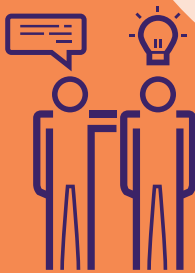


Change is Possible



**How to engage male clients
perpetrating domestic violence**

Three ways you might come in contact with men perpetrating domestic violence:



Men as service users



Men as partners of service users



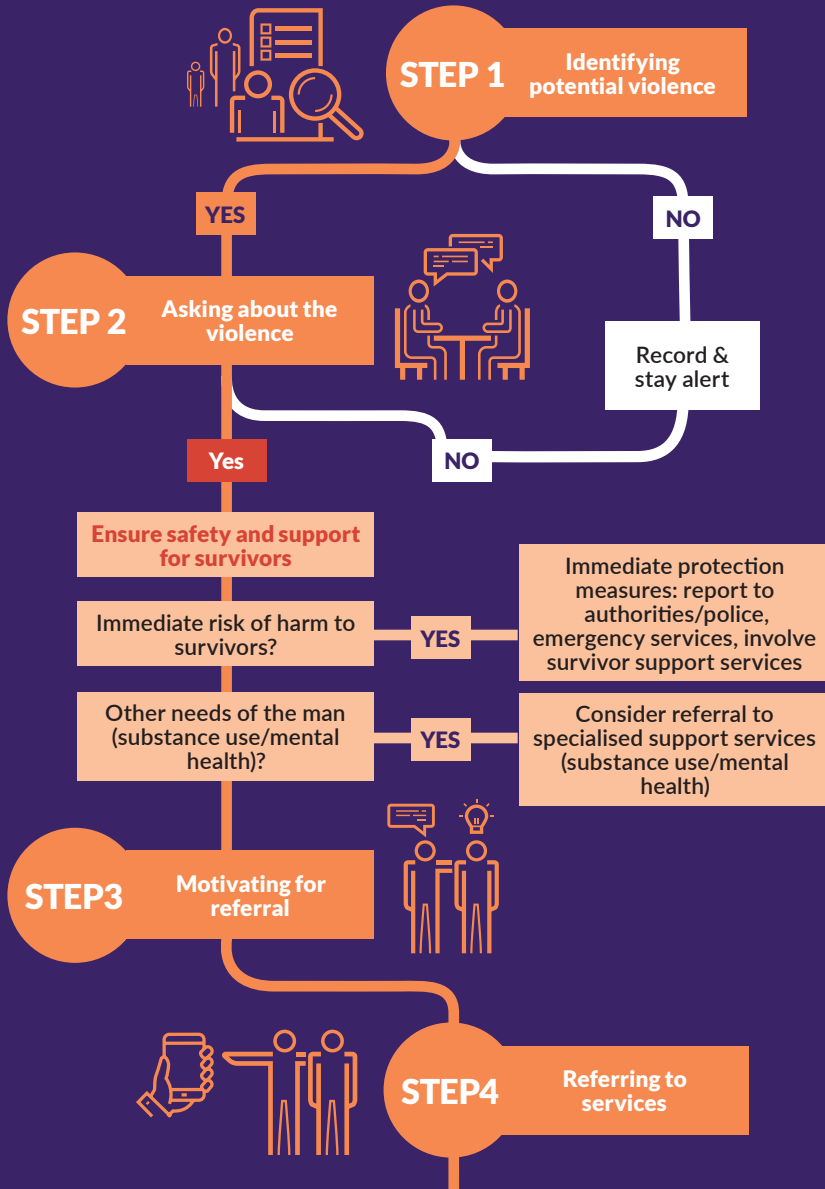
Men as fathers of young service users



Three good reasons to talk to them

- 1. Intimate partner violence is a social problem.** We can only stop it if we all work towards a solution. If you are in regular contact with men in your work, you have the unique chance to intervene and start a process of change.
- 2. Experiencing domestic violence impacts children severely.** It increases the probability of anxiety, depression, substance use and much more. Working with fathers and motivating them to change their behaviour will vastly improve their children's lives.
- 3. Violent behaviour is the choice to act abusively.** If they are willing and receive the right support, abusive men can change harmful patterns and behaviours. Sometimes all it takes is the offer of a conversation to start a process of change.

How to engage male clients perpetrating domestic violence



Staying involved/follow-up:
Facilitating change process, coordinating with perpetrator programme, monitoring risk

Record the man's disclosures and your observations, interventions and referrals/coordination in the case file.

STEP 1

Identifying potential violence



Three possible ways to gather information on domestic violence at your work:

1. Asking everybody who uses your service (can be safer for survivors).
2. Being sensitive to signs of violence and respond when you see them.
3. Receiving information from a third person e.g. court, (ex-)partner, children.

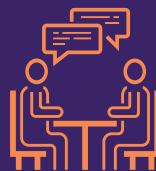
Possible indicators

- He talks about relationship behaviours that constitute different types of violence or abuse (physical, sexual, emotional, economic or social).
- He displays excessively jealous behaviour and control over his partner "who always has to tell him where they are".
- He has sexist or misogynistic attitudes or makes sexist or misogynistic comments.
- He says things that could indicate critical conflicts in the relationship (e.g., "big fight" or "bad argument", etc.).
- He always accompanies his partner, even during routine visits and insists on being in the sessions (and his partner is disappointed or in a hurry to finish).

- He speaks for his partner, interrupts or corrects them, doesn't let them talk, discredits or devalues them, and tries to make decisions for them.
- He justifies or minimizes his partner's injuries or psychological states, which may be due to violence.
- He blames his partner for his problems.
- He struggles to manage anxiety and stress; he has mood swings and/or raises his voice.
- He shows two apparently opposite attitudes: Being silent, defensive, refusing to answer questions vs being overly talkative and sometimes inappropriate, overly compliant, smiling too much, and being too present, especially during conversations with his partner.
- He shows a menacing non-verbal attitude, or his gestures invade his partner's space.
- He is violent or abusive towards his partner in the session or waiting room.
- He tries to manipulate or control the partner, professional or situation (e.g. the type of questions or the interview duration).
- He disqualifies female professionals as women or shows a demeaning and aggressive attitude towards female professionals.
- In his presence, the partner lowers their gaze, is silent or shows a submissive attitude.
- Differences in his partner's attitude when in a session with him compared to when he is not present.
- He accuses his partner of being the cause or trigger of the conflict or denies any conflict.

STEP 2

Asking about the violence

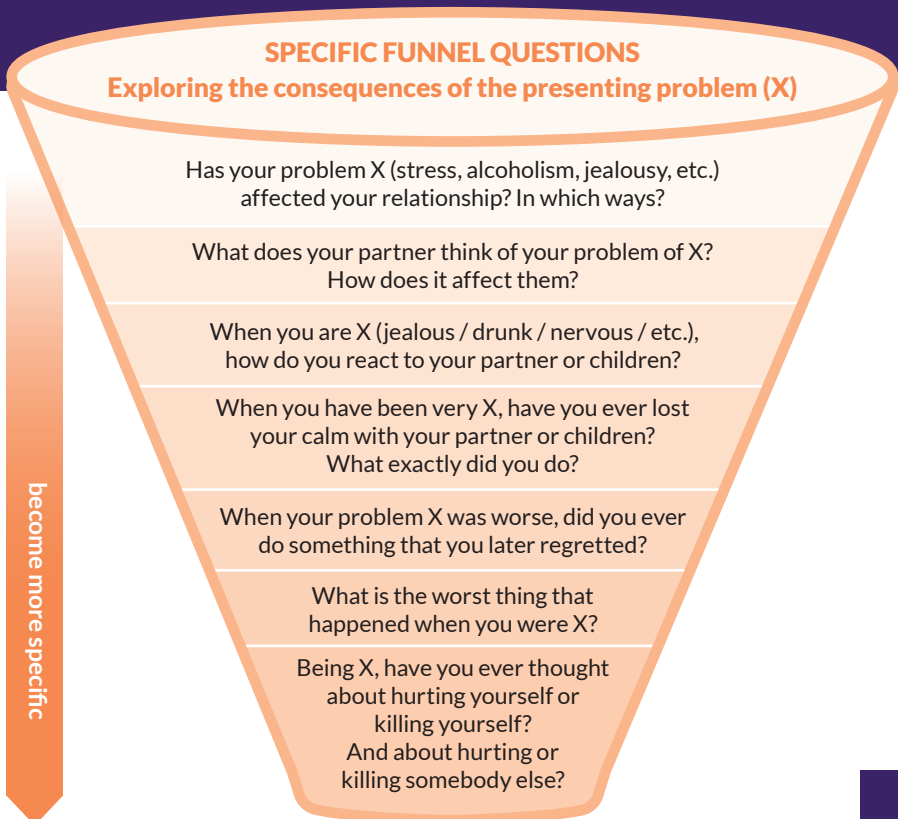


GENERAL FUNNEL QUESTIONS

- How are things at home/with your partner?
How would you define your relationship?
- Most couples argue sometimes.
How do you and your partner handle disagreements or conflicts?
- How do you normally act when you are angry?
What happens when your anger gets worse?
- Do you think your partner (or children) are ever scared of you?
- Have you said or done anything that you later regretted?
Have you ever acted in a way that embarrassed or scared you?
- Have fights ever become physical?
- Are you ever worried about your behaviour?
- Do you feel jealous when your partner is with other people?
- What do you think of your partner studying/working outside the home? What would you say if they wanted to do it?
- What do you think about your partner spending time with their family or friends?
- Do you shout at your partner or do you think you sometimes treat them in an authoritarian way?
- Have you ever hit or pushed them?
- Have you ever threatened to hurt them?
With a weapon?
- Have you ever hurt them?
- Have the police ever come for an argument or fight?

become more specific

- Ask about violence only when alone with the man.
- Ask for more details when there are contradictions or you do not understand.
- Initially accept minimisation, but then ask him to define the violence more clearly (What do you mean by “big fight”?).
- Ask about others’ perspectives (e.g. partner or children).
- Beware of victim blaming, presenting as the “real” victim and other manipulation.
- Keep a balanced, non-judgemental attitude.
- Acknowledge negative feelings and worries, but focus on his actions.



STEP 3

Motivating for referral



- The goal is to motivate perpetrators to take responsibility and initiate change based on inner values and hopes, not just fear of consequences.
- Exploring and strengthening the man's values and reasons for change is more useful than confronting and persuading him.
- Focus on the idea that the perpetrator is struggling and can change his behaviour.

Invite him to reflect on his behaviour and its consequences in the light of his own values and goals using the five principles of motivational interviewing:

1. **Express empathy** for the client.
2. **Show discrepancies** between the client's goals and values and their current behaviour.
3. **Avoid argumentation** and direct confrontation.
4. **Go with client resistance** instead of fighting it.
5. **Support the client's self-efficacy** or their belief that they can change.

Some examples of questions that invite the man to take responsibility

What kind of a father did you hope to be/would you like to be?

How would you like your kids to see you/think of you in 10 or 20 years?

Have your kids seen you act violently or abusively? How do you think it affects them?

Do you think your children respect you or fear you?

How might your children benefit if you did some work on your behaviour?

How do you think your relationship with your children might change if they didn't feel scared of you?

What could become possible in your life if you didn't use violence when you felt upset?

What type of father would you like to become, or be more of the time? What would it mean to you if you were that father (more of the time)? What do you do that gets in the way of this?

If there is enough motivation and commitment to engage in a change process, the next step is referring the man to a specialised perpetrator programme:

“It sounds like you want to make some changes for your benefit and for your partner/children. What choices do you have? What can you do about it? What help would you need or like to make these changes?”

STEP 4

Referring to services



Referral to a specialised service or perpetrator programme requires:

1. Motivation and commitment to change
2. Acknowledgement of the problem

How to create a good referral process:

- Provide information to the perpetrator programme about the man's violence.
- Establish an agreement with the perpetrator programme regarding the referral process and coordination.
- Inform the man about reasons for the referral, benefits, rights, responsibilities, and expectations.
- Inform yourself about exclusion criteria, such as severe substance use or mental health issues to avoid sending your client to a programme that won't accept him.
- Consider referrals to support services for other needs, such as substance use or mental health problems.
- Avoid referrals to general anger management, couples counselling, or general psychologists. They cannot effectively address the specific issues of domestic violence, endangering survivors.

We recommend:

- Identifying barriers that could keep the man from contacting the service.
- Normalising the referral and his help-seeking behaviour, e.g. by mentioning that many men participate in these programmes and that you frequently recommend them.

Do	Don't
<p>Prioritise the safety and well-being of the survivors at all times and ensure they receive adequate support and safety planning.</p>	<p>Prioritise the perpetrator's needs and wishes.</p>
<p>Be aware of any signs or indicators of domestic violence in your clients' language and behaviour.</p>	<p>Go into conversations with the clients unprepared to see the signs and indicators.</p>
<p>Respond to any disclosures and ask men about domestic violence and abuse.</p>	<p>Let disclosures of violence go by without asking about what was said.</p>
<p>Respectfully clarify that violence and abuse are unacceptable and a choice.</p>	<p>Excuse or minimise any violence.</p>
<p>Communicate that domestic abuse includes different behaviours beyond physical violence.</p>	<p>Support the idea that emotional or psychological violence is less harmful than physical violence.</p>
<p>Be aware of your feelings about the man's behaviour and distinguish the behaviour from the person.</p>	<p>Let negative feelings interfere with providing a supportive service and don't be judgemental.</p>
<p>Be empathic and understanding while being aware of minimisation, denial and victim-blaming.</p>	<p>Collude with the perpetrator or give in to his manipulations.</p>
<p>Convey the possibility of change and explore the man's motivations for it, e.g. the impact on his children.</p>	<p>Ignore barriers to him acknowledging his abuse and seeking help, such as shame, and fear of child protection services.</p>
<p>Establish a referral pathway to a specialised service in your area and refer the man to it.</p>	<p>Refer to a service or therapist that is untrained in domestic violence and abuse.</p>
<p>Only discuss domestic violence in separate sessions.</p>	<p>See both partners together to discuss the violence.</p>



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