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What is This?
Turning Points for Perpetrators of Intimate Partner Violence

Kathleen A. Sheehan¹, Sumaiya Thakor², and Donna E. Stewart¹,²

Abstract
Understanding why and how perpetrators of intimate partner violence (IPV) change their behavior is an important goal for both policy development and clinical practice. In this study, the authors investigated the concept of “turning points” for perpetrators of IPV by conducting a systematic review of qualitative studies that investigated the factors, situations, and attitudes that facilitated perpetrators' decisions to change their abusive behavior. Two literature databases were searched and six studies were found that met the inclusion criteria for the systematic review. Most included participants from batterer intervention programs (BIPs). The data indicate that community, group, and individual processes all contribute to perpetrators' turning points and behavioral change. These include identifying key incidents that precede change, taking responsibility for past behavior, learning new skills, and developing relationships within and outside of the BIP. By using a qualitative systematic review, the authors were able to generate a more complete understanding of the catalysts for and process of change in these individuals. Further research, combining quantitative and qualitative approaches, will be helpful in the modification of existing BIPs and the development of new interventions to reduce IPV.

Keywords
domestic violence, batterer, intervention/treatment, turning points

Introduction
Intimate partner violence (IPV) is a major societal and public health concern (World Health Organization/London School of Hygiene and Tropical Medicine, 2010). Defined as “abuse that occurs between two people in a close relationship,” IPV includes both the act and the threat of physical, sexual, or emotional abuse (Tjaden & Thoennes, 2000). It has negative effects on victim’s physical and mental health (Campbell, 2002).

Beginning in the 1970s, substantial efforts were made to combat IPV (Dankwort & Austin, 1999). Activists and public health agencies worked to increase awareness of the issue of IPV and support programs for victims were improved. IPV was criminalized in most Western nations and pro-arrest policies resulted in more perpetrators being arrested and charged for these acts (Price & Rosenbaum, 2009). In response to these latter legal reforms, community and criminal justice organizations developed treatment programs, usually referred to as batterer intervention programs (BIPs; World Health Organization/London School of Hygiene and Tropical Medicine, 2010). These are generally used as an alternative or adjunct to incarceration or probation for those convicted of IPV-related offences, with the goal of educating and rehabilitating perpetrators to decrease rates of abuse.

Despite the widespread use of BIPs across North America and substantial expense to the criminal justice and social welfare systems, there is little empirical support for current BIPs (Babcock, Green, & Robie, 2004; Feder & Wilson, 2005). Randomized controlled trials and meta-analytic studies indicate no difference in recidivism rates between those who complete BIPs compared to those who receive treatment as usual (Babcock et al., 2004; Feder & Wilson, 2005). While quasi-experimental studies have found that BIPs moderately reduce recidivism rates in those who complete the program, there are continued problems in engaging many of those mandated to treat them (Eckhardt, Murphy, Black, & Suhr, 2006). High drop-out rates are reported and, among those who do attend programs, many perpetrators are found to be reluctant to fully participate and unmotivated to change their behavior (Scott & King, 2007). Furthermore, there is a small body of literature that suggests a proportion of men who physically or psychologically abused their female partners stop their IPV without any formal intervention (Aldarondo, 1996; Margolin & Fernandez, 1987). These studies examined the sociodemographic characteristics correlated with abusive behavior.

¹ Department of Psychiatry, University of Toronto; Toronto, Ontario, Canada
² University Health Network, Women’s Health Program, Toronto, Ontario, Canada

Corresponding Author:
Kathleen A Sheehan, Department of Psychiatry, University of Toronto, 250 College Street, 8th Floor, Toronto, Ontario M5T 1R8, Canada
Email: kathleen.sheehan@medportal.ca
behavior and found that higher levels of marital harmony and higher socioeconomic status were associated with the cessation of marital violence (Aldarondo & Sugarman, 1996).

Given these findings, more recent research has focused on investigating why perpetrators of IPV change (Scott, 2004). These studies have attempted to elucidate the process factors or mechanisms that, at an individual level, are associated with positive outcomes (Eckhardt et al., 2006). Many studies have applied theoretical models, like the transtheoretical model (TTM) of behavioral change, to populations of IPV perpetrators (Alexander & Morris, 2008; Alexander, Morris, Tracy, & Frye, 2010; Babcock, Canady, Senior, & Eckhardt, 2005; Brodeur, Rondeau, Brochu, Lindsay, & Phelps, 2008; Daniel & Murphy, 1997; Eckhardt, Holtzworth-Munroe, Norlander, Sibley, & Cahill, 2008; Murphy & Maiuro, 2008; Simmons, Lehmann, & Cobb, 2008). This theory suggests that individuals proceed through a set of stages, called the stages of change, in order to prepare for and maintain behavioral change. These studies have quantitatively described the proportion of IPV perpetrators at each stage of change. In addition, they have examined the association between stage of change and other quantitatively measured variables including attrition from BIPs and readiness to change (Brodeur et al., 2008; Scott, 2004).

Few of these studies, however, describe the situations or factors that underlie the processes of change in these individuals (Eckhardt, Babcock, & Homack, 2004; Scott, 2004). Qualitative methods may be a better tool for eliciting data on these processes, as they offer “insight into social, emotional and experiential phenomena” (Jones, 1995).

Qualitative research has been used to examine the concept of “turning points” in the lives of victims of IPV (Chang et al., 2010). Turning points are defined as “specific incidents, factors, or circumstances that permanently change how the [victims] view the violence, their relationship, and how they wish to respond” and are “often associated with help-seeking or empowerment behaviours” (Chang et al., 2010). Given the limited understanding of the process of change in perpetrators of IPV, investigating turning points qualitatively in this population would be useful in determining why and how perpetrators change their behavior.

In this study, we examined turning points for perpetrators of IPV by conducting a systematic review of qualitative studies that investigated the factors, situations, or attitudes that facilitated a perpetrator’s decision to change their abusive behavior. While the synthesis of qualitative studies remains controversial, the contribution of qualitative data to systematic reviews is increasingly being recognized (Dixon-Woods & Fitzpatrick, 2001). Given the small sample sizes and limited populations usually investigated in qualitative studies, it was hypothesized that combining data from several studies would generate a more thorough understanding of the complex phenomenon of behavioral change in the perpetrators of IPV.

**Method**

**Literature Search**

Systematic searches of the PsychInfo and Medline databases were conducted using the terms outlined in Appendix A. As shown in Figure 1, 2,729 studies were identified and 180 promising abstracts read and screened for relevance. Subsequently, 19 full articles were read and assessed for inclusion in this review. Four studies were deemed to meet the inclusion criteria. This database search was supplemented by handsearching the articles and their references for other relevant articles, yielding an additional two studies through backward and forward reference chasing and author searching (Barroso et al., 2003). In total, six studies were included in the review.

**Selection**

The first author reviewed the titles and abstracts of articles identified in the literature search. To be included in the review, studies needed to (a) address the factors, situations, or attitudes that facilitate perpetrators’ decision to change their abusive behavior; (b) include data obtained through interviews, observation, or focus groups; (c) analyze that data using qualitative or phenomenological methodologies; (d) be written in English; and (e) have been published in a peer-reviewed journal.
Data Abstraction and Validity Assessment

The first author extracted data and appraised the validity of the studies. A standardized form, derived from two other systematic reviews of qualitative data, was developed for this review (Mills, Jadad, Ross, & Wilson, 2005; Reid, Sinclair, Barr, Dobbs, & Crealey, 2009). Articles were then assessed independently by the second author. Where there was discrepancy between these assessments, the third author would review the study. An initial review of the studies was used to develop a basic coding template of emergent themes. These were identified from the verbatim text included and from the thematic analysis conducted by the authors of the studies. A second review of the studies allowed for application of these codes using content analysis techniques. In synthesizing the data collected, a model of individual, group, and community processes that facilitated turning points and behavioral change was used to organize the identified themes (Silvergleid & Mankowski, 2006).

Results

Study Characteristics

The methodologies used in the reviewed studies are outlined in Table 1. The number of participants in the studies ranged from 6 to 34. Five studies gathered data using individual interviews, while one used ethnographic observation of treatment groups to collect data. In the five interview studies, interviews were recorded and transcribed verbatim; while in the observational study, an attempt was made to record what individuals stated verbatim. In two studies, interview manuals were used to guide discussion. The majority of studies outlined how themes were generated in analyzing the data collected. Each study used a different method of qualitative data analysis. Most studies presented original data in addition to content analysis. Only two studies explicitly stated that they had ethical approval.

Four of the studies were conducted in the United States, one in Canada, and one in Finland. In all the studies, only male perpetrators were investigated. In two of the studies, perpetrators were assessed prior to or during the treatment program to determine differences between those who completed and those who did not complete the program. Three other studies investigated change processes in men who were successful in completing the treatment program and improving their behavior, as assessed by group facilitators, their partners, and self-report, by interviewing them after the program had ended. One study did not limit its participants to those who were in a treatment program and interviewed “abusive men” who contacted them about participating in the study (Pandya & Gingerich, 2002).

Themes Reported in Qualitative Studies

All six of the studies included some data from perpetrators who successfully completed BIPs and the themes reported in each of the studies are summarized in Table 2. Two of the studies provided data from individuals who did not complete the program and one study also involved a quantitative component. These quantitative data are not included in this review. The data indicated that a variety of processes contribute to a perpetrator’s turning point and change in abusive behavior. These can be categorized as individual, group, and community processes (Silvergleid & Mankowski, 2006).

Specific Events Preceding Behavioral Change

In four of the six studies, specific events preceded participation in the intervention program. These were categorized as either a community process, such as involvement with the criminal justice system, or a group process, such as the relationship with their family. In Pandya and Gingerich (2002), the authors noted that:

> treatment completers felt that the consequences of their violent behavior were bad enough that it was in their interest to change that behavior. For Mike, it was the lockup experience; for Bill, he was turning into the likeness of his father that he despised; and for Sam, his violent outbursts were breaking up his family.

Similarly, in Silvergleid and Mankowski (2006), a participant was motivated by fear of losing his family, stating that “the first and foremost [reason why I changed] would be because I’m totally in love with my wife and my family and that would be the number one reason why I would change.”

Taking Responsibility

All six studies indicated that taking responsibility for past abusive and violent acts was important in behavioral change. Scott and Wolfe (2000) reported that “men who had successfully changed their abusive behavior displayed a great deal of honesty about and responsibility for their past abuse.” They provided a quote from one participant who stated:

> I am no longer trying to deny anything. 99% of the time I am not trying to deny anything. I have taken blame for what I had done, and I am not trying to make excuses for it or trying to minimize it, that I accepted what I had done and that I had accepted the consequences.

Four of the six studies reported that participants acknowledged that they were responsible for changing their own behavior. A participant quoted in Catlett, Toews, and Walilko (2010) stated:

> ... I’ll be able to take an in-depth look at myself. And I could change a lot of stuff that I don’t like, which I already been working on with the 12-step program. Changing my thinking, my behaviour . . . .

Similarly, Gondolf and Hanneke (1987) reported a participant saying:

> a guy will come to the program if he wants to do something about his abuse, but he’s going to have to do it himself. He’s
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<th>Study Setting</th>
<th>Scope and purpose</th>
<th>Methodology</th>
<th>Sampling strategy</th>
<th>Sample size</th>
<th>Sample description</th>
<th>Data collection</th>
<th>Verbatim transcription</th>
<th>Predefined questions</th>
<th>Trained interviewer</th>
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<td>Gondolf and Hanneken (1987)</td>
<td>Pittsburgh, PA, USA</td>
<td>Examine reformed batterers' perception of the nature of their abuse and how they stopped this behavior</td>
<td>Not stated</td>
<td>12 men</td>
<td>Participants: Ethnicity not reported Aged 26–49 Five skilled labor, five white-collar job, one unemployed, and one student All completed high school, three with some college self-referred</td>
<td>Single semistructured interview</td>
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<td>Scott and Wolfe (2000)</td>
<td>London, Ontario, Canada</td>
<td>Describe men's personal stories of both how and why they made changes in their abusive behavior</td>
<td>28 a priori coding categories applied</td>
<td>9 men</td>
<td>Not reported</td>
<td>Single semistructured interview</td>
<td>Not stated</td>
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<td>Pandya and Gingerich (2002)</td>
<td>Midwestern city, USA</td>
<td>Examine the process of change in group therapy situations for male batterers Describe change processes in abusers and investigate dynamics of unsuccessful processes</td>
<td>Microethnographic domain and thematic analysis</td>
<td>1 group of 6 men</td>
<td>Participants: Five White, one Black Aged 21 to “middle age” Other demographic data not consistently reported</td>
<td>Passive observation with note-taking at 12 two-hour long sessions</td>
<td>Attempted</td>
<td>Yes</td>
<td>Not applicable</td>
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<td>Silvergleid and Mankowski (2006)</td>
<td>Oregon, USA</td>
<td>Identify, describe, and analyze the range of processes of change that contribute to the effectiveness of batterer intervention programs (BIPs) in reducing men's violence</td>
<td>Data-based inductive analysis</td>
<td>9 men</td>
<td>Participants: All white Aged 28–53 Five postsecondary education Income: $15,000–75,000 Most court-mandated</td>
<td>Single semistructured in-depth interviews</td>
<td>Yes</td>
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<td>Flinck and Paavilainen (2008)</td>
<td>Finland</td>
<td>Describe violent behavior of men in intimate partner relationships as experienced by them</td>
<td>Husserlian descriptive phenomenological design and existential analysis</td>
<td>10 men</td>
<td>Participants: Ethnicity not reported Aged 36–56 Four married All had children Six postsecondary education Eight had seen therapist Most court-mandated</td>
<td>Purposeful sampling within 2 weeks of completion of BIP, all participants nominated by group facilitator</td>
<td>Not applicable</td>
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<td>Catlett, Toews, and Walilko (2010)</td>
<td>Cook County, USA</td>
<td>Explore the meaning men make of their violence toward intimate partners (IP). Examine if and how these meanings and constructions predict who fails to complete batterer treatment</td>
<td>Qualitative content analysis</td>
<td>34 men</td>
<td>Survey sample, N = 154: 61.7% African American Aged 16–54 Average of three children 56.5% single 69% high school or less 46.8% unemployed mdn income &lt;$10,000 Most court-mandated</td>
<td>Purposeful snowball sampling of voluntary participants from information service systems, networks, and key persons</td>
<td>Voluntary participation from men who completed survey during an orientation session for BIP</td>
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the only one who can ... The bottom line is that you have to decide that you want to do it. That can’t be forced.

Development of New Skills

In five of the studies, there was recognition that the development of new skills was beneficial in facilitating change. This involved improving communication skills and assertiveness (Pandya & Gingerich, 2002; Scott & Wolfe, 2000). As noted in Scott and Wolfe (2000), a participant stated:

I think at first when I came here, I would be sorta half hearing, but at the same time I was, I’d be trying to think up answers ... [now] most of the time when I am talking to my partner or with someone else, and they say something, my mind stops and lets go, and I’ll take a couple of moments to think about what they had to say and then try to give the answer they require.

Training in recognizing and controlling emotions was also viewed as important (Gondolf & Hanneken, 1987; Pandya & Gingerich, 2002; Scott & Wolfe, 2000; Silvergleid & Mankowski, 2006). Silvergleid and Mankowski (2006) quoted a participant as saying:

I recognize my own warning signs right away. I breathe out, flip my eyes, when I clench my fists. I clench my jaw, when I start shuffling side to side on my feet, I know that I’m getting upset about something. I may not realize what it is, but I know that something’s upsetting me. So I just slow down, and I’ve had people say, ‘You’ve got anything to say?’ [And I say] ‘Just a second’. Because I sit there and try to analyze it before I start opening my mouth.

Relationships With Others in Intervention Programs

Relationships with facilitators and other perpetrators in the intervention programs were noted to be important in two of the studies. In Silvergleid and Mankowski (2006), a participant commented that the facilitator was:

very persistent, and he expects you to learn, and he will make sure that you learn ... It’s like I have a lot of respect for him, and I know what he’s doing, and it feels awkward when he’s trying to ‘get me’ on something ... It not only helps you learn, but helps other people learn too. He’s very good at what he does, from what I hear, compared to other counselors.

Similarly, relationships with other perpetrators in the intervention program facilitated behavioral change. For example, in Gondolf and Hanneke (1987), a participant said:

the program helped me to know that I am not alone. I find the men in the group to be basically good people. And I found out that I am a good person, too. I have been able to get a lot of self-esteem out of that realization. I have learned to identify my

| Table 2. Emerging Themes and Concepts |

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<td>Not replicate father’s behavior</td>
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<td>Criminal justice system</td>
<td>+</td>
<td>+</td>
<td></td>
<td></td>
<td></td>
<td>+</td>
</tr>
</tbody>
</table>

Note. *Study applied a priori determined codes. This table reports the codes endorsed by at least 50% of participants.
emotions . . . It makes me want to help others who can benefit from my experience.

Discussion
In this study, we conducted a systematic qualitative review of the literature investigating turning points, which are the “incidents, factors, or circumstances” that change how perpetrators view and respond to violence in their relationships (Chang et al., 2010). To our knowledge, it is the first study to examine the concept of turning points in the perpetrators of IPV and to use this methodological approach to analyze qualitative data in this field. By synthesizing these data, we were able to identify the themes found in previous studies to generate a more complete understanding of the catalysts for and processes of change.

Turning Points
In the majority of studies reviewed, perpetrators who changed their abusive behavior recognized a specific event or situation which constituted a turning point. These included criminal sanctions, fear of losing their partner or family, and an awareness that they were becoming like their abusive father. As noted by Silvergleid and Mankowski (2006), “previous research on processes of change has not explicitly identified the impact that community forces, such as the criminal justice system, have on [perpetrator’s] change process.” Their study compared BIP group facilitator and perpetrator accounts of behavioral change. They found that perpetrators were more likely than facilitators to identify that external factors such as criminal justice sanctions or fear of losing family relationships played a role in the change process and concluded that these events can provide a “wake-up call” for perpetrators (Silvergleid & Mankowski, 2006). While most research focuses on the internal motivation for a perpetrator’s decision to change, this suggests that external and potentially negative events are seen by some perpetrators as motivational and warrants further study.

Interestingly, the importance of external factors was recognized by both perpetrators who were court-mandated to participate in programming and those who self-referred. Although only one study exclusively investigated voluntary participants, the factors that facilitated change were similar to those identified by court-mandated perpetrators. Other studies have found that attrition rates are also similar for these two populations. While few studies have examined those who self-refer to BIPs or other treatment programs, investigating how these individuals reach their turning point may be a fruitful area of future research.

Facilitating the Change Process
The most consistent theme identified across studies was that perpetrators who change take responsibility for their past behavior and feel their decision to stop their abuse was autonomous. Even perpetrators who were court-mandated to attend the BIP felt that the actual decision to change their behavior was of their own volition and under their control (Catlett, Toews, & Walilko, 2010; Flinck & Paavilainen, 2008; Scott & Wolfe, 2000; Silvergleid & Mankowski, 2006). Although it is not clear whether taking responsibility is a predictor or correlate of behavioral change, these findings are consistent with quantitative research in this field which has applied the TTM of behavioral change to the perpetration of IPV (Alexander & Morris, 2008; Babcock et al., 2005; Brodeur et al., 2008; Daniel & Murphy, 1997; Eckhardt et al., 2008; Murphy & Maiuro, 2008; Simmons et al., 2008). These studies hypothesized that perpetrators in the early precontemplation and contemplation stages of change fail to identify their behavior as problematic and therefore cannot make a commitment to change. Conversely, they suggested that perpetrators in the later preparation, action, and maintenance stages of change have an awareness of their problem and make a decision to actively modify their behavior.

Research confirmed this hypothesis and demonstrated that those in the early stages of change are less motivated and ready to change their behavior than those in the later stages (Alexander & Morris, 2008; Scott & Wolfe, 2003). Alexander and Morris (2008) also found that those perpetrators who start the BIP while in the later stages of behavioral change reported a greater response to some aspects of treatment than those starting BIP at an earlier stage of change. However, stage of change was not found to predict drop-out rates from BIPs (Brodeur et al., 2008). This suggests that other, perhaps external, motivating factors may be involved in the decision to complete a program. Further research is needed to examine the interplay between internal and external motivation and their role in behavioral change.

The findings that perpetrators who change their abusive behavior identify a turning point that leads them to recognize their abusive behavior as problematic support the use of interventions like motivational interviewing (MI) in BIPs. MI is a technique designed to facilitate movement through the stages of change (Rollnick & Miller, 1995). It “usually focuses on increasing awareness of the problem behaviour, including its positive effects and negative consequences, affirming autonomy and choice, and resolving ambivalence about change” (Musser & Murphy, 2009). A recent randomized controlled trial, using MI as a pre-BIP intervention, found that those who participated in MI decreased the “extent to which they blamed their violence on external factors” and “demonstrated improvement on stages of change subscales” (Kistenmacher & Weiss, 2008). MI, therefore, may assist perpetrators in reaching their turning point and facilitate the decision to change their behavior.

In several of the studies reviewed, perpetrators also recognized the development of communication and assertiveness skills, emotional education, and anger management as important (Gondolf & Hanneken, 1987; Pandya & Gingerich, 2002; Scott & Wolfe, 2000; Silvergleid & Mankowski, 2006). Those who were successful in changing their behavior learned how to apply these lessons from the BIP to their lives outside of the treatment setting. To date, there is a dearth of empiric data to identify which type or format is most effective (e.g., the psychoeducational Duluth model, cognitive behavioral, or couples therapy) and little evidence regarding which aspects of BIPs are most important (Eckhardt et al., 2006). These
qualitative data, however, provide some insight into what perpetrators identify as being most useful in facilitating change.

**Importance of Relationships**

Relationships among perpetrators and between the perpetrator and facilitator were identified as important in many of the studies reviewed (Gondolf & Hanneken, 1987; Silvergleid & Mankowski, 2006). In all of the studies included, the BIP was conducted in group format. This is the traditional format by which BIP interventions are, and in some cases required to be, delivered in some jurisdictions (Dankworth & Austin, 1999). Therefore, all the perpetrators in these studies succeeded within the traditional group treatment setting. Perpetrators reported that support from their fellow perpetrators was beneficial to their success in changing their behavior and this reinforces previous findings that positive group cohesion was associated with decreased abuse at follow-up (Taft, Murphy, King, Musser, & Dedeyn, 2003). However, there are potential limitations to group therapy (Murphy & Meis, 2008). Differences in personality type and level of readiness to change, coupled with the potential for negative peer influences, may lead to poor results in some group BIPs. Given the success of individual interventions, such as MI, future research should investigate these alternative approaches to BIPs. The finding that a positive relationship between the perpetrator and facilitator is important supports previous research findings that perpetrators who report a good working alliance are less likely to continue their abusive behavior at follow-up (Taft et al., 2003).

**Qualitative Studies in IPV Research**

Research investigating BIPs is at a crossroads. Studies in this area have traditionally focused on testing the effectiveness of existing BIPs. They have reported that BIPs have minimal, if any, impact on recidivism (Babeck et al., 2004; Feder & Wilson, 2005). Recent studies have attempted to determine the individual characteristics that make a perpetrator best suited to BIPs. They have quantitatively examined the stage of change associated with positive treatment outcomes and attempted to determine whether perpetrator typology predicts the program to which they are best suited (Eckhardt, Holtzworth-Munroe, Norlander, Sibley, & Cahill, 2008b). MI interventions have attempted to increase readiness to change, with the hope that this will increase the impact BIPs have on perpetrators. While quantitative methodologies are useful for investigating large sample sizes and producing generalizable results, qualitative methodologies may be better suited to understanding complex behavioral phenomenon, such as turning points and processes of change for perpetrators of IPV.

Eckhardt et al. (2006) have suggested that, instead of focusing on existing BIPs, the field needs to develop new BIPs following the “logic of clinical trials,” where interventions are designed based on empirical findings. Qualitative data, are beneficial in developing these interventions. They can be used to gain a better understanding of perpetrators’ experiences of abuse, treatment, and behavioral change, which will enable the development of programs tailored to the needs of the perpetrators.

**Limitations**

Qualitative systematic review is a relatively new method of data synthesis and the results of this review should be considered with an understanding of its limitations (Dixon-Woods, Shaw, Agarwal, & Smith, 2004). While we used established methods to search the literature, finding qualitative studies can be difficult for a variety of reasons (Barroso et al., 2003). We included studies found by computerized database reviews, as well as backward and forward reference and author chasing, to ensure that all relevant qualitative studies were included.

The heterogeneity among the qualitative studies included made comparison challenging. Studies differed in their theoretical orientation, approach to sample selection, method of data collection, and analytical process. In addition, each of the studies investigated specific populations with limited sample sizes. Some studies were prospective, while others used purposeful sample to select those perpetrators who had been deemed successful. Furthermore, there was no clear definition of successful behavioral change, with data collected at various times during follow-up. By using a standardized tool to evaluate the characteristics and quality of the studies, and acknowledging these differences, we attempted to be explicit about our approach.

A potential methodological bias in synthesizing qualitative data occurs because one is reliant on the themes and verbatim text selected by the authors of the original study. This is colored by their theoretical approach and the method by which they analyze the data generated. By using a constant comparative method to identify emergent themes, we attempted to minimize this bias. The results of this study, however, should still be interpreted in light of this limitation.

This article does not address the relationship between turning points and behavior. It is unclear whether the identification of turning points by perpetrators is related to the cessation or reduction of IPV. Further research is required to investigate whether turning points are empirically meaningful and explore the predictive validity of these events on outcome.

**Conclusion**

This study, the first to examine turning points in perpetrators of IPV, demonstrated that external events can be used as a trigger for internal motivation to change. It also identified which group and individual aspects of BIPs are most important in facilitating behavioral change. Further research, combining quantitative and qualitative methodologies, is necessary to better understand why and how perpetrators change their abusive behavior. These studies can be used to inform the modification of existing BIPs and contribute to the development of new interventions in order to reduce the perpetration of IPV.
Appendix A

Search Strategies

Database: Ovid MEDLINE(R) <1950 to October Week 3 2010>

Search Strategy:

1. (batter$ adj3 wom$ n).mp. (2227)
2. ((spous$ or partner$ or wife or wives or husband$ or girlfriend$ or boyfriend$ or lover$ or dating or dated or dates or domestic$ or intimate) adj5 (abu$ or beat$ or aggress$ or harm$ or trauma$ or aggress$ or harm$ or trauma$ or violen$ or rape$)).mp. (10358)
3. (turning point$ or change$ or transition$ or progress$ or conversion$ or process$ or decision$).mp. (3369240)
4. (perpetrat$ or crime$ or criminal$ or intervention$ or batterer$ or abuser$ or abusive$).mp. (431204)
5. 1 or 2 (10765)
6. 3 and 5 (1850)
7. 4 and 6 (839)
8. limit 7 to english language (818)

Database: PsycINFO <1806 to October Week 4 2010>

Search Strategy:

1. (batter$ adj3 (woma? n$ or female$ or mother$)).mp. (2902)
2. ((spous$ or partner$ or wife or wives or husband$ or girlfriend$ or boyfriend$ or lover$ or dating or dated or dates or domestic$ or intimate or interpersonal or common law) adj5 (abu$ or beat$ or aggress$ or harm$ or trauma$ or aggress$ or harm$ or trauma$ or violen$ or rape$)).mp. (18119)
3. help seeking behavior/ (3049)
4. (turning point$ or “stage$ of change$” or transition$ or progress$ or conversion$ or process$ or decision$ or “behavior change$” or “readiness to change”).mp. (697299)
5. 1 or 2 (18936)
6. 3 or 4 (699755)
7. 5 and 6 (3842)
8. (perpetrat$ or crime$ or criminal$ or intervention$ or batterer$ or abuser$ or abusive$).mp. (232087)
9. 7 and 8 (1961)
10. limit 9 to english language (1924)
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References


Bios

**Kathleen A. Sheehan** is a resident physician in the Clinician-Scientist Stream of the Psychiatry Program at the University of Toronto. She received her medical degree from McMaster University in Hamilton, Ontario, Canada. Her doctoral studies were completed at the University of Oxford in Oxford, England. Her research interests include mental health policy, ethics, and the use of coercion in psychiatric care.

**Sumaiya Thakor** was awarded her medical degree from Xavier University School of Medicine at Aruba in 2009. Her undergraduate studies were completed at the University of Toronto in Ontario, Canada. Her primary area of research is women’s health, particularly violence against women and reproductive medicine and oncology.

**Donna Stewart** is the Lillian Love Chair in Women’s Health at University Health Network and the University of Toronto. She is a University Professor at University of Toronto and is appointed in the Faculty of Medicine in the Departments of Psychiatry, Obstetrics/Gynecology, Medicine, Anaesthesia, Family and Community Medicine, and Surgery. She is a senior scientist at Toronto General Research Institute and her research interests are in women’s health, women’s health education, women’s mental health, interpersonal violence, psychological aspects of reproductive health, psychological reaction to physical illness, and international health. She is the recipient of over 100 peer-reviewed scientific research grants and has published over 300 scientific articles in peer-reviewed journals and 5 books. She is an Institutional Advisory Board Member of Canadian Institutes for Health Research Institute of Gender and Health and Deputy Editor of the American Psychiatric Publishing Inc. She is a member of the editorial board of 10 medical journals. She is immediate Past President of the International Association for Women’s Mental Health. She has made numerous presentations to local, provincial, federal, and international government agencies responsible for developing policy on women’s health. She has won numerous awards for research and leadership and was appointed a senior advisor in women’s health to the World Health Organization. She is a cochair of the WPA Review Committee and past-Chair of the Section of Women’s Mental Health.