

Definition of key terms and relevance to DAP Interventions

TERM	DESCRIPTION	RELEVANCE TO DOMESTIC ABUSE PERPETRATOR INTERVENTIONS	DOUBLE MEANINGS
ADHD (Attention Deficit Hyperactivity Disorder)	A lifelong Neurodivergent pattern of brain development that is experienced differently by different people but may affect a person's attention, focus, impulsivity and activity levels. The social model of disability draws attention to that sensory, social and communication 'norms' and societal structures disable Neurodivergent people.	<p>ADHD is often experienced internally as well as externally and may cause extreme anxiety. Expressions of ADHD dysregulation are sometimes misconstrued as belligerence (hostile or aggressive behaviour).</p> <p>Interventions have typically been developed with neurotypical people in mind. This means that interventions can be inaccessible to people with ADHD as differences in executive function and embodied experiences have not been considered within processes, structures and core expectations. Parts 3 (explanations of neurodivergence), 4 (the SPACE framework) and 5 (supporting Neurodivergent clients in practice) of this Guide will provide practitioners with an explanatory framework and tools for understanding and working with Neurodivergent clients with these experiences.</p> <p>It is also important to note from the outset that ADHD does not cause someone to</p>	<p>While ADHD presentations within interventions (group and/or individual work) can be misinterpreted by practitioners as them being disruptive and/or belligerent, this behaviour can also be intentional. However, it is also important to understand that when someone with ADHD experiences extreme anxiety and dysregulation, the task to self-manage can be much harder than for someone who is neurotypical.</p> <p>A person displaying such presentations should not immediately or uncritically be attributed to or considered as having ADHD.</p>

Definition of key terms and relevance to DAP Interventions

		abusive towards their partner. We explore this in more depth in part 3 of this guide.	
Alexithymia	Difficulty in identifying and/or naming emotions in oneself. Alexithymia is more commonly present amongst Autistic people, estimated at more than 50%.	Difficulty in recognising and describing feelings may require tailored work/content to support client to work through these in context of triggers for domestic abuse or what was happening/will happen before/during/after an incident. This could include co-creating personalised language for emotions and using creative metaphors to describe emotions ³	Understanding emotions can be difficult for anyone, particularly when exploring feelings that cause us pain or involve acknowledging the pain caused to others. This can trigger denial, defensive projections, and rationalisations. These internal processes should not be confused with Alexithymia. Though they may go hand in hand with gendered aspects. This means that entitlement and male privilege could intersect with Alexithymia in more complex and nuanced ways that are conscious (e.g., expecting their partner to take responsibility for the emotional labour; unwilling to take responsibility for developing emotional literacy) or

Definition of key terms and relevance to DAP Interventions

			unconscious (unaware they are Alexithymic).
Autism	<p>A lifelong neurodivergence that may affect how a person communicates, their social interactions, sensory processing and how they process information. Autism may be described as a sensory, social, information and communication processing difference and a natural human body-mind diversity. It is important to recognise that Autism is often confused or conflated with Learning Disabilities. While these can co-occur, they are not mutually exclusive.</p>	<p>Interventions have typically been developed with neurotypical people in mind. This means that interventions can be inaccessible to Autistic people as sensory, communication, processing and embodied experiences and differences have not been considered within mainstream intervention processes, structures and core expectations. As mentioned above, we will be exploring this in parts 3, 4 and 5 of the guide.</p> <p>It is also important to note from the outset that Autism does not cause someone to be abusive towards their partner. We explore this in more depth in part 3 of this guide.</p>	<p>While Autism does not cause domestic abuse, male entitlement and feelings of shame can interact in complex ways for someone who is Autistic and uses violence and control. Male entitlement could be extended to deliberately control a partner under the guise (or actual feelings) of dysregulation (e.g., because a family member/friend is visiting).</p> <p>We know that many adult users of violence are very sensitive to experiencing shame or humiliation and may blame their partners for these feelings. As a stigmatised group, feelings of shame and humiliation can be experienced much more intensely by some Autistic people⁴. In the context of domestic abuse, this</p>

Definition of key terms and relevance to DAP Interventions

			<p>could increase the risk for victim survivors if they are blamed for these intense feelings, highlighting the importance of embedding trauma and violence informed approaches within practice⁵.</p> <p>While intense feelings of shame can be unsettling, there is no excuse for using violence towards one's partner. In Part 3 we will explain how neurodivergence can intersect with coercive control in the context of domestic abuse.</p> <p style="text-align: center;">Part 5</p> <p>(supporting Neurodivergent clients) will provide practitioners with some helpful tips for assessing and addressing this intersection in practice.</p>
Dissociation	In a state of extreme overwhelm, Neurodivergent people may disconnect from their environment, surroundings or	A person in a state of dissociation will be unable to learn or participate. The focus must first be on supporting the person to return safely from disassociation by	Neurodivergent dissociation is different from other forms of dissociation, for instance where a person might dissociate from

Definition of key terms and relevance to DAP Interventions

	<p>emotional state as a survival mechanism. A person in dissociation may feel disconnected from their body and/ or their mind. They may be unable to move and may experience a sensation of mental emptiness and be unable to recognise faces or emotions.</p>	<p>reducing sensory stimulation.</p>	<p>their behaviour or the impact that it has had.</p>
<p>Domestic abuse perpetrator programmes (DAPPs) and interventions</p>	<p>Programmes that are either mandated or voluntary that provide space and support for people to identify, own and change their abusive behaviours. Such programmes can be delivered on a one to one, group work, or combined format. Interventions can also include casework, mentoring with people who have behaved abusively and require intensive and/or other forms of support.</p>	<p>Programmes may vary in terms of their theories and approaches. Most will not have been developed with Neurodivergent people in mind and may therefore be inaccessible without adaptations. Some Neurodivergent people may need additional support and understanding to engage <i>meaningfully</i> in interventions.</p>	<p>In this guide, we will refer to ‘interventions’ to cover the scope of the work that is undertaken with people who use violence and abuse in intimate relationships. However, we may also use DAPP for specific purposes.</p>
<p>Double empathy problem</p>	<p>A theory proposed by Autistic academic Dr Damian Milton that challenges the harmful view that Autistic people lack empathy</p>	<p>Responses during interventions from Neurodivergent people may be unexpected and not in line with dominant, accepted neurotypical responses</p>	

Definition of key terms and relevance to DAP Interventions

	<p>(theory of mind). Milton suggests that when people with very different experiences of the world interact, they may struggle to empathise with one another (it is a double problem). Due to societal norms, the burden is often placed upon the Neurodivergent person to communicate within expected neurotypical norms.</p>	<p>and expressions. It is important to acknowledge human diversity and tailor interventions to ensure that practice is responsive while remaining victim-survivor centred.</p>	
Echolalia	<p>The repetition of words or phrases, either immediately after hearing them or repetition after a period of time. It is commonly associated with Autism but may also affect other neurotypes such as ADHD.</p>	<p>Intervention practitioners need to be aware that hearing a person ‘repeating back’ what has been said might not always demonstrate understanding.</p> <p>Echolalia can serve as a tool for regulation, self-soothing, communication, or processing language, allowing Neurodivergent people to cope with their environment and process information. It can also be used to mask comprehension difficulties.</p> <p>In part 5, we will provide some tools for:</p> <ul style="list-style-type: none"> • Checking understanding and also how to notice when 	<p>It can be common for clients to ‘repeat back’ programme ‘talk’ (e.g., specific tools or language used on the programme) to evidence progress. This has been described as ‘talking the talk’ rather than ‘walking the walk’⁶. This is not to be confused with echolalia.</p>

Definition of key terms and relevance to DAP Interventions

		<p>dysregulation happens and how to check in around regulation needs (5.4).</p> <ul style="list-style-type: none"> • How to offer alternative ways of communication (e.g., notebook, whiteboard (5.4c). <ul style="list-style-type: none"> • Discuss diversity of communication, how dysregulation can impact on everyone’s ability to interact and communication, at the very start of groupwork (see 5.4a) • Explore needs, signs of dysregulation and create agreements on actions and support (5.2c, d,e). 	
<p>Hypersensitivity</p>	<p>A heightened response to sensory information that can become uncomfortable or even painful. This may be in relation to all senses or to one or more sense. For instance, a person who is experiencing hyposensitivity to</p>	<p>In the context of intervention facilitation, a person who is experiencing hypersensitivity is likely to benefit from an environment where sensory stimulation is reduced, for instance by reducing unnecessary noise, avoiding harsh lighting, strong smells etc.</p>	

Definition of key terms and relevance to DAP Interventions

	noise may seek out loud environments or a person experiencing hyposensitivity to touch may struggle to feel pain.		
Hyposensitivity	A lower response to sensory information. This may be in relation to all senses or to one or more sense. For instance, a person who is experiencing hyposensitivity to noise may seek out loud environments or a person who is experiencing hyposensitivity to touch may struggle to feel pain.	In the context of intervention facilitation, a person who is experiencing hyposensitivity is likely to benefit from opportunities to move their body, wear comforting clothes, use fidget toys, stim.	
Integrated Support Service (ISS)	The ISS is a central part of any domestic abuse perpetrator intervention. This role provides essential safety advice to and about victim survivors.	The specific name for worker undertaking this role varies across organisations. E.g., safety worker, domestic abuse safety officer, victim liaison officer. We will use these names interchangeably throughout the guide. Victim-survivor support remains central to domestic abuse perpetrator interventions. The research underpinning this guide identified both the opportunities	

Definition of key terms and relevance to DAP Interventions

		<p>and risks of providing integrated support to partners where the person causing them harm is Neurodivergent, and particularly in cross-neurotype relationships.</p> <p>We are currently developing guidance for victim-survivor/ISS practice. However, we have also dotted specific safety guidance throughout the guide via ‘other considerations’ and supporting safe exit from intervention.</p>	
<p style="text-align: center;">Interoception</p>	<p>Some Neurodivergent (especially Autistic) individuals struggle to accurately interpret internal bodily sensations. This can lead to difficulties noticing hunger, thirst, tiredness, or a need to urinate or defaecate.</p>	<p>It is important to gather information at assessment stage and to ensure that comfort breaks are both offered and demonstrated (e.g., the practitioner vocalising that they’re thirsty or warm and modelling that it is acceptable to have a drink/ use the toilet, etc.). Some Neurodivergent people may also experience hyper-interoception, experiencing a raised heartbeat and other intense feelings of dysregulation in their body when they are hungry, thirsty or need to use the toilet. It may also be useful to ask the client if they have eaten/ had a drink/ used the toilet on that day. This may</p>	

Definition of key terms and relevance to DAP Interventions

		otherwise affect attention and learning.	
Masking	<p>Person hides authentic version of self (body movement, communication etc) to fit in. Masking doubles up as a strategy to minimise/avoid stigma and harm and can feel unsafe and exhausting. Not always a conscious process. Neurodivergent masking is different to masking experienced at times by all humans as it is a suppression of authentic needs and behaviours.</p>	<p>May appear to be engaged.</p> <p>May appear to understand (by explicitly saying they do when they do not).</p> <p>Practitioner may not be aware of masking discomfort etc. The long-term effects of masking behaviours, along with high adrenal responses and high sympathetic nervous system escalation due to sensory, social, communication and information processing differences can lead to trauma and burnout.</p>	<p>Attempting to fit in/hide sensory discomfort can also be a form of structural resistance in the sense of feigning engagement and understanding.</p>
Meltdown	<p>A fight or flight nervous system response/reaction to feelings of intense overwhelm or overstimulation. There can be different triggers for meltdowns, but these may include sensory overload, emotional dysregulation or experiences of rejection sensitivity. The person may need to cover their ears, avoid bright lights or engage in stimming</p>	<p>Meltdowns are not tantrums, and it is vitally important that a person experiencing a meltdown is treated with dignity and respect. This does not mean that Neurodivergent people attending interventions do not need to be held accountable and take ownership of their abusive behaviour. It is important that practitioners understand and recognise what this looks like when supporting a Neurodivergent client during an intervention (see sections 5.2 and 5.3).</p>	

Definition of key terms and relevance to DAP Interventions

	<p>behaviours such as rocking, spinning or twirling their hair. A person experiencing meltdown may be visibly distressed or angry, displaying behaviours such as kicking, pacing, hitting or swearing as a way to release energy from their nervous system. These behaviours are not intended to cause harm. After experiencing a meltdown, a person may feel ashamed, embarrassed and exhausted.</p>		
Neuro-affirming language	<p>The use of vocabulary that acknowledges, accepts and champions the existence of neurodivergence.</p>	<p>To be neuro-affirming means embracing a person's differences and avoiding referring to or treating a Neurodivergent person as though they are broken or have an impairment.</p>	
Neurodivergence/ Neuro divergent	<p>'Neurodivergence' commonly describes cognitive development which varies or diverges from the typical, related primarily to learning, attention, communication, sensory processing, and mood regulation differences. Neurodivergence</p>	<p>In the context of intervention work, it is important to be able to understand how Neurodivergence may affect how a person is able to engage in the programme – for instance, drawing meaning from metaphors or alluding without being specific may be a challenge, whilst engagement in direct</p>	

Definition of key terms and relevance to DAP Interventions

	<p>includes (but is not limited to) Autism, Attention Deficit and Hyperactivity Disorder (ADHD), Learning Disabilities, and Dyslexia, with types of neurodivergence often overlapping and intersecting.</p> <p>Neurodivergent refers to a person whose neuro-cognitive functioning differs and does not benefit from perceived or typical societal norms.</p>	<p>and honest communication may be a strength.</p>	
Neurodivergent-led organisations	<p>Organisations that are led by Neurodivergent people with lived experience of neurodivergence.</p>	<p>Forming connections with Neurodivergent-led organisations and/ or working with practitioners who are Neurodivergent themselves can support the development of neuroinclusive interventions and workplace environments.</p>	
Neurodiversity	<p>A term used to describe the neuro-cognitive differences in all people, much like gender, ethnicity and sexual diversity.</p>	<p>Understanding that we are all different and embracing and supporting individual's strengths, challenges and motivations for change is an important aspect of domestic abuse perpetrator interventions.</p>	

Definition of key terms and relevance to DAP Interventions

Neurotypical	A person whose neuro-cognitive functioning broadly adheres to and benefits from societal norms or expectations.	A neurotypical person may engage with and respond to interventions in 'expected' or 'normalised' ways.	
Pathological Demand Avoidance (PDA)	A persistent and marked resistance to demands, which may affect some Neurodivergent people. Also described as a 'persistent drive for autonomy'.	A person with PDA may have a strong reaction to adhering to instruction in a group context. They may also try to evade completing work.	This can be a genuine nervous system response; not to be confused with resisting or getting the practitioner to do the work. Please note, this guide does not include guidance on how to address the dynamics of PDA within intimate relationships where someone is behaving abusively as there is currently no research evidence on this topic. Further, research on how PDA manifests is typically regarding children (not adults).
Prosopagnosia	Also referred to as facial blindness. It is a condition where someone struggles to recognise faces, even those that are familiar.	This can be challenging in a practitioner/client and group work context. The individual could appear rude if they did not acknowledge someone or remember who they are.	
Rejection Sensitivity Dysphoria (RSD)	Severe emotional pain and fear of being rejected. People with RSD	Fear of rejection or criticism may lead someone with RSD to avoid speaking	While rejection sensitivity is common amongst those who are

Definition of key terms and relevance to DAP Interventions

	<p>find it difficult to regulate rejection related emotions and behaviours.</p>	<p>up, sharing their views or engaging in activities where there is potential for (real or perceived) failure or ridicule.</p>	<p>abusive towards their partners, this is not to be confused with RSD. Though both may intersect.</p> <p>Please note, this guide does not include guidance on how to address the dynamics of RSD within intimate relationships where someone is behaving abusively as there is currently no research evidence on this topic.</p>
<p>Shutdown</p>	<p>This is a freeze response when the nervous system becomes intensely overwhelmed. This can occur in reaction to sensory bombardment such as noise, light and smells but also due to hypo and/or hypersensitivity to emotions. A Neurodivergent person experiencing hypoarousal may become physically still, withdrawn, and may stop talking or responding to questions.</p>	<p>When shutdown occurs, nothing is happening therapeutically or intervention wise at this stage. What might seem like non-compliance, challenging behaviour or a refusal to communicate is a shutdown – it is the nervous system's way of protecting itself from extreme overwhelm and perceived threat. It is important that practitioners understand and recognise what this looks like when supporting a Neurodivergent client during an intervention (see sections 5.2 and 5.3).</p>	
<p>Stimming</p>	<p>Self-stimulatory behaviour - repetition of physical movements, sounds, words, moving objects, or</p>	<p>Be aware that stimming is completely normal for many Neurodivergent people and it helps them regulate. Do not ask</p>	

Definition of key terms and relevance to DAP Interventions

	other behaviours to self-soothe, regulate, or express a range of emotions, including joy.	people to be completely still, particularly when there is a lot of stimuli.	
Victim-survivor-centred and informed approach	An approach to working that puts victim-survivors of domestic abuse at the centre and keeps their experiences and the impact of domestic abuse upon them in consideration at all times.	<p>Being Neurodivergent is never an excuse for perpetrating domestic abuse and Neurodivergent people who are abusive also need to be held accountable for their actions and supported to change their behaviours. However, it is vitally important that this is done in a neuro-affirming way that supports people to work with their neurodivergence, not against it. In part 1.62, we will explore some of the main considerations for practitioners from research for victim survivors where the person using violence and abuse is Neurodivergent.</p> <p>In part 5 of the Guide, we consider how neurodivergence might present in the home, where there may be competing needs (e.g., multiple Neurodivergent family members, cross neurotype families and relationships).</p>	