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Agreement# 40063171

Experiences of Men Who Attended Domestic Violence Treatment Programs and Made Changes to End Violence in Their Intimate Relationships



by *Crystal Giesbrecht*

My Master of Social Work thesis research study at the University of Regina (summarized in a presentation at RESOLVE Research Day 2014), sought to understand experiences of men who were violent in their intimate relationships, attended domestic violence treatment programs, and successfully made changes toward an end of their violent behaviour. Phenomenological research methods were used to conduct in-depth qualitative interviews with four men who attended Domestic Abuse/Violence Treatment Programs (DAVTPs) and made changes to their behaviour. While not all men who attend DAVTPs make changes, a change among even a few participants makes a substantial difference in the lives of women and children.



Crystal Giesbrecht

Whether they were court-mandated to attend a treatment program or self-referred, it took some time—in some cases two or three years—for the interviewed participants to “buy in” to the program. Until that happened, other things helped to keep them there, such as potential legal impacts and feeling welcomed and supported by program facilitators. Once these men accepted their responsibility—and understood that they needed to work on themselves—they could make changes. Changes that participants made to end violence in their relationships began with an acceptance of responsibility for their violent

behaviour, and recognition that the cause of their violence and the changes that they had to make were internal, not external. Realization that the changes that needed to happen were within themselves gave the men agency to do something about the problem.

The men’s descriptions of their formative years included the notion of typical masculine behaviour; they spoke of growing up with the idea that being a man meant not showing their emotions. Getting in touch with their emotions helped the men to

be successful in the DAVTPs and to make positive changes in many of their relationships, not just in their intimate partnerships.

Three of the four participants continued to attend maintenance programs after completion of the DAVTPs, as they continued to need a safe space to talk about their feelings. These men all emphasized

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The 2014 Manitoba Trauma Forum



by the Manitoba Trauma Collaborative (MTC)

The first Manitoba Trauma Forum in 2007 resulted in concrete recommendations to build awareness and capacity around trauma-informed care in Manitoba. Upon achievement of these recommendations it became apparent that the next steps were to make systems of care more trauma-informed. In an effort to guide this process the MTC turned, as they did in the first forum, to Manitoba service providers, from direct services and from management and policy making.

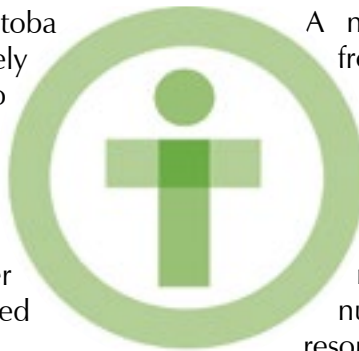
On November 3 and 4, the second trauma forum—a joint undertaking by the MTC, the Manitoba Trauma Information and Education Centre (MTIEC), and the Manitoba Government—was held. Approximately 250 attendees met in Winnipeg to discuss the next steps to make services and systems trauma-informed in Manitoba. Northern, rural, and urban areas of Manitoba and health, justice, family violence, child and youth, shelter and counselling agencies were represented among conference attendees.

This two-day conference provided information on evidence-based trauma-informed approaches to services and systems. Keynote speakers included **Dr. Heather Larkin**, Associate Professor at the School of Social Welfare Policy at the University of Albany (SUNY), New York, who developed an application of the Restorative Integral Support Model for services to the homeless and has done research on Adverse Childhood Experiences (ACE) in social work education and community programming. Dr. Larkin spoke about the results of the ACE Study in the U.S. and how the assessment of these experiences could help agencies and systems become more trauma-informed. More information on ACE studies can be found at www.cdc.gov/violenceprevention/acestudy/index.html. **Nancy Poole**, Director of the Centre for Excellence in Women's Health in BC, and Prevention Lead for CAFASD, has been involved with building knowledge exchange networks and developing programs on issues

related to trauma and substance abuse. Ms. Poole spoke about how to make agencies and systems more trauma-informed and provided examples of how this is being done in Canada. **Dr. Ed. Connor**, a clinical psychologist from Ontario, presented a First Nation's perspective on trauma-informed practices and how First Nations and mainstream approaches are more similar than different in goals and approaches. Dr. Connor is on the CASP (Canadian Association of Suicide Prevention) board of directors. A video of Dr. Larkin's talk and the PowerPoint slides for Ms. Poole's and Dr. Connor's presentations can be found on the MTC website www.trauma-informed.ca.

A number of questions were generated from these presentations, many of which have been posted for discussion on the online trauma forum. The online forum promotes trauma-informed practices and policies by facilitating conversations and information sharing on trauma-related issues. This forum consists of a number of topics such as intervention, resources, policy, and program development. Individuals can post questions, read responses, and add to the conversation on previously posted questions. MTC invites everyone to become part of the online community at www.traumacommunity.com.

In addition, through small group discussions, the forum gathered information from attendees related to how to make their workplace, organizations, and larger systems of services more trauma-informed. Responses to these questions were gathered and will be analysed and used to develop recommendations for next steps in the process of becoming a trauma-informed province. A report consisting of a summary of the forum proceedings, responses to the small group discussions, and the resulting recommendations and immediate, intermediate and long-term goals will be developed and posted on the MTC website by March 2015. These goals will guide the MTC's future activities. Anyone who wants to join the MTC in these new endeavors can contact the MTIEC at mtiec@klinik.mb.ca. ☘



Manitoba Update: *RESOLVE* Community Working at Home and Around the World



RESOLVE has always had a keen interest in working with colleagues around the world. Over the years we have hosted research scholars from Australia, Portugal, China, Sweden and England. We learn a great deal from these international exchanges and often have the opportunity to share our work internationally. An excellent example of this exchange are the international activities of **Joan Durrant** and **Christine Ateah**, both active members of our Steering Committee.

Joan Durrant was awarded a grant from Grand Challenges: Stars in Global Health to mobilize *Positive Discipline in Everyday Parenting* (PDEP) in low- and middle-income countries. She created this universal violence prevention program in collaboration with Save the Children Sweden. The program helps parents shift their focus from punishment to non-violent, mutually respectful problem solving with their children. Its framework is based on recent research on children's emotional, cognitive and brain development, as well as children's rights to protection, participation and dignity. With the Grand Challenges grant, Joan and her team are working with local Save the Children staff to implement the program in

Kosovo and in Kenya's Dadaab Refugee camp, as well as in Ontario and Saskatchewan. Christine Ateah, is a key member of the PDEP team. She is currently in Prishtina, Kosovo, to train local Save the Children staff, and build their capacity to sustain the program in that country.

Jane Ursel was nominated by the American Embassy to participate in a three-city tour in the United States this February. Jane is one of ten Canadians selected to visit communities around the country that have developed innovative domestic violence programs. While the itinerary has not yet been finalized, we look forward to a report on this trip in our next issue.

While many of our RESOLVE members are active internationally, we also have a stellar cast of Steering Committee members who work locally to create safer homes and safer communities. As we celebrated the imminent retirement of a long time Committee member **Tim Wall**, we realized what rich human resources we had sitting around the table at each Steering Committee meeting. As a result, we decided that on our provincial update pages, we would introduce you to one member (each issue) of this amazing cast of community activists and program innovators. ☘

Thank You and Farewell to Tim Wall

by Jocelyn Proulx



Tim Wall

For the last 35 years **Tim Wall** has worked towards promotion of compassion and evidence-based research into all levels of care, first as a clinician and then as the Director of Counselling Services at Klinik Community Health Centre. As Executive Director for the Canadian Association of Suicide Prevention for the past five years, and the current Co-chair of the Winnipeg Suicide Prevention Network, Tim has been active in bringing suicide prevention training and resources to the service provider community. As Chair/Co-chair of the Manitoba Trauma Collaborative (MTC) for the past seven years, he has championed trauma-informed services within all service sectors and levels of policy. Among the many initiatives initiated by Tim and the MTC have been the development of the Manitoba Information and Education Centre that provides a plethora of online resources, the development and evaluation of in-person and online training for trauma-informed recovery, and the organization of two in-person trauma forums and one online forum that have guided the work of the MTC and resulted in the term trauma-informed as part of the common service provider vernacular. RESOLVE is proud to state that Tim was a long-time member of our Steering Committee and supported RESOLVE through a number of research projects and initiatives. ☘

Saskatchewan Update



by Kaitlyn Giles

As a research assistant working on the *Rural and Northern Community Response to Intimate Partner Violence* in Regina, I have had the privilege of participating in numerous phases of the second year of the project. From the transcription of interviews to assisting in the Northern focus group, I have observed the development of this project and I have grown as a person. The purpose of this article is to discuss a few of the invaluable lessons, learned primarily during my experience assisting with the Northern focus group.

1. Completely comprehending the conditions that precipitate intimate partner violence (IPV).

As an academic, I assumed that I had a strong understanding of the factors, like low socio-economic status, isolation or lack of access, which can place rural and Northern women at an increased risk to experience IPV. However, while sitting in my academic ivory tower with my theoretical concepts, I had never actually experienced what poverty, or isolation was. After my experience up North, I realized how little I actually understood.

Although I will not ever attempt to compare my first-hand experiences of driving through a community to the everyday experience of a resident in that community, I was forever changed by what I saw. Upon first glance, the low socio-economic conditions of our site were quite obvious; it was clear there was no economy in this community. Additionally, the isolation was very evident; there was only one way into the community. The closest town to our site was over an hour away, via vehicle, on less than favorable roads. Lastly, the lack of services available in the town really stood out.

Through this visualization and the discussion in the focus group, I was better able to connect the dots. I began to see how factors interact to place individuals at an increased risk to experience violence. For example, if an individual lives in poverty in an isolated community with limited services, how are they supposed to protect themselves from violence? Where

are they supposed to go? Who are they supposed to turn to? These conditions, among others, severely affect the one's ability to protect and free oneself from violence.

2. Sometimes leaving is not that simple.

I always used to believe that if an individual were ever hit that they should just leave. Through this project—especially during the focus group—I have come to learn that the solution is never that black or white. Firstly, abuse is insidious; it progresses from emotional to verbal to physical. By the time it progresses to physical violence, the individual has already been beaten down, confidence destroyed. Leaving becomes challenging. Secondly, not all abusive relationships are completely negative, as there are bonds that may keep people connected despite the pain and damage the partner might inflict. Thirdly, for women living in rural and Northern conditions (due to limited services), leaving means potentially giving up your children, community, home, culture, family and the life you know.



Kaitlyn Giles

3. A community cannot be defined by its statistics.

Despite the statistics on violence in our Northern site, I could not help but notice the sense of hope and optimism that many of the service providers hold. They were all very welcoming, knowledgeable, proud of, and connected to, their community; they had a vision of a healthier and happier way of life. However, this vision of a healthy, non-violent community can only be achieved if severe gaps in services are addressed.

In conclusion, my journey with this project has been cathartic and educational in many ways. This experience has helped me to better understand IPV from on an academic, personal, and professional level. Carrying this knowledge forward, I am dedicating my Master's of Public Policy research to creating policy to help remedy service gaps—primarily in the area of justice responses—for victims of intimate partner violence. ☘

Alberta Update: *Perceptions of Risk and Coping Mechanisms Among Victims of Domestic Violence*



by Lorena Kembel



Lorena Kembel

In an attempt to reduce recidivism among offenders and provide greater safety for victims in Central Alberta, a multi-agency approach was developed to deal with domestic violence. Comprised of stakeholders from the Royal Canadian Mounted Police (RCMP), Community Corrections, the Crown Prosecutor's Office,

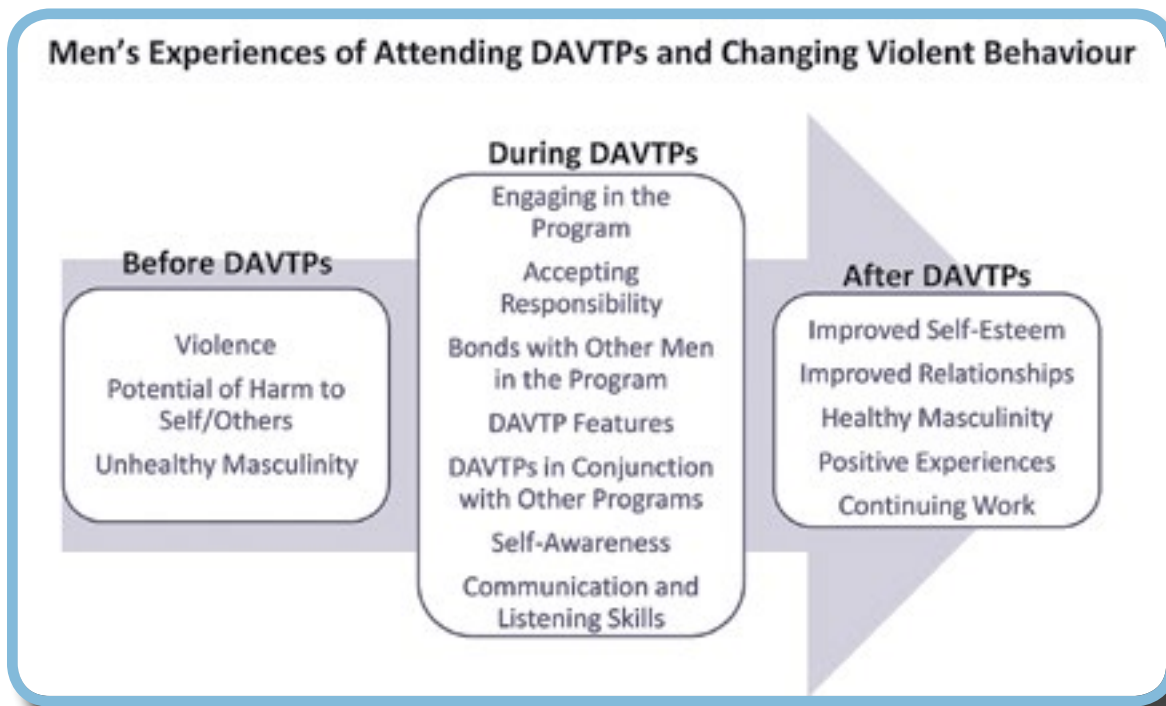
Children and Family Services, Women's Outreach, as well as the local Women's Emergency Shelter, this collaborative approach aims to provide a coordinated response to domestic violence. As part of this initiative, a pilot project was undertaken to equip high-risk domestic violence offenders with Global Positioning System (GPS) tracking technologies. Upon conviction, a court order allows for real time Electronic Monitoring (EM) of high-risk offenders. This order imposes geographic exclusion areas as well as no-contact between the offender and the victim. The victim is consulted throughout the proceedings and must be a willing participant. If the victim is not willing to follow the no-contact provision, the GPS-EM is not imposed.

A women's emergency shelter took this idea to the next level and offered GPS tracking devices to victims of domestic violence. In addition to GPS tracking abilities, this device also has a two-way cellular voice technology and an SOS alert button. A woman can request to obtain the device directly at the Shelter, or alternatively can be referred by one of the Shelter crisis workers or community partners. Prior to obtaining the device the woman provides information on her home, work and vehicle, as well as information on any children and emergency contacts. Information about and a picture of the offender is also gathered. This information is stored at the GPS monitoring centre, whereupon the woman's location is continually tracked. In the event of an SOS alert, the two-way cellular voice function allows for hands-free communication with the control centre. Shelter emergency contacts are also automatically notified of the alert through SMS or e-mail. The control centre operator has the ability to alert local emergency

services and provide them with the victim's GPS location and specific file notes. A shelter contact can also be provided if the emergency responders require more information. A woman can choose to discontinue use of the device at any time.

Given evolving technological advances, GPS tracking has increasingly been applied to domestic violence situations. To date, little research exists on the use of GPS technologies and its effects on victims of domestic violence. As a graduate student in the Department of Sociology at the University of Calgary, I wanted to look at how victims of domestic violence are impacted by this technology. Through this study I will examine differences and similarities in how victims perceive and cope with domestic violence—with and without the presence of GPS technologies—with the goal of contributing to a greater understanding of the benefits and challenges associated with these programs. In addition, this research will also add an important layer to victimization literature by broadening our understanding of the scope of protective measures (and implications of these measures), with a specific focus on the nature of victim protection in the circumstances of domestic violence.

To achieve this understanding, I will look at two groups of women: women who have participated in the program available to them through the local Women's Emergency Shelter, as well as women whose former partners (offenders) have been placed on the court mandated GPS device. As a comparison, my study will also look at women at the Women's Emergency Shelter who have not been part of either of the GPS programs. This study will attempt to understand how perceptions of risk and coping mechanisms among the groups of women differ in order to inform policy and better protect women involved in domestic violence. To date, 16 interviews have been conducted and are currently being transcribed, with qualitative analysis of the data to commence this spring. Given that the project was undertaken for an MA level thesis, the size of the groups are meant to be large enough to speculate on the differences among them, but also reflect the reality of the difficulty in recruitment of participants, as well as time constraints of an MA program. I look forward to sharing results in a future RESOLVE newsletter. ☘

Treatment Programs.. cont. from Page 1

Building self-esteem and becoming aware of their personal strengths increased men's feelings of agency and helped to build their positive self-esteem and feelings of self-efficacy, which assisted them to make changes in their lives.

After attending DAVTPs, these four men successfully refrained from perpetrating

that they felt that they could not talk about their emotions or the things that they learned in the programs to their male friends. An important finding of this study was that men need a group or a person to talk to after completion of their time in the DAVTP, whether it is a maintenance group, support group, or a relationship with a peer or mentor. This study found that closed groups work especially well, as they increase the feeling of safety and increase bonding between participants.

Overall, things that participants found most helpful included the safety of the group environment and the bonds that they formed with their co-participants. The most important things that participants learned in the programs, which were intrinsic to their process of ending violence in their relationships and remaining violence-free, included increased self-awareness; improved communication skills; and the realization that they needed to continue to work on themselves. Self-awareness is vital not only in terms of noticing and coping with negative emotions, but in recognizing one's own strengths. An awareness of their own positive attributes and skills helped the men increase their self-esteem and build the sense of self-efficacy that they needed to make sustainable changes.

Another finding of the study was that self-esteem—which is likely already low in men who perpetrate intimate partner violence—was lowered even further after arrest and/or self-identification as a perpetrator of violence.

violence in their relationships, and gained improved communication skills, emotional awareness, and self-esteem. All participants reported improved relationships with others in their lives beyond their intimate partner. From the men's narratives about the changes they experienced after participation in the DAVTPs, it was apparent that the program helped men to make positive changes that affected all areas of their lives and improved their situations overall.

Results provide recommendations for practice, including the length of time participants spend in treatment—often months or years as opposed to weeks—and opportunities for them to receive continual support, such as maintenance groups, after completion of program requirements. These results also point to the need for more research into what helps men to change their abusive behaviour.

While the change process of one's violent behaviour is a difficult and lengthy—and certainly not all perpetrators of intimate partner violence will change—positive outcomes seen by these participants and others like them indicates that this work is worthwhile. I believe that the work that helps men end the violence in their lives can increase women's safety and improve the lived realities of women and men. ☘

Announcements, Conferences and Events



International
Women's Day

March 8 – International Women's Day 2015: MAKE IT HAPPEN. Support International Women's Day online.

Use your voice via social media:

- #MakeItHappen
- #womensday

- #IWD2015
- #internationalwomensday
- #PaintItPurple

Interact with womensday on:

- **Twitter:** twitter.com/womensday
- **Facebook:** www.facebook.com/Internationalwomensday
- **Youtube:** www.youtube.com/results?search_query=International%20Women's%20Day
- **LinkedIn:** www.linkedin.com/groups/internationalwomensday-1406777
- **Pinterest:** www.pinterest.com/womensday/pins/

Search for local events at www.internationalwomensday.com/esearch.asp?country=37.

April 22 – Healing the Pain...Reclaiming the Spirit: Laurel Centre 30th Anniversary Celebration. The Laurel Centre invites you to attend our *30th Anniversary Celebration Breakfast* at the Fort Garry Hotel, Provencher Ballroom. The program will begin at 7:30 a.m. Share in the celebration with an energizing breakfast with guest speaker **Silken Laumann**—four time Olympian and author—as well as door prize and raffle. Tickets can be purchased for \$35 per person, or \$325 for a table of 10. All table purchases will be recognized on the event program. For more information, or ticket purchase, please call **Joyce Coady** at **204-783-5460 ext 16**, or online at www.eventbrite.ca. (Note an additional fee will be charged for processing).

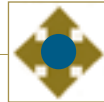
April 24 – Annual Silent Witness Project Memorial, presented by The Family Violence Consortium of Manitoba. This event will be held 11:30 a.m. – 1p.m., at the West End Cultural Centre, 586 Ellice Avenue, Winnipeg, MB. The Silent Witness Project welcomes all members of the public to honour and remember the Manitoban women who have died by the hands of their partners. During the Memorial, speakers will address the issue of domestic violence and the families in attendance may speak about their family member.

The Silent Witness initiative consists of a travelling exhibit of life-sized wooden silhouettes; each red figure represents a Manitoban woman who has been murdered by her intimate partner. In each case, the woman's partner has been convicted of the murder or both have died in a murder/suicide. Because these women no longer have a voice, the silhouettes are called the Silent Witnesses. For more information please call **Joyce Coady** at **204-783-5460 ext 16**

May 7– Golden Apron Gala Cooking Competition, presented by Wolseley Family Place at the Caboto Centre in Winnipeg, MB. Jan Sanderson, Chief Cook of the Flashes in the Pan, winners of the 2014 Golden Apron Gala Cooking Competition, has thrown down the Golden Gauntlet, challenging Teams of Competitor Cooks to step up to the (hot) plate once again! Everyone is invited to put forward a Team to compete with these fierce contenders. If you think you have what it takes, let us know! This year promises to be as exciting as last year . . . here's a little video on the Wolseley Family Place website to whet your appetite www.wolseleyfamilyplace.com. For more information contact **Pamela Mason** by e-mail at nowhere@mts.net or by telephone at **204-774-1837**.



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Carolynne Boivan Bursary

February is the time of year that RESOLVE Manitoba puts out a call for applications to the Boivin Bursary. The bursary was established by colleagues and board members of RESOLVE Manitoba to acknowledge the contribution of Carolynne Boivin, Past President and founding member of the Prairieaction Foundation (PAF), in supporting research for the elimination of family violence. This endowed fund is used to assist honours and graduate students, enrolled at the University of Manitoba, who conduct research in the area of family and interpersonal violence. Over the years this fund has grown substantially, and last year there were three successful applicants who received funds from this bursary. A committee of former PAF members and community service providers review applications, then select the successful applicants. To learn more about the bursary—either to contribute to the fund or to apply for the bursary—contact Jane Ursel, Director of RESOLVE at Jane.Ursel@umanitoba.ca. ☘

RESOLVE Manitoba

*~ Dr. Jane Ursel ~
Director (Academic)*

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