

## Part II

### **Interventions with men who are violent to women and children**

Work with men who are abusive has a twenty-year history within New Zealand/Aotearoa. The ultimate goal has been to ensure greater safety for those who have been victimised and making those who are abusive accountable for their actions. Constant refinements to safety and accountability based practice have occurred and the chapters in Part II present a number of challenges to how we can more effectively reduce the extent and prevalence of re-victimisation. Part II covers ideas about what we might do differently in terms of our interventions with men who are violent and abusive. The chapters here challenge us to consider the structure and focus of our group programmes, cultural approaches to intervention, working with violent fathers and the possibility of couple intervention rather than group intervention approaches.

## CHAPTER 5

# GROUPWORK WITH MEN WHO ABUSE

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Anyone who has done groupwork with men who exhibit abusive patterns of behaviour knows that this is one of the most challenging and difficult areas of work in the human services. There are myriad issues and concerns that confront workers as they invite men to appreciate the impact of their abusive behaviour on others, and to institute non-abusive patterns of behaviour. The groupworker has to balance issues that include:

- Engaging and motivating men to take the attendance at groups seriously
- Inviting men to take on a mission of responsibility for behaviour and be accountable for the impact of abuse on others
- Ensuring that interventions do not exacerbate the problem and cause increased levels of risk in the men attending programmes
- Making sure interventions are respectful and do not mirror the abusive patterns of the men.

Intervening with men who abuse women and children has become more complex since the early anger management days (see McMaster & Swain 1989). This complexity is not a bad thing in that it challenges us to ensure our interventions are reducing the likelihood of further harm to others. We therefore carry a responsibility to be informed about what is considered best practice and continually reflect on changes we need to make in our daily work.

This chapter explores ideas around the multiple pathways of men who use abusive practices. It deals with the vexing question of matching interventions with offender types and argues that we need to reconsider the question, *'Does one size fit all?'* The chapter asks what our programme content should be and gives an example that brings together 'best practice' ideas. Lastly, I reflect on current and future challenges for programmes if they are serious about reducing repeat violence.

## Multiple pathways

Programmes have generally developed on a one-size-fits-all model, based on psycho-educational approaches. Researchers have explored the question of ‘Are men who are violent the same?’ and increasingly attention has been given to the differing pathways into violence (see Gondolf 2002). While the final result — abusive practices directed towards another person — may appear the same, understanding the different pathways will help workers better match men who present. Effective matching is a key outcome of effective work.

There has long been a distinction in the field between *instrumental* and *expressive* violence. Instrumental violence refers to violence carried out in the execution of meeting some alternative need, as opposed to expressive violence which has its basis in the regulation of emotion. It is my view that the definitions have been too narrowly defined. It can be argued that the majority of violence is instrumental in that its aim is generally to stop a certain behaviour. For example, in a family context abusive practices are often used to control a person’s action or stop some form of behaviour. While the person may be reactive (expressively) to a heightened state of arousal, the outcome sought is to regain control (instrumental).

Holtzworth-Munroe & Stuart (1994), in reviewing the literature, proposed a model for predicting violence severity and whether men will be violent inside or outside the home or both. They argued that three main types of men present to programmes:

1. Men who are only abusive in a family setting and do not exhibit significant pathology (e.g. depression, anti-social attitudes, etc)
2. Passive aggressive-dependent men who are very clingy and extremely controlling in close relationships (dysphoric/borderline)
3. Men who exhibit several anti-social characteristics and are engaged in anti-social behaviours such as criminal lifestyles (anti-social).

What is clear from meta-analysis is that non-pathological family-only abusive men had the lowest level of violent behaviour, along with less frequency. Violence tends to be restricted to intimate relationships and overall these men are likely to have had few police contacts. This is not surprising and is backed up by Morris’ research (1996) that indicated that women who were victimised did not tend to access help from formal systems (courts and/or police) until they had exhausted their social support systems.

Men with anti-social characteristics were more likely to be violent and abusive both inside and outside the home, had most police contacts and

were likely to have alcohol-related problems. ‘More generally violent’ refers to violence in public (street, hotels, etc) whereas ‘private violence’ occurs in the home or with family members.

Passive aggressive-dependent men had a high frequency of violent acts and also were extremely abusive. They had moderate alcohol problems but generally few police charges. This may reflect that public violence is more visible than violence in the home. While not tested in research, it is my contention that men who constantly breach protection orders, harass partners post-separation, and are at risk of murder/suicide, are more likely to fit into this group.

What is interesting about the table above are the clear differences that emerge from these groupings in terms of what I call the ‘drivers for abusive

Subtypes of men who are violent

VARIABLE	VIOLENT SUBTYPE		
	Family only	Dysphoric/ borderline	Generally violent or anti-social
<b>Genetic influences</b>	Low	Moderate	High
<b>Childhood family experiences</b>			
Parental violence	Low-moderate	Moderate	Moderate-high
Child abuse/rejection	Low-moderate	Moderate-high	High
<b>Association with deviant peers</b>	Low	Low-moderate	High
<b>Attachment</b>			
Secure or preoccupied		Preoccupied	Dismissing
Dependency	Moderate	High	Low
Empathy	Moderate	Low-moderate	Low
<b>Impulsivity</b>	Low-moderate	Moderate	High
<b>Social skills</b>			
Marital	Low-moderate	Low	Low
Non-marital	Moderate-high	Moderate	Low
<b>Attitudes</b>			
Hostile attitudes toward others	No	Moderate-high	High
Attitudes supporting violence	Low	Moderate	High

Adapted from: Holtzworth-Munroe, A & Stuart, GL, (1994) ‘Typologies of Male Batterers; Three Subtypes and the Differences Among Them’ in Psychological Bulletin, Vol 116, No 3:476-497.

behaviour.' From an intervention perspective this material is significant and can help us better match programmes or parts of programmes with particular men who attend.

There is little doubt that childhood family experiences set the template for our adult behaviour. Early childhood family experiences (e.g. witnessing parental violence, experiencing child abuse in methods of child discipline) have a significant impact on behaviour in adult life. Social learning theory maintains that behaviours such as violence and abuse are reinforced vicariously because they provide short-term effectiveness in managing situations of conflict and recalibrates the maintenance of power and control within intimate relationships. This vicarious reinforcement also occurs in the wider social context such as school, media, neighbourhood, and may predispose men, rather than females, to use violence.

A second factor comprises peer experiences and the level of involvement with delinquent and deviant peers. Bowker (1983) found that men who engaged in frequent and severe marital violence were less likely to make efforts to end their marital violence and spent more time with male peers (e.g. daily contact). Bowker suggested that these men may be immersed in a subculture of violence with peers who encouraged their use of violence.

Other factors have been identified. Attachment to other individuals (including dependency on others and empathy for others) is generally viewed as resulting from childhood experiences with caregivers. Secure or insecure cognitive representations of relationships or working models of attachment that one takes into later life are based on these experiences (see Dutton 1995). It is interesting that men who are ambivalently attached to and preoccupied with their wives (e.g. experiencing pathological levels of dependency, jealousy and fear of rejection) are at risk of engaging in marital violence when threatened with the loss of their relationship. These men are consistently found to be more volatile, experience higher levels of anger and may over-react in interpersonal disputes.

Men who are generally violent and have anti-social personalities feel little remorse are most likely to externalise blame for abusive behaviour. This is in contrast to family-only violent men who feel remorse and are more likely to engage in help-seeking behaviour. Anti-social subtypes score higher on scales of substance abuse, criminal behaviour, alcohol abuse and contact with police.

So what does this mean for practice? Clearly, programmes that are based on empathy building are not likely to be as effective for men with anti-social characteristics, whereas programmes that operate from strong

cognitive-behavioural approaches are. These men also need to grapple more with their relationship to their peer group who are likely to condone abusive practices as a solution to problem behaviour.

Men who are dysphoric/borderline need careful monitoring and support post-separation and may require more individual time outside programme hours to manage increased risk. They also require extensive work on managing heightened arousal and safety strategies, and need a strong support team to monitor risk behaviour.

### **Taking the practice to the next level**

If we accept that men have different pathways into violence, what does this mean for those of us involved in delivering programmes? The short answer is, a great deal. It is not so much an issue of programme content, but of how it is delivered. The curriculum for an effective programme might look like this:

Pre-programme assessment

- Motivational interviewing to deal with responsivity barriers
- Motivation for programme participation
- Assess levels of risk
- Assess pathways into abusive practices
- Build an accountability group for change

Understanding patterns of abusive practices

- Offence mapping of abusive patterns of behaviour
- Identify patterns of thought, mood state and behaviour that recur in abusive situations
- Examine the beliefs, attitudes and ideals (schema) that support abusive behaviour
- Recognise high risk mood states and high risk situations
- Recognise decision-making processes

Victim impact and awareness

- Understand the effects of their violence on their partners and/or children

Skills acquisition

- Manage mood and self-medicating
- Manage relationship distress in non-abusive ways
- Take interventive action, e.g. time out; explore alternative and effective ways of communicating and resolving conflict

- Recognise their ability to make choices about how to behave

#### Safety management

- Find ways to make other people and themselves safe
- Recognise warning signs and high risk situations
- Make a clear plan for safety.

In addition to the above, Māori-based providers who work on tikanga principles address clients' issues of violent and abusive behaviour towards women, children and themselves through providing:

- A safe environment in which men can address their issues based on kaupapa Māori, including tikanga, te reo, and taha wairua
- Appropriate support to wāhine and tamariki of men on the programmes
- Ongoing health and educational skills to whānau and liaison with other Māori agencies working in these areas — this is based on holistic notions of health
- Programmes for rangatahi to address issues of sexual and physical abuse and provide support to the whānau of clients.

One point needs to be made about programme design in relation to programme intensity. Most current community-based interventions have a weekly 2½ to 3-hour session, and operate over a period of between 40 to 50 hours duration. Clearly, the longer the duration, the greater the likelihood of men dropping out (Gondolf 2002). An ongoing challenge in programming is to build momentum of change. One strategy to overcome this is to increase the number of sessions on a weekly basis. This has worked particularly for high-risk violent offenders in the New Zealand Corrections system, which has four 2½-hour sessions per week over ten weeks (100 hours of group time). This allows for a momentum to be established in the group.

In this section I address three areas of programme content that greatly improve our chances of turning men around. In considering the question of 'what works?', we have to ask what the implications of multiple pathways are for our work with men who engage in abusive practices. In this part of the chapter I explore key areas we need to take into account to ensure effective intervention.

#### **Pre-programme — engagement with reluctance**

The pattern of men attending programmes has changed to match the growing concern about the issue of men who use abusive practices in their

relationships. In the early days, men were by and large self-referred. With changes in the past ten years in policing practice, and with legislation mandating men to programmes under the Domestic Violence Act (1995), this pattern has shifted. In any stopping violence group it is likely that around 75% of men will be mandated. Motivating men and engaging them to see they have a problem with abuse is therefore a major issue facing most programme providers. How then do we adapt our work to ensure that when men do present they are ready to work?

My own work in this area has been influenced by two writers in the motivational interviewing area, Prochaska and DiClemente (1982). Their model, outlined below, underpins much current work in the addiction and criminal justice areas of intervention. The usefulness of the model is for facilitators to be able to match interventions with where the man sits within the change process (see pages 120–121).

What is often challenging and difficult is when you have pre-change, crisis or contemplative men in your group. They can present as ambivalent towards change, which will be seen in their level of participation and seriousness of purpose.

Useful strategies, in addition to an individual interview, are:

- Pre-group group — a pre-programme session that specifically looks at the idea of readiness and further assesses where men are in the change process
- Pre-information about the programme — ensuring that men have adequate information and are warmed up to what is expected in the group sessions

### **Retaining men in programmes**

It may be stating the obvious, but proper engagement and retention will have a marked impact on outcome. From a clinical perspective this is important because the data indicates that those who engage and complete are more likely to be less violent on follow-up than those who do not engage or leave programmes early. Hamberger and Hastings (1989) predicted drop-out correctly in 71% of cases in their study and found the signifiers of dropout were men who had other criminal activity, were younger, had alcohol and drug problems and were less educated. Preliminary findings from the Department of Corrections indicate that those who are mismatched and those who drop out of programmes re-offend at much higher rates than completer/finishers (per communication Leon Bakker 2002).



## Understanding patterning of abuse

How do we engage men to really appreciate the impact of their behaviour on others? Men's programmes based on a Duluth model use the Power and Control Wheel (Pence & Paymar 1993) which segments abuse into areas. Abusive behaviours are much more dynamic and cross over many of the segments in the same incident. A model that allows men to more fully appreciate the extent and complexity of abusive practices is *offence mapping*.

The Offence Map is the client's and the worker's basic resource to identify the habitual and repetitive nature of most abusive behaviour. Current research identifies the possibility that offenders use multiple pathways in their offending and the map metaphor allows us to identify the diversity of offence pathways that may exist. The advantages of offence mapping include:

- Individualising the intervention for each offender
- Making visible the relationship of criminogenic needs to offending
- Providing the opportunity to identify offence decision-making and alternative choice points or pathways (red flags)
- Increasing responsivity and motivation to dealing with criminogenic needs
- Providing workers with clear intervention points
- Reinforcing the basic cognitive behavioural theory by linking offence thinking and mood to behaviour. This provides the basis for more precise work on exploring the contribution that thinking and mood have on triggering abusive behaviour.

The key to successful mapping is respectful inquiry with the client. The purpose is not to bully participants into a particular viewpoint but to help them make sense of the complex relationship of factors that contribute to their abusive behaviour. A layering approach allows the worker to help the client identify the unique issues and factors contributing to their individual offending rather than fitting the client into a structured and pre-determined model. The theory behind offence mapping is the cognitive-behavioural approach. It is essential that clients become clear about how they have made their particular decisions and choices so that they have clear ideas of how they might take charge of their lives rather than have patterns of offending behaviour take charge of them. In making the Offence Map it is suggested that workers first get the behavioural sequence clarified and recorded together with the thinking and cognitions onto the mapping

STAGE	WORKER TASKS
<p><b>Pre-change (Pre-contemplation)</b></p> <p>Pre-change is a stage where there is little interest in or energy for change. The man either does not see that he has a problem or tends to see the problem as being with others. He may come to a programme to comply with a sentence order or to please his partner.</p>	<p>At this stage the worker's task is to get the man to shift from an often-entrenched position to one of greater openness to even thinking that he might have a problem.</p>
<p><b>Crisis</b></p> <p>This was not a stage in the original model developed by Prochaska &amp; DiClemente. Whenever we are faced with the possibility of change, we become uncomfortable and present in a state of crisis that is shown by emotional upset, anxiety and fear.</p>	<p>Ensure that the person is safe and is reassured that he will be well cared for. Men who are dysphoric/dependent can pose significant risk during crisis and additional safety measures are often justified. This can involve daily reporting on mood state and retaliatory thinking.</p>
<p><b>Options (contemplation)</b></p> <p>At this stage the man acknowledges he has a problem and is willing to think about possible options. These options can include doing nothing, deciding to attend a programme, or challenging protection orders in court.</p>	<p>Explore what would be the best fit with the person to assist him to deal with the problem of abusive behaviours.</p>
<p><b>Decision</b></p> <p>This was found to be an important stage. After learning the range of choices, the man has to decide whether he is going to actively work to change his situation or not. He can revert at this stage to the pre-change position.</p>	<p>Encourage and help the man to make the decision to move into the action stage. If the time delay is too great, the danger is that he will move back into the pre-change position.</p>

<b>STAGE</b>	<b>WORKER TASKS</b>
<b>Action</b>	
<p>This is commonly referred to as the working stage. The man starts to explore in some depth the range of problem behaviours he has and explores ways to avoid these behaviours. For example, work on avoiding past patterns of behaviour is common at this stage.</p>	<p>The worker is involved at this stage in working with the man in either an individual or group programme. Stopping Violence programmes fit this stage of the change process. Part of the Action Phase is to start to identify who will support change in the maintenance phase of change.</p>
<b>Maintenance</b>	
<p>Maintenance is the key to long-term change. Family and friendship support become increasingly important to support the work undertaken in the Action phase.</p>	<p>The work in this stage is passed over to the supporters as they take on the responsibility for the long-term maintenance of change.</p>
<b>Lapse</b>	
<p>Lapse is in essence a range of behaviours that leads to a pattern of previous behaviour. It can include patterns of behaviours that are destructive to the relationship, such as ignoring problems, distancing, and avoidance strategies. Lapses tend to occur when a person's lifestyle is unbalanced — there are too many negative factors and not enough positive ones.</p>	<p>Lapsing behaviour is very normal, as men have to manage their peer relationships and the temptations to revert to previous patterns of behaviour. The challenge is to see lapse as an early warning sign that things aren't well and the need to gather the necessary supports around them.</p>
<b>Relapse</b>	
<p>Relapse refers to a return to previous patterns of abusive behaviour.</p>	<p>After relapse the challenge for the worker is to explore what went wrong in not maintaining a position of change. At this stage men can often re-present at programmes.</p>

framework. Mapping can then be directed to identifying mood states, belief systems, high risk situations, PIG (problem of immediate gratification), lifestyle issues, offence planning and alternative pathways.

From the offence map, alternative choice points become obvious to the man and the group. Intervention can then be more directed towards strengthening strategies that have worked well in the past or problem solving to identify potential new pathways. Having worked with offence mapping in several programmes I am convinced it is well worth the effort.

### **Developing more dynamic groupwork approaches that consistently motivate towards change**

There is no universal style or method of working in a group. Different groups demand different facilitator styles and each group will require a variety of responses and behaviours from the facilitator as it moves through its phases of development towards greater capability and maturity. However, in a strengths/solution-based approach the facilitator takes on a role as guide rather than expert. The facilitator's expertise is related to understanding group process and assisting group members to identify the exceptions to their presenting problems and building on these. The first step in working with a group is to accept that you have been given the authority to influence and intervene in the group experience. If you are reluctant to provide active facilitation it can be very detrimental to the group at critical stages of transition when the group look to you for guidance, reassurance and structure.

Facilitation is the design and management of structures and processes that help a group do its work and minimise the common problems people have working together. Facilitation is a process that focuses on :

- What needs to be accomplished
- Who needs to be involved
- Design, flow and sequence of tasks
- Patterns of interaction
- Levels of participation and use of resources
- Group energy and capability
- The physical and psychological environment

A major challenge of groupwork is to maintain energy and focus while undertaking the task at hand. Many groups are easily sidetracked, particularly when group members have little experience of maintaining

their own focus and view the group programme as not relevant to their situation. A common trap that new facilitators can fall into is to focus on individuals in the group rather than relying on the group itself to provide the energy and information required. This ultimately leads to group facilitators undertaking individual work with an audience. The downside of this approach to working in groups is that, while the person who is the focus of attention may well be engaged in the work, other group members are not. They can become bored, distracted and disruptive in the group. We can minimise this by working with four levels of group interaction:

1. Interaction with an individual
2. Interaction in a subgroup
3. Interaction with the whole group
4. Interaction with a person outside the group

The rationale behind using the four levels of interaction in groups can be seen by simple arithmetic. If, for example, you have a group of ten and you work individually with them, the time you have to spend with each is six minutes per hour. For 54 minutes of that hour other group members are not actively engaged in work for themselves. In a 2½-hour session this effectively means that each individual has potentially 15 minutes of time. Many of us would not think this was worth the investment of time and energy. Group members will agree.

If we are working in pairs for one hour, each individual has 30 minutes interaction, a vast improvement. I am not suggesting that this is an either/or situation, but merely illustrating that robust and creative group interaction enhances energy and focus in the group. A clear indication when groups are not working well is that its members do not feel involved or engaged.

Using the four levels of interaction is only part of the structuring required to run a group. From a solution-based perspective we can identify three distinct phases of the change process. These apply equally to individual work as they do to groupwork. If as a worker you take care to work with these phases you are more able to match your work with where people are at in their change process.

	<b>Individual</b>	<b>Pairs</b>	<b>Sub-groups (4)</b>
<b>Time working</b>	6 minutes	30 minutes	15 minutes
<b>Time listening</b>	54 minutes	30 minutes	45 minutes

When I am framing a piece of work, whether an interview with a person or a piece of group teaching, I consider three phases of change:

- Talking about the talking
- Doing the talking
- Reflecting on the talking

*Talking about the talking* is about motivation and buy-in to the work. Before undertaking a piece of work it is critical that men have warmed up to, and engaged at some level into, the purpose. Talking about the talking creates the space for the conversation in the first place. If we have not cleared a pathway or engaged the person in the conversation, we cannot progress to any depth when it comes to actually exploring the issue at hand. In terms of motivational approaches, this stage is the most significant in terms of change. Get this aspect right and meaningful conversation will often develop.

*Doing the talking* refers to the stage when we know we are in meaningful conversation with another person. This is the most active part of the process — it allows us to unpack or deconstruct what is going on. The group can develop solutions from their experience and contribute these to each other. In essence what we are doing at this stage is doing the work or the teaching around a particular piece of practice.

*Reflecting on the talking* is the third stage, where we translate the talking into meaningful action. Unless we are able to do this we have somehow missed an important aspect of the process.

### **This model in action — a case study**

This case study is from part of a session designed to develop empathy in a group of men who had been referred for being abusive towards their female partners. The role of the facilitator is to put a process around the issues that group members need to work with to avoid a continuation of the problem behaviour.

You will notice from the accompanying process chart that the levels of change and the three phases of change are integrated to develop a dynamic and energetic experience. You will also notice that the facilitator is a guide and manager of the process. What is interesting from this approach is that group members are effectively sharing with each other strategies and are thereby empowered to search for solutions from within their own experience. The process of talking to another person, reporting back to the main group, and capturing this material in a visual representation reinforces learning on different levels. It has other people's

<b>PHASE IN PROCESS</b>	<b>TASK</b>	<b>LEVEL OF INTERACTION</b>
Talking about the talking	Introduce the topic: Our theme for today is to focus on empathy — putting yourself in someone else’s shoes.	Whole group
	What would interest you most in learning how to place yourself in someone else’s shoes?	Pairs — 2 minutes
	Process and list responses on a whiteboard or flip chart	Whole group — 5 minutes
	On a scale of 1 – 10, what is your interest level?	Whole group
	Identify 3 things that might get in the way of learning about what it is like to be in someone else’s shoes? Identify a strategy you will use to manage each block.	Pairs — 2 minutes
	Process and list responses on a whiteboard or flip chart	Whole group — 5 minutes
Doing the talking	Think of a time when you have been open to hearing about what it is like for another person and answer the following questions: <ul style="list-style-type: none"> <li>• What did you need to do to be so open?</li> <li>• What did you say to yourself to remain open?</li> <li>• What did you need to think about the other person to remain open?</li> <li>• How did it help you to understand that person’s experience of the world more?</li> <li>• What impact did being open have on your relationship with that person?</li> </ul> List your answers on flipchart paper.	Sub-groups (4) — 20 minutes
	Have the sub-groups report their findings to the whole group	Whole group — 15 minutes
	You all have the ability to put yourself in someone else’s shoes. Now put yourself in the shoes of your partner or children. What would they say about the impact of living with violence was like? How might they describe it?	Pairs — 5 minutes
	Have the pairs report their findings to the whole group	Whole group — 15 minutes
Reflecting on the talking	What have you become aware of through doing this exercise? What will you be doing differently as a result of what you’ve learnt? What will others in your life notice in your behaviour?	Pairs — 3 minutes
	Who needs to know about what you now know? What do you need to tell them? How will you tell them?	Pairs — 3 minutes
	Have each member of the group state what they have learnt and what they will do as a result. This helps achieve two goals: 1) building accountability for change with the other group members, and 2) translates learning in action that can be evidenced.	Whole group — 10 minutes

ideas published (verbally and visually) and allows for links to be made which act as reinforcers.

An assumption is made that problem behaviour does not exist all of the time and that there will be times when participants have been able to make connections and experience empathic behaviour towards others. By taking this approach participants start from a point of competence rather than incompetence.

In the case study above the outcome is both evidenced and visible to others. Insight is not the goal of the process but an ability to build on existing skills and then change behaviour within a framework of accountability — in other words, building connections with others through responsibility for behaviour. The second task is publishing these changes with others.

### **Future challenges**

From the early days of anger management groups, we have come a long way in programme delivery. The challenge now is to learn from the current literature on what is effective and ensure we better match men with programme content and processes. This chapter asked: 'Does one size fit all?' Clearly it does not, but that does not mean facilitators cannot work with the diverse needs and pathways of men who enter programmes.

There are several ways to manage this diversity. Some are related to group process such as in the case study above. Other ways are to adopt offence mapping processes that allow each man's individual pattern of abusive behaviour to speak for itself. This would also see programmes adopting explicit relapse prevention methods. Where volume of clients is an issue, some thought might be given to streaming groups, given men's differing pathways into violence and abuse. This would allow for more targeting of interventions that are more likely to work. As noted, for example, empathic approaches are more effective with men with relatively secure attachment styles.

One area that has great potential is a more explicit link between restraint-based ideas with a strengths perspective. Men often present to programmes with a sense of failure and have dominant stories of inadequacy. Despite this they also have many lived examples of times when they have responded appropriately, shown caring and concern, and used alternative pathways to avoid hurting others.



