

Ten Challenges and Opportunities for Domestic Violence Perpetrator Program Work

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Introduction

It is a cliché to say that work in a particular field is at a 'crossroads'. Human services and social justice strivings are always evolving, reaching new levels of sophistication, only to then be positively disturbed by new understandings and awareness of our clients' experiences and needs, and of the social forces that shape relational power.

At the risk of using this cliché, and respecting the continually evolving nature of this work, I believe that programs working with men to end their use of violence and abuse against family members are facing some particular junction points. This work is attempting to grow out of its current skin into something still recognisable relative to its previous incarnation, but also something with notable evolution.

This is a transformation, however, that is already causing headaches for funders, policy workers, program coordinators and practitioners. While there are innumerable small to moderate things that can be done through this transformation without significant additional resources, several major elements require a level of resourcing to implement, which most program providers currently do not have.

Program providers and practitioners are already doing it very hard. Due to achievements in enhancing family and domestic violence service system integration, in many parts of Australia program providers are receiving increasing numbers of referrals from child protection, probation/community corrections, courts, police and other systems agencies. This is a positive development, as systems agencies start to work more closely together to identify, monitor and refer perpetrators to programs.

However, growth funding for program providers to respond to this significant upswing in demand has either been non-existent or vastly insufficient, creating escalating pressures on agencies with lengthening waiting lists. Moreover, to hear that current Australian minimum standards set for domestic violence perpetrator programs (No To Violence, 2006; Queensland Department of Communities, 2007; NSW Department of Attorney General and Justice, 2012) contain several particularly important standards that will soon be, or are, below the emerging benchmarks for minimum practice, is a bitter pill to swallow. Indeed, industry understanding of quality practice has advanced significantly since a decade ago, when the current Victorian minimum standards, which still form the basis of the other sets of minimum standards in Australia, were researched.

Many of the 10 areas of evolution to follow are considerations in progress, not without significant contention in some instances, and with years of work ahead to help provide them with more shape and solidity. The directions they set on particular issues, however, are undeniable, and they point the way to this emerging 'new' understanding of quality practice.



1. Contributing to coordinated community responses

The term ‘men’s behaviour change program’, (MBCP) has been the predominant name applied to community-based domestic violence perpetrator programs in Australia. This naming was deliberate to separate out men from their behaviours, to emphasise that men were more than the term ‘perpetrator’ implied, and that they could make different choices about how to behave to family members (No To Violence, 2006).

For community-based program providers, and to a lesser extent correctional programs, partner contact has become an important adjunct to the work with men, for a range of reasons described elsewhere (No To Violence, 2006; NSW Department of Attorney General and Justice, 2012; Chung, 2013). However, while seen as an essential component of these programs by the community sector at least, the resources allocated for this work appear to be significantly less than those allocated for the work with the men (Smith, Humphreys & Laming, 2013).

Domestic violence perpetrator programs¹ have made substantial progress over the past 25 years in moving away from operating as stand-alone programs, towards participating in integrated family and domestic violence service partnerships (Diemer, Humphreys, Laming & Smith, 2013). This has strengthened their capacity to work with other systems agencies – specialist women’s services, police, child protection, family services, courts and corrections – and to follow Ed Gondolf’s dictum that “the system matters” (2002, 2012). This is an important development for a number of reasons, not the least being that perpetrator programs that are firmly embedded within coordinated community responses appear more effective in reducing recidivism than that which are not (Edleson, 2012).

The first emerging direction for domestic violence perpetrator programs, in Australia at least, concerns taking the increased systems focus of these programs to the next step. This relates to the underlying assumptions concerning what these programs are fundamentally trying to achieve (Vlais, 2010a).

The term ‘men’s behaviour change program’ would seem to suggest that the fundamental aim of domestic violence perpetrator programs is to change men's behaviour. However, rather than being seen as a fundamental aim, men’s behavioural (and attitudinal) change can be conceptualised as one of a number of strategic objectives towards the fundamental aim of working towards the safety, wellbeing, human rights and dignity of women, children and others affected by men's use of violence (NSW Department of Attorney General and Justice, 2012).

Men's behaviour change is indeed a very important strategic objective towards this fundamental aim. However, it is not the only important objective. Others, which can be less or more important depending on the intervention context and particular circumstances, include:

- risk assessment and risk management work through a coordinated approach involving services to the man, his (ex)partner and children, and involving information sharing and multi-agency work with other systems agencies where appropriate (O’Malley, 2013)



- supporting the safety and wellbeing of women and children directly through partner contact, child contact work or connected children's family violence counselling, family services or child protection interventions (Chung, 2013; Victorian Department of Human Services, 2013)
- supporting women's agency, decision making, safe resistance and her own informal processes (when safe) to hold him accountable, and to make decisions for her family (Smith et al., 2013)
- increasing the scrutiny and monitoring of the man's behaviour, so that he is not lost to the system (Vlais, 2010b)
- supporting formal accountability processes including via the criminal justice system, through information sharing when a violence-related crime has been committed (Western Australian Department for Child Protection, 2012)
- providing secondary consultations, professional development and both indirect and direct support for other systems agencies – child protection authorities, family services workers, police, Magistrates and court personnel, corrections and probation officers, substance use counsellors, mental health workers, supported accommodation workers and problem gambling counsellors – to engage more effectively with men who perpetrate family and domestic violence, so that these men are less likely to be invisible in case work and fall through the gaps of community services sector and justice system accountability nets (No To Violence, 2013).

'Front-end' proactive engagement of men

Importantly, the last point above reflects not only an aim to improve coordination and establish a more collaborative effort with men participating in an MBCP and child protection, family services, alcohol and other drug (AOD) or other intervention. It also highlights the need to more effectively engage domestic violence perpetrators through these sectors who are not yet willing to participate in an MBCP. Increasing the man's likelihood of participating in an MBCP is only one of the objectives here. Strengthening risk assessment and risk management, improving monitoring, and enhancing support and advocacy for mothers/partners based on an improved understanding of the perpetrator's patterns of coercive control are other important ways that this support for systems agencies and allied professionals can contribute to a coordinated community response.

Indeed, some MBCPs are placing increased focus on engaging with men who perpetrate violence at an early point after their contact with police and/or courts, even though most of these men are not sufficiently motivated to accept a referral to participate in an MBCP. This involves programs using assertive outreach methods with far greater numbers of men at the 'front-end' of the integrated system's response, than the MBCP's more traditional 'back-end' work with a relatively small subset of these men who participate in the actual program. Examples include:



- Victorian men's enhanced intake or active referral services which phone male family violence Respondents based on 'faxback' active referrals from police (Johns & Benjaminsen, 2013; see also Chung, Green, Smith & Leggett, 2014);
- Face-to-face assertive outreach with male family violence Respondents in Christchurch (Campbell, 2014; Gregory & Woodward, 2013);
- Court-based Respondent worker engagement with men appearing for protection order proceedings (Murray, Allen & Hallabi, 2013); and
- Case management work to engage men during the sometimes lengthy process through which they undergo court proceedings for family violence related criminal charges before (potential) conviction and sentencing (West, 2012; Scott, Heslop, Kelly & Wiggins, 2013). Indeed, Scott et al. (2013) found that a case management approach based on the Risk-Needs-Responsivity model, applied to men undergoing a court process due to domestic violence assault charges, substantially reduced both domestic violence and general re-offending at 1- and 2-year follow-ups compared to a control sample.

Indeed, as a recent submission to a Queensland parliamentary inquiry stated:

Men who have perpetrated DFV pose more danger when they “drop out of sight” of services. Providing case-management support for the man to establish himself separately and manage changes in his life due to no-contact DVO [protection order] conditions and Ouster conditions [when he is excluded from the family home by police] can reduce the likelihood of criminal breaches of those orders. Our experience in working with men who perpetrate DFV is that there is a significant proportion of men who are in the right place for change, and with appropriate, skilled support, will engage productively with services.

Given that separation can be a time of greatly increased risk for a significant group of respondents, close supervision and support for the respondent provides a way of assessing and managing this risk. A case management model involving regular contact and assistance with the provision of practical options, allows for monitoring of the respondent's risk of further violence and level of engagement in the change process, and initiating the appropriate safety responses as needed (SPEAQ, 2014, p24).

It is very important to note, however, that these front-end attempts to engage men are not about not naming the violence. The word 'engagement' here can be quite problematic if it is taken by practitioners to mean an approach that avoids naming the man's use of violence for fear of 'losing him' to the service system, or as part of a strategy to draw him into MBCP participation at a later point. Men, at all points need to be reminded that family and domestic violence is a crime, that there are never any excuses, and that assertive outreach is taking place due to the man's behaviour (as reported by police). Just as back-end MBCP work requires weaving together a strong focus on the violence, accountability and a genuine interest in the man's life, motivations,



strivings and ethics, so does the front-end work of 'engaging' men at earlier windows of opportunity.

Responding to very high risk men

There are some uncertainties regarding the potential efficacy of community-based domestic violence perpetrator programs with men who represent a very high, or extreme risk to family members. Community-based agencies can rarely offer the type of intensity provided by Corrections through violent offender therapeutic programs in custodial settings, which can run to over 300 hours of face-to-face engagement in some instances. Furthermore, men with particularly high traits of narcissism and low affective capacity for empathy might not benefit from domestic violence perpetrator program components focusing on increasing empathy and understanding for victims, as these offenders might only use such understanding at a cognitive level to develop new ways to control family members.

Salter (2012), in his wide-ranging review of efforts to reduce domestic violence recidivism amongst very high risk men, points to a range of possible interventions that in isolation are each not backed by significant empirical support across a range of settings and studies. He argues that multi-agency responses involving a combination of monitoring and surveillance, criminal justice system responses, 'rehabilitative programs' and efforts to address the offender's social disadvantage and personal/community reintegrative needs, that suit the particular profiles and circumstances of each offender, is more likely to be beneficial than a single, generalised approach applied to all perpetrators. He argues:

The successful management of high-risk domestic violence offenders may involve combining sanctions in ways that are both punitive and reintegrative, useful for offenders, as well as victims, supported by the range of stakeholders involved in the domestic violence response, and acceptable for the community. This involves an understanding of how strong community partnerships can develop, underpinned by a set of shared principles in relation to domestic violence and recidivism reduction. Such principles may shift according to the local community context. However, criminological research has emphasised, in particular, the importance of targeting interventions on the basis of risk and tailoring them according to the needs and propensities of particular offenders ... There are now a range of emerging techniques that seek to enhance perpetrator accountability initially through direct surveillance and oversight and eventually through self-regulation, as the perpetrator is encouraged to develop new linkages with his community ... These approaches are laudable in principle although sometimes uncertain in practice, particularly in some applications of therapeutic jurisprudence that are more focused on the symbolic rather than practical aspects of social reintegration. Crucially, research suggests that anti-recidivism initiatives are unlikely to be successful unless they are coupled with social welfare policies designed to address the housing, employment, health and other difficulties that are prevalent in the lives of serious domestic violence offenders and victims. (p. 18)



This presents some key questions for community-based domestic violence perpetrator programs:

- do community-based programs have a role in addressing risk for particularly high risk violent offenders?
- what knowledge, experience and skills-base do they have which can support the efforts of police and corrections/probation officers in this respect?
- what role do community-based programs have in participating in multi-agency high risk conferencing strategies, such as models derived from the UK system of MARACs – particularly when they might not be working directly with most of the perpetrators identified through high risk case conferencing?

These questions are far from being fully explored. However, they again point to domestic violence perpetrator programs, while needing to resist the temptation to be all things to all people, to adopt a more expansive view of their strategic objectives than group-based behaviour change alone.

Implications for program outcome evaluations

Unfortunately, outcome studies rarely give sufficient weight to the many strategic objectives that work towards the fundamental aim of these programs, and largely tend to focus solely on measures of recidivism. Putting all the outcome measure eggs in the one basket – men's behaviour change – runs the risk of making invisible these other important ways that programs promote the safety of women and children and strengthen perpetrator accountability, thereby painting a very incomplete picture of the value of these programs.

With the constellation of these strategic objectives in mind, one could conceptualise the place of perpetrator programs as contributing towards, or adding to, coordinated community responses – as distinct from the narrower lens of men's behaviour change or reducing recidivist behaviour. This has significant implications for outcome evaluation research studying their effectiveness (see, for example, the interview with Nicole Westmarland from Project Mirabal in the Q&A section of this journal edition).

First, when a program is successful in implementing the full range of these strategic objectives, recidivist measures can actually increase as a sign of success. When women feel more supported and connected by the service system, when men's behaviour is more closely monitored, and when systems agencies work more closely together, a significantly greater proportion of men's violence-related criminal behaviour, including protection order and community corrections/probation breaches, can become notified and result in prosecutions. This can be a positive sign that MBCPs are supporting both formal accountability processes through the justice system, and the informal accountability mechanisms of partners and others to draw a line in the sand around the man's behaviour. Hence, expectations that program success must be equated with a decrease in violence-related offending behaviour can be misleading.



Second, equal weight should be given to all of the above-mentioned strategic objectives when considering a program's contribution to perpetrator accountability. The woman, for example, who decides to leave her partner as a result of seeing minimal changes in his behaviour through the

program, and who is supported to do so with as lowered risk as possible, and where the man is engaged in such a way as to manage the risk of retaliation, represents an equally important outcome as another man who achieves some level of behaviour change through the program.

Third, it is vital that research or considerations of the effectiveness of MBCPs address the impact of these programs on integrated service systems. This can include the extent to which the program has or hasn't assisted:

- child protection and family services workers to ensure safe conditions for children of the men participating in the program – for example, is there a reduction in the men's active attempts to sabotage the mother's parenting (Domestic Violence Resource Centre Victoria, 2009)? Are the men becoming more supportive of the mother and her children receiving appropriate social and health services, rather than attempting to isolate them from services? Is the man working towards providing a safer parenting environment for the children?
- corrections/probation and parole officers in their supervision work with domestic violence and sexual assault offenders. Has this made the management of offenders easier, and assisted with compliance of probation or parole conditions?
- courts to use appropriate civil and criminal justice system measures to protect women, children and others affected by the man's violence, and to make appropriate judicial decisions (for example, regarding bail conditions) based on the assessment of risk provided by the program
- local or regional multi-agency high-risk client strategies in managing risk for particularly high-risk offenders.

What's in a name?

The ability of a domestic violence perpetrator program to assist child protection and family services workers, corrections officers, courts, police and specialist women's services in their respective core business is vital in terms of its contribution to a coordinated community response towards women's and children's advocacy, and the web of accountability around the perpetrator. This is not a revolutionary perspective, and is a key platform of Duluth-based approaches towards situating domestic violence perpetrator programs as a component within a multi-faceted integrated response.

Along these lines, New Zealand readers would have fair recourse to emphasise their choice of the term 'Stopping Violence Services' as an expression of the systemic place of this work with men, a term that also refers to the strong links that many New Zealand tertiary-based perpetrator programs have with primary prevention and community engagement efforts (Gardner & Moore, 2013; Wilton, 2013). The narrower term 'men's behaviour change program' perhaps no longer



does justice to the multiple ways in which these programs contribute to women's and children's safety and dignity to exercise their human rights, and to men's accountability.

While these comments might not be revolutionary, for much MBCP work in Australia, the leap possibly has not been made from the provision of a program with partner contact as an adjunct and with an increasing focus on developing partnerships with other systems agencies, to the provision of a program that sits *within* an integrated or coordinated community response and which is designed to contribute towards this response. The differences between the two are both subtle and profound.

2. Stopping coercive control, not just violence

Evan Stark's 2007 book *Coercive control: How men entrap women in personal life* served as a significant refocus in the domestic violence literature. As women's advocates would readily attest, the focus on assaults, while obviously important, can obscure the underlying intention of men to entrap women through a range of subtle and non-subtle, direct and indirect, sophisticated and blunt coercive controlling tactics. Rather than an approach focusing on 'types of violence', physical, sexual, emotional, social, financial and spiritual abuse can best be understood as very broad categories attempting to depict the many ways in which women are deprived through male entitlement and privilege of their liberty and freedom to pursue their fundamental human rights.

Arguably, domestic violence perpetrator programs have not fully caught up with the implications of this refocus. This might especially be the case for some of the corrections or probation fields, with the focus on official recidivism and offences obscuring an understanding of entrapment and coercive control. While in Victoria the community-based sector has focused on 'violent and controlling behaviours' for some time (No To Violence, 2006), this doesn't fully encapsulate the pattern of sophisticated and 'under the radar' ways that many men use to restrict their partner's freedom.

This issue relates to the question of what is success in domestic violence perpetrator program work. This was investigated recently via an initial qualitative research component as part of a large multi-site longitudinal perpetrator program outcome study in the UK (Westmarland, Kelly & Chalder-Mills, 2010). The authors of this study explain that:

It is our contention that both the lack of evidence on, and narrow approaches to, whether domestic violence perpetrator programmes 'work' has contributed to their restricted, short term funding and stilted development in the UK. Opening up the field through a research exploration of what counts as success has the potential to move the field on.
(pp. 2-3)

To investigate what counts as success in this work, the authors interviewed, across five programs, 18 female partners/former partners, 22 men who were participating in or had completed a program, 6 program funders and 27 practitioners. Each person interviewed was asked questions about what success in the program meant to them. The priorities identified by (ex)partners were, in decreasing order of frequency, mentioned:



- respectful/improved relationships
- expanded space for action
- support/decreased isolation
- enhanced parenting
- reduction or cessation of violence and abuse
- the man understanding the impact of domestic violence.

The authors commented how the reduction or cessation of violence and abuse was mentioned less frequently than four other themes. While the reduction or cessation of violence is a necessary requirement for the entire set of six themes, the finding that these women wanted more than the violence to stop has important ramifications for work with men who perpetrate domestic and family violence.

The theme of an expanded space for action, for example, was described by the authors as:

Being able to enter the house without being scared, stay out late without feeling she would have to 'walk on egg-shells' the next day, spend time with family and friends are all examples of what we term *expanded space for action*. One of the impacts of living with domestic violence, and especially coercive control, is that women and children adapt their behaviour in an effort to prevent further outbursts: they narrow their space for action and live within the parameters the perpetrator sets. Being able to stretch this space was important to women, reflecting a sense of greater safety. Again the examples focused on mundane everyday eventualities which had previously terrorised them, for example, no longer feeling scared about making a 'mistake', such as breaking something or getting a bank charge. A decrease in tension created a better atmosphere, which in turn meant women felt safer and more comfortable. It is easy to underestimate the importance of such shifts, but one woman described this as getting her life back and others that they felt able to move forward in life ... (p. 5)

Through merging the perspectives of all interviewees, the authors concluded that:

'Success', then, means far more than just 'ending the violence'. It would be quite possible for the physical violence to stop but at the same time for women and children to continue to live in unhealthy atmospheres which are laden with tension and threat. Instead, we propose this more nuanced understanding of success in which the more subtle, though ultimately life enhancing, changes are recognised. (p. 16)



As with the previous theme discussed in this paper, contributing to coordinated community responses, this expanded version of success in perpetrator program work is by no means new to practitioners and program coordinators. Again, however, the field is on the brink of a step that is both subtle and substantial.

Since the start of this work, MBCP practitioners have rightly assumed that physical violence is not the only, or even the worst, type of violence experienced by women, and have embedded other types of violence into group curricula. Many programs have taken a concerted approach towards issues of power and control, working with men on their controlling behaviours, and attempting to explore how men's attempts to control their partners are tied up with dominant constructions of masculinity.

No right angle turn is required from any of this. Rather, the next step in fully applying an understanding of coercive control might involve addressing questions such as:

- What might this more expansive view of success mean for the work we do with men after (if) they have stopped or suppressed their use of physical violence?
- What might this mean for how we conceptualise the journey of change for men, and for how long this journey might take?
- What might be the implications for partner support work?
- What might we do differently if women's liberty, freedom and space for action are considered as important in this work as their physical and emotional safety?

3. Accreditation

At the time of print, no Australian state or territory ran an accreditation system for community-based domestic violence perpetrator programs. The New South Wales government requires program providers to be registered in order to receive referrals from government systems agencies. The providers must submit an extensive array of documentation to provide indirect evidence of compliance with state minimum standards. The Victorian Government is tasked with monitoring program provider compliance with the No To Violence minimum standards as part of each provider's funding service agreement review and renewal process. However, such monitoring is generally quite superficial at best and often non-existent. The lack of specific expertise in domestic violence perpetrator work amongst those responsible for monitoring such agreements is a major limitation.

Across the Tasman, New Zealand community-based Stopping Violence Services, which takes the majority of referrals through corrections, has until this year been accredited through an approval panel run by the Ministry of Justice. The panel was populated by very senior practitioners, leaders and policy workers in the domestic violence field, many with considerable expertise in domestic violence perpetrator interventions. In the US, state governments run certification or accreditation processes for Batterer Intervention Programs (BIPs), often requiring the program provider to



submit documentation concerning its ability to meet state-based certification standards, followed by an on-site audit process. This is generally overseen by a certification or accreditation board. The Texas Council on Family Violence, for example, conducts rigorous bi-annual audits on state-funded BIPs.²

Respect, the peak body for community-based domestic violence perpetrator programs in the UK, runs a two-tier accreditation system which program providers can be subject to on a voluntary basis. The Respect accreditation system is one of the most intensive and rigorous, at least in English-speaking countries, and represents a significant step up from certification processes in

the US. At the first level, program providers are assessed according to their capacity to achieve the Safe Minimum Practice Standard (Respect, 2012a). Programs that achieve this level are deemed to be safe in terms of their ability to assess and respond to risk, but are not accredited. The second level involves a much more rigorous process using the Respect Accreditation Standard (Respect, 2012b).³

A more detailed discussion of the UK accreditation process can be found in a later article in this journal edition (Q&A with Neil Blacklock, Development Director of Respect). In sum, the accreditation process is a two-stemmed flower. On the one hand, it was considered an important process for governments, stakeholders and consumers to have trust in both individual programs and in the perpetrator program field as a whole. Notably, as of early 2014, no Respect-accredited programs have had their funding cut despite a time of considerable financial austerity in the UK. Just as importantly, however, the accreditation process is enabling a relatively inexpensive process (in terms of dollars, not time) for agencies to conduct a thorough reflective practice process towards program consolidation and improvement.

In Victoria at least, women's family violence services are required to participate in an extensive accreditation process to ensure trust in service quality. It can be argued that the absence of a similar process for the MBCP sector can leave the field vulnerable.

This is especially as the accreditation process focuses mostly on the capacity of the agency to run a high-quality program through all the challenges and complexities that can occur over time due to internal and external changes and pressures. A program's effectiveness can be fickle if it depends on the passion, commitment and gender awareness of particular individuals – an accreditation process focuses on the program's capacity to embed quality practice without relying on any given practitioner.

Programs can become unstuck if, for example, the ability of male practitioners to identify and understand their own use, and impact of, male power and privilege in their work relies on the priority given to this by particular male workers at any given time. Rather than focusing on the individual goodwill of male practitioners, an accreditation system would consider the supervisory and collective systems in place that support and hold male practitioners accountable to their own journeys to unpeel the layers of male entitlement and unhelpful masculinities in how they conduct their work (Atherton-Zeman, 2011; Machen & Eva, 2013; Reynolds, 2011a, 2011b; Reynolds & Hammoud-Beckett, 2012; Vlasis, 2013).



Embarking on a high-quality accreditation process is time consuming both for program providers and the accrediting body. As the UK experience demonstrates, years of developmental work are often required to establish a quality accreditation process, and to support program providers to become accreditation ready. Accreditation also needs to be reviewed on a regular basis. Furthermore, accreditors need to have quite specialised knowledge of domestic violence perpetrator programs in order to avoid a simple ‘tick and flick’ process.

Nevertheless, accreditation, in different shades of intensity and rigour, appears to be a feature of perpetrator program monitoring in many jurisdictions outside of Australia. Its absence in Australia communicates that referrers, systems agencies and consumers/clients should take it on good faith that they can trust all existing programs all of the time to meet or exceed relevant minimum standards. This is an unusual ask for such a complex health and human services matter.

4. Narrowing the distance between community-based and corrections-run programs

Community-based domestic violence perpetrator programs have tended to evolve over the past 30 years in an organic, practitioner-led fashion (Phillips, Kelly & Westmarland, 2013; Vlasis, 2014). While particular models and approaches have had a strong influence on the field, the work has developed through a significant degree of trial and error, and learning from experience.

Many program providers would describe their work as ‘eclectic’, or that they draw on more than one model or approach. These diverse models or approaches are not homogenous in their underlying philosophies, particularly their positioning in relation to feminism (or feminisms), gender, and a systemic ‘versus’ clinical or psychological focus.

For practitioners, there are both promises and pitfalls in drawing on multiple models. Given the highly challenging and demanding nature of the work, learning from different approaches can help practitioners to benefit from each other’s strengths. The danger, however, is falling into the trap of unsystematic ‘technical eclecticism’, where the underlying philosophies and values of the program become inconsistent and confused (Lazarus & Beutler, 1993). This can result in the program exhibiting weak program integrity, or poor translation of a coherent, unified and integrated program theory into practice (Day, Chung, O’Leary, & Carson, 2009; Wales & Tiller, 2011). It can further result in confused and contradictory messages for both program participants and facilitators around the causes and contributors to men’s use of domestic violence, and around the road map that participants need to follow to work towards non-violence (Garvin, 2003).

Commenting on the New Zealand situation, and coming from a corrections literature perspective, McMaster (2013, p. 9) states that:

According to Wales and Tiller (2011): Threats to integrity can come from ‘drift’ (the gradual shift over time of the aim of the programme), ‘reversal’ (where staff reverse or undermine the approach of the programme), and ‘non-compliance’ (where practitioners elect, for reasons of their own, to change or omit parts of the programme). (p. 38)



When we consider the challenges faced by organisations in the community sector delivering interventions for men who use abusive practices, we would be hard-pressed to confidently state that our programs are meeting the benchmark of [program] integrity noted above. This is not a criticism of provider groups, but of a low resource base, dated programme design, lack of evaluation, inadequate supervision and a lack of adherence to a risk-need-responsivity model (Andrews & Bonta, 2006); all of which works against contemporary best practice.

However, practitioners of community-based programs also know very well the importance of flexibility in program delivery, including through groupwork. Strategic engagement with pertinent

disclosures during check-in, adapting program curriculum according to partner feedback or the particular characteristics of the group, and spending unplanned time making use of unexpected opportunities to deepen participation are all legitimate actions in the community-based practitioner's toolkit. Highly trained, experienced and skilful facilitation is required to make use of these flexible opportunities in ways that deepen program integrity and conceptual clarity, rather than becoming side-tracked.

However, domestic violence perpetrator programs run through state government community correctional services and probation departments can tend to operate from a different starting point. It has been argued that the drive to maximise program integrity has led to 'over-manualised' approaches within these settings, focusing on delivering the program as similarly as possible across iterations with limited flexibility (Morran, 2011). Philosophically, state-run corrections programs can also tend to place less importance on male entitlement and privilege, hegemonic masculinities and gender-based power and control than programs run by community-sector non-government organisations.

Some corrections-run programs, however, are becoming more flexible through the application of Risk-Need-Responsivity approaches and individualised case planning that adapts the program to each participant (Slabber, 2012; McMaster, 2013). In these ways some corrections-run programs are perhaps becoming more adept at tailoring their programs to individual risk and client profiles than some of their community-based counterparts. Furthermore, there is at least one Australian example of a unique alliance between a state-run corrections department and a community-based specialist women's domestic violence agency, resulting in a perpetrator program with strong feminist foundations (O'Malley, 2013).

In the main, however, there is a vast professional and communication gap in Australia between state government corrections-run domestic violence perpetrator programs (run in the community for men on community corrections or probation orders) and community sector MBCPs. While in theory corrections-run programs tend to work with higher-risk men convicted of a domestic violence-related crime, it is inaccurate to classify community-based program providers as necessarily working with mostly low or medium-risk men. Despite the considerable overlap in intention and purpose of these two contexts for running perpetrator programs, they often operate in separate silos with few opportunities to share professional development, reflective practice or skills. This is particularly unfortunate given that each sector has complementary strengths and weaknesses.



There is undeniably a conceptualisation and language gap that operates as a barrier to improved communication between the sectors. Just as invitations to responsibility, parallel processes and gender auditing might be terms infrequently used by managers and practitioners of state government probation-run programs, offence mapping, Risk-Need-Responsivity (Andrews & Bonta, 2007, 2010) and the Good Lives Model (Ward, Mann & Gannon, 2007) might be new concepts for practitioners working in community-based NGOs. Despite the different languages, traditions and to some extent philosophies, the work of both sectors can be strengthened through improved communication and skill sharing.

5. Individualised case planning

For a number of important reasons, domestic violence perpetrator program work has generally occurred through group-based interventions (No To Violence, 2006; NSW Department of Attorney General and Justice, 2012). The multiple benefits of offering this work through the modality of groupwork are not contested here. While a minority of perpetrators might not be suited to groupwork interventions, or to the characteristic types of groupwork curriculum offered by most perpetrator programs, there is a strong case to suggest for a well-resourced and high-quality group-based program, 'one size fits most' (Gondolf, 2012).

While few are arguing that groupwork is not a preferred modality for domestic violence perpetrator interventions, there are a growing number of calls for, and practice trends towards, tailoring programs for each participant (Day et al., 2009; Baker, 2010; Colorado Domestic Violence Offender Management Board, 2012; Slabber, 2012; McMaster, 2013; New Zealand Ministry of Justice, 2014). This involves other interventions that occur around and are connected to the groupwork component of the program, to enhance program effectiveness for each participant. Indeed, as McMaster (2013, p. 11) emphasises "Gone are the days of delivering generalised interventions with the idea that 'something would get through'".

One of the strands of a more individualised approach comes from the growing emphasis on case management work with domestic violence perpetrators (Murphy & Ting, 2010; NSW Department of Attorney General and Justice, 2012; West, 2012). A case management approach to this work assumes that while men's gender-based power to entrap and coercively control an (ex)partner based on male entitlement and privilege is at the heart of their choice to use violence, other factors can contribute to making these choices 'easier', and to the severity of the tactics they choose. These factors – AOD abuse, mental health issues, problem gambling or homelessness for example – do not cause domestic and family violence, but if they are part of a perpetrator's context, they make his task of choosing non-violence more difficult. A focus on these contributing factors – or criminogenic needs in corrections terminology – is by no means sufficient to address the man's use of violence and coercive control, but can help make the pathway easier for the man to choose non-violence.

There is a considerable body of research, for example, suggesting that AOD use is a contributing factor to men's use of violence and the severity of violence. The misuse of substances might increase risk for an episode of violence because it acts to heighten men's consciousness and engagement with their violence-supporting narratives, thereby helping to activate the processes by which they give themselves permission to use violence (Victorian Alcohol and Drug



Association, 2012). Thomas, Bennett and Stoops (2013) found in a large sample that domestic violence perpetrators with AOD problems were more likely to perpetrate severe violence than perpetrators with no AOD problems. In a review of large population surveys and other sources of literature, Braaf (2013) concluded that alcohol misuse is involved in approximately 50 per cent of all forms of partner violence, and 73 per cent of physical partner assaults. She concluded that the available research clearly demonstrates a positive relationship between perpetrator alcohol use and the severity and frequency of violence. Murphy and Ting's (2010) literature review found that substance abuse treatment can have a notably useful effect in reducing intimate partner violence amongst perpetrators.

Turning to problem gambling, Suomi and colleagues (2013) found that over half of the family members of problem gamblers reported family violence over the past 12 months. Furthermore, over one-third reported that the family violence was perpetrated by or against at least one family member exhibiting problem gambling.

Scott et al. (2013, p. 5) outline common criminogenic needs related to domestic violence offending as:

In the relationship domain, these include men's responses to recent separation or recent change in contact between accused and children. In the school/work domain, likely criminogenic needs are whether the accused believes he is at risk of losing employment as a result of charges as well as high rates of stress as a result of conditions such as unemployment, financial stress, or loss of job. In the antisocial cognitions domain, cognitions specifically recognized as relevant to domestic violence risk include jealousy, possessiveness, disrespect of women, disrespect of legal authority, and minimization or denial of abusive behaviour. Substance use as well, in terms of alcohol and drug dependence or abuse, noticeable increase in drug or alcohol use, or a tendency to become angry or violent when using drugs or alcohol, has been related to recidivism among perpetrators. In addition, the perpetration of lethal domestic violence has been associated with depression, desperation, and high levels of hopelessness.

A case management approach involves an individualised treatment plan that assesses the man's criminogenic needs or contributing factors to the severity and frequency of his use of coercive controlling tactics (New Zealand Ministry of Justice, 2014). These contributing factors might also affect his ability to participate in or get the most out of the program. The domestic violence program provider itself does not need to work directly with all major contributing factors, but might refer the man to appropriate services to address particular needs, with strong communication between all service providers involved to ensure consistent approaches and messages.

The importance of inter-agency clarity around approach and message consistency cannot be over-emphasised. Case management work to address the man's criminogenic needs should not be about not naming the violence. It is not an approach of "let's work with him on these other issues first and talk about the violence later". Allied sector agencies working with family and domestic violence perpetrators on particular issues related to risk, need to be trained and supported on how to name the violence when working with the man, how to work within a framework that does not blame alcohol or mental health issues for his behaviour, and how to



work in alliance with the coordinated community response that's holding him accountable for his behaviour.

There is much more to individualised case planning than consideration of these criminogenic needs or contributing factors, however (Baker, 2010; NSW Department of Attorney General and Justice, 2012; McMaster, 2013). Other components include:

- Regular opportunities for the man throughout the program to state, restate, renew and elaborate his goals for being in the program. This can be conceptualised as a journey from commencing the program based mainly on external motivations to attend (to avoid justice system sanctions, to see his children or save his relationship for example), to discovering and strengthening his internal motivations to attend and work hard towards change. Opportunities for each man to widen, deepen and personalise his articulations for being in the program can help to strengthen this internal motivation over time. While group-based conversations can be an ideal process for men to explore these internal motivations, and to hear other men's articulations resonate with their own, each man's reasons for being in the program are his own, and from this, the goals he wishes to work towards in terms of nonviolent relating and being.
- Tracking the nature and quality of each man's participation in the program, and not necessarily related, the risk he poses to his family members. The *Towards safe family* practice guide for MBCP providers in NSW, for example, includes a post-group session analytical tool, which enables program practitioners to chart and track the man's participation in the group session across a number of indicators (NSW Department of Attorney General and Justice, 2012). Regular (for example, monthly) whole-of-team reviews of the risk that each man poses to his family can be essential in tracking and monitoring risk based on available information from a range of sources (Respect, 2012b).
- Understanding each man's particular learning styles and preferences, and motivational profile – what is most likely to motivate him to work hard towards change (Scott et al., 2013).
- Engaging the man on his unique lifestyle and social milieu factors that either support or hinder the long-term sustainability of the changes he might be making in the program, and in his ongoing journey towards nonviolence (Acker, 2013; Morran, 2011, 2013a, 2013b). A man's journey towards taking responsibility for his emotional, physical, social and existential life more generally – an important reinforcer to his attempts to take responsibility for his use of violence – might in the long term involve some changes in the man's friendship networks, employment circumstances, hobbies, lifestyle and health behaviours. These are highly individual and personalised journeys towards responsibility taking, and can form an important part of a man's individual case plan, particularly in the later stages of his involvement in the program.

In a similar articulation of case planning, McMaster (2013, pp. 8–9) suggests that domestic violence perpetrator work can benefit greatly through individual case formulations that involve addressing questions such as:



- Who is this man and family/whanau (cultural and social considerations)?
- What place does abusive practice play in their lives?
- What are the barriers to change?
- What pathways can enhance change?
- What are the key factors that underpin and sustain pathways of abusive practice?
- What strategies can be suggested to minimise the barriers and establish new pathways to safety?
- Who do we need to involve to implement these strategies?
- How do we help the man and his family/whanau to implement the strategies?

Despite the potential benefits, most community-based MBCPs in Australia do not have the capacity within existing funding models to formalise and review individualised case plans – beyond comprehensive assessment, exit planning and informal attempts to keep track of individual participants’ journeys through the program as part of post-group session debriefing. Perhaps the most ambitious drive towards creating program capacity for individualised case planning is currently occurring in New Zealand, where the government’s new funding model will require community-based program providers to develop individual plans for each program participant (New Zealand Ministry of Justice, 2014).

6. Supplementary individual sessions

The trend towards considering the merits of individualised case planning has been accompanied by increased attention towards one-to-one sessions to supplement the groupwork component of a perpetrator program – in addition to the initial pre-group individual assessment session(s). Applications have included the use of a significantly greater number of pre-group individual sessions to deepen assessment and enhance readiness to change (Macrae, 2014); the use of periodic one-to-one sessions with a program facilitator at regular intervals throughout the groupwork component (Buckley & Schar, 2010); individual exit planning sessions towards or after the completion of the group (NSW Department of Attorney General and Justice, 2012); and case review sessions involving the man and the referring agency (O’Malley, 2013). Indeed, the program’s capacity to supplement groupwork with at least some post-assessment individual contact is a requirement to implement a considered case planning approach.

The author of the current article has had two practitioner-based experiences of weaving post-assessment individual sessions with men’s behaviour change groupwork. In one program, an individual session was offered after each man’s third or fourth groupwork session, to counteract the trend of a significant proportion of participants dropping out or losing motivation at about the one-quarter/one-third mark through the program. This session was designed to explore and address any developing or strengthening reasons for the man to consider discontinuing with the program, as well as to thicken developing internal motivational factors to stay with the program. In another setting, men at any stage of the program who were not participating at an acceptable level in the group program were temporarily provided with one-to-one work until they were ready to resume the groupwork component.



The use of supplementary individual sessions does come with some risks, including of participants taking the easier path of disclosing in a more 'private' setting what they might otherwise disclose in the group. Careful policy and practice principles are required to mitigate against these risks (Buckley & Schar, 2010). It is often best in this context for the individual work to be done by groupwork facilitators, rather than a practitioner from an external team or agency.

The use of individual practitioner, one-to-one sessions as an alternative to group-based domestic violence perpetrator programs is a completely different issue. Due to various issues such as geographical isolation (where no group-based program might exist within a reasonable vicinity), or client characteristics (for example, substantial/clinical social anxiety), *violence-focused individual counselling* might be the only available or appropriate option in some circumstances (Western Australia Department for Child Protection, 2013).

Unfortunately, no practice standards, practice guidelines or policy work exist in Australia to support the implementation of violence-focused individual counselling. Significant questions remain about how to conduct this work safely and appropriately, how to incorporate such work into systems approaches and coordinated community responses, and what partner contact might look like in this context. Until Australian governments prioritise and fund the development of such standards and guidelines, the conditions for safe and appropriate individual-based work with family and domestic violence perpetrators will not exist.

7. Program length and intensity

At the time of writing, the three existing state-based Australian minimum standards for running MBCPs specify 12 weekly sessions as the minimum acceptable program length (No To Violence, 2006; Queensland Department of Communities, 2007; NSW Department of Attorney General and Justice, 2012). Influenced significantly by the No To Violence minimum standards researched approximately 10 years ago⁴, industry opinion at that time suggested that this was acceptable as the minimum length for the group-based component of MBCPs.

The weight of international policy and practitioner opinion has shifted over the past seven years, and programs of this length are increasingly viewed as unacceptably short (Minns, 2012). For example:

- UK minimum standards state that each man must participate in at least 60 contact hours, including assessment, groupwork and any individual sessions provided by the program (Respect, 2012a). The latest guidelines for New Zealand Corrective Services-run perpetrator programs similarly stipulate a 60-hour intervention, based largely on 26 groupwork sessions.⁵
- A survey of 276 batterer intervention programs in the US found that the median and modal length of programs was 26 group sessions (Price & Rosenbaum, 2009). Furthermore, a recent Churchill Fellowship investigation of US BIPs concluded that the NSW minimum standard for program length should be increased to a six months' intervention period (Minns, 2012).



- A recent survey of European domestic violence perpetrator programs found an average program length of 20 sessions (Akoensi, Koehler, Lösel & Humphreys, 2013).
- The developers of the Caledonian System approach in Scotland concluded from their investigation of the research and clinical literature that longer programs have important benefits. They devised their program (including both group and individual work) to be of two years' duration (Macrae, 2014). Similar conclusions about the benefits of a two-year approach are being drawn elsewhere (Acker, 2013; O'Malley, 2013).

There has been considerable discussion about whether some, and perhaps many, men require a long intervention for behaviour change, particularly for these changes to be sustainable (Morran, 2013; Garvin & Cape, 2014). This discussion ties into debates around whether this work focuses mainly on education and skill-building towards the (relatively short-term) cessation or suppression of the more overt types and tactics of violence, what can be called first-order change or primary desistance; or more fundamental and long-term changes in perpetrators towards nonviolent identities and ways of being in the world, termed as second-order change or secondary desistance (Morran, 2011, 2013a, 2013b). The latter generally cannot be achieved in 12 or even 20-week programs.

McMaster (2013) calls for greater use of the Risk-Need-Responsivity model (RNR, developed by Andrews & Bonta, 2007, 2010) for community-based domestic violence perpetrator programs, in line with its widespread use in corrections services focusing on violent and general offending behaviour. With the 'N' and the second 'R' of this model referring to the importance of focusing on each offender's criminogenic needs (stable and acute dynamic risk factors and protective behaviours) and particular motivational and situational circumstances affecting his responsiveness to the program, the initial 'R' stresses the importance of not mixing offenders with substantially different risk profiles within the same program. This can result in relatively low-risk offenders coming to believe that their behaviour is inconsequential (and more acceptable) relative to the severe use of violence by high-risk offenders, and learning new violent and controlling tactics from these men. Furthermore, the higher-risk offenders, through being in the same 'one size fits all' intervention, participate in a program that is too short and insufficiently intense to make a significant dent in their violent offending, and in their interlocking identity and social/sub-cultural circumstances that reinforce it.

Program providers who receive an increasing proportion of referrals from mandated sources (courts, corrections, child protection), as is the case in Victoria, Australia, are finding the need to put considerable time into the early work of promoting men's readiness to change. Some men, irrespective of referral source, might take most of a 12 or 15-week program to become ready to put the hard work into change – just when the program is about to end. Spending more early time in the program on motivational interviewing and motivational enhancement strategies to support men's readiness to change is designed to reduce participant drop-out (Edleson, 2012; Murphy & Maiuro, 2009), and requires longer interventions.



Related to this is research demonstrating that participants with a 'lower stake in conformity' are more likely to drop out of perpetrator programs and to reoffend. As Edleson (2012, p. 7) writes:

... studies show there is a positive correlation between 'stake in conformity,' program completion, and lower rates of recidivism. Stake in conformity is a person's desire to maintain social bonds to family, friends, and social institutions in accordance with the norms of the community, in other words to conform.

An implication of this research is that men with relatively weak bonds to family and community, who are unemployed or in demeaning jobs, and/or have relatively little regard for legal and other social norms, might require additional motivational enhancement work to maintain their participation in the program. Indeed, the most contemporary Australian MBCP practice guide at the time of print includes a clinical tool to assist practitioners to review each man in terms of indicators that might enable or inhibit the degree and depth of his participation in the program (NSW Department of Attorney General and Justice, 2012, pp. 259–260). Again, this has implications for program length.

Another key factor concerns the ability of longer programs to work in an integrated fashion towards the safety and wellbeing of women and children. Lengthier programs enable partner contact and support, risk assessment and risk management, and engagement of men during potentially higher-risk times over a longer period (Vlais, 2010b). Furthermore, according to Gondolf's multi-site longitudinal study in the US, the first 15 months after intake into a domestic violence perpetrator program appears to be the key risk period in which reoffending might occur, suggesting the need for interventions to keep contact with men for at least this period (Edleson, 2012).

A related consideration is program intensity. Some corrections-based violent offender programs focus not only on attempting to tailor intervention length according to the degree of risk that the perpetrator represents, but also the frequency of intervention sessions (McMaster, 2013). The Tasmanian Family Violence Offender Intervention Program, for example, has trialled four weekly intervention sessions, at least for the initial period of the program.⁶ Indeed, as a practitioner, the author of the current article has often wondered whether a single group session is sufficient to generate program commitment for some men, and whether a second, shorter 'check-in' session each week (60–90 minutes) might keep the program more central in the man's life.

As McMaster (2013, p. 10) states:

Determining the [frequency of sessions] creates a degree of challenge, particularly for interventions that are community-based, in that gaining commitment to several sessions over the course of a week can be highly disruptive to the participant's lifestyle. This challenge also applies to workers/facilitators whose own lives will be altered by increased involvement in programme delivery.

Considerations of program intensity and duration also have relevance to the previous discussion on individualised case plans. Some men require a longer and/or more intense intervention than others, due to a range of risk-related, situational and contextual factors associated with their own specific case formulation (New Zealand Ministry of Justice, 2014).



8. Reframing partner contact

With a few exceptions, such as the New York model for BIPs⁷ and the Alternatives to Domestic Aggression program in Michigan (Garvin & Cape, 2014), partner contact is seen as an essential component of domestic violence perpetrator program work (No To Violence, 2006; Respect, 2012a, 2012b; Chung, 2013). As outlined in the most contemporary practice guide, at the time of writing, for MBCP work in Australia (NSW Department of Attorney General and Justice, 2012), partner contact involves considerations such as:

- seeing women in their own right (not just as partners or former partners of the men, and not just as parents)
- noticing and validating women's sense of agency
- patient engaging, building trust, and hearing women's stories and narratives
- risk assessment and risk management
- safety planning
- obtaining information on men's ongoing behaviour and holding them accountable for such (though not as the reason for partner contact)
- giving clear messages to women about domestic and family violence, to counter the propaganda they might be receiving from their partner
- directly providing support, advocacy and possibly counselling
- advocating for the woman's needs and providing appropriate referrals
- understanding, and realistically engaging with, women's hopes and expectations
- assisting with risk assessment and risk management regarding her children due to the perpetrator's use of violence, and as one avenue to work towards restrengthening the mother-child bond due to his tactics to sabotage this relationship
- determining whether the perpetrator is using his attendance in the program against her or as a controlling tactic, or is providing her with distorted information about the program or his participation in it.

In-depth qualitative research studies with partners themselves have confirmed the vital role that partner contact and support plays for their safety, advocacy and wellbeing (Howard & Wright, 2008; Smith et al., 2013; Opitz, 2014). However, in some cases they have revealed a diversity of experiences that women have received through the partner contact process, including situations



where the lack of sufficiently proactive, skilled or frequent contact has resulted in women receiving support below industry-accepted minimum standards (Smith et al., 2013; Opitz, 2014).

Partner contact can be exceptionally difficult and delicate work. The complexity of women's lives and the burden placed on them to perform most of the family's caring and household tasks can make contacting them difficult. Often many phone calls might be required to secure a safe and appropriate opportunity for her to speak (Chung, 2013). Partner contact workers require considerable skill to listen and respect women's narratives concerning love and hope (for him to change, for the relationship to continue) while also assisting them to identify and deconstruct the influences on these narratives coming from patriarchal, consumerist culture and/or his responsibility-minimising propaganda (Clavijo, 2014; Opitz, 2014). Practitioners need to bring into the partner contact relationship the agency's priorities of risk assessment and risk management, while respecting where the woman might want to focus the conversation on (Howard & Wright, 2008; Opitz, 2014). All these and other complexities are handled through an engagement medium that is primarily the telephone.

It is debatable whether current funding models for domestic violence perpetrator program work, at least in Australia, allow partner contact work to be done as well as it should be (No To Violence, 2010). For a relatively large program that works with 100 or more men per year, the partner contact role could, or should, easily absorb 0.6–0.8 EFT⁸, and for smaller programs, 0.4–0.5. Indeed, it could be argued that support provided to partners (and their children, either directly or indirectly) could justifiably be the focus of up to half of the overall program's resources. Yet the partner contact role is often limited to one or two days per week (or less).

Furthermore, a strong case can be made for reframing this work with partners as involving more than 'contact'. Most women who receive a partner contact service are not participating in any other family and domestic violence service at the point of initial contact, and indeed might never have (NSW Department of Attorney General and Justice, 2012). Partner contact is often the first specialised service that the woman has received to help her work through the wide range of issues listed previously.

These issues unfold through a process of journeying over time – and any single strand in this journey might require months of exploration. This journey is not only one towards safety, but also towards dignity, freedom and liberation from the man's coercive control and entrapment of her life. Whether provided by a specialised women's family and domestic violence practitioner employed by the perpetrator program, or a woman's advocate from a specialised women's service contracted by the program, and whether or not enhanced through a victim-survivor support group, this is quite involved and intense work. The term 'partner contact' perhaps does not do this work justice (Smith et al., 2013).

Indeed, in the UK this work is referred to as the 'Integrated Support Service' (ISS) provided to women and their children. While this term implies that the work comes from a service external to the perpetrator program, in most instances, the ISS is provided by the perpetrator program itself. The term highlights both the multiple strands of work with partners, and also its location with an integrated service system or coordinated community response.



A further important reframe of this support and advocacy work for women and their family concerns its length. Due to funding constraints, active contact/support for a partner or former partner often concludes when the man completes, or drops out, of the program. Yet it is sometimes at these points where the support provided to women needs to intensify, rather than decrease or stop. Smith and colleagues (2013), for example, found that towards or by the end of the perpetrator program, some partners in her in-depth qualitative study started to increase their informal efforts to hold the man accountable to his earlier promises to change. In these cases, the support provided to these women through the partner contact service over time enhanced her sense of agency, where she began on her own accord to 'draw a line in the sand' with him about his behaviour, and to make increasingly assertive attempts to communicate with him that she will no longer tolerate his behaviour. How the man responds to this depends on how well he has progressed through the program – if he perceives this as a threat to his control, he might resume or escalate some of his tactics of violence, resulting in increased risk.

Given this, and the reality that some men relapse after they complete the program, partner support should not be discontinued or weakened at this point. There is a strong case to be made for partner contact continuing for a period after the man has completed or discontinues the program.

9. Children's needs and voices

MBCPs have incorporated a focus on the effects of men's use of family and domestic violence on children for some time (No To Violence, 2006). In part, this has reflected social marketing research demonstrating that for some perpetrators, being invited to consider the effects of their violent behaviour towards their partner on their children (Donovan, Francas, Paterson & Zapelli, 2000; Donovan & Vlasis, 2005) or on their self-image as a 'good father' (Stanley, Fell, Miller, Thomson & Watson, 2009) can be an important motivational factor in seeking help to change their use of violence.

Indeed, social marketing campaigns have successfully used this research to recruit participants into newly developed perpetrator programs in Western Australia and the UK (Donovan et al., 2000; Stanley et al., 2009). Hunt (2010), however, highlights the often mixed motivations and attitudinal complexities held by men in terms of their desire to be good fathers, often expressed in part through a sense of entitlement to, or possession of, their children, and through authoritarian notions of respect. Harne (2011) reports on research findings that some children and young people would prefer not to have much or any further contact with their abusive father. This raises ethical dilemmas when we recruit and encourage men's participation in a program largely on the basis of appeals to their self-identify as fathers.

For some time programs have included a relatively minor focus on the effects of the men's violence on his children. This could be in groupwork curriculum, through a group session devoted specifically to this topic, and possibly through exploring this during group check-in activities. It has also become fairly standard for partner contact workers through their supportive work with women to consider the risk posed by the man's violence to their children. There is also the very beginning of a trend towards program providers offering contact with any former partner that the



man shares children with where he has current contact with these children – not just his current or more recent former partner (NSW Department of Attorney General and Justice, 2012).

There are emerging ways, however, in which some programs are attempting to extend this work so that the voices and needs of children and young people become more central, in similar fashion to the centrality of advocating for women. Unfortunately, these extensions are beyond the current resourcing of most programs in Australia, at least in their full form, as funding models were generally developed at a time when advocacy for children’s rights and welfare were not given the same priority as those of partners.

What matters to children

In an article titled ‘The need for accountability to, and support for, children of men on domestic violence perpetrator programmes’, Alderson, Westmarland and Kelly (2013) from the UK multi-site perpetrator outcome study Project Mirabal investigated what counts as success for children in terms of their father’s involvement in the program. While children themselves were not interviewed in this study, views were sought from 44 domestic violence services, and a large sample of perpetrators, their partners, program practitioners and program funders.

As with the *What counts as success* study reported previously on victim-centred outcome measures (Westmarland et al., 2010), Alderson and her colleagues isolated particular dimensions through which the men’s participation in a domestic violence perpetrator program would ideally benefit his children:

- changes in the father that would benefit the children – cessation of violence and controlling tactics providing increased child safety and wellbeing; the man understanding what it’s like for his children to live under a regime of his control; and reduced drug and alcohol use
- changes in the father-child relationship – through men’s enhanced communication/listening skills and emotional awareness, creating more opportunities for children to feel listened to and understood, and for their voice to be valued
- changes in the child’s functioning – similar to the earlier *What counts as success* study, (ex)partners “were more likely to focus on subtle everyday illustrations of the changes that they wanted to see/had seen for their children than the reduction/cessation of violence” (p. 189), including increased stability flowing through to improved relationships, social competence and school performance.

In an extension of this study, Alderson and colleagues (2013) combined this data with interviews of 13 children who were receiving support from a children’s worker as part of a domestic violence perpetrator program. They found that approximately half of the perpetrators interviewed had not told their children anything about their participation in the program. The authors argued (pp. 7–8):



Since a core principle of DVPPs [domestic violence perpetrator programs] is to hold men accountable for their behaviour, we argue that more consideration should be given to extending this to their children. This might take the form of programme sessions on finding the right language to talk to children about violence and abuse and about positive, healthy relationships. This may also ... start to reduce, where safe to do so, the burden on the mother to always be the one to explain and provide support for others on top of her own victimisation-survival.

More openness with children coupled with (linked to the previous finding) direct support for children, may also help manage expectations about the programme and change, especially if things are not going well. Just as managing women's expectations around change and supporting them in their decision making around staying/leaving relationships is a core part of women's support work, similar work may be needed for children – particularly in those cases where DVPP participation is explicitly linked to child contact.

Children's risk assessment in the context of perpetrator programs

One innovation concerns the formalisation of risk assessment and risk management approaches for the effects of men's violence on children and young people, based on existing knowledge of indicators of the nature and degree of risk to children posed by domestic violence perpetrators (Bancroft & Silverman, 2002). The Victorian Department of Human Services (2013), for example, has developed a comprehensive framework for use by specialist women's advocacy and men's perpetrator services, including a suite of risk assessment templates and tools.

Although involving children's perspectives in risk assessment and safety planning can be important (Alderson et al., 2013), this framework and the associated tools were designed to be of use even in situations where no direct contact with children occurs, where there is reliance on assessing risk through contact with one or more parents and other sources of risk-related information. The framework calls on specialist family violence services, including perpetrator programs, to consider each child of the perpetrator or victim-survivor in their own right, and for the program to engage in the ongoing assessment of risk to each child throughout the course of its work with the man and his (ex)partner. Furthermore, based on the Best Interests Casework Practice Model⁹ that underlies child protection and family services responses in Victoria, the framework and tools are intended to support family violence practitioners to assess the impact of the violence on the child's safety, stability and development – in other words, a broader and more multifaceted view of advocating for children's needs and rights than consideration of safety alone.

Child contact and integrated children's support services

A second emerging direction in centralising the voices and needs of children concerns child contact work. At most, a handful of MBCPs in Australia currently offer a child contact service analogous to partner contact. A recent UK study found a lack of children's support services that work with children who are still living with the perpetrator, conducted by or integrated with a domestic violence perpetrator program (Alderson et al., 2013).



As described in a recent MBCP practice guide “this can be particularly difficult work and should not be entered into lightly” (NSW Department of Attorney General and Justice, 2012, p. 113). Drawing on the Scottish Caledonian System experience with child contact work, the guide outlines a range of complexities including mothers’ own unawareness of, or defensiveness about, the effects of their partner’s violence on their children; the possibility of children experiencing forms of violence (for example, sexual abuse) from her partner that she is unaware of; the fact that children might have different wishes and needs than their mother but with less power to express or advocate for them; adolescent use of violence in the home (for example, against the mother) related to the father’s use of violence; recruitment of the children by the perpetrator into the patterns of abuse against the mother; and the possibility in some situations of the mother abusing the children.

There is significant existing expertise to draw on in working with children living through family and domestic violence to support the development of high-quality child contact services (Bancroft, Silverman & Ritchie, 2011; Castelino, 2013). One of the most comprehensive child contact services making use of this available knowledge is implemented by the Caledonian System approach, outlined in a previous edition of this journal (Macrae, 2014).

In their research with 13 children receiving an integrated children’s support service through a domestic violence perpetrator program, Alderson and colleagues (2013) found that the intervention was:

... helping children to rebuild their self-esteem, express their feelings about the violence in a safe environment, and importantly, to receive reassurance that the violence was not their fault. Threaded through this, children were feeling a greater sense of stability in their lives. (p. 14)

For most program providers who do not have the resources or internal expertise to explore the possibility of introducing a child contact service, close working relationships with family services providers (and child protection authorities) are of crucial importance. Indeed, such relationships are vital even when a child contact service is present – the mandate of the children’s services worker of the Caledonian System, for example, is to advocate for the children’s needs through the relevant child protection, family services, schools-based and other systems that the child might have contact with (Macrae, 2014). Child-centred community sector agencies and government authorities are increasingly being seen as vital partners in information sharing and collaborative work with domestic violence perpetrator programs, to ensure that coordinated community responses are both child and woman-centred.

Related to this are efforts by domestic violence perpetrator programs to train and support (for example, through secondary consultations) family services and child protection practitioners to:

- strengthen the visibility of domestic violence perpetrators in their casework, to avoid a ‘failure to protect’ approach that places responsibility on the non-offending parent (Meredos, 2004; Murphy, Paton, Gulliver & Fanslow, 2013; Western Australia Department for Child Protection, 2013)



- understand the ways in which many domestic violence perpetrators sabotage the mother's parenting and the mother-child bond (Domestic Violence Resource Centre Victoria, 2009)
- understand each perpetrator's unique and common patterns of coercive control and violent behaviour, and their effects on the family (Bancroft, Silverman & Ritchie, 2011; Edleson & Williams, 2007), including from a human rights and 'space for action' perspective (Westmarland & Kelly, 2012)
- engage effectively with domestic violence perpetrators to assist with their assessment process for the family, refer the man to appropriate intervention programs, stay in contact with him through motivational enhancement and other strategies to support his participation and the program, and to work jointly with the program to assess any progress in reducing risk and increasing his safe parenting capacity (Western Australia Department for Child Protection, 2013).

Indeed, David Mandel, founder of the Safe and Together model bringing together child protection, family services and family violence systems in the US, describes this work as a "perpetrator pattern based, child centred, survivor strengths approach to domestic violence".¹⁰

Fathering 'after' violence programs

A further emerging direction in the centralisation of children's needs and voices in the work concerns the development of fathering programs for men who have completed, or are undergoing, a domestic violence perpetrator program. An expanding literature base is developing focusing both on particular program pilots and reviews of quality practice principles for these innovations (Coffey, 2009; Holmquist, 2013; Humphreys, Smith & Laming, 2013; Scott, 2012a, 2012b).

Conducted through group-based interventions specifically focusing on a 'fathering after violence' theme, and/or through one-to-one case management, the current understanding of core principles to drive quality practice include:

- continuing assessment and monitoring of the man's use of violent and coercive controlling tactics through collaborative, interagency approaches, rather than assuming they have all ceased through his prior or current participation in a domestic violence perpetrator program (Mandel, 2014; Scott, 2012b)
- applying typical domestic violence perpetrator program minimum standards, such as 'mother contact' (with similar objectives and processes to partner contact) with the man's current or former partner parallel to his participation in the program, and co-gendered facilitation (Holmquist, 2013)
- a predominant focus on power and control issues rather than specific parenting skills, such as the effects of the man's behaviour on his (ex)partner's ability to parent or self-centred parenting through a sense of entitlement for example (Hunt, 2010)



- a concomitant focus on authoritarian, harsh methods of disciplining, characteristic of many domestic violence perpetrators (Scott, 2012a)
- a program philosophy emphasising reparative and restorative parenting that strengthens the man's accountability for his past (and possibly ongoing) abuse, and how he relates to his children in the context of this abuse (Holmquist, 2013; Scott, 2012a).

Like all domestic violence perpetrator programs, 'parenting after violence' initiatives need to be constructed carefully with attention paid to their possible risks (Scott, 2012a). The safety and appropriateness of commencing a 'fathering after violence' program before the man has completed a domestic violence perpetrator program is contentious. (For example, see Respect, undated). A current major multi-method Australian Research Council Linkage Project involving three universities and over 20 industry partners across three states will develop good practice principles for these and other programs intervening with fathers who use domestic violence. This will considerably advance the state of the field by the second half of this decade. The potential for domestic violence agencies to offer a two-phase intervention for men referred by child protection and family services providers – a domestic violence perpetrator program followed by a fathering after violence intervention – appears a promising way to bring children's voices and needs closer to the centre of coordinated community responses.

Programs that address fathering by men who perpetrate domestic violence, and the role of generalist parenting programs in screening and responding to men who perpetrate violence, is currently being researched through a major three-year Australian Research Council Linkage Project, *Responsible, Responsive and Reparative Fathering in the Context of Domestic and Family Violence*.¹¹

10. Community intervention

Brief mention will be made of the final emerging direction for domestic violence perpetrator programs in Australia, one that is more characteristic of programs provided within particular community contexts. While it has always been the intention of MBCPs to include some focus on wider engagement with the community (No To Violence, 2006), many providers have struggled to open up opportunities for this. The gap between tertiary programs and social justice-based primary prevention activities has seemed too vast.

Tertiary-end work with domestic violence perpetrators has opened up opportunities for community education and community intervention work in some contexts, however. Work to develop service system responses and programs for Aboriginal men who perpetrate family violence almost always necessitates extensive broader community-based work to enable program acceptance and trust, and to connect with cultural healing and community advocacy (Francis & Forrester, 2013; Mosby & Thomsen, 2013). The recent evolution of a Vietnamese-speaking MBCP in Victoria has gone hand-in-hand with significant awareness-raising work of family violence issues within local Vietnamese communities (McIvor, Van Nguyen, Griffiths & Foeltz, 2013). Stuart and Loiterton (2013) detail the strengthening of a rural MBCP through a range of patient, low-key community engagement strategies over time, including the recruitment



and training of a local police officer as a program co-facilitator. Furthermore, community-based stopping violence services in New Zealand describe the experience of engaging in White Ribbon Day and other mobilisation strategies focusing on attitudes and beliefs condoning men's violence against women (Wilton, 2013), a trend found increasingly amongst some Australian MBCP providers.

The above examples share the responsibility for community engagement and mobilisation strategies resting primarily with program and/or broader agency staff. There are fewer examples of program providers creating careful and well-supported opportunities for domestic violence program participants to engage in community mobilisation activities.

In one of these, Gregory and Woodward (2013) describe the early development of a peer mentor program at Christchurch Women's Refuge, involving both women survivor-victims and male perpetrators of domestic violence. The intended purpose of the program is not only to provide peer mentorship support for women and men participating in the survivor support and perpetrator intervention services run by the Refuge, but also to engage in wider outreach and community education. As with peer mentor arrangements supporting experienced and 'successful' MBCP participants to support those just entering the program, or to act as a third and/or fourth facilitator in the room, the Refuge is engaging in this work carefully due to the potential risks and pitfalls involved (NSW Department of Attorney General and Justice, 2012).

Developing opportunities for even a small proportion of program participants (who have worked hard to change their behaviour over an extensive period) to assist in community mobilisation and engagement activities is difficult. The best intended plans can fail, due to the relative lack of men who engage in the change journey with sufficient depth to perform these roles, and the resourcing required to monitor and support their activities in the community (Hart, 2009). Indeed, one can argue that community engagement work around men's violence against women might be counterproductive if male allies – former domestic violence perpetrator program participants or not – have not journeyed through a broader understanding of the intersectionalities of multiple sites of privilege and oppression, that includes taking a stand against homophobia, transphobia, racism and discrimination against people with disabilities (Jensen, 2013; Pease, 2010).

However, as Acker highlights in a later article in this journal edition, the examples of former perpetrators who do journey to become even more nonviolent than most men in the community, provide hope and inspiration for more widespread social change. The work by these men to peel back the layers of male privilege, entitlement and violent masculinities is by no means disconnected from the work that possibly every man must do to recognise our use of gender-based power and unearned privilege that denies women and children the space to exercise their human rights (Pease, 2010).



A final note

This list of 10 emerging directions for domestic violence perpetrator program work in Australia is not all encompassing, nor might it be the best way to categorise the various trends that we might encounter in the work over the horizon. Readers might identify other priorities or innovations that have been left out, or not given sufficient value in this article. An analysis like this, even when based on an overview perspective from a specialist peak body, is always subjective.

Little mention, for example, has been made of the work by Aboriginal-controlled community organisations and mainstream agencies to develop programs for Aboriginal men who perpetrate family and domestic violence (for example, Arney & Westby, 2012; Francis & Forrester, 2013; Mosby & Thomsen, 2013, 2014; Thirdforce Consultancy Services, 2012), or the very early examples of programs provided for specific ethnocultural communities (McIvor et al., 2013). This article also hasn't addressed important questions concerning how to support agencies to measure program effectiveness, when a lack of time, resources and available methodologies appear to be significant barriers (Geldschläger, Ginés, Nax & Ponce, 2014), and when evaluation studies still predominantly rely on perpetrator self-report and official measures of recidivism (Hester, Lilly, O'Prey & Budde, 2014).

What is possible in this work will always be constrained by the available resources. Many of the emerging trends, and the conclusions being reached based on latest industry understandings, point to the significant under-resourcing of this work. Not only do many, perhaps most program providers in Australia work with far more men and their families than they are funded for, the goal posts are shifting in terms of what's considered both minimal, and optimal, practice. Providers are being squeezed by increasing demand – a consequence of improved service integration across systems agencies – and rising industry expectations about what quality practice involves.

However, in the process of proactively involving ourselves in men's lives to support the struggle of women and children towards safety and dignity (Vlais, 2014), it is important that we leave no stone unturned in investigating what might be required for high-quality practice. It's not for practitioners and program coordinators to hide the needs and opportunities associated with properly resourcing this work, but ultimately, for governments to decide whether their devotion to economic rationalism is worth more than the lives of women and children.



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Rodney is an experienced men's behaviour change program facilitator and practitioner, and is periodically involved in providing on-the-ground services. He does his best to keep a strong footing in his social activism roots, and is influenced by ecofeminism and autonomous movements that attempt to transform hierarchical power relations.

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ENDNOTES

1. The term 'domestic violence perpetrator programs' will be used interchangeably with 'men's behaviour change program' in this article. While the former term is problematic due its use of the reductive label 'perpetrator', this article argues that the latter term conveys an overly narrow view of the work.
2. www.tcfv.org/our-work/information-for-batterers/bipp-accred
3. See <http://respect.uk.net/work/work-perpetrators-domestic-violence/accreditation> for further information on the Respect accreditation process.
4. No To Violence identified the need to update its minimum standards four years ago, but has been unable to attract the funding necessary to do so.
5. www.nzfvc.org.nz/?q=node/1657
6. www.safeathome.tas.gov.au/offenders/fvoip
7. www.nymbp.org
8. Effective Full-Time Equivalent
9. www.dhs.vic.gov.au/for-service-providers/children,-youth-and-families/child-protection/specialist-practice-resources-for-child-protection-workers
10. <http://endingviolence.com/our-programs/safe-together/safe-together-overview/characteristics-of-the-safe-and-together-model-suite-of-tools-and-interventions/>
11. See <http://bit.ly/RRReF>



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