

This is a self-archived version of an original article. This version may differ from the original in pagination and typographic details.

Author(s): Siltala, Heli; Päivinen, Helena; Laitila, Aarno

Title: Reporting, Reflecting and Recognising Emotions in Therapeutic Work with Domestic Violence Perpetrators: Experiences of the Jyväskylä Group Model

Year: 2021

Version: Accepted version (Final draft)

Copyright: © The Author(s), under exclusive license to Springer Nature Switzerland AG 2021

Rights: In Copyright

Rights url: http://rightsstatements.org/page/InC/1.0/?language=en

Please cite the original version:

Siltala, H., Päivinen, H., & Laitila, A. (2021). Reporting, Reflecting and Recognising Emotions in Therapeutic Work with Domestic Violence Perpetrators: Experiences of the Jyväskylä Group Model. In M. Husso, S. Karkulehto, T. Saresma, A. Laitila, J. Eilola, & H. Siltala (Eds.), Violence, Gender and Affect: Interpersonal, Institutional and Ideological Practices (pp. 135-155). Palgrave Macmillan. Palgrave Studies in Victims and Victimology. https://doi.org/10.1007/978-3-030-56930-3_7

7 Reporting, Reflecting and Recognizing Emotions in Therapeutic Work with Domestic Violence Perpetrators: Experiences of the Jyväskylä Group Model

Heli Siltala

Helena Päivinen

Aarno Laitila

In this chapter we discuss the ways emotions can be displayed and worked through in therapeutic treatment for domestic violence. While violence is often associated with anger or dealing unsuccessfully with aggression, this view is too narrow and stereotypical. Instead, we aim to provide researchers and practitioners with tools enabling a comprehensive understanding of violence and emotions.

Our argumentation is based on qualitative analysis of group discussions recorded at the Jyväskylä intervention model. The model is an on-going group treatment program for perpetrators of domestic violence that has been studied extensively by the University of Jyväskylä. In this chapter we will discuss how emotions are displayed and worked within the intervention. Based on our data and previous literature, we propose a three-stage model for emotional work with domestic violence perpetrators. We will provide transcribed examples from each stage and discuss how these emotional themes can be addressed in group treatment for domestic violence perpetrators.

Here domestic violence is defined as physical, sexual or psychological abuse targeted towards the spouse or child of the perpetrator. We also regard domestic violence as a gendered issue, as violence experienced by women and children often overlaps, predominantly occurs in domestic contexts and is most often perpetrated by men (Krug et al. 2002). It has been suggested that to reduce male-perpetrated domestic violence, gender equality and societal norms should be more prominently addressed in prevention and intervention programmes (Barker et al. 2010). In this chapter, we discuss how gender issues can be explored in an intervention for male domestic violence perpetrators.

This chapter focuses on emotional work with perpetrators. We understand 'affect' as an automatically aroused response, whereas 'emotion' includes subjective recognition and interpretation that combine experiential, behavioural and physiological aspects (Stiles et al.

2004). As our focus is on the subjective experiences of violence perpetrators and how these can be constructed and analysed, we chose 'emotion' over 'affect'.

The language used here to describe emotional processing is drawn from the theory of emotion focused therapy (EFT). However, rather than relying solely on EFT perspectives, we integrate these with cognitive and social elements in discussing emotional work with violence perpetrators. One of the core EFT distinctions utilised here is between primary and secondary emotions. Greenberg (2004) describes primary emotions as core reactions to situations evoking emotional experiences, such as being sad at loss. Secondary emotions, in turn, are defined as responses to primary reactions that can act as defences against primary emotions that are too painful to experience, such as replacing sadness with anger. Accessing primary emotions is seen as a crucial task in promoting more adaptive behaviour and experiences (Greenberg, 2004).

Outlining the Working Model: From Anger Management to Active Emotional Work

The group intervention examined in this chapter aims to increase safety within families and to start a therapeutic process during which perpetrators can increase their understanding of violence and its consequences and adopt non-violent ways of acting. All interventions targeted at violence perpetrators share this main goal of changing and stopping violent behaviour. However, we argue that working models focusing solely on behavioural change or 'anger management' are not sufficient to promote long-term change in violent behaviour. Thus, we propose an integrative therapeutic model that includes (but is not restricted to) three levels: (1) physical reactions, behaviour, and emotions; (2) meanings, cognitions, and personal beliefs; (3) attitudes and social context.

Physical reactions, behaviour and emotions refer to the individual's immediate responses. The second level – meanings, cognitions and personal beliefs – is defined by a self-reflective position that takes a step back from the individual's immediate behavioural or emotional reactions. The third level – attitudes and social context – requires moving from a subjective experience to the intersubjective and social level, where the factors associated with violent behaviour, such as gendered roles and social norms, can be explored. Both violent and non-violent events can be examined through these three levels. The level initially worked on depends on the perpetrator's sense-making of the event but we argue that work is needed on all three levels to induce long-term change in violent behaviour. Adopting new views and broadening understanding of situations by analysing them together is a core feature of the therapeutic model described in this chapter. This view draws on Leiman's (2012) metamodel of the psychotherapy process, which sees stimulating, structuring and joint reflection on client's expressions as the core task of therapy. This process enables the client to gradually shift from an object to subject position via the observer position utilised in therapy sessions.

Another aspect defining therapeutic work is showing interest in clients and their emotions and experiences. The therapist seeks to understand and support the perpetrator in working towards change without condoning the violent behaviour (Rogers 1957).

Therapeutic work also includes understanding and working with the perpetrator's past and possible personal trauma history; however, instead of the perpetrator using the past as an excuse for violence, this retrospective work aims at preventing future violence.

Perpetrator Programmes and Emotions

Programmes for domestic violence perpetrators are diverse. Interventions can be conducted with groups, individuals and couples, applying, among others, pro-feminist, cognitive-

behavioural and psychodynamic approaches (Eckhardt, Murphy et al. 2013; Geldschläger et al. 2014). Due to the wide diversity and overlap in intervention methods and practices (Akoensi et al. 2013; Geldschläger et al. 2014), no evidence-based guidelines exist for perpetrator work. However, recommended practices involve accountability, a victim perspective and relevant networks (Work with Perpetrators European Network 2018).

Diversity in interventions also hampers evaluation of the efficacy of perpetrator programmes. Thus, it might be more fruitful to focus instead on qualitative factors influencing change processes within programmes. Key elements of change identified by McGinn et al. (2020) and Kelly and Westmarland (2015) in their reviews include learning in the group context, masculine identity, motivation, responsibility, reflectivity, emotional processing and empathy. These elements can either facilitate or prevent change and thus present a challenge for perpetrator programmes.

The identification of emotional processing as a key element of change (Kelly and Westmarland 2015; McGinn et al. 2020) has extended the history of violence interventions. While the early couple interventions for domestic violence, e.g. psychoanalytic couple therapies, focused on emotions, they were heavily criticised for victim blaming and ignoring safety issues. The more behaviourally oriented perpetrator programmes tried to resolve these issues by focusing on behaviour instead of experiences. The subsequent integrative development of an array of treatment modalities has facilitated active emotional work, from both the victim and perpetrator perspectives.

Nevertheless, emotional processing in perpetrator work has not been described in detail. While many models applying a cognitive-behavioural or psychoanalytic perspective have described the perpetrator's need for psychological processing and change, with respect to emotional work they have mostly referred to the most obvious violence-related emotions,

such as anger and jealousy (see e.g. Eckhardt, Crane et al. 2013 and Mizen 2019). These therapeutically focused interventions might also overlook the social and gendered nature of domestic violence. In turn, in research on the justifications and power dynamics of violence, the role of related emotions, while often implied, is not of interest from the clinical perspective per se (see e.g. Downes et al. 2019).

More work is needed on the diversity of emotions related to domestic violence, such as shame, guilt, fear, insecurity and helplessness, and how these might be assessed in interventions. An interesting attempt in this direction has been described by Pascual-Leone et al. (2011), who studied the effectiveness of an EFT-based intervention programme for inmates with a history of domestic violence. The intervention showed promising initial results, even if the decrease detected in violent recidivism was no longer significant after eight months.

While the literature offers interesting topics for emotional work with domestic violence perpetrators, specific tools or structures for clinical use have not been described or studied. We argue that effective violence interventions require emotional work. This chapter offers both analytical and clinical tools for emotion work with domestic violence perpetrators.

Intervention: The Jyväskylä Model

The intervention started more than 20 years ago as a collaborative project between the University of Jyväskylä and Crisis Centre Mobile in Jyväskylä, Finland. In Mobile, perpetrators start with individual sessions including a lot of motivational techniques. During these, they learn about various forms and consequences of violence and are instructed in basic methods of behavioural control, such as timeout. This happens through self-observation

of one's own violent behaviour. After this short individual phase, perpetrators can continue their work in groups at the University of Jyväskylä, although only about 15% do so. Groups meet weekly or bi-weekly for 90 minutes. They are semi-open, meaning that each group comprises people in different treatment phases. Groups are not gender-specific, but most participants are men.

New group members agree to a minimum of 15 sessions but are free to stay longer when needed. Statistics from 2010-2019 show that 45% of participants drop out before finishing the initial 15 sessions. For those who remain, the mean number of attended sessions is 39 (range 15-93). Group work is non-manualised and focuses on open discussions of themes raised by participants. Each group has two facilitators, who are trained psychotherapists and/or clinical psychologists. The facilitators help steer the conversations and focus on accountability, safety, gendered perspectives, behavioural choices and factors influencing these, such as cognitions and emotions.

Both perpetrators and their (ex-)partners are interviewed pre- and post-intervention. They also fill in a detailed questionnaire (ACBI, Davies et al. 1995) on different forms of violence and its consequences. Contact with (ex-)partners is crucial to ensure safety and to evaluate the treatment efficacy. Most participants have perpetrated mild to moderate forms of situational physical and psychological violence. Partner data show that 70% of the participating perpetrators benefitted from the intervention and for 75% of these the reported positive outcomes were maintained over the two-year follow-up (Lampi and Wargh 2020). However, it is important to note that the selected nature of the sample and high drop-out rates from follow-up interviews may bias the data towards more successful cases.

Starting from April 2017, group facilitators have made short notes on topics discussed after each group meeting. A total of 29 session notes from two groups during 2017 provided a starting point for the present data analysis. First, all direct mentions of emotions or indications of the processing of emotional themes were extracted from the notes. As a result, 38 different emotional themes were identified.

Next, a theory-oriented content analysis was used to group the emotional themes into more general categories. The theoretical starting points for the content analysis were the two-level emotional processing protocol described by the EFT model (Greenberg 2004) and the distinction between object and subject positions made in the meta-model of psychotherapy process (Leiman 2012). However, the analysis revealed that these binary categorisations did not sufficiently fit the data. Instead, three stages of emotional processing emerged from the session notes: 1) reporting secondary emotions, 2) reflection on primary emotions and 3) recognition of feelings of others as precondition for victim empathy.

Of the 38 emotional themes identified, 31 could immediately be categorised under these processing stages. For the remaining seven themes, the brief session notes were insufficiently clear, hence the categorisation was confirmed from the session transcripts. Finally, the first processing stage contained 9 themes, the second 25 and the third 4 themes.

In the last phase of analysis, some group discussions were transcribed from the video recordings. Seven thematic segments had already been transcribed to confirm their categorisation and 11 more were chosen to provide a quantitatively and qualitatively representative sample of all three processing stages. For each processing stage we chose segments that best exemplified the emotional themes relevant to change towards non-violence. All the examples are from men's talk, although the sample also included one woman. The pseudonymised examples are presented next grouped under the relevant

processing stage. To save space, we removed parts of transcriptions that emphasised the emotional power of what was said but did not offer substantial new content. Guided by the previously mentioned theoretical models described by Greenberg (2004) and Leiman (2012) we highlight some pertinent aspects of the group discussions under each example. To achieve validation by consensus, two authors conducted the analytic discussion. To further validate their conclusions, all excerpts were re-read by the third author. At the end of each section we discuss how these emotional themes can be addressed in group treatment.

Stage 1: Reporting Secondary Emotions

The following excerpts demonstrate how perpetrators can display secondary emotions that have either been aroused earlier (e.g. during a violent situation) or that manifest during the group session:

(M1 describes his disappointment that his ex-partner L hasn't apologised for their breakup. M1 feels that L and her new partner have wronged him.)

T1: So there's a pretty big sadness in the background then...

M1: As if this life isn't already difficult enough and then there's this, this kind of shit to deal with. Yeah let me tell you, I don't have any will to live anymore at all. I don't care what happens.

T2: So it's difficult to find a storyline for one's own existence then. Many things feel pointless.

M1: Yeah, it's like the guilt it's just pressing down the whole time. That I have done something wrong. But then, the punishment is the ending of it in this way. L wanted

to get her revenge for what I have done to her. I've done what I've done and. Evil gets its just desserts. Even though you apologise it doesn't help. It doesn't help at all.

T2: Life feels somehow merciless.

M1: Yeah. Like how many more blows does one have to take to be happy sometime in this life. A cheat and a robber, that's a couple all right...Don't have the guts to tell people straight out what they want and then they do something like that behind your back. So that's it.

T2: Is it possible that L was afraid to tell you that?

M1: Well, why can't she say it in spite of it?

T2: I mean that maybe she was scared there would be violence.

M1: Yeah. Well this doesn't help here at all, my guilt just keeps growing all the time...And here too just more guilt is poured on me, that she is scared and scared. Well what does that fear help? If I've done what I've done, there's no way to undo it anymore...She plays this two-faced game behind my back. It's like incomprehensible how spineless a person can be.

T2: Well I think it's pretty common when people are afraid.

M1: And I've had enough of this conversation. I can't take it anymore. (*Leaves the session*)

At the beginning of the section, T1 reflected on M1's experience and suggested sadness as a primary emotion related to his painful experience after the breakup. T1 was conducting a therapeutic dual task by following and attuning to M1 while simultaneously suggesting change-promoting reflection. However, M1 was unable to accept this reflection. Instead, he

stirred up his anger towards L and her new partner, whom he described as "a cheat and a robber" and in an excluded line even states that they should die. By dehumanising L, M1 was able to position himself as the victim of the breakup. When, instead of accepting this, the facilitators tried to promote empathy towards L, M1 left the session. M1 described himself as being blamed, which justified his holding on to his secondary emotion, anger. The reason might be that if he accepted the suggestion of primary sadness caused by loss, he would also have to grieve and regret his own (violent) behaviour.

(M2 is in the group for the first time and talks about his violent behaviour.)

M2: Yeah it's like almost impossible to get me angry, like maybe ten times in my life I have been angry so that, it's like it's really calm and one can be bullied up to the very last point but when it hits then it goes all at once and then there one goes like unconscious that for example I don't feel pain at all no...it's like I shiver and shake...And I didn't get angry there at all but when these two guys started to harass my mate...so a similar rage arose, I grabbed the guy and I carried him outside and threw him through plate glass window. So there again there's that that makes me angry, so it's not that if it's targeted at me but if it's targeted at someone else.

Here M2 first described his anger as something completely uncontrollable; anger leads to a dissociative state where M2 himself ends up positioning himself as its object. His words can be seen to reflect two central values related to masculinity: holding back when challenged and defending others. This made M2's violence seem not only justified but also a virtue that he has control over. Personal agency was also displayed when M2 said "then I grabbed the guy". However, M2's description was very superficial: he focused on his immediate reaction and did not reflect more deeply on his emotional reactions or what violence means to him.

Conclusion 1: First Steps Towards Non-Violence

Many perpetrators seek help for their violence in a situation where they are experiencing strong feelings of guilt and anxiety resulting from a behaviour unacceptable to themselves. However, in many cases the decision to seek help includes external factors, such as one's partner leaving home or the involvement of child protection services or the police. Involvement of external agencies or people can induce not only shame but also anger, frustration and/or feelings of injustice. To protect themselves from guilt and shame, perpetrators may end up blaming the victim or external factors, such as stress or substance use, for their violence. In this case, the responsibility for one's guilt is externalised. While motivation and some level of owning up to the problem are needed prior to participation in a group programme, some ambivalence between blaming others and accepting responsibility can be expected at the beginning of treatment.

It is common, especially in the first stages of treatment, for perpetrators to report their secondary emotions, such as anger, as something that just happens, like a force of nature or an immutable state. This reflects the object position perpetrators adopt in relation to their emotional experiences. Recognising and validating these emotional experiences is important in building trust and a working alliance, but for the change process to move forward, the group facilitators also actively encourage participants to reflect on their emotional experiences. During an optimal crisis window, perpetrators ask themselves what made them act this way and how they can prevent similar things from happening in the future. This is fertile soil for therapeutic work exploring the various forms of violent behaviour and related situational, cognitive, emotional and social factors. Peer support can also be important in accepting what one has done and working towards change.

Stage 2: Reflection on Primary Emotions

The following excerpts exemplify how perpetrators actively reflect on their emotional experiences and how these can be connected to violent behaviour:

(M3 talks about processing his own childhood experiences)

M3: When the emotions started coming I noticed that they started pouring out, that first there was this anger and then I noticed like what's this and tried to push it away.

T3: Yeah.

M3: But then I have realised that it has come from childhood those things, and what I have all the time left unprocessed, those feelings, that there have been some emotional barriers...

T4: Do others notice this, that there are some emotions that one pushes away?

M4: ...anger was like that, anger and rage were the most common strong emotions, but then when this divorce and meetings at the shelter came and the need for antidepressants and things like that then, yeah then this tearfulness and sadness has like increased...for me it's terribly important to experience your own emotions.

First, M3 described the different levels and ways he had been processing emotions relating to his childhood. M4 continued the discussion by describing how he had identified his anger as a secondary response to a primary emotion of sadness. Here, both men demonstrated a reflective stance towards their emotions: they were able to feel, recognise and describe their emotions in a constructive way. They were also being proactive and maintaining the reflective stance promoted by the facilitator. It also appears that a common understanding on

the importance of emotional processing and recognition of primary emotions had been reached.

(M4 describes an incident when he was with his son at a skate park. A group of teenagers were swearing loudly and M4 told them to behave better. The teenagers started arguing with him.)

M4: But then I was thinking what can I do, that, I'd probably like to grab that skateboard and throw it in the bushes and say...like punk that's enough and something else like that.

(M4 tells how he realized there was nothing (short of using violence) he could do to stop the teenagers so he backed down. The discussion on the event continues.)

M4: Of course when I notice that my word has no effect and that's a big fear. I have wondered for long why that situation is so difficult, why it feels so dangerous to lose the feeling of control. Of course I quickly realised that when we boys were being noisy at home...then what followed was always that my father first started huffing and puffing and then he got irritated with us and then he went for his bottle of booze and started drinking...That why it's so difficult for me to put up with that own will, that things don't go the way I want, yeah, those are scary.

(The discussion continues later.)

M4: I started thinking that...since I was like supervising those young rug rats I have to be a hero in their eyes...admitting defeat, it's scary somehow.

T4: So doesn't it have something to do like with the view on masculinity and manhood that...if you're not like the biggest and strongest...then you have failed somehow. That there's not really a chance for everyone to be equal, but instead

someone has to be the king of the hill and if it's not you then you have lost. Is it something like that?

M3: Yeah it's something like that.

During this long discussion, several reflective stances appeared. First, M4 reflected on his own emotional responses by describing how his anger arises from fear of losing control. M4 also reflected on how these primary and secondary emotions were related to his own childhood experiences; he had understood that it is difficult for him to accept his children's unruliness as such behaviour was unacceptable in his own childhood. Instead of using this retrospective understanding as a justification for his behaviour, M4 recognised it as an issue he must work if he is to continue being non-violent. This self-empathy enabled him to recognise his desire to win, i.e. prove himself strong by putting the teenagers in their place. T4 took this reflection further away from the immediate emotional response (fear) and pondered gendered social expectations, thereby challenging all participants to reflect on their attitudes and gender roles.

Conclusion 2: From Reactivity to Reflectivity

One key process of change is to render perpetrators more aware of their own reactions so that instead of acting based on 'justified anger', they are able to analyse both the consequences of their behaviour and the underlying emotions, which in turn might reflect disappointment or helplessness. This enables perpetrators to adopt a subject position in relation to their primary emotions that decreases the pain related to these experiences and promotes agency and adaptive behaviour. Perpetrators may then also realise that their violent behaviour does not

communicate their underlying emotions and needs, leading them to adopt new ways of communicating and behaving that may significantly improve their well-being.

The basic way of promoting a reflective stance is via discussion about violent or potentially risky situations which facilitators seek to steer towards discussion of the cognitive, emotional and social factors associated with violent behaviour. It is also beneficial to reflect on successful situations where participants were able to restrain themselves from violence. Retrospective understanding should also be extended to perpetrators' personal histories of trauma and violence. The goal of reflective work is to enable perpetrators to accept responsibility and develop agency towards change as opposed positioning themselves as victims of their trauma, emotions or circumstances.

It should be noted that reflective work is not linear but advances in a circular fashion. Thus, the same issues and events are often re-discussed in the group but reflected on in significantly different ways. This process is supported by the semi-open structure of the Jyväskylä model, where participants retell their stories every time a new person enters the group. This way perpetrators in different phases of their process can benefit from each other. Compared to individual work, sharing stories and experiences in a group further encourages reflection, gives hope and might even generate pressure towards change. However, it is important to ensure peer support does not only provide unconditional support and understanding but also motivates participants towards change.

Stage 3: Recognition of Others' Feelings as a Precondition for Victim Empathy

The following excerpts include both successful and unsuccessful demonstrations of empathy by group members:

(The facilitator has initiated a discussion about rebuilding trust and M5 describes a situation where he was watching TV with his partner S. They were lying on top of two mattresses on the floor.)

M5: I kind of lost my temper and (the mattresses) are heavy to move so I went against the wall and like in a leg press I pushed the mattress together, so S was alarmed then...I didn't realise it at the time, only later when, first I denied it for a while, like there was nothing in it, but then I realised...that yeah, of course she was alarmed...That trust I have really tried (to build) now. Yeah, but...that's what happened then.

(Facilitator validates the longevity and effects of victims' traumatic memories.)

M5: But those dreams they are really so intense. I'm also sometimes, if I see bad dreams then I'm totally disturbed then. Some dreams may have effects even for a week, that how can I see dreams that feel so real or. So yeah, I understand well that especially that dream thing also. Or can those dream things open up from some events like that.

(Discussion continues later.)

M5: So that there is no self-reflection like that. Lots of new. That for one was a reminder for me that. I wasn't thinking about the other one there then.

T4: Well but you started thinking after all. So even though the first reaction.

M5: Yeah but after that came the denial, that it's nothing, then, like god dammit there was something. I didn't know how to.

T3: How long did it take then?

M5: Well it took, I might have had a cup of coffee and gone for a smoke then for a while we were there as if it was nothing at all and then, well like, I screwed up, sorry.

Here M5 recognised that his angry reaction with the mattresses was excessive, although he was unable (or unwilling) to recognise the primary emotion behind his aggressive reaction. Instead, he focused on reflecting on his partner's reaction and how this incident might have affected the trust he is trying to rebuild. M5 showed several ways of empathising with S. He was concerned about S's well-being (nightmares) and understood that recovery from trauma takes time. M5 was also able to reflect on his own behaviour and reactions – how he initially minimised the fear experienced by S but was later able to accept responsibility and apologise to her. Taking responsibility was further encouraged by the group facilitators.

(M6 describes his recent trial. His ex-wife T had arrived late at court. The facilitator asks how M6 felt about the trial.)

M6: When my ex told her own version about things then yeah...it was unpleasant to hear it again from her mouth that...she was scared in that situation and everything so it like, it was bad...it didn't agitate me or anything but I became sad and like anxious...

T3: Well did you find out why T almost didn't make it there?

M6: Ugh, she's such a sloppy person, that's why, she was late from the bus.

T3: Was it also a tough situation for her that?

M6: She was anxious, I mean really anxious when she got there...It was such a tough situation for T to go there as well.

(The discussion moves to adultery.)

M6: When someone cheats on someone then you also hurt that other person, the one who is cheated on just the same way. It doesn't matter if it's an illegal threat or cheating, for the one you just get charged and fined and for the other you just hold up your arms. But both hurt. And for sure as much, it may be that the one who is cheated on hurts more if there was a way to measure it somehow.

(The discussion continues. M6 feels that T has wrong-footed him by not talking about her cheating on him. The facilitator suggests that T might be afraid.)

M6: That's a pretty good question, that could all the dishonesty that T has displayed towards me possibly be just because she is afraid of something, some reaction. It's difficult to imagine what it might be then.

A shifting of positions from victim empathy to internalised victim occurred here. At first M6 demonstrated empathy towards T by recognising her anxiety. However, M6 also used distancing language when describing T as careless and unreliable. The empathy subsequently disappeared completely and M6 started to spiral towards positioning himself as a victim and dehumanising T. First, he minimised her fear, then paralleled his violence with her cheating on him, and finally stated that the cheating was much worse. It is possible that his anger was a secondary emotional response to guilt aroused by his trial. In the excluded part between the last two excerpts, M6 further blamed T by describing her as a liar and wrongdoer. The facilitators tried to contest this narrative and encourage further empathy by suggesting that T

might not have told M6 everything because she was afraid of his reaction. M6 seemed to accept this as a possibility but did not reflect further on his own behaviour.

Conclusion 3: Building Empathy Towards Others

For a long-term change towards non-violence to happen, it is not enough for perpetrators to work on their own emotions and behaviour; instead they must also move outside their subjective experiences and reflect on the feelings of others. This requires meta-cognitive skills such as the ability to both recognise and distinguish between one's inner states and the feelings of others'.

Building empathy towards (ex-)partners can be difficult. Feelings of hurt or other challenging experiences related to the relationship can manifest as the minimisation of violence and as victim-blaming. It is important that group facilitators actively try to promote empathy towards victims and encourage perpetrators to acknowledge the consequences of their violence. One way to accomplish this is by working through perpetrators' own childhood experiences of violence. By recognising their own feelings of sadness, hurt, fear or insecurity, perpetrators might be more accepting of the consequences of their own violence and be motivated to change their behaviour.

Another crucial issue during the change process is to re-build trust in close relationships affected by violence. Perpetrators may experience ambivalent feelings about constantly proving themselves non-violent. Both excessive feelings of guilt and inflated self-confidence regarding their future behaviour can be counter-effective for the long-term success of perpetrators and thus need to be assessed during treatment. One key element in developing empathy is to accept that it takes victims a long time to feel safe again in the

relationship and that they might never forgive the violence they have experienced. Similarly, self-empathy is crucial for perpetrators to accept that while they can't change their past, they can and should take responsibility for how they act in the future.

Discussion

In this chapter, we discussed emotional work in the context of domestic violence perpetrator programmes and provided an empirical analysis on how emotional themes have been addressed in the Jyväskylä group intervention. Both the literature and present empirical data indicate that emotions play a crucial role in violence interventions. Here, three stages of emotional processing were described: 1) reporting secondary emotions, 2) reflection on primary emotions and 3) recognition of feelings of others as precondition for victim empathy. These stages are closely interlinked with the goals of the intervention.

Through emotional work, perpetrators first learn to recognise and accept a wider range of emotions within themselves. This requires both enhanced self-observation and examination of related intersubjective factors, such as how gender or the specific social environment influences what behaviours and emotional reactions are deemed acceptable. Secondly, emotional reflection enables perpetrators to understand that their behaviour is not dictated by their maladaptive responses. Perpetrators can then adopt more constructive ways of self-regulation and interaction. Finally, emotional work promotes victim empathy, meaning that perpetrators are more able to recognise, acknowledge and sympathise with the feelings of others and accept responsibility for the consequences of their violence.

While all professionals engaging in perpetrator work are likely to encounter the emotional themes described in this chapter, they may not necessarily be fully aware of the

complexity of emotional work. It is challenging to consider emotional reactions, reflection and empathy and to analyse their associations with perpetrators' violent behaviour and the choices preceding it. Secondary emotions such as anger, jealousy or victim blaming may be easier for facilitators to identify, but if they encounter these responses without displaying empathy or identifying the underlying primary emotions, the perpetrator may feel blamed and access to core emotions might then be blocked. On the other hand, a therapeutic stance combining empathy with purely inter-subjective or relationship-related reflections is likely to ignore relevant socio-structural aspects related to domestic violence. If such issues are not addressed, the intervention might even increase the likelihood of violence, for example by reinforcing stereotypical gender norms, providing excuses for violence, or ignoring the consequences of violence for its victim(s).

People working with perpetrators must thus possess sufficient knowledge and skills to be able to adopt the various perspectives needed in this work and to respond professionally. Emotional work is psychologically demanding for facilitators, who need to display empathy and help clients reflect on their emotions while simultaneously condemning their violent behaviour. Facilitators also need to be able to feel and reflect on their own emotions during and outside therapy sessions. Due to the demanding nature of perpetrator work, professionals are at risk for burnout and secondary traumatisation. To prevent these, facilitators must have sufficient training and organisational support. Working in pairs to share the psychological workload is also highly recommended.

In this chapter, we discussed therapeutic tools that can be applied in work with domestic violence. We argued that to stop violent behaviour individuals need to understand and process their emotions on multiple levels. However, violence is not only a personal problem of the perpetrator or victim. Instead, it is in many ways a societal problem and should be addressed as such. This view coheres with the idea of emotional work, since

emotions related to violence are strongly affected by gender norms and other societal attitudes. Even if the perpetrator is able to adopt new ways of being, these are not likely to be lasting if unsupported by the surrounding micro-society, such as workplaces and pastimes. To eradicate domestic violence thus requires change and action on many societal levels.

References

- Akoensi, T. D., Koehler, J. A., Lösel, F., & Humphreys, D. K. (2013). Domestic violence perpetrator programs in Europe, part II: A systematic review of the state of evidence. *International Journal of Offender Therapy and Comparative Criminology*, *57*(10), 1206–1225. https://doi.org/10.1177/0306624X12468110.
- Barker, G., Ricardo, C., Nascimento, M., Olukoya, A., & Santos, C. (2010). Questioning gender norms with men to improve health outcomes: evidence of impact. *Global Public Health*, *5*(5), 539–553. https://doi.org/10.1080/17441690902942464.
- Davies, L., Holmes, M., Lundy, C., & Urquhart, L. (1995). *Re-education for abusive men: The effect on the lives of women partners*. Health Canada: Family Violence Prevention Division.
- Downes, J., Kelly, L., & Westmarland, N. (2019). "It's a work in progress": Men's Accounts of Gender and Change in their Use of Coercive Control. *Journal of Gender-Based Violence*, *3*(3), 267–282. https://doi.org/10.1332/239868019X15627570242850.
- Eckhardt, C. I., Crane, C. A., & Sprunger, J. G. (2013). CBT for perpetrators of intimate partner violence: The "I3" approach. *Forensic CBT: A handbook for clinical practice*, 185–210. New Jersey: Wiley & Sons. https://doi.org/10.1002/9781118589878.ch10.
- Eckhardt, C., Murphy, C., Whitaker, D., Sprunger, J., Dykstra, R., & Woodard, K. (2013). The effectiveness of intervention programs for perpetrators and victims of intimate partner violence. *Partner Abuse*, *4*(2), 196–231. https://doi.org/10.1891/1946-6560.4.2.196.
- Geldschläger, H., Ginés, O., Nax, D., & Ponce, A. (2014). Outcome measurement in European perpetrator programmes: A survey. Working paper 1 from the Daphne III project "IMPACT: Evaluation of European perpetrator programmes". Work with Perpetrators European Network.
- Greenberg, L. S. (2004). Emotion-focused therapy. *Clinical Psychology & Psychotherapy: An International Journal of Theory & Practice*, 11(1), 3–16. https://doi.org/10.1002/cpp.388.
- Kelly, L., & Westmarland, N. (2015). *Domestic violence perpetrator programmes: Steps towards change. Project Mirabal final report*. London and Durham: London Metropolitan University and Durham University.
- Krug E. G., Dahlberg L. L., Mercy J. A., Zwi A. B. and Lozano R. (2002). *World report on violence and health*. Geneva: World Health Organization.
- Lampi, V. & Wargh, J. (2020). Batterer related factors in predicting the positive outcome of "Vaihtoehto väkivallalle" group treatment: Change in intimate partner violence and in the quality of relationship. [Master's thesis.] University of Jyväskylä.

Leiman, M. (2012). Dialogical sequence analysis in studying psychotherapeutic discourse. *International Journal for Dialogical Science*, *6*(1), 123–147.

McGinn, T., McColgan, M., & Taylor, B. (2020). Male IPV perpetrator's perspectives on intervention and change: A systematic synthesis of qualitative studies. *Trauma, Violence, & Abuse, 21*(1), 97–112. https://doi.org/10.1177/1524838017742167.

Mizen, R. (2019). The affective basis of violence. *Infant Mental Health Journal*, 40(1), 113-128. https://doi.org/10.1002/imhj.21755.

Pascual-Leone, A., Bierman, R., Arnold, R., & Stasiak, E. (2011). Emotion-focused therapy for incarcerated offenders of intimate partner violence: A 3-year outcome using a new whole-sample matching method. *Psychotherapy Research*, *21*(3), 331–347. https://doi.org/10.1080/10503307.2011.572092.

Rogers, C. R. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology*, 21(2), 95–103. https://doi.org/10.1037/h0045357.

Stiles, W. B., Osatuke, K., & Glick, M. J. (2004). Encounters between internal voices generate emotion: An elaboration of the assimilation model. In *The dialogical self in psychotherapy* (pp. 107–123). London: Routledge.

Work with Perpetrators European Network (2018). WWP EN Guidelines to Develop Standards. https://www.work-with-perpetrators.eu/resources/guidelines. Accessed 18 March 2020.