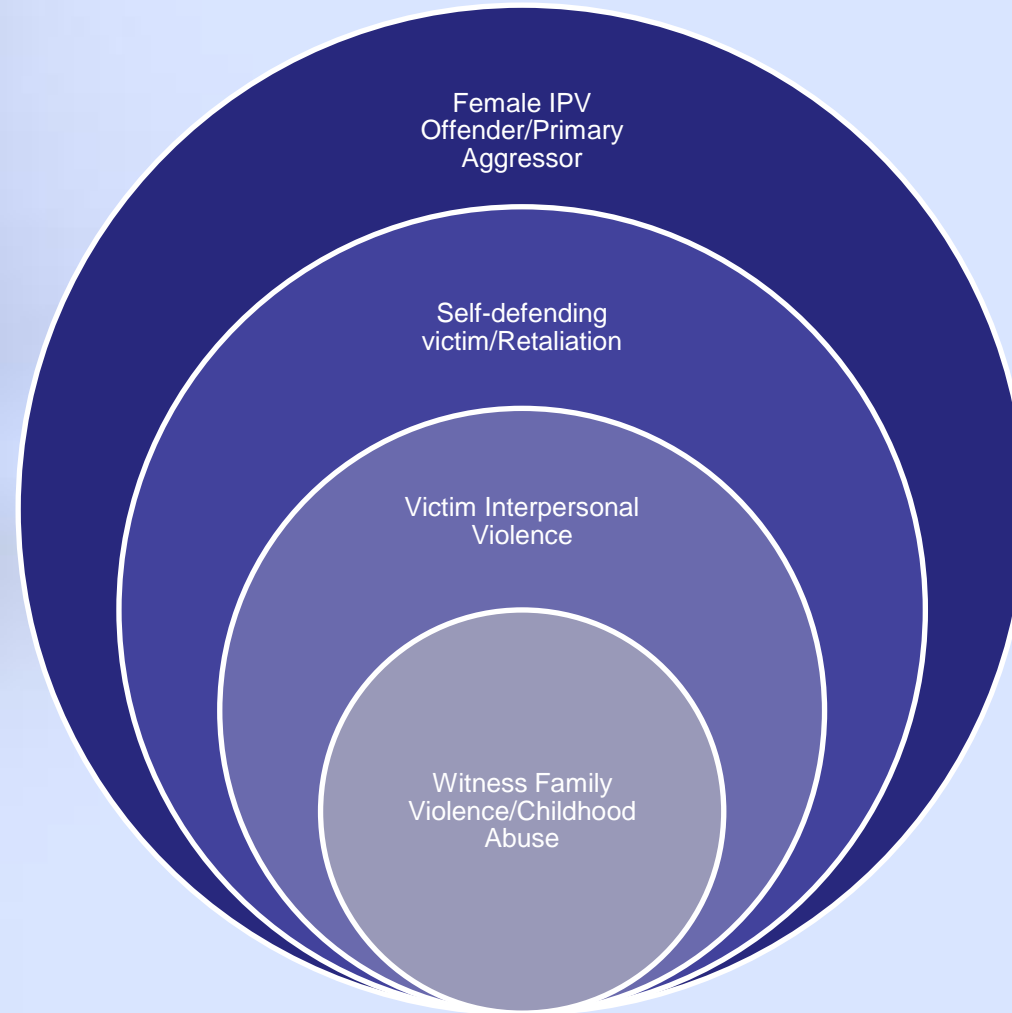
The background features a glowing blue globe on the left side, with a dark, 3D puzzle piece fitting into a slot on its surface. The rest of the background is a gradient of blue with horizontal light streaks.

Multi-dimensional problems of Female IPV Offenders/Self-defending Victims Heterogeneous group

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From Victim to Offender



Provide Woman-centered Programs

- Different paths to criminality
- Address issues contributing to violence
- History of Addiction focus
- History of Family Violence
- History of Trauma
 - Childhood, esp. sexual & other child abuse
 - Victim of DV



Attitudes about Work with Female Offenders

- Women may seem difficult, demanding, manipulating (myth)
- Explain “why” to any directive/request
- Work from mutuality and relationship building
- Empathic responses to prior history of victimization while holding accountable for tactics used to gain control of her life

Address Female Offenders Needs

- Gender-specific case management/programming
 - Safety in relationships
 - Building trust
 - Coping skills
 - Understanding trauma & DV
 - Self-esteem
 - Setting physical & emotional boundaries
 - Setting goals as a woman
 - Maintaining healthy relationships
 - Impact on their children

Motivation for IPV by Women

- Directly or Indirectly fighting back
- Self-defending
 - Parental abuse primarily father (newer research mother)
 - Prior IPV with former or present partner
- Revenge & retaliation
 - Prior IPV with former or present partner
- Perpetration = power & control or coercive control
 - Witnessed parental violence
 - Witnessed mother being violent with father/partner

Assessment of Female DV Offenders

- Tools to determine needs of each individual entering program
 - History of childhood abuse
 - History of addictions
 - Attitudes modeled in Family of Origin about violence
 - Appropriateness for individual counseling to address adult manifestations of childhood abuse


Physical/mental Health Issues

- Injury recovery from abuse
 - Women suffer greater physical, financial, emotional, sexual injury
- Addiction/substance abuse
- Mental illness
- Dual Diagnosis
- Trauma treatment
- Relapse prevention & aftercare counseling



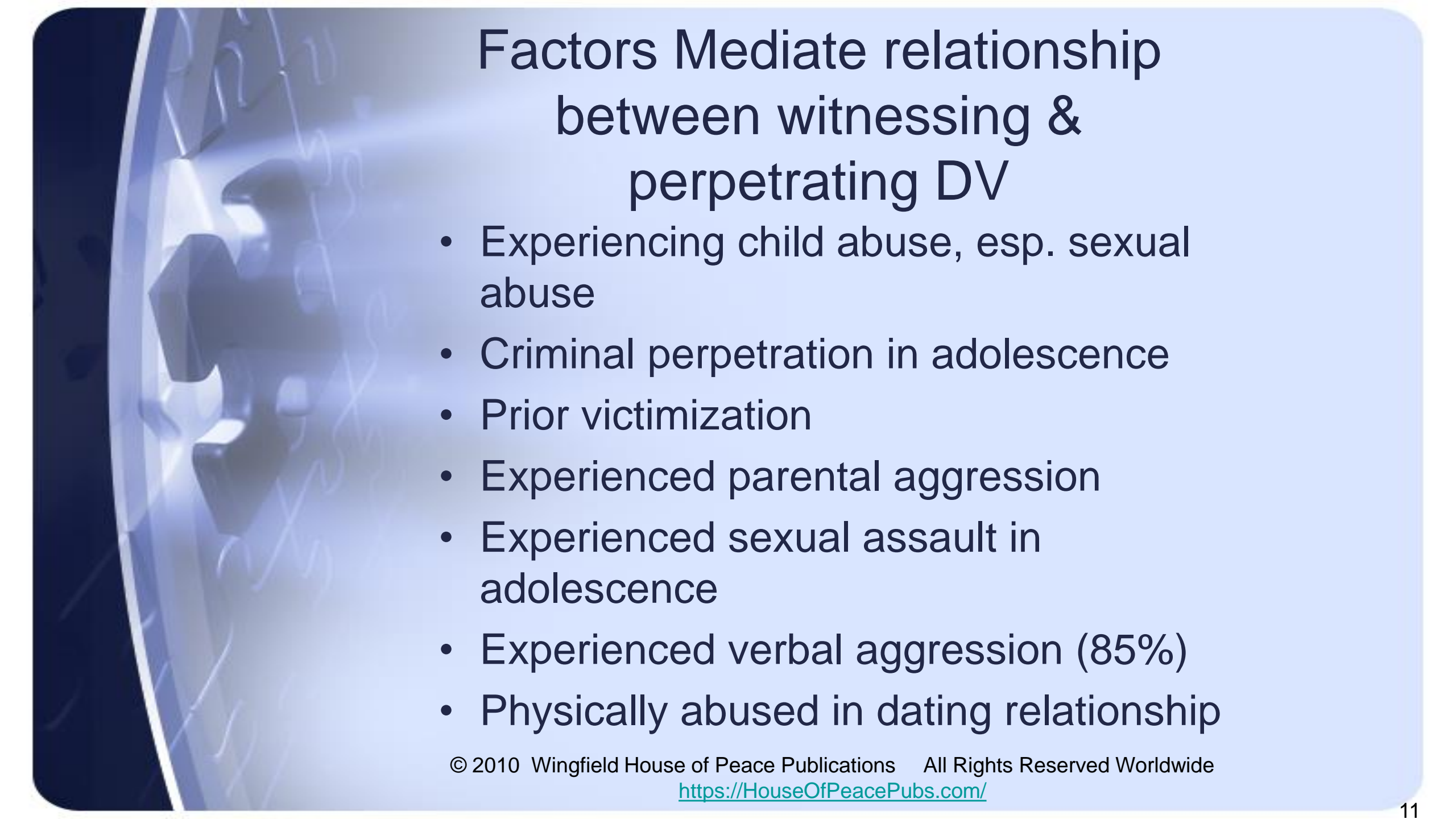
DV as Learned Behavior

- Attitudes about violence learned in Family of Origin
 - Violence is acceptable
 - Tactics used to control partner
 - Emotional & physical
 - Incorporates tactics into her behavior
- Children learn
 - Conflict resolved through violence
 - Family interactions involve violence
 - Violence is acceptable means of stress management and conflict resolution




Factors contribute to learning & replication of violence

- Abused children or silent witnesses lose faith in fairness of world
- See violence as means to avoid further victimization
- See effectiveness of abusive behaviors get abuser what he/she wants
 - Utility & rewards outweigh consequences
- Witnessing DV profound emotional impacts
 - Puts individual at greater risk of being abusive



Factors Mediate relationship between witnessing & perpetrating DV

- Experiencing child abuse, esp. sexual abuse
- Criminal perpetration in adolescence
- Prior victimization
- Experienced parental aggression
- Experienced sexual assault in adolescence
- Experienced verbal aggression (85%)
- Physically abused in dating relationship



Factors Mediate relationship between witnessing & perpetrating DV

- Outcomes of mediating factors
 - Less trusting of others
 - More alienated from others
 - Feel more threatened by intimidating behaviors by their partners
 - Heightens perceived need for self-defensive behaviors

Single-parent Issues

- Financial supports—TANF, A&D, Private Social Service Programs
- Job Training
 - Enter or return to work
 - Life skills
 - Computer skills
 - Internships
 - Community service to develop job skills
 - Job development
 - Community outreach

Single-parent Issues (con.)

- Parenting education
- Bonding & attachment with children
- Reunification if children placed outside home/supervised visits
- Divorce-custody/parenting time issues

Female Offender Intake Questions

- Nature of relationship between woman and her partner
 - Dating
 - Cohabiting
 - Married
 - Separated
 - Divorced
- Duration of relationship
- Involved physical assault against the victim



Current relationship with the victim

- Continuing
- Want to continue relationship (yes, no, uncertain)
 - Understand underlying motivation
- Children in the home
- Children of this relationship
- Children from prior relationships
- Offense specific information
- Singly or dually arrested

Current Offense History

- Use of weapon
- Injury to male victim
- Using substances at time of offense
- Woman injured by spouse/partner at time of incident
- Violence increasing in frequency and/or more severe in recent months
- Did incident relate to ending relationship?



Prior relationship aggression

- Reports of perpetrating and experiencing intimate partner aggression
- Prior abuse in intimate relations with their spouse/partner from referral incident

Social Desirability

- Crowne & Marlowe 14-item scale (1967) to assess socially desirable responding



Prior police involvement

- Prior IPV incidents with law enforcement contact where listed as victim
- Listed as suspect in any prior reports with spouse/partner as identified victim
- Reports where primary aggressor could not be identified
- Reports with both parties as mutual aggressors
- Non-violence related arrests
 - Substance abuse
 - Theft, burglary, drug possession, etc.



Delinquent/legal history

- Prior arrest for non-family violence
- Prior arrest for non-violent offense
 - Theft
 - Burglary
 - Possession of controlled substance
- Probable cause arrests
- Childhood conduct problems related to conduct disorder

Family History

- Assess women's exposure to family violence
- Childhood physical abuse
- Childhood exposure to interparental violence
- Maternal to paternal aggression
- Delinquent/legal history
- Prior arrest for non-family violence

Mental Health functioning

- Child Abuse Potential Inventory (must have children at time of evaluation to use; requires trained administrator)
 - Unhappiness scale
 - Distress scale
- Substance Abuse
 - History
 - Current use
 - Screening and referral



Continued Contact with Partner/Spouse

- Complete Locke-Wallace marital Adjustment Test (LWMAT, 1987)
- Assesses current marital or relationship satisfaction
- Scores below 100 indicate clinically significant relationship distress

Assessment Instruments

- Checklist of Controlling Behaviors (Lehman, 2012)
- Parental Rejection and Attachment Style
- Trauma Symptom Inventory
- Abuse Questionnaire
- MCMI – III
- Substance Abuse Screening as part of all intakes

Checklist of Controlling Behaviors (Lehman, 1998, 2012)

- Understand clients possible histories of abuse by their current partners
- Three abuse scales: physical, sexual, and emotional
- Part of larger instrument that examines 10 dimensions of power and control
- Scores are determined by adding the five point Likert responses
- Higher scores indicate greater abuse
- Lower scores indicate low or no abuse
- Ask about current relationship, then ask about previous relationships



Parental Rejection and Attachment Style

- Provides greater detail of possible abuse history from each parent
- Rate each parent separately
- Ask about other significant adults in their lives while growing up
 - Stepparents
 - Live in or long-term significant others of her parents
 - Grandparents
 - Child care providers

Trauma Symptom Inventory

TSI by Briere

- 100 item assessment instrument to evaluate relative forms of acute and chronic posttraumatic stress/distress
- Other similar instruments
 - **Posttraumatic Stress Diagnostic Scale (PDS®)** Edna B. Foa, PhD
 - Brief assessment that helps identify the presence and symptom severity of posttraumatic stress disorder (PTSD).

Abuse Questionnaire

- Developed by the National Center on Child Abuse and Neglect
- Creates an opportunity for clients to identify specific types of abuse they experienced
- Provides an opening for the treatment provider to explore childhood trauma
- Allows clients time to build trust to reveal childhood trauma during group sessions

MCFI -- III

- Provides a deeper understanding of clients possible diagnostic concerns
- Focus on depression, anxiety, and trauma subscales
- Most commonly used measure of clinical and personality functioning with IPV offenders
- Base Rate (BR) ≥ 75 score generally considered cut off for clinical disorder
- Base Rate (BR) ≥ 85 score generally considered cut off for clinically significant related diagnosis

Assessment Interpretations

- Female IPV offenders report an absence of trauma sequelae
- Level of childhood abuse from mother to traumatic sequelae while childhood abuse from father does not exist
- “Women experience high levels of abuse from their partners” (Simmons, Lehmann, & Craun, 2008; Simmons, Lehmann, & Pillai, 2012)
- “Taking control of one’s life and/or taking responsibility for one’s actions is a resilience factor for trauma recovery” (Simmons, Lehmann, & Craun, 2008; Simmons, Lehmann, & Pillai, 2012)
- Substance Abuse as part of incident
- Other criminal activity as part of incident

Treatment Approaches

- Self-defending as non-offending female
- Women exposed to violence more likely to retaliate when violence used against them
 - Hyper-vigilance
 - Awareness of consequences of abuse
 - Determination not to be a victim again



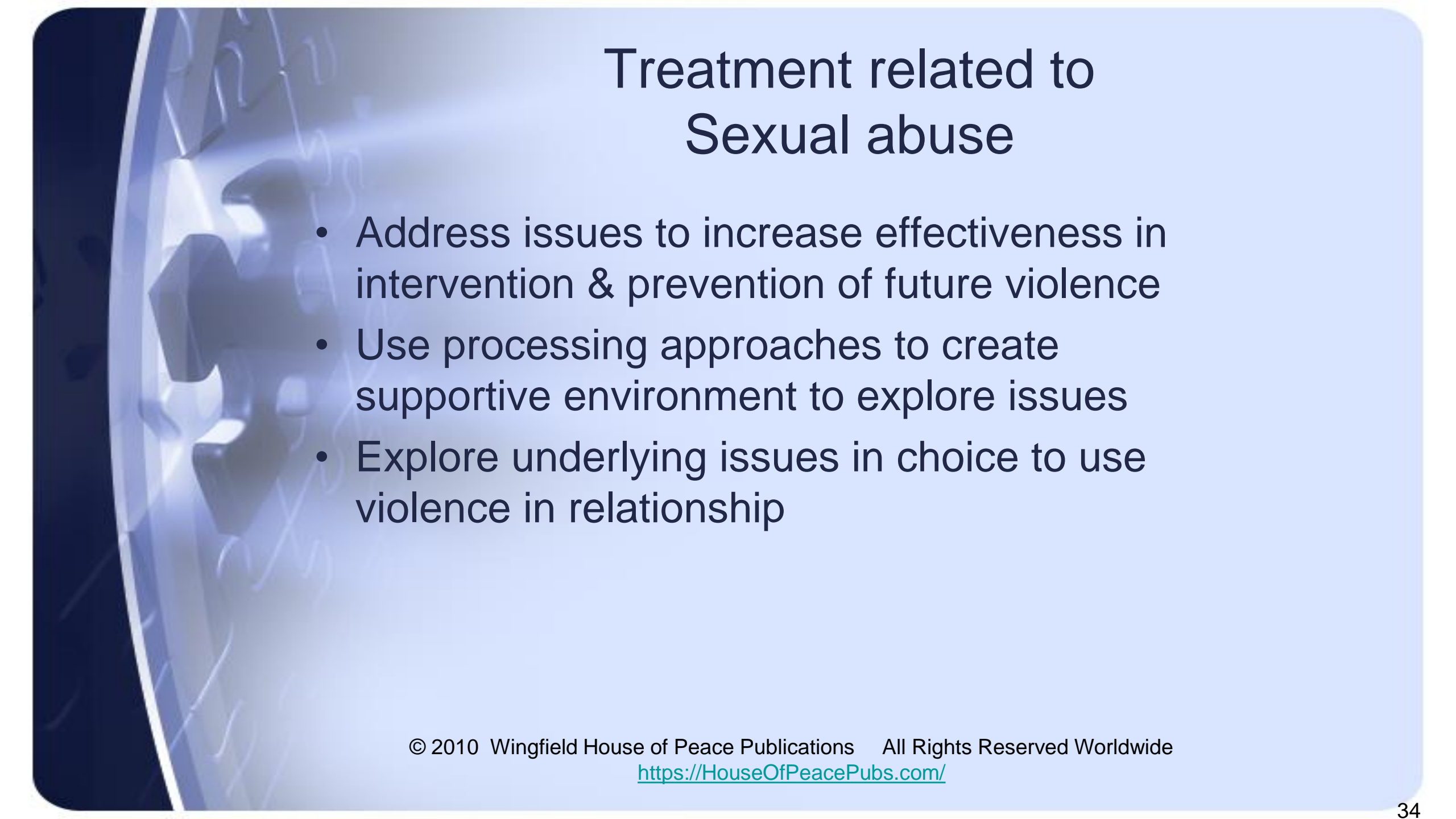
Effects of Witnessing Violence as Child

- Increased levels of feelings of shame & guilt
 - Causes person to feel inferior, defective & helpless
 - Linked w/ hostility, anger arousal, tendency to blame others, irritability
- Feeling responsible for abuse & unable to stop it
- Once learned to use abusive behaviors
 - Choice whether to use or not in intimate relationships



Prior Sexual Abuse Victimization Impacts on Treatment

- Fear of intimacy
- Low self-esteem
- Sexual promiscuity
- Depression
- Suicidal ideation
- Eating disorders



Treatment related to Sexual abuse


- Address issues to increase effectiveness in intervention & prevention of future violence
- Use processing approaches to create supportive environment to explore issues
- Explore underlying issues in choice to use violence in relationship

Types of Anger

- Expressive
 - Way a person may express anger, frustration, loss of control
- Instrumental
 - Way to achieve some end of control, injury, or terror
 - Violence escalates beyond mere “conflict tactic” to more ominous and possible lethal level

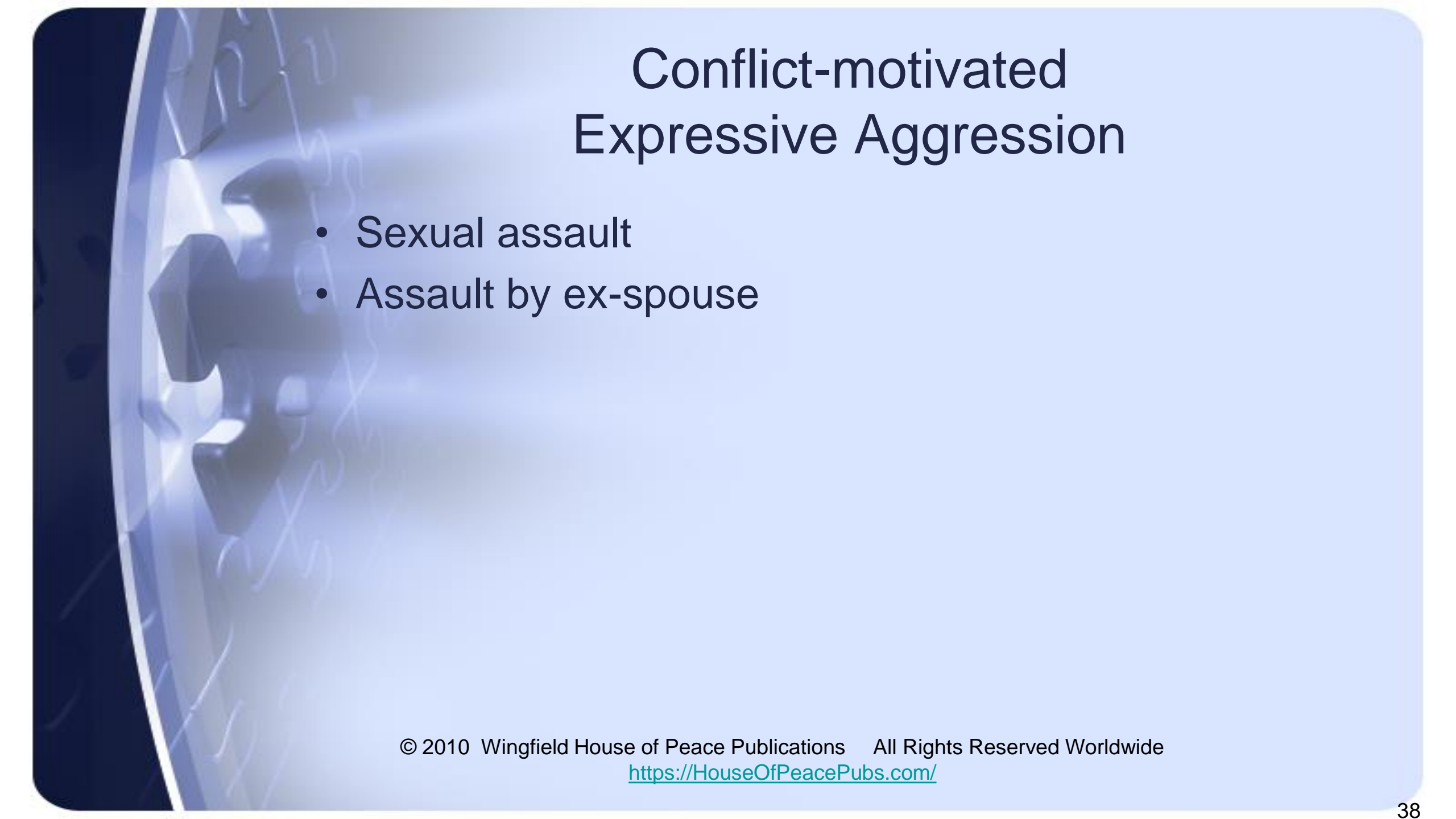
Types of Anger

- Differences between Expressive & Instrumental violence
 - Frequency
 - Severity
 - Initiation
- Part of systematic pattern of control & fear, or isolated expression of frustration or anger



Control-motivated instrumental abuse

- Stalking = effort to restore control or dominance after partner has left
- Intentionally inflicted physically or psychologically painful or hurtful acts (threats) by male partners as means of compelling or constraining the conduct, dress, or demeanor of their female partners.



Conflict-motivated Expressive Aggression

- Sexual assault
- Assault by ex-spouse

Women exert power & control

- Attempt to withhold sexually
- Refusing to accept his sexual advances
- Financially



Violence Against Women

Violence against women is so pervasive that the United Nations has addressed and defined violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life.” (United Nations General Assembly, 1993).