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Processes of Change: Interviews with Men who have Perpetrated Intimate Partner Violence

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This thesis is dedicated to G.V., my compass in the storm. Te amo.
Abstract

Intimate partner violence (IPV) is a complex problem affecting relationships in Canada. Current methods of addressing this problem are insufficient to ensure the safety of victims, and past therapeutic techniques have resulted in marginalization and stigma counterproductive to supporting non-violence. Low levels of accessibility and social support are problems facing male-as-primary-client intervention programs. This study solicited experiences from men who have perpetrated IPV and who have chosen to become non-violent. Participants were recruited from two men’s programs in Nova Scotia, and interviewed for their experiences of stopping the perpetration of violence and creating respectful relationships with their partners and families.

In these interviews, men described supports and hindrances to change. They provided narratives of their experiences that included processes of help-seeking, disclosure, navigating stigma and shame, and taking responsibility for their actions. They discussed the creation of their new identities as men who choose not to abuse, and they recounted their experiences with friends, family, and intervention programs.

The discussion of these experiences examines links between elements of the men’s experiences and existing literature, such as the impact that low intervention accessibility may have on the trajectory of violence. It also explores the benefits that these men derived from achieving clarity concerning their preferences, values, and definitions of abuse. Methodological and interpretive tensions in the research are discussed, and feedback for intervention programs is
offered. Possible limitations to this research are reviewed, and gaps in knowledge are presented for further study.

This research broadens academic and social understanding of how men who perpetrate IPV can best be helped, and may change how these interventions are conducted, increasing their effectiveness, accessibility, and impact.
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Я люблю вас.
Table of Contents

I. Chapter I: Introduction
   A. Problem/Focus
   B. Definition of Key Terms

II. Chapter II: Literature Review/Critique
   A. Early IPV Interventions
   C. Contemporary IPV Interventions
   D. Narrative Therapy
   E. Theoretical/Practical Importance of this Study

III. Chapter III: Theoretical Framework

IV. Chapter IV: Methods
   A. Data Analysis
   B. Ethical Considerations and Safeguards

V. Chapter V: Results
   A. Seeking Help
   B. Supports for Change
   C. Hindrances to Change
   D. Motivating Factors
   E. Stigma and Shame
   F. Responsibility
   G. Identity
   H. Reciprocity
   I. Interactions
Chapter 1: Introduction

Instruments to predict violence are presently unable to ensure intimate partner violence (IPV) victim safety (Eckhardt & Utschig, 2007), and controversy exists concerning intervention programs targeting men. Part of this controversy involves ignorance: we presently lack sufficient information about what kinds of interventions effectively encourage and support change within men who perpetrate IPV. Another element of the controversy involves the application of resources, which – as in most intervention programs – are often constrained, and whose effectiveness depends on strategic and careful management. Although substantial research has been conducted to examine the contributing factors of IPV (such as stress and substance abuse) (Freize, 2005; Kurst-Swanger & Petcosky, 2003), it is not yet understood why some people who experience these factors perpetrate abuse, while others do not. Conversely, it is not understood why some people who abuse do so without having experienced some or all of the known precipitating factors, which have neither proven to be necessary nor sufficient conditions for abuse.

Many current interventions are understood to be insufficient or ineffective at addressing IPV. Furthermore, where interventions are available, there has been substantial backlash experienced by proponents of men’s rights within abusive relationships. As a result, support has lacked not only for men who have perpetrated abuse, but also for those who would work to ensure their success in becoming non-abusive. The research for my thesis aimed to counteract the aforementioned gaps in knowledge by asking men what they experienced as they sought help to stop abusing. I investigated their motives and supports for ceasing abusive behaviour, in the hope that this information will lead to
better interventions and application of resources in the battle against IPV.

The Centre for Disease Control and Prevention (2010) defines IPV as psychological, physical, or sexual harm perpetrated by a former or current partner, while the National Domestic Violence Hotline defines it as any pattern of interaction used in an intimate relationship to gain or maintain power or control (Administration for Children and Families, 2012). The broader term of “family violence”, under which falls IPV, has been described as any act that results in a deprivation of any family member of equal rights and liberties (Kurst-Swanger & Petcosky, 2003). IPV goes by many names: spousal abuse, marital violence, domestic violence, and others (Kelly & Johnson, 2008). A Statistics Canada (2011) report gives the 2009 rate of self-reported spousal abuse as 6%, but it should be noted that IPV rates must be interpreted in consideration of the definition used within the study. The definition, in this case, brackets the set of behaviours included in the study, and may therefore represent a broad or narrow depiction of incidence rates.

Operationally defining IPV to include emotional, mental, and financial abuse represents IPV as much more prevalent than when only legally-defined assault is studied. Any definition also requires that the forms of “abuse” to which it refers are operationally defined, and thus requires the satisfaction of several more questions, such as what behaviours constitute emotional and mental abuse. Multiple behaviours and mental states are sometimes implied when the term IPV is used, including physical aggression, emotional abuse, power dynamics, intent to control or harm, and outcomes that are detrimental to the health and wellbeing of at least one member of a relationship (Lindhorst & Tajima, 2008); other definitions offer a single, sufficient condition to determine whether or not a relationship is abusive, such as the coercive nature of the abuser’s power
Definitions that pinpoint aggression as the key feature of abusive relationships, thereby bracketing as abusive only those relationships in which there are behaviours committed with the intent to harm (Freize, 2005), must attend to questions as to how intent is determined by third parties. Problems arise when the definition of IPV is restricted to behavioural or motivational levels, which omits important contextual factors, such as the recipient’s conceptualization of the experience, although most definitions understand an act to be abusive if it includes physical aggression, regardless of the receiving partner’s perception (Lindhorst & Tajima, 2008). Further complicating the matter is the fact that value systems do not occur within a vacuum, and are highly dependent on the attitudes of peers. Thus, cultural norms and religious tenets may alter the experience for both the person perpetrating violence and the recipient, as well as the legal framework that determines how IPV is addressed within some countries (Kurst-Swanger & Petcosky, 2003).

Statistics Canada circumvents these difficult questions by relying on a legal definition of abuse for some statistics (as they are derived from police reports), and self-reported abuse in others (Statistics Canada, 2011). Neither set of data encompasses the complexity of IPV, given that abuse may occur without it ever having been reported. Many practitioners in the field of IPV feel that the legal definition is too narrow (T. Augusta-Scott, personal communication, March 27, 2013) in that it not only fails to encompass the myriad forms that partner abuse can take, but it suggests that there is only truly a problem of abuse in relationships for which the perpetrator would receive legal sanctions. By using this narrow definition, these statistics leave out of the discussion much that is relevant.
Problem/Focus

This study focuses on the processes through which men who have abused their partners acknowledge their abuse, choose to become non-violent, access resources, overcome hurdles, and come to self-identify as non-abusive. Part of understanding IPV these processes involves taking into account the social framework surrounding men who perpetrate IPV.

Meritocracy, which includes an understanding that experiences are a product of an individual’s actions, and are therefore fair (their ‘just desserts’), plays a part in social perceptions of IPV, and contributes both to victim-blaming and social rejection of perpetrators. This ostracization occurs when, as a result of having committed IPV, men are continually viewed as evil people and are denied social contact, support, and compassion that society typically accords its members. Such a view fails to encompass the complex causes of IPV, assigns blame solely to the perpetrator, and encourages disregard of contributing factors. While the ecological systems view (Bronfenbrenner, 1994) has become standard for assessing many social problems, there is a lag in society’s adoption of this view towards IPV.

Just as drug users were ostracized, demonized, criminalized, and silenced in the 1970s and 1980s, a similar aura of silence surrounds men who have abused, even those who have changed their behaviour. These resulting negative opinions and ideas are often internalized by men who have perpetrated abuse; in this way, shame, embarrassment, and isolation are further adopted into his sense of self. The stigma attached to IPV means that, like those substance abusers, men who require help to change do not come forward and access services for fear of being socially rejected and criminally prosecuted. Fear of
publicization of their crimes contributes to the shame that they often feel in relation to the abuse.

Ideologies concerning masculinity are central to many men’s experiences of IPV. Western culture traditionally positions a man as exhibiting certain traits and behaviours such as stoicism, toughness, control, leadership, insensitivity: all traits that are assumed to be evolutionarily and socially beneficial, and which manifest in relationships that some men have with their partners (Freize, 2005). Men may learn through socialization that aggression and violence are acceptable or appropriate ways of dealing with conflict and anger. One of the drawbacks of this narrative is that it inadvertently perpetuates current, harmful concepts of masculinity. This understanding of masculinity negates the desires of men for respectful and intimate relationships, and suggests that they are only capable of caring about power and control (Augusta-Scott, 2003). The contradictory nature of such rhetoric begs the question: how are these (or any) men supposed to create an identity as both masculine and caring when they are being repeatedly told that masculinity and caring are mutually exclusive? How can therapists encourage behaviours and emotions that run counter to those that are widely (and mistakenly) considered beneficial to men and integral to masculinity?

The paucity of research is due in part to the awareness that IPV constitutes behaviour that is dangerous (and potentially lethal), which leads to the assumption that individuals who have perpetrated IPV will be hostile to research activities (Mann, 2008). The harmful, illegal, and potentially lethal nature of the crime necessitates a level of anonymity (if not outright secrecy) for men who have committed abuse if they are to avoid profound social ostracization. They risk this anonymity if they reveal their
experiences, and, consequently, are not solicited as research participants. It has followed that there is no space for their voices to be heard, in either public or academic forums.

My curiosity toward the subject of IPV was initially sparked during my undergraduate degree in psychology, in which I studied violent behaviour. This interest developed, increasing and becoming more specific, in my second semester at MSVU, in which I took a course on family violence. During this course, we reviewed the processes by which women and men choose to stay or leave abusive relationships, and it was revealed that the academic field of family violence is not presently able to answer questions as to why men choose to become non-violent. I came to the following research questions after consultations with therapists in the field of IPV intervention, and after conducting an extensive literature search. There is currently a lack of literature informing therapeutic IPV intervention that includes input from the targets of that intervention. Moreover, what little research is available is dominated by preconceived theories concerning the mindsets and psychological processes of men who have chosen non-violence (that they are manipulative, that they are incapable of caring, respectful relationships), and accounts of events are analyzed through these lenses (Mann, 2008). Although I cannot speak to the validity of such research, I am aware that little of it involves asking men directly how they experienced the change: how they came to the awareness that their behaviour was undesirable, how they came to terms with their identity as a man who abused his partner, and how they navigated the stigma attached to IPV. IPV is a unique problem in that the men who perpetrate this violence may not understand that a problem exists with their behaviour, and they are unlikely to be the ones who initiate intervention (Eckhardt & Utschig, 2007). Moreover, once intervention is
initiated, the attendees involved may not be interested, or they may be more concerned with the legal sanctions that they face; both of these aspects of intervention may have deleterious effects on recruitment of participants for research. In my research, I sought to discover, from the recipients of IPV intervention, how they understand the intervention to have affected their decisions and behaviour, and how interventions could have been more effective for them. Although some participants did not have answers to all of my questions, I recognized that they were the sole experts of their lived experience, and were best equipped to inform the field as to how men who have perpetrated IPV decide to become non-abusive and change their behaviour.

The goal of this research was to obtain a rich understanding of the factors that affect how men who have abused come to the realization that they desire to be non-violent, and, subsequently, change their behaviour so that they interact with their partners without using violence. A number of questions were asked regarding the self-concepts of these men. For example, how is “non-abusive” identified by men who consider themselves non-abusive? Do men ever arrive at this point, or do they always see themselves as abusers who may backslide if not careful? Questions can focus on the process of change itself, and how it was experienced. What prompted their change, and can participants identify specific internal and external motivations for change? What elements of interventions did they find particularly helpful? With this research, I sought also to contribute to how we understand this change, and thereby to inform social perception and intervention. To this end, the research questions involved analyzing elements of the men’s experiences so as to better understand how to assist other men who are undergoing similar struggles. Such information may be used to promote critical
analysis of IPV, determine the most helpful elements of interventions, identify problem areas and gaps in service, and allow for better direction of resources.

**Definition of Key Terms**

Some literature uses “IPV” to refer to all forms of partner abuse, and in this study I recruited participants who had attended group or one-on-one therapy aimed at addressing numerous forms of partner violence. It was my initial understanding that all participants had perpetrated physical violence, but most of the participants in my sample revealed to me that the abuse in their relationship was of a different nature: verbal, emotional, or mental. My participants were recruited by the administrators of two IPV intervention and therapy programs in Nova Scotia: the Bridges Institute and Newstart. Referral to these programs frequently results from involvement with the criminal justice system, and I had assumed that participants from this pool had perpetrated physical violence towards their partners, because emotional violence is not an illegal form of abuse. However, types of verbal abuse are illegal in Nova Scotia, and some participants reported perpetrating solely this form of abuse. Adding to the complexity of defining abuse, it should be noted that researchers encounter difficulty when attempting to study forms of abuse separately, as they are highly comorbid, and often constitute overlapping categories (Frieze, 2005). The contributing factors to the varying forms of partner abuse are also understood to overlap, and include ideologies of patriarchy and masculinity, socio-economic factors such as poverty, overcrowding, low levels of education, and individual stressors such as isolation, chronic pain, and substance abuse (Augusta-Scott & Dankwort, 2002; Fenton & Rathus, 2009). Indeed, these two patterns (of overlapping forms of abuse and overlapping contributing factors) are readily observable in my data.
As a final note regarding the definition of “abuse,” in this study, I use the term ‘violence’ interchangeably with ‘abuse’ for two reasons. First, synonymous usage is consistent with the predominant discourse among counselors and clients at the men’s programs. Second, it is meant to be inclusive of all abusive and violent behaviours.

The terms “intimate partner,” or “partner” refer to the other member of a romantic, co-habiting, heterosexual relationship: specifically heterosexual because of the different ways in which constructs such as masculinity play a part in such abuse for heterosexual couples.
Chapter II: Literature Review/Critique

The literature concerning IPV is extensive and diverse. In this chapter, I summarize key events in the history of IPV and the development of social and legal sanctions against partner violence, followed by a critique of several early theoretical and therapeutic frameworks or understanding and treating IPV. Subsequently, I review a more recent conceptualization of partner violence, including the treatment of narrative therapy, which is intended to combat several of the harmful ideologies upheld in previous frameworks. The second section of this literature review outlines the theoretical importance of the study, as well as its import to practice. I also identify remaining gaps regarding knowledge of IPV and possible future directions for subsequent research.

Early IPV Interventions

Early sanctions against IPV in North America involved Puritan attempts to create restrictions against violence towards women during the 1600s, but there is little evidence that many punishments were meted as a result of infractions against such regulations (Kurst-Swanger & Petcosky, 2003). Early battered women’s movements in the 1970s were crucial to defining IPV and bringing it to light as a real problem that warranted attention, rectification, and criminal sanctions (Freize, 2005; Kurst-Swanger & Petcosky, 2003; Sheehan, Thakor, & Stewart, 2012). These movements provided the impetus necessary for social and legal responses to be put in place which reduced the incidence and severity of IPV across Western society. They were also pivotal to raising concerns over traditional gender roles, particularly at a time during which violence against women was such a culturally embedded practice in North America. These forerunners of women’s rights had to contend with disinterested police and court systems, and
entrenched religious and social practices that superseded regulations against partner violence (Kurst-Swanger & Petcosky, 2003). Once interventions were established, feminist organizations and individuals continued to further women’s interests by addressing the shortcomings in the traditional legal and therapeutic responses to IPV (Augusta-Scott & Dankwort, 2002; Freize, 2005). An unfortunate conclusion generated by this work was that interventions directed towards men were counter-productive: that they shielded men from their just punishments, trivialized the crime, and provided excuses for violent behaviour. Therapists would, it was assumed, bond and inadvertently collude with abusive men by being over-accommodating in the effort to be client-centred. Interventions with men as the primary clients, therefore, undermined the safety and well-being of women, and were contrary to feminist work, in that they ignored how social factors such as patriarchy affected behaviour.

The idea that traditional forms of therapy are counterproductive interventions for violence is not only the purview of feminist groups, but has also been echoed by professionals in the family violence field (Augusta-Scott & Dankwort, 2002). Unfortunately, instead of new, updated interventions being constructed with clearer goals, the futility of former attempts at therapy was (and continues to be) highlighted by literature depicting the correlation between IPV and certain genetic and personality traits (Freize, 2005; Kurst-Swanger & Petcosky, 2003), thereby downplaying how elements of choice, education, motivation, and self-control impact the decision to (or not to) abuse. This deterministic view of men who have abused was augmented by reports of the ineffectiveness of therapy when applied to psychopaths and sex offenders (Flitcraft, 1995; Harris, Rice, & Cormier, 1994; Hilton, 2005) thus exacerbating the view that all therapy
is ineffective towards *all* men who have perpetrated IPV. The highly-publicized problems encountered during treatment of psychopathic offenders affected, and still affects, public, academic, and practical perceptions of therapeutic effectiveness. The pathologizing of men who perpetrate IPV has led them to be perceived as possessing psychological deficits that are amenable neither to treatment nor remedy (Augusta-Scott & Dankwort, 2002). These deficits are perceived as stable mental/personality traits that are not subject to intention, education, learning, or any desire for respect and intimacy.

**Contemporary IPV Interventions**

Feminist literature has accurately pointed out the oversimplification of IPV as understood by theoretical frameworks informing early therapeutic interventions for men. Consequently, these early therapies ignored several salient features of abuse, and supported practices that were counterproductive to the reduction of IPV, and some of these practices became entrenched in contemporary therapeutic models. For example, the educational model, which prescribes a combination of social sanctions and education (Augusta-Scott & Dankwort, 2002), also adheres to the fear of therapist/client collusion, and counters such a possibility by employing confrontational therapist/client interactions. The educational therapy model possesses strengths, in that it addresses male socialization (and how it contributes to IPV), and it attempts to teach skills allowing for better responses to conflict. However, it similarly dichotomizes and reduces features of IPV: because men who have abused are seen as controlling ‘batterers’ (Kelly & Johnson, 2008), attempts that they make to distance themselves from this identity by taking responsibility for their abuse or expressing remorse is seen as further attempts to control, manipulate, or to avoid taking responsibility for their behaviour. There is an “assumption
of dishonesty [that] leaves little room for alternative understandings” (Augusta-Scott & Dankwort, 2002, p. 791). The abuse is seen as functional, and there is no acknowledgement of the ways in which the abuse is not functional; abusive men are assumed to be incapable and undesiring of intimate, respectful relationships, and are therefore stripped of agency to strive for them. Any acknowledgement of shame, as understood by the educational model, risks defining men as the victims. Exploration of situational factors risks situating female partners as the cause of the violence (victim-blaming), or creating a platform to rationalize violence. The result of these assumptions is that men are silenced, and highly salient features of IPV such as shame and remorse (which are pivotal to supporting the cessation of IPV) are drowned out by references to pathology and misogyny: accounts of IPV that neither do the men justice nor describe events accurately, but instead, contribute to stigma. These assumptions strip men of individuality by dehumanizing them, equating them with evils committed in the name of patriarchy; instead of people who are able to choose their behaviour, they become avatars of the harm perpetuated towards women for centuries at the hands of men. They embody the disrespect, insult, injury, and injustice committed to women by men, and as such, are in danger of being set up as sacrificial examples in the interest of stamping out attitudes that permit the abuse of women.

Such an account limits the discussion of IPV and its causes, reducing its scope to finger-pointing, and inhibiting analysis of it as a complex behaviour. There is no room in these theories or therapies to consider the ways in which perpetrating abuse is dysfunctional for these men; it is assumed that they revel in their physically- and socially-imbued power, and that they are incapable of appreciating the harm that they commit.
Traditional therapies insist that the abused partner must be the primary client, and that they are the sole member of the relationship who may be appropriately helped (Cooper, 2009). Support of one partner is assumed to result in the detriment of the other. Such views have resulted in a dichotomization of supports and the siloing of resources: “Dichotomous thinking leads counsellors to believe they must validate as ‘true’ either the men’s story or the women’s story” (Augusta-Scott, 2003, p. 212). This division of resources is also detrimental to the battle against IPV in that organizations that work with men may end up competing for funding with programs for women and children (Mullender & Burton, 2001) so that joint programming, which may more effectively utilize infrastructure and human capital, is often not an option due to political reasons. Not only does this approach unjustly bracket the complexities of human experience, such thinking furthers the ‘battle of the sexes’ in a way that causes both sexes to lose; gender segregation undermines respectful relationships that are desired by both genders.

Within therapies based on feminist rhetoric, confrontational therapy techniques, designed to “shock” the man out of denial, model the very coercive and abusive behaviours that therapies are designed to reduce, and which encourage a defensiveness that feeds into denial. Not only do these types of therapies restrict the manifestation of respectful relationships among all stakeholders, but they also prevent therapists from taking advantage of key opportunities to create and model a caring, respectful relationship (Cooper, 2009). It is not unusual for men encountering these techniques to automatically agree with what the therapist says to avoid consequences such as conflicts, extended treatment, or ostracization. These men, upon encountering inaccurate accounts from authoritative sources of their thoughts and feelings (accounts which they are not in a
position to refute), undergo a bifurcation of their selves, as “experience does not fit within the concepts and categories, [and] alternatives may not be readily available” (D. Norris, personal communication, 2012). Forced to navigate two, conflicting and coexisting modes of consciousness, bifurcated individuals experience increasing stress as they strive to balance competing understandings of themselves (Smith, 1987).

This internal discord can contribute to negative self-image, and inhibit the decision to become non-violent. Men who feel negatively about themselves are less motivated to change, and are less able to see themselves as capable agents of change (Augusta-Scott & Dankwort, 2002). Their focus, instead of on making positive changes to their relationships, turns to protecting their wounded senses of self. The question arises: how many incidents of IPV – how much harm, pain, and violence – could have been prevented if all men who perpetrated abuse and who subsequently sought help had, instead of being confronted inappropriately with unproductive rhetoric, encountered therapies that supported better choices and which preserved their dignity, autonomy, and individuality of experience?

Several frameworks have been developed to categorize IPV, in a way that is meaningful for intervention. Differentiation among the different forms, dynamics, contexts, and outcomes of IPV may assist the development of screening and treatment protocols (Kelly & Johnson, 2008). One of the most prevalent views is the division between intimate terrorism (originally called “patriarchal terrorism” [Johnson, 1995]); this name has been largely abandoned in preference of a term inclusive of non-heterosexual couples) and situational couple violence (formerly “common couple violence”, which was criticized as minimizing) (Freize, 2005; Kelly & Johnson, 2008). Subsequent authors have
added “violent resistance” and “mutual violent control” to this list (see Johnson & Ferraro, 2000), or have divided the set of behaviours and situations comprising IPV into altogether different categories (Kurst-Swanger & Petcosky, 2003). Multiple taxonomies are sometimes employed within a single text on IPV, as each category is useful to define different sets of circumstances, depending on the feature that the investigator wishes to study.

Intimate terrorism is characterized by severe abuse towards one partner, following a pattern of increasing enmeshment, co-dependency, and control. Initially, the violence does not do physical damage, and the subsequent re-connection between partners is thought to reinforce the behaviour. The violence escalates, as does controlling behaviour and emotional manipulation, and it is often accompanied by outward denial by both parties, although one of them may fear for their lives. Child abuse and stalking behaviour are highly correlated with this form of IPV. Some relationships involving intimate terrorism end with the man killing his partner.

Although many men who are arrested for intimate terrorism are sent to treatment programs, they are rare within interventions for IPV such as the Bridges Institute; its majority of attendees fall into the category of situational couple violence (T. Augusta-Scott, personal communication, March 27, 2013), which is a much more typical pattern of IPV (Freize, 2005). Contrary to intimate terrorism, in which the violence is one-sided and severe, situational couple violence typically involves mutual, low-level violence, and while confrontations escalate into violence, they rarely develop into severe violence (Kelly & Johnson, 2008). Women are more likely to perform this form of violence than are men, although women are more likely to be injured during the altercation. It is
interesting to note that, within situational couple violence, the greatest predictor of the level of violence used by one’s partner is the level of violence that one uses against that partner; gender symmetry is a prominent feature of this form of violence (Kelly & Johnson, 2008). Other indicators include stress, substance abuse, financial hardship, and frustration. Although it is possible that some couples experience intimate terrorism or situational couple violence exclusively, it should be noted that these are not the only two patterns of intimate partner abuse, and they are not mutually exclusive in all cases. Relationship trajectories may include several patterns of violence over their course, with varying instances of violence manifesting characteristics specific to one or more categorizations of such violence, as understood by the literature.

Successful interventions must account for the complexity and duality that characterizes IPV, but, to date, most therapeutic approaches have been “generalized and polarized” (Augusta-Scott & Dankwort, 2002, p. 785). An example of this duality has been observed in men who have come to the realization that they wish to abandon abusive behaviour. They may have clarity regarding their intentions, and can sincerely proclaim their desire to maintain respectful behaviour towards their partner. However, such statements are criticised as being easily spoken when the man is not in a stressful dialogue with his partner; such proclaimed values, though well-intended, may not be upheld under the duress of face-to-face confrontation (Paré, Bondy, & Malhotra, 2006). Attempts to apologize or reconcile can escalate, creating circumstances in which stress and conflict contrast with the man’s desire to take responsibility for his prior actions. Lacking the skills of self-control and de-escalation, he may end up re-perpetrating the abuse for which he is trying to apologize. In such cases, he is aware of his honourable intentions, but this
awareness may encourage him to lay blame for the breakdown of communication on his partner. This sequence of events is discouraging to both partners, and undermines the man’s intention to take responsibility for his actions.

Some current therapeutic techniques involve enactments, or role playing that allows for the rehearsal of positive behaviours and diffusion tools within volatile situations (Paré, Bondy, et al., 2006). Such therapies attempt to bridge the gap between the expression of non-violent intent and the manifestation of non-violence within an intimate relationship. However, the extent to which these behaviours generalize to the emotionally-charged, real-world situations between intimate partners may be limited, and these role-playing therapies may not, in practice, result in the learning of pro-interactive behaviours to which they lay claim, in theory. The problem is one of behavioural generalization; there is less of a chance that the changes brought about during therapy will not generalize to ‘real-life’ situations, since the man’s partner is not present during therapy (p. 69). This interactive-educational model presents an advantage over purely didactic therapies (such as assigned readings or lecture-based interventions), however, as several studies found that men were more invested in the process when their input was solicited than when they were simply spectators or recipients of therapy. However, even these education models are based on an assumed deficit in learning (of control, appropriate behaviours), and often fail to encompass the complexity of IPV (Rees & Rivett, 2005).

**Narrative Therapy**

One of the newer theoretical approaches, that of narrative therapy, evolved out of constructivist and poststructuralist thought (Augusta-Scott & Dankwort, 2002). Its
framework attempts to provide the field with an understanding of IPV that encompasses its many causes and manifestations, and which constructs ‘reality’ as subjective (and thereby, potentially different for each client and family member). While being proponents of the idea that experiences often embody “multiple realities”, narrative therapists neither fall into relativistic or pluralistic morality, nor do they absolve clients of responsibility. They also do not minimize the horrors of abuse, and do not intend for narrative therapy to replace viable legal, social, and medical responses to violent behaviour.

Dialectic thought, the hallmark of narrative therapy, encourages a view of men that frees them from being perceived and perceiving themselves as single-storied. As one therapist reports: “By moving away from dichotomous thinking, I have been able to notice that men often want both power and control and loving, nurturing relationships. While men perpetrate abuse in their families, they often also want to be caring, respectful fathers” (Augusta-Scott, 2007, p. 253). Narrative therapy reflects the dialectic nature of men who perpetrate abuse: as both victimizer and victim, capable of feeling both shame and entitled to power, wounded and wounding, powerless and powerful, abuser and abused. Of paramount importance is that, through it all, these men are still responsible for their actions.

This therapeutic view acknowledges men’s experiences with hardship, discrimination, victimization, oppression, poverty, addiction, racism, unemployment, and racism (Augusta-Scott & Dankwort, 2002; Kurst-Swanger & Petcosky, 2003): all comorbid factors of IPV. By drawing attention to such factors, therapists shed light on the ways in which some men feel controlled by their circumstances, and how individual circumstances may contribute to manifestations of violence. Men are viewed as
perpetuating abuse in order to satisfy their needs and cope with negative experiences, albeit destructively, and in a way that undermines the satisfaction of those needs (Augusta-Scott & Dankwort, 2002; Augusta-Scott, 2007). Violence and aggression, while undesirable, are seen as coping mechanisms required for survival. Feelings of power and control are understood to be subject to ideology; entitlement, male-dominance, maladaptive conflict-resolution, and normalization of violence are examined in relation to historical, cultural, and familial influences.

A reciprocal relationship between discourse and ideology can be observed in the words used in research to describe both IPV and the men who perpetrate IPV. Discourse is capable of bracketing, insinuating, and negating ideas, and it can do so in a way that is difficult to detect. A common theme of narrative therapy, intended to counteract harmful ideologies, is its intentional use of discourse. In all activities and therapy, clients are “invited” to participate (Augusta-Scott & Dankwort, 2002; Paré, Bondy, et al., 2006), but are never mandated to do so. Invitational language contrasts with the oppositional (and thereby alienating) methods used in other therapeutic models, and also promotes agency through allowing for choice, and ensuring that the men’s participation is of their own volition.

Another example of such intentional discourse is the reference to men who perpetrate abuse, rather than the use of abusers or batterers. This chosen language is deliberately externalizing, and is in defiance of a process referred to as totalizing, or the tendency to equate a person with their problem, thus labelling them (Carr, 1998). Contained in the label is the assumption that it is the most accurate and relevant term applicable to the person to whom it refers: that having committed violence takes
precedence over any prior or subsequent behaviours that a man could display. Not only do terms like *batterer* tend to collapse a man’s identity with a single problem, but they can be alienating, which is counterproductive to engaging men in therapy, and contrary to the narrative therapy ideal of collaboration between men and their therapists.

Further to the importance of discourse is the care taken when using terms such as “healing” to describe the changes taking place within these men and their relationships. The dangers of this term include the risk of suggesting that these changes will result in a static self that no longer has to engage reflexively with the world (Paré, Young, Freedman, Augusta-Scott, & Behan, 2006). It also undermines the collaborative process between therapist and client by positing one of them as the sole agent of transformation. It may also suggest that, in order to be a ‘whole person’, a certain level of change must take place – this discourse devalues the changes that have taken place to date, and invokes a deficit model that can totalize the client and act as a binary (‘healed or not healed’), as opposed to the problems being understood as behavioural or experiential. Furthermore, by identifying with this metaphor, the man may, upon relapse, conclude that no change has taken place, which is discouraging and inaccurate. This conceptualizing of one’s mental state in categorical, dichotomous terms is thereby unhelpful, if not harmful to a man’s process of change.

In place of this totalizing language are verbs used to identify these problems as behavioural, and therefore mutable: negative identity stories are *performed* prior to therapy, and preferred, alternative-identity stories are increasingly *performed* subsequent to therapy (Augusta-Scott, 2007). Creating change and opportunities for change within one’s world is a *process*, the perpetration of abuse is referred to as being a *choice*, and
these choices are informed by external processes. A man’s behaviours are understood to constitute a mistake, rather than the man. Narrative therapy also describes factors that inhibit behaviours as restraints (Paré, Bondy, et al., 2006), and factors contributing to behaviours, as supports (Augusta-Scott, 2007). These terms avoid descriptors that may presuppose value-judgements for the behaviours they describe, and serve to differentiate these factors from “causes”, which may invoke undertones of “excuse”. Distancing men from language that supports excuses is key in promoting agency and identifying them as agents who are hindered in their efforts to construct respectful, collaborative relationships.

Narrative therapy therapists supply an account of IPV that differs from those preceding it; the mistrust that characterizes the educational model is not echoed by these practitioners, who are influenced by different rhetoric. Narrative therapists attest to the sincerity of men who become clients, and do not observe the manipulation predicted by their predecessors: “We have been struck by the men’s earnest efforts to seek solutions to violence in their relationships” (Paré, Bondy, et al., 2006, p. 73). Previous models reinforced negative self-concepts of men who have perpetuated abuse to the detriment of both those men and their partners. Negative conclusions (that they are “bad” or “disgusting”) comprising the man’s narrative of his own identity are now understood to have supported continued violent behaviour (Augusta-Scott, 2007) by fostering pessimism and hopelessness.

Although the narrative therapy tradition recognizes that their clients may desire power and control, it also highlights their desires for caring, mutually respectful relationships (Augusta-Scott & Dankwort, 2002). Moreover, it attributes to men the capacity to change their behaviour. It also rejects the idea that respectful, caring therapists
inevitably collude with the abusive men with whom they conduct therapy; the expression of empathy towards a man’s emotions does not equate to approval of his abusive behaviours. Contrarily, this relationship is seen as an essential way to model caring, respectful relationships, as well as beneficial communication techniques. An abandonment of the polarized, tense, therapist/client relationship creates an environment conducive to the reduction of confrontation, alienation, and silence. Within this environment, men are able to discuss their use of violence and its failure to procure desired outcomes. Clients and therapists are able to co-construct goals by focusing on the desire and capacity of men to stop abusing. Men also learn appropriate responses to their partners’ abusive behaviour and identify constructive ways that both partners can take responsibility for their behaviour (Augusta-Scott, 2008).

Another key feature of this type of therapy is its focus on re-authoring stories: not as fabrication, but as possessing features upon which a positive identity can be built. For example, the role of “shame” is critical; when a man performs an action after which he feels shame, this shame, once assumed to be evidence of the man’s worthlessness, is reinterpreted as evidence that he wants to behave differently, and is seen as a positive motivation, and as evidence of the man’s values and relationship preferences (Augusta-Scott, 2007; Augusta-Scott & Dankwort, 2002; Jenkins, 2011). These accounts of IPV also promote critical self-reflection; it is important during the process of taking responsibility that the man is invited to examine how his emotions and behaviours escalated to the point where he perpetrated abuse (Cooper, 2009). Called “discrepancy analysis” by Morgaine (1994) in her work on critical self-analysis, this process involves identification of differences between realities and desired ends. If people perform the
stories that they understand to be true about themselves, then challenging the assumptions that bracket those stories is helpful in that it allows for these men to conceive of selves that are not simply bad, immoral, unsympathetic, uncaring, or incapable of intimacy. It allows them to confront their self-concepts of being abusers which, left unchallenged, may lead to further harmful behaviour.

It is not clear whether taking responsibility is a predictor or correlate of behaviour change, although quantitative research has found it to be a factor in the cessation of violent behaviour, and clearly resolving ambivalence about change by identifying a turning point can help solidify the motivation to stop abusing (Sheehan et al., 2012). Therapy, therefore, focuses on highlighting the instances in which men are able to name and counter injustice; identification of injustice in the world is key to identification of injustice in the self, and in establishing a sense of personal agency (Augusta-Scott & Dankwort, 2002). The capacity to respond with empathy necessitates that the man is able to cope with the guilt of recognizing the damage (physical or emotional) that he has done to others. By re-storying shame as evidence of the man’s desire to engage in respectful and caring relationships, permission is granted for the experiencing of shame, which creates an opportunity for him to examine his psychological, social, and ideological reasons for abusing and to stop abusing. The result is that the man’s practices no longer contradict his preferred way of living and conducting relationships, and that facing shame allows him to build self-respect. The shame, once re-authored, becomes “evidence of the depth of [his] commitment to not perpetrating abuse” (Augusta-Scott, 2008, p. 30).

It is this dimension – the reconstruction of internal narrative – that gives narrative therapy its name. Although narrative therapy has been occasionally conflated with
rhetoric that insists that the very act of ‘telling’ comprises the therapy (Manning & Cullum-Swan, 1994), the therapists with whom I have spoken understand that it is the cognitive and emotional re-storying (verbally expressed or not) of one’s own experiences that allows for agency and facilitates growth. As such, it can be described as a collaborative form of cognitive therapy, conducted under a post-structural understanding of reality that sees experience as subject to interpretation; by reconstructing the client’s interpretation of events, therapists and clients alter the experience and understanding of those events in ways that attenuate harmful implications and promote growth. While therapeutic techniques such as traditional cognitive behavioural therapy have been scrutinized for their capacity to rectify behavioural and mental processes, comparable research has yet to be done to evaluate narrative therapy.

In light of our increased understanding of the factors influencing IPV, there is pressure to move beyond traditional intervention frameworks for which there is evidence of limited effectiveness (Eckhardt & Utschig, 2007): a movement that may prove difficult in the face of large quantities of conflicting data. Despite the successes reported by narrative therapists, a recurrent theme in IPV literature is the idea that a single intervention framework will be insufficient to address IPV; given the diversity of people who perpetrate IPV, it is logical to conclude that different types of programs will work for different types of violence (Kelly & Johnson, 2008; Rees & Rivett, 2005; Rivett, 2006). Some literature discusses the idea that it is not simply a matter of choosing the right intervention for the right individual, for several reasons. First, this is because there is not a clear winner when it comes the type of intervention. Some studies go as far as to state that there is no difference in effectiveness among treatments (Rivett, 2006; Sheehan et al.,
Second, existing, traditional intervention programs do nothing to lower recidivism rates, and that a substantial number of men cease their abusive behaviour without any formal intervention (Kelly & Johnson, 2008; Sheehan et al., 2012). Third, internal factors that comprise a man’s readiness to change (Eckhardt & Utschig, 2007) play a substantial role in determining the intervention’s outcome:

Assessing readiness to change among abusers may therefore lead to more flexible intervention options and to the implementation of techniques that may improve the abusive male’s interest in attending treatment, commitment to making positive changes outside of [the program], and to the ability of [the intervention] to prevent further abuse. (p. 320)

Several stage-based psychological tests have been used to assess this readiness (or lack thereof) (Eckhardt & Utschig, 2007; Mullender & Burton, 2001; Sheehan et al., 2012), although interventions aimed towards men at specific stages would be costly to implement on a large-scale, and there is presently no evidence that they would be more effective than other forms of therapy.

Some researchers advocate a call-to-arms, and encourage interventionists to develop a broadly applicable response that serves to hold men accountable for crimes, while also functioning as a preventative measure by encouraging men to seek help before they are prosecuted (Rees & Rivett, 2005). Historical data suggests that if our society insists on handling IPV as strictly a criminal justice matter, we will not be successful in addressing the violence or at tackling the broader causes with effective interventions. Indeed, most interventions are not intended to replace criminal prosecution of crimes, but to be used in tandem with criminal proceedings as a way to address underlying causes of
IPV by educating and rehabilitating offenders (Sheehan et al., 2012). Policy-makers and interventionists are, after many years of focusing resources on supports to protect women and children, coming to the understanding that, to effectively deal with IPV, we need to also treat men (Rivett, 2006).

Choosing alternatives to abusive relationships can be a complex and difficult process: help-seeking is described as a non-linear process involving regulating one’s behaviour and emotions to manage violence, while searching out and engaging both formal supports and informal services (Ansara & Hinden, 2010). Despite this burgeoning understanding, literature on IPV contains examples of several facets of intervention that remain poorly understood, and would therefore benefit from further research and development.

**Theoretical/Practical Importance of this Study**

This study constitutes a step towards providing a forum for the voices of men who have been silenced by demonization and stigma. Although these men have committed illegal and harmful acts, this silencing reduces the likelihood that men who perpetrate IPV will come forward and seek help, and prevents them from helping other men. The stories that have emerged from these interviews have the potential to help other men by encouraging change, informing about resources, providing hope during difficult stages, and supplying men with the language they need to be able to identify and frame the problem in a way that is helpful, and which allows reconciliation of bifurcated consciousnesses (Smith, 1987) that may arise from imposition of single-storied accounts of IPV. Some men may see themselves in these stories, and will realize that they too have a problem, and they too can change their relationships.
There are few examples within literature of men who have abused their partners, yet who express the wish to stop being abusive; the resulting silence has effectively inhibited role models for change in this area. Dissemination of this research will help to provide examples of men who have gone through the process of identifying and rejecting former behavior patterns of abuse and dominance. They may inspire other men to move past the dissonance between social perceptions of abusers and their own preferred ways of being, and reintegration of their selves may allow for reconstruction of their identity as men motivated to change and capable of change. Identifying deep-seated, ideological expectations concerning patriarchy and masculinity is the first step towards removing their harmful influence. The men can then navigate the reconstruction of their self-concepts by pinpointing ways in which the behaviours and mindset that these ideologies promote fail to serve their needs, and can work toward identifying alternative ways of acting and thinking that are more conducive to their relationship goals and ways of living.

Only a small proportion of the existing literature concerning abuser-as-primary-client IPV interventions focuses on the experiences of men. I mentioned in the introduction that the relative lack of first-hand accounts from the men who have committed abuse was due in part to the illegal and immoral nature of the crime involved, and the desire (perceived or real) on the part of perpetrators to remain anonymous. However, there are additional aspects contributing to men’s silence within research of IPV. First, there is not enough research that gathers data from men who have abused because there is a view within the practice of IPV intervention that self-reports of violence will be extremely underreported, and are therefore unreliable (Mullender & Burton, 2001). Men who have abused their partners are understood within many social and
therapeutic contexts to be controlling, manipulative, and blame-evading: a reputation that undermines the credibility of their account (Fenton & Rathus, 2009). Second, this omission is reminiscent of the aforementioned “fears of collusion” prevalent in the educational approach. If researchers were to allow the voices of these men to be heard, the assumption is that they (the researchers) thereby condone violent behaviour, particularly if researchers were to report accounts of these men that contrast with widely accepted views of perpetrators of IPV, and that present them, instead of monsters, as humans struggling to learn and change.
Chapter III: Theoretical Framework

This research falls under the paradigm of “emancipatory research”, as defined by O’Leary (2004); it breaks ground and provides an arena in which a typically silent population may be heard. The emancipation of these voices is necessary for a critical understanding of IPV that allows for its complexities to surface. Critical theory is useful in the identification of injustice and oppression, and also in the formation of solutions and alternate choices. It can help supply accounts of situations and factors that allow for better understandings of experiences by suggesting empowering or beneficial discourses and interventions to use in place of traditional, oppressive ones.

Critical theory’s assumption that certain groups in any society are privileged over others is key to evaluation of IPV in several ways (Lindhorst & Tajima, 2008; Paterson, 2011; Stephens, 2010). Understanding the causes of IPV requires an account of gendered power discrepancies, both social and physical. Explication of the range of ways in which male privilege plays out in society is far outside the scope of this paper, but its contribution to entitlement, domination, and constructs of masculinity involving control and non-emotionality is especially relevant. Physical power discrepancies include those pertaining to the financial and social, as well as sheer physical force. All of these factors need to be considered when discussing IPV, as failure to take them into account views partner violence unjustly, and may either lay blame where it is not due (or is unhelpful). The omission may also fail to account for underlying causes of IPV (such as poverty, witnessing abuse, etc.), by attributing them purely to behavioural choice and deficient personal traits of the abuser. Furthermore, a critical assessment “compels researchers to attend to the ambiguities and contradictions of meaning, motives, and impacts on
victimized, defending, and offending... men” (Mann, 2008, p. 48). Such criticality allows for the continual critical revision of emergent discourse and interventions to ensure that they do not repeat the mistakes made in the past.

A full account of the intersection between power and patriarchy within our culture is outside of the scope of this thesis, but a critical analysis of data will undoubtedly reveal themes concurrent with known dynamics of motivation, masculinity, and identity. One way that I accessed these (and other) complexities of IPV was by employing Ecological Systems theory (Alaggia et al., 2012; Bronfenbrenner, 1994; Wright & Herrin, 1990) (also called “general systems theory” or “global theory” [Kurst-Swanger & Petcosky, 2003]). This theory provides an account of individuals and their behaviour as being a function of a myriad of internal and external factors, as well as interactions among factors. These factors are categorized into the microsystem, mesosystem, exosystem, and macrosystem, each with their own features, although these systems can be said to overlap, and are not intended to be understood as discrete entities. The microsystem comprises individual-level traits, processes, and an individual’s immediate environment. It represents the social roles, relationships, and activities that influence development, and includes settings such as school, workplace, peer group, and family. The mesosystem consists of the reciprocal connections between the settings in the mesosystem, such as an individual’s experience of the way that their workplace environment affects their home environment, or how their home environment affects their experience at school. It is understood to be the interaction of microsystems affecting each individual. A person’s exosystem is the pattern of relationships between their immediate setting and settings and events that do not contain or include them. These influences are indirect, such as the relationship between the school
environment and the municipal political arena. Lastly, the macrosystem encompasses an individual’s system of micro-, meso-, and exosystems. It incorporates elements of culture, belief systems, traditions and customs, resources, and accepted “knowledge” (Bronfenbrenner, 1994).

I used the ecological systems lens help me create interview questions and analyze data transcripts. It has assisting in focusing my research by emphasizing the interactions between person and environment. However, the original ecological systems view also contains an examination of the individual’s biological and psychological traits (Bronfenbrenner, 1994), which I avoided for three reasons. First, I considered the trait-approach to be in conflict with evidence that people who have perpetrated abuse are able to change their behaviour. Second, an examination of traits would invite a reductionistic evaluation of the causes of IPV. Third, I did not feel qualified to assess the traits of any individual, as such assessment, however valid, lay outside of the scope of this research and my credentials.

I did, however, find the holistic perspective of the ecological systems view very helpful in illuminating the reciprocal influences among various elements of IPV. In searching for the individual and social (micro), immediate environmental (meso), and institutional and ideological (macro and exo) elements of experience (Bronfenbrenner, 1994), I was able to elicit data and provide an analysis that encompasses the myriad contributing factors to the decision to become non-violent. In this way, I avoided the totalizing that characterizes much of the research and analysis of IPV. Narrative analysis (Clandenin & Connelly, 2000; Connelly & Clandenin, 1990; Manning & Cullum-Swan, 1994) was appropriately paired with the ecological system theory and critical theory in
this analysis, as it emphasizes contextual factors and seeks to make explicit features of context and setting that are taken-for granted.

Scholars of qualitative analysis have stated that not all social inquiry necessitates using or developing theory (Strauss & Corbin, 1994). The primary goal of this research is to encourage the voices of men who have been silenced, and undue emphasis of pre-conceived theoretical structures data may distort the contents or analysis of data. In the Methods section, I discuss navigating the contradicting goals of narrative inquiry and the impositions placed upon this research by the ecological systems framework. Given the paucity of data derived directly from men who have perpetrated IPV and the small number of participants in this study, forming theory was not appropriate at this time, as the themes that resulted require further research before it can be confidently stated that they apply to other individuals and settings. Instead, my focus remained on extracting patterns that stood out in these stories, and I strived to convey and discuss them in a way that represented these men’s experiences accurately and justly to the academic community.

As indicated earlier, traditional interventions for IPV have largely proven to be ineffective. Enhanced understanding of IPV, obtained through an ecological systems analysis of these experiences, will lead to direction as to what ought to be the focus of interventions. By understanding IPV as a function of individual, social, and environmental factors, we can create programs that address the problem in a way that takes into account all of these elements, rather than one that parses and oversimplifies its causes. IPV is perpetrated by men who are complex organisms, and who often possess conflicting emotions and desires. Interventions that take this complexity into account will better be
able to concentrate on helping clients, without causing the bifurcation or confusion that is reported by many men who have accessed treatment. With my analysis, I hope to inform the field of family violence about how this disjuncture is managed and navigated by men who have perpetrated IPV, how it is reproduced by sup-optimal forms of intervention, and how it may be attenuated. By gathering information directly from these men about their experiences with family and institutions, I created a space in which information emerged concerning best practices and gaps in support.
Chapter IV: Methods

As mentioned before, IPV needs to be understood in terms of context, which is necessary for making sense of any person and their actions (Clandenin & Connelly, 2000). Unfortunately, due to the dearth of research that solicits data from men who have abused, there is little first-hand information about their lived context, and it is, in a sense, unsurprising that many IPV interventions fail to address the problem in a way that is helpful and meaningful to these men. I chose the process of narrative inquiry as my framework for this research, as it was specifically created to focus on the person, in their context (Clandenin & Connelly, 2000), by attempting to understand the ways that people experience their realities by accessing their stories of those realities (Connelly & Clandenin, 1990). I also chose to include this method for its capacity to add a humanizing element to the data by contextualizing events and providing names and back-stories to allow the reader to achieve a broader understanding of these men and their experiences. I felt that it was important to ensure this element, particularly given that much of foregone research has resulted in depictions of perpetrators that are almost exclusively monstrous.

Furthermore, qualitative tools have been identified as superior for delving into the processes of change, and narrative inquiry can be used to gain a better understanding of IPV by presenting a nuanced account of experiences (Clandenin & Connelly, 2000; Fenton & Rathus, 2009; Sheehan et al., 2012). This focus on experience allows for feedback directly from individuals accessing programs, which, in this case, can lead to development and improvement of IPV interventions. In addition, given that one of the purposes of this research is to offer space for the voices of men who would otherwise be silenced, this design accesses such men in a way that ensures privacy and respect.
Qualitative analysis is ideal for the purpose of encouraging expression from silenced populations, as it manifests themes drawn directly from participant accounts, and it focuses on revealing implicit belief systems (Moghaddam, 2006).

My interviewees have participated in narrative therapy, and were therefore versed in its focus on storied experiences. Narrative inquiry fits well with this focus, and is well-adapted to capturing the richness of these stories. Participants’ discussion of their experiences during therapy sessions may have influenced their subsequent discourse surrounding those experiences. They may have acquired language for identifying behaviour and emotions that they would not otherwise have used, and their memories and explanations may be coloured by that language. I was advised to modify my interview guide so that it contained very specific questions to pinpoint the features of their experiences that I sought to access, as their rhetoric may be highly dependent on the framework created within therapy. Below, I provide further details of the collaboration that took place during the creation of the final interview guide.

I chose a semi-structured interview method for gathering data, due to its capacity to allow the me to establish trust and rapport, and to build relationships with participants that may have facilitated communications (Fontana & Frey, 1994; O’Leary, 2004). Its relaxed style may help to mitigate power imbalances that can occur between an interviewer and participant. The semi-structured interview also allowed me to direct the conversation while leaving room to probe further into some responses, prompt or clarify responses, and allow for a natural conversational flow (O’Leary, 2004; Wiersma & Jurs, 2009).

The participants in this study were six adult males (over 18 years of age) who had
undergone narrative therapy within one of two Nova Scotia men’s programs, and who self-identified as non-violent for at least one year. Some participants were, at the time of the interview, still clients of therapy, while some had completed their mandated or recommended programs and did not continue with further counselling. Access to participants was established by counselors at Newstart and Bridges intervention programs, who contacted previous and current clients on my behalf. In this way, participants were vetted for suitability by practitioners in the field. Eligible men who were interested in participating were provided with my contact information so that a time and location to meet for the interview could be arranged, and were given an information letter containing the details and purpose of the study and an invitation to participate. At the request of two participants, I initiated contact by calling them arrange the interview, after having clear permission to do so from both the participant and program staff.

The difficulties that I experienced during the data-gathering portion of this research resulted in collaboration between Newstart staff and I. To better take advantage of opportunities for interviewing, I spent several days each week, over a period of multiple weeks, at the Newstart facility. I was able to form collegial relationships with the staff, discuss emerging themes in my research, and request assistance on a number of methodological and analytical questions. These relationships have allowed me to integrate research and practical considerations in an unanticipated way, and has facilitated knowledge transfer.

Participants were provided with two copies of the consent form, which was signed by both them and me – one of them for them to take home, and one of them for my records. Both forms contained a participant number, which corresponded to that
participants’ data, as names were not recorded. The consent form and data were kept securely locked in separate locations, and audio files and electronic-format transcriptions were password protected to ensure their security.

The interviews were one-on-one, and were conducted face-to-face (with the exception of one participant, who provided me with a phone interview due to scheduling conflicts). Four of the in-person interviews were held in an office at the Bridges or Newstart facility, and the fifth was held at a meeting room in one of HRM’s public libraries. Audio recordings were made of all interviews, allowing me to focus on the interview process and participants’ answers (O’Leary, 2004); I recorded interviews on my iPad mini using AudioMemo software. This software allows for remote up-loading of interviews to other computers by way of secure internet connections, and came highly recommended by a colleague. In the interest of richness of data, I took field notes on non-verbal cues (such as body language, expression), or context that was relevant to the participants’ stories. During interviews, I engaged in opportunities (as they arose) to probe into or clarify responses, particularly where they concerned the process of change. Memories, descriptions, feelings, thoughts, opinions, and perceptions that were not explicit in the participant’s account were also solicited through probing questions.

The interview guide was created through information gathered during a review of relevant literature, and through collaboration with my thesis committee members. I incorporated advice from my committee members about which questions could be leading, which would be better re-phrased to be open-ended, and which questions participants may have had difficulty answering. As advised, I removed questions pertaining to masculinity, as it was not the subject of my inquiry, and it was uncertain as
to whether or not participants would have difficulty articulating responses to questions regarding the impact of this construct on their experiences. The interview guide was also shaped by my theoretical frameworks. For example, as per the ecological systems perspective, I specifically addressed facets of participants’ experiences impacted by micro-, exo-, meso-, and macro-systemic features, such as which factors in their lives (family, friends, programs, legal involvement) were motivating factors in their decision to change and/or seek treatment.

I transcribed interviews (rather than employ third party transcription services) to ensure their accuracy and to allow me to become immersed in the data and to make notes as I went along. Field notes concerning demeanour, body language, or expressions were be inserted as memos (Moghaddam, 2006). Transcriptions were uploaded as electronic files into the MAXQDA 11 software program, where they were coded for key themes, both within and among the interviews.

**Data Analysis**

Coding was performed to conceptualize, compare, categorize, and label data (Moghaddam, 2006). I took notes and created codes for emerging themes (using MAXQDA 11 software to facilitate this process) in a series of steps outlined by Wiersma and Jurs (2009). These steps included: gathering data from interviews and inputting it into software; note taking to capture themes; and constant comparison of themes from different sources of information, such as transcripts, field notes, and reflexive journal. As per this process, I wrote memos concerning linkages among codes, sorted them, and discussed the results in a way that attempts to clearly communicate the resulting, collaborative narrative.
As previously indicated, I allowed Bronfenbrenner’s (1994) ecological systems theory to inform my analysis. I attended specifically to features of the participant, their relationships, and environment that may have impacted their experience of choosing non-violence. As per this model, I inferred interactions among these elements, as well as identified salient ways in which the account was shaped by institutional, ideological, or interactional features.

Clandenin and Connelly (2000) outline three dimensions as highly important to narrative analysis: (a) *interaction*, which includes personal and social factors; (b) *continuity* or *temporality*, which emphasize the importance of the past, present, and future; and (c) *place*, which includes aspects of context, situation, and location. I used these three dimensions as organizational tools to help me understand how some codes related to these men’s experiences, as the dimensions offered an exploratory thematic framework relatively devoid of bias.

To employ this analysis, stories were interpreted, with attention paid to metaphors, discourse, experience, and emotions conveyed by participants. I used a bottom-up approach, in which emergent context-dependent units of text were explored and developed. Codes were not necessarily assigned for each line, although recognizable features of a theme were present sometimes in an entire paragraph, sometimes in a single word. I placed emphasis on studying these experiences from the men’s perspective, and on analyzing various ways in which the person, their environment, and their belief systems impacted their experiences. Events, actions, or interactions that were identified as meaningful were assigned codes (Moghaddam, 2006). Notes and codes were inserted concerning elements of the story of which participants may not have been aware or may
not have understood. Open coding (involving a broad search for patterns) and axial coding (involving a more specific search for connections and disparities among those patterns) was conducted, initially in that order. Similar terms, broadening and burrowing (Connelly & Clandenin, 1990) are present in literature on narrative analysis, and they indicate the same process of recognizing broad themes, then delving more deeply into how those themes interact. The resulting patterns and themes were continually re-visited (using constant comparative analysis) to assess these theories by progressive verification (Clandenin & Connelly, 2000; O’Leary, 2004).

The Discussion chapter focuses on relationships among themes, influencing and underlying factors, and the meaning of events for participants (Clandenin & Connelly, 2000; Wiersma & Jurs, 2009). Because the intention of this research is to inform the field and, eventually, interventions, I paid express attention to themes or lessons that are transferable to alternate populations or settings (O’Leary, 2004) by representing experiences that other men may encounter within their violent relationships, and to which they might relate. It is understood that, within narrative analysis, the resulting narrative will be one that is shared between the researcher and participants. Although I feel that I have skills to contribute to the analysis of these men’s stories, I have not had the experiences that I am studying, and therefore the focus remains on their experiences. I did not anticipate a lengthy discussion of my own processes, as my concern was to have space for the voice of each participant (Connelly & Clandenin, 1990), however I found the events surrounding data-gathering and analysis to be memorable and significant in several ways that I chose to share. In the interest of reflexivity, I felt that it was important for me to explore those events and to account for any bias that they may present. I review these
experiences and several features of my reflexive practices (e.g., self-monitoring, journaling) at the end of the Discussion chapter.

I began the coding process by going through the transcripts, line by line, and assigning codes to features of the narrative that I recognized as relevant to the process of change, identity, or experience (open coding). I then reviewed my codes and each transcript repetitively, noting commonalities among codes and relationships among yet-uncoded themes (axial coding). For example, the theme (and resulting code) of reciprocity manifested initially as the interaction between the codes of taking responsibility and repairing/reconstructing relationships, and often involved features of accessing resources. A full list of codes is found in Appendix A. The codes that resulted from my analysis are both derived from the data (and dependent on emergent themes), and informed/shaped by the ecological systems theory and narrative inquiry. They are guided by systems theory in that I was alerted to salient features of the individual, immediate environment, societal factors, and ideological features, as well as interactions among those features. My coding was guided by narrative inquiry literature in that contextual variables relating to interactions, continuity (timing), location, and belief systems were coded for analysis and discussion. The end result of the coding process corresponds with narrative inquiry in that it conveys important information regarding events, contains elements of ethnography, and provides a forum for these voices. It also contains codes specific to the contextual variables listed above. My analysis and presentation of the findings differs from some narrative inquiry processes, in that it does not provide a full-storied account for each man. However, I understand that the narrative inquiry framework is adaptable to the needs of the research at hand, and that, contrary to some less-
constructivist methods, there is flexibility in some of the proscribed elements; “There is no clear path that works for each inquiry” (Clandenin & Connelly, 2000, p. 134). Storied elements of these interviews manifested in such codes as: [the process of] seeking resources, repairing/reconstructing [relationships], hindrances to change/stressors, and supports for change.

It is arguable that most, if not all, research contains tensions, whether methodological or theoretical, and this research has not been exempt from them. Further complicating the coding process is the fact that the goals of narrative inquiry and coding on the basis of the ecological systems theory are at odds with one another. On the one hand, I endeavoured to remain as true to the “voice” of the participants as possible, without imposing external framework, but on the other, I also saw the value in allowing the guiding framework of the systems theory (and elements of narrative inquiry methodology) to direct my attention towards contextual factors that I otherwise would have missed. The analysis must also incorporate sufficient flexibility that emergent themes may surface. It is important to allow room within the analysis for the exploration of subtleties, and I did not want to impose restrictions on the data that would warp it or change its meaning.

My approach, which combines elements of critical theory, narrative inquiry, and ecological systems theory, has the potential to dislodge the historical transmission of taken-for-granted attitudes (D. Norris, personal communication, Nov 8, 2013), as it encourages a critical assessment of factors contributing to violence and the cessation of violence, such as relationship dynamics, socialization, identity formation, perceptions of violence, and others. As discussed, critical examination of these factors is key to
identifying underlying ideological, social, and psychological contributors to violence, and to ensuring that the identities of men who have perpetrated violence are not collapsed with the violence. Through narrative, men clearly elucidate their relationship and identity preferences, and identify gaps in their knowledge of relationship dynamics and conflict resolution. A narrative account also supports re-authoring, which undermines detrimental self-stories of shame possibly contributing to future abusive behaviour. In including this component in my research, my hope is that the critical analysis of behaviour displayed by these men (that they have practiced during narrative therapy) can serve as an example to other men who also wish to change their behaviour. These stories also provide important information to field workers about processes of change and how men may best be supported through that change. The resulting collaboration of frameworks pulls into view important themes and allows participant voice to remain in the foreground. This fusing enables me to showcase participant experiences while drawing attention to subtleties in those experiences and interactions between varying levels of factors.

**Ethical Considerations and Safeguards**

All data was/is kept confidential (consent forms with participant number kept separate from interview data), and pseudonyms were used in transcripts, analysis, and reports. Any identifying details, such as locations, workplaces, or names of family members were omitted from transcripts, and neutral placeholders were inserted to preserve syntax and indicate that there was a deleted word or phrase (for example: “Halifax” or “Monica” replaced by [city of birth] or [former partner]). Due to the assurances that I made in the letter of invitation (Appendix B) and consent form (Appendix C), that identifying information would be omitted from the analysis, entire
sentences or subjects that were potentially identifying or that may have compromised a third party’s anonymity were also omitted, and a note made in the transcript that a portion of the discussion was not transcribeded.

A key methodological tension that I encountered when writing the “Results” section of this thesis involved the decision as to whether or not I was to include details about the relationship history, physical appearance, or mannerisms of participants. The majority of examples of narratives that I have read have offered thick descriptions of interviews and participants, and I initially felt that it was important for me to do so as well, in the interest of presenting humanizing narratives that deviated from research models in which participants were faceless. Particularly because participants revealed so openly such intimate details of their lives, it was important to me that I honour that revelation by attaching these stories to them as individuals. However, it was precisely the individualizing accomplished by those details that prevented me from including them. My guarantee to participants was that all identifying details would be stripped from transcriptions, and that only the transcriptions would be used in the analysis. Even if I had not explicitly offered this guarantee, I am aware that particulars regarding mannerisms, appearance, or relationship history may render participants identifiable to acquaintances, friends, family members, other men who attended the program with them, or program staff members. In the interest of anonymity, both the Results and Discussion chapters omit such details.

I kept all raw data (transcripts, digital interview audio files, field notes, and consent forms) during this thesis writing, so that I would have the material available the event of an audit. I have destroyed the audio files, now that the analysis is complete. I will
retain all transcripts other documents for three years, pending possible further analysis, as was outlined in my approved UREB application and the consent form (Appendix C).

The letter of invitation (Appendix B) was provided to participants in advance of the interview, which included information concerning: (a) my research purpose, (b) what participation entails (what they are being asked to do), (c) that participation was voluntary, and (d) that consent could be withdrawn at any time. Participants were also provided with a copy of the interview guide before the interview began, to ensure that they had the opportunity to identify any questions that they wanted to omit.

As noted in the UREB ethics application, participation in this study was accompanied by potential risks. Given the nature of this research subject, the interviews had the potential to have resulted in emotional or psychological stress for participants. Although I did not observe any participants becoming distressed, I offered them a list of local, free counselling and intervention resources to access in case of issues that may be raised by the interview (Appendix D). This list was compiled in collaboration with staff from Bridges.

However, in addition to the risks involved in participation, there may be benefits for participants. Although no direct benefits were expected or observed, there may be an indirect benefit to the participant in the form of emotional satisfaction for having participated in research that may contribute to helping men who have similarly perpetuated IPV. Furthermore, participants noted to me (and later, to program staff) that they derived satisfaction from having had the opportunity to express their stories, and to discuss their progress.
Chapter V: Results

As previously mentioned, results are presented in a manner as to highlight participant’s narratives, with quotes taken from transcripts to illustrate examples. Help-seeking behaviours are discussed, in conjunction with experiences of therapy and other formal supports. Participants provide a range of examples of supports for their change process, as well as descriptions of events or circumstances that they experienced as hindering their goals. Listed among these supports (and sometimes also among the hindrances) are experiences with families and friends, as well as men’s accounts of their involvement with legal and police services. The impact of further stressors, such as stigma, shame, and disclosure are recounted, and data is provided concerning processes of taking responsibility, identity formation, and the creation of respectful relationships in the aftermath of abuse. Finally, consideration is given to the interactions between the individual, their immediate environment, their location, and belief systems (both explicitly stated and inferred) that influenced their experiences of abuse.

Each participant had an individual story, with a unique set of circumstances. As one participant, Brendan, said of the men in his therapy group: “In a group with seven people, there’s seven different stories, seven different circumstances, right?” The factors that led each man to seek out the counselling program were only one of the ways in which they differed.

Seeking Help

I coded this element as “accessing resources” during data analysis, because it often involved the intervention of other organizations, such as judicial, legal, and protective services. The majority of men in this study came to counseling of their own volition,
whether or not it had been court-mandated. Quinn, the sixth participant, stated that the decision to attend counseling was one that he made by choice, and his language evidenced this agency: “I started before the court mandate was even set in place.” James described a similar story: “I was charged with assault, or whatever it was, and it… it was all me that wanted to come here. It wasn’t the court. My court date was almost a year later.”

Sometimes the stories of accessing resources described incidents of traumatic physical violence. As Brendan related, “the incident caused everything to start up, right? There was a fight. I got physical with my wife. I called the police. I got arrested. Then I sought [sic] counselling. In a nutshell.” Another said: “The final decision was when me and my ex, we got into a big fight, physical, and it ended up resulting in charges, and it was the second time it had happened, and I tried everything to not live like that” (Quinn).

Several participants experienced difficulty in accessing counselling resources, and they listed this difficulty among the factors that inhibited their change process. Marc, who had been arrested for uttering threats of violence against his wife said: “What held me back, well, I thought it took quite a while, waiting seven to eight weeks, and not allowed to be going home, seeing my children.” Another participant, James, related his difficulty in accessing the contact information for counselling. When he realized that he wanted to pursue counselling, he sought out the website online for the counseling program in his region, only to find that the numbers listed were either disconnected or for individuals not directly affiliated with the program. He said, of his experience: “It’s an absolutely horrible horrible website…when you want help you can’t get it.” A more lengthy discussion on features of accessibility that may warrant attention is found in the section entitled Program Feedback.
Accounts of experiences at Newstart and Bridges were universally positive, from all participants. Comments such as: “They run a pretty tight ship. They create a safe environment, and a respectful one,” and “…pretty professional. It was a good environment” were common. Men reported several attributes specific to this program that they felt supported their choice to seek help, such as therapists’ capacity to strike a balance between studying the causes of behaviour and moving forward in a solution-based model. Marc explained: “He don’t make you feel bad, or put you down or nothing, the shame. It’s kinda like it’s done, now let’s fix it.”

More than one participant expressed confusion about the purpose of group therapy, and stated views such as: “I’m still trying to figure out what the point of this group is, not the point of this group, but of group therapy. Does it have its own significant process, or do a bunch of guys get together and just talk?” Possible benefits that may be accrued from the explanation of group dynamics are explored below, in the following chapter.

**Supports for Change**

One of the interview questions explicitly requested information regarding supports that participants may have encountered during their chance process: What factors in your life do you think helped your change process? Under the theme of supports, several motivations for change were listed. Both internal and external motivators were solicited by questions that asked participants to directly identify such features of their experiences, and included probes regarding feelings or desires (internal motivators), and other, environmental motivators such as family, friends, programs, and legal problems (external motivators). Responses were sometimes worded as a rejection of negative attributes or
situations, such as: “I don’t want to be a part of this,” or they were statements concerning the benefits of change: “It can make me a better father and husband, that’s what matters in the end.” There was frequent discussion of immediate family as a motivating external factors, and of avoiding conflict and the associated negative feelings as internal motivation.

Several men also said that developing an understanding of the abuse was critical to its cessation. I noted two different discussions taking place concerning emerging critical understandings. One was an emergent awareness of the harm itself and its impact. I asked specifically about minimizing or blaming behaviour, but most of these men felt that those behaviours were not features of their experience. They explained that it was not that they downplayed the violence and abuse, but that they did not understand that their behaviour was abusive. “I would say that I didn’t even know that there was a problem until it became blatantly obvious that there was a problem,” Brendan related. Marc said, about his newfound awareness: “I look around me and I see something that I realize before that I was blind to it. I couldn’t notice it.”

The second discussion revolved around the effects of the abuse. “That was the key, really,” said Kyle, “studying the effects of the abuse and learning how to stop it before it got there.” Participants also reported that it was particularly helpful to study the warning signs of escalation, which went under a variety of terms: “the formula,” “triggers,” and “zero-to-sixty.” This gave them clear indicators of where they could have stopped the abuse in the past, so that they may recognize those indicators moving forward and employ any number of respectful communication or de-escalation techniques.
Several such techniques, or “tools,” were mentioned. Self-management – up to and including self-removal – was a frequent theme: “If you gotta walk away, walk away,” advised James. Kyle employed a similar strategy and provided a rationale for self-removal:

Whether that was leaving, or that was going for a walk, or just things as simple as that, which were very helpful. ‘cause realizing that nothing’s going to be fixed by arguing over something that’s been drug [sic] over a hundred times.

Other tools focus on caring communication strategies, involving listening skills, asking questions of the speaker to confirm understanding, turn-based discourse, and using “I statements” to establish responsibility and avoid blaming. Marc described how changing his language during arguments to reflect “I statements” prevented escalation: “it makes for a lot more peaceful conversations and discussions, and that was a big problem.” Participants also discussed frameworks for understanding and encouraging mindfulness that they learned during counselling, such as the “PAC” framework, or “lines of communication.” This framework involves separating the roles of parent, adult, and child, and stressing the importance of clear communication and role adherence. More than one man stated that these tools helped him in his other relationships, particularly at work, and one participant has started teaching them to his son, after translating them into language that is appropriate for children.

The positive and negative impact of friends and family was a strong theme during interviews. Some participants derived a great deal of support from their extended families, relying on them for emotional support, financial support, and even housing. One man declared that he saw the reparation of his relationship with his family to be crucial in supporting his change to becoming non-violent. In contrast, another man, Kyle, indicated
that he had to draw firm boundaries with his family members, who were only willing to discuss his violence against his wife with him in ways that put the blame for conflict on his wife, and which were destructive to developing mutual understanding:

It’s pretty one-sided; they’re going to be on my side the whole time, and that’s not what I need. I needed someone to say hey, you need to look at yourself and that’s what [the counselor] and these guys have been doing.

Some men saw interactions with justice and criminal responses to be a positive factor in their change process, despite both the stigma of arrest and the gruelling experience of the court system. Not only did Brendan describe his fear of the courts as providing incentive to adhere strictly to program guidelines, but he found that the subsequent months of being on probation kept his mind present on events. The momentum, focus, and structure provided by the court system ended up supporting change, despite the stress of being charged with assault. Marc expressed a similar view: “I’m not glad I abused, but I’m glad it did happen, that I got arrested and got into counselling.” Kyle described tangible benefits from his involvement with Child Protection Services, who supported his family through their change. “It got us back on the straight and narrow, so, as far as I’m concerned, they were definitely a positive external motivator.”

Part of the intervention focuses on these men being able to express their personal and relationship preferences. All six participants articulated clearly that they preferred relationships that are caring and respectful, in contrast to relationships that are abusive. Several men listed this clarity as supportive to their change process, particularly in separating the abusive behaviour from the man himself. Marc said: “I knew it wasn’t right. That there
was something wrong… I was conscious of it. I do have a conscience… I wanted help, I just didn’t know where to go, what to do, or what the next step would be.” He explained his ability to express his preference as one of several steps in the process towards change.

**Hindrances to Change**

The fourth interview question asked: Which factors held you back in your change process? Listed among the responses were the stressors typically associated with violence: substance abuse, unemployment, financial insecurity, mental illness. Quinn described his situation prior to therapy as including: “A lot of feeling sorry for myself, and everything just, and putting drugs and alcohol on top of that really depresses you even more.”

Brendan discussed the general degradation of intimacy in his relationship and its effect as a stressor. “You have kids, you have a job, you have stress-related stuff going on, you have finances, you have responsibilities… you haven’t been married before, and ten years into it it’s hard to describe, it’s just… the passion dies out after a while.”

One of the interview questions specifically probed for experiences of minimizing, blaming, or denial and one man reported that his tendency to blame played a role in perpetuating the abuse. Kyle recounted that he would use his partner’s aggressive behaviour to justify his own, and to transfer responsibility for both the conflict and his behaviours onto her. “She hit me first, so I pushed her, it was fair, you know what I mean, and that’s obviously not right, but that’s the way I tallied that up.”

Some men encountered difficulties accessing other resources prior to their counselling, and felt rejected by the institutions that were created to provide help at a preventative level. James described the events that transpired when he researched and sought out assistance through Capital Health for the escalating conflict and abuse in his
relationship with his partner:

When she was pregnant, she went off her medication, and that’s when I found out that no book you read, there’s no groups for men who are being abused. There’s nothing. There’s nothing for a guy until something happens and then you get the help you’re looking for. I called Capital Health and everybody looking for a group, and they’re like: no we can send you some books, though.

James’ dismay at the result of this attempt to seek preventative intervention did not prevent him from researching and locating intervention at later stages of abuse. His story, in which he related a lack of prevention-support resources, was not unique, however, and several men expressed frustration at their inability to find help before the conflict in their relationships resulted in physical abuse.

Motivating Factors

Two interview questions specifically addressed participants’ motivation to change abusive behaviours; the men were asked about their internal and external motivators. Similar elements were listed as motivating factors for most participants, with a notable exception discussed below. Common motivations included the desire to be a better father and, under this category, to prevent children from witnessing violence and having it normalized as a viable response to conflict. James said: “I don’t want my kids to grow up, you know, even arguing, pushing, whatever.” Marc described wanting to leave a better legacy than that of a breadwinner; being remembered as a good father and husband was important to him. Kyle explained how he became aware of the deleterious effect that his behaviour had on his children, and the damage that his behaviour was causing to them, combined with their faultlessness, was motivation to change: “It was definitely taking a
toll on our whole family.” “Doing it for my kids” was frequently stated or implied as a
source of motivation, as was the desire to construct loving relationships with partners.

Contrary to these experiences of partners and children as motivating factors,
Quinn said that that it was only when he started seeking change for himself that he began
to commit to changing his behaviour. He felt that attributing the desire to change to an
external motivator left men vulnerable to failure, as external motivators had not provided
sufficient impetus for him to effectively maintain behavioural changes, in the past.

The biggest thing for the longest time, probably the first year or so, was coming
here… I was doing it for my kids, which is the wrong reason. Some people might
think it’s a great reason, but I actually had to do it for myself. Once you realize
that you’re actually doing it for yourself, it kinda gives you a whole new outlook
on the whole situation, what you’re going through.

Multiple events were related during the narrative about situations that resulted in
the abuse becoming more “real” (i.e. more perceivable as violent behaviour) to these men,
and they were a dominant theme among motivators to change. Several discussion
concerned how being involved with the legal system and having charges brought against
them motivated the men to seek help. Kyle explained: “Being put through court and stuff,
that’s a deterrent for sure, make you open your eyes… just having outside interferences
actually to help you realize what you’re doing was a big help in making me aware.”
Brendan listed a fear of the courts among his motivators, and said that the focus that
involvement with the court system helped him in his process. A more in-depth discussion
of this element is found below, in the section entitled Interactions.
“Tipping points,” or “turning points” were mentioned during several interviews, these points often being accompanied by an overwhelming of stressors. For example, Quinn said: “The last incident, I was like I can’t live like this anymore, so I decided to seek help.” Marc, who struggled with depression prior to his arrest, described being overwhelmed by negative emotions both during and after the abuse. “The feeling of despair comes in. Kind of helpless. And once it’s done, lots of guilt and worn down and depressed.” Several men discussed their turning point as the moment when they became clear in their desire to avoid the terrible feelings that they experienced in association with the abuse: “Yeah, it’s a gross feeling. … Nobody wants to feel that way, I’m sure… It’s not the feeling that I wanted, so…” (James).

Not all motivations involved an avoidance of negativity. Relationship preferences were also commonly listed among motivating factors: the desire for love, companionship, health, respect, and support were all aspects of a relationship that these men wanted to create for themselves and their partners. Many also cited adherence to feelings of morality as providing impetus to their decision to change and commitment to counselling and relationship reconstruction. Matt said: “I always knew that that’s not how I wanted to behave,” and, similarly, Marc related: “deep down inside I knew it wasn’t right. That there was something wrong.” Changing their behaviour, therefore, became a matter of making their behaviours correspond with their desires and preferred ways of being.

Stigma and Shame

I specifically asked about stigma during the interview, with the interview question: Did you experience any stigma when you told others about the abuse, and, if so, how did you handle it? Most of the men responded that that they experienced very little stigma, if any,
from friends and family. Brendan said: “I mean, they didn’t like what had happened, obviously, but they didn’t write me off as a person, so that was quite helpful.” Several men said that their work environments were also places where they did not feel stigmatized (possibly due to the male-dominated environment), and one man mentioned that his relationship problems paled in comparison to those experience by co-workers. Kyle had disclosed his abuse to his employer and workplace peers, and he reported that, within the highly male-centric environment, the shared experience of “women-troubles” was something over which he and his colleagues bonded. While some men found it helpful not to be rejected outright by their families and peers over the abuse, others found that the anti-female culture that supported male bonding, while ensuring a lack of stigma, failed to support changes in their process of taking responsibility for their abuse and cultivating respectful attitudes and actions towards women.

There was no stigma reported towards the men or their behaviour from counselors or staff at the programs. Several participants volunteered that they had not told many people about the abuse or about the subsequent counselling. Some of the responses that I received from participants when I asked about stigma from friends and family members, however, were off-topic, so it is possible that that they may not have known what I meant (despite follow-up attempts to clarify the question), or that they were unsure about how to effectively articulate their answer.

Regarding disclosure, Brendan states: “I didn’t really talk to too many friends [about the abuse],” and James says, similarly: “I didn’t really advertise that I was going here.” I found the finding of low-levels of disclosure to be surprising, as it was my assumption that the legal proceedings that accompanied many of these instances of abuse would have
resulted in a much more widely-known event. However, participants were quite selective about to whom they disclosed their history of abuse and subsequent counselling.

Another notable finding regarding stigma was that several participants mentioned that they received negative feedback from their friends and families, but more often towards the program, than towards the men themselves. James describes his father’s reaction to being told that he was enrolling in counselling: “My father is old-school. A retired police officer. ‘That’s bullshit. You don’t have to go there.’” The stigma shown by family members towards the program may be a function of participants only having disclosed their counselling to people who were likely to be supportive of them, but inexpert in the field of counselling and violence. The stigma may even have been, dysfunctionally, the family’s way of showing support for the individual; by denouncing the program or the man’s need for it, they might have been trying to ensure that their family member was not categorized as pathologically in need of psychological help. This denial suggests that there is still a strong bias towards personal counselling, that it is seen as a weakness. There are ramifications for this perception, particularly when we are dealing with a construct that is founded in expressions of masculinity.

When there was stigma shown towards the men, they tended to attribute it less to the violence and more to other family dynamics, such as pre-existing prejudice on the basis of race or in-group/out-group dynamics that existed prior to the relationship conflict. Kyle, Marc, and Quinn all cite negative reactions that they experienced from their partner’s families prior to the abuse, and Marc felt that much of his partner’s family’s dislike was based on his ethnicity. Further discussion of this subject is found below.
The subject of shame rarely arose during interviews, and was discussed mostly in regard to the way that men felt while perpetrating IPV: “Shame. Not even anger or anything, just more shame, feeling of self-worth against myself, like, no really bad feelings against her, the situation itself I guess I had some anger towards, but it was more internalized stuff than I thought” (Quinn). The shame still experienced by some men was described differently than that experienced during the time that they were perpetrating abuse. For Quinn, the emotions have changed from those that depressed him and inhibited change, to those that serve as a reminder of his values. He continued:

The shame and guilt is still there, but it’s not the shame and guilt that kind of kept me there. It’s kind of like two different shame and guilt, like, there was one when I was actually doing the violence, it was kind of getting me, holding me back, like I knew it was wrong, and it made me feel bad about everything but it also kind of pushed me to do it. Now, looking at it, it’s more of a motivator to not go back to that kind of stuff.

Quinn drew a clear distinction between the shame that preceded counselling and the re-authored shame that, by reminding him of his relationship and behaviour preferences, supported his commitment to change.

**Responsibility**

There was variance in the data concerning processes of taking responsibility. Some men’s process necessarily began with a development of awareness about the problem of abuse, as they had, prior to getting arrested or other such “turning points,” been unable to either recognize their behaviour as abusive or recognize the abuse as problematic.
I noted instances of discourse that reflected this new understanding, and that situated the man as the sole author of his actions. Not only were there explicit statements spoken such as: “The only person that you can control is yourself, so that’s what you really gotta focus on… is learning how to control yourself,” but there were also instances in which men corrected their discourse to reflect their new sense of responsibility. For example, James explained his understanding of an aspect of his personality during his interview, but ensured that he stopped to re-word the phrase that he had used when the original statement did not reflect his current behavior choices. “I’m a very peaceful, easygoing person until I’m poked and then I gotta poke back,” he said, then paused, held up his hand, shook his head, and revised his verb tense to reflect the fact that he had committed to choosing non-retaliatory behaviours: “I had to poke back.”

Another group of men in this sample reported that they experienced no problems taking responsibility for their actions; their hurdle was that they did not know how to change the behaviour for which they were responsible. Their processes of taking responsibility involved the commitment to accessing resources, rectifying their abusive behaviour, and reconstructing relationships with their partners that are respectful. The ways in which their understanding of responsibility is reflected in their speech was observable in statements such as: “if you want to talk like an adult, but the person you’re talking to doesn’t want to talk like and adult, you gotta shake your head and come back to them as an adult again. And it’s hard” (Matt). Marc also discussed his feelings of responsibility in relation to the new de-escalation tools that he has learned: “I can think back to all the times I’ve had arguments with my wife and said things I shouldn’t have. I could have stopped them all.”
Identity

One of the first ways that the element of identity played out in this research was participants’ self-identification as non-violent and its ramifications for my ethical constraints. During my collaboration with Newstart, I had the opportunity to discuss with staff the possibility that participants had not ever self-identified as violent. The restriction that participants had self-identified as non-violent for the past year was intended to provide a buffer-zone of time between the violent incidents and my interviews. Given that prior self-identification as violent was not one of my inclusion criteria (only self-identification as non-violent for the past year), I navigated this issue by ensuring that the selection criteria included the restriction that participants were to be understood by program staff to be free of violent incidents involving their partners for at least the past year.

The incorporation of change into participants’ identity was not homogenous, with most participants feeling as if their change in behaviour corresponded with profound internal and external changes: “You’re changing one piece of your world just by changing a behavioural pattern. If you can actually change yourself, it will change people around you” (Matt). Quinn integrated both the history of violence and the changed identity into his existing self of self, understanding them to be part of the tapestry of experiences that define him. “It’s part of me, it’s part of who I am, and all those experiences made me who I am… If I didn’t go through all of the hard shit and the violence and stuff, chances are I wouldn’t be somebody who I actually like.”

Some participants, however, rejected this analysis. The difference seemed to be largely a matter of the semantics of the word “change.” I understand from James’
interview that he rejected the idea that his abusive behaviour was part of his identity; changing his behaviour, however profoundly that changes his relationships and his life, did not impact his sense of identity. He said: “I’m still the exact same person. Just how I deal with the situation has changed... It’s how I handle myself, I guess… So [the counselor] had some ideas, some tools, and I took them and used them. I haven’t changed, I just have a better understanding.

Another notable finding regarding the incorporation of change was how these men measured success by their capacity to change their relationships into respectful, caring ones. Matt described his feelings concerning this element: “Over time is when people were really… I find change is kinda more unsaid, but you can tell the way your relationships kinda mend back together.” Successful personal change is partially measured by tangible successes in other areas, such as relationships. The impression that I got from Matt was that the idea of change was empty without those tangible gains by which to measure it. He understood that change is genuine when it reflects the development of the self and relationships, and not when it concerns the pursuit of accolades:

If you’re changing you’re changing for yourself, even if you tell someone it’s like okay, I’m just doing this. it doesn’t need to be a big show thing. It’s a big thing for myself, it’s a big thing for everyone around me, but that’s what it is. It’s something that you’re happy to learn.

The new identity also necessarily involves self-respect, which makes sense from a therapeutic perspective: if the goal is for people to act as if they respect themselves, then it becomes important to conduct interventions in a way that preserves dignity. Matt recounted that his process involved learning how to maintain dignity during challenging situations, as
both allowing his dignity to be stripped and acting in ways that stripped himself of dignity perpetuated abusive behaviours, because he then felt obliged and justified to reacquire his dignity through maladaptive means.

You have to learn how to keep your dignity, you just have to learn different ways of keeping it. Dignity is really important… standing up for yourself, being proud, happy. If someone is going to talk down to you, how are you going to love yourself if you accept it? (Matt)

The desire to change was gradual for some men, and developed incrementally as their awareness progressed concerning the abuse and relationship preferences. The change process was also one that is viewed as gradual, as was evidenced by statements such as: “The process takes time, it takes practice, and change comes from identifying the problem, learning new tools, and practicing them over and over within your relationships.” The element of rehearsal was repeated throughout several interviews, as acquired skills are understood to require incorporation and integration into an existing relationship dynamic. Kyle explained how he did not feel that change was something that had yet happened, but was a goal towards which he and his partner will be striving for a long time yet. “[We’re] still getting there,” he said.

Corresponding to the realization that change is a process is the awareness that, for interventions to be successful, expectations need to be managed. These expectations can concern the timeframe involved in change: “You’re not going to go from acting [one way] to acting [completely differently]. That’s a pretty big gap and it’s going to take a while” (Matt), to expectations about partner reactions to and perceptions of changed behaviour. These elements are discussed further in the next section.
Reciprocity

The idea of reciprocity can be summed up by the statement that it takes one person to stop the abuse, but two people to build a meaningful relationship. Engendered by this idea is also the feature that, although the cessation of abusive behavior is critical to the creation of respectful relationships, the two actions (stopping the abuse and relationship-building) are seen as separate actions. This distinction becomes important in consideration of relationships that end as a result of the abuse; in the absence of further relationship-building, it is still necessary for men to examine and take responsibility for their behavior in ways that help to ensure that they do not abuse other partners in other relationships. Furthermore, the two activities may require different skills and tools to enact, and addressing them distinctly can provide clarity as to which techniques men should employ in situations of relationship distress. Although I did not specifically ask about this element during the interview, it arose frequently as a feature of narratives, and is an example of an emergent theme.

One example of reciprocity involves how these men came to an understanding of the behaviours of the people around them, especially their partners’ reactions to their abuse. Matt described this process by emphasizing the legitimacy of the anger, fear, and resentment that result from abusive behaviours:

‘Cause throughout the years of a violent relationship, violence is verbally, mentally, physically, right, there are a lot of feelings that get built up… they’re still a part of the equation which make it hard to mend relationships and to be treated like you’ve changed.

He spoke of how his understanding then impacted his behaviour in a constructive feedback loop that helped him avoid conflict by providing greater consideration for the emotions that
his partner was likely feeling at the time: “some of the things that you’ve been through… people have been evolved in that too.”

A second manifestation of reciprocity arose through discussions of partner commitment and mutually-acquired skill-sets. Relationships are understood to require the commitment of both partners who have tools and supports available to them. “It’s hard work to get there if you’re two people who don’t know how,” explained Matt. “If you don’t know how to get it, then get help.”

An important part of reciprocity for these men was their capacity to draw boundaries and clarity concerning what behaviours are considered acceptable by both parties within their relationships. Furthermore, several participants expressed the importance of taking responsibility for their behaviour, while avoiding being set up as necessarily responsible for all of the conflict that occurs in the relationship. Given what is known about situational couple violence and its difference from intimate terrorism, these boundaries become important for ensuring that communication about the relationship accurately reflects the content of the relationship. Both people in a relationship are responsible for their own behaviour, and they are both responsible for ensuring that their behaviour is respectful. Part of the process of drawing these boundaries is learning how to draw them respectfully, and how to respond if the men feel that those boundaries aren’t being honoured, which they address in counselling. Matt described one of the tools that he uses in these situations:

Like, if you’re going to talk to me like this, then I’m done talking, and that’s my choice. Then if you want to come back in one minute if that’s what I feel like I can handle, or an hour, or a week, fine, but if you’re talking to me like this… and
maybe it was so bad that [I] need fifteen minutes, that’s a way for me to stand up for myself. By not allowing that and by giving a time limit.

Participants also stressed the importance of communicating effectively with their partners about reciprocal dynamics. Identification of stressors, managing expectations, and being mindful of the others’ present emotional state were critical to the ability to respond appropriately to emerging dynamics. Kyle stated that he found it extremely helpful to be “forewarned” and to “forewarn” his partner about potential points of conflict: “Knowing my triggers and knowing her triggers. And her knowing my triggers is a big thing, both ways, just as long as we are both aware that can debunk arguments before they even start.” Matt described the necessity of reflecting respectfully back to his partner behaviour that he felt was outside of the bounds of that which was acceptable. “If something has happened, that is abusive, it’s like: you’re being abusive. I don’t know if that’s the way you’re trying to go, but you’re being abusive so maybe we can talk about this another way and I’ll listen to you.” He listed the ability to reciprocally communicate as a pivotal feature in the changes that have taken place within his relationships.

Interactions

The ecological systems framework that informed my research helped me a great deal in this segment, in that it directed my attention towards micro, meso, exo, and macro-level elements of the narrative and the connections between those elements. I will start the analysis below by organizing participant experiences as they relate to two features of narrative inquiry: location and timing. I will then discuss here some ways that other interactions affected the decision to stop abusing and change behaviours and relationships.
Location. Location (of the participant and of the therapy program) played a factor in the trajectory of change. For example, one participant’s experience of group work was highly dependent on the town in which he resided. Anonymity is a crucial factor in supporting effective group therapy dynamics; Quinn recollected, when taking part in group therapy in one of the sister-programs to Bridges, that he was unable to do so with relative anonymity given the small size of the community. Upon entering the group, he had prior friendships or acquaintances with several group members.

A change in location was (and is still, for some participants) part of the reconstruction process in which they are reintegrated into their homes after having perpetrated abuse. Some men, like Brendan, initially left due to being arrested, but he and other chose to live elsewhere to allow time for trust to be re-established and relationships to be repaired. For example, Brendan described his current relationship with his former home and spouse as one where he visited several nights a week as an invited guest to spend increasing amounts of time with his family.

The factor of location seems crucial in supporting boundaries with which all members of circumstances are comfortable. Marc discussed this change of location in positive terms, and says that he used his time away from home to do “lots of thinking and reading.”

Changes in location were not always positive for participants, however. This same participant, Marc, described long-distance relocation and how this move impacted him in terms of isolation and prejudice – both which may have contributed to the degradation of his relationship with his wife. This isolation and discrimination was exacerbated in work environments that he experienced over the years: “There was lots of abuse. Physical
abuse, too. I had my teeth put through my lips a couple times. ‘Shut up you fucking toad.’”

Location can play an impact on support systems and stressors, and we see examples of it contributing to abuse that one man experienced himself.

**Timing.** Narrative inquiry highlights the importance of the element of timing, and I revisited the data to code for this feature. Timing played a role in the process of change in multiple ways: readiness to change, and the sense that change is an ongoing process, not a task that one completes. Brendan described a warped sense of time relating to the abuse: “I dunno. It happens all at once, it takes months. There’s no real answer to the question, it happened like that or it didn’t happen like that. Both answers are correct.” He clarified that, while some elements may seem time-limited or of short duration, such as the abuse itself, or the initial decision to seek help, ramifications of the abusive behaviour radiate out for a long time afterwards. He expected the reconstruction of his spousal relationship to take years, and expected to experience the effects of his abuse forever. “There will always be some reminders.”

Timing is also present as a feature in two more ways: understanding the abuse; breaking down the events of the past and examining them moment by moment. Kyle described a moment during therapy in which he “got up in front of the group and went back through everything that had happened the night of.” Not only is the therapeutic element of examining the past salient to timing, but so is the development of prevention strategies, as these men go through conflicts and arguments, moment by moment, to identify moments when they could have stopped the violence, and “recognize the markers, the signs, the triggers that stop it there” (Marc).
**Employment.** Employment was directly asked about in the interview question: What effect did having employment make? Answers ranged from employment being seen as contributing to the abuse (stress, especially getting laid off, negative attitudes towards women – in all-men work environments), to being a protective factor or a source of stress relief (place to escape conflict, focus, contribute to family well-being). Marc, who experienced work as a place of violence that pressured him to disregard his family said: “Lots of the times when I came home angered it was because work was coming with me. There was lots of bullying at work you know.” Brendan experienced his work environment differently, and understands his employment to have contributed to his capacity to be supportive to his family. He used his position as a source of stress relief, working as many hours as he could to stay focused. “I think that if I didn’t have a job, it would have made everything a heck of a lot more difficult, so being employed is a major thing.” Brendan also described an interaction between employment and the justice system that was relevant to his experience of the aftermath of his abusive behaviour. He stated that it is more difficult to get into counselling programs, and that court proceedings are more strenuous for the defendant if he is unemployed: “The courts look at you different if you’re not working.”

Although I address belief systems in the segment of this thesis pertaining to “Supports for change”, I also want to discuss them briefly in terms of the interaction between individual and ideology. Several men discussed adopting ideologies into their lives that were counter-productive to maintaining healthy familial relationships. One of these ideologies is that of the role of employment and its priority over relationship concerns. Marc ascribed his exclusive focus on work to the adoption of ideologies taught
to members of the armed forces: “Being told one thing and taking it as gospel, like your job is your first priority in your life… it was more like a train of thought that kept me from getting too attached in the family.” He attributed a great deal of his marital conflict over the past 20 years to the feelings of alienation and resentment experienced by both him and his partner as a result of his choices regarding employment.

**Other interactions.** James explained how ideologies perpetuated by his early family life were carried over into his relationship, despite their tendency to support maladaptive and destructive forms of conflict. “We’re supposed to get mad at each other. We’re supposed to say a bunch of stuff to each other, we’re supposed to feel bad about it or get mad or pissed off, but that’s okay, because that’s what I know. That’s what I do.” He described how disengagement with those ideologies was an essential step in his change process, as he would not have been able to even recognize the violence as undesirable without first separating himself from the idea that it represents normalcy. “[It is not] until you know that it’s not okay, and can look at it from a different angle, [that] you can change it.”

Interactions between other stressors and frequency of conflict, abuse, and crumbling of relationship was a common theme. Quinn described how his partner’s pregnancy, coupled with substance abuse problems on his part and his partner’s contributed to stresses that resulted in abuse and the eventual dissolution of the relationship, even though instances of violence were not correlated with instances of substance abuse. It was a matter of “all kinds of little things. Adding up.” Brendan’s former substance abuse problems impacted him differently than Quinn’s. He understood his addiction problem to be linked to underlying issues that he had yet to address, even
after having gone through a 12-step didactic program. The result was that the same problems that drove him to self-medicate sought other outlets, and it was not until he pursued help for those problems that he was able to stop coping maladaptively in a larger sense. “I mean, sobriety is one thing, but then there’s another step after that, which I never really took, if that makes any sense.”

Unsurprisingly, several instances of violence involving other family members were mentioned during interviews, experienced by participants both during their childhoods and adult lives. Kyle reported: “Ironically, I remember, many years ago, I told my brother that he had to calm down, or he was going to end up getting divorced because he was getting angry too often.” Contrarily, not all participants reported having grown up in violent surroundings, and more than one man took pains to outline his non-violent childhood: “I never grew up with violence, I never saw alcohol, smokes, anything, like that. I grew up one hundred percent loved, until my folks got divorced… but I never grew up even yelling” (James). Interestingly, the same participants who discussed their non-violent childhoods also expressed that the lack of role-modeling regarding conflict resulted in an absence of knowledge about how to handle such conflict when it arose in their own relationships. Their entirely-peaceful upbringings seemed to be ironically somewhat deleterious, in that they left the participants without the tools necessary to successfully manage and navigate situations requiring de-escalation, self-management, and respectful argumentation techniques. “If you don’t watch two parents growing up in a household and see the ups and downs and the love and the care, then when you go out into the world and have a relationship, then how are you going to know how to interact with that person?” (Matt).
Belief Systems

The code of belief systems was one that I later created after realizing the frequency with which this theme arose during interviews and in consideration of the deep interaction between ideology and behaviour. Belief systems seemed to have a large impact on behaviour for these men; several of them referenced how their belief system impeded their ability to change.

Matt explained how his beliefs about “acceptable” violence impacted the behaviours that he chose: “If you think it’s okay to just shut somebody down and push somebody back, that’s how you’re going to act.” Another participant, James, outlined his struggle with his own belief system about “winning” and “losing”. Regardless of his level of conscious responsibility in the situation of conflict, the compulsion to keep from “losing” made permissible abusive behaviours: “In the back of my mind, I’m like… don’t say [something disrespectful]. She’ll win. Then I’d say it, ‘cause I didn’t want to lose.”

The necessity of replacing violence-perpetuating belief systems with ones that support the construction of respectful relationships arose several times during interviews. In some cases, the maladaptive beliefs involved permissiveness of abusive behaviour, and in others, they were restrictive, and concerned feelings that are “acceptable” for a man to cultivate. The intersection of individual-level behaviour and cultural-level ideology can be seen here, as these men struggle to replace culturally-instilled beliefs and narratives that support violent behaviours with new ones that both permit and encourage men to be loving and caring.

Other Instances of Injustice

The final interview question asked men to evaluate whether or not other injustices
or violent situations have a bearing on IPV: What do you think is the relevance of addressing men’s violence against other men and other instances of injustice? Almost universally, participants reported that they did not think that there was a connection between other violence or injustice and partner violence, with such statements as: “I don’t think it’s a factor,” and “It seems like a crock of bullshit.” In contrast to those declarations, I found it interesting that most participants cited instances of violence or injustice that had relevance to their violence or their decision to stop using violence. For example, some men described histories of family violence that they did not want to perpetuate, or situations in which they witnessed partner violence, and afterwards made the decision to differentiate themselves from those behaviours. There were several occasions where participants mentioned being the recipients of child abuse, discrimination, and workplace violence. Quinn, in particular, felt that his decision to stop perpetrating abusive behaviour was closely tied to the trauma of experiencing violence at the hands of his father, which he was determined not to reproduce in his son.

Participants were also able to articulate ways in which these injustices impacted later events, describing how failure to defend one’s self in one instance may result in backlash towards family members or other loved ones: “If you don’t stand up for yourself in all aspects of your life, then other places where you feel like you can more stand up for yourself, you will” (Matt). Another participant explained how this backlash can result from a carryover of anger from one situation to another. Marc described how the verbal and physical abuse that he experienced elsewhere impacted his later interactions with his partner, as he came home feeling full of anger, irritated, and “bad, not worthy.”
There were also several instances where the conversation turned to events during which, on separate occasions, or prior to perpetrating abusive behaviour, men discussed having been abused by their partners. They did not use this abuse to excuse their own abusive behaviour, but when I asked the question: “What kept you from having the type of relationship that you wanted with your partner?,” mutual violence was frequently cited as one of many responses. Here we see the differences manifesting between previous frameworks of therapy and Narrative Therapy; contextual variables that prevent mutually-respectful relationships from forming are able to be discussed in a way that does not evoke panic of victim-blaming for the abuse. Contrary to this goal, however, one participant stated that his attempts to resolve the problems of mutual-violence in his relationship during counselling sessions at a third narrative therapy program were met with derision. Quinn described his resulting feelings of alienation: “It was like, if we said something [about contextual factors such as reciprocal violence] we were looked down upon for saying that, I felt. It was just kinda like, at first I went in and participated, but after a while it was just like really getting to me.” Not surprisingly, this judgemental therapeutic setting was unhelpful to Quinn, and after completing the program, he chose to avoid counselling for a period of time.

Another feature of the data that I noted was that participants had difficulty responding to questions that asked them to evaluate themselves in a positive regard (What does it say about you that you do/did feel bad about [the violence]?). The responses that participants gave were stilted: “I dunno. It just kinda shows that… I’m bad at this stuff,” and “It says a bunch of positive things, but I don’t want to list them. I don’t want to sound… whatever…” Two men opted to skip the question entirely.
Conclusion

The men in this study experienced considerable difficulty when they attempted to access resources to help them change their behaviour and relationships. Although experiences with staff at Newstart and Bridges programs were beneficial, experiences with other therapy and intervention organizations sometimes proved to be less than helpful, and the discouragement that resulted from these negative interactions impacted the trajectory of therapy. Participants had much to say about key techniques and tools that have helped them during their process of change, including numerous examples of they employed those strategies with their partner and extended the strategies to help them in other relationships at work and with their children. Participants identified their relationship preferences and instances of how feelings of responsibility impacted perceptions of agency; responsibility played a large role in supporting change for all participants. There was considerable variety among experiences of contexts, motivating factors and of familial reactions to abuse; this range illustrates the diversity of IPV, which is clearly not a problem that manifests homogenously.
Chapter VI: Discussion

This section begins with a discussion of several features of participant accounts, such as the difficulty experienced when classifying internal and external motivators, and the apparent dichotomy of two models used to explain the trajectory of change: change that occurs upon reaching a tipping-point and the understanding of change as a gradual process. Links are provided between literature and elements of supports and tools that men employ to make changes in their relationships. I discuss the benefits that men derived from achieving clarity concerning their values and abusive behaviours. The ways in which processes of change for these men are impacted by the therapeutic setting are also considered, and feedback for programs is offered. A brief discussion concerning the role and impact of masculinity includes an account of the tensions experienced when analysis the role of this construct. Limitations of this study are listed, (both those specific to qualitative interview studies and those specific to this study in particular). Limitations include the absence of additional stakeholder voices to these accounts of violence, and potential gaps in understanding that remain as a result of this omission. Lastly, a segment on reflexivity allows me to account for possible biases and learning processes that may have affected the data or analysis.

Participant Accounts

Two interview questions ask participants what they consider to be their motivating factors that prompted them to begin or persevere in their change process. A further point concerning motivation was one that arose during multiple interviews. Participants had difficulty articulating which motivators were internal and which were external; indeed, upon analysis, I had the same difficulty, as it is arguable that all external motivators
contribute to thoughts and emotions that represent an internal component to the desire to change. As Brendan put it: “I don’t know if those are internal or external, but my feelings I guess are internal, my family is external, but kinda the same thing as the last one, they’re mixed. You can’t separate them.” This difficulty in extricating internal (individual) from external (familial, social, environmental) factors is consistent with our understanding of ecological systems theory, and the interdependency of systems. For example, individual goals, such as loving relationships and the desire to be a good father, interact with social and legal requirements of non-violence in behaviour. Goals, motivations, beliefs, and restraints to behaviour are all a function of intertwined and overlapping systems.

It is important to address a tension between two models of change that are reported in the data: that of the turning point, or tipping point; and that of process. At first glance, these models may seem that they are at odds with one another, and that they present accounts of the decision to change (and subsequent actions) that manifest as either abrupt or gradual, and are subject to either sudden epiphanies or slow, incremental realizations. My understanding is that the dichotomy of these two models represents an oversimplification of the events surrounding the decision to cease abuse and the cessation of abuse. A model that accurately describes these circumstances needs to realistically account for the moments of clarity that may accompany events (such as being arrested), the lengthy process of changing behaviour and relationships to reflect new choices and preferences, and it must also be compatible with setbacks within relationships, attitudes, or actions (Ansara & Hinden, 2010). The inclusion of dialogue regarding “tipping points” does not presuppose that men reach a point of realization and are necessarily fully able to align their behaviour with their preferences from that point forward. Such an account
would, as discussed during the Literature Review, present a binary between a broken and healed person. This binary would suggest that, once the individual has crossed the turning point, he has ceased to change, and no longer needs to change (or is capable of changing) his behaviour (Paré, Young, et al., 2006). On the contrary, these men’s tipping points represent a *beginning* of the process. Participants discuss events or experiences that cued them to the extent of the abuse, their responsibility for the abuse, or the ways in which the abuse was not their preferred relationship choice. These realizations then prompted them to access help and begin the slow process of changing their behaviour and constructing respectful relationships. As discussed, the identification of such a tipping point can support change by helping men solidify their reasons for changing by identifying what factors affected them during that instance (Sheehan et al., 2012). By establishing the event of an arrest or a memory of seeing the abuse negatively impact a child, participants used the moment to clarify to themselves their goals: in these cases, to avoid criminal behaviour and to have a caring relationship with his child that is free of abuse.

One of the most prominent findings of this study was the rich information regarding which features of therapy men found helpful, and which ones were less helpful or possibly detrimental. Rhetoric similar to that used in the group facilitator’s handbook (Augusta-Scott, 2008) manifested heavily in participants’ discourse, both in the concepts that were discussed and in the terminology that was used to label those concepts. I understand this echoing of therapeutic session discourse to be a positive reflection of the impact that therapy had on these men; they clearly took the information to heart and were able to meaningfully apply it to their own lives in an enduring way.
Although not a sufficient condition for change, clarity concerning values may be critical as a necessary condition for readiness to change (Eckhardt & Utschig, 2007). It is unclear whether a lack of clarity in this area may be a symptom of or a contributing factor to a lack of readiness, but the importance of clarity and its implications for readiness to change are echoed in the emphasis placed on this subject during therapy (Augusta-Scott, 2007). Participants are invited to reflect on the ways that their values support their change process, and are posed questions such as: “What does it say about your values that you feel ashamed [after using abuse]?” (p. 84). When participants in this study possessed clarity about their values and preferences, they were able to pursue their desires in ways that were more effective, in contrast to the maladaptive method of pursuing needs through abuse, which lead to a dissatisfaction of those needs (Augusta-Scott & Dankwort, 2002) and discord between their behaviour and their values. Instead, they sought respect from their partners in a way that encouraged both the receipt of that respect and self-respect.

Achieving clarity regarding the definition of abuse and which of the man’s behaviours were abusive were part of the process of taking responsibility. This clarity was necessary for these men to achieve before they could change their behaviour, given the confusion that some men felt reported what behaviour constitute abuse and the extent to which those behaviours were undesirable; this confusion, as previously discussed, is understood to be a common experience of men who perpetrate IPV (Eckhardt & Utschig, 2007). During group therapy sessions, men discussed the utility of labeling certain behaviours as “abuse.” Not only does this label give a clear description of the behaviour that contains information on its undesirability and capacity to harm (they go through and define exactly the behaviour that they do not want to repeat), but it differentiates abusive
behaviours from the feeling of anger, which can be respectfully communicated without abuse (Augusta-Scott, 2008).

Clarity about responsibility, and the accompanying understanding that each person is responsible for his or her own actions in a relationship, was also discussed as a factor that helped to support the cessation of abuse. Achieving clarity regarding responsibility supports agency (Augusta-Scott, 2007; Augusta-Scott and Dankwort, 2002; Sheehan et al., 2012) and also helps men accurately describe the situations of conflict. They are better able to address their behaviours when they are capable of regarding them clearly, without distorting their cause or impact by engaging in denial or blaming others for their behaviour (Augusta-Scott, 2008). Several specific frameworks and metaphors are used during therapy that help men clarify responsibility, agency, and capacity for self-control. The parent-child metaphor, in particular, helped illustrate the responsibility of each partner to maintain an approach of respectful discourse and calm demeanour, irrespective of the reactions of their partners.

Among the tools that participants listed as highly valuable were resolution techniques that men could employ in response to their partners’ abusive behaviour. As discussed, successful relationships require the commitment and knowledge of both partners, and achieving clarity regarding the limits of responsibility (his and hers) can be critical in ensuring that situations do not escalate due to frustration and feelings of helplessness. Men also found great value in studying the effects of abuse. Not only did this examination help to bring about a realization of the seriousness and gravity of the results of violence, but it also helped them to study warning signs, triggers, and events leading up to the violence. Several formats are discussed by participants that they found
useful in using as a framework for “slowing down time”: the aforementioned “zero-to-sixty” metaphor was discussed, and helped men identify when they could employ self-regulatory techniques that would prevent escalation, such as giving themselves a time-out from the situation. Another metaphor used was “the river,” in which men were encouraged to consider their position in relation to their environment, and identify points at which their trajectory was leading toward violent behaviour. By focusing, moment by moment, on these events, they were able to identify moments and strategies for stopping the violence before it occurred.

During therapy, men are encouraged to discuss the difference between the feelings of helpful and unhelpful shame, and the differences in behaviours that may arise from these two different feelings (Augusta-Scott, 2008); these discussions are apparent in the discourse that manifested in these interviews. Quinn described the shame that he felt regarding his abusive behaviour before he sought help, and he both attributed different origins and different outcomes to the two feelings. His shame, initially having arisen from low self-esteem and revulsion at his own behaviour, did not have the same source at the time of the interview. He discussed his current, occasional feelings of shame as being the product of having become clear on his preferred life choices and having arisen from the discrepancy between those choices and decisions that he used to make, and fears making again. He understood his initial shame to have contributed to his low self-regard, while the current manifestation of the emotion is proof of his progress, and thereby constitutes both an achievement and a warning not to regress.

As discussed, experiences of counselling in which men feel shamed, or which fail to allow narratives of abuse consistent with men’s experiences of their own abusive
behaviour are non-conducive to continuation of therapy or cessation of abuse (Augusta-Scott & Dankwort, 2002), and conclusions that contribute to a negative identity are understood to support continued violent behaviour (Augusta-Scott, 2007). Other men may relate deeply to Quinn’s feelings of pessimism and alienation in response to the judgement that he encountered during other therapies.

All six participants listed the respect that they received from therapists at Bridges and Newstart as beneficial to their experience of therapy. Several men discussed specific examples of modelling respectful behaviour in response to disrespectful discourse that resonated with them. It is only by creating a safe environment in which men feel able to disclose the details of their behaviours and emotions that they can perform the critical self-reflection that supports change (Cooper, 2009) without having to worry about self-preservation.

**Additional Feedback for Newstart and Bridges Programs**

Information is discussed, above, concerning elements of the program that men found to be most helpful to them. This subsection contains further discussion of feedback that may be of value to practitioners. It was important for me, as a researcher, to devote a section of this thesis to program feedback. In this way, I seek to avoid the “helicopter research” phenomenon; my research is informed by practice and contributes to practice. This knowledge transfer is important to my research question(s) in that it helps to guide me in addressing how interventions may be most effective, and it allows me to attenuate some of the limitations of this research that involve its exclusive focus on the stories of male partners in abusive relationships. The relationships that formed as a result of this collaborative goal have allowed me access to information and guidance from fieldworkers. Furthermore,
encouraging input from key stakeholders, and conducting an analysis with an eye to practicality honours the efforts of participants and workers by offering them information that may be of value to them as clients or therapists. Supporting mutually-beneficial relationships such as these is key in fostering effective research that includes relevant voices and facilitates access to participants for future researchers.

To this end, I hope to share with counselors some information about which aspects of the program participants found presented challenges. I do not know to what extent this information will contribute to practices, but counselors may find it helpful. I look forward to, through future collaboration with program staff, exploring the directions in which data such as this may be used to inform existing interventions.

Several participants expressed confusion regarding the purpose and benefit of group therapy, despite the fact that this subject is one that is broached in therapy, albeit indirectly (Augusta-Scott, 2008). It might be helpful to participants’ process if they spent an increased amount of time examining the strengths of discussing their issues and experiences in a group setting. Men might be more willing to open up if, instead of in confusion, they come to group understanding that they are helping reflect each other’s experiences and bring up problems that are common to all group members.

*Accessibility* is another area of discussion that arose in nearly every interview. The seven to eight week long wait may not be an unreasonable amount of time to attend services, particularly given limitations of scope and funding. However, this wait was, for some men, in added to the time it took them to find the program and make appropriate arrangements for induction. Concern was voiced over the paucity of public information available concerning these counselling programs, as well as the out-of-date contact information on the internet and
the unappealing, incomplete, and difficult-to-navigate website. I also understand that there are considerations of privacy in Newstart and Bridges’ decision not to advertise their services; indeed, it is arguable that services are more readily accessible if client anonymity is strictly maintained. The sense that I got from the interviews was that gains in accessibility due to privacy were outweighed by the frustration that they encountered when attempting to secure these counselling resources. It may also mean that some men who need and desire this form of assistance will not receive it because they do not know that it exists.

The inability to articulate positive self-regard in relation to progress made in clearly identifying abusive behavior and relationship preferences may be an element that warrants address in therapy. It could be that there is enduring therapeutic value in attaching concrete positive terms to the individual as a result of their achievements in making positive changes to themselves and their relationships.

**Tiered Interventions**

There is a siloing of therapeutic measures for IPV, as there is in many industries, and they are understood to be tiered in terms of primary (preventative), secondary (intermediate intervention), and tertiary (intensive intervention) (Institute for Work and Health, 2013). This common model was not in evidence within the accounts that I received of Bridges and Newstart. Some of these men were there clearly at the secondary stage (prior to physical violence), and some at the tertiary stage (after one or more instances of physical violence). As previously mentioned, James discussed his failed attempts to procure primary intervention, and an online search of my own did not yield many potential avenues for this form of support. It may be that the relative lack of these types of interventions for men precludes separate interventions, and that the inclusion of
both secondary and tertiary intervention at Bridges and Newstart is a function of necessity due to funding restrictions. However, there may also be merit in collapsing them together, and dispelling the idea that they ought to be discrete, siloed organizations. A complete account of the merits of vertical integration of intervention resources is outside of the scope of this thesis, but these merits include: greater efficiency in human capital and other resource use, an absence of competition for funding against other interventions provided for women and children (Mullender & Burton, 2001), and increased knowledge transfer. Unfortunately, it may be the case that such integration will not be possible until or unless current views regarding the incompatibility of ‘his’ and ‘hers’ interventions (Augusta-Scott, 2003) are overcome.

As mentioned, the majority of participants indicated that they sought help prior to their court order to attend therapy, or in the absence of a court order. The extent to which this pattern of help-seeking is typical is not clear. I discuss further, below, the possible impact of self-selection bias on this sample. Later in the interview, I asked participants about their motivations for seeking help (both internal and external), but there may be additional elements specific to this group of men that encouraged them (and not others) to seek help without the coercion of a court mandate. In several cases, there may also be features of their experience that encouraged them to pursue counselling at a level of relationship-crisis that warranted secondary intervention. Further research would be helpful to illuminate factors affecting how men may be motivated to seek counselling at preventative stages.

**Masculinity**

The ideology of masculinity has profound implications for IPV, and is involved in
the perpetuation and cessation of violence in intricate and complex ways (Lindhorst & Tajima, 2008). Apart from contributing to IPV, some features of masculinity play a role in the help-seeking process, particularly ideologies pertaining to the hesitancy to ask for help, and the lack of community support for help. James discussed his experiences of help-seeking, where he was continually rejected by associations that provide “family support.” He found that, while there are many supports available within the HRM for women who fear abuse in their relationships, there are few for men, who are still not considered to be viable recipients for intervention by many organizations. This frustration of his attempts to seek help was, unsurprisingly, disheartening to him, and listed among the factors that inhibited his change process.

Although masculinity was not specifically listed among factors influencing participants’ decisions to change, it is understood to affect those decisions (Augusta-Scott, 2003; Freize, 2005), and it is one of the topics that participants of Bridges and Newstart cover during the first weeks of therapy (Augusta-Scott, 2008). Discussions of gendered “traits” must be undertaken with care, as they may risk essentializing behaviour on the basis of gender or sex, and it is important not to project a gendered analysis where one is not relevant; for example, stigma against seeking therapy is experienced by both genders, and there is stigma against being in an abusive relationship for both women and men in heterosexual abusive relationships. The tendency to need to “win” in arguments and be “right” is not exclusive to men, and it is not clear to what extent this feature is more representative of men than of women. Given that these features are common to both genders, the categorization of such behaviours as specifically characterizing “masculinity” is debatable (Epstein, 1997). Attributing behaviours or emotions exclusively to one
gender is detrimental to the view that both genders have similar (if not the same) relationship preferences in terms of respect, care, and affection. It may also encourage an analysis of behaviours that excuses them (wholly or in part) as functions of natural processes or biologically-based determinants.

However, if we are to accurately describe the processes involved in IPV, it becomes important to be certain that our discourse does not throw the proverbial “baby out with the bathwater”; in rejecting an essentializing discourse, it is essential that this rejection does not obscure the ways in which gender is manifested within the experience of IPV. One of the notable experiences of gender involves community support. As discussed, there is a gendered component to the difference in how women and men are offered services, and the experiences of these men are reminiscent of traditional views that omit men as suitable targets for intervention (Cooper, 2009). There are also ways and degrees to which certain traits, values, and behaviours are fostered differentially for men and women, and which are then reproduced through ideology. Values such as the permissibility of violence and social disapproval against men asking for help number among those that affect experiences of violence for men. Although my understanding is that there is limited evidence as to the biological origin of these traits, they still affect how men experience perpetrating violence and seeking help to stop their abusive behaviour.

This study has provided a space for hitherto-silenced voices to be heard, and provides information from key stakeholders about how they are impacted by intervention and how they experienced the process of moving from choosing to use abuse to choosing respectful relationships that did not include abuse. This set of data constitutes a piece of the story that is often absent from discussions of IPV, and the details herein provide us
with information as to how we can support men in this transition.

**Limitations**

There are limitations to only gathering interview data from men, and not from their partners or other stakeholders, such as fieldworkers. In these interviews, men discussed the elements of therapy that they found to be helpful, but this thesis is unable to answer the question of how to get men to engage in these dialogues. Furthermore, these men, while being the sole experts of their experiences, are not experts in the field of psychology. Limitations to these narratives necessarily include the value of this information to therapists. These men may not have access or discourse to describe their own processes. Moreover, some men may not be able to see or express the effects that certain historical or environmental variables have had on their decision to abuse or stop abusing. For example, as mentioned, many men described histories of family violence in which they witnessed, or were the recipients of abusive behaviour. The co-morbidity of violence within families is well-documented (Kurst-Swanger & Petcosky, 2003), so although I was not surprised to encounter it, I was surprised at the frequency with which it arose, given that I did not ask about it directly in any of the interview questions. The insistence of some participants on the absence of a link between other forms of violence and partner abuse is one instance in which men may be unable to accurately perceive factors that contribute to abuse.

Narrative therapy is one of many therapeutic techniques employed in interventions for IPV. These data may present tentative support for the narrative approach, in that they demonstrate how it provides an opening for conversations about responsibility,
masculinity, and violence. However, there may be other ways of opening up those conversations as well; further study is required to evaluate the efficacy of this approach.

This study does not include corresponding information from partners of these men concerning relationship dynamics. The absence of partner’s accounts reduces our capacity, as interpreters of these stories, to be confident that these stories represent an exact account of these processes. The data is self-reported, and possibly subject to bias and selective memory. Part of the limitations include our inability to classify situations of violence (as situational couple violence, intimate terrorism, etc.) so the data may be of limited value for policy formation that depends on such classification (Kelly & Johnson, 2008). It is feasible that, in correspondence with the majority of situation of IPV, these cases fall into the category of situational couple violence (Frieze), but without further data, classification, which can be difficult even when direct observation is involved, is impossible for this study. Furthermore, these men do not speak for their partners’ experiences of violence or the aftermath, which may differ significantly from their own (Cavanagh, Dobash, Dobash & Lewis, 2001). While men may possess sincerity and clarity about their values and preferences, the extent to which their behavioural choices reflect those preferences under the day-to-day duress of a relationship cannot be evaluated by speaking only to male partners (Paré, Bondy, et al., 2006). There is also evidence that self-reports of criminal behaviour will be underreported (Mullender & Burton, 2011).

The absence of therapist accounts within this study prevents a full evaluation of the tools that participants find to be most helpful in supporting change. One of the purposes of this study was to gather information on which tools and processes men found to be most helpful, but their perception constitutes only part of the information relevant to
the formation of policy or best-practices. The lack of behavioural data (concerning IPV recidivism, for example) signifies limited application of these data for social or program policy, as errors in policy creation could result in dire consequences for recipients of abuse, and such steps would not be feasible without evidence supporting the efficacy of the proposed practices. Further study is required before a complete picture of IPV intervention can be understood.

One of the criticisms of narrative inquiry is that it is retrospective, and memories of events long past may be unclear (Riley & Hawe, 2005). Another is that, given its focus on depth instead of breadth, it is typically applied to a specific population whose data may not generalize well to other populations. Indeed, my data set is very specific, and falls into the category of non-generalizable: males from NS who have been through a narrative therapy program. There is benefit to accessing this population over others, however, as they are less likely to be prone to distortion, denial, and inaccurate reporting as may be found from men who are still involved in the criminal justice system (Eckhardt & Utschig, 2007), who may be overly suspicious of the research, and who may have concerns about the findings being reported to the community, probation officers, and so on.

Further criticism of qualitative methods in general (and narrative inquiry in particular) involve the loose method of analysis (Manning & Cullum-Swan, 1994). Relatively unstructured coding protocol may allow for it to be performed haphazardly, and risks including bias or subjectivity into the analysis. It is arguable that all qualitative research (if not all research) involves a measure of subjectivity, but I attempt to account for that subjectivity in the discussion of reflexivity. Furthermore, I combat undue bias by
documenting my coding strategy and by providing a clear rationale for analysis.

It is doubtful that saturation (O’Leary, 2004) was reached by interviewing this small sample. I was provided with the opportunity to interview more than my intended five participants, and so was able to accrue a more diverse sample than I would have otherwise. However, the concept of saturation, while relevant, is not one that is relevant to qualitative analysis methods such as narrative inquiry in the way that is understood by the positivist tradition. The concept of saturation applies most closely to the fact that, while each participant brings with him a distinct set of experiences, I no longer found new themes to code by the sixth participant, and that man’s data did not lead me to review my codes. I do not feel that the addition of further narratives would require me to substantially revisit and review my coding strategy.

This research concerns behaviours that are illegal, are considered immoral, and in relation to which the participant may still feel shame. As such, my data may be shaped by a lack of motivation on the part of participants to disclose information pertaining to that behaviour (O’Leary, 2004; Wiersma & Jurs, 2009). Furthermore, these men have been silenced in the past, and are likely to have experienced negative feedback in cases when they did reveal their behaviour to others. Consequently, having had their voices stifled for so long, they may have encountered difficulty in feeling empowered enough to accurately tell me their stories (Connelly & Clandenin, 1990). I did not encounter outright refusal to discuss experiences, as participation was voluntary, but the nature of the behaviours in question may have made the resulting accounts prone to minimization or lessening of severity. I expect that these problems did not affect my data to a great extent, as I was not seeking information as to the abuse itself, but of the process of becoming non-abusive.
The data may have been shaped, somewhat, by the men’s desire to present themselves in a positive light; this tendency is not specific to individuals who have committed abuse, but is a well-documented phenomenon observable in much self-report data, called “social desirability bias” (Lewis-Beck, Bryman, & Liao, 2004). This bias may have been present to a larger extent in this study than in others, as participants may have felt that they needed to portray themselves in a positive way, in light of their histories of abusive behaviour. The positive self-representation, rather than being for my benefit, may have been an expression of their adherence to the new identities that they had constructed: identities that may have been challenged by the new disclosure of their abuse.

The method (face-to-face audio recorded interview) present some challenges. Being audiotaped seemed to cause unease in some participants, and it did not capture non-verbal cues the way that a video recording would (O’Leary, 2004). However, the difficulty of accessing reliable videotaping technology and the increased intrusiveness of video-recording prevented me from using this latter method. As I discuss further in my Reflexivity section, in contrast to the drawbacks of in-person audiorecorded interviews, I found that the phone interview presented the most challenges to me as an interviewer, and it seemed to be the one in which the participant was least at ease. Body language cues are absent during phone interviews, and the ability to cultivate rapport was inhibited. I also found it difficult to provide reassurance to the participant in the same way that I could in person.

One of the largest limitations to this data is the self-selection of these men into this sample. There is a relatively high level of responsibility, agency, and constructive coping strategies seen in the data, but the question remains: how much of this high level is a
result of selection bias? It is arguable that only men who have had a particular (i.e.,
positive, fulfilling, educational) experience of the program and of change were those who
were to participate in this research, and the interviews may reflect this selective
experience. Any bias displayed may not matter in terms of the usefulness of this data for
practice, and it certainly does not have relevance in a narrative sense. However, I do not
want to give the impression that I consider this sample to be representative of all of the
men who pursue counselling at Newstart and Bridges, or that it is representative of all
men who perpetrate IPV.

**Reflexivity**

I have not perpetrated or experienced IPV – this places me at a disadvantage in
terms of ‘relatability’ to the participants, but it may be an advantage in terms of emotional
distance: I did not have a personal agenda regarding this research that is built on fear or
anger. My motivations stemmed from having identified an area in which there was
oppression, where a group was being silenced, and where that silence was not only
harmful, but also inhibited opportunities to intervene.

My socio-economic status may have affected the research process (O’Leary,
2004). I come from an above-average economic and educational background, and an
above-average family stability. I have not lived through many of the factors that
contribute to IPV: poverty, sustained unemployment, food insecurity, substance abuse,
divorce, parental IPV. Although I study these factors, I am not fully aware as to how they
affect one’s lived experience; this lack of knowledge may affect my interpretation of these
stories. My social status may also have contributed to a perceived power imbalance
between me and the participants. I mitigated this potential imbalance by monitoring
closely my reactions (facial expressions, body language, etc.) to these men’s stories, and ensuring that I remained as neutral as possible (O’Leary, 2004). I also dressed in such a way (tidy yet informal) that did not support a researcher-participant power imbalance or highlight any economic disparity between the interviewer and participant. Lastly, whenever possible, I organized interview locations so that it was one in which participants were more ‘at-home’ than I; where they had spent more time, and were familiar with the surroundings.

The in-depth analysis required by narrative analysis presented the danger of the boundaries between my analysis and the participants’ experiences becoming blurred (Riley & Hawe, 2005). I have been exposed to multiple political, moral, and social rhetorics that I strive to balance, such as feminist anger, statistics and evidence of perpetuating gender inequality, discussions of power differentials, traditional gender values, rallies against violence, and idealization of specific manifestations of femininity and masculinity. I am a proponent of post-positivist ways of thinking, yet I am well versed and supportive of constructivist approaches, as I feel that they are better able to convey the complexity and subtleties of human behaviour and experience. My theoretical outlook, data gathering, data analysis, and discussion were all informed by this approach. I am also subject to a desire to see gender equality promoted and the safety of women furthered by reducing IPV, predominantly by better-informed interventions. Undoubtedly, these factors affected my motives and analysis (O’Leary, 2004), despite the goal of narrative inquiry to describe events predominantly from the point of view of participants.

**Interview Process.** I found the interviewing process to be one in which I learned a great deal. For example, I noted that participants’ account of their experiences faltered
when I wrote field notes during interviews, so I delayed note-taking until after the interview had concluded. After each interview and field-note session, I also wrote a journal entry to help me process my emotions about the content. One of the issues that I found it useful to process in this way was that, during the first interview, I struggled with the gravity of the subject matter. I am not accustomed to discussing matters of physical violence with the individuals who are responsible for that violence, and the content of the conversation conflicted with my well-ingrained techniques for engaging strangers and establishing rapport, which include a reliance on humour and laughter. This conflict ceased to be a problem for me after the second participant; in time, I was able to monitor my reactions more closely.

The fourth interview was conducted by telephone due to scheduling conflicts, and I found this interview method to be more difficult than the others. The participant was located at home during the time that we talked, and there were many distractions, such as his children demanding his attention. This interview was much shorter than the others, as the distractions disrupted and ended his responses for several questions. I also felt that I could not develop rapport with him in the same way or gather the same quality of data, as body language cues are not communicated via telephone. The constraints on communication made me less inclined to probe with follow-up questions, and made me less confident asking some of the highly-personal questions.

I learned also to reassure participants. Initially, I perceived them to be in the position of authority, and I was intensely nervous entering into interviews. However, all six of my participants paused in their narratives to express concern that they were answering questions sufficiently or express their nervousness. I became aware that, as an
interviewer, I ought to be watching for this reaction, and striving to ameliorate it. When the third man began to subtly request my approval of his answers or apologize for the incompleteness of his statements, I was able to troubleshoot his apprehension and provide reassurance that his answers were excellent and that I would follow-up with questions if I was missing information. This tool was useful also with the last three participants.

**Reflective journal.** In the interest of reflexivity, I maintained a research journal in addition to field notes, so that I could make note of my own emergent understanding or feelings during my coding process, as well as how I negotiated the shared narrative process. I felt that it was important to include it in the interest of thoroughness, validity, and integrity, but the journal also served as a way for me to discover and delve into my own biases or emerging influential thought processes. It helped me mitigate the effect of biases by recording them throughout the research process, and by noting situations in which I felt that my biases may have influenced my analysis (Riley & Hawe, 2005). Prior to beginning data-gathering, I did not anticipate having substantial comments to make in the journal, although I found it to be an invaluable tool in many ways.

My reflective journal served multiple, overlapping purposes, including as a means by which I could organize my ongoing research work (a record of progress and to-do list). It helped me to identify emerging themes in the data in terms of the themes that I would invariably bring to the data, but allowed me a place to explore new themes. The journal also encouraged me to mitigate my biases by providing a forum for me to reflect on input from others, and by using constructive criticism (from all stakeholders in this project) as a resource to identify potential problems and pitfalls (Connelly & Clandenin, 1990). It helped me process emotions that arose during the interview process (that weren’t relevant
to include in field notes), and allowed me to take note of the times during which I found the subject matter to be emotionally triggering or distressful. Finally, the journal was instrumental in my management of anxiety, given the tight timeframe in which I completed the latter half of my thesis. There were many frustrations and setbacks along the way; its added structure and use as an outlet/arena for working through emotions was useful in diminishing specific concerns as they arose, and in helping me map out solutions and ways to move forward. Journaling, contrary to my expectations, was a positive experience.

During my proposal process, I made the mistake of stating that I was planning on attempting to be “objective.” My understanding of researcher objectivity has since changed, and journaling helped me document and process some of the ways in which I was unable to remain objective. I initially was dismayed at my lack of emotional distance from the subject matter, but discussions with Newstart staff and research into reflexivity provided by my thesis committee facilitated a new understanding: one in which I was not required to remain coldly remote from the subject matter. As Clandenin and Connelly (2000) state, “it is impossible (or if not impossible, then deliberately self-deceptive) as researcher to stay silent or to present a kind of perfect, idealized, inquiring, moralizing self” (p. 62).

Conclusion

Where tensions existed in this study (for example, in the research model and in interpretation of results), it is important that the resolution of those tensions does not result in collapsing and oversimplification of the problem at hand. While parsimony is valuable, oversimplification leads to distortion, and it can be helpful to discuss complex
issues in terms of both facets presented: motivators can be both internal and external, changing behaviour can include both instances of turning-points and involve a lengthy process.

A full discussion of intervention practices will have to wait for my doctoral dissertation, but there are tentative observations made here in relation to literature. There were limitations to this design, but the research was effective in carrying out its purpose. It provides careful data that illuminates this one small piece of the puzzle. It would be incorrect to interpret this piece as constituting the whole picture. However, the voices that are absent in this study are well-documented elsewhere; the lack of them here does not imply their silence.

IPV is perpetrated by men who are complex organisms, and who often possess conflicting emotions and desires. Interventions that take this complexity into account will better be able to concentrate on helping clients. Prior research into IPV intervention, which has almost exclusively gathered data from therapists and recipients of violence, has left the field with a gap in knowledge about which elements of programs are specifically being transferred to the home-setting, and participant’s reactions to differing approaches to therapy. This information is critical to the formation of effective therapies, which must incorporate the relative utility of specific techniques, and which must avoid approaches that participants find alienating or demotivating. By gathering information directly from these men about their experiences with family and institutions, I have created a space in which information emerges concerning best practices and gaps in support, and which contrasts with harmful social perceptions of perpetrators. These first-person accounts may be useful in enhancing intervention effectiveness, leading to a reduction in IPV.
The factors contributing to change vary, but, for these men, tended to focus on goals of constructing loving relationships with family members and changing their behaviour so that it is consistent with their identities as *men who do not want to abuse*. It is clear that, consistent with the ecological systems view, factors affecting the abuse, the decision to stop abusing, and the process of change occur at many levels. As is typical of social problems with many contributing factors, only some of them are able to be addressed via intervention, such as individual psychological and social aspects. Broader system features, such as the availability and format of intervention resources must be addressed differently. To this end, specific information was gathered as feedback for programs that may aid them in directing interventions so that they are as engaging and helpful as possible. Furthermore, accessing men who have abused as participants is step towards them being seen as viable participants in future research. This involvement is particularly important because their input is highly valuable to program formation and enhancement. Harmful cultural and ideological influences concerning gender roles, violence, and masculinity are only able to be addressed by informing the public and policymakers about the inconsistent and damaging nature of such influences. The work of dispelling detrimental ideologies will not be completed by a single thesis, but the narratives herein may contribute to an understanding of the processes of change that are possible within abusive relationships, and a conception of men who have perpetrated IPV that supports that change.

I initially intended to entitle this thesis “Avatars of Shame,” after having done extensive literature review, but not having collected any data. My understanding of these men and their experiences has changed significantly since then. While it may be expected of them that they maintain this mantle of shame, that is not what I observed. The
intervention programs that they attended takes a view of shame as an emotion that can be used to motivate change, and as evidence of preferred ways of living. The result is that they are supported through the changes that they make to their relationships. Instead of men shackled by shame, I saw men who unflinchingly took responsibility for their violence (despite the difficulty involved), and were dedicated to making changes in their lives and relationships by learning new skills to prevent future violence and to help them construct loving, caring, respectful relationships. Quinn explains his self-perception not in terms of shame, but in terms of hope: “I’m not proud of myself for [the abuse]. I’m proud that I ended up in here to do counselling, and I can see that there’s still some years ahead. Life is not over. At least the rest of our lives will be a lot better quality than it was. That was my saving grace, I think.”

The academic understanding of IPV has developed extensively since its initial identification as a problem during the 1960s. It has outgrown the single-storied view of perpetrators and encompasses a broader awareness of influences from the many systems that surround men who have abused their partners. Purely legal and criminal responses are acknowledged as insufficient to address IPV, as are interventions aimed solely at female partners and other family members. Addressing the problem of IPV requires encouraging change, which, in turn, necessitates both an acknowledgement that change is possible, and support for the individuals responsible for making that change. In this thesis, I was unable, unfortunately, to deliver as much personal context to each participant as I would have liked. However, the account of these men provided here discussed processes, motivations, desires, and behaviours that are consistent with men who have perpetrated IPV and who have chosen to take responsibility for their actions and create respectful,
caring relationships. By viewing men who have perpetrated IPV as capable of loving, respectful relationships, they are given space to recreate identities as non-violent men, without having to battle rhetoric suggesting that this is something that they can never achieve.
References


Appendix A

Codes

Open codes:

- Repairing/reconstructing
- Stigma
- Supports for change
- Hindrances to change/stressors
- Taking responsibility/language of responsibility
- Internal motivation
- External motivation

Axial codes:

- Belief systems
- Other injustices
- Feedback for program
- Making changes
- Accessing resources
- Identity
- Reciprocity

Codes resulting from narrative inquiry framework:

- Timing
- Interactions
- Location
Appendix B

Information Letter

What is this study about?
My name is Alexis Zederayko, and I am currently enrolled in the Master of Arts (Family Studies and Gerontology) program at MSVU. I am conducting research on factors affecting how and why men choose to become non-violent and access resources to help them make changes in their relationships. The goal of this research is to expand our current knowledge regarding partner violence and interventions for partner violence. I am interviewing men who have perpetrated intimate partner violence, and who have self-identified as non-violent for the past year. The interview questions will address participants’ experiences affecting their decision to stop abusive behaviour and their decision to choose relationships that were free of violence. Some examples of questions include: Which factors in your life do you think helped your change process? What new skills did you develop to help you make changes in your relationships? What effect did studying the effects of your violence have on stopping it and moving toward respect?

What will I be doing, as a participant?
You will be participating in an interview that is expected to last about an hour, but may last a bit longer. Whether or not you take part in this project is up to you and you may withdraw at any time. If you do choose to take part you should make sure you know the details about this project. If at any time during or after this interview you feel that you would like to talk about, or ask questions about, any part of this study, please feel free to contact myself, Alexis Zederayko, or my thesis supervisor, Dr. Deborah Norris, using the contact information provided below.

You can choose not to answer any questions that you do not wish to. You should also feel free to offer opinions and information on issues or subjects not raised by me that you think are related to my research. At any point, you can take a break and have the recorder turned off. At any point, you can withdraw from the study entirely, and it is up to you whether or not I will use the information that we have gathered so far. All information will be confidential and no identifying information will be reported. While quotes from individual interviews may be cited in the thesis and future publications to illustrate a point, there will be no way to identify the source of the quote, and all data from the surveys will be stored in password-protected files. With your permission, this interview will be audio taped and later it will be transcribed verbatim. There is no expectation that any distress will be experienced as a result of these interviews. It should be noted, however, that the personal nature of the questions may lead to unanticipated emotional recollections. You are reminded that you may stop the interview at any time if the process
creates any discomfort. If you experience significant emotional or psychological discomfort, I will provide the contact information for confidential, free-of-charge services within the community that will be able to support you.

All written material, such as the informed consent letters, transcripts, and notes, will be kept in a locked filing cabinet. Access to the original data will be limited to me and my supervisor, Dr. Deborah Norris. Following the completion of my study, I will destroy the audio tapes. When the research project has been finished, data will be kept for three years in the event that an audit of the research project is conducted or that the information is required for further analysis. Any information that would let others figure out who took part in this project will be removed from all records or reports.

Is there anything else?
If you would like a summary of the research findings, you can let me know, and I will be happy to send them to you. If you have any further questions about the study, please contact me, Alexis Zederayko at alexis.zederayko@msvu.ca or my thesis supervisor, Dr. Deborah Norris at deborah.norris@msvu.ca. If you have any questions or concerns regarding how this study is being conducted, you may contact the University Research Ethics Board (UREB) c/o MSVU Research and International office at (902) 457-6350 or via e-mail at research@msvu.ca.

Thank you very much for your consideration!

Alexis Zederayko
Graduate Student, MSVU
Appendix C

Consent Form

What is this study about?
My name is Alexis Zederayko, and I am currently enrolled in the Master of Arts (Family Studies and Gerontology) program at MSVU. I am conducting research on factors affecting how and why men choose to become non-violent and access resources to help them make changes in their relationships. The goal of this research is to expand our current knowledge regarding partner violence and interventions for partner violence. I am interviewing men who have perpetrated intimate partner violence, and who have self-identified as non-violent for the past year. The interview questions will address participants’ experiences affecting their decision to stop abusive behaviour and their decision to choose relationships that were free of violence.

What will I be doing, as a participant?
You will be participating in an interview that is expected to last about an hour, but may last a bit longer. Whether or not you take part in this project is up to you and you may withdraw at any time. If you do choose to take part you should make sure you know the details about this project. If at any time during or after this interview you feel that you would like to talk about, or ask questions about, any part of this study, please feel free to contact myself, Alexis Zederayko, or my thesis supervisor, Dr. Deborah Norris, using the contact information provided below.

You can choose not to answer any questions that you do not wish to, and you will be provided with the list of questions beforehand so that you may exclude any which may cause you discomfort. You should also feel free to offer opinions and information on issues or subjects not raised by me that you think are related to my research. At any point, you can take a break and have the recorder turned off. At any point, you can withdraw from the study entirely, and it is up to you whether or not I will use the information that we have gathered so far. All information will be confidential and no identifying information will be reported. While quotes from individual interviews may be cited in the thesis and future publications to illustrate a point, there will be no way to identify the source of the quote, and all data from the surveys will be stored in password-protected files. With your permission, this interview will be audio taped and later it will be transcribed verbatim. There is no expectation that any distress will be experienced as a result of these interviews. It should be noted, however, that the personal nature of the questions may lead to unanticipated emotional recollections. You are reminded that you may stop the interview at any time if the process creates any discomfort. If you experience significant emotional or psychological discomfort, I will provide the contact information for confidential services within the community that will be able to support you.
All written material, such as the informed consent letters, transcripts, and notes, will be kept in a locked filing cabinet. Access to the original data will be limited to me and my supervisor, Dr. Deborah Norris. Following the completion of my study, I will destroy the audio tapes. When the research project has been finished, data will be kept for three years in the event that an audit of the research project is conducted or that the information is required for further analysis. Any information that would let others figure out who took part in this project will be removed from all records or reports.

Is there anything else?
If you experience stress or require counselling services as a result of this study, please contact one of the services listed below. All of the resources listed are local to the HRM and are free-of-charge.

If you would like a summary of the research findings, you can let me know, and I will be happy to send them to you. If you have any further questions about the study, please contact me, Alexis Zederayko at alexis.zederayko@msvu.ca or my thesis supervisor, Dr. Deborah Norris at deborah.norris@msvu.ca. If you have any questions or concerns regarding how this study is being conducted, you may contact the University Research Ethics Board (UREB) c/o MSVU Research and International office at (902) 457-6350 or via e-mail at research@msvu.ca.

Thank you very much for your participation!

Consent

Title of Study: Experiences of heterosexual men who have perpetrated intimate partner violence and who have chosen to become non-violent

I have read the information provided within this consent form and understand the purpose of this research. I have been provided with the opportunity to discuss this research and my questions have been answered to my satisfaction.

I understand that this study in which I have agreed to participate will involve the audio-taping of confidential interviews involving my experiences with violence intervention programs, interpersonal relationships, and any other topics that I choose to discuss. I understand that my participation in this study is voluntary and that I may withdraw from the study at any time and for any reason without penalty. I understand that there is no obligation to answer any question or participate in any aspect of this project that I find invasive. I understand that all personal data will be kept strictly confidential and that
information will be stored securely so that only the researcher and her supervisor will have access to the date.

I choose to participate in this study with the understanding that some interview quotes may be used in future publications and/or conference presentations, although such quotes will be anonymized to protect my identity and prevent the attribution of those quotes to me.

Participant’s
Signature___________________________________________________________

Participant No. ____
Date____________________________________________________________________

Email___________________________________________________________________

I have fully explained the procedures and purpose of this study to the above participant.

Alexis Zederayko

Researcher’s Signature_______________________________________________

Date____________________
Appendix D

List of Counselling Resources

Mental Health Mobile Crisis Team
Phone: (902) 429-8167 or 1-888-429-8167 (toll free)
http://www.cdha.nshealth.ca/mental-health-program/programs-services/mental-health-mobile-crisis-team

Family Services Association
902-420-1980 or 1-888-886-5552 (toll free)
e-mail intake@fshalifax.com
http://www.fshalifax.com

Bayers Road Community Mental Health
Suite 109, Bayers Road Centre
7071 Bayers Road, Halifax
Tel: (902) 454-1400

Bedford/Sackville Community Mental Health
Cobequid Community Health Centre
40 Freer Lane, Lower Sackville
Tel: (902) 865-3663
Appendix E

Interview Guide

I don’t really want to focus on the history of abuse, but I was wondering if you could tell me if there were any specific incidents or turning points that preceded counselling? What led you to make the final decision to change?

Were there small, incremental decisions about change along the way? (Prompts: like the decision not to use violence, then a decision to stop yelling, the decision to stop asking her to account for her time?)

Which factors in your life do you think helped your change process?
Which factors held you back in your change process?
What can you tell me about your process of taking responsibility?
What were some of your internal motivators (concerning the way you felt, desires you had)?
What were some of your external motivators (family, friends, environment, programs, legal problems)?
What new skills did you develop to help you make changes in your relationships?
What were the reactions from your friends and family when you told them about your desire to change?
Did you experience any stigma when you told others about the abuse, and, if so, how did you handle it? (Prompts: did other people react badly or start treating you differently? Did they avoid you, or act cold?)

What do/did you want out of your relationship with your female partner?
What kept you from having the type of relationship you wanted with your partner?
How did you explain your behaviour to yourself (during the time you were abusive to your partner)? (Prompts: minimizing, denying, blaming Why do you think you felt the need to act this way/be this way)

Did other men participating in the group with you have the same reactions to their own abusive behaviour(s)? If they were different, how so? group facilitators responses to these reactions?

What feelings did you have as you perpetrated the abusive behaviour? Did these feelings also have a role in supporting the changes you made (to be non-abusive)?

Were there specific topics the counsellors talked to you about that were particularly helpful?

Were there conversations you had or realizations you had with your wife or children that were particularly meaningful?

What were your relationships with others in the intervention program?
What effect did talking about your past have in the change process?
If you were consuming drugs/alcohol and stopped, what effect did stopping alcohol/ drug consumption have on your behaviour?
What effect did having employment make?
What effect did it have to study your escalation, the ideas and feelings that were warning signs that preceded the abuse?
What effect did studying the effects of your violence have on stopping it and moving toward respect?
What would it say about you if you could tell me about the abuse and not feel bad about it?
What does it say about you that you do/did feel bad about it? How do you feel about it now?
What do you think is the relevance of addressing men's violence against other men and other instances of injustice? Do you think that it has a bearing on IPV, and if so, how?