



***The Experiences of Service Users and their (Ex)-Partners:
An Evaluation of the New Directions Service, Cambridge***

Politics, Psychology & Sociology Tripos- Part IIB Dissertation

Word Count: 10,000

Abstract: This study is a qualitative investigation of the, “New Directions Service” (NDS) domestic violence intervention programme in Cambridge. NDS works with the perpetrators of domestic violence to facilitate long-term behavioural change by expanding definitions of abuse, challenging abusive behaviour and providing skills training. In doing so, the service hopes to better ensure the long-term safety of the women and children involved in the perpetrators’ lives. This study explores the impact attending the course had on perpetrators and consequently, their (ex)-partners. Thematic analysis was used to analyse interviews with perpetrators and their (ex)-partners. Complimentary data from self-reported and partner-reported abusive behaviour inventories were also analysed. The key findings of this study were as follows: Firstly, that the course proved successful at minimising abusive behaviours and increasing (ex)-partner perceptions of safety. Secondly, that the service improved the sense of agency in both groups: motivating perpetrators to take responsibility for their behaviour and providing (ex)-partners with a voice. In many cases this led to more mutually supportive and respectful relationships. Thirdly, that the needs of both groups were complex, requiring multifaceted and long-term support. Implications for future programme delivery are also discussed.

Introduction

Background and Context

The UK Home Office defines domestic violence as, “*any incident of threatening behaviour, violence or abuse [psychological, physical, sexual, financial or emotional] between adults who are or have been intimate partners or family members, regardless of gender or sexuality,*” (Home Office, 2011, pg. 6). Worldwide, this violence is disproportionately perpetrated by men and directed towards their female partners or ex-partners; a pattern which remains regardless of age, wealth, race or culture (WHO, 2005). Domestic violence causes serious physical and psychological health problems, which can persist long after abuse has ended (WHO, 2002) and contributes to female poverty and homelessness. The disproportionate impact of violence against women has been recognised as a human rights violation by the UN and ending violence in the home is considered a priority in rectifying this (Council of Europe, 2002).

Home Office statistics for the UK reveal that around one in four women will experience domestic violence at some point during their lifetimes and around 4-6% of women report abuse from an intimate partner every year (Chaplin, Flatley & Smith, 2011). This is thought to cost the UK around £16 billion a year in additional pressure on services, lost economic output and human and emotional costs (Walby, 2009). In the Cambridgeshire context, British Crime Survey data suggest that 15,173 women aged 16-59 were the victims of domestic violence in 2010/11 and tackling domestic violence is considered a priority for improving health in the area (JSNA, 2011).

The Development of Domestic Violence Perpetrator Intervention Programmes

In the UK, the women’s refuge movement began providing support and shelter to the victims of abuse in the late 1970s but it was soon recognised that without engaging with perpetrators, no real headway into ending domestic violence could be made (Barner and Carney, 2011). Domestic violence was criminalised and increasing numbers of men were sentenced to prison or judicial monitoring on account of their violence in the home (ibid.). These sanctions however, affected change through encouraging suppression of deviant behaviours and once external monitoring had ended many men continued to offend (Dobash, Dobash, Cavanagh & Lewis, 2000). It was realised that no long-term change in perpetrator behaviour would occur without altering their beliefs about the acceptability of violence towards women and many UK and US women’s groups began offering psycho-educational programmes to perpetrators of violence (Dobash & Dobash, 1992).

These, “Domestic Violence Intervention Programmes” (DVIPs) have several advantages over traditional sanctions. Firstly, unlike sanctions, they offer the possibility of a permanent cessation of abuse through encouraging internal reflection and change in the perpetrators (Dobash et al, 2000). This is particularly important as criminal sanctions cannot remove perpetrators from the community completely and most perpetrators remain in relationships, either with their victim or with a new partner (Respect, 2011). Indeed, many victims do not want their (ex)-partner to be arrested or imprisoned and would rather he was encouraged to change while remaining at home (ibid.). If the perpetrator is the sole breadwinner removing them can actually worsen a victim’s quality of life (ibid.). In addition, community based programmes are able to work with, and provide risk management for, perpetrators who are not

in the criminal justice system (ibid.), and, by being able to sentence men to DVIPs rather than prison, judges can free up prison spaces for perpetrators of crimes where incarceration would be more effective (Gondolf, 2002).

Initial concerns that programmes would provide false hope to victims and potentially prove dangerous, have meant DVIPs have been integrated with Women's Support Services. All (ex)-partners of perpetrators on programmes are contacted by these services to ensure that they receive any support they might need. With DVIPs as another source of referral, many women's services have found that working with them has enabled them to expand their reach and work with women who may not otherwise have come forward (Respect, 2011). By being in contact with the (ex)-partners, practitioners working with perpetrators can also verify their accounts of their home lives and ensure they are not misrepresenting the content of the course, thus providing more accurate risk assessments (ibid.).

The development of DVIPs in the UK has been slow, especially compared to the USA which had 2,500 DVIPs in criminal justice settings by 2007 (Price & Rosenbaum, 2007 in Saunders, 2008). The first court mandated DVIPs only appeared in Britain in the late nineties (Dobash et al, 2000) and as of 2009 there were only 47 DVIPs operating within the criminal justice system (Williamson & Hestor, 2009). Community-based programmes are also sparse. A membership association for community based DVIPs, "Respect", was established in 2000/1 (<http://www.respect.uk.net/pages/history.html>) with a Minimum Standards of Practice established 2007. However, to date, only 9 programmes are fully accredited, with 13 more audited to provide interventions on behalf of the family courts (www.respect.uk.net/pages/accreditation-status.html). To date there are no accredited programmes in Cambridgeshire despite a council commitment to help programmes reach accreditation (Cambridgeshire County Council, 2008)

Programme Typologies

Most programmes in the UK have been modelled on their US counterparts and so replicate their pro-feminist approach (Murphy & Mullender, 1992), with domestic violence seen as symptomatic of pervasive gender inequality in society (Babcock & LaTaillade, 2000). Physical violence and controlling behaviours are viewed as tactics to maintain power and control over female partners and, by extension, maintain the global domination of men over women (Adams, 1988). Although early programmes were purely psycho-educational, the majority now follow a three stage format (Healey, 1998). Psycho-educational techniques are used to encourage perpetrators to accept responsibility for their behaviour, expand beliefs as to what constitutes abuse and recognise the effect their behaviour has on their partner. (Babcock & LaTaillade, 2000). Cognitive behavioural therapy (CBT), relaxation and anger management techniques are then used to teach men alternate responses to situations where they may respond abusively (ibid.). Although DVIPs are not therapy, many programmes also provide tailored support for psychological or substance abuse issues which can hinder men's efforts to change (Gondolf, 2002).

Alternate typologies for DVIPs do exist, although they are much less prevalent (Babcock & LaTaillade, 2000). They fall into two broad categories- psychotherapeutic and interactional models and are highly controversial. Psychotherapeutic approaches maintain that domestic violence is the result of psychological trauma, often caused by experiences in childhood, for

which perpetrators should receive extensive psychotherapeutic counselling (Stosny, 1995). Proponents deny the gender asymmetry in domestic violence and argue that perpetrators can be better predicted by personality disorders and substance abuse problems than by gender (Dutton & Corvo, 2006).

This approach is ethically problematic, however, as explaining domestic violence as a function of psychological difficulties allows perpetrators to sidestep responsibility for their actions and decreases their perception of their ability to change (Adams, 1988). Many argue that therapists are, “taken in” by perpetrator claims to be out of control when in reality they are highly selective, both in their use of violence and controlling behaviours, and in their target victims (Ptacek, 1988). There is no evidence of a universal “batterer personality” that predicts abusive behaviour (Gondolf, 2011), and psychotherapeutic theories cannot account for the majority of men who come to DVIPs with no intra-psychic disorder whatsoever. Pro-feminist models accept that, for some perpetrators, psychological difficulties and substance abuse can exacerbate perpetrator violence and most either provide tailored counselling for those issues, or refer to other services which can help (Worcester, 2002). To claim however, that intra-psychic trauma is the only cause of domestic violence vastly overstates the case.

Evidence denying a gendered dimension to domestic violence is also weak and highly selective. The surveys used to support the claim of equivalent violent and abusive behaviours in men and women are not representative and have been highly criticized for being blind to the context and motive of violence, as women are most often violent in self-defence (Belknap and Melton, 2005). Claims that there, “*is no norm of wife assault*” (Dutton, 2010, pg. 8) are based on simplistic surveys of explicit attitudes asking respondents whether they agree that hitting a partner is acceptable (Smith, 1990 in Dutton & Corvo, 2006). To take such studies at face value contradicts most social psychological research, which shows explicit, context-free declaration of attitude to be an unreliable predictor of behaviour. Interviews with perpetrators also find that they describe domestic violence as unacceptable, but further probing reveals they justify its use in specific contexts (Dobash et al 2000). Reducing gender inequality to attitudes towards violence is also far too simplistic. Male domination of women lies in hierarchical sex roles which have men as the head of the household, with much violence rooted in men’s, “*inflated expectations*” (Gondolf, 2002 pg. 4) of female deference. Even the attitudinal survey popularly cited to disprove the wife abuse norm found only 47% of respondents disagreed with the statement, “*sometimes it is important for a man to show that he’s the head of the house*” (Smith, 1990 in Dutton & Corvo, 2006). By denying a gendered basis to violence, psychotherapeutic interventions are theoretically flawed and, by focusing on psychological trauma, remain inappropriate for the vast majority of perpetrators. As such, they are not advocated by either the major researchers in the field (Gondolf, 2011) or by Respect, the UK’s accreditation agency (Respect, 2012).

Interactional models for DVIPs see domestic violence as being the result of dysfunctional relationships. This has been strongly criticised for again allowing perpetrators to minimise responsibility and blame victims for the abuse (Adams, 1988). This may be exacerbated by therapist commitment to neutrality when dealing with the couple together (ibid.). Victims may be too afraid to speak freely and can face retribution from their partners later on if they do (ibid.). More recently there has been some evidence that couples therapy may be useful for a specific sub-group of couples (Gondolf 2011). Some victims, especially those in less controlling relationships, want to work through problems as a couple and it is thought that some joint

counselling could combine the work of traditional DVIPs with that of women's support services into one programme (Stith & McCollum, 2011). However, only a select sub-group of couples fit this typology, and considering funding difficulties facing many programmes, it is not practical to screen and provide specialist support for a sub-group of perpetrators that mostly do well in traditional programmes anyway (Gondolf, 2011). Again therefore, these programmes are not advocated by the major researchers in the field (ibid.).

Evaluating DVIPs

As of yet there is no conclusive evidence as to efficacy of DVIPs, with the field marred by methodological difficulties and debates as to the relative merits of experimental versus quasi-experimental research design.

Experimental manipulations from the US have shown no significant impact of DVIP attendance on recidivism in comparison to judicial monitoring, probation or jail time, measured either by police reports or by (ex)-partner reports (Dunford, 2000; Davis, Taylor & Maxwell, 2000; Feder & Dunford, 2004; Labriola, Rempel & Davis, 2005). However, these studies have notable limitations. All suffered from considerable response attrition at follow-up, particularly from (ex)-partners, and as single-site studies could not distinguish efficacy of the DVIP from efficacy of the community and justice system response as a whole (Gondolf, 2002). This is particularly relevant for the Labriola study where judicial monitoring was judged as extremely poor (Labriola et al, 2005) and Dunford's study, which was conducted in a naval base and so is not generalisable (Williamson & Hestor, 2009).

In addition, the experimental design of the studies has been challenged. Random assignment lowers ecological validity by ordering men to DVIPs who would not otherwise have been considered suitable (Dobash et al, 2000) and "re-assignments" made by judges and lawyers leave the intervention and control groups non-equivalent (Gondolf, 2002). Experimental studies also rely on isolating a single variable for study, but in practice, this is near impossible for social interventions. DVIPs work in conjunction with other community responses to domestic violence and the efficacy of the courts, probation officers, women's groups and social norms affect the success of programme. Experimental designs therefore run the risk of condemning the programme conceptually rather than condemning the integrity of the system as a whole (Gondolf, 2000).

Quasi-experimental studies have attempted to overcome the difficulties of implementing experimental design by using complex statistical analysis to control for potential group differences between perpetrators pre-assigned to either the DVIP or control groups (Murphy & Ting, 2010). Dobash et al (2000) used representative samples of men assigned to either a DVIP or an alternate sanction and reported significant differences in both violent and controlling behaviour between the two groups after 12 months. Gondolf (2002) conducted a quasi-experimental, multi-site study examining four different criminal justice responses to domestic violence as a system. He found that DVIPs provided a unique and significant contribution in preventing re-offense over a four year follow-up and that the more effective the system worked as a whole, the better the DVIP worked, highlighting the importance of not evaluating DVIPs in isolation. Detractors argue however, that the quasi-experimental design is not enough to be certain of causality (Murphy & Ting, 2010), and, in the case of the Dobash study, low interview response rates at follow-up have been criticised (Davis et al, 2000).

Considering the mixed findings, overviews of the efficacy literature have concluded that until more studies using rigorous design methods have been completed, no firm conclusions as to DVIP efficacy can be made (Saunders, 2008; Murphy and Ting, 2010). This is especially true for the UK where there have been no experimental studies, and only one rigorous quasi-experimental study (Dobash et al 2000). The impact of DVIPs seems to depend somewhat on the efficacy of other parts of community response (Gondolf, 2002) and hence, using US data, without considering how programmes work within UK community and justice system responses would be short-sighted. Furthermore, to date all research has been in a criminal justice setting and may not be generalisable to community DVIPs where men self-refer. Self-referral may represent increased motivation and higher success rates, or, the lack of external reinforcement may result in increased drop-out rates, but no rigorous efficacy study has examined this.

Defining Success

Outcome measures in the vast majority of the efficacy literature focus purely on scores of repeat victimisation of violent behaviour but the utility of this has recently been challenged (Westmarland, Kelly & Chalder-Mills, 2010). Domestic violence is characterised by patterned coercive control, with violence just one tactic in maintaining that control. Counting specific incidents of violence does not therefore adequately measure decreases in coercive control and as Westmarland argues, *“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.”* (Westmarland et al, 2010, pg. 16). Indeed, the most common descriptions of “success” by (ex)-partners interviewed by Westmarland were improved relationships, expanded space for action and decreased isolation (ibid.), none of which are fully captured by measures of repeat victimisation. Therefore, while the physical safety of victims is obviously vital, when evaluating the impact of DVIPs it is clear that the subjective experiences and perceptions of victims also need to be taken into consideration.

This study provides one such example of this, qualitatively exploring the impact of attending the, “New Directions Service,” a community based DVIP in Cambridge, on both service users and their (ex)-partners. In line with Westmarland’s findings, qualitative evaluations such as this are necessary to fully understand the programme’s impact, thus, allowing the service to better hold itself accountable to both service users and stakeholders and improve future programme delivery.

The New Directions Service¹

The New Directions service (NDS) is a newly established DVIP based in Cambridge and to date is the only DVIP in Cambridgeshire, opening in October 2010. It is part funded by CAFCASS, Cambridge City Council Community Safety Partnership and Improvements East but also relies on charitable donations and course fees paid by service users. It is run by one trained practitioner with eight volunteers and has recently passed a Respect Minimum Standards Assessment to become an approved family courts DVIP provider.

NDS offers a, “Making Changes” behaviour change programme, which is a pro-feminist psycho-educational course utilising a mixture of modalities, such as CBT and mindfulness, to expand definitions of abuse, increase responsibility and teach alternate reactions and behaviours. It was chosen by Respect to pilot this as a 30 hour course working with perpetrators individually, as opposed to the usual group sessions. Individual sessions are thought to allow interventions to be better tailored to the individual client’s needs, such as addressing co-morbid problems, matching client readiness to change and focusing on case specific behaviour change goals (Murphy and Meis, 2008). It also eliminates the potential for negative group-processes, such as support for deviant attitudes, to hinder behaviour change (ibid.) or sabotage rapport between client and facilitator. NDS is one of only three DVIPs offering this programme in the UK, which is offered in addition to a group-work. NDS also offers relapse prevention sessions to service users who have completed the programme.

Women’s support work is provided by Cambridge Women’s Aid² for women living in Cambridge or South Cambridgeshire. For (ex)-partners living elsewhere, support work is either conducted by volunteer workers at NDS or a more local women’s support service. Support involves safety planning, emotional support, advocacy and information provision, as well as a befriending scheme. NDS are also in the final stages of developing a counselling service for (ex)-partners.

As a community based DVIP attendance is voluntary, with the majority of referrals from the Respect UK phone line, GPs, Children’s Family Services and the programme’s own website. For output data at the time of research see table 1.

Table 1: Output data

Service Users	Number	(Ex)-Partners	Number
Referred (total):	46		
Referred but did not Engage:	3	Currently Engaging with a Support Service :	13
Referred but Unsuitable for Course:	6	Have Disengaged from Support:	12
Engaged but Dropped Out:	12		
Currently Completing:	18		
Completed:	7		
Completed and Attending Maintenance Sessions:	4		

¹ All information obtained from personal communication with the service manager and from the programme website (www.newdirectionsservice.org.uk/) unless otherwise specified.

² Women’s Aid is a national charity supporting domestic violence victims

Methodology

Analytic Strategy

This study utilised a mixed methods approach to establishing programme impact in order to fully capture the multi-faceted nature of success for domestic violence intervention programmes (DVIPs). Two strands of analysis were pursued simultaneously. One strand consisted of quantitative analysis of scores on an abusive behaviours inventory in order to examine impact on actual behaviours. The other consisted of qualitative analysis of interviews with service users and their (ex)-partners examining how they felt the New Directions Service (NDS) had impacted on their lives. Mixed methods design was considered appropriate as together the quantitative and qualitative strands provide deeper insight into the impact of the programme than they would have done alone (Tashakkori & Teddlie, 2009). Data were collected from (ex)-partners as well as service users as DVIPs are ultimately working to improve the lives of victims. It was vital therefore to establish if they felt any benefit, particularly as perpetrator reports are known to minimise the extent of problems in the home (Gondolf, 2002). Interviews were also conducted with staff working with both the service users and the (ex)-partners in order to gain a broader understanding of NDS.

Participants

Purposive sampling was used throughout the study with service users who had completed the one-on-one course asked to participate (N=7). As NDS has only recently opened men who were very near course completion were also contacted, (N=2) to ensure an adequate sample. These men had almost finished the course and had attended a near equivalent number of sessions as completers. Service users were approached by NDS staff during a course session or were contacted by phone. All agreed to participate and so nine men in total were interviewed. The mean age for service users interviewed was 36, (range= 21-43) and all but two were employed. Six had children with whom they were in regular contact. Seven men were in relationships or still in regular contact with (ex)-partners. NDS staff contacted these women by phone and all seven agreed to interview. One interview was cancelled and so six interviews took place. Interviews were also conducted with a member of staff at NDS and women's support worker with Cambridge Women's Aid. They were both contacted directly by the research team.

The use of NDS staff as "gatekeepers" led to a potential sampling bias (Bryman, 2001), with those with positive experiences more likely to participate. However, contacting participants using staff was necessary both for ethical reasons (see below) as well as for practicality, as academic domestic violence studies face notoriously low response rates (Gondolf, 2002). Furthermore, considering the high response rate, it seems unlikely to have unduly biased the sample. Differences are more likely to be seen between those who drop out and those who complete but it was beyond the scope of this study to interview both groups.

Procedure

15 semi-structured interviews with service users and (ex)-partners were completed between February and March 2012 and recorded on an OlympusVN-2100PC voice recorder. Interviews with service users took place in NDS offices. (Ex)-partner interviews took place either in the Cambridge Woman's Aid office, NDS office or at their homes. The interview schedule for service

users remained the same throughout but the schedule for (ex)-partners was altered after one interview to include more probes to account for participant reticence and brevity in answers. Interviewer characteristics influence the disclosures made by interviewees (Briggs, 2002) and this is particularly true for sensitive topics such as domestic violence (WHO, 2001). As such it was thought that the position of the student researcher- a university student unknown to the participants- may limit disclosures made to them. Hence, all interviews were conducted in the presence of a member of staff from either NDS or Cambridge Women's Aid familiar to the participant. This created a more comfortable environment for participants and meant the staff member could direct interviewing or provide support to participants if necessary (Langford, 2000). Interviews were then transcribed and analysed using latent thematic analysis based on the methodology laid out by Braun & Clarke (2006) so that key themes and sub-themes could be established. Average transcript length for service users was 3982 words and for (ex)-partners 3744 words.

Interviews with staff were not included in the thematic analysis as were to be used for contextual understanding only. The Cambridge Women's aid worker was interviewed at her office. The interview with the NDS staff member was conducted via email due to time restraints.

Self-report and partner-report abusive behaviour inventories are completed as part of course enrolment (Time 1) and course completion (Time 2). The inventories list 87 abusive behaviours arranged in five categories: psychological abuse, financial abuse, sexual abuse, intimidation, and physical violence. Frequencies for each of these behaviours is recorded on a scale of 0-5, with 0= never, 1=once, 2=twice, 3=3-5 times, 4=6-10 times and 5=over 10 times. All service users agreed for their inventories to be released to the research team although in order for the results to be meaningful they were only collected from service users where data, (either interview or inventories) were also available from their (ex)-partners (N=6). Five (ex)-partners also agreed to the release of their inventories, although one (ex)-partner's inventories were missing and so four (ex)-partner inventories were used in the analysis. At time of interview the Time 2 questionnaire had not been completed by 2 service users and 2 (ex)-partners. These were filled in at the start of the interview. Inventories for both groups were then analysed separately using Excel.2010 with average percentage decreases in score between Time 1 and 2 calculated for the total score as well as scores in each category.

Ethical Considerations

Ethical approval was obtained from the University of Cambridge Psychology Research Ethics Committee in November 2011 and the three major ethical principles of non-maleficence (minimising harm), beneficence (maximising benefit) and respect for individuals (Ellsberg & Heise 2002), were respected throughout all stages of the study. There is no ethical protocol for DVIP research (Gondolf, 2000) and so ethical standards were based on protocols in the literature on working with victims of domestic violence, as set out by the World Health Organisation (2001), and one relevant academic paper, by Gondolf (2000), which discusses the human subject issues surrounding DVIP evaluations.

Informed Consent

Verbal consent to interview was obtained at first contact and written consent before the start of interview. The nature and purpose of the study was explained at the start of the interview and on the consent form and it was made clear that participants could drop out at any point or

refuse to answer any question without explanation. Separate consent was obtained for access to abuse inventories and the interview so that participants could agree to interview but not disclose their inventory scores.

Confidentiality

The safety of all participants, particularly the (ex)-partners, was of utmost importance as (ex)-partners taking part in research potentially face retribution if the fact is discovered by their partner or other members of the community (ibid.). Confidentiality was complicated by the fact that often both (ex)-partners and service users from the same couple were interviewed for the study, meaning they may be able to guess that the other person might be interviewed. Thus extra consideration and care with regards to confidentiality within couples was required.

To ensure confidentiality (ex)-partners were first contacted by phone by NDS staff already known to them. As mail can be intercepted, no written material was sent directly to homes either prior to or after the interview and written consent was obtained at the start of the interview instead. Interviews were conducted in private and at a time and location convenient for her. If a woman lived with her partner, home interviews were arranged for when he was not at home to ensure he could not eavesdrop. At no point were the service users involved in the study told if their (ex)-partner was going to be interviewed, although nothing could be done to prevent her telling him herself. If a service user mentioned knowing his (ex)-partner was participating in the research, researchers would acknowledge this but provide no information as to time or location of the interview.

Confidentiality was also important for service users due to the threat of stigmatisation for attending such a course. Service users were first approached by NDS staff, known to them, either at one of their usual sessions or by phone. Again, no written material was sent directly to service users' homes. Interviews were arranged at the NDS offices, a place all users were familiar with. Again, (ex)-partners were not informed of the service user's involvement in the research and, if mentioned by their (ex)-partners, researchers would acknowledge the fact but provide no more information.

Both the NDS and Cambridge Woman's Aid worker were contacted by phone by the student researcher. The interview with the Woman's Aid Worker was conducted privately, in her office. The interview with the NDS staff member was conducted via personal email correspondence.

All abuse inventories, consent forms, transcripts and digital recordings were made identifiable by code and stored on the student researcher's personal laptop, along with a master document linking names to codes, which was password protected. All files were destroyed at study end. No participant was personally identifiable from the final report.

Dealing with Distress and Disclosure

During interviewing there was the potential for participants to disclose issues affecting the immediate safety of themselves, their (ex)-partners, or children, for instance an (ex)-partner could disclose information that provides reasonable grounds to doubt her safety (Langford, 2000). For this reason all interviews were conducted in the presence of a member of staff, with whom participants already had protocols for disclosure in place. This meant any disclosures could be dealt with by them rather than the student researcher (ibid.).

Interviewing participants about such sensitive topics may have the effect of provoking distress. Both victims and perpetrators of domestic violence often feel ashamed of what has occurred and it can be distressing for victims in particular to recall traumatic events (WHO, 2001). If not conducted sensitively perpetrators may find interviews reminiscent of police interrogations and feel judged and belittled (Gondolf, 2000). As such, interviews were designed to minimise distress as much as possible. All interviews took place with a member of NDS staff known to the participant present in order to provide support and emotional reassurance and direct or terminate questioning if needed. NDS staff also contributed to interview debriefing, providing reassurance and acting on any pertinent information brought up by the interview. For the service users in particular, the interview setting being where they had their regular sessions meant that the interview mimicked a familiar, therapeutic setting, thus minimising potential for distress. Interviewing victims and perpetrators about domestic violence can also be distressing for the interviewer and as such the student researcher was debriefed by NDS staff.

Results

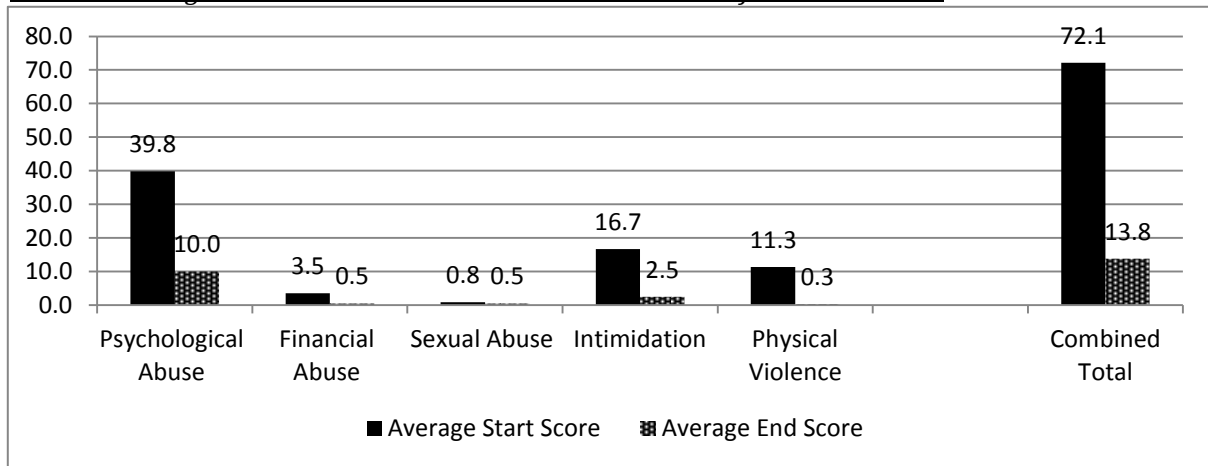
Analysis of Abusive Behaviour Inventories

Self-report and partner-report abusive behaviour inventories were filled in at enrolment and course completion, (or at interview). Inventories were collected from four (ex)-partners and from the six service users where confirmatory data could be collected from their (ex)-partner, either from checklists or from their interview responses. Results are as follows:

Service Users

The average start and end scores on the service user abuse inventories showed a reduction across all categories (Chart 1). The average decrease in the combined total score was 81%. The small sample size (N=6) precluded more detailed analysis by category.

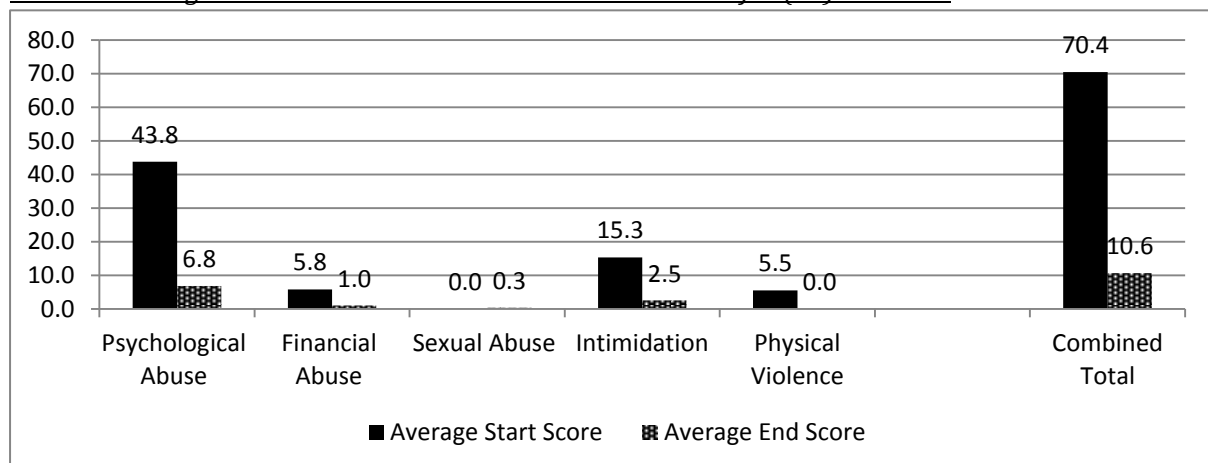
Chart 1: Average Start and End Scores on Abuse Inventories for Service Users



(Ex)-Partners

The average start and end scores on the service user abuse inventories showed a reduction across almost all categories (Chart 1). The average decrease in the combined total score was 85%. The small sample size (N=4) precluded more detailed analysis by category.

Chart 2: Average Start and End Scores on Abuse Inventories for (Ex)-Partners



Analysis of Interview Data

The thematic analysis produced six overarching themes across the service users and their (ex)-partners as to the impact of the New Directions Service (NDS) on their lives. Service user responses centred around two main themes: “personal accountability” and, “improved communication”. (Ex)-partner responses fell under two overarching themes, “re-invigorated relationships” and, “feeling supported”. An additional theme, “impact on children” was discussed by both groups. These themes and their subthemes will now be expanded upon, alongside quotes representative of participant responses.

Impact of NDS on Service Users’ Lives

Overall, service users were extremely positive about NDS. All nine said that they had nothing negative to say about the service received and only two suggestions were made for improvement beyond facetious suggestions for things such as comfier chairs. One respondent asked for refresher sessions to be available to him in the future so that he could check his progress. Another felt that his partner had needed more support as he started the course.

All respondents attended individual rather than group sessions. Seven expressed a strong preference for individual work with three saying that they would not have attended group sessions. Two were however open to group work and three said that they would now consider group work having attended individual sessions.

Service user responses as to the impact of the course on their lives centred around two themes: personal accountability and improved communication.

Personal Accountability

All of the men interviewed discussed increased personal accountability and responsibility in one form or another. Common to all the responses was the re-evaluation of the self from a passive-self- reacting automatically to events beyond their control- to an active-self- capable of controlling their behaviour, responsible for the consequences of their actions and both capable of, and responsible for, change.

Accountability for Past Abuse

Seven of the nine service users discussed how attending NDS led them to reflect on, and re-evaluate, their past behaviour, acknowledging that it was abusive. In particular they discussed recognising that in the past they had blamed others for their behaviour, feeling that they had been provoked and hence were in some way justified in their actions. A common response was the realisation that they are accountable for their behaviours no matter how others around them behave.

“Try and sort of take responsibility and say actually... I was wrong there and I shouldn’t have behaved like that. And not always trying to say that if you hadn’t done that then I wouldn’t have behaved like because then it’s...sort of justifying it and giving yourself the option to do it and then you feel wronged.” (Service User 2)

Seven respondents also discussed realising behaviours they had previously thought were appropriate were in fact not and this was described as the result of being held accountable for the impact of their behaviour on their families, something they had previously minimised.

“Once you’ve said what you’ve done and you know deep down inside that that’s wrong. That’s why...it gets underneath your skin...coz you’ve said it you can’t go back on it. (Service User 1)”

Ability to Control Anger

Seven service users discussed how attending NDS led them to realise that they were capable of controlling their anger, which they had previously seen as being an almost automatic response to perceived provocation.

“Now I’ll see it as a game and... people can try and wind me up and everything else but then for me, not getting angry and stuff and not kicking off, you know- I’ve won.” (Service User 1)”

In particular, service users credited the course with teaching them to recognise the signs that they were becoming angry and also situations that they felt would trigger anger.

“It’s changed me getting really stressed without me really recognising that I’m getting stressed. It’s made me recognise how I feel so yeh, it has changed.” (Service User 4)”

Ability to Change

Five respondents credited NDS with increasing their sense of self-efficacy about their ability to minimise abuse, with four reporting that their successes since starting the course acted as further motivation to continue attending. This was seen as the result of being taught practical tools and techniques to help them in difficult situations. This increased self-efficacy was not, however, limited to reducing abusive behaviours. Indeed, rather than just viewing the course as a way of minimising abuse, five respondents conceptualised it as a “stepping stone” on their path to becoming the people they wanted to be.

“It’s just the very start isn’t it. It’s kick starting, you know, hopefully the new- the new you!” (Service user 8)”

Maintaining Change

A prevalent theme amongst service users was awareness that it would be very easy to slip back into old abusive behaviours and six mentioned knowing that they would always be “tested”. Five men argued that sessions with NDS helped them by holding them accountable for their progress, which they often overestimated, and hoped that NDS would continue having this role even when they had completed the programme.

“It’s never going to be easy but I know without a regular... session like this, there is a real danger of flipping back so I think it’s going to be hard for a while but I do hope it will become normal behaviour” (Service User 9)”

Improved Communication

All service users described NDS as improving their ability to communicate. Some responses focused on communication with their partners, others on how NDS provided a neutral space where they felt comfortable enough to begin to open up.

Expressing Emotions

Seven of the nine respondents reported they found it easier to express their emotions since attending NDS. This was both in terms of letting people know when they were feeling angry or finding it hard to cope and also in terms of being more affectionate and letting others know how they feel about them.

"We talk a lot more and we talk about the feelings you get and whatever's going on. If I'm getting stressed I'll say that I'm getting stressed- I need 5 minutes." (Service User 4)

Despite this seven also reported that opening up had been extremely hard.

"I have a wall and my feelings are behind the wall...she kept chipping and chipping and chipping and eventually she broke the wall and I realised that after that wall there is a total different side." (Service User 1)

This difficulty was attributed by respondents to masculine norms discouraging emotional expression, particularly when it could be a sign of weakness, and also to shame at admitting past behaviours both to others and to themselves. Despite this, only one respondent felt like he had not yet managed to open up.

"If you keep everything in you don't want to open up so much and open[ing] up is scary trying because you don't know what you are going to find under" (Service user 5)

Listening to Others

Six respondents also reported listening to, and valuing, other's opinions more, particularly the opinions of their partner.

"One of the key things that I picked up ... was that I can actually contribute by just listening and acknowledging and not even saying something just being there to let someone get something else out. It doesn't have to be transmit. It can be just receive or just be neutral and just do nothing." (Service User 9)

Space to talk

Six men reported that NDS provided a neutral space where they felt able to express themselves and analyse their behaviour without fear of judgement, a behaviour which they then transferred to their relationships. This was aided by a good rapport with programme facilitators, who were described as "like your favourite nan" (Service user 1).

I just felt like I needed to speak to someone different just to get their opinions on what had happened. (Service User 8)

Impact of NDS on (Ex)-Partners' Lives

All the respondents were positive about their experience with NDS and reported being glad that their families were involved. Responses centred around two themes: re-energised relationships and feeling supported.

Re-energised Relationships

Three of the six women reported they had reunited with their ex-partner following his attendance of the course. Another reported that the course had resulted in her deciding not to separate from her partner. Two more women reported increased contact with their (ex)-partners as a result of the course, with one hoping to rekindle the relationship.

"Also, a renovated view of the relationship and the possibility of still investing energy. For a period in the past... we decided to split because we couldn't communicate anymore. It was very very stressful and today it is...very very different." ((Ex)-partner 2)

Multiple factors influenced the women's attitudes towards the relationships:

Decreased Aggression

Five of the six women reported decreased aggression from their partners. Most common was the report that he got angry less often and less easily and that arguments were less frequent. Furthermore they reported that when he was angry he expressed in more appropriately, such as swearing less.

"He doesn't really get aggressive and he doesn't really shout or say horrible things" ((Ex)-partner 5)

A recurring observation was that they felt that their point of view was respected more during arguments. Two women reported that arguments were also dealt with quicker and less likely to escalate.

If he's kicked off and I've said go away and come back in half an hour when you have decided to think about it... Whereas before it would have been like a red rag to a bull but now he does. He'll go away. ((Ex)-partner 3)

Decreases in physically violent behaviour were not explicitly mentioned although this was often implicit in the descriptions of decreased aggression.

Increased Support

Half the women reported that the change in their (ex)-partner was not limited to a decrease in abusive behaviours but also involved an increase in how supportive they were. This was both in terms of practical support, such as helping with childcare, and also how much emotional support they provided. Women reported that they felt that their role in the relationship was appreciated more, that their partner listened more to them and was more affectionate and caring

"I didn't think that it would help bring us back together again. I just thought it would make things amicable between us whereas it's much more than that... He can be so attentive and just so aware

of what was going on with me and so I never expected that. I just expected him to start being friendly and polite and to stop throwing his weight around. ((Ex)-partner 4)

However, one woman reported that she had felt more supported by her partner but that he had relapsed into previous behaviours.

"He's gone back into that recluse mode ... and I said to him look if you want me to do everything, look after [daughter], do the housework and then at the weekend when I'm collapsed on the sofa you can take over looking after [daughter] and that's how I've put it across" ((Ex)-partner 1)

Safety & Trust

Four women explicitly reported feeling safer due to their partner's attendance of NDS. One other respondent also reported feeling safer within her relationship but was still worried about what would happen if she tried to leave. Four reported feeling more relaxed around their partner and that their interactions were less strained because they felt safer.

"Well something was funny and I was relaxed enough to express laughter which normally I would be too tense to do. So I thought, I actually thought to myself, "Oh my goodness! I'm laughing" you know and that was really positive" ((Ex)-partner 6)

Despite this, four women expressed difficulty in trusting their partner again. While expressing a desire to move on they found it hard to forget previous abuse and thought that they could never trust him completely.

"And I actually think I trust him more now than I did five years ago... it's not 100% there. There's still ... a nagging voice that says it might happen again. So you know I'm thinking it's going to take a while to get it back up to where it should be." ((Ex)-partner 4)

Furthermore, some woman expressed uncertainty as to how to behave around their partner now that his behaviour had changed and were to the relationship with him. Indeed, two women reported that they thought their behaviour was probably confusing to their partner as to how they feel about him and the relationship and for one woman this was a significant source of tension in the relationship.

I think that he thought coz he's finished now that that is the green light for everything just to go back to normal and he can just come straight back in. And I said to him to just try and see how it goes" ((Ex)-partner 5)

Remorse and Responsibility

Four women reported that their (ex)-partner expressed remorse over past behaviour and that he accepted responsibility, recognising that his behaviour was abusive and wrong.

"I have seen a sadness, a realisation, but almost a bewilderment as well. A bewilderment about, "oh my goodness, how could I have done that." I don't think... [Before] he absolutely didn't get it" ((Ex)-partner 6)

Feeling Supported

The level and type of support received by the (ex)-partners was heterogeneous. Only two had had extended contact with women's support workers, one with workers at Cambridge Women's Aid and one with workers at Refuge³. The four other respondents had opted not to take up the offer of a support worker. They described their support as being regular or semi-regular phone contact with NDS staff, updating them on their (ex)-partner's progress on the course, and, checking in with them as to how they were feeling. All respondents reported feeling satisfied with the level of support they had received.

Providing a Voice

A common response was that "he wouldn't listen to me" and five respondents described either NDS staff or their women's support worker as a mediator, ensuring that their "voice" in the relationship was heard. While this was partly through their own discussion with staff about their partner's progress, more commonly this was due to their confidence that NDS staff were representing their interests in sessions with their partners and challenging abusive behaviours in a way that they had not been able to. This awareness that their partners could, and were, being challenged increased (ex)-partner perceived agency in their relationships.

"It's really good to know that she's at the end of the line. And when we had the time where he didn't use the time out properly...I was thinking right if he hasn't told [NDS] about this I'm phoning... and I'm going to tell." ((Ex-partner 4)

Changing Attitude to Support

Three respondents described that their attitude towards engaging with support changed across their partner's attendance of the course. They described being initially uninterested in support but gradually becoming more open to engaging. Two more respondents also mentioned wishing that they had engaged earlier than they did.

"I also became more flexible about this kind of thing or talking about this kind of thing with people you don't know... because this was a problem" ((Ex)-partner 2)

Themes across Service Users and (Ex)-Partners

Impact on Children

Twelve respondents had children and for eight of these the impact of both past abusive behaviour and of involvement with NDS on their children was a prevalent theme.

Impact of Abuse on Children

Five service users and three (ex)-partners expressed concern as to their children's current behaviour. In some cases this was fears that the child was traumatised by what they had witnessed and in others that the child was copying the behaviour of their abusive parent. Parents also worried that their children may grow up to either emulate their behaviour or become victims themselves.

³ Refuge is a national charity which supports domestic violence victims

“She did see some domestic violence... and now I’m paying the price for it because she does slap me and hit me” (Service User 1)

“...as I’ve explained to [him]. It’s learnt behaviour. It was us that actually caused that.” ((Ex-partner 1)

Impact of NDS Attendance on Relationship with their Children

Four service users reported improved relationships with their children since attending the course. Despite this, four responded that their children were still wary of them and slower to trust them again than their (ex)-partners had been.

“So yeh big difference with my wife, small steps with the children, recognising that I’ve got a long way to go with the children” (Service User 9)

Three (ex)-partners responses described a similar relationship.

“I think they are happier [but] I think they’re still finding it quite hard” ((Ex)-partner 6)

One service user, however, responded that his relationship with his child was still problematic.

“She tries to rule the roost and so it’s them sort of moments that sometimes I can’t deal with when she’s getting right out of hand.” (Service User 4)

Discussion

To recap, this study involves a qualitative investigation of the impact of attending the New Directions Service (NDS) on both service users and their (ex)-partners. This section provides a discussion of the key issues raised by the study results.

The Impact of NDS

Firstly, this study clearly shows that the course at NDS was successful at minimising abusive behaviours in service users, as measured at the time of course completion. This was evidenced in both the interviews and the abusive behaviour inventories. In the interviews two sub-themes for (ex)-partners were decreased aggression and increased feelings of safety, and, while not discussed explicitly by service users, decreased abuse may be inferred to have been the consequence of their discussions of increased accountability and improved communication skills. Despite this, while positive, these themes do not necessarily imply a parallel decline in actual abuse: service users may report increased communication skills and (ex)-partners decreased aggression, while many abusive behaviours still continue. Thus, the findings from the abusive behaviour inventories provide a useful contextualisation for the interview data, helping create a sense of convergent validity. These revealed average percentage decreases for total abuse scores of 81% reported by service users and 85% reported by (ex)-partners, with scores falling to near zero for most categories in both groups. These decreases in score reported by both service users and (ex)-partners indicate that abusive behaviours were indeed being impacted and minimised due to course attendance, engendering confidence in the interview data. It should be noted however that the sample size for analysing the inventories was extremely small (Service Users, N=6 and (Ex)-Partners, N=4), and while this was acceptable for using to support interview data, it both precludes more detailed analysis and prevents these figures from being suitable for promotional purposes regarding programme impact.

The UK DVIP accreditation body RESPECT argues, however, that DVIP success is not adequately conceptualised by a decrease in incidents of victimisation, but lies also in breaking the pattern of coercive control to create healthy and respectful relationships (Westmarland et al, 2010). This is strongly supported by the findings of this study where decreased abuse was symptomatic of more underlying changes. For the service users, this was a re-conceptualisation of the self from a passive to an active self. Justification for past abuse centred on being provoked, overwhelmed by life's stresses and unable to control their anger. The realisation that they are an active self, both capable of controlling their behaviour and responsible for its impact on others enabled service users to hold themselves accountable for their past abusive behaviour and provided them with the motivation and self-efficacy to change. It was this that in turn enabled them to challenge and tackle their abusive behaviour.

Agency also increased among the (ex)-partners. NDS staff acted as their proxy, challenging the men's behaviour and representing their interests and viewpoints. This knowledge, combined with the additional support they received, gave them the confidence to start voicing their opinions in their relationships thus increasing their agency. Communication among couples also improved. The men were better able to express their feelings and listen to their (ex)-partner's point of view. Combined with the women's own increased confidence in expressing their viewpoint, this led to more supportive relationships and mutual respect rather than opposition.

Life after NDS

A clear implication of this study was that attending a course at NDS was not a complete solution to the challenges facing either the service users or their (ex)-partners in the long term.

Service users were acutely aware of the dangers of slipping back into old abusive behaviour. A prevalent theme in the findings was that service users credited NDS with helping keep their behaviours in check. Knowing that they had a session booked kept them motivated as they were aware that course facilitators would hold them accountable for their progress. This provides strong evidence as to the need for the relapse prevention sessions NDS offers.

A further key finding was the difficulties (ex)-partners faced in re-negotiating their relationships once they saw improvements in the man's behaviour. While they described wanting the relationship to work, they found the reality harder than expected. Abuse victims often have survival strategies for abusive relationships, which help them minimise victimisation (Lempert, 1996) and for the respondents in this study, abandoning those strategies was hard. There was an uncertainty as to how far to trust their partner again and confusion about how to respond to "nice" behaviour that they were not used to, such as increased affection. In some senses this is to be expected, as once abuse is removed from the equation, women are faced with a very different relationship to the one they are used to. They may not want, or feel able, to reciprocate their partner's changed behaviour, and, as their agency increases, their attitude towards the relationship may change also.

Despite this, (ex)-partner attitudes towards successful behaviour change in perpetrators have been near ignored in the literature. Dobash & Dobash (2000) argue that it is unrealistic to expect (ex)-partners of perpetrators to ever trust them again completely. Furthermore, encouraging such blind trust is unethical, as it may leave them emotionally and practically unprepared for future re-offence (ibid.). Women's support workers play a vital role in helping women manage their expectations of the programme, navigate the changes in their relationship and plan for the future. These findings both emphasise the necessity of this support and support NDS's plans to offer counselling for (ex)-partners so that a fully comprehensive support system is available.

This again highlights the need for long-term support for those involved with NDS. The challenges facing these couples are complex, and solutions are not limited to ending abuse. Successful behavioural change on the man's part may signal the need for new support, helping the couple navigate the changed relationship. The fact that (ex)-partners' attitudes towards support also changed over time, becoming more open to receiving support, also highlights the need for flexible, long-term support, adaptable to changing levels of interest.

Implications for Programme Format

NDS is piloting a one-on-one intervention programme, which all service users interviewed attended. While this study was not an evaluation of the relative merits of one-on-one versus group formats, the findings do offer some preliminary support for the one-on-one format and it is clear that, for these service users at least, one-on-one sessions can be effective. A criticism of individual treatment is that it is not confrontational enough, mimicking counselling, and meaning the therapist may inadvertently collude with the perpetrator (Adams, 1988). The findings from this study show that this is clearly not the case. A key theme in the findings was

the increased sense of accountability felt by the service users for their actions, which they credited to being challenged at their sessions at NDS by the facilitators. It seems that as the primary modality for counselling is individual work and the primary modality for psycho-educational programmes is group work, many (e.g. Kaufman, 2002) have equated all individual work with counselling, when in reality they are not one and the same: altering the programme format does not alter the psycho-educational content.

A further sub-theme in this study was that sessions at NDS provided a neutral space to talk and that this was facilitated by rapport with programme facilitators. Rapport with facilitators is a key antecedent of change (Silvergleid & Mankowski, 2006) and negative group influences have been thought to hinder its development by re-enforcing and supporting deviant behaviours (Murphy & Meis, 2008). The one-on-one format may better facilitate the development of a trusting relationship between service user and course practitioner than group formats. Indeed, what seemed so successful in this study was the idea of NDS providing a neutral space between partners where they could both express themselves and work through any issues. For perpetrators, sessions helped them model appropriate behaviours which were then transferred into the relationship. Facilitating modelling such as this would prove harder if practitioners had to manage and engage whole groups rather than individuals.

Three men reported that they would not have attended a group course and seven expressed a strong preference for individual work. Therefore one-on-one interventions may also provide the opportunity to engage with perpetrators who may not otherwise come forward.

Supporting Children

This study also found that parents were very concerned as to the impact of abuse on their children. Domestic violence is hugely detrimental to children's psychological development, increasing their risk of developing emotional and behavioural problems and the likelihood that they enter into abusive relationships as adults, be that as victim or perpetrator (Holt, Buckley & Whelan, 2008). DVIPs aim to support both women and children facing domestic violence and two of Respect's criteria for DVIP success concern improved parenting and safer, happier childhoods (Westmarland et al, 2010). Despite this, support for children was only indirect, through supporting respectful relationships between parents, and the unique needs of children were not addressed. More support centred on parent-child relationships is needed to fully support children. NDS are looking to run a, "Caring Dads" scheme in the near future, which is a parenting intervention for abusive fathers and fathers who have exposed their children to domestic violence⁴. This study shows that this will be an important step in supporting children fully and it is important to ensure that women's support workers also work with mothers to support them in their parenting, or, refer to services which can.

⁴ See <http://caringdads.org/index.php> for more information

Conclusions

“For too long women have been held accountable for the domestic abuse... It’s always up to her to keep the family safe. It’s up to her to remove herself from the situation.... We need to look at the other side because it is her partner, her husband, who is using the domestic abuse and I love the fact that there is something out there for men.”

(Cambridge Women’s Aid Worker)

The “New Directions Service” (NDS) was hugely influential in the lives of this study’s participants. Abusive behaviours were minimised and (ex)-partners reported feeling safer. In addition, involvement with NDS increased agency in both groups. With NDS staff representing their interests, (ex)-partners felt they had gained a voice, giving them the confidence to make more decisions in their relationships. Service users were motivated to take responsibility for their past behaviour and provided with the confidence that they were capable of changing. This, combined with improved communication skills in service users, allowed many couples to develop respectful and supportive relationships. As such, the study strongly supports Westmarland’s (2010) findings that the impact of DVIPs extends beyond the cessation of violence and also highlights the importance of qualitative research in fully understanding their impact.

This study also reiterates the findings of Gondolf (2002), that DVIPs should be understood as just one part of the broader community response to domestic violence. In this study the needs of the service users and their families were dynamic, multi-faceted and necessitating long-term support: behaviour change courses are but one facet of this. NDS should be credited for recognising the diverse needs of its clients, offering a variety of programme formats and providing relapse prevention courses, in addition to the usual women’s support services. It is important that current plans to offer parenting courses and counselling for (ex)-partners are implemented so that NDS can fully meet the needs of its client base.

Future Research

As an undergraduate dissertation this study was inevitably limited in scope and on-going evaluation will be necessary in order to remain accountable to both clients and stakeholders. Major stakeholders, such as Cambridgeshire Domestic Abuse Partnership, will also have to commit to supporting NDS in undertaking such evaluations, as they require funding and labour power beyond the scope of a small organisation. Of particularly pressing concern is the need for longitudinal evaluation tracking outcomes of both completers and drops-outs, and, examination of the comparative efficacy of the group versus individual programmes.

“It’s just been amazing...It’s got me back together again, [him] back to being the man he should be and us back together again as a couple and as a family.” ((Ex)-Partner4)

References

- Adams, D. A. (1988). Counselling Men who Batter: A Pro-feminist Analysis of Five Treatment Models in Yllo, K. & Bograd, M. (eds.), *"Feminist Perspectives on Wife Abuse."* CA: Sage
- Babcock, J & LaTaillade, J. (2000). Evaluating Interventions for Men Who batter in Vincent, J. & Jouriles, E. (eds.), *"Domestic Violence: Guidelines for Research Informed Practice."* Philadelphia: Jessica Kingsley
- Barner, J, R. & Carney, M, M. (2011). Interventions for Intimate Partner Violence: A Historical Review. *Journal of Family Violence.* 26 (3). 235-244
- Belknap, J & Melton, H. (2005). Are Heterosexual Men Also Victims of Intimate Partner Abuse? *Applied Research Forum, National Electronic Network on Violence Against Women.* [Retrieved 11th January 2012 from http://vawnet.org/research/summary.php?doc_id=370&find_type=web_desc_AR]
- Braun, V & Clark, V. (2006). Using Thematic Analysis in Psychology. *Qualitative Research in Psychology.* 3 (2). 77-101
- Briggs, C. (2002), Interviewing, Power/Knowledge and Social Inequality' in Gubrium, J. and Hollstein, J. (eds.), *"Handbook of Interview Research Context: and Method"* London: Sage.
- Bryman, A. (2001), *"Social Research Methods"*. Oxford: Oxford University Press.
- Cambridgeshire County Council. (2008). Cambridgeshire Domestic Violence Strategy. *Cambridgeshire.* Cambridge: Author [Retrieved 16th January 2012 from <http://www.cambridgeshire.gov.uk/NR/rdonlyres/919CE70C-0DB9-40FA-97AD-471A1744AC5F/0/CountyDVStrategyFinal.pdf>]
- Chaplin, R. Flatley, J & Smith, K. (2011). Homicides, Firearm Offences and Intimate Violence 2009/10. Home Office Statistical Bulletin 01/11. London: Home Office [Retrieved 17th January 2012 from <http://www.homeoffice.gov.uk/publications/science-research-statistics/research-statistics/crime-research/hosb1011/hosb1011?view=Binary>]
- Council of Europe. (2002). Recommendation Rec(2002)5 of the Committee of Ministers to Member States on the Protection of Women Against Violence. Strasbourg: Author [Retrieved 17th January from <http://www.coe.int/t/dghl/standardsetting/violence/Documents/Recommendation%20%282002%295%20protection%20women%20from%20violence.asp>
- Davis, R, C. Taylor, B, G & Maxwell, C,D. (2000). Does Batterer Treatment Reduce Violence? A Randomized Experiment in Brooklyn. Washington, DC: US Department of Justice [Retrieved 8th December 2011 from <https://www.ncjrs.gov/pdffiles1/nij/grants/180772.pdf>]
- Dobash, R.E. Dobash, R.P Cavanagh, K & Lewis, R. (2000). Changing Violent Men. Thousand Oaks, CA: Sage
- Dobash, R.E. & Dobash, R.P. (1992) Women, Violence and Social Change. London & New York: Routledge
- Dunford, F, W. (2000). The San Diego Navy Experiment: An Assessment of Interventions for

- Men who Assault their Wives. *Journal of Consulting and Clinical Psychology*. 68. 468.
- Dutton, D.G. (2010). The Gender Paradigm and the Architecture of Anti-Science. *Partner Abuse*. 1 (1). 5-25
- Dutton, D.G & Corvo, K. (2006). The Duluth Model: A Data-Impervious Paradigm and a Failed Strategy. *Aggression and Violent Behaviour*. 11. 457-483
- Ellsberg, M & Heise, L. (2002). Bearing Witness: Ethics in domestic Violence Research. *The Lancet*. 359 (9317). 1599-1604
- Feder, L & Forde, D. (2000). A Test of the Efficacy of Court-Mandated Counselling for Domestic Violence Offenders: The Broward Experiment. Washington, DC: US Department of Justice [Retrieved 17th January from <https://www.ncjrs.gov/pdffiles1/nij/grants/184631.pdf>]
- Gondolf, E. (2000). Human Subject Issues in Batterer Program Evaluation. *Journal of Aggression, Maltreatment & Trauma*. 4 (1). 273-297
- Gondolf, E. (2002). Batterer Intervention Systems: Issues, Outcomes, Recommendations. Thousand Oaks, CA: Sage
- Gondolf, E. (2011). The Weak Evidence for Batterer Program Alternatives. *Aggression and Violent Behaviour*. 16. 347 – 353
- Healey, K. Smith, C & O'Sullivan, C. (1998) Batterer Intervention: Program Approaches and Criminal Justice Strategies. Washington DC: National Institute of Justice
- Home Office. (2011). Cross-government definition of domestic violence: a consultation. London: Author [Retrieved 17th January 2012 from <http://www.homeoffice.gov.uk/publications/about-us/consultations/definition-domestic-violence/dv-definition-consultation?view=Binary>]
- Holt, S. Buckley, H & Whelan, S. (2008). The Impact of Exposure to Domestic Violence on Children and Young People: A Review of the Literature. *Child Abuse and Neglect*. 32 (8). 797-810
- JSNA. (2011). Cambridgeshire Joint Strategic Needs Assessment: Prevention of Ill Health in Adults of Working Age. Cambridge: Author [Retrieved 26th April from http://www.cambridgeshirejsna.org.uk/webfm_send/218]
- Kaufman, G, B. (2001). Individual Therapy for Batterers? Decatur, GA: Men Stopping Violence
- Labriola, M. Rempel, M & Davis, R, C. (2005). Testing the Effectiveness of Batterer Programs and Judicial Monitoring Results from a Randomized Trial at the Bronx Misdemeanor Domestic Violence Court. New York: Centre of Court Innovation [Retrieved 16th January from <http://www.courtinnovation.org/sites/default/files/battererprogramseffectiveness.pdf>]
- Langford, D. (2000). Developing a Safety Protocol in Qualitative Research Involving Battered Women. *Qualitative Health Research*. 10 (1). 133-142
- Lempert, L. (1996). Women's Strategies for Survival: Developing Agency in Abusive Relationships. *Journal of Family Violence*. 11 (3) 269-289

- Morley, R. & Mullender, A. (1992). Hype or Hope: The Importation of Pro Arrest Policies and Batterers' Programs from North America to Britain as Key Measures for Preventing Violence Against Women in the Home. *International Journal of Law and the Family* 6. 265-288
- Murphy, C, M. & Meis, L, A. (2008). Individual Treatment of Intimate Partner Violence Perpetrators. *Violence and Victims*. 23 (2)
- Murphy, C,M & Ting, L, A. (2010). Interventions for Perpetrators of Intimate Partner Violence: A Review of Efficacy Research and Recent Trends. *Partner Abuse*. 1 (1). 26-44
- Ptacek, J. (1988) Why Do Men Batter their Wives? in Yllo, K. & Bograd, M. (eds.), "*Feminist Perspectives on Wife Abuse*." CA: Sage
- Price, B & Rosenbaum, A. (2007, July) National Survey of Perpetrator Intervention Programs. *Presentation at the International Family Violence and Child Victimization Research Conference*, Portsmouth, New Hampshire cited in Saunders, D. (2008) Group Interventions for Men Who Batter: A Summary of Program Descriptions and Research. *Violence and Victims*. 23 (2). 156-172
- Respect. (2011). *Domestic Violence Perpetrators: Working with the cause of the problem*. London: Author [Retrieved 8th December from http://www.respect.uk.net/data/files/lobbying/lobbying_tool_with_refs_20.7.11.pdf]
- Respect. (2012). *Respect response to criticisms about our approach to accreditation of domestic violence perpetrator programmes*. London: Author [Retrieved April 14th 2012 from http://www.respect.uk.net/data/files/Briefingpapers/final_respect_briefing_paper_responding_to_our_critics_18th_january_2012__for_newsletter_and_for_website.pdf]
- Saunders, D. (2008) Group Interventions for Men Who Batter: A Summary of Program Descriptions and Research. *Violence and Victims*. 23 (2). 156-172
- Smith, M. (1990). Patriarchal Ideology and Wife Beating: A test of Feminist Ideology. *Violence and Victims*. 5 (4). 257-273 in Dutton, D,G & Corvo, K. (2006). The Duluth Model: A Data-Impervious Paradigm and a Failed Strategy. *Aggression and Violent Behaviour*. 11. 457-483
- Stith, S, M & McCollum, E,E. (2011). Conjoint treatment of couples who have experienced intimate partner violence. *Aggression and Violent Behaviour*. 16 (4). 312-318
- Silvergield, C. S., & Mankowski, E. S. (2006). How batterer intervention programs work: Participant and facilitator accounts of processes of change. *Journal of Interpersonal Violence*. 21. 139-159
- Stosny, S. (1995). *Treating Attachment Abuse: A Compassion Approach*. New York: Springer
- Tashakkori, A & Teddlie, C. (2009). Integrating Qualitative and Quantitative Approaches to Research. Rog and Bickman (Eds.), *Handbook of Applied Social Research Methods (2nd Edition)*. Thousand Oaks, CA: Sage.
- Walby, S. (2009). *The Cost of Domestic Violence: Up-date 2009*. Lancaster, UK: Author [Retrieved January 16th from http://www.caadv.org.uk/new_cost_of_dv_2009.php]
- Westmarland, N., Kelly, L. & Chalder-Mills, J. (2010) *What Counts as Success?* London: Respect.

Williamson, E. & Hester, M. (2009) Evaluation of the South Tyneside Domestic Abuse Perpetrator Programme 2006-2008: Final Report, Bristol: University of Bristol.

Worcester, N. (2002). Women's Use of Force : Complexities and Challenges of Taking the Issue Seriously. *Violence Against Women*. 8 (11). 1390-1415

World Health Organisation. (2001). Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence against Women. Geneva: Author [Retrieved 20th March 2012 from <http://www.who.int/gender/violence/womenfirtseng.pdf>]

World Health Organisation.(2002). World Report On Violence And Health. Geneva: Author [Retrieved 17th January 2012 from http://whqlibdoc.who.int/publications/2002/9241545615_chap4_eng.pdf]

World Health Organisation. (2005). WHO Multi-Country Study On Women's Health And Domestic Violence Against Women: Summary Report. Geneva: Author [Retrieved 17th January 2012 from http://whqlibdoc.who.int/publications/2005/9241593512_eng.pdf]