

Reducing abusive behaviour of perpetrators on partners and children

Introduction

This report will investigate a possible process to reduce the abusive behaviour of perpetrators on their partners and children. It will start with an explanation that focuses on the need for perpetrators to change their violent behaviour, developed from a borderline personality disorder (BPD), due to its impact on themselves and their families. The paper will explain the concepts of the perpetrator programs and how their focus has changed. Then it will introduce the good lives model approach as an alternative intervention for working with perpetrators of domestic violence before going into the steps an individual needs to consider when going through behaviour change. From there, the report will critically review the theoretical perspectives of the behaviour change of the extended model of goal-directed behaviour and determine whether this theory is suited for working with people with abusive behaviours. The report will end by analysing the potential barriers of using the good lives model and providing suggestions for overcoming these barriers.

Rationale

The Australian Bureau of Statistics (ABS) (2016) estimates that around 17 per cent of Australian women experience a form of violence from their intimate partner from the age of 15. Family and domestic violence (FDV) can exist in various forms, but the focus is on the perpetrator's aggression developed from BPD (Lieb et al., 2004). The cause of BPD is complex; however, genetic factors and adverse experiences from childhood, like physical or sexual abuse, can contribute to the development of the disorder (Lieb et al., 2004). People with BPD are likely to experience self-image issues, difficulty controlling emotions and their impulsive aggression and frequent mood swings can contribute to their failed relationships (Lieb et al., 2004). With their low self-esteem and need for control, the perpetrators may

express verbal aggression, threat with physical violence, and use coercive power on their partner and children (Breiding et al., 2015). Unfortunately, relationships with verbal aggression can lead to physical violence on partners and children when there are high socioeconomic disadvantages or ineffective communication (Breiding et al., 2015), another indicator of a person with BPD.

In 2020, Australia reported 145 victims of FDV from homicide, 57% (82 victims) were due to murder, while 86% (124 victims) of the deaths occurred in a residential location (ABS, 2021). With the high percentage of homicides occurring in the home, there are concerns the children who witness the violence will later display violent behaviours themselves and will likely pass on this behaviour to their children (Blair et al., 2015). Also, victims of intimate partner violence tend to develop anxiety, depression, and suicidal ideations (Prince et al., 2007). Data used in a longitudinal study to explore the impact of partner violence exposure to children indicates that patterns of abusive behaviour at age five is a strong predictor of violence at age nine (Juan et al., 2020). Without intervention, the abusive behaviour will continue with each generation; therefore, it is necessary to break the intergenerational cycle of violence (Juan et al., 2020), and one way to do this is to work on changing the behaviour of the perpetrator.

Critical Review

Initially, the perpetrator programs introduced for domestic violence offenders applied anger management programs and techniques focused on increasing self-awareness and self-monitoring to prevent becoming angry (Langlands et al., 2009). The anger-control methods became unpopular when they realised domestic violence was not just about anger and lack of impulse control but more about the need for power, control and intimidation over the women and children (Pence & Paymer, 1993). The Duluth Model (Pence & Paymer, 1993) recognises

the masculinity and patriarchy attached to men's violence was persistent, controlling and allowed the men to have their needs met, verifying that men who offend are in positions of power. Therefore, programs that use a deficit-driven approach that highlights poor behaviour are likely to cause the offenders to become defensive, unmotivated, and disengage from treatment, contributing to the high rate of attrition reported (Langlands et al., 2009). Another reason for the failure of some FDV programs is their focus on group work instead of individual work with the offenders (Langlands et al., 2009), which happens to be a concept of the good lives model (GLM) (Ward, 2002) program.

The GLM is an intervention framework that uses strength-based approaches for offender rehabilitation by working on an individual's ability to develop personal and meaningful goals while reducing the possibility of recidivism (Langlands et al., 2009). This program started working with sexual assault and violent behaviour offenders, then adapted to domestic violence perpetrators (Ward & Gannon, 2006). The GLM approach identifies and sets goals most essential or valued by the offender to motivate them to live better lives while developing competencies and opportunities to implement treatment plans (Langlands et al., 2009). The program includes the goals and activities needed to achieve the satisfying, fulfilled life that the individuals want to live, reflecting the type of person they want to become (Langlands et al., 2009). This intervention method focuses on the strengths and goals by giving them something positive while reducing their risks. Yet, finding the most suited behavioural change theory to work with is not easy.

With the different behavioural theories to choose from, it can be hard to predict, understand and change behaviour as what may work for one person may not for someone else. Berkman (2018) states there are two dimensions needed to help understand the changes to new

behaviours. The first is the *way*, which is the skills, capabilities, and knowledge required to achieve the goals, and the second is the *will*, which is the motivation, desire, and importance the individual places on achieving the goal (Berkman, 2018). However, Prestwich et al. (2017) declared the need for a third determinant for any behavioural change: environmental constraints. Hence when working to change the behaviour of aggressive perpetrators, they need to have the basic skills and abilities, the intent or motivation and access to resources required to successfully perform the changes (Fishbein et al., 2001). As this paper suggests, the GLM is the intervention to use. Its fundamental concept is to develop life goals to achieve behavioural change; the theory to assist will be the extended model of goal-directed behaviour (EMGB) (Perugini & Bagozzi, 2001).

As a theory, the EMGB provides an insight into how the different elements and concepts influence the individual's intentions. These intentions guide the individual's desire to perform the new behaviour (Perugini & Bagozzi, 2001). The EMGB uses the ideas of the theory of planned behaviour (TPB) and the concepts of the perceived behavioural control (PBC) to determine a person's behavioural intention before it can predict behaviour (Prestwich et al., 2017). However, the EMGB goes further by including the behavioural and goal desires (motivations), the expected positive and negative emotions (affect) and the past behaviour (habit) (Prestwich et al., 2017). An offender has a goal desire to stop abusing this partner and children. His behaviour intention is to attend perpetrator counselling for six months. EMGB will consider his past behaviour (how often he attended counselling previously) and the anticipated emotions (how he will feel about completing the program) to determine the likelihood to stop abusing. If his goal desire is strong, he will act on his intentions and attend all the counselling sessions for six months. But if his desire is weak, it will impact the

relationship of his behaviour (counselling) and the intention (completing the course), and he will not achieve his goal. Orbell & Sheeran (1998) defined this as the intention-behaviour gap.

Using the GLM interventions and the EMGB theories together allows the offender to achieve their goal desire to stop abusing their partners and children and live a fulfilling life. The GLM program prepares the offenders by determining their most essential and valued goals from a holistic perspective; then, the EMGB is the theory that enables the offender to achieve his goals (Perugini & Bagozzi, 2001). When behaviour changes are not likely to happen independently, setting goals will make it possible (Berkman, 2018). Berkman (2018) states that to change behaviour involves the executive function and cognitive control that refers to completing the challenging tasks, doing things you have not done before, and giving it your conscious attention. Therefore, using the EMGB theory will keep the offenders on track and committed to achieving the goal because there is a constant reminder of the final goal desires (Prestwich et al., 2017). The added advantage of using the EMGB compared to other theories is the anticipated emotions (how you will feel), behavioural desires (when reasons transform into motivation) and habits (what happened previously) (Prestwich et al., 2017). The EMGB theory goes further to unpack the offender's attitude and considers how the people close to them feel about the behaviour change and how much control they have over it (Perugini & Bagozzi, 2001). The EMGB is a practical theory for working with offenders and their behaviour change.

Barriers

The GLM was developed to work with sex offenders and is only new to working with perpetrators of domestic violence (Langlands et al., 2009). The model uses the ten primary goals, which cover all the aspects needed for a fulfilling life. However, some points could

impact the success of the framework. The first is securing the goods for each offender. The process will require assistance from a clinician who fully understands the GLM concepts to break down the ten primary goods and the secondary or instrumental goods needed to achieve the primary goals (Langlands et al., 2009). It is likely that not all the perpetrators have the skills or capacity to complete the treatment plan. Therefore, the responsibility is on the clinician to build rapport with the consumer, get to know them then prompt or make suggestions on the goods that will work. Another barrier may be the offenders needing to be self-reflective, and to do this, they need to be emotionally and mentally ready (Langlands et al., 2009). To overcome this will depend on how vulnerable the consumer is and how they see themselves for who they are and who they want to be. Individuals wish or need to see themselves as good (Rosenberg, 1979) and become better people. Ensuring the offenders know they are in a safe place and using the strengths-based approach will assist. The biggest concern with offenders in any perpetrator program is the possibility they fail and revert to their normal behaviour of using aggression to get their needs met (McGinn et al., 2019), which places the partner and children at risk. As part of the GLM program, the practitioners will find motivation from the offender's past behaviour then amplify the attributes of the positive behaviour by devaluing the negative behaviour (Berkman, 2018). The offender will find motivation from his goals, whether for a better life, court-orders, child safety, or wanting to reconnect to their children and placing a value on these will make the difference (Berkman, 2018).

Conclusion

The report highlighted the need for an intervention for the behaviour change for an aggressive perpetrator who abuses their partners and children. It explained where the aggression might stem from then mentioned the different perpetrator programs that may assist. The paper introduced concepts of the GLM as possible interventions for offenders to change

their behaviour through a strengths-based instead of deficit-driven approach. A review of the different behavioural theories followed before discussing the EMGB as a theory to change behaviour. The report found that EMGB theory can assist in keeping the offenders motivated to complete their behaviour change. After that, solutions for potential barriers to using the GLM verified any possible concerns.

Instructor



It delights me to see that you have taken all the directions I suggested in the Collaborate sessions into account. With this assignment you demonstrate a great understanding of how the three assessment tasks needed to be addressed.

The assignment starts with an excellent introduction; it mentions the assignment's aim and provides a comprehensive overview of what will be discussed. This immediately gives the reader a good idea what the assignment is about.

The section that follows gives a good insight regarding the problem of domestic violence, and then especially what underlies violence and aggression towards partners and/or children. There is a logical sequence displayed in this section where you work your way towards stating that one way to target domestic violence is by changing the behaviour of the perpetrator. This is a great way to link to the next section.

The specific approach to tackle domestic violence that is explored in the 'Critical Review' section is the GLM. Sufficient detail is given to what this model is about and what its core principles are. You then provide an interesting discussion on the challenges to select a theory on behaviour change that could have explanatory value in helping to gain an understanding of what might be the 'ingredients' of the GLM that explain its process and impact/success. The EMGB then indeed seems the right fit. The interplay between the GLM and the EMGB, and how this combination could help in

preventing perpetrators relapsing in aggressive and violent behaviour, is excellently described.

You consider some sound barriers, and describe various ways of how these barriers could be overcome/tackled.

The only part of the assignment that is lacking behind in quality, is the conclusion. In the way it is written down it reads more like a summary rather than a reflection on the main bottlenecks that were discussed throughout the assignment. Try to elevate your thesis here to the next level and argue in succinct wording why the GLM might be promising in preventing perpetrators from relapsing in violent and aggressive behaviours, and then specifically through the lens of the EMGB.

You demonstrate very competent writing skills, and referencing is done adequately. There are however various hiccups in the presentation of your reference list; please check inline comments for further detail.

I enjoyed marking your assignment Illy. It provided me insight in a model that could tackle domestic violence I was not familiar with yet. Your reflection on the merits of this model through the lens of EMGB was truly of an excellent level, and therefore the HD is more than deserved. I look forward to marking your final assignment.