Keywords

Treatment needs; intimate partner violence; forensic patients; medical record review

Helpful Terms

Antisocial: Describes behaviors that are harmful or disruptive to others or to society as a whole. Includes lying, cheating, stealing, etc.

Criminogenic: Changeable characteristics of offenders that cause or are likely to cause criminal behavior.

Forensic patients: Patients with serious mental illnesses who have become involved with the criminal justice system.

Intimate partner violence: Domestic violence by a current or former partner in an intimate relationship against the other partner. It can take a number of forms, including physical, verbal, emotional,

Project Title: The criminogenic and noncriminogenic treatment needs of intimate partner violence offenders

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Key Question

- What are the criminogenic treatment needs of intimate partner violence offenders?

Project Aims

Treatment programs for intimate partner violence do not show good results in terms of reducing re-offending. Researchers have suggested changing the treatment model to one that is based on the principles of effective intervention for offenders. Offender treatment is most effective when it focuses on changeable risk factors that are known to be related to reoffending. These “criminogenic” treatment needs include: antisocial personality traits, attitudes supportive of crime, criminal peers, substance use, poor marital and family relationships, employment or school problems, and lack of leisure activities that promote social wellbeing.

This project studies criminogenic treatment needs as documented in the medical records of forensic patients, who are admitted to a forensic hospital because of their involvement with the criminal justice system.

Activities

- Comparing patients with a history of intimate partner violence offenses, with violence offenders without a history of intimate partner violence, and patients with no violent offenses.
- Recommending changes in the treatment model for intimate partner violence treatment programs.

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