DOMESTIC VIOLENCE PERPETRATOR PROGRAMMES

STEPS TOWARDS CHANGE

EXECUTIVE SUMMARY

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- ‘What to do’ with domestic violence perpetrators continues to be a contested area in policy, practice and academia. On the one hand, there are repeated calls for interventions that call perpetrators to account, whilst on the other a deep scepticism about both routes for doing so – domestic violence perpetrator programmes (DVPPs) and criminal justice sanctions.

- Most longitudinal outcome research to date has been conducted in the US and/or on men mandated to attend programmes by courts. The context in the UK is different; for example to meet the Respect national accreditation standard, a DVPP must provide a support worker for women whose partners are attending programmes.

- We sought to move away from the fatalistic ‘nothing works’ message to provide more nuanced findings which are useful to policy makers, funders and programmes themselves. In doing so, we based our research on six measures of success that we developed in a pilot study (Westmarland et al., 2010). Our research aims were to a) innovate in research methods and practice b) locate community based DVPPs within co-ordinated community responses to domestic violence c) measure change among men on community based DVPPs, and) address two knowledge gaps through linked PhDs (the impact of DVPPs on children and exploring programme integrity in DVPPs).

- The original data collected had multiple data collection strands, including: 64 interviews with DVPP staff and stakeholders across four locations; programme data from 11 DVPPs; five telephone surveys covering six time points (over a 15 month period) for 100 women partners or ex-partners of men on DVPPs; the same surveys for 62 women whose partners or ex-partners had not been on a DVPP; longitudinal qualitative interviews with 64 men on DVPPs and 48 women partners or ex-partners near the start and the end of the DVPP.

In the PhD on the impact of DVPPs on children, data was gathered through an online survey of 44 Respect members and interviews with 13 children; For the PhD exploring programme integrity, data comprised 16 interviews with early DVPP developers and stakeholders, a six month ethnographic study and 24 interviews with current DVPP staff.

- DVPPs are far more than a men’s behaviour change programme. As well as their services for women (and sometimes children), they also provide a point of reference for advice for other organisations on perpetrators, and write reports for family court proceedings, children’s services, CAFCASS, criminal courts, and child protection conferences. This represents a substantial contribution to informed decision making by a wide range of agencies that are intervening in domestic violence.

- The first measure of success looked at changes in respectful communication. We found improvements in all of the quantitative indicators. This was a sizeable difference for some (for instance, for ‘he negotiates during disagreements’, 34% of women said he did this before the programme compared to 64% 12 months after starting on the programme). However, minimal changes were seen on some indicators (e.g. ‘he acts in a considerate manner towards me’ only improved by 2%). There was evidence in the qualitative data of some men making steps towards change, for example demonstrating that they could acknowledge and respect women’s views by being more approachable, leaving space and time for her to speak, listening to her such that she felt heard, and actively asking for her opinion. Fundamentally this required that men thought before speaking - a shift was contingent both on recognising the power they had previously assumed and choosing not to use it.
However, this was again marginal for some indicators, most notably for ‘he tries to use money/finances to control me’. Greater improvements were seen for ‘he tries to prevent me seeing or contacting my friends/family’ (decreased from 65% of women reporting this happened to 15%) and ‘he tells me to change the way I dress or my appearance’ (decreased from 57% of women to 16%). In the qualitative interviews most, but not all, women reported more freedom and less anxiety and fear. Such shifts, however, were not always attributed to changes that the men had made directly, but that women themselves had expanded the space in which they acted. For some women, although the potential to broaden out space for action was potentially possible, they remained cautious about ‘testing’ this or felt anxious about doing things they had spent so long avoiding.

The third measure of success was ‘safety and freedom from violence and abuse for women and children’. All 18 quantitative indicators showed dramatic and significant reductions – particularly for physical and sexual violence. ‘Made you do something sexual that you did not want to do’ reduced from 30% of women saying this happened before the programme to zero afterwards, as did ‘used a weapon against you’ (29% to zero). ‘Slapped you, pushed you, or thrown something at you’ reduced from 87 per cent to seven per cent. Fewer women reported being physically injured after the programme (61% before compared to 2% after) and the extent to which children saw/overheard violence also dropped substantially (from 80% to 8%). Whilst harassment and other abusive acts also reduced, some of these behaviours did continue for up to half of the women. That said, over half of the women reported feeling ‘very safe’ after the programme, compared to less than one in ten before the programme (51% compared to 8%). The qualitative interviews echoed these findings. Overall we found little support for the idea that DVPPs teach men how to be ‘better’, ‘more manipulative’ abusers.

However, there was evidence of an increased awareness of children’s fears and anxieties by the end of the programme, with men more likely to understand and less likely to minimise the impact of their behaviour on children. The interviews also revealed some men were learning how to be an engaged parent.

Awareness of self and others was the fifth measure, which looked for changes in understanding of the impact that domestic violence had had on their partner and children. Again, all quantitative indicators showed improvements. For some this was to a limited extent, suggesting that more work needs to be done on men taking responsibility for their behaviour. For example, whilst ‘he tries to justify or make excuses for his abusive behaviour’ reduced (from 91% to 71%) it remained an issue for almost three quarters of women after their abusive partners or ex-partners had attended the programme. More positive shifts could be seen in relation to impacts on children: at the start of the programme only 16 per cent of women thought that he understood these but by the end of the programme had risen to 53 per cent. In the qualitative interviews, there were many examples from men and women about how men minimised and deflect responsibility for the harm they had wrought. A smaller number had made themselves accountable to a wider group of friends and family by admitting both what they had done and its impacts on others.

Measure six was safer, healthier childhoods, and all of the quantitative indicators except for one (‘do any of your children have problems making and maintaining friendships’) showed improvements. The most change was found in the decrease of children worrying about their mothers’ safety (64% of women said their children worried about them before the programme started compared to 37% after) and being frightened of the perpetrator (54% before the programme started compared to 35% after).
• The in-depth interviews provided insights into how change happens for some men. There are some accounts of DVPPs which suggest that at a certain point men experience a ‘light bulb’ moment, when they ‘get it’. We reflected this in one of our questions, but few men thought that this was an accurate representation. Nor does it fit with our measures of success, since they require layers of new understandings, reflection and translation into behaviour. Change is better understood as a series of sparks, different for each man, and not all of which are activated; as a non-linear process which took time, perhaps best articulated by this participant:

I don’t think there was a moment… during the programme they all say like the penny drops, as it were, all of a sudden this light-bulb moment and there never is… it’s like a little fairground machine where you put a coin in and it bounces off various little pegs and it’s only working its way to the bottom. The programme is like that… I know that I will be remembering it when I’m in my 70s and my 80s… But it’s never like this light-bulb moment. I always say it’s like this little coin that you drop in and it bounces around for ages and it sort of argues with yourself and all of a sudden dink it’s in the bottom before you know it (Kieran, Time 2).

Whilst the penny is bouncing around and men are ‘arguing with themselves’, techniques learnt on the DVPP such as ‘Time Out’, counting to ten and ‘positive self-talk’ were important – they provided simple methods through which men could interrupt embodied patterns of behaviour.

• In the in-depth interviews, women and men were asked to reflect on how gender shaped their lives: the question ‘what does it mean to you to be a wo/man?’ was, however, often met with bewilderment and uncertainty. Many said they had never been asked about, or explicitly thought about, this before. There was more ease exploring the concept of equality: here a broad consensus emerged in which gender inequality was considered a thing of the past. At this surface level most articulated a belief in gender equality and individual freedom, but at a deeper level concepts of gender operated much more subtly through taken-for-granted ways of being within the routines of everyday life. For men, the key attributes they identified reflected a traditional masculinity: being a protector, a provider and a father who was the legitimate head of the family. This fed into a sense that they should, and did, ‘know best’ about what was good for the family, the standards by which they lived, which simultaneously positioned women as deficient or in need of ‘help’ or ‘guidance’.

The notion of provider served to legitimise a sense of entitlement to decide on relationship and parenting norms. It was women challenging and contesting these unwritten rules which sat at the heart of men’s perceived need to control, which when manifested through violence and abuse destroyed the very safety and security they were supposed to ensure. Men who made the most steps towards change had spent considerable time rethinking and remaking themselves as men within their relationships and in terms of their parenting. The changes women reported making were similarly a rejection of the diminished femininity they had been coerced into adopting.

• Programme integrity – or perhaps more appropriately ‘service integrity’ – for DVPPs is best understood not as adherence not to a manual, but to the principles/ethos of the service coupled to the aims and objectives of specific pieces of work. Since DVPPs do far more than deliver group-work, discussions of integrity need to encompass all that they do, including women’s support services and wider prevention work. The ongoing organic development and flexibility of DVPP services means that, for practitioners, integrity is best ensured through the use of robust processes of monitoring, practice management, reflection, case management, and clinical supervision.

• We found considerable variability in the amount of time for which women received support from women’s workers and the quality of this support. Some praised the women’s support workers highly, but others had criticisms of the service they received. Many DVPPs struggle to fund the women’s service and the resources are rarely sufficient to maintain regular contact with a large case load. That said, there are challenges and potentials here that need more thought and investment.

• The men reported mostly positive experiences of one-to-one work and groupwork, and said they had good relationships with the men’s workers. It was the input from both facilitators and other men which made the group context one that was conducive to change. The impact of being held to account by one’s peers, and exploring different ways of being men, has been at the heart of why DVPPs use group work as the primary intervention. The interview data supported this model of work, including that it involves considerable challenges, straight talking and men having to dare to be and feel vulnerable.
This was only the second research study in the UK to ask children about their views of domestic violence perpetrator programmes. Children were asked to draw faces and write words in a ‘research book’ to represent how they felt about their father prior to him starting the DVPP: the most common response was sad, followed by confused, annoyed, and angry. Following men’s involvement responses were more positive: ‘happy’, ‘hopeful’ and ‘it would help him’. Importantly, children described spending time with father doing simple day to day activities – playing games, going to the park - without the threat of angry displays or violence. Many talked positively about new found relationships, even if their parents had separated. A ladder was used for children to locate how safe they felt; before the fathers were on the DVPP all used rungs one and two (very unsafe), at the time of interview one child circled rung five, whilst all the others choose rungs 9 and 10 (very safe and extremely safe). Whilst a small sample, these data suggest that DVPPs have the potential to improve children’s safety and well-being. A caveat needs to be made here, since all the children taking part were receiving support from a children’s worker – it is therefore a combination of direct work with men, women, and children that produced these outcomes. The impact of DVPPs on children remains under-studied, with scope not only for further research but also practice, both the development of direct work with children and how men can become more accountable to their children.

The contribution DVPPs made to coordinated community responses (CCRs) was investigated in four case studies. All had begun from, and developed practice consistent with, the Duluth CCR philosophy, in which changing men’s behaviour is understood as one route to increase the safety of women and children. Each area had a policy infrastructure that provided a basis to respond to domestic violence in a coordinated way, within an overarching strategy and action plan in which work with perpetrators was a recognised part of specialist service delivery.

On the one hand, the DVPPs we studied were held in extremely high regard by CCR partners – they were seen as doing good, safe work and being the experts in their area on domestic violence perpetrators.

However, the case studies confirmed that work with male perpetrators in general still remains controversial.

All of the DVPP research sites had had to ‘shape shift’ to respond to changing and challenging funding regimes, as evidenced by the increasing connections with services for and about children. The tensions between sustainability and the original model of a community based DVPP were a concern for some stakeholders. Shape shifting involved both losing and gaining ground. Co-location with children’s services undoubtedly provided significant benefits to the statutory agency staff, but at the same time brought new challenges for the DVPPs.

As feminists, with most of our policy and practice work firmly located in the women’s sector we began this programme of research with a healthy scepticism about the extent to which men choose to change. After spending time with thousands of pages of transcripts of men and women talking about their use/experiences of violence and abuse we are convinced that our data shows steps towards change do start to happen for most. Some men make only a few, halting steps forward. A tiny minority take steps backwards. Others start taking small steps and end up taking huge leaps. For many men, women and children, their lives are improved following a domestic violence perpetrator programme. The policy and practice implications of these findings will become clearer in the months that follow the launch of this report. For now, we conclude that whilst there is more work to be done, and improvements to be made to group work with men, support for women and children, and the location of DVPPs within CCRs, overall we are optimistic about their ability to play an important part in the quest to end domestic violence.

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