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Challenging the Gendered Approach to IPV Research: Working with Perpetrators and Victims

Elizabeth Bates
University of Cumbria

Jenny Mackay
Coventry University

Sarah Wallace
University of South Wales
Aims of the Symposium

Challenge some of the current practice in this area:
  Working with the Duluth model and solely male perpetrators
  Working with female victims and neglecting men and LGBT

Discuss new research that questions traditional models and approaches

Elizabeth Bates: *Review of domestic violence perpetrator programmes within the UK*

Jenny Mackay: *Risk factors for female perpetrators of intimate partner violence and abuse: A systematic review*

Elizabeth Bates: *Hidden Victims: Men and their Experience of Domestic Violence (apologies Nick Smithers is unable to present)*

Sarah Wallace: *Male victims of domestic abuse: An exploration of needs*
Review of Domestic Violence Perpetrator Programmes in the UK

Dr Elizabeth Bates
Elizabeth.Bates@cumbria.ac.uk

Dr Nicola Graham-Kevan, Lauren Bolam
& Dr Abigail Thornton
Overview

• To give a brief overview of the background literature

• Present findings of a review of UK domestic violence perpetrator programmes
• To give a brief overview of the background literature

• Present findings of a review of UK domestic violence perpetrator programmes
• To discuss the lack of research informed practice in this area

• To discuss the implications and future directions
Feminist Theory and Literature

Cause of IPV is gender; it is a gendered crime

IPV is driven by patriarchal values and control

Not psychopathology or personality but socially and historically constructed control – patriarchy

IPV male perpetrators are different from other offenders
How does it impact perpetrator interventions?

• Duluth: first multi-disciplinary program

• Re-education not treatment

• Men’s violence understood as not "stemming from individual pathology, but rather from a socially reinforced sense of entitlement." (Paymar & Barnes, ND)
The Duluth Model

- Pence & Paymar, (1993)
- Developed by activists with 5 battered women and 4 men
- IPV is men’s use of patriarchal power and control - political
Effectiveness

- Research shows it is unsuccessful – e.g. Babcock et al. (2004) meta-analysis ($N=22$) found minimal effects.

- Effect sizes close to zero (Jewel & Wormith, 2010)

- Feminist researchers speak more favourably (e.g. Gondolf & Jones, 2001) – issues with evaluation design

- Others grounded in evidence based practice (e.g. Dutton & Corvo, 2007) are more critical and using different methods have demonstrated different outcomes
What the Duluth Model ignores

• Risk factors (e.g. Moffitt et al., 2001)

• Overlap between IPV, aggression and control (e.g. Bates, Graham-Kevan & Archer, 2014)

• Sex parity and mutuality in IPV (e.g. Langhinrichsen-Rohling, et al., 2012)

• Perceptions of IPV (e.g. Harris & Cook, 1994)

• Same-sex relationships (e.g. Carvalho et al., 2011)
Issues with evaluations of current DVPP

- Issues with entry criteria and retention/attrition
- Lack of attention to situation/contextual factors
- Often qualitative and only using victim data
- Lack of long-term follow up or lack of effect sizes reported
- Small sample sizes and a lack of a control group
- Duluth model experiences “immunity” from empirical evaluation

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Review of UK DVPP (part of larger review)

- Aim of the review was to conduct a review of current IPV perpetrator provision within these areas.

- The objective of the review was to address the following key research question: what are the characteristics of IPV perpetrator intervention programs within the UK?

- This will include reviewing the population they serve (e.g. male or female; age range), source referral (e.g. court-mandated, voluntary/self-referred) and the program characteristics (e.g. curriculum informing the program).
Method

• Questionnaire – developed in US with ADVIP

• Recruited from prison, probation, PCCs, online searches and charities

• Responses: 21 out of 218 contacted – 10%

• Further reviewed accreditation procedures within UK
Key Findings (Descriptive)

• Noteworthy reluctance to engage: “Now I know the source of the research I do not wish to respond”

• Range of settings (e.g. groups) and skills (e.g. communication skills, managing emotions)

• Majority approach – CBT (85.7%) and Power/control (52.4%)

• Variation in length (12-52 sessions to 12-70 for high intensity)

• Males only (81%) and LGBTQ specific services (14.3%)

• Data: 95% did, 61.9% descriptive, only 28.6% recidivism rates and 23.8% external evaluations
Key Findings from literature

- Correctional services Advice and Accreditation Panel
  1) Healthy Relationships problem thinking and attitudes
  2) Community DVP – community delivered
  3) Integrated domestic abuse programme – community based, more feminist
  4) Building better relationships – “next stage”

- Few reviews available
- Bloomfield & Dixon (2015) $N = 6,695$ small but significant reductions in reoffending – many men still reoffended
- Bullock et al. (2010) – variety in delivery and data collection – only 40/2986 collected pre, post and follow up
Key Findings from literature

• Respect accreditation
  Based in feminist theory
  Holds men solely responsible, choose violence due to gender based entitlement
  “denial and minimisation of abusive behaviour or any justifications for abusive behaviour including the use of drugs or alcohol”

• Project Mirabal (Kelly & Westmarland, 2015)
  Data from women – interviews or nominal data
  No pre and post analysis, lack of clarity around sample size, no consideration of women’s behaviour, no effect sizes
Key Findings from literature

- Dixon et al. (2012) critiqued Respect’s mission statement

- Focused on key issues: gender as cause, majority of men’s violence, women’s violence if self-defensive, gender is most important risk factor

- Respect refused requests for an up to date mission statement

- Men’s Advice Line
Evidence Based Practice?

• Lack of evidence based practice – evidence is not informing DVPP

• Lack of methodologically rigorous evaluations – immune from the need

• Lack of available DVPP for women or LGBT community
New Programmes – Inner Strength

- Trauma observed in children and in partner violent men and women
- Works on Emotional vocabulary, resilience, perspective taking, DBT - mindfulness, self soothing, radical acceptance, safe place. Trauma focused work, Functional assessment
- Large effect sizes: effect in improving emotional regulation and reducing more unhelpful forms of coping
- Preliminary findings suggest no evidence could be found to link any of the cohort with Domestic abuse reoffending since release
- Contact: Dr Nicola Graham-Kevan: Ngraham-Kevan@uclan.ac.uk
New Programmes – Up2U: Creating Healthy Relationships

- Intervention programme for people who admit to using abusive and/or violent behaviours in their intimate partner relationship

- Suitable for: Males, Females, same sex relationships

- Integrating research on attachment theory, trauma informed approached, emotional deregulation

- Learning from ‘What Works’ and Risk/Need/Responsivity

- Clear assessment of risk and need through motivational interviewing – 6 sessions of assessment and engagement

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Individual Needs

• Programme 6 – 40+ weeks

• 1-2-1 or group

• High intensity 2 sessions per week

• Modules
  – Thinking, Feeling and Behaviour
  – Relationships (Transactional Analysis)
  – Skills for Change (emotional regulation)
  – Skills for Change 2 (Complex Emotions)
  – Substance Misuse
  – Sexualised Behaviours
  – Stalking Behaviours

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Up2U – the story so far....

- 2015/16 data - 115 referrals
- Referrals: 80 M and 35 F
- Joint abuse
- Evaluation ongoing
- University of Portsmouth – Dr Dominic Pearson, Dr Claire Nee
- Evaluation Design – Multi-site
  - Random Control Trial
  - Process Evaluation

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Female:
–‘I have learned how important my children are to me and that I must put them first before entering a potential domestically abusive relationship. I understand that my main trigger is trust and being lied to, so I am now making every effort to be less defensive and let people in’

Male:
–‘I am able to control my anger and change my negative thoughts into positive thoughts, I'm taking my time in making decisions and more patient with people’

Amy.Ford2@Portsmouthcc.gov.uk

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Concluding Thoughts

• Evidence against men’s control theory

• Still influential model in practice

• There is a need for change for:
  – More services for men
  – Intervention for women perpetrators
  – Perpetrator programmes grounded in evidence based practice and not politics
Thank you for listening!


- Elizabeth.Bates@cumbria.ac.uk
- 01228 616328