

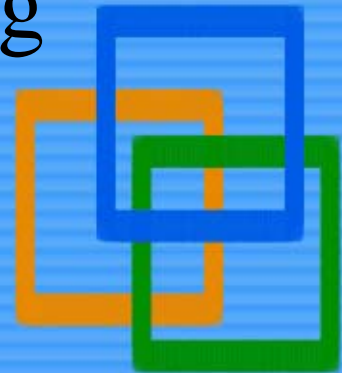


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The State-of-Art of the Outcome and Process Study of Batterer Intervention Programme

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I. Outcome study

- Goals of BIP:
 - Reducing the re-offending rate
 - Increasing victims' safety
 - Holding batterers accountable for the violence used
 - Ending abusive behaviour

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- Outcome indicators:
 - Reducing the re-offending rate
 - Ending abusive behaviour

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1. Criteria of success

- Reports of successful outcomes ranged from 53% to 85% (Edleson, 1996) depending on the criteria of treatment effectiveness.
- Re-offending rate
 - charged by the courts in the period of follow-up assessment.
 - no indication of whether there has been any other form of abuse, say psychological or verbal abuse.



- Practical significance, not statistically significant
 - Ending violent behavior, not decreases in violent behavior
- Primary level of change:
 - Removal symptoms: ending abusive behavior
 - Reducing risk factors: abusive belief, substance abuse, mental illness etc.
 - Increasing protective factors: conflict resolution
- Secondary level of change:
 - Relationship enhancement, communication
 - batterers' positive behavior, social skills, pro-social and anti-violence attitudes, egalitarian partnership, psychological and social functioning.

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2. Source of measurement

- Underreporting violence in official arrest rates or men's self-reports
- Victim's report
- Multiple sources
- Follow up period: at least 1 yr.
- Measurement tools: Revised Conflict Tactics Scale (CTS2) etc.



3. Drop-out rate

- Dropout rates tend to be high, ranging from one third to one half and even to two thirds (Edleson, 1996)
- Successful rate, calculation
 - based on program completer
 - including dropouts
 - Including those who originally contacted the agency



Example - IMAGO

- Based on caseworkers report (included information from the victims)
- Criteria: ending violence within 1.5 yr
- Dropout rate: 17.6%
- Success rate: 78.6%
- If the number of dropout members is included, the success rate drops to 64.7%

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4. Research design

- Experimental group: control group with randomized sample
- Quasi-experimental: control group with matched sample

Experimental gp	A	x	B
Control gp	A1		B1



- Use follow up period as comparison:

A_x B1 B2

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II. Process study

Transtheoretical Model of Change

- Prochaska and DiClemente (1982, 1984) developed a model of "processes of change"
- Temporal dimension of change
- Define a set of tasks required for movement to the next stage

Therapeutic elements (Yalom, 1995)

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Characteristics	Movement markers	Therapeutic elements required
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Stage 1: Precontemplation

<p>no intention to change unaware of the problems resistance to recognizing or modifying a problem</p>	<ul style="list-style-type: none"> - Acknowledge or own the problem - Increase awareness of the negative aspects of the problem - Accurately evaluate self-regulation capacities 	<p>Engagement Instillation of hope Universality</p>
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Stage 2: Contemplation

<p>aware of the problem recognize the problem and evaluate options not yet made a commitment to take action Avoid “chronic contemplation”</p>	<p>Make small steps of preliminary action</p>	<p>Engagement Instillation of hope Universality Imparting information</p>
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Stage 3: Preparation

<p>Take action and report small behavioral changes Not yet reached a criterion for effective action</p>	<p>Engaged in change process that would increase self-regulation and initiate behavior change</p>	<p>Group cohesiveness Existential factors Catharsis Altruism</p>
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Stage 4: Action

<p>Modify behavior, experiences, and/or environment to solve problems</p>	<p>Cognitive, behavioral or emotional change, last for a certain period of time, with a specific criterion</p>	<p>Development of socializing technique Imitative behavior Interpersonal learning The corrective recapitulation of the primary family group</p>
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Stage 5: Maintenance

Consolidation of change
relapse prevention

Remain free of the chronic problem
Consistently engage in new
behavior

Group cohesiveness
Interpersonal
learning

Stage 6: Termination

Termination of problem
Termination of
treatment

No longer experience temptation to
return to troubled behavior
No longer make any effort to keep
from relapsing

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III. Context

- 1. Coordinated community and criminal justice system: referral, sentencing & monitoring
- 2. Standards of BIP
 - e.g. Minnesota, USA: Domestic abuse counselling programme or educational programme required. (Chapter 518B.02)



3. Risk assessment
4. Typology of batterers

Source	Types	%
Dutton (1995)	Psychopathic wife assaulters	40 %
	Overcontrolled wife assaulters	30%
	Cyclical/emotionally volatile wife abusers	30%
Stuart & Holtzworth-Munroe (1995)	Family-only batterers	
	Dysphoric/borderline batterers	
	Generally violent/antisocial batterers	
(Chan, 2000)	General violent abuser	
	Family abuser	50%
	Wife-only abuser	



- 5. Risk factors & design of intervention
- 6. Central programme monitoring mechanism

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Thank you!

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