A Pilot RCT Exploring the Effectiveness of the DPEW in Decreasing the Potential Risk of IPV

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A Need for Theory-Driven IPV Prevention Programs

- Current IPV offender tx programs have been built on theories & approaches that are largely without scientific merit
- IPV research has traditionally focused on secondary, or reactive, intervention programs that are uneven as to quality and effectiveness (Archer, 2000; Babcock, Green, & Robie, 2004; Feder & Wilson, 2005; Stith, et al., 2004).
- Exploration of innovative, pro-active, preventative approaches necessary in order to combat IPV’s serious effects
- Yet, targeted, primary prevention efforts not utilized in IPV
- There exists extensive primary prevention research re violence in related fields (e.g., youth, dating, sexual offenses)
  - that may be adapted to IPV
DBT—Conceptual Framework

- Dialectical Behavior Therapy—Potentially promising strategy for preventing violence (DBT; Fruzzetti & Levensky, 2000; Linehan, 1993)
- Theory-driven intervention
- DBT—a psychotherapeutic intervention w/ an educ component teaching a range of interpersonal, cognitive, & emotion regulation skills, w/ a supportive atmosphere of respect for the indiv & a commitment for positive change.
  - Who share many of same characteristics inherent in IPV offenders (see, Table 1).
  (Fruzzetti & Levensky, 2000; Waltz, 2002)

Pilot Study Aims

1. **Explore processes / viability of conducting further research on experimental intervention—Dialectical Psychoeducational Workshop (DPEW)**

2. **Gather prelim. outcome data on potential effectiveness of DPEW in ↓ potential risk for IPV**
Figure 1
Conceptual Model for Pilot Study

Intervention

- Experimental: DPEW
- Control: AMW

Outcomes

1) Anger Management
2) Empathy building
3) Coping skills
4) Potential for Risk of Expressions of Physical Violence

Control Variables
1) Socio-demographics: age, race, marital status, income, employment status, education
2) Substance Use/Abuse
3) Social Desirability

Research Questions

To what extent does the DPEW:
- ↑ anger management skills;
- ↑ ability to express empathy;
- ↑ adaptive coping skills;
- ↓ potential risk for expressions of physical violence
Research Design

- **RCT**
  - Not a methodology utilized in IPV field

  - Experimental Condition → DPEW

  - Control → a one time, first session anger management workshop, AMW

  - Pre / Post; 1 month Qualitative Follow-Up

Research Design & Methods

- **Feasibility—Process Level Data**

  - Utility & acceptability of DPEW & overall study.

  - Structure, curriculum, duration, group size, perceptions re facilitator’s expertise, measures, recruiting procedures, etc.
Recruitment
- Adult male clients of a local (standard) anger management program
- Self-referred
  - (excluded: court-mandated)
- Sixty one (61) men approached to participate in pilot study.
  - Fifty-five (55) agreed; six (6) refused.

Inclusion Criteria:
- Males 18 yrs & older;
- Never engaged in prior acts of IPV;
- Positive response to at least 1 of screening questions, e.g., “If I had the opportunity, there are some people I would hurt physically.”
DPEW
(N = 28)

Core Elements:
Interactive handouts utilized throughout:

- Acceptance—Change see saw
  - Balancing extreme emotions (anger)
- Dialectical Tool Box
  - Gain awareness of the importance of recognizing and managing emotions (coping skills)
  - ‘Tools’ one may utilize: mindfulness, validation, making effective requests, ‘acting opposite of anger.’
- Validation / Empathy-building skills
- Personal Plan of Action—how participant might manage angry feelings and emotions.

Control—AMW
(N = 27)

- Comparable in time & format to experimental condition
- First session of (a 7 week) standard anger management program:
  - Lecture regarding causes & consequences of expressing anger
  - Participants are asked questions re what they know about anger & how they have expressed anger
**Measurement**

**Control Variables:**
- Age, race, marital status, education level, income, employment status
- Substance Use / Abuse
- Social Desirability

**Outcome Variables:**
- **Anger Management Skills:** State-Trait Anger Expression Inventory (STAXI-2) (Spielberger, 1988).
- **Empathy:** Balanced Emotional Empathy Scale (BEES) (Mehrabian, 1996).
**Measurement**

- **Coping Skills**: Ways of Coping Questionnaire (WCQ) (Folkman & Lazarus, 1988).
- **Potential for Risk of Physical Violence**: Risk of Eruptive Violence Scale (REVS) (Meharabian, 1997).

**Adequacy of Randomization**

Comparisons of baseline variables between control & treatment groups.

- Chi-square test used for comparisons of categorical variables; t-test used for continuous variables.
- Chi-square test showed no significant difference between two groups (p=0.69)
- Provides evidence that randomization process was successful (two conditions = at baseline)
Post treatment scores

- All post tx scores show a statistically significant difference between control & tx conditions
  - Provides initial support for pilot study’s hypotheses

Changes in Outcomes between Pre & Post Tests

- Shows changes over time from pre to post test.
- All statistically significant except anger expression-out and anger expression-in sub scales (stxi_axo; stxi_axi).
  - anger expression-out = expression of anger toward others
  - anger expression-in = capacity to suppress angry feelings
- High scores = individuals express (axo) or suppress (axi) anger more frequently.
Changes in Outcomes between Pre & Post Tests

- Data based on indiv being used as own control via their pre & post test scores, so as to calculate a difference score between pre & post test scores.

- Data show that w/in control condition some indivs coping (wcq) & AM skills (stxi) ↓ over time, such that there was a statistically significant difference (delta_wcq_d; delta_wcq_sc; delta_wcq_ar; delta_wcq_ea; & rev).

- In tx condition, nearly all p-values were statistically significant, except for confrontive coping subscale (delta_wcq_cc), & anger expression out & anger expression in subscales (delta_stxi_axo; delta_stxi_axi).

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Changes in Outcomes between Pre & Post Tests

- **Key finding**: DPEW’s effectiveness in ↓ desire to express anger physically (delta_stxi_sangp), while at the same ↓ potential risk for physical violence (delta_rev).

- Data demonstrate that the tx (DPEW) had an effect & that although some individual scores ↓, tx condition produced significant difference between 2 groups.

- Findings provide preliminary support for pilot study’s hypotheses
Results

- **Key Finding:** DPEW’s apparent effectiveness in ↓ desire to express anger physically while also ↓ potential risk.

- A low dose intervention, w/ small sample, provides initial support for DPEW, as preventative strategy for at risk individuals
  - DPEW appears less effective re controlling inward & outward feelings of intense anger.
    - May be due to limits of low dose in effecting positive change re more complex emotions.

Targeted Populations & Prevention Programs

**Preliminary results = promising building blocks on which to strengthen DPEW**

- its utility as preventative program for at risk indivs needs to be further tested on larger sample, over a longer period of time.
- would prove useful to conduct follow-up at several data points (e.g., at 3 mths and/or 6 mths, and at 12 mths) to assess the sustainability of the DPEW’s effectiveness.
Limitations and Questions for Exploration

- Duration of intervention
- Length of follow up
  - retention of effects
- Screening for BDP
- Experimental and control conditions
  - e.g., experimental, longer duration, TAU
- Pilot outcomes reconceptualized as mediators of ultimate outcome of violence
- Measurement of outcomes
  - e.g., reliability of self report, conceptualization of violence outcome