

Respect VAWG Strategy Submission February 2021

About Respect

Respect is a pioneering UK domestic abuse organisation leading the development of safe, effective, accountable responses to perpetrators, male victims and young people using violence and abuse in their close relationships.

Respect's work is wide ranging: we campaign to improve policy and practice and to ensure that perpetrators are held to account; we offer accreditation to ensure specialist interventions are safe and effective; we provide training, events and support for individuals and organisations working in the sector; we operate the Respect Phoneline for perpetrators, and the Men's advice line for male victims of domestic abuse; we support up-to-date research undertaken by specialists in the field; we use our expertise and influence to help shape government legislation and policy and we fundraise to ensure important work continues to happen. We have a number of strategic partnerships with the public sector and other organisations working in the field to develop innovative, multi-agency and community-based interventions.

Our vision is to end domestic abuse in the following ways:

- Individual Change: Ensuring that safe, effective and accountable services which meet the needs of a diverse range of communities are broadly available and accessible across the UK
- System Change: Changing the response to domestic abuse and championing effective multi-agency work, training, research and best practice in the field of domestic abuse intervention
- Social Change: Domestic Abuse is not just an issue for those who have direct experience. Working to mobilise communities and individuals to take action and support each other to live free from abuse, and hold those that cause harm to account with survivors at the heart of every decision and action we take.

Our Submission

Respect is pleased to contribute to this consultation and looks forward to an ongoing dialogue with Government to help shape its future responses to VAWG. Our specialism is in domestic abuse perpetrators, so this is the focus of our submission, but many of the points we make will also be



true of perpetrators of other forms of VAWG, and we strongly believe domestic abuse should be included in the VAWG strategy. This submission should be read alongside the Drive Partnership response.

Such work must go hand in hand with quality responses for all victimsurvivors. We support the joint sector principles published by Imkaan and EVAW¹ and share the view that equal access to rights and entitlements for all women and girls must be a fundamental principle within the VAWG Strategy.² Within this, Respect would specifically endorse the need for sustainable and equitable provision of 'by and for' specialist services. We believe that VAWG can only end if we address those who are perpetrating abuse. This means challenging the social norms that facilitate abuse, intervening with those on the cusp of offending, those already causing serious harm, and all stages in between. We want to see services and systems that enable those who have been abusive or are at risk of being abusive to change their behaviour and systems that force them to do so if they are unwilling to change. We want to see a range of interventions for all perpetrators of all forms of VAWG, including specialist interventions for individuals from Black and other minoritised communities, for LGBT perpetrators and/or those who are Deaf or disabled.

1. The Perpetrator Cohort

There is no one clear data set on perpetrators of VAWG (the ONS data set on victims/survivors does not collect separate data on perpetrators) so we have to piece together our knowledge from multiple fragmented sources, which restricts our understanding considerably.

However, we do know for example that in terms of domestic abuse alone, perpetrators cause harm to 2.3 million adult victims a year³ and many more children. In order to protect these victims, especially if we are to intervene at an earlier stage, more disaggregated data about perpetrators of all forms of VAWG must be collected and shared.

What we do know is that the cohort of perpetrators of domestic abuse is a diverse group. Mainly men, but some women, and including those in same sex relationships. All backgrounds, ages, religions, social classes and ethnicities. Perpetrators of intimate partner abuse and of abuse against parents, siblings and other family members. Multiple perpetrators abusing and controlling the same victim. Serial perpetrators with multiple victims. Some perpetrators just at the beginning of what could escalate, others

 $\frac{https://www.ons.gov.uk/people population and community/crime and justice/bulletins/domestic abuse in england and wales overview/november 2020 \# main-points$

¹ https://www.endviolenceagainstwomen.org.uk/joint-principles-launch/

 $^{^2\ \}text{https://www.endviolenceagainstwomen.org.uk/wp-content/uploads/Joint-Principles-for-the-VAWG-Strategy-2021-2024-l.pdf}$



entrenched in years, even decades of violent, abusive, controlling behaviour. Many causing high levels of harm with severe impacts. Some totally resistant to admitting and taking responsibility for their behaviour, others seeking help and determined to change. Some ready, willing and able to take part in behaviour change programmes, others with complex needs which act as barriers to engagement. Some in plain sight and well known to agencies, others invisible and yet to be identified. All require a response which is safe and effective in stopping their abuse.

Perpetrator Help Seeking

When conducting focus groups to understand the help seeking behaviour of men who are engaged in Domestic Abuse Perpetrator Programmes (DAPPs), we learnt that:

- All of the men in the focus group had gone to a GP or counselling service, but their abuse had either not been recognised, or they hadn't received the right advice.
- 1 in 3 told us that their friends and/or family knew about their abusive behaviour but hadn't known what to tell them.
- None of the men had known about programmes until someone else mentioned it to them.
- All of the men had relied on their partners to google the problem and find the right support.

Respect Phoneline

The Respect Phoneline⁴ is very often the first point of contact for anyone concerned about their own behaviour. Funded by the Home Office in England and Wales it provides advice and information, and signposts to local services. The service keeps comprehensive anonymised data on callers and has been evaluated several times, most recently by Durham University⁵ which concluded that callers 'rated the helpline very highly'.

Respect Phoneline data shows the vast majority of those calling the helpline are men, predominantly of white origin and aged between 25–54. The types of VAWG are mainly physical, emotional, psychological, coercive control, financial and sexual abuse with the latter two not as frequently mentioned. Of the women calling, issues around emotional and jealous behaviour are most common with fewer sharing physical violence.

Further research into the experiences of callers during the Covid 19 pandemic over the last year will be published in Spring 2021.

⁴ The Respect Phoneline https://respectphoneline.org.uk/

⁵ Westmarland and Burrell 'Perpetrators in the early stages of help–seeking: Views of service users – an evaluation of the Respect Phoneline' (2019)



Domestic abuse perpetrators

There are approximately 400,000 known domestic abuse perpetrators causing high (including murder) and medium levels of harm across England and Wales⁶, and yet only a tiny percentage of these – fewer than 1% – gets a specialist intervention that might prevent future abusive behaviour.⁷ Perpetrators whose victims are assessed at lower levels of risk are even less likely to get a specialist intervention.

Using MARAC data, adjusted for repeat and serial perpetrators, approximately 53,000 of these perpetrators are high harm, high risk.

The Drive evaluation⁸ tells us that of that high harm, high risk cohort:

- Most are men
- Many have a high level of additional needs
- They have had more experiences of childhood abuse or trauma than average
- Many are prolific offenders beyond domestic abuse

And according to MARAC data some have at least six different victims.9

Women who use violence and abuse

How frequently women use violence and abuse in the home remains the subject of considerable controversy. Research suggests that reports of prevalence rates for women who commit domestic abuse vary widely in accordance with how the topic is framed, conceptualized, and researched. Most notably, there is a significant discrepancy in prevalence rates reported by researchers who use crime statistics versus a survey-based approach.

A recent major study¹⁰ in Australia concludes that women who use force generally do so because they *want* power rather than because they *have* power. They wish to assert their personal autonomy *from* a partner, rather than exercise personal authority *over* a partner (coercive control). They also found that women use more psychological, verbal and emotional force than other kinds of violence. Physical force, when used, is more likely to be minor or moderate, rather than severe. In contrast with

⁶ Respect (2013), DVPP Commissioning Guidance for Police and Crime Commissioners. Accessible at: http://www.senedd.assembly.wales/documents/s30732/GBV%2090b%20-%20Respect.pdf

⁷ Respect (2013), DVPP Commissioning Guidance for Police and Crime Commissioners. Accessible at: http://www.senedd.assembly.wales/documents/s30732/GBV%2090b%20–%20Respect.pdf

⁸ Professor Marianne Hester et al, University of Bristol, 'Evaluation of the Drive Project – A Three–year Pilot to Address Highrisk, High–harm Perpetrators of Domestic Abuse' Evaluation of Year 2 of the Drive Project – A Pilot to Address High Risk Perpetrators of Domestic Abuse' (2019): http://driveproject.org.uk/wp-content/uploads/2020/03/DriveYear3_UoBEvaluationReport_Final.pdf

⁹ SafeLives MARAC National Dataset: www.safelives.org.uk/practice-support/resources-marac-meetings/latest-marac-data. Also: Robinson, Clancy, and Hanks, 'Prevalence and Characteristics of Serial Domestic Abuse Perpetrators: Multi-Agency Evidence from Wales' (2014) http://orca.cf.ac.uk/67542/

¹⁰ Kertesz, M., Humphreys, C., Ovenden, G., Spiteri–Staines, A. (2020) Women who use force: Final Report. Volume 1 – Executive Summary, Positive Shift Program, Evaluation of Positive Shift, and Practice Framework. Melbourne: University of Melbourne



male perpetrators, women tend to more openly disclose their perpetration to professionals.

Child and Adolescent to Parent Violence and Abuse (CAPVA)

It is difficult to be confident about prevalence as we do not have an agreed definition of CAPVA and it is often not recorded as a category on its own. Often it is subsumed under other presenting issues and case file audits are required to identify the prevalence in caseloads. However:

- Between 6th March 2019 and the 4th of January 2020 Northumbria police responded to 515 incidents of CAPVA (an average of two per day)¹¹
- Australian researcher Eddie Gallagher estimates that between 2–5% of young people engage in behaviour that can be described as CAPVA, where the abusive behaviour is serious and repeated¹².
- Respect and Numbers for Good undertook work to understand the prevalence of CAPVA in agency caseloads as part of research to develop a Social Income Bond. We found the prevalence in YOS caseloads between 27%–21%, of between 67%–64% of police DA incidents where the suspect was under 18 and between 3.7% and 4.5% of children's social care but significantly higher in the early help case load. A 2020 snapshot of Youth Justice cases found that 36% of open cases had concerns about CAPVA.

Other considerations

- Young people who have lived with parental domestic abuse in CAPVA cases make up a significant proportion of the CAPVA cases. The percentage of young people accessing the Respect Young People's Programme (RYPP) with a history of parental domestic abuse has consistently (across years and deliverers) been 58%-60%. This is supported by other research (Browne and Hamilton, 1998, Hunter et al. 2010).
- Young people with an ADHD/ASD diagnosis, make up about 2% of young people but around 30% of the young people referred to the RYPP. This is also reflected in the recent data from Northumbria police referred to above. Respect's experience is that ADHD/ASD is factor alongside other disruptions in the young person's life but is not on its own the reason for referral.
- CAPVA disproportionately affects women. CAPVA includes behaviours
 described in other contexts as intimate partner violence and abuse:
 physical, emotional, financial and occasionally sexual abuse, and
 coercive control. Worldwide, and echoed in the UK, it is thought that
 around 75% of the harm and abuse carried out is by boys and young

¹² Gallagher E (2008) Children's Violence to Parents: *A critical literature review.* Pub Monash University

_

¹¹ Thorley W, Coates A and Hughes J (2020) Policing Childhood Challenging Violent or Aggressive Behaviour Published by CEL\$T on behalf of Northumbria Police and University of Northumbria



men and the same amount is directed towards the female carer in the home, whether they be their mother, other relative or carer. The reasons for this gendered profile are complex, including (but not exclusively) maternal availability, societal messaging, and role modelling. Impacts include physical injury, damage to mental health, loss of employment, social isolation and break-up of the family. All members of the family are harmed, parents, siblings, and the young person themselves who may learn that their behaviour is effective, going on to use similar tactics in future relationships.

Perpetrators of other forms of VAWG

When considering perpetrators of forms of VAWG that aren't domestic abuse, we know even less although a sense of entitlement to control the lives of women and girls is a thread which connects them all, as is the likelihood of them being repeat offenders of VAWG crimes.

We are aware of a small number of studies, including one from the US focused on the male student population which found 10.8 % were rapists (in line with the FBI definition) and of these, 25% were serial rapists¹³.

But the evidence to date is very thin and this is an area where much more data collection and research is needed.

2. A Strategic Approach

Through the Drive partnership we have developed the call to action for a perpetrator strategy¹⁴ which has 5 components:

- Quality assurance
- Best practice interventions available across England and Wales
- Sustainable funding
- Strategic leadership
- Systems change across public and voluntary sector

Quality assurance

Any response to perpetrators could do more harm than good, so robust quality assurance processes to ensure interventions are safe, effective and accountable are vital.

¹³ Trajectory Analysis of the Campus Serial Rapist Assumption <u>Kevin M. Swartout, PhD; Mary P. Koss, PhD; Jacquelyn W. White, PhD</u>, JAMA Pediatrics July 2015

http://driveproject.org.uk/wp-content/uploads/2020/01/Call-to-Action-Final.pdf



Respect has published a set of principles and standards on which our accreditation system is based.¹⁵ The standards are not one-size-fits-all and can be easily applied to a range of interventions. They are regularly reviewed and updated to take account of new learning.

All perpetrator interventions (specialist service provision and frontline non-specialist responses) should be underpinned by the following principles:

- Do no harm. Organisations take all reasonable steps to ensure that their services do not create additional risks for survivors of domestic violence and abuse.
- 2. Gender matters. Organisations work in a way that is gender informed, recognising the gender asymmetry that exists in the degree, frequency and impact of domestic violence and abuse. They understand that men's violence against women and girls is an effect of the structural inequality between men and women and that its consequences are amplified by this. A gender analysis includes violence and abuse perpetrated by women against men and abuse in same-sex relationships, and these also require a gender informed response.
- 3. **Safety first.** The primary aim of work with perpetrators is to increase the safety and wellbeing of survivors and their children. The provision of an Integrated Support Service for survivors alongside the intervention for perpetrators is essential. When working with perpetrators it is important to recognise the need for behaviour change, but risk reduction should always be prioritised.
- 4. **Sustainable change**. Organisations offer interventions that are an appropriate match to the perpetrator, considering the risks they pose, the needs they have and their willingness and ability to engage with the service offered. This will ensure that they are offered a realistic opportunity of achieving sustainable change.
- 5. **Fulfilling lives**. Organisations are committed to supporting all service users to have healthy, respectful relationships and to lead fulfilling lives.
- 6. **The system** alone and work with perpetrators should never take place in isolation. Organisations are committed to working with partners to improve responses as part of their local multiagency arrangements.
- 7. **Services for all**. Organisations recognise and respect the diversity of their local community and take steps to respond to everyone according to their needs.
- 8. **Respectful communities**. Organisations recognise that the environment their service users live in has an impact on their lives. They will make the links between individual change and the development of respectful communities.

_

¹⁵ These can be accessed here: https://www.respect.uk.net/pages/64-respect-standard



- 9. **Competent staff**. Organisations deliver a safe, effective service by developing the skills, well-being and knowledge of their staff through training, supervision and case work support.
- 10. **Measurably effective services**. Organisations employ clear and proportionate measurement tools, which demonstrate both the individual benefits and the impact of interventions.
- 11. **counts**. Domestic violence and abuse cannot be addressed by one agency

These standards and principles have been supported by successive governments since 2008. However, this has not led to consistency of commissioning which is currently patchy and frequently unsafe. We recommend this government reviews the standards and quality assurance processes it expects across all statutory and voluntary sector perpetrator responses and clearly sets out standards it expects frontline and specialist services and commissioning processes to meet. Respect would be keen to take part in this process.

Sustainable funding

VAWG is one of the greatest human rights abuses and costs the public purse a vast amount of money. In 2019, the Home Office estimated the total cost of domestic abuse alone for victims who were identified in a single year at £66bn.¹⁶

These costs are disproportionately borne by women. Every week, two women are killed by a current or former partner in England and Wales.¹⁷

One in four women¹⁸ have experienced domestic abuse in their lifetime and domestic abuse represents a third of all violent crime recorded by the police.¹⁹

Domestic abuse fuels a range of other high cost social problems such as poor mental health, problematic substance use and traumatised young people turning to gangs and crime.

¹⁶ This cost represents the total cost, including Quality Adjusted Life Years (health and mental costs), for the duration of abuse and recovery for those victims. See Home Office, Oliver, Alexander, Roe and Wlasny, 'The economic and social costs of domestic abuse' (2019):

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/772180/horr107.pdf

Office for National Statistics (2016) Compendium – Homicide (average taken over 10 years) https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/compendium/focusonviolentcrimeandsexualoffences/yearendingmarch2016/

Crime Survey for England and Wales (CSEW) for the year ending 31 March 2018 https://www.ons.gov.uk/
 peoplepopulationandcommunity/crimeandjustice/bulletins/crimeinenglandandwales/yearendingmarch2018
 Section 5 'Domestic abuse recorded by the police', Crime Survey for England and Wales (CSEW) for the year ending 31 March 2018

https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwales/yearendingmarch2018#domestic-abuse-recorded-by-the-police



We need a much more significant investment than ever before, if we want to see wholesale change. Respect recommends that the development of clear, distinct, sustainable funding streams for specialist service provision for adult and child survivors, adult perpetrators and children and young people who use violence and abuse.

There is also an urgent need to develop tailored responses for specific populations such as (among others) Black and minoritised perpetrators, LGBTQ and Deaf and disabled perpetrators. Investment in developing these is unlikely to occur at a local level and Government investment will be needed to fill these best practice gaps.

Strategic leadership

Long-term action is needed to prevent VAWG and address the cultural norms that underpin it.

Culture change is needed across every government department and statutory agency. This can only happen with strategic leadership at the highest level and a comprehensive programme of systems and culture change. It is crucial that the VAWG strategy is cross government so that all government departments are held to account.

This should include:

- widespread public awareness and prevention campaigns
- training
- monitoring
- accountability structures

Government leadership needs to emphasise that VAWG is not inevitable, there is no excuse for abuse and to ensure that all government departments participate in a shared endeavour to prevent and end abuse and hold anyone who does abuse to account.

3. <u>Best Practice - developing the evidence base</u>

Understanding how to stop perpetrators is key to the goal of ending domestic abuse, so developing an evidence base to support the development of this field is critical.

Over the last 30 years, various evaluations from across the globe have offered evidence that perpetrator programmes do reduce physical and sexual violence. These studies have employed a range of research methods to examine programme effectiveness in enhancing victim/survivor and children's safety and holding perpetrators accountable for their



behaviour, whilst supporting them to stop using violence, abuse and coercive control.

As part of the evaluation of the Make a Change project there is a comprehensive international literature review which might be of interest²⁰.

Mirabal research project of Respect accredited Domestic Abuse Perpetrator Programmes (DAPPs)

The Mirabal project identified 6 indicators of success²¹ across a range of measures:

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

Outcomes were largely positive: physical and sexual violence was 'not just reduced but ended for the majority of women' (Kelly and Westmarland, 2015: 45):

- 30% of women involved in the programme reported being made to "do something sexual" they did not want to do in the three months before the programme started. That was reduced to zero a year after starting the programme.
- 29% of women reported having a weapon used against them in the three months before the programme. This was reduced to zero a year after starting the programme.
- Reports from women who said they were slapped, punched or had something thrown at them reduced from 87% to 7%.
- Far fewer women reported being physically injured after the programme (61% before, compared to 2% after).
- Similarly, the extent to which children saw or overheard violence also dropped substantially, from 80% to 8%.
- The evaluators concluded that: DVPPs 'extend men's understandings of violence and abuse, with clear shifts from talking about stand-alone incidents of physical violence to beginning to recognise ongoing coercive control' (Kelly and Westmarland, 2015:45).

Outcomes for the other key indicators were more mixed, though still tending towards a positive improvement for most participants.

²⁰ https://hubble-live-assets.s3.amazonaws.com/respect/redactor2_assets/files/336/Make_a_Change_full_report_July_2020.pdf

https://www.dur.ac.uk/resources/criva/whatcountsassuccessbriefingnote.pdf



Mirabal also found that fewer children were scared of the perpetrator, or were worried about the safety of their mother, and men were less likely to make excuses for their behaviour.

The findings from Mirabal are consistent with those from multi-site evaluations of DVPPs in the US and Australia. The combined results of this body of non-experimental research indicates the potential for largely positive outcomes for women/ partners and their children (improvements in well-being, quality of life and resilience to repeat victimisation) supporting the argument for a wider definition of intervention 'success' and for the use of women/partner reports in evaluation, which has long been proposed as a valid and reliable measure of change or 'success'.²²

Drive project evaluation

A more recent study of the Drive project from the University of Bristol shows a 30% reduction in the number of criminal domestic violence and abuse (DVA) incidents amongst a cohort of perpetrators receiving an intervention compared to the control group²³

MATAC evaluation

The University of Northumbria evaluation of the MATAC intervention was found to have a 65% reduction in DVA related offending and a social return on investment of £14 for every £1 spent.²⁴

International research

Melanie Shepard examined abusive behaviour at different programme phases in a 1985 study. A one-year follow-up study of victims' data was collected from 39 victims whose partners had completed the programme an average of twelve months earlier. Victims reported significantly lower rates of physical and psychological abuse when compared to rates of abuse during time periods prior to or during their participation in the programme. Shepard M (1985) "Summary: Evaluation of Domestic Abuse Intervention Project Counseling and Educational Program," Duluth, Minnesota

Professor Edward Gondolf conducted a seven–year, multi–site evaluation in 2002²⁵ and followed it up in 2004 to look at the lasting impact of domestic abuse perpetrator programmes. He concluded that "well–

²² Kelly L and Westmarland N (2015) Domestic violence perpetrator programmes: Steps towards change. Project Mirabal Final Report

²³ Professor Marianne Hester et al, University of Bristol, 'Evaluation of the Drive Project – A Three–year Pilot to Address Highrisk, High-harm Perpetrators of Domestic Abuse' Evaluation of Year 2 of the Drive Project – A Pilot to Address High Risk Perpetrators of Domestic Abuse' (2019): http://driveproject.org.uk/wp-content/uploads/2020/03/DriveYear3_UoBEvaluationReport_Final.pdf

²⁴ Northumbria University evaluation of the MATAC approach. Data accessed at http://n8prp.org.uk/wp-content/uploads/2017/06/MATAC-N8-presentation-final-11-June-2017.pdf

²⁵ Gondolf E (2002) Batterer intervention systems: Issues, outcomes and recommendations. Thousand Oaks, CA: Sage https://sk.sagepub.com/books/batterer-intervention-systems



established batterer intervention programs with sufficient reinforcement from the courts do contribute to a substantial decline in re–assault."

In 2004²⁶, he reported that "at the 30-month follow-up, less than 20% of the men had re-assaulted their partner in the previous year; at the 48-month follow-up, approximately 10% had re-assaulted in the previous year. Moreover, over two-thirds of the women said their quality of life had improved and 85% felt very safe at both these follow-up points."

Professor Emeritus Thea Brown and Dr Catherine Flynn carried out a study in Australia²⁷ which found that "the majority of the men who completed the programs did change in the short and long term. The trajectory of violence was an initial sharp fall immediately on program completion, followed by further reductions one year later and reductions yet again

two years later. In summary, some 65% of the men who completed the program and

stage 2 of the study were either violence free or almost violence free two years after

they competed their program."

4. Best practice examples

There are 4 key types of specialist intervention with perpetrators of domestic abuse:

- Early responses
- Domestic Abuse Perpetrator Programmes (DAPPs)
- High harm, high risk interventions
- Interventions with young people (RYPP)

Early responses

Domestic abuse doesn't just affect individual families, but entire communities. It is crucial to not only work with people who use abusive behaviour, but empower the people around them – local communities, friends, families and professionals – to see themselves as part of the solution, and to work together to address the problem. Grassroots, community based services are key to any early response strategy to bring about social change.

²⁶ Heckert D and Gondolf E, (2004) Predicting Abuse and Reassault Among Batterer Program Participants. NCJ 199730. https://www.ncjrs.gov/pdffiles1/nij/199730.pdf

²⁷ Brown et al (2016) <u>A Study of The Impact On Men & Their Partners</u> In The Short Term & In The Long Term Of Attending Men's Behaviour Change Programs (copy available).



Make a Change

Make a Change (MAC) was developed by Respect in partnership with Women's Aid Federation England (WAFE). Inspired by WAFE's flagship Change That Lasts model approach, and delivered by locally based organisations, MAC aims to fill a significant gap in service provision, wherein domestic abuse is taking place but has not yet come to the attention of services or does not meet the threshold for a statutory referral.

MAC provides a flexibly delivered, modular domestic abuse perpetrator programme (DAPP) which is motivational in its stance. Recognising that programmes alone cannot engender the systemic and cultural change we wish to see, MAC also works with trusted professionals, whole organisations, and community members (including the family and friends of perpetrators) to ensure that we raise awareness of domestic abuse and reduce existing barriers to engagement.

Make a Change aims to:

- Intervene with abusive behaviour at an earlier stage than is typical, before it becomes entrenched and intervention is mandated by family court, criminal justice and/or children's social care processes
- Enable survivors to achieve safety and recovery for themselves and their children as soon as possible, and seek professional help addressing their partners' behaviour without waiting for the involvement of statutory services
- Encourage communities, including friends, family members, professionals and other agencies, to see themselves as part of the solution, and empower them to take action to address domestic abuse
- Reduce the wider social and financial impact of abusive behaviour.

A key feature of the MAC programme is that it accepts self-referrals. This means that people who are concerned about their abusive behaviour can access support at a much earlier stage than usual, at a time when their motivation to change is higher and their behavioural difficulties are less entrenched. Moreover, the phased, modular structure of MAC's behavioural change programme is designed to allow clients to engage with the service without first explicitly disclosing their abusive behaviours.

Findings from the pilot phase showed that:

- 77% of those referred to MAC by themselves or someone else went on to undertake behavioural change work.
- 75% of the men who attended MAC's behavioural change programme completed it; this represents an unusually high level of retention.



- Self-referral was the most frequent referral pathway for those accessing expert support: This challenges the notion that only mandated clients will complete behavioural change programmes.
- The most frequently cited motivation for those accessing the programme was wanting to improve their relationships, wanting help to stop being abusive, and wanting their partners and ex-partners to feel safe around them.
- The ages of those referred ranged from 19–66, a distribution which challenges the commonly held view that those who behave abusively are typically clustered in the young adult to early middle age range.

Make a Change represents an important new intervention in the domestic abuse service landscape. Concerns have long been expressed –both by researchers and organisations in the sector – that if commissioning is based exclusively on risk, interventions often come too late: they are focused on harms done, rather than preventing the future onset and escalation of abuse. The Make A Change model is highly effective as an early response to people who behave abusively in their intimate relationships. Continued removal of key obstacles to help–seeking, coupled with a motivational approach, is likely to lead to high programme retention rates, as has been demonstrated to date. As such, it sits alongside and complements existing services, whilst also addressing concerns that have been identified as important in both perpetrator responses and victim support research, practice and policy.

Change that Lasts Wales – Perpetrator Response

Respect and Welsh Women's Aid have developed in partnership a perpetrator response to Violence Against Women Domestic Abuse and Sexual Violence (VAWDASV) as part of the Change that Lasts model. Change that Lasts is a strengths-based, needs-led approach that supports survivors of all forms of violence against women, and their children, to build resilience, and leads to independence. Respect's role is to work in partnership with Welsh Women's Aid to create a complementary strand of work (CLEAR), embedded in the model, that addresses the need to provide early responses to perpetrators. As well as direct service delivery with those using abuse, we work with the Change that Lasts team to embed a perpetrator response thought the whole system approach, including training (Trusted Professional) and workforce development.

Intervening at the earliest possible opportunity before behaviours are entrenched, provides a number of advantages:

• Enables survivors to achieve safety and recovery for themselves and their children as soon as possible, and those using abuse to seek



- professional help addressing their behaviour without waiting for the involvement of statutory services
- With a shift to the focus on the behaviour of the perpetrator we reduce victim blaming and create an environment where survivors can identify the abuse they are experiencing and seek help before crisis point
- Encourage a shift in the societal perception of the acceptability of, or responsibility for abuse and so place the issue with those using abusive behaviours
- Encourage communities, including friends, family members, professionals and other agencies, to see themselves as part of the solution, and empower them to take action to address domestic abuse
- Reduce the wider social and financial impact of abusive behaviour

Domestic Abuse Perpetrator Programmes (DAPPs)

DAPPs are behaviour change programmes for perpetrators who are ready, willing and able to change. They work with those at any point on the risk scale, but are only likely to be successful with those who recognise they have a problem and want to do something about it.

DAPPs are structured programmes, usually groupwork, mainly for men in heterosexual relationships. Currently those who cannot engage in groups are offered one to one support.

DAPPs are discussion based and use a variety of interactive exercises to make the learning realistic, stimulating and relevant to each person's own situation. There are many different programmes across the UK, and the content will vary, but on the whole they will help perpetrators to:

- Understand what violence, abuse, coercion and control are
- Unpick why they are abusive, exploring their past use of abuse to identify the attitudes and beliefs that underpin their behaviour, making way for change
- Learn that they are in control of their own behaviour and can choose not to be abusive
- Take responsibility for their behaviour, without blaming others or minimising it
- Build empathy and realise the impact of their abuse on their partner and children
- Learn how to notice when they are becoming abusive and how to stop
- Learn different, non-abusive ways of dealing with difficulties in their relationship
- Deal non-abusively with their partner's anger
- Develop negotiation and listening skills and learn how to build a respectful relationship



There are currently 24 Respect accredited DAPPs in the UK with significant gaps in geographical coverage. Respect recommends every local area should have a Respect accredited DAPP as a resource for agencies to refer to and for perpetrators themselves to get help directly.

High harm, high risk interventions

The Drive Intervention works with high-harm, high-risk and serial perpetrators of domestic abuse. High-risk, high-harm perpetrators are those who pose the greatest risk of serious harm or murder to people they are in intimate or family relationships with.

The intervention incorporates:

- Intensive one-to-one work and case management. The Drive case
 manager works with the perpetrator to challenge and support changes
 in attitudes, beliefs and behaviour. This often also requires addressing
 additional needs that stand in the way of the change process, such as
 mental health, substance misuse and housing needs.
- A coordinated multi-agency response that disrupts opportunities for perpetrators to continue their abuse; and identifies and reduces risk.
- Independent Domestic Violence Advisor (IDVA) support for the victim/survivor to ensure joined up working and safety.

Drive does not require the direct engagement of perpetrators and where perpetrators refuse to engage, is still able to reduce risk through multiagency efforts to disrupt abuse and provide specialist support to survivors. Agencies share information and are responsive to the dangers perpetrators pose and are ready to prevent/react to any changes (like new child contact arrangements or a new partner) that might increase risk.

This combination of one-to-one interventions alongside a police-led multiagency response together with the three-pronged approach of disrupt, change, support is what makes Drive different from other interventions.

Drive has undergone a three–year independent evaluation conducted by the University of Bristol²⁸ which concluded that Drive reduces abuse, and the risk perpetrators pose:

- physical abuse reduced by 82%;
- sexual abuse reduced by 88%,
- harassment and stalking behaviours reduced by 75%;

²⁸ http://driveproject.org.uk/wp-content/uploads/2020/03/DriveYear3_UoBEvaluationReport_Final.pdf



jealous and controlling behaviours reduced by 73%.

How Drive has been expanded:

An external evaluation demonstrating the successful impact of Drive in three original Drive pilot sites contributed to securing further funding to expand the project. From the outset, Drive has been funded through a blended funding model including philanthropic, local and central government funding..

Current and past funders include: The National Lottery, Lloyds
Bank Foundation for England and Wales, Comic Relief, Tudor Trust, The
Selegman Trust, Police and Crime Commissioners and Local Authorities.
Crucially, the project has benefited from government funding from the
Police Innovation and Transformation Fund and the COVID-19 Emergency
Fund. The combination of central government and philanthropic funding to
support a central programme delivery team has enabled the systematic
evaluation and development of Drive across England and Wales in a way
that lends itself to coherent delivery at scale. This would not have been
possible if the intervention had been funded solely at a local level via
PCC's and Local Authorities. Importantly, this philanthropic and central
government funding has helped lever and encourage local investment.

In 2020, Home Office and TNLCF funding both matched by local commissioners, meant Drive expanded to 10 PCC areas, covering 21 LA areas, in total²⁹. However, Drive still only works with a minority of perpetrators whose current or former partners are being heard at MARAC and the vast majority of these perpetrators still get no specialist intervention at all. There is need and scope to continue scaling up Drive using the current expansion and funding framework.

Respect Young People's Programme (RYPP)

The RYPP is a whole family intervention for families experiencing Child and Adolescent to Parent Violence and Abuse (CAPVA). The intervention is targeted at reducing risk factors associated with later offending/aggressive behaviour such as:

- Early conduct disorder
- Poor attachment
- Poor school engagement
- Ineffective / permissive parenting
- Low empathy
- High entitlement
- Poor conflict resolution skills

 $^{^{29}\} http://driveproject.org.uk/news/two-thousand-more-victims-will-be-supported-to-stay-safe-through-drive-as-government-and-pccs-invest-in-holding-perpetrators-to-account/$



- Poor emotional regulation
- Risk taking behaviours

Respect provides training and ongoing support so that front line professionals can deliver the RYPP intervention, either in a group or individual setting over 3–6 months.

Independent analysis by the Dartington Social Research Unit (2016) of the impact of the RYPP showed statistically significant improvements in the young person's:

- mental health
- conduct
- emotional problems
- pro-social behaviour
- coping skills

See https://www.respect.uk.net/pages/44-work-with-young-people-s-violence-and-abuse

The RYPP is delivered in around 30 Local Authority areas and in range of settings including Children's Social Care, Youth Justice, Family Support Services and Domestic Abuse agencies.

It should be noted that over the past couple of years the Respect Young People's Programme (RYPP) case load has seen an increase in young people with mental health needs (anxiety and depression) and young people with an ADHD/Autism diagnosis. An unanticipated finding was that the young people accessing the RYPP were more likely to be victims of bullying/exploitation outside the home than to be bullying others.

Respect has been in receipt of Youth Endowment Fund support to work with Dartington Service Design Lab and the City of York Educational Psychology Team to adapt the Respect Young People's Programme to better meet the needs of a neurologically diverse group of young people.

5. Systems Change

One of the key Respect principles for any response to perpetrators is 'the system counts – domestic violence and abuse cannot be addressed by one agency alone and work with perpetrators should never take place in isolation.' Every community needs a whole system approach to perpetrators that puts the safety, wellbeing and freedom of adult and child survivors at its heart.



In terms of perpetrators this approach should include:

- Multi-agency perpetrator panels to coordinate action and intervention on the ground. Services need to work together to share information – within the law – and actively manage the risk perpetrators pose
- Workforce development and specialist training in identifying and responding to perpetrators. Respect would like to see VAWG as a topic (including a focus on perpetrators) become a core part of undergraduate training for all relevant professionals so that subsequent training can focus on practice skills and not on imparting basic knowledge.

Each statutory agency needs to commit to wide-ranging systems change specific to its own work.

Justice

Key to the management of perpetrators and protection of survivors is an effective criminal justice system. High quality policing with effective evidence gathering to ensure a successful prosecution where crimes have been committed is essential, as is appropriate sentencing and robust management of offenders. Despite improvements, the attrition rate for domestic and sexual violence is still far too high.

In cases where there isn't enough evidence to prosecute, other sanctions can be employed, such as the upcoming DAPOs, to restrict and manage perpetrators. It is essential that these options are only used where the threshold for charging has not been reached, and not as a diversion from prosecution.

Justice for survivors can mean many things other than criminal justice. Recent research findings³⁰ show that:

- Formal justice systems are not effective, although an essential part of the 'mix'
- The most vulnerable have least justice
- Victim focused justice has to take into account that victims/survivors want:
 - o Fairness
 - Recognition by perpetrators
 - o To be listened to
 - o A genuine (public) apology for the harm done
 - To be given a voice

³⁰ Hester et al. 2018 'Justice, Inequality and Gender Based Violence', research funded by ESRC Grant Number ES/M010090/I http://www.bris.ac.uk/sps/research/projects/current/justiceinequality/



Policina

The majority of survivors continue not to involve the police in their experiences of violence and abuse. Recent research from Women's Aid³¹ showed that less than half (43.7%) of refuge residents had involved the police, with this falling to only 28% of survivors' resident in the community. The conversion of reports through to convictions continues to remain unacceptably low with the willingness of the victim to support a prosecution all too often deciding whether a case goes forward or not despite the increase in helpful tools such as Body Worn Video and the ability to capture electronic communications. These can provide much needed evidence to support a prosecution with or without victim testimony.

Changes in bail practices have been especially damaging to survivor confidence in the CJS. We acknowledge this is currently being addressed but reparative work may be needed by Government to restore confidence.

We would further recommend that police:

- Receive training on stalking and harassment, coercive control, identifying the primary perpetrator, recording offences and information sharing. This training must reach all ranks and include refresher training at regular intervals.
- A requirement for police to suggest quality-assured perpetrator intervention for the perpetrator, where appropriate. We wish to emphasise that any police referrals to perpetrator interventions should be considered alongside rather than instead of a criminal justice response.
- Work together with local authorities/housing to ensure that the perpetrator is appropriately and safely accommodated.
- Align the currently divergent DVDS disclosure thresholds between forces
- Establish a multi-agency perpetrator panel in each force area to coordinate a multi-agency response to perpetrators

Probation

- The Building Better Relationships programme needs a root and branch review along with associated rehabilitation activity. As it stands, we are not convinced that BBR is fit for purpose
- Reduce caseloads to increase contact time
- Evaluate the effectiveness of MAPPA and work to increase relevant referrals from mental health

³¹ 'Survival and Beyond' Women's Aid 2021: https://www.womensaid.org.uk/wp-content/uploads/2018/03/Survival-and-Beyond.pdf



- Ensure time for engagement in other multi-agency for a and partnership working
- Tighten management of prison release. All too often perpetrators are released to the home of their victim and /or breaches of conditions are seen as mutual even though the victim is not subject to any conditions.
- Investigate the potential for GPS tracking which is now operational in several European countries and which affords immense benefits to the survivor.

Social Care

Domestic abuse is the most common risk factor identified by social workers. In assessments³², 169,860 children in need cases were identified in 2020 alone. This presents a critical opportunity to intervene with perpetrators.

Unfortunately, perpetrators are often invisible within social work practice and there is a lack of nuanced understanding of Domestic Abuse. It is often the case that women are trapped between the 'system' and managing the risk of a perpetrator. Models such as Safe and Together support social workers to develop practice to be able to respond appropriately to maximise survivor safety and hold perpetrators to account.

Safe and Together Model

Since October 2019, Respect has been partnered with the London Boroughs of Waltham Forest and Hackney to implement the Safe & Together Model.³³ This is structured around the principles of:

- Keeping children safe and together with the non-offending parent
- Partnering with the non-offending parent as a default position
- Intervening with the perpetrator to reduce risk and harm to child

The London Safe and Together Partnership is a systems change approach to modernise and improve the response to domestic abuse across all the staff in children's services and their partner agencies. Waltham Forest and Hackney have committed to this system change approach at a political and senior management level.

Family Court

Respect were members of the Ministry of Justice Harm Panel that reported in 2020.³⁴

We fully support the recommendations of the Panel and are pleased to see that government is taking action to implement these. The implementation of investigative, non-adversarial approach to child

³² https://explore-education-statistics.service.gov.uk/find-statistics/characteristics-of-children-in-need/2020

³³ https://safeandtogetherinstitute.com/about-us/about-the-model/ This is an independently evaluated model in use in many jurisdictions with similar children's social care to the UK>

https://consult.justice.gov.uk/digital-communications/assessing-harm-private-family-law-proceedings/



arrangements is long overdue and must have robust leadership if culture change that this approach requires is to transform family Law. Respect would also like to the see the Panel's recommendation for a review of the provision of Domestic Abuse Perpetrator Programmes taken forward. The current provision was not designed for family justice and reform is needed to ensure that abusive fathers are not progressing to unsafe contact with their children through this route and that provision better meets the needs of families

Housing

Housing constitutes a key pathway to safety for victims–survivors of domestic abuse. Respect believes a range of options should be available including refuges in the short terms and relocation options in the longer terms where this is needed to ensure survivor safety and ability to recover from trauma.

However, we also believe that where possible, victims-survivors need to be supported to stay within their own homes and the responsibility of relocating should be placed on the perpetrator. In order for this to be a realistic option, in many instances this will also require risk-managed housing pathways for perpetrators to prevent them returning to the victim or vulnerable family members and encouraging them to engage in behaviour change work with a specialist organisation.

There are still far too many barriers to re-housing the perpetrator. These include:

- Two thirds of service providers do not know if housing services can take action against a perpetrator of domestic abuse.³⁵
- Of those who do know they can take action, there is still a gap. Despite 72% of housing providers including perpetration of domestic abuse as a tenancy breach, only half had taken ever taken action against perpetrators³⁶ highlighting a gap between policy and action.
- Poor involvement by housing in local MATACs and MAPPAs
- Poor communication and information sharing between homelessness / housing teams and police when a DVPN/DVPO is issued. This means appropriate accommodation options are not secured for the perpetrator, ensuring their immediate separation/removal from the home, and that support is provided to the victim-survivor.
- Suboptimal multi-agency working between Probation, housing, and social services when planning prison releases leading to poor risk assessments of accommodation options

https://womensaid.scot/wp-content/uploads/2017/07/Change-Justice-Fairness.pdf

https://www.dahalliance.org.uk/media/10662/16_-wha-perpetrator-management.pdf



In some cases, efforts will be made the remove the perpetrator but often they are not able to access alternative accommodation and return to the family home, putting the victim at risk. There are particular challenges around:

- · Perpetrators being classed as 'intentionally homeless'.
- Perpetrators being released from prison and navigating back to victims' addresses for want of alternative accommodation.
- The responsibility being unfairly placed on the victim-survivor to not allow the perpetrator back into the home. This can be used to control victims-survivors further and therefore drives abuse further 'underground' and goes unreported as they fear eviction or Children's Social Services' involvement.
- The reluctance of some judges to make someone homeless through the granting of a Domestic Violence Protection Order or Occupation Order thereby preventing the police from using this tool effectively.
- The onerous cost and nature of the process by which landlords can transfer a tenancy from a joint tenancy into a victim's name, in cases where there has been domestic abuse, to remove the perpetrator. There is scope for streamlining this so that when a charge has been made and a DV Protection Notice has been issued, the landlord can simply and quickly transfer the tenancy to the victim's name.
- There are also cases of those who voluntarily recognise the need to move out of the family accommodation linked to their behaviour but are unable to do so.
- The perpetrator not being provided housing due to additional needs e.g., metal health.

There needs to be viable housing pathways for the perpetrator. Otherwise, the perpetrator may be rightly removed from one address to enable the adult and child victims to stay in their own home, but with limited options may then have to move in with another partner, expartner, or family member. This just transfers the problem elsewhere and puts further people at risk.

Health (including mental health)

Health is one of the least stigmatised public services and where large numbers of both victims and perpetrators seek early help. As such, it is critically important that health services are able to provide appropriate help and support.

We are concerned that training for all health staff, appears to be governed by intercollegiate documents which do not currently mandate VAWG training. This results in VAWG being subsumed under general safeguarding training which in turn reduces VAWG specific content to around an hour which almost never includes any information on working with perpetrators.



Mental health services need to work more closely with domestic abuse specialists and to recognise the relevance of domestic abuse and perpetration instead of just treating the individual's mental health needs as an isolated issue. To address the relative absence of effective engagement with perpetrators of domestic abuse, a recent Domestic Homicide Review³⁷ recommended the co-location of DAPP workers in the local Mental Health Trust. Their role is not to carry a caseload but to act as an adviser on individual cases and to increase the knowledge of and skills to work with domestic abuse perpetrators among staff. It is in its infancy at the moment but has potential for narrow the gaps between mental health services and domestic abuse interventions.

There is currently too sharp a demarcation between justice and mental health. Despite some of the efforts to forge a link, such as MAPPA, there seems to be an assumption that once someone has been assigned to hospital rather than prison, their care becomes essentially a medical task – one of cure rather than custody. Judgements about the patient's release would appear to be made largely on the basis of managing stability in their mental health, with limited regard either to culpability for the original offence or even to the danger that they might pose to others when out in the community. This currently represents a dangerous gap which needs to be addressed.

6. What survivors say about interventions with perpetrators

The SafeLives Every Story Matters survey found that 80% of survivors said they think interventions for perpetrators are a good idea.³⁸

The Mirabal project research asked survivors whose partners attended a Respect accredited DAPP what they thought about the programme. Women talked about hoping that it would help men to 'sort themselves out' and realise what they had done and the harms it had wrought.

In response to the question 'do you think he will change' the researchers said:

Some women were confident that their partner would change because of the programme, having already seen early shifts... A minority were adamant that he would not: Sophie, for example, said only 'a miracle' would help, whereas others thought change was unlikely since in their view the men were 'going through the motions'. This was especially the

38 SafeLives, Every Story Matters, 2018

³⁷ Alyssa, Brent Community Safety Partnership 2021



case where men were required to attend to ensure or even establish ongoing child contact.

The most common response to this question though was one of deep felt hope.

That's a big one. I'm hopeful, I like to think he would [change], but I'm not gonna set myself up any goals. So – hopeful (Adele, Time 1).

An NSPCC³⁹ study of children's views of the perpetrator programme their father attended found that

- Children had limited knowledge of perpetrator work but saw it as a helpful and an appropriate intervention.
- Children considered their mother to be "safer" when a perpetrator was on, or had attended a perpetrator programme, but did not necessarily feel safer themselves. The report also established that there was little consistency with regard to safety planning work for the children in this sample.
- Children were aware that perpetrator work was linked to violent/angry behaviour by their father/male carer and that attendance was an attempt to change this behaviour.
- Perpetrator programmes did not appear to lead to violent fathers/male carers talking openly to their children about their violent behaviour.

In all Respect accredited interventions, survivor support is an essential component. Survivors who were supported via the Make a Change⁴⁰ project said they felt that the benefits of this support included:

- · Understanding the programme and what it involved;
- Proactive contact from the Integrated Support Service, which often represented the first time they had ever spoken about their experiences, to a professional or anyone else;
- Space for reflection, concerning decisions about their relationship with the abusive partner.

"The support has been absolutely amazing...I hadn't ever told anybody the whole truth about it all...you just feel too ashamed, stupid, like you've done something wrong... Whereas talking to [a support worker]... It's like a weight has been lifted." (Survivor)

What are Children and Young People's views and opinions of perpetrator programmes for their violent father/male carer?"
 Gwynne Rayns NSPCC 2010 https://dera.ioe.ac.uk/2758/7/Microsoft_Word_-_PLR0910086Rayns_YT_edits_Final_Redacted.pdf
 https://hubble-live-assets.s3.amazonaws.com/respect/redactor2_assets/files/336/Make_a_Change_full_report_July_2020.pdf



"So it was only now that I really feel like I can label it with some kind of confidence... I didn't know what was happening before, it was really

confusing, because every time you'd convince yourself it was kind of okay." (Survivor)

Far too many survivors, however, despite being supportive of interventions with their abuser, end up feeling bitterly betrayed when an intervention is inadequate and unsafe. Whilst obviously hopeful that the intervention will 'work' in terms of changing his behaviour, a quality intervention that doesn't result in that outcome is experienced by survivors as the responsibility of the abuser. An intervention that is inadequate and unsafe not only feels like the wider culture is careless of her and her children, but also that the abuser has been let down and not given the help that he needs.

7. Perpetrators' other (non VAWG) offending

As mentioned above, we do not know who the majority of perpetrators are.

However, of the high–harm, high–risk cohort (estimated by Drive to be at least 53,000), we know that many are prolific offenders beyond domestic abuse.

Data collected for the Drive evaluation showed that the average number of police non-domestic violence incidents per perpetrator in the control group of high harm high risk perpetrators was 48 over a four-year period although this covered a range from 0 to 174. The evaluation showed that Drive clients had a lower number of non-domestic violence police incidents compared to the control group and therefore pointed to a positive impact of the Drive intervention in that regard.

However, the highest harm and risk perpetrators, that is, those who commit murder, do not fit this profile. An analysis of the past years

Domestic Homicide Reviews⁴¹ showed that only 45% (*n* 51) of perpetrators had a previous offending history. Of these perpetrators only 13 (25%) had a previous conviction that was not related to domestic abuse.

_

⁴¹ QE Assessments (forthcoming)