

Trends & issues

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Foreword | *International surveys have suggested that around one-third of all adult women will, at some point in their lifetime, experience abuse perpetrated by an intimate male partner. Domestic violence is considered to be one of the major risk factors affecting women's health in Australia and there is a need for the community to respond in ways that reduce the likelihood of further violence occurring. One way of doing this is to deliver programs that aim to reduce the risk of known perpetrators committing further offences. This paper describes the outcomes of a Gold Coast program delivered to men who perpetrate domestic violence and who are legally obliged to participate. The data show that this type of program can produce positive changes in participants. However, the extent to which such changes lead to direct behavioural change is less clear and further research and evaluation is required to develop the evidence base that is needed to ensure that programs for perpetrators produce significant and enduring improvements to community safety.*

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Director

Integrated responses to domestic violence: Legally mandated intervention programs for male perpetrators

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Domestic violence is a term that is widely used to refer to the systematic abuse of power in an intimate relationship where one partner is controlling and other partner is intimidated and lives in fear. Forms of domestic violence include physical violence, emotional and psychological abuse, social abuse and isolation, financial abuse and spiritual abuse. Secondary victimisation includes the (often) ongoing problems that can occur as a result being the victim of such a crime; for example, the loss of employment as a result of having to flee the household for safety reasons. Domestic violence is widely recognised as a major social problem in Australia and internationally. In Australia, it has been estimated that around five percent of the population will be victimised in any one year (Access Economics 2004), with international surveys suggesting that around one-third of all adult women will experience abuse perpetrated by an intimate male at some point in their lives (Coulter & VandeWeerd 2009). Furthermore, it has been estimated that assaults cost Australia a total of \$1,700 per incident (or \$1.41b per financial year), even when the costs associated with crime prevention are not counted (Rollings 2008).

Often the abuse associated with domestic violence is serious. Nearly half of all incidents involve physical injury and approximately two-thirds of all women who are murdered are killed by their husband or live-in partner. The most recent Australian statistics on homicide show that of the 113 incidents involving female victims reported in 2005–06, over half (n=66) followed arguments related to domestic disputes (Davies & Mouzos 2007).

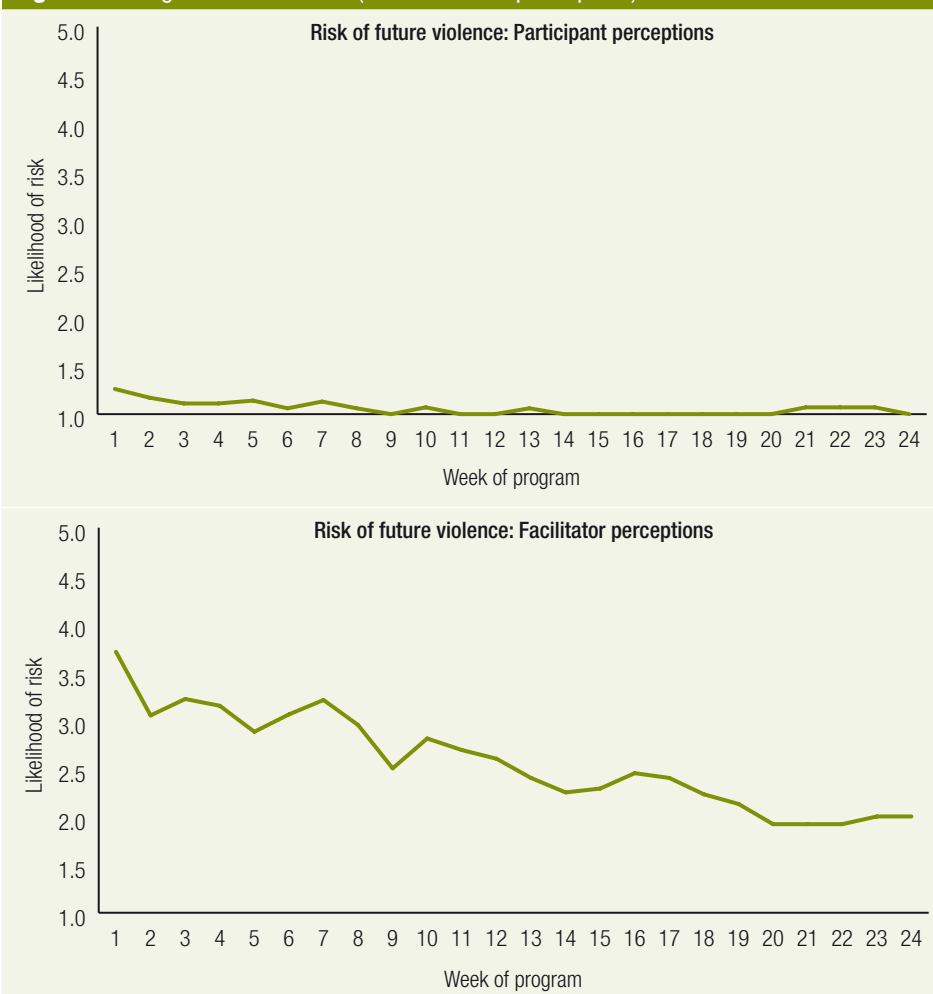
Domestic violence can also represent a significant risk factor for children's health and wellbeing (Hester, Pearson & Harwin 2007; Wolfe et al. 2003). For example, in 2007, of the 156 child deaths known to the Department of Community Services in New South Wales, domestic violence was known to be present in the homes of over half (55%; Burney 2008). Statistics such as these suggest that there is a need for the community to respond in ways that not only address the needs of victims and their families, but also effectively manage the risk of known perpetrators committing further offences. One way this can happen is through the delivery of intervention programs for men who are known to have perpetrated acts of violence against women and children.

Public policy and domestic violence

Programs for men who have perpetrated domestic violence first began to emerge in the late 1970s and 1980s, with many of the early programs being strongly influenced by services for victims (eg the women's refuge movement) and an understanding of domestic violence in the context of gender and power relationships. Although models of service delivery vary across Australian states and territories, the typical intervention approach for perpetrators has focused on changing attitudes towards women and in particular, intimate partners. This has occurred by addressing issues such as sexual jealousy and disputes over the distribution of household resource and by helping perpetrators develop new skills to manage conflict in ways that do not involve aggression.

To date, Australian research on male perpetrator intervention programs has been largely confined to policy, procedural and/or organisational analysis and there are few data examining the effects of interventions on domestic violence perpetrators (O'Leary, Chung & Zannettino 2004). However, international research investigating program outcomes has, on the whole, produced

Figure 1 Ratings of risk over time (facilitators and participants)



results which indicate less than successful outcomes for programs. Meta-analytic reviews have concluded that programs typically produce relatively small effect sizes, particularly when victim reports are used as the dependent variable, or when the men are legally mandated to attend (Babcock, Green & Robie 2004; Feder & Wilson 2005).

In this Trends & Issues paper, data are reported on the impact of a perpetrator program delivered as part of a community-based integrated service response to domestic violence in Queensland. Integrated responses recognise that program referral can serve a number of different functions in addition to promoting behavioural change in offenders. For example, a referral can positively influence the opportunity for women and children to access resources, as well as provide a formal way of monitoring the behaviour of men and the potential risks of further violence. However, it would also be expected that changes would occur over

the course of the program that reduce the risk of further offending.

The Gold Coast Domestic Violence Integrated Response

The Gold Coast Domestic Violence Integrated Response (GCDVIR) service focuses on the provision of legally mandated interventions, consistent with a justice reform model. The primary objectives of the service are to enhance victim safety, reduce secondary victimisation and decrease the incidence of domestic violence through the enhancement and monitoring of interagency cooperation and collaboration. The GCDVIR was an early pioneer of integrated approaches in Australia, originally prompted by a number of domestic homicides in the region that brought to the fore the need for agencies to work together to share information and develop effective practice protocols.

Table 1 Means and standard deviations of the IBWB scale

Scale	mean (sd)	Range
Wife-beating is justified—pre-program (n=35)	18.82 (7.61)	8–32
Help should be given—pre-program (n=35)	17.11 (5.07)	3–21
Wife-beating is justified—post-program (n=12)	13.08 (6.39)	8–26
Help should be given—post-program (n=12)	19.74 (1.66)	16–21

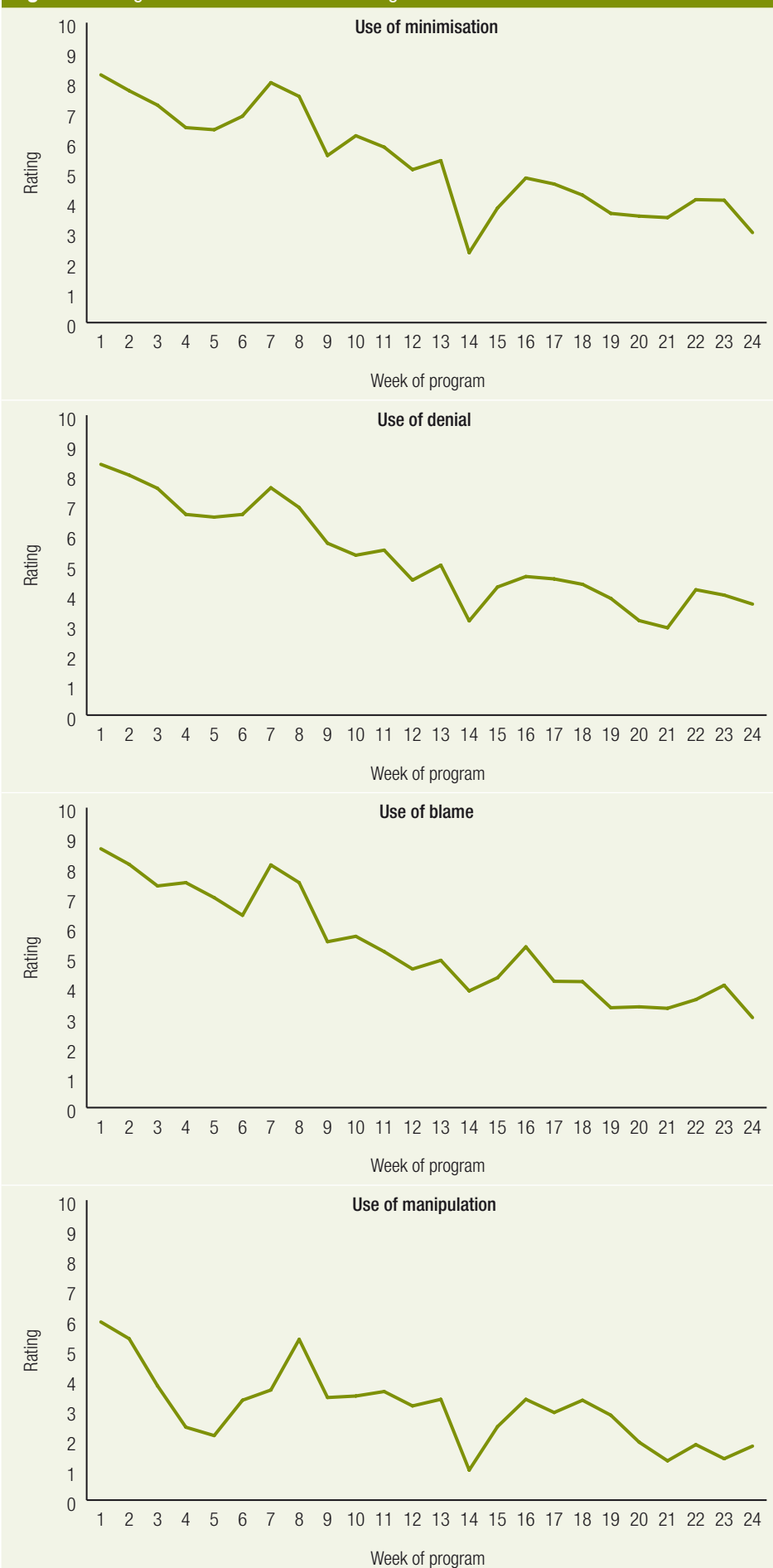
The model currently being used as the basis for the men's intervention program on the Gold Coast has been heavily influenced by development work in Minnesota in the United States, commonly referred to as the Duluth Model (Pence & Paymar 2003). This model emphasises the importance of interagency cooperation and key stakeholders in the Gold Coast community include the Domestic Violence Prevention Centre Gold Coast, Gold Coast Women's Refuges, the Gold Coast Hospital, Community Corrections (including Southport and Burleigh Heads Probation and Parole), Southport and Coolangatta Magistrates Courts and the Queensland Police Service Gold Coast (Moore 2009). The 24 week group intervention program for male perpetrators is delivered in partnership by Southport Community Corrections and the Domestic Violence Prevention Centre and is offered to men who have been convicted of domestic violence offences and as a consequence, have been mandated (either by a court or by a community corrections officer) to attend the program as a condition of their order.

Methodology

Participants

The data reported here are drawn from 38 men who attended the men's program between 2006 and 2009. Participant's ages ranged from 19 to 53 years (mean=35.44, sd=8.50). The majority of participants were born in Australia and all spoke English as their first language. Twenty of the participants completed the program (ie attended all required sessions).

Figure 2 Changes over time in facilitator ratings



Recruitment

Men were invited to participate in the research at an interview conducted prior to, or during, the first session of the program. Each participant was interviewed individually by a male researcher with experience working with violent men during their attendance at an information session prior to entering the program. Men were asked open-ended questions starting with *Can you tell me about your understanding and experience of being ordered to attend this program?* Follow-up questions sought clarification and allowed participants to expand on their situations, experiences and expectations of being referred to the program. The interviews lasted between 15 and 30 minutes and were audio-recorded and transcribed for subsequent analysis.

In addition, participants completed a battery of self-report measures which were selected to cover a range of variables considered relevant to domestic violence program outcomes. These included measures of abusive behaviour and attitudes, as well as alcohol dependency. These measures were then re-administered upon completion of the program when participants were re-interviewed. Program facilitators also rated the treatment performance of each participant at the end of each group session. Descriptive information was available from the intake questionnaire that was routinely administered by the service. Finally, community corrections officers were able to identify any breaches or charges reported in the 12 month period following program completion. The evaluation data were thus derived from the following sources:

- pre-program assessment questionnaire;
- interviews with participants (before and after the program);
- pre- and post-program questionnaires;
- ratings made by the facilitators and participants on a weekly basis during the course of the program; and
- a Corrective Services database check one year after program completion.

The characteristics of domestic violence perpetrators

All program participants were on parole and/or probation orders during the study. Only four of the 38 participants reported that they had no previous convictions. The remaining 34 reported a range of offences (sometimes multiple) that included robbery (2 participants), assault/physical violence against another person (12 participants), assault with a weapon (3 participants), drug-related offences (8 participants) and drink driving (13 participants). Eleven participants indicated that they had been imprisoned or detained (either as a minor or adult), with one participant reporting 15 different periods of detention.

Detailed information was collected in the initial intake questionnaire about family background. Participants were asked to endorse one of a number of responses to specific questions. For example, half reported that their parents were married and the majority indicated that they were physically punished as a child, although participants differed in describing the perceived purpose, nature, or frequency of the punishment. For some, the punishment was perceived as being in some way relevant to the child's behaviour or societal factors (eg 'smack when naughty', 'physical discipline in accordance with societal values of that time'), while for others, the punishment was described as physical abuse ('frequent physical abuse by both mother and father', 'beatings with closed fist to the head and usually when drunk'). Four of the participants indicated that they had either observed or knew of their father abusing their mother (physically, sexually, and/or psychologically).

Twenty-three were parents themselves. In describing their current or most recent relationship, all but one participant indicated that they had cohabited with this partner and had done so for some time. When asked about the frequency of physical violence in the last year of the relationship, there was considerable variation in reports (mean of 9.73 episodes, but the median

number of incidents was 1 episode [mode also=1], with a range between 0 and 182 incidents).

Participants were asked about their use of alcohol and other substances as research suggests there is a co-occurrence between alcohol consumption and/or substance misuse and episodes of domestic violence (Gilchrist et al. 2003; Klostermann & Fals-Stewart 2006). Alcohol consumption will often impact on the severity of the violence (Graham et al. 2010; Klostermann & Fals-Stewart 2006) and can also reduce program attendance and efficacy (Easton, Mendell & Babuscio 2007). It is often considered by individuals to also be a reason or trigger for domestic violence. Almost all participants indicated that they drank alcohol, with the majority indicating that they did so at least once a week. In the analysis of the pre-program interviews, it was noteworthy that alcohol or substance abuse was in some way implicated in 34 of the 38 men's descriptions of their offending, although the men were often unclear in their memory of the acts of violence that had resulted in their referral to the program. Most often, it was their *own* use of alcohol or other substance that formed part of the explanation offered for their offending behaviour. In some other cases, alcohol used by the man's partner was cited as a cause of the violence.

Generally, participants believed that their violence was of 'moderate seriousness' (rated on a scale of 'not at all serious' to 'extremely serious'), although every participant rated violence as an 'unacceptable' way of resolving conflict. When asked to rate how safe they thought their partner was from future violence and threats of violence on a 1 (not safe at all) to 10 (very safe) scale, the majority of participants (n=20) indicated that they believed that their partner was 'very safe' (a score of 10; mean=8.89, sd=2.42), with many suggesting that their partner would overestimate the risk of future violence. Self ratings of this type are, of course, subjective and may not reflect the views of others (including victims). Views of the men

contrasted markedly with those of the women whose partners had attended the program. While women indicated that there had been some change in their partner's behaviour, they did not consider themselves 'very safe' and saw their own safety planning as important to their safety (Day et al. 2009). Nonetheless, the men's ratings illustrate how this group saw their behaviour at the outset of the program.

In their responses to the intake assessment questionnaire, participants reported a number of different things which triggered arguments, with the most common themes being children, family, financial matters, past relationships and relationship commitment. Although not all participants could pinpoint the events relating to the beginning of the abuse, responses suggested that many could identify triggers to specific incidents of abuse, including moving-in together, infidelity, issues relating to the partner's previous relationships, pregnancy/childbirth and emotional problems. In addition, participants named a range of 'other things' as contributing factors, including substance use, family problems, financial matters and work/employment.

Evaluation data

Participant interviews

The interviews with program participants as they entered the program vividly illustrate how unable (or unwilling) many of these men were to accept full responsibility for their actions. This is consistent with international research in this field which demonstrates that men attending domestic violence programs do not tend to view themselves as responsible for their use of violence against a female partner and often minimise its seriousness (Pence & Paymar 2003; Radford, Blacklock & Iwi 2006). Participants typically saw themselves as victims of circumstance, with mandated referral to a treatment program often regarded as further evidence that they were being treated unjustly. Although there was some heterogeneity in these views, a reasonably common view expressed was that the

offences were largely the responsibility of the woman. For example, one participant reported:

You can say that most of the time it's 90% her, other times I would say that you know it could be 70%, but...I am never the instigator.

Participants were interviewed again upon completion of the program. A number of response themes were identified from a content analysis of the interview transcripts (see O'Leary et al. 2009). For example, after being asked to reflect on their experiences, many felt that attendance at the program was primarily intended to serve as a penalty or punishment for their offending. There were a variety of views on how important the mandated nature of the program had been. For some, the court order was instrumental in getting them to address their behaviour, whereas for others, the threat of further punishment (imprisonment) was the primary consideration. To illustrate, one man reported that he was attending the program

[u]nder duress to be perfectly frank. Um, I'm unfortunately in the situation where I don't think I'm suitable for the course. I'm not innocent in relation to the few areas where I've crossed the line but what I am completely shocked at is the system where the other party is not brought to account.

After completing the program, a number of the men described how they had changed in positive ways:

Well, it just opened my eyes to see that, you know what I mean? Like it is a big problem that and it's not just like I was saying, it's not just physical.

For others, however, it was difficult to judge whether any meaningful change had really occurred. For example, one participant began by suggesting that he had not really grasped the program material on gender imbalance, but then went on to describe some positive changes in his relationship:

I know it goes both ways—some women are just as violent as some men...but men are stronger...muscle wise and it

can cause more damage to a woman by the way they assault and they punch or push or anything along those lines.

Based on this analysis of the interviews conducted after the program had been completed, most participants appeared to leave the program with a greater awareness of the nature of their problems and an increased commitment to developing non-violent relationships. When asked what specifically had helped them to change, two consistent themes were identified—social support from other men in the program and the development of communication skills in their intimate relationships. While both social support and improved communication may be very valuable to men in their personal and social functioning, they do not necessarily relate to change in their abusive behaviour.

Questionnaires

Abusive behaviour, before and after the program, was assessed using the Revised Conflict Tactics Scales—a self-report measure of abusive behaviour in intimate relationships (Straus et al. 1996). Prior to program commencement, each participant acknowledged engaging in at least one of four types of abusive behaviour, with psychologically-aggressive tactics most commonly reported. Self-reports at the post-program assessment tended to indicate that moderate declines had occurred over time, although the lack of data on some participants (and the large number of participants who did not report committing any acts), limits the extent to which these data can be interpreted in any meaningful way.

The *Inventory of Beliefs about Wife Beating*, an 11 item version of the instrument originally developed by Saunders et al. (1987), purports to measure men's attitudes towards physical abuse of their wives. It consists of two subscales—the *Wife Beating Is Justified* subscale (9 items) measures attitudes regarding the acceptability of the use of such violence (eg 'a husband has no

right to beat his wife even if she breaks agreements she has made with him") and the *Help Should Be Given* subscale (3 items) which measures beliefs that government/ social agencies should provide help to victims of abuse (eg 'wife beating should be given a high priority as a social problem by government agencies'). Higher scores on both subscales indicate stronger levels of agreement with such statements. Participants' pre- and post-program mean responses to these subscales are presented in Table 1.

In comparing post-program scores with those at the beginning of the program, paired samples t-tests revealed that participants did, indeed, endorse fewer statements justifying abuse after the program, although this difference was not statistically significant ($t(10)=1.67$, NS (one-tailed), $r=.22$). Similarly, participants increased their endorsement of statements that help should be given to victims of violence ($t(10)=-1.88$, NS (one-tailed) $r=.26$).

Participant ratings

Participant ratings were compiled from weekly reports made by the program facilitators and from the self-ratings made by participants at the end of each session. During each session, participants were asked to rate the likelihood of them acting in a violent/abusive way toward their partner in the next week (1=none, 2=low, 3=moderate, 4=medium, 5=high). Generally, these ratings were low across the entire program. At the end of each session, facilitators also rated risk of violence/abuse occurring over the next week. Changes in the perceptions of risk are plotted in Figure 1 and reveal declines in perceptions of risk by facilitators over the course of the program. The participants consistently viewed themselves to be at little risk of acting violently.

After each session, facilitators also recorded their perception of each participant's 'acceptance of responsibility for their abuse', use of 'minimisation', 'denial' and 'blame', as well as his 'level of manipulation/ collusion' (ratings were made on a scale of

low=1–high=10; see Figure 2). For 'minimisation', ratings decreased from the start of the program ($n=23$ participants; mean=8.26, $sd=2.63$) to the end of the program ($n=9$; mean=3.00, $sd=2.64$). Similarly, 'denial' linearly decreased ($n=25$; mean=8.36, $sd=2.55$ to $n=10$; mean=3.70, $sd=3.34$), as did ratings of 'blame' ($n=24$; mean=8.63, $sd=2.22$ to $n=10$; mean=3.00, $sd=3.06$). Finally, for ratings of 'manipulation', which were low to begin with ($n=17$; mean=5.94, $sd=3.54$), ratings also decreased ($n=10$; mean=1.80, $sd=1.62$). For participants for whom data were available for Session 1 and Session 24, paired sample t-tests revealed that these changes were statistically significant for 'minimisation' ($t(6)=2.74$, $p<.05$); 'denial' ($t(9)=3.42$, $p<.05$); 'blame' ($t(9)=6.00$, $p<.001$) and 'manipulation' ($t(6)=3.13$, $p<.05$). The facilitator ratings therefore indicate that participants appeared to show an improved understanding of the main concepts covered in the sessions over the course of the program.

A 12 month follow up of program participants revealed that of the 20 men who successfully completed the program, seven had further charges recorded against them. Of these, four had breached their domestic violence order (alongside other offences such as substance use and driving). In contrast, of the 18 men who did not complete the program, 16 had further charges recorded, although it is important to note that new charges were sometimes the reason for program non-completion. Charges are a limited measure of recidivism and are obviously a different metric from convictions. However, the findings do suggest that the behaviour of the program participants was still coming to the attention of law enforcement. These data underscore the need for men to complete all sessions of the program if they are to be successful in their attempts at behavioural change.

Discussion

Collectively, the pattern of findings reported here suggests grounds for some cautious

optimism about the value of group intervention programs in bringing about change in male perpetrators of domestic violence. On the whole, men appeared to make some improvements in areas which were targeted by the intervention. Many of the men, for example, reported leaving the program with a greater awareness of the problematic nature of their behaviour; they appeared to hold less supportive attitudes towards domestic violence; appeared to understand the key concepts in the program; and also expressed confidence in their ability not to act violently again in the future. Although the number of new charges is not a strong outcome indicator of program efficacy, relatively few of those who completed the program had further charges laid against them in the 12 month follow-up period.

There are a number of issues relating to this type of evaluation which are critical to the interpretation of the significance of this data for the further development of programs of this nature. For example, the data are largely self-reported and the participants are likely to have a vested interest in reporting that they have made positive changes. As minimisation of the level of violence and responsibility for its use is common among offenders, researchers have always suggested that self-report data must be treated with caution. It is not known whether changes in attitudes are sustainable over time, particularly once a legal order has expired. In other research through the Gold Coast Domestic Violence Program, both women partners and workers commented on the need for orders to be of sufficient length in order for change in behaviour and attitude to occur, as this was not often the case (Day et al. 2009). Even more problematic is the lack of a comparison or control group. Research with other offender groups has shown that changes in scores on these types of measures occur naturally over time (see Howells et al. 2005). Therefore, participants may have a tendency to show improvements on self-report measures because they have a greater understanding of the issues or because they

have a better understanding of what is expected of them. The real question is whether the studied group of men have changed more than a similar group of men who did not attend a program. Other factors, such as the opportunity to offend should also be controlled for. For example, a man who has separated from his partner and is living alone will have significantly fewer opportunities to reoffend than a man who is still in a relationship. Finally, it is unclear whether the magnitude of the changes observed will be sufficient to bring about real changes in behaviour. The changes, although in the desired direction, are modest and may only have a limited association with actual behavioural change (Bowen, Gilchrist & Beech 2008). As such, it is not possible to generalise these findings to other programs or other types of intervention.

Notwithstanding these issues, there are also rather substantial barriers and challenges to evaluating any response to domestic violence intervention programs, not least of which are implicit in debates about how to define and measure program success. The most common type of evaluation involves an assessment of the changes that occur in men over the course of attending a program and it is this type of data that is reported here. Clearly, however, these are not the only outcomes that are important. There is, for example, no means by which to assess the extent to which the different agencies involved in program delivery were successful in providing an integrated and coordinated response to both perpetrators and victims. Interviews with women and case study analysis from qualitative research shows that women partners (or ex-partners) of men referred to the mandated program would not necessarily have accessed the services of a women's advocate and associated supports if the mandate to attend had not been issued. The involvement of a multi-agency response (as result of the referral) did appear to facilitate a more comprehensive monitoring of risk than might otherwise be possible.

Furthermore, these data shows that only 20 of the 38 men successfully completed the program (ie attended the required sessions) and it was not possible to follow up those who dropped out of the program because they had changed address or contact numbers, perhaps as a means of avoiding further contact with the service. As such, it was not possible to establish the reason for program non-completion, or to examine differences between those who completed the program and those who did not. The attrition rates are not unusual for this particular population. For example, among court-mandated domestic violence offender programs, non-completion rates of up to 75 percent have been reported (Buttall & Carney 2008), although a completion rate of approximately 55 percent for 16 week group-based programs reported by Gondolf (2008) is probably more typical. However, attrition rates are of particular concern where evidence suggests that the risk of reoffending is increased following the non-completion of offender treatment programs (McMurrin & Theodosi 2007). In terms of follow-up research, this population is difficult to trace due to transience related to disruptions in working and home life. This makes longitudinal tracking extremely resource intensive and sometimes impossible. There is also considerable scope for further investigation of the impact of feeling coerced into attending perpetrator programs and how this could relate to subsequent attrition.

Implications and conclusion

It is clear that both the research evidence and public support for the delivery of perpetrator programs is far from consistent and yet, working with known perpetrators provides one of the most direct and potentially efficient means to improve the safety of Australian women and children. While the outcome data reported here are promising, further evaluation is required to establish a more accurate assessment of the value of intervention programs for male

perpetrators in reducing rates of domestic violence. One of the evaluation research challenges is to gain the perspectives of women and not rely so heavily on men's self-report data. Understandably, many women do not wish to participate, or have other commitments, so it is not always possible to document their experiences. Furthermore, the relationship may have ended by the time a man reaches a program, so a woman's feedback may be limited by circumstances. However, this continues to be an important piece of the story of men's change.

From a public policy perspective, domestic violence is economically, socially and personally costly. It is therefore critical that domestic violence perpetrator programs develop robust and timely entry pathways and program curricula and that there are consequences for individuals should domestic violence continue or escalate. To this end, significant investment in program evaluation initiatives is required, with funding for multi-site controlled trials across Australia. There should be a commitment to the development of evaluation methodologies that take into account of all aspects of integrated service delivery, including the success of attempts by program providers to collaborate with the police, judiciary, corrections, victims groups, child protection agencies and other stakeholders.

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