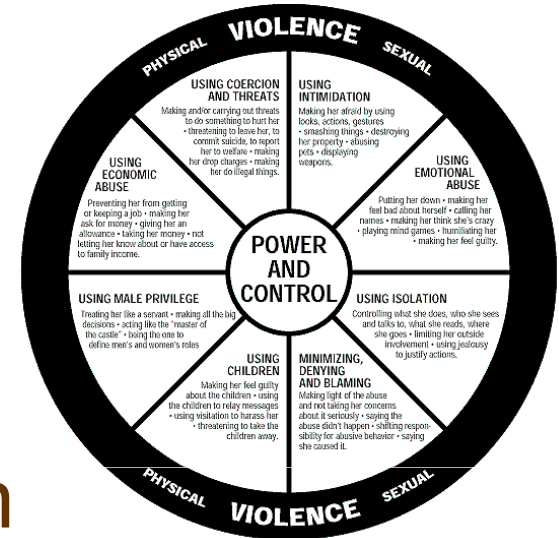
Healey, K. (1998). Batterer Intervention: Program Approaches & Criminal Justice Strategies. *US Department of Justice*, 143.

No therapeutic objectives

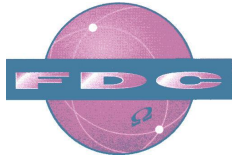


Feminist

- Renunciation of victim blaming
- Emphasis on the power imbalance between assailant and victim (“patriarchy”)
- Focus on male (re)socialization



Sociological, not psychological emphasis

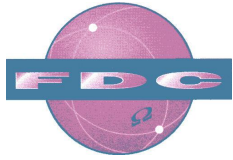


Family Systems

- Emphasis on family dynamics
- Emphasis on communication skills
- Often utilize male-female team facilitators

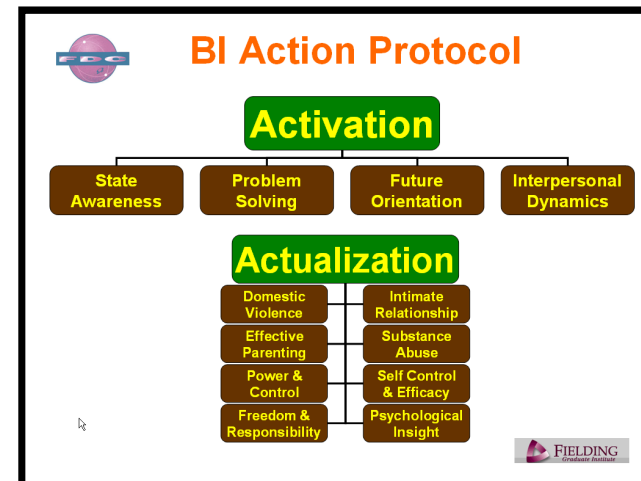
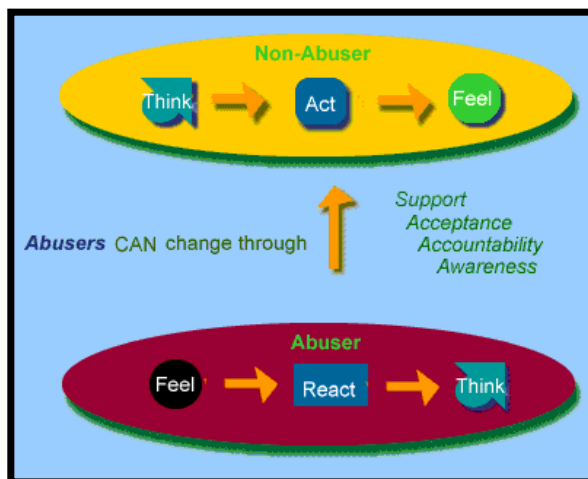


***Less common due to victim focus (blaming).
Many states prohibit couples counseling.***

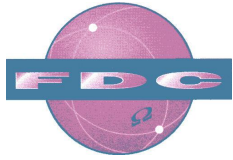


Didactic & CBT

- Psycho-educational approach
- Emphasis on cognitive factors
- Utilize curriculum & agenda



Analysis & persuasion

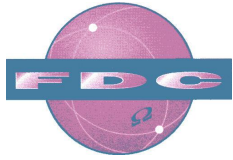


Process & Interpersonal

- Interpersonal focus
- Here-and-now emphasis
- Experiential learning
- Psychodynamic insight



Smaller groups, longer terms, greater depth



Evaluating Recidivism

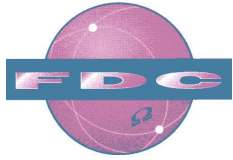


Table 3. Re-Arrest Rates for Batterer Program Intakes versus Non-Program Referrals for 1995 (15-month follow-up)

Arrests	Non-Program (n=231)	Dropouts (n=61)	Completers (n=132)	Total Program (n=193)
Domestic Violence	14% (33)	14% (9)	8% (10)	10% (19)
Any Assault	37% (86)	39% (16)	16% (21)	24% (45)
Other Offense	43% (101)	33% (20)	24% (31)	26% (51)
Any Arrest	56% (129)	54% (33)	30% (39)	37% (72)

Gondolf, E. W. (2000). Mandatory court review and batterer program compliance. *Journal of Interpersonal Violence*, 15(4), 428-437.

Interventions are modestly effective



No Discrimination



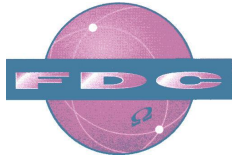
- In 1998, Gondolf evaluated four batterer intervention programs finding:
 1. The re-assault rate for the participants in each of the four programs fell between 32% and 39%
 2. There was no significant difference in the outcomes of the four programs (i.e., re-assault rate, men making threats, domestic violence re-arrests, and victim "quality of life")
 3. The outcomes also did not significantly vary for different personality types



Gondolf, E. W. (1999). A comparison of four batterer intervention systems:
Do court referral, program length, and services matter?
Journal of Interpersonal Violence, 14(1), 41-61.

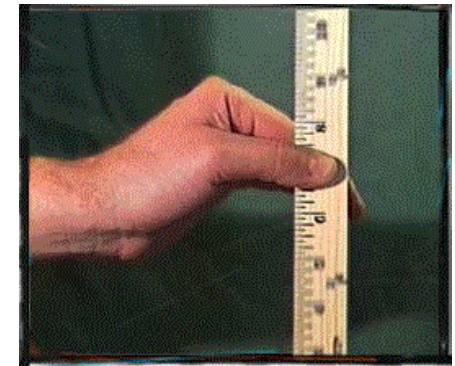
The current research consensus



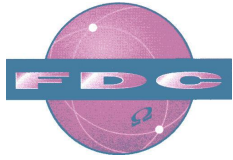


The Criterion Problem

1. The objective of batterer intervention programs is the cessation of domestic abuse. “Stop the abuse”.
2. Abuse is variously interpreted as physical, emotional, sexual, verbal, economic and/or psychological
3. Recidivism is difficult to assess in any case
 1. Self-reports are suspect
 2. Victim reports are suspect
 3. Follow-up contacts are elusive
 4. Re-arrest is a coarse measure



***The ultimate criterion has not yet been helpful
for treatment program design***



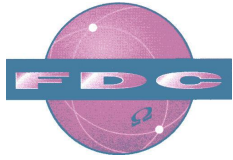
Secondary Criteria

- Some mediators and moderators of abuse
 - ❖ Attitudes about patriarchy & power sharing
 - ❖ Impulse management skills
 - ❖ Awareness of deterrence
 - ❖ Conflict tactics
 - ❖ Anger awareness
 - ❖ Future orientation
 - ❖ Attitudes about intimate relationships
 - ❖ Knowledge of community resources

Long Beach, CA

Four Day Forecast			
Wed.	Thu.	Fri.	Sat.
			
p/cloudy	p/cloudy	p/cloudy	p/cloudy
HIGH 76 F 24 C	HIGH 80 F 26 C	HIGH 82 F 27 C	HIGH 82 F 27 C
LOW 59 F 15 C	LOW 59 F 15 C	LOW 58 F 14 C	LOW 59 F 15 C

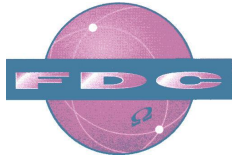
***Secondary constructs are necessary
to refine intervention mechanisms***



Research Objectives



1. To characterize certain elements of the format, theory, content, and style of as many probationary batterer intervention programs as possible.
2. To assess selected characteristics of as many male batterers as possible, at all stages of intervention from intake through discharge, across the full range of intervention strategies and formats.
3. To establish and defend the thesis that certain measures related to self-efficacy will correlate strongly with other measures of outcome across all intervention conditions. Albert Bandura has established the theoretical foundation for this hypothesis (Bandura, 1997).
4. To evaluate the impact of a supplementary didactic intervention package focused explicitly on the development of interpersonal self-efficacy and several related elements.



Dr. Edward Gondolf

From: Edward W. Gondolf [mailto:egondolf@iup.edu]
Sent: Tuesday, October 08, 2002 11:42 AM
To: Joe Ferguson
Subject: Re: BI Dissertation Concept Version 2.0



Joe,

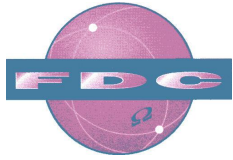
In my opinion any one of your objectives could be the dissertation in itself.

Also, you might want to read Tolman, Edleson & Fendrick (1997) The applicability of the theory of planned behavior to change in abusive men's cessation of violent behavior. *Violence and Victims*, 11 (4), 341-354. It relates to efficacy.

Ed Gondolf

Encouragement from the top guy



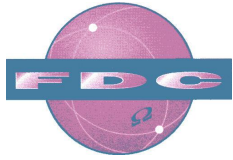


Self-Efficacy Hypotheses

1. Self-efficacy correlates with:
 - Emotional & cognitive state awareness
 - Future orientation and goal setting habits
 - Problem solving skills
 - Attitudes about negotiation & reciprocity
 - Other *dynamic* (non-genetic) predictive criteria
 - o Conflict Tactics Scale (CTS2) for this study
 - o Excludes closed-head injury, psychopathology, etc.
2. Intervention approaches systematically affect these variables to different degrees



Presumption: Self-efficacy is an important factor in domestic violence



BI Action Protocol

Activation

State
Awareness

Problem
Solving

Future
Orientation

Interpersonal
Dynamics

Actualization

Domestic
Violence

Effective
Parenting

Power &
Control

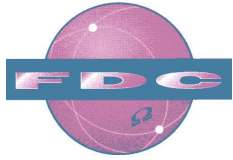
Freedom &
Responsibility

Intimate
Relationship

Substance
Abuse

Self Control
& Efficacy

Psychological
Insight



Insight Without Change

1031 So. Broadway
Los Angeles 15, California
November 28, 1950



Dr. Carl Rogers
Counseling Center
University of Chicago
Chicago 37, Illinois

Dear Carl:

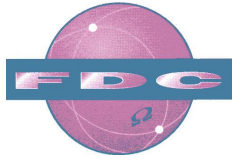
Many thanks for the copy of Hobbs Chapter, your A.P.A. talk, and Chapter XI. I'll also be grateful for a copy of the interim Rockefeller research report you mentioned when it becomes available.

The aspect of the therapeutic puzzle that currently most occupies my attention centers around those clients who seem to achieve intellectual insight but little significant modification of behavior. Recently, I heard a talk by Dr. Robert Haas, formerly of the Ohio State School, and now of U.C.L.A. Haas indicated that he knew v

Cordially yours,

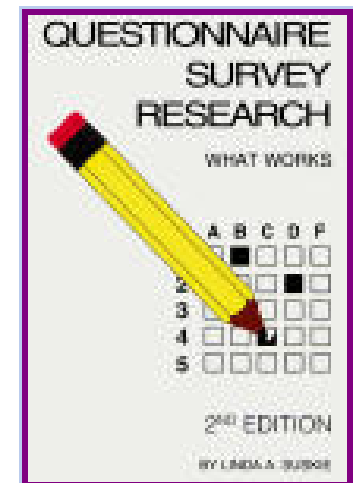
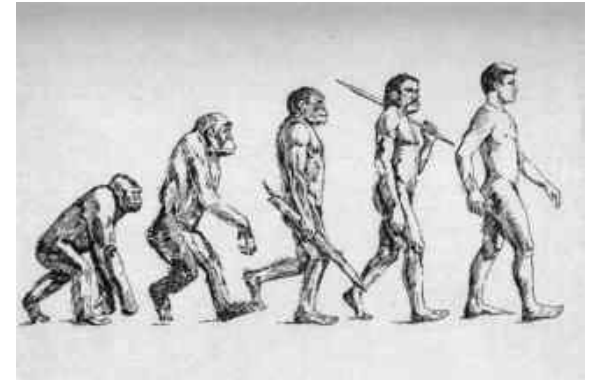
CHARLES FERGUSON

Insight must be operationalized

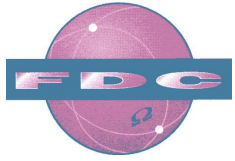


Cross-Sectional Survey

- Simultaneous pre & post
- Program & subject foci
- Minimally invasive to programs
- Broadest possible national sample
- Full spectrum of subject maturities
- Flexibility in program commitment



Closed term groups assess at completion

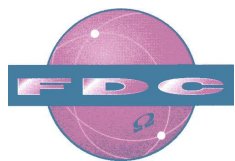


Down The Road

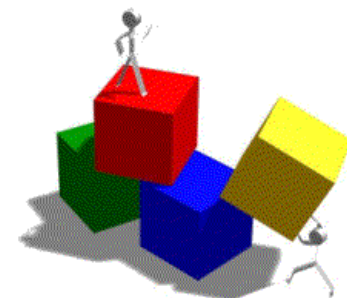


- Confirm that these secondary criteria are important factors in domestic abuse
 - ❖ Follow subjects from selected programs for traditional evaluation of recidivism.
 - ❖ Include optional contact consents among original survey instruments
 - ❖ Utilize Dr. Alan Rosenbaum's toll-free reporting facility under construction at NIU?

NOT within the scope of this study!



Modular Response



Program Structure & Emphasis

Intervention approach
Program length
Staff qualifications
Number of clients
Open or closed format
Research interest
Dropout rate

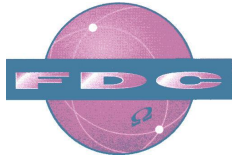
Subject ID, Contact, & Consent

Subject name
Address
Phone
Victim ID
Victim contact s
Subject contact consent
Victim contact consent

Subject Demographics & Predictors

Age
Ethnicity
Weeks in program
Substance use
Conflict tactics
State awareness
Problem solving skills
Future orientation
Social sophistication
Interpersonal self-efficacy

***Accept any combination of
questionnaires from each program***

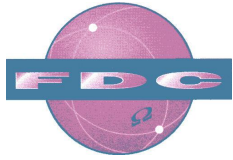


Program Structure



Program name & contacts	Program length
Theoretical orientation	Open or closed term
Non-profit status	Auxiliary referral strategy
Professional affiliations	Confrontation strategy
Institutional affiliations	Emphasis on secondary criteria
Years in operation	View of the therapeutic relationship
Research interest	Involvement of the victim
Caseload	Number & sex of facilitators
% Volunteer	Regulatory oversight
Years in operation	Program certification
Research interest	Facilitator manual
Caseload	Subject manual
% Volunteer	Individual counseling
Staff size & training	

Design for strong face validity

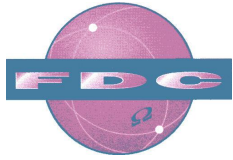


Program Emphases



Confrontation	
Curriculum	Community resources
Group process	Relaxation and stress
Power & control issues	Assertiveness
Moral issues	Children & parenting
Personal responsibility	Problem solving
Psychological insight	Planning & future orientation
Costs of aggression	Interpersonal dynamics
Anger cues	Community resources
Time-out	Relaxation and stress
Feelings other than anger	Assertiveness
Alcohol & drugs	Children & parenting
Communication skills	Problem solving
Cycle of violence	Planning & future orientation

10 Point Likert Scales

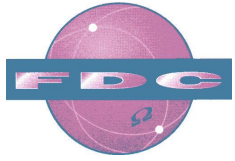


Subject Assessment

1. Identification, contact, & consent
2. Demographic, efficacy, and predictor questionnaire
 - Self-efficacy
 - Emotional state awareness
 - Future orientation
 - Problem solving skills
 - Attitudes about negotiation & reciprocity
 - Conflict tactics
 - Substance abuse history & status
 - Self-report recidivism prior to assessment
- Male, English speakers only



1 session assessment ≈ 1 hour
(trade-offs may be necessary)

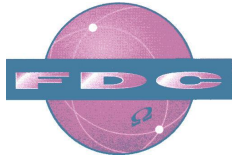


Program Drop-outs



- A pervasive and complex confound
- Excluded from this study:
 - ❖ The focus is on comparative effects of intervention programs.
 - ❖ Necessary procedures would increase invasiveness and heighten barriers to recruitment

Research focus is on treatment effects



Self-Efficacy

- Validated social scales are scarce
 - ❖ 24 item Kanfer scale is domain specific
 - ❖ Presupposes the mediating constructs
- General self-efficacy may be better
 - ❖ Broad reliability and validity
- A big leg-up from Charlie Blonstein



Albert Bandura

Workspace My summary Discussions

List Users

Business Card for "Charles Blonstein"



Charles Blonstein
PSY Student
cblonste@ix.netcom.com

Preferences:

Native language	English
Chat Client	Java
Preferred workspace	Clinical Ph.D. and RCP

Bandura, A. (1995). Manual for the construction of self-efficacy scales.

Available directly from A. Bandura, Stanford University.

Bandura, A. (1997). *Self-efficacy: The exercise of control.*

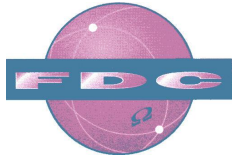
New York, NY, US: W. H. Freeman & Co, Publishers.

Kanfer, R. (1981). Interpersonal standard-setting and self-efficacy expectations in depression.

Dissertation Abstracts International, 42(6-B), 2534.

Perceived self-efficacy facilitates goal-setting, effort, persistence, and recovery from setbacks





Schwarzer's 4 Minute General Self-Efficacy Scale



Ralf Schwarzer

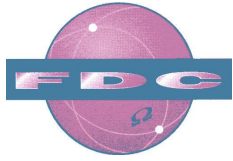
1. I can always manage to solve difficult problems if I try hard enough.
2. If someone opposes me, I can find the ways and means to get what I want.
3. I am certain that I can accomplish my goals.
4. I am confident that I could deal efficiently with unexpected events.
5. Thanks to my resourcefulness, I can handle unforeseen situations.
6. I can solve most problems if I invest the necessary effort.
7. I can remain calm when facing difficulties because I can rely on my coping abilities.
8. When I am confronted with a problem, I can find several solutions.
9. If I am in trouble, I can think of a good solution.
10. I can handle whatever comes my way.



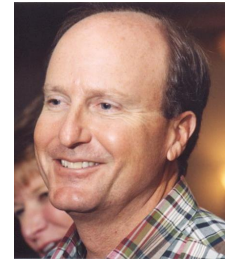
Schwarzer, R. (Ed.). (1992). *Self-efficacy: Thought control of action*.
Washington, DC, US: Hemisphere Publishing Corp.

In 20K+ samples from 23 nations, Cronbach's alphas ranged from .76 to .90, with the majority in the high .80s.





Fergi's 4 Minute Partner Self-Efficacy Scale

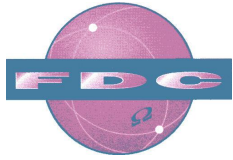


1. I can always manage to solve difficult problems **with my partner** if I try hard enough.
2. If **my partner** opposes me, I can find the ways and means to **resolve the problem so that we are both satisfied**.
3. I am certain that I can accomplish my goals **by working with my partner**.
4. I am confident that **my partner and** I could deal efficiently with unexpected events.
5. Thanks to my resourcefulness, I can handle unforeseen situations **with my partner**
6. I can solve most problems **with my partner** if I invest the necessary effort.
7. I can remain calm when facing difficulties **with my partner** because I can rely on my coping abilities.
8. When **my partner confronts me** with a problem, I can find several solutions.
9. If I am in trouble **with my partner**, I can think of a good solution.
10. I can handle whatever comes my way.



Tourangeau, R., & Rasinski, K. A. (1988). Cognitive processes underlying context effects in attitude measurement. *Psychological Bulletin*, 103(3), 299-314.

Priming tone is adjusted



Substance abuse history & status

➤ Texas Christian University Drug Screen



- ❖ 18 questions: 5 – 10 minutes
- ❖ 20+ state criminal justice system's brief screen
- ❖ Convergent Validity Criteria
 - Addiction Severity Index (ASI)
 - Substance Abuse Subtle Screening Inventory (SASSI)



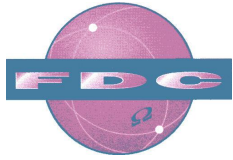
TCU Drug Screen (TCUDS):

Short Assessment (2 pages) for--

- Drug Problems/Dependence
- Treatment History/Needs

Knight, K., Simpson, D. D., & Hiller, M. L. (2002). Screening and referral for substance-abuse treatment in the criminal justice system. *Treatment of drug offenders*, 259-272.

Last priority under time pressure



Conflict Tactics Scale (CTS2)

- A very common instrument in DV research
- Extensive psychometric & validity evaluation
- 39 questions, 15 minutes
- Scales can be omitted if time requires
 - ❖ Negotiation
 - ❖ Psychological aggression
 - ❖ Physical assault
 - ❖ Sexual coercion
 - ❖ Injury
- Change “last 12 months” to “recently” and Likertize

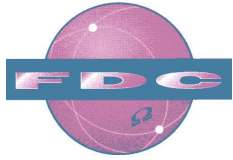


Murray Strauss

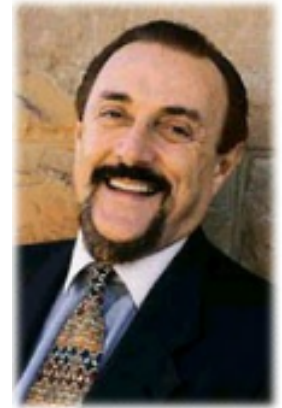
Newton, R. R., Connelly, C. D., & Landsverk, J. A. (2001). An examination of measurement characteristics and factorial validity of the Revised Conflict Tactics Scale. *Educational & Psychological Measurement*,
Straus, M. A., Hamby, S. L., Boney-McCoy, S., & Sugarman, D. B. (1996). The revised Conflict Tactics Scales (CTS2): Development and preliminary psychometric data. *Journal of Family Issues*,

Reference criterion for this study





Future Orientation



Phillip Zimbardo

➤ Zimbardo Time Perspective Inventory

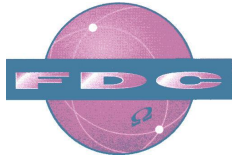
- ❖ 56 item questionnaire (can be reduced)
- ❖ *Massive* psychometric & validity evaluation
- ❖ Developed down the hall from Bandura
- ❖ Scales: Past Positive, Past Negative, Present Hedonistic, Present Fatalistic, and Future



Zimbardo, P. G. (1990). Stanford Time Perspective Inventory. *Department of Psychology, Stanford University*.

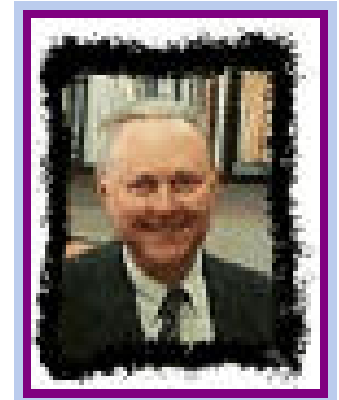
Zimbardo, P. G. (1994). Whose time it is, I think I know: Research on time perspectives. *102nd Annual Convention of the American Psychological Association*.

Zimbardo, P. G., & Boyd, J. N. (1999). Putting time in perspective: A valid, reliable individual-differences metric. *Journal of Personality & Social Psychology*, 77(6), 1271-1288.

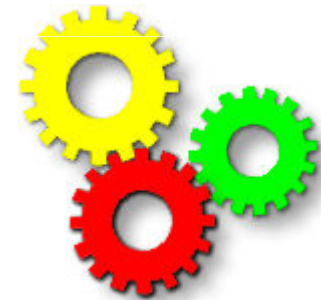


Social Problem Solving Inventory SPSI-R

- 52 Item questionnaire
- Extensive psychometric evaluation
- Problem orientation scales
 - ❖ Positive Problem Orientation (PPO)
 - ❖ Negative Problem Orientation (NPO)
- Problem skill scales
 - ❖ Rational Problem Solving (RS)
 - ❖ Impulsivity-Carelessness Style (ICS)
 - ❖ Avoidance Style (AS)



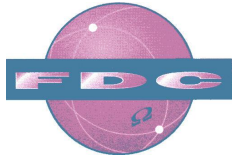
Tom D'Zurilla



D'Zurilla, T. J., Nezu, A. M., & Maydeu-Olivares, A. (2002). Social Problem-Solving Inventory-Revised (SPSI-R). *Multi-Health Systems, Inc.*

D'Zurilla, T., & Chang, E. C. (1995). The relations between social problem solving and coping. *Cognitive Therapy & Research*

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Emotional State Awareness Metacognitive Awareness

- Mindfulness-based Cognitive Therapy
- “Distancing” & “Decentering” as treatment mediators
- “As no satisfactory measure already existed, we developed a new measure of metacognitive awareness.”
- “Metacognitive awareness refers to the extent to which thoughts are experienced as mental events rather than as aspects of self or direct reflections of truth. As such, metacognitive awareness may not be easily measured by questionnaire items. For this reason, we developed a measure of metacognitive awareness by adapting paradigms previously used in autobiographical memory research.”

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John Teasdale



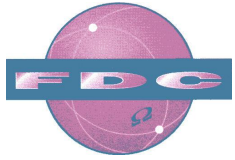
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How to get to the CBU
Research Staff, Cognition and Emotion Group.

- Emotion-cognition relationships.
- Self, awareness, and mood.
- Psychological change processes.
- Affective representation and its neural substrates.
- Mindfulness.
- Depression and its prevention.

No instrument for this survey as yet



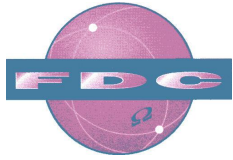


Program Recruitment

- Broadest possible national sample
- Direct contacts
- BI professional associations
- Direct mail & email
- Internet-available questionnaires
- Endorsements
 - ❖ Prominent BI program directors
 - ❖ Prominent research personalities
 - ❖ Prominent DV court judges
 - ❖ City Attorneys & prosecutors

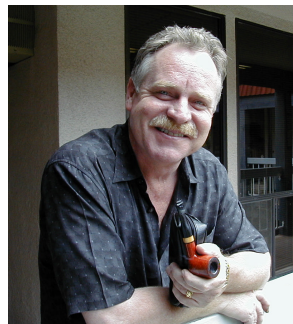


Powerful endorsement roster is crucial



Collaborators

- Dr. Edward Gondolf
- Dr. Alan Rosenbaum
- Dr. Daniel Sonkin
- Alyce LaViolette
- Sharon Panian
- Judge Deborah Andrews
- Judge Jack Simmons
- Bob Foster
- George Anderson
- Dr. Bill Adams



Network under construction