



JYVÄSKYLÄN YLIOPISTO  
UNIVERSITY OF JYVÄSKYLÄ

# Jyväskylä model for preventing and interventing domestic violence

Juha Holma

University of Jyväskylä

Finland

[juha.m.holma@jyu.fi](mailto:juha.m.holma@jyu.fi)



# Definitions of abusive behavior

- **Definitions are a part of recognition. Recognition is an intervention and a prevention.**
- **It is a problem for social and health care professionals to identify domestic violence and the risk factors concerning it.**



# Definition of violence

- **“Violence is any act directed against another person, where this act either harms, hurts or offends in a way that makes the person do something against his/her will or stop doing something that he/she would like to do”  
(Isdal, 2000)**



# Anger

- **An emotion, not an act**
- **Triggered by threat, abuse, disappointment, frustration**
- **Explicit nervous system reactions**
- **Some researchers consider it as one of four basic emotions, together with joy, sadness and fear**
- **Violence is only one possible act when angry - anger does not always lead to violence and violent acts are not always perpetrated when the person is angry**
- **Anger can be seen as a positive trigger for self-defence, self-assertion, etc.**



# Aggression

- A term for both the act of violence and the emotion – misleading?
- Miller/Dollard: Aggression is a response to frustration
- “Aggression is the energy that lies behind the need for achievements” (Roy, 1976)
- Murray: The need to damage or hurt others, to insult and punish
- Theory: both biologically inherited and socially learnt – can be triggered by anxiety / has similar qualities to anxiety



# Psychological or Emotional abuse

- **Any type of ongoing behavior by one partner (or expartner) to make the other feel afraid or worthless. It can include:**
  - / **Threatening their children.**
  - / **Hurting their pets.**
  - / **Putting them down (eg, telling them that they are ugly, stupid or incompetent.)**
  - / **Humiliating them in front of friends, family or in public.**
  - / **In gay or lesbian relationships, ‘Outing’ or threatening to out them to friends, family, at work or to their cultural community.**
  - / **Telling, or threatening to tell, others about their health status without permission.**
  - / **FRA 2012: The survey results show that two in five women (43 %) have experienced some form of psychological violence by either a current or a previous partner. Of women who are currently in a relationship, 7 % have experienced four or more different forms of psychological violence**



# Social abuse

- **Any behavior by one partner to control the other's social life. It can include:**
  - / **Stopping them from visiting their friends or family.**
  - / **Abusing or fighting with their friends or family so they stop visiting or calling.**
  - / **Cutting off the phone or monitoring calls or bills.**
  - / **Locking them in the house.**
  - / **Isolating them from their cultural background or preventing them practicing their religious beliefs.**



# Physical abuse

- **Any type of physical violence that an abusive partner inflicts on the other. It can include:**
  - / **Hitting, kicking, pushing, slapping, strangling or burning.**
  - / **Breaking possessions or punching/kicking walls.**
  - / **Withholding or stopping their partner from going somewhere.**
  - / **Withholding or stopping their partner from getting medication or treatments.**
  - / **FRA 2012: One in three women (33 %) has experienced physical and/or sexual violence since she was 15 years old.**
  - / **Some 8 % of women have experienced physical and/or sexual violence in the 12 months before the survey interview**





# Sexual abuse

- **Any behavior where one partner forces the other to perform sexual acts they don't want to. It can include:**
  - / **Pressuring them to have sex when they don't want to.**
  - / **Pressuring, forcing or tricking them into having unsafe sex.**
  - / **Making them have sex with other people.**
  - / **Sexually assaulting them**
- / **FRA 2012: An estimated 3.7 million women in the EU have experienced sexual violence in the course of 12 months before the survey interviews – corresponding to 2% of women aged 18–74 years in the EU**



# Harassment

- **Physical forms of harassment – 29 % of women in the EU-28 have experienced unwelcome touching, hugging or kissing since they were 15 years old;**
- **Verbal acts of harassment – 24 % of women have been subjected to sexually suggestive comments or jokes that offended them;**
- **Non-verbal forms including cyberharassment – 11 % of women have received unwanted, offensive sexually explicit emails or SMS messages, or offending, inappropriate advances on social networking sites**
- **Out of all women who described the most serious incident of sexual harassment that has happened to them, 35 % kept the incident to themselves and did not speak about it to anyone, 28 % talked to a friend, 24 % spoke to a family member or a relative and 14 % informed their partner. Only 4 % reported the incident to the police,**



# Financial abuse

- **Any behavior by one partner to control the other's money against their will. It can include:**
  - / Taking their money or controlling their income.**
  - / Refusing to give them money or making them account for everything they spend.**
  - / Selling or destroying their possessions or making it difficult for them to work.**
  - / Threatening to withdraw financial support as a means of control.**



# Stalking

- **Any behavior by which one partner (or expartner) tries to intimidate or harass the other. It can include:**
  - / Following them when they go to work, home or out.**
  - / Constantly watching them, their house or work.**
  - / Calling, texting or e-mailing them or their family, friends or work colleagues more often than is appropriate or when asked not to.**
  - / FRA 2012: The survey results show that one in five women have experienced some form of stalking since the age of 15, with 5 % having experienced it in the 12 months preceding the survey.**
  - / One in five women who have experienced stalking indicates that it lasted for more than two years. As with physical and sexual violence, the emotional and psychological consequences of stalking can be long-lasting and deep-seated**







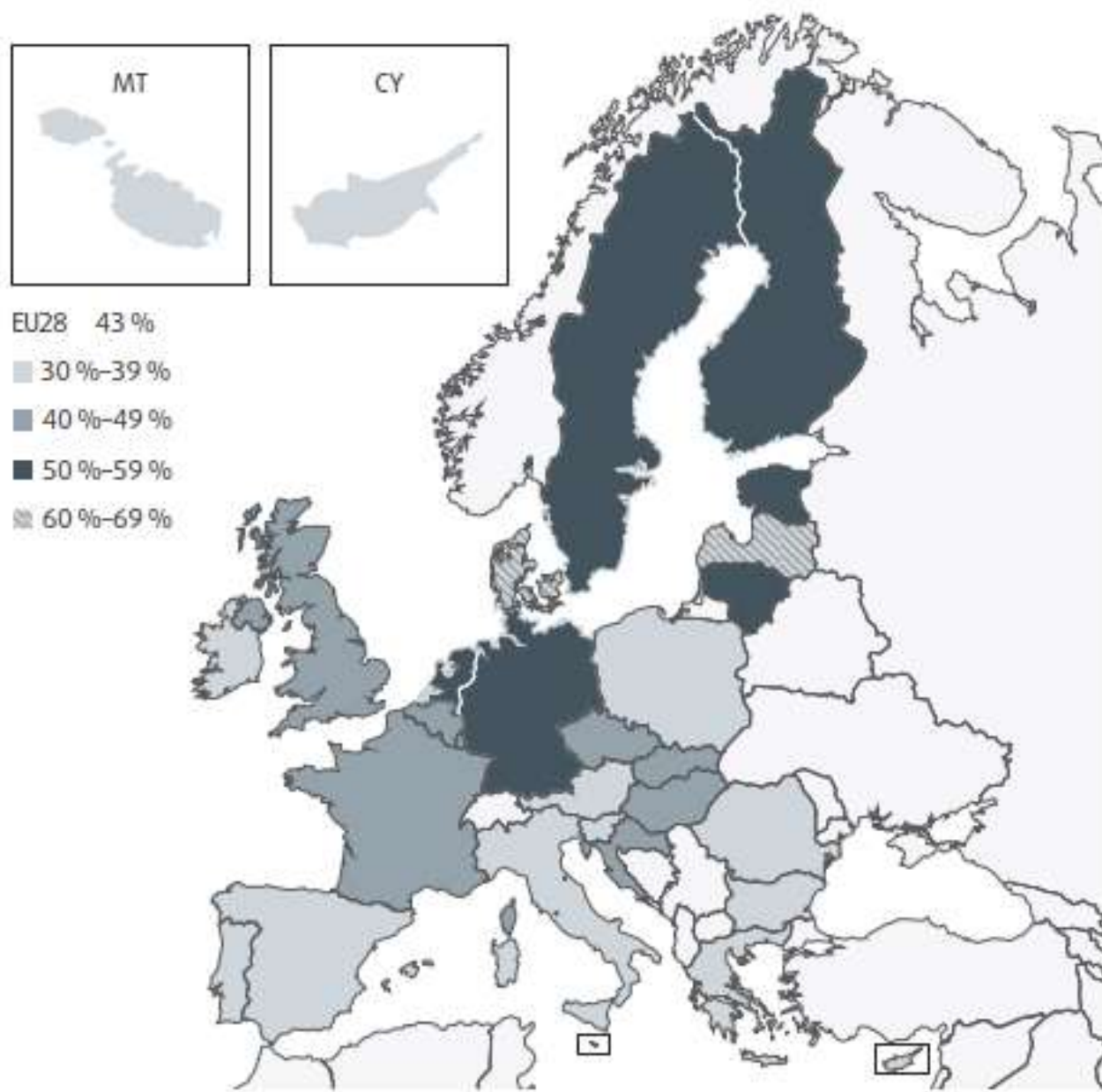
## Physical intimate partner violence against women across Europe

This report is based on interviews with 42,000 women across the 28 Member States of the European Union (EU) The interviews took place between April and September 2012





Kuvio 2 a: Kumppanin tekemää henkistä väkivaltaa 15-vuotiaana tai sitä vanhempana kokeneet naiset, EU28 (%)



Lähde: Naisiin kohdistuvaa väkivaltaa koskevan FRA:n tutkimuksen aineisto, 2012





- / 50% in Finland and 35% in Sweden of ex-partners has been violent**
- / Experienced violence during the last year:**
  - 18-74 v 9% in Finland 5.5% in Sweden**
  - 18-24 v 18% in Finland 20% in Sweden**
  - 25-34v 14%**
- / In 1/3 of the cases in Sweden and Finland battering continues after separation.**
- / In Finland:**
  - 9,2% of the violence was reported to police**
    - Why they did not report**
      - » 34% they thought it was not serious enough**
      - » 18% wanted to forget**
      - » 13% violence was reconciled**
      - » 10% feared for revenge**

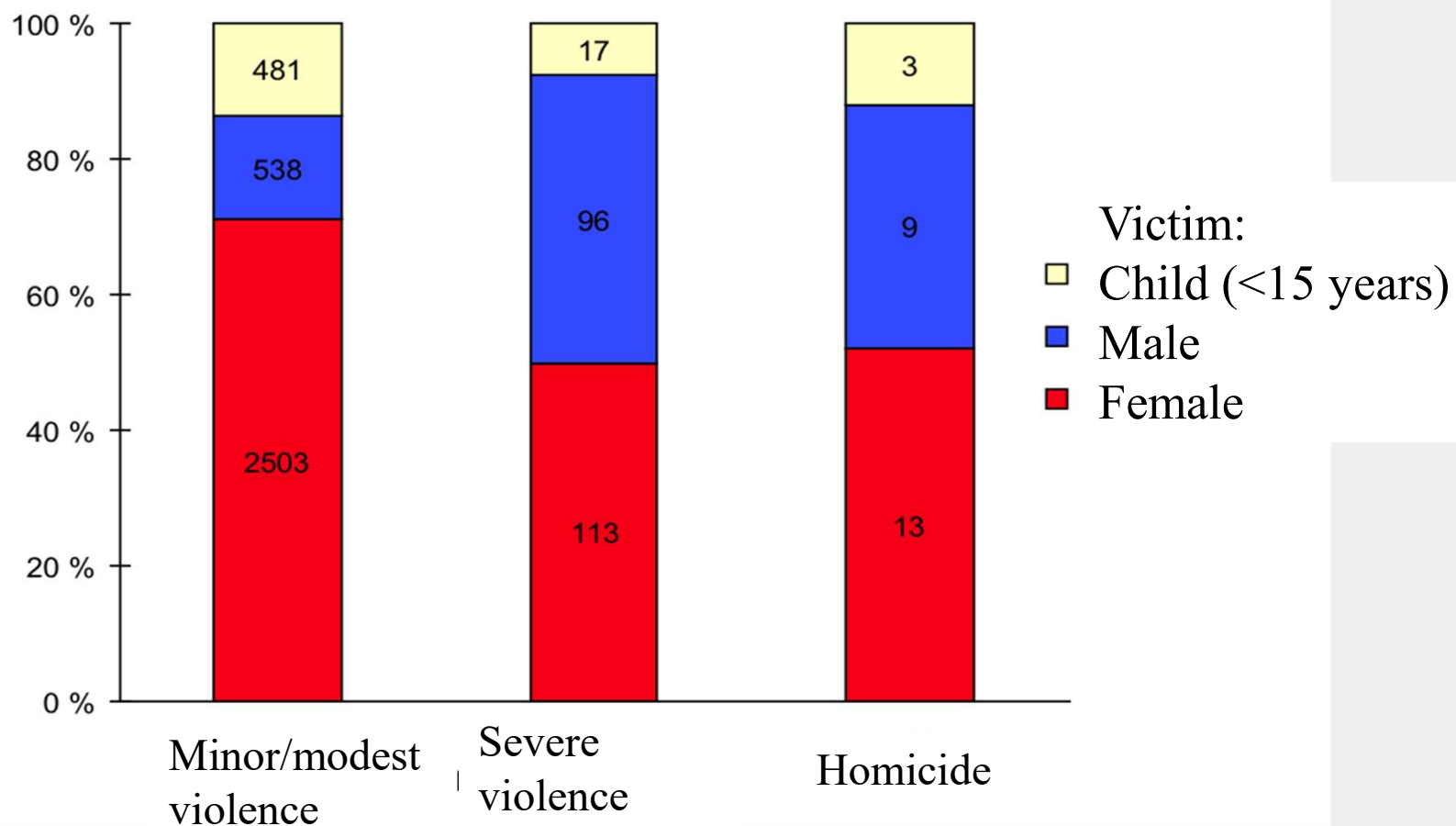


- / 26 % of the victims has sought help**
  - 11% from general health care**
  - Police 9,2%**
  - Family and child guidance centers 7,5%**
  - Law offices 6,6%**
  - mental health offices 5,5%**
  - social offices 4,3%**
  - church 3,2%**
  - Shelters 2,6%**
  
- / 17% of children under 18 years has been an eyewitness of domestic violence**



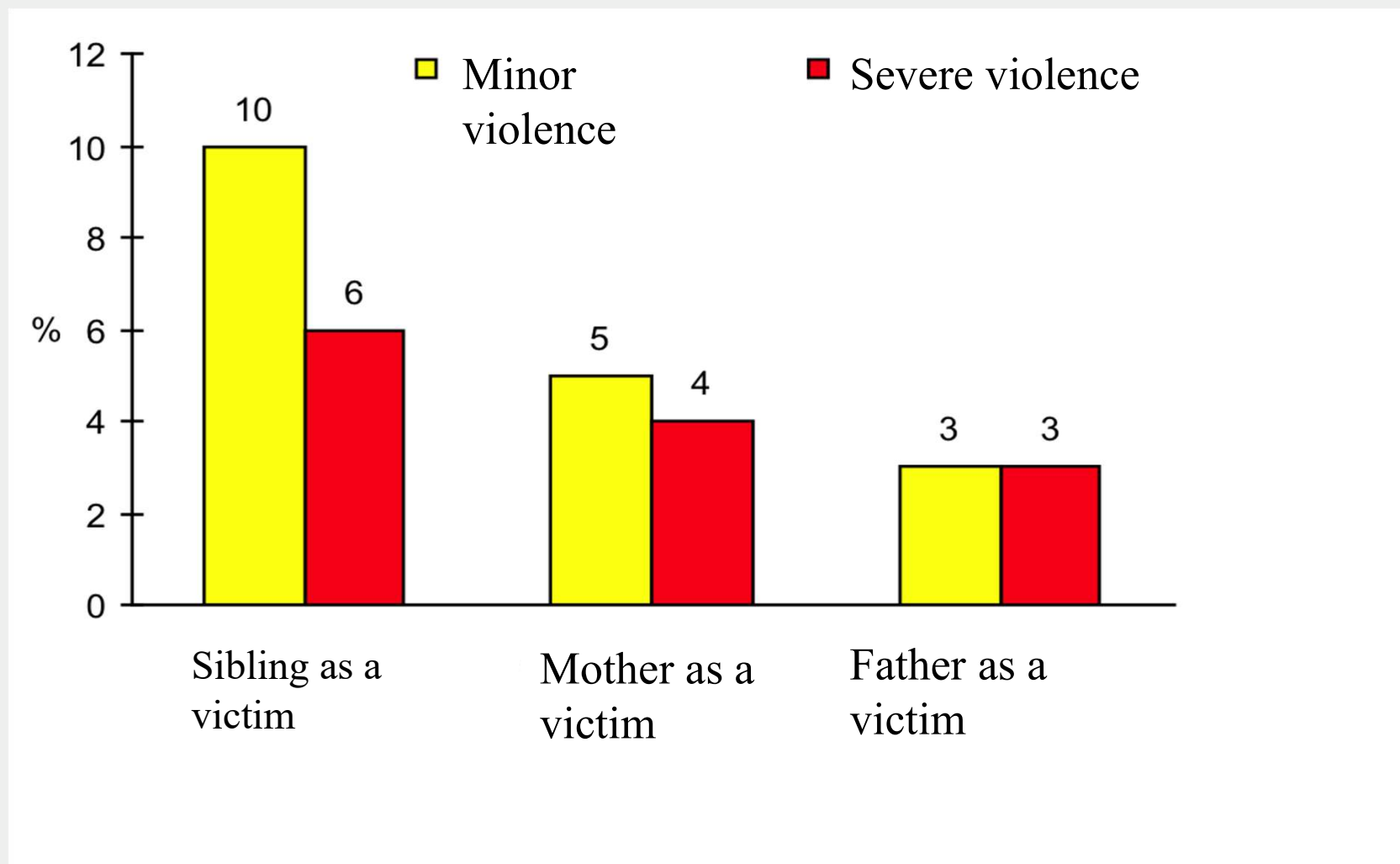
## Domestic violence reported to police year 2007 (number of cases).

Ref: TK Perheväkivaltatilasto, Oikeustilastollinen vuosikirja.





## Children witnessing violence at home during one year. Elementary school 9. grade, year 2008, %. (Ellonen ym. 2008, 72.)





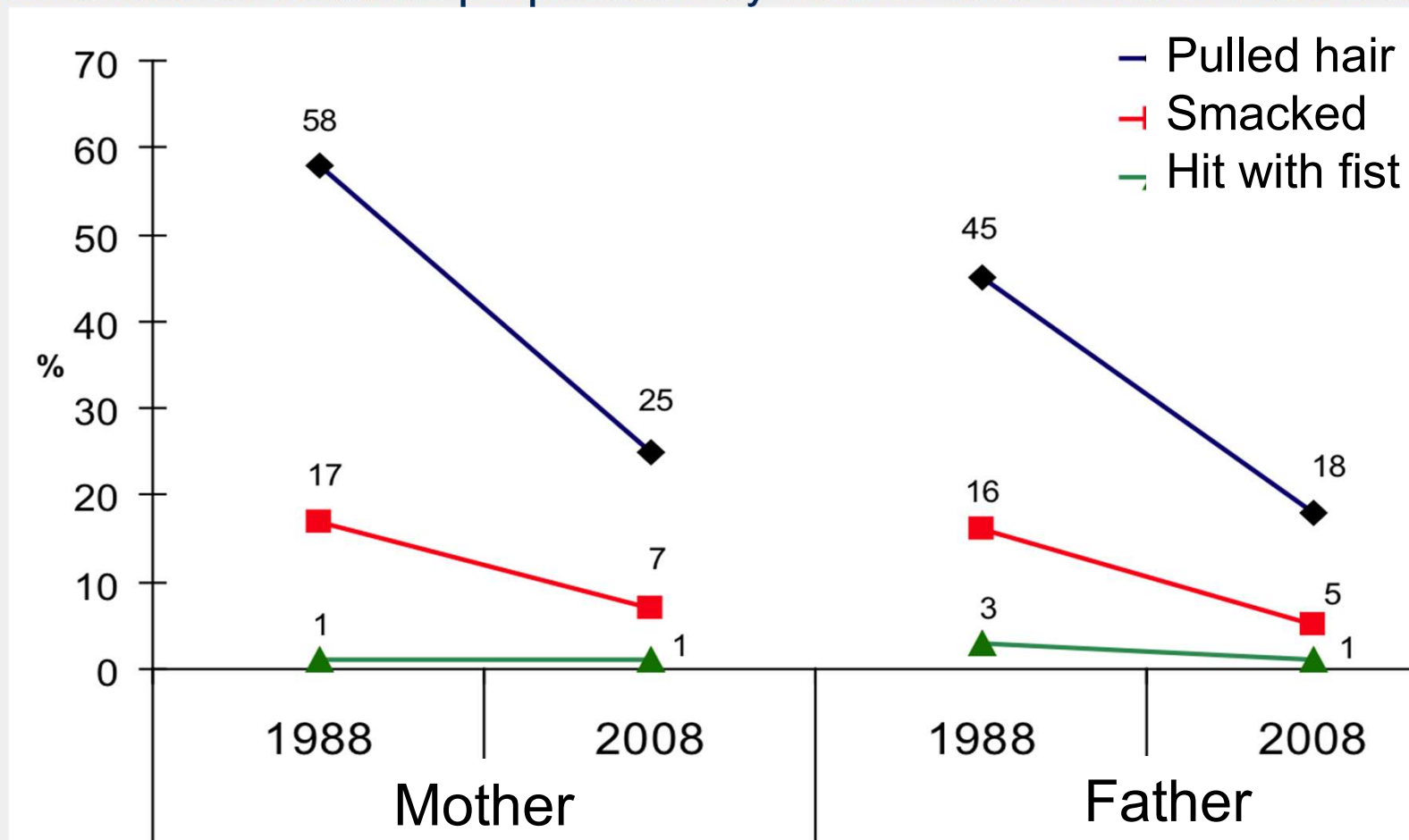
- A significant number of children witness domestic violence.
- A good deal of this takes the form of intimate partner violence between the parents although violence against the other children is also common.
- Children most likely to witness violence are those who themselves are subjected to domestic violence.
- Violence can thus be seen as a family-level phenomenon: where there is violence in the family, each member will be subjected to their share. Intimate partner violence can therefore be considered a clear risk factor for violence against children.
- **Violence against children is the most common mode of domestic violence.**

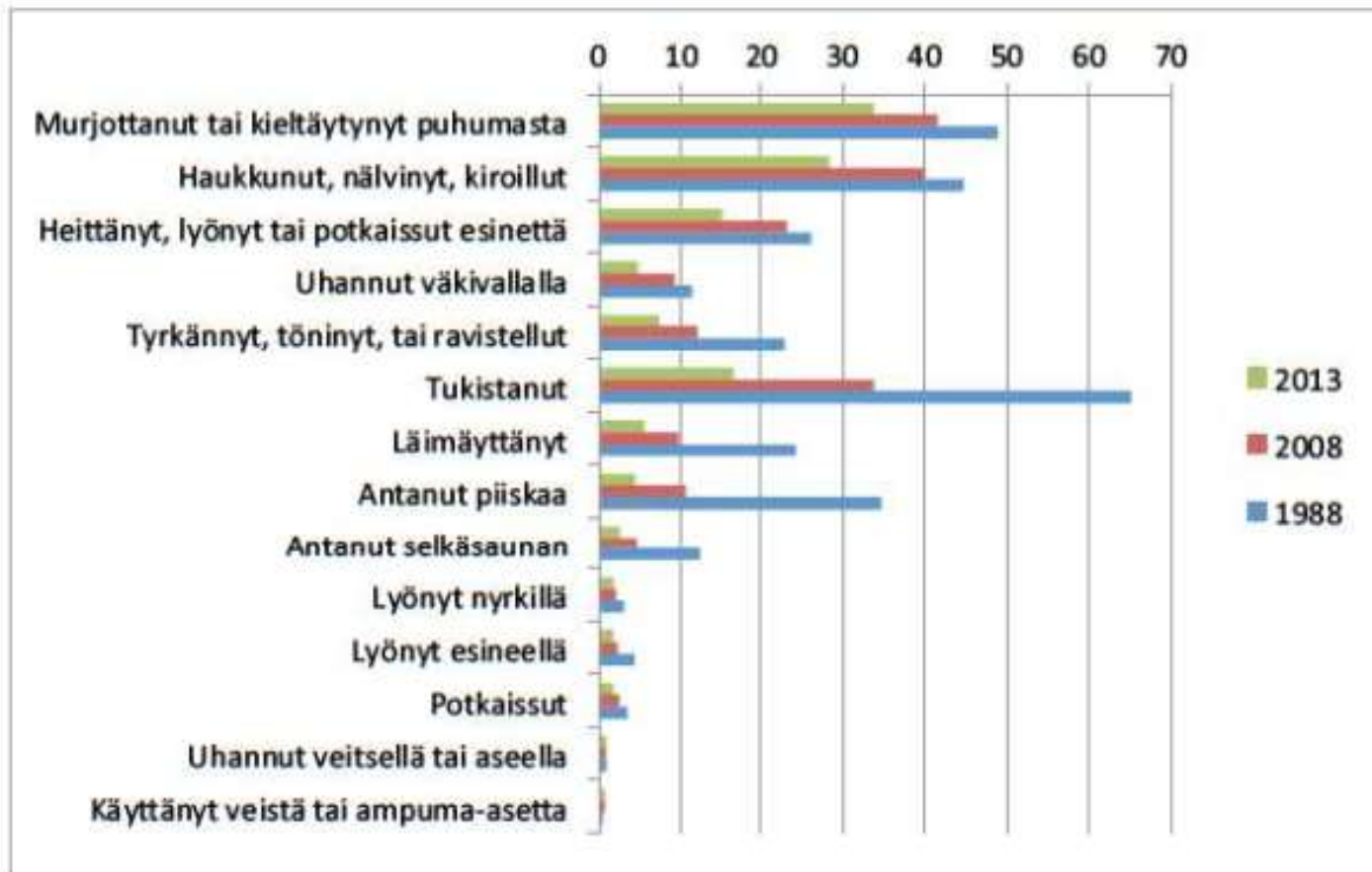


# Violence against children

Ellonen ym. 2008, 61–62

- Experiences of violence perpetrated by mother and/or father before age 14





**Kuvio 4.** Yhdeksäsluokkalaisten kokemukset äidin ja/tai isän käyttämästä väkivallasta ennen 14 vuoden ikää vuosina 1988, 2008 ja 2013, %.

Fagerlund, M., Peltola, M., Kääriäinen, J., Ellonen, N. & Sariola, H. (2014): Lasten ja nuorten väkivaltakokemukset 2013. Lapsiuhritutkimuksen tuloksia. Poliisiammattikorkeakoulun raportteja 110.



- The past decades we have seen a clear reduction in the incidence of corporal punishment and other forms of parental violence perpetrated against children in Finnish families.
- The reduction is reflected in the violence perpetrated by both mothers and fathers.
- The most significant reduction can be seen in the relatively mild forms of violence previously considered socially acceptable types of corporal punishment.
- Over the past twenty years attitudes towards corporal punishment have become more negative, a development also identified in Finnish attitude surveys (Sariola 2006,2007).



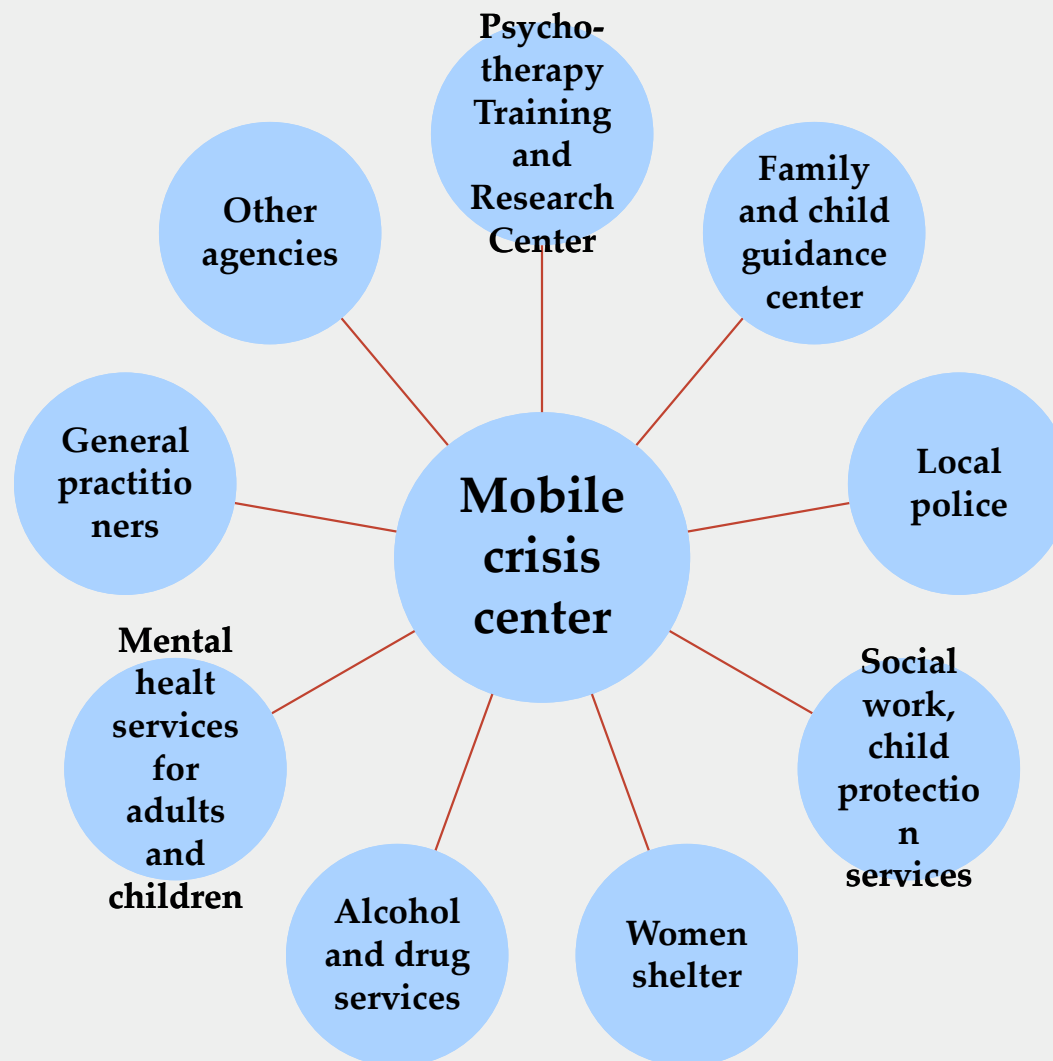


# Jyväskylä model for preventing and treating domestic violence

- In Jyväskylä a multi-professional co-operation in preventing and treating domestic violence started in 1995
  - / Social and welfare agencies
  - / Police
- A programme for men (and nowadays also women) was created in the crisis centre “Mobile” in collaboration with the Psychotherapy Training and Research Centre of the University of Jyväskylä
  - / Own programme to victims and eye-witnesses but closely connected and monitored to men’s programmes



# Multiprofessional networking





# The individual treatment phase for perpetrators

- **Immediate intervention**
  - / “Voluntary” attendance
  - / Active intervention
- **Lasts from one to six months**
- **Aimed at:**
  - / concretising violent acts
  - / finding ways to avoid abusive behaviour
  - / taking responsibility of these situations
  - / motivate perpetrators to the group treatment
- **Group treatment only after the individual sessions**



# Perpetrator programme

**Individual treatment at  
the Mobile crises center**



**Group treatment at the  
Psychotherapy research  
and training center at  
the university**

# Long and short term strategies.



- **Safety strategies**
  - / **"Time out" (possibility to misuse)**
    - What are the signs to have a time out
    - Concrete plan what to do during the time out
    - When it is safe to return home?
    - Does it have a meaning that you are abandoned or lost the battle?
    - What problems do you think you will have in using time out?
    - Do not use time out as a way to avoid significant issues.
  - / **Recommend: Avoid substance abuse and stressful situations**
  - / **No-violence contracts (written)**
  - / **Safety planning**



- **Other strategies**

- / **“Slow motion movie” technique: violent behaviour is reviewed in detail.**

- **Where and with what he hit?**

- **Where and when it happened?**

- **What here the consequences?**

- **Where the children were?**

- **Was there psychological, sexual violence before or after physical violence?**

- **What where the early warning signs?**

- **Physiological arousal, signs**

- **When did he decided to continue on a track towards violent act?**



# Long term strategies

- **What are the emotions during violent act, everyday life?**
  - / Guilt, shame , fear, anxiety, depression, low self-esteem
  - / Helplessness, powerlessness, inequality
- **What evokes these emotions?**
  - / Life events
  - / Attitudes against women
  - / Role expectations in a partnership, in a family
- **Do not forget the violence!**
  - / Is there violence now (also psychological, sexual, economical)?
  - / Has the violence increased?
  - / What are psychological consequences of the violence now?



- **During the years 2001-2020,**
  - / **nearly 900 perpetrators had started individual sessions at the crisis centre.**
    - **Every third contacted themselves the crises center**
    - **In every fourth case the partner contacted first**
    - **Nearly half of them were referred by the network**
  - / **Only 14% started the group meetings**
    - **Half of them reported lack of motivation**
    - **no difference who referred or did he contacted by himself**





# Group treatment

- **Earlier phase:**
  - / Closed group: 15 sessions.
- **New phase:**
  - / Open-ended group from autumn 2001. Refilled regularly.
  - / Once a week 1.5 hour's session.
  - / Max. 7 participants.
  - / Conducted by two therapists (male and female).
  - / Nowadays also for female perpetrators
  - / Perpetrators commit for at least 15 sessions.
  - / No explicit schedule, structure.
  - / No psychodrama, homework, lectures. Only discussions focussing on violence and it's context.



- **Feedback system**

- / **Partners are met in the beginning and in the end of the group by the therapy clinic worker.**
  - **They are interviewed about the violence they have met. They get information about the services for them and about the programme for perpetrators. ACBI**
  - **In the end of the group they are asked feedback and about the violence during the group**
- / **Two years follow-up interviews for both the perpetrator and the partner**



# Principles in working models in domestic violence

- The safety and security of women and children are the primary issues of all programmes.
  - / **Children are forgotten most easily.**
  - / **The threat of violence surpasses confidentiality.**
    - An obligation to report about the violence when threatening children's development (the child protection law) or the threat of violence (the criminal law).
  - / **The victim's should be provided information about the risks of perpetrator programmes and about their own rights and services available.**
  - / **Perpetrator programmes should be monitored and evaluated during and after the programme.**



- **The perpetrator is always responsible for the violence.**
  - / Violence is a crime, not a disease or mean showing feelings.
  - / Violence means dominating others through the use of physical power.
  - / Violence makes sense to the offender.
  - / Perpetrator's programmes should not replace effective action against perpetrator under criminal law.
- **Recognizing different modes of violence is an important part of all programmes.**
  - / Violence includes psychological, sexual, and economical as well as physical abuse.



# Man/perpetrator wants help to his violence

- In programmes for perpetrators the victim and children must also be identified as clients.
- There should be monitoring and feedback system to ensure the victim's and children's safety.
  - / Therapist must have information about the partner and children, their situation, violence against children etc.
  - / Survivors must be given complete confidentially and kept informed about sources of help, the programme structure, progress and attendance of the perpetrator.



- / Victims are given full information about how the perpetrators programmes work, and must have the opportunity to give feedback on the effect of the programme and any concerns they have.**
  - / Women may under-estimate the extent and dangerousness of the violence.**
- Risk factor of men:**
  - / Weapons (guns, explosives, bows, knives)**
  - / Alcohol and drug abuse**
  - / Hormone abuse**
  - / Violence outside home**
  - / Mental health problems**
  - / Suicide risk**
- No treatment without no-violence contract including removing the available weapons!**



- **Risk factors of perpetrator programmes:**
  - / **Victim-blaming atmosphere; denial or normalization of violence; accepting the use of violence. Increased risk especially in group work.**
  - / **Physical violence modifies to more extreme emotional abuse – the ways of oppression and control becomes more invisible.**
  - / **Abuse of the programme.**
  - / **Violence continues or even increases.**
  - / **Mental health diagnosis, trauma etc. diminishes perpetrator's responsibility in the eyes of the helper – perpetrator uses that purposefully.**
  - / **False sense of security (concerns both man and woman)- too short programme.**
  - / **Violence is understood to be wrong way of behaving, but man do not get any new ways to cope in these situations.**



# What works in batterer intervention programmes

- Focus on violence
  - / Also psychological and sexual violence
  - / Violence against children
  - / Do not forget what is happening now. Violence may continue.
- Focus on insecure experiences in relationship to the partner.
  - / Insecure relationship can be changed by noticing and getting aware on man's own dependency and insecurity in relationship to their partner.





- Focus on emotions related to problematic situation, physical experiences and reactions. Experiences as
  - / Helplessness, powerlessness during quarrel, argumentation.
  - / Feelings of being subjugated, humiliated, rejected and unfairly treated by their spouses.
  - / Experiences of shame, guilt and psychological loneliness.
- Focus on longer processes prior to the problematic experiences, emotions.
  - / what were their own emotions, experiences and what feelings and experiences were their spouses.
  - / Try to find connections of past events, often traumatic events in childhood, with present experiences. It helps men to accept and own these painful experiences, emotions as a part of oneself.
- Focus on mental states of his own as well as the partners



# Silvergleid & Mankowski, 2006

- Changes in successful cases as reported by perpetrator and therapist
  - / Individual level development
    - new skills and activities
    - Increased self-awareness, about own choices, on violence, its effects
    - decision to change
  - / The impact of the therapist:
    - balance between support and confrontation
    - appreciative listening
  - / Group influence:
    - balance between support and confrontation
    - sharing and listening to stories and experiences
    - modeling



- **In successful cases, men reported (Scott & Wolfe, 2000) that**
  - / The most important change was to recognize and take responsibility for their own violence**
  - / Development of empathy**
    - Understand their spouse's fears and possible reasons for divorce
  - / Reduced dependency**
    - Less affected by evaluations of others
    - Understanding they were alone responsible for their choices
    - The partners began to be seen as an autonomous individual with the right and ability to make decisions
  - / Communication**
    - Recognise the warning signs of anger and intervene early before escalation
    - Express negative feelings to their spouse and hear negative feelings from their spouse without the conversation turning violent



# How the participants in batterer group intervention experienced factors that helped them reduce intimate partner violence

## Pullinen & Seppänen 2021

- The data consisted of recordings of weekly group sessions lasting two years. The accounts about the things that have helped group members to reduce intimate partner violence were categorized by content analysis.
- Four categories were found:
  1. Alternative ways of acting,
  2. Changes in attitudes and ways of thinking,
  3. Obtaining peer support in a group,
  4. Increase in own well-being and functioning.

These discussions began at the initiative of the facilitator or group members, by sharing the experiences of another group member, or by open-ended questions from group members to others. **The importance of the group was highlighted in the form of peer support and in the emergence of relevant themes presented in the results.**

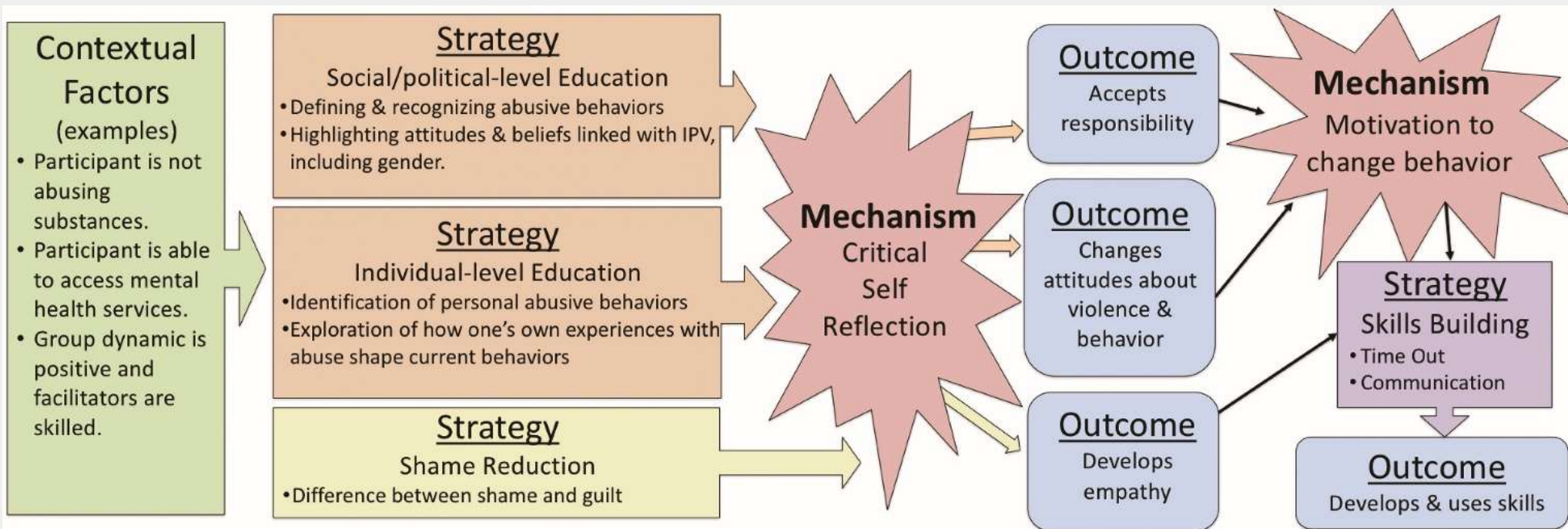


Figure 3. Revised hypothesis.



# Outcome of the group programme

Lampi & Wargh, 2020

- The outcome of the group treatment was measured by using the information collected from the spouses of the batterers; ACBI-questionnaires and interviews were used to examine the change in violence and in the quality of relationship.
- The data consisted of 44 batterers who had taken part in the group intervention between 2001-2018 and there were partner interviews at the beginning and end of the group treatment
- The partner data show that 70% of the participating perpetrators benefitted from the group intervention and that for 75% of this group their reported the positive outcomes were sustained over the two-year follow-up.



## **The changes in the relationships of intimately violent men who participated in the treatment group (Nuutinen & Holma, 2016)**

- Our aim was to examine the changes that occurred in the relationships of the men who participated in the group.
- In addition, we evaluated the effectiveness of the treatment group.
- The data of our study consisted of pre-, post- and two-year follow-up interviews of the men's spouses/ex-spouses.
- We analyzed the data applying qualitative content analysis.





- Based on the pre- and post-interviews we formulated five categories that describe the changes in the relationships:
  - / 1) good situation overall, physical violence has ended,
  - / 2) situation improved, physical violence has ended,
  - / 3) situation improved, physical violence has decreased,
  - / 4) significant problems, physical violence has ended and
  - / 5) significant problems, physical violence has decreased.
- We classified the first three categories (n = 11, 48 % of the cases) as overall successful and the last two categories as partially successful (n = 12, 52 % of the cases).
- According to the two-year follow-up interviews the positive changes achieved by the end of the treatment group lasted only in some of the cases.
- In addition, significant problems that were present at the end of the group usually continued.





# Outcome studies on programme effectiveness

- Early nonexperimental evaluations of cognitive-behavior/gender resocialization groups, which could not rule out nontreatment effects, showed promise for changing attitudes about gender roles, reducing anger directed at the partner, and decreasing child abuse
- Several studies compared treatment completers and noncompleters (e.g., Dutton et al., 1997b; Edleson and Grusznski, 1988; Hamberger and Hastings, 1988) and generally showed **recidivism rates to be higher for noncompleters. However completers and noncompleters are likely to differ on their motivational levels and important demographic characteristics.**
- The quasi-experimental studies used reports of official records that, unlike victim reports, are likely to underestimate greatly the actual rates of violence
- A meta-analysis, the statistical combination of many studies, concluded that the **effects of treatment were small.** The treatment effects in experimental studies that relied on victim reports were particularly small. (Babcock, Green, and Robie, 2004)



- Although treatment effects overall seem to be small, this may not be too surprising because clients are generally unmotivated and have chronic problems; medical treatments are endorsed with equally small effect sizes (Gondolf, 2002).
- Moreover, both the quasi-experimental and experimental studies have serious design and implementation problems. Moderate effect sizes were found in a multisite quasi-experimental study that used complex statistical controls (Gondolf and Jones, in press)
- A promising avenue for further research is the matching of offender type to type of treatment.
- Another avenue of research applies theories about the stages of development of the offender. The trans-theoretical approach assumes that the motivational stage of the offender is more important for treatment effectiveness than any particular theoretical approach. Interventions are posited as being most effective when tailored to match the “stage of change” of the offender.
- A closely related trend is to gather qualitative accounts from victims and offenders on their perceptions of the intervention change process

# Court-mandated interventions for individuals convicted of domestic violence: An updated Campbell systematic review (2021) D. B. Wilson, L. Feder, A. Olaghere



- The aim was to assess the effects of postarrest court-mandated interventions for intimate partner violence offenders that target, in part or exclusively, male batterers.
- We included experimental (random assignment) and quasi-experimental evaluations of court-mandated BIPs that measured official or victim reports of future intimate partner violence.
- The original review identified nine eligible studies. The updated search identified two new studies. The total sample size across these 11 studies was 4824.
- The mean effect for official reports of intimate partner violence from experimental studies showed **a modest (but statistically nonsignificant) benefit** for the program group.
- One quasi-experiment reported a nonsignificant effect for a victim report outcome
- Thus, there is insufficient evidence to conclude that these programs are effective.



# Are Interventions with Batterers Effective? A Meta-analytical Review

R. Arce, E. Arias, M. Novo, F. Fariña (2020)

- A total of 25 primary studies were found from literature search, obtaining 62 effect sizes, and a total sample of 20,860 intervened batterers.
- The results of a global meta-analysis showed a positive, significant, and of a medium magnitude effect size for batterer interventions, but not generalizable.
- The results exhibited a significantly higher rate of recidivism measured in couple reports (CRs) than in official records (ORs)
- In relation to intervention length, short interventions failed to reduce recidivism in ORs and may have negative effects, while long interventions were effective in reducing recidivism rate in ORs without negative effects.