An exploratory examination of practitioners' and offenders' perceptions of the effectiveness of an individual workbook approach for treating intimate partner violence offenders

Walker, K, Brown, SJ & Hicks, K

Original citation & hyperlink:
Walker, K, Brown, SJ & Hicks, K 2016, 'An exploratory examination of practitioners' and offenders' perceptions of the effectiveness of an individual workbook approach for treating intimate partner violence offenders' *Psychology, Crime & Law*, vol 22, no. 10, pp. 977-999
http://dx.doi.org/10.1080/1068316X.2016.1207769

DOI 10.1080/1068316X.2016.1207769
ISSN 1068-316X
ESSN 1477-2744

Publisher: Taylor and Francis

This is an Accepted Manuscript of an article published by Taylor & Francis in Psychology, Crime and Law on 30th June 2016, available online: http://www.tandfonline.com/10.1080/1068316X.2016.1207769

Psychology, Crime and Law

An exploratory examination of practitioners' and offenders' perceptions of the effectiveness of an individual workbook approach for treating intimate partner violence offenders

Kate Walker, Sarah Brown and Katy Hicks

Abstract

Perceptions of probation staff and offenders were explored regarding the effectiveness of an individual workbook intervention for intimate partner violence (IPV), based on the Integrated Domestic Abuse Programme, a group intervention for IPV offenders in the UK. Using thematic analysis, interview transcripts from 11 probation staff and 2 offenders were examined. Two global themes were identified: *Promising alternative to IPV interventions*, representing positive perceptions of the workbook; and, *Compromises made in using the workbook*, reflecting negative perceptions and challenges. The identified strengths were that the workbook provided staff with a framework to deliver individualised intervention (deemed to be more difficult in group treatment formats), employed a strength based and directive approach to discussions to develop offenders' skills and behaviours that may assist in improving deficits linked to their use of violence. However, identified problematic factors related to treatment integrity including delivery, content and format, its capacity to create change, and a need for further development. As a concept the workbook intervention should not be discounted since it offers an opportunity to offer individualised treatment and interventions to those unable to attend groups; however, the intervention requires development and further research to examine its effectiveness.

Keywords: intimate partner violence; wordbook intervention; community-based intervention; integrated domestic abuse programme; individual treatment approach

Introduction

Rehabilitation programmes designed for offenders who have engaged in intimate partner violence (IPV) are commonplace within criminal justice systems, being used in both custodial and community settings (Day, Chung, O'Leary, & Carson, 2009). These programmes are typically delivered in a group format and are generally underpinned by cognitive-behavioural and pro-feminist therapeutic models (Bowen, 2011). Cognitive-behavioural approaches are premised on the basis that violence is learned and therefore that non-violence can also be learned (Ganley, 1981). The aim, therefore, is to modify perpetrators' attitudes that support and condone their use of violence and aggression against their partners (Bullock, Sarre, Tarling, & Wilkinson, 2010; Gondolf, 2007), leading to changes in behaviours such that goals can be achieved in a non-aggressive/violent manner. Feminists conceptualise IPV as a mechanism by which men control their partners and purposefully create and maintain a power imbalance within their intimate relationships (Adams, 1988). Consequently, the pro-feminist therapeutic model is premised on the assumption that violence is the sole responsibility of men and so interventions are developed for men. These interventions, therefore, challenge men who use physical and non-physical violence as a means to control their partners, and are generally informed by the Duluth Model (Pence & Paymar, 1993).

The effectiveness of these programmes in reducing IPV is a significant criminal justice issue (Hague & Mullender, 2006; Harwin, 2006; Rees & Rivett, 2005), with potential severe consequences for those involved (e.g., victims, perpetrators and treatment providers). The efficacy of these programmes, however, continues to be subject to debate (Bowen, Brown, & Gilchrist, 2002; Dutton & Corvo, 2007; Hanson & Wallace-Capretta, 2000). The findings of evaluation research are at best equivocal, with many researchers reporting that programmes have minimal (if any) impact (Babcock, Green, & Robie, 2004; Feder & Wilson, 2005). In their meta-analysis of 22 studies, Babcock et al. (2004) found that overall treatment effect sizes were small, leading them to conclude that interventions have a minimal impact on recidivism beyond the effect of being arrested.

Murphy and Ting (2010) concluded that supportive interventions that enhanced attendance and participants' motivation generally showed favourable effects in reducing IPV compared to treatment-as-usual and that programmes that also included treatment for substance abuse might enhance violence reduction. They highlighted, however, that

these findings must be interpreted with caution in light of methodological limitations; e.g., offenders were not compared to non-treatment controls, there were low rates of partner assessment at follow-up, and statistical significance tests were not provided for one of the interventions. Eckhardt et al. (2013) latterly have provided a descriptive and detailed review of group interventions for IPV perpetrators. Based on 30 studies, the authors concluded, in line with previous reviews (e.g., Babcock et al., 2004; Murphy and Ting, 2010) that the data provided very mixed conclusions regarding BIP effectiveness. Examining *traditional* (i.e. gender-themed or therapeutically oriented cognitive behavioural therapy) interventions, they found that half of the studies reported that these interventions were more effective than a no-treatment control condition in preventing new episodes of IPV. These interventions therefore perform better as often as they perform "no better" than no-treatment control groups (Eckhardt et al. 2103, p. 220). Other interventions not identified as *not-traditional* were examined; these generally included those that offered supportive or motivational enhancement/stage of change-based active treatment. Some positive results were seen in that several studies reported successful impact on change-relevant attitudes, treatment engagement and/or abusive behaviours. The authors, however, concluded that generally, regardless of type, it is difficult to interpret if programmes are successful. They also identified that evaluation studies are not well executed, as the majority of the studies undertaken were not methodologically adequate and suffered from serious implementation problems (e.g., ability to randomise, low rates on follow-up data on recidivism and concerns about sample generalisability). Further research is therefore required to establish if such programmes are effective, and if so, why, or how they are effective.

It has been acknowledged that group programmes have their benefits such as being cost effective and they appear to encourage positive peer influence (Daniels and Murphy, 1997). However, a number of limitations have also been raised. Examples of these include: other group member may enforce negative thinking and abusive tendencies; they have lack of flexibility; other members can be disruptive; and perhaps most importantly they do not have the capacity to tailor to individualised and specific needs of each client (Murphy and Eckhardt, 2005). Individual one-to-one formats may address some of these concerns and offer distinct advantages as a form of delivery. These advantages include the ability to: identify and address relevant comorbid conditions that would affect treatment and are related to risk for future violence; tailor

interventions to individual's needs and readiness to change; identify specific relevant targets for each client; and minimise risk of negative peer influence and reinforcement of negative abusive behaviours (Murphy and Meiss, 2008). However, group intervention remains the most widely used approach (Eckhardt et al. 2103)

The Integrated Domestic Abuse Programme (IDAP) is a community-based group programme for men in heterosexual relationships convicted of violent offences against their partners[1]. It is based on the Duluth model and is therefore underpinned by a pro-feminist theoretical framework. The aim is to target the social and psychological factors linked to IPV using cognitive behavioural techniques. It has been the primary programme for community-based criminal justice IPV intervention in England and Wales and has been subject to national standards that are outlined in a national practice manual. Questions remain in relation to IDAP's efficacy, flexibility, the differentiation of each offender's needs and its ability to address all the offence-supportive problems of such a homogenous group of offenders (Atkinson, 2004; Bilby & Hatcher, 2004; Eadie & Knight, 2002; Rees & Rivett, 2005).

A key issue that remains that there has been little formal evaluation of the IDAP intervention. In order for it to receive national accreditation, it was assessed via a process and impact evaluation. From the process evaluation, Bilby and Hatcher (2004) concluded that issues related to staff training requirements, communication protocol and information sharing, programme delivery (e.g., optimum group size, group mix) and programme management (e.g., documentation, resources, data collection and monitoring) were pertinent to the effective management and delivery of IDAP. As noted by Bowen (2011), however, the results of the impact evaluation have to date not been published. Bowen (2011) therefore examined IDAP's effectiveness using two unpublished sources (Hatcher et al., 2005; Leicester-Liverpool Evaluation Group, 2005). She found significant reductions from pre-to post-treatment in offenders' self-reported IPV behaviours, which continued to be significant when partners' reports were also taken in to consideration. Analyses of reconviction data of a subsample of 262 offenders revealed that programme completers were the least likely to be reconvicted (29%), followed by offenders deemed suitable for treatment who did not start it (55%), with non-completers having the highest rates (70%) of recidivism. Completers were

[1] It is not possible in the UK to be convicted of IPV/ domestic violence offences so perpetrators are convicted for specified violence offences such as common assault or actual bodily harm against their partners.

82.6% less likely than non-completers to be reconvicted (Bowen, 2011). A recent evaluation (Bloomfield & Dixon, 2015) of IDAP and the Community Domestic Violence Programme (CDVP) examined the effectiveness of these two interventions in reducing three categories of reoffending (any offence, core violence and IPV) during a two year follow up period. Based on a sample of 6,695 offenders, it was found that IDAP and CDVP were effective in producing significant small effect sizes in reducing IPV and any reoffending, and that IDAP also produced significant small effects in reducing core violence reoffending. However it was also found that many men undergoing IDAP or CDVP, also went on to reoffend.

In addition to such programmes, workbook interventions are used to treat a range of problematic behaviours associated with an individual's offending, including violence, antisocial behaviour, substance abuse and thinking skills deficits. They are generally brief interventions delivered on a one-to-one basis (e.g., with an offender manager/supervisor leading an offender through the workbook) and include schedules of work using different exercises and scenarios. They are designed to be easy to follow and adaptable to all learning styles. The use of workbook interventions has become more common in community settings in England and Wales, particularly probation services. Since this form of intervention is being used, often instead of programmes such as IDAP, it is important that we understand how they work and if they are effective; however to date there are no published studies examining this type of intervention. Bullock et al. (2010) argued that research has not yet clearly identified which interventions for IPV are most effective and there is still much to learn. This includes an absence of research investigating offender and staff views of IPV programmes. This is important as it could add further insight in to the factors that contribute to effective programmes. Research is therefore needed to identify the different factors that are central to determining programme success (Bullock et al., 2010) and the therapeutic environment required to treat IPV effectively (Bowen, 2010).

The IDAP Programme included a 'module for individual work'; this module has been used as a framework and adapted by probation services/staff to create an IPV workbook intervention. This workbook intervention has been designed to be delivered individually as preparatory work for those unable to access an IDAP group programme immediately. As well as being used as a pre-IDAP group preparatory intervention (e.g., to increase treatment readiness or motivation), it can also be used for offenders who are

unsuitable for the IDAP programme because their employment hours preclude attendance, they require an interpreter, have drug/alcohol dependencies, mental health problems, or their statutory supervision is shorter that the time required to complete IDAP. It contains material on which the IDAP is modelled with the aim to help individuals end their use of violence. Premised broadly on cognitive-behavioural techniques, it includes eight session exploring issues such as defining and identifying abusive behaviours, exploring power and control concepts, equality within relationships, violence supportive attitudes and beliefs and anger arousal. In England and Wales, the workbook intervention is not an accredited programme but nevertheless it is directed to be delivered as designed, and in a style that facilitates learning so that its impact on individual offenders can be evaluated. The use of this intervention, which lacks an evidence-base, raises a number of questions, particularly in light of the lack of convincing evidence supporting the efficacy of the IDAP group programme upon which it is based. It is therefore important that this and other workbook interventions are examined in order to understand the way in which the interventions are used, staff and offender perceptions of them and whether they are effective.

Interest in the perceptions of staff and offenders in relation to the effectiveness of interventions or approaches to the management of offenders has grown and this type of research is particularly useful for practice in developing our knowledge and understanding (see Koons, Burrow, Morash, & Bynum, 1997; Lea, Auburn, & Kibblewhite, 1999; Marino, 2009; McCartan, 2012; Scheela, 2001). The limited research focusing specifically on IPV programmes, however, has concentrated on the perceptions and experiences of male perpetrators involved in group programmes (Madoc-Jones & Roscoe, 2010). As a result little is known about staff perceptions of the interventions that they deliver. The successful engagement of individuals with treatment largely depends on the therapeutic alliance that requires investment from both the offender and the facilitator (Holdsworth, Bowen, Brown, & Howat, 2014). This investment is only likely to be possible if all individuals have a positive view about the nature, content and focus of the intervention itself. Hence, it is important to understand how both facilitators and offenders perceive the IPV workbook intervention. Nothing is known about how staff and offenders feel about workbook interventions delivered on a one-to-one basis.

It is currently unknown if the workbook offers a useful contribution in the

treatment of IPV perpetrators. Generally group delivered programmes are recommended for IPV offenders (Bowen, 2011) and so an understanding of the usefulness of a one-to-one approach is required. The aim of this exploratory study, therefore, was to address these gaps in our knowledge and examine staff and perpetrators' perceptions of IPV workbook interventions. This is important because the perceptions of both professional and perpetrators influence practice, especially in light of the fact that professionals responsible for the supervision, risk management and treatment of offenders, are under increasing pressures to deliver effective intervention. As this is unexplored territory, in the first study to explore how the IPV workbook has been used in probation services in England, the objectives were to examine the perceptions of the IPV workbook of treatment facilitators and perpetrators. This research is not an evaluation of the workbook but an exploratory examination of this type of intervention approach in order to gain an understanding of the suitability, strengths, weaknesses and barriers to the effective use of this approach.

Method

Participants

Thirteen individuals were recruited and interviewed from two different probation regions in England. Eleven were members of staff who had direct contact with IPV offenders in their roles including nine Offender Managers, one Treatment Manager and a Woman' Safety Worker (collectively referred to as Offender Managers (OMs) from hereon). Two participants were male offenders who had used the workbook. Availability and sampling opportunity prevented access to more male offenders. It is acknowledged that only two offenders will not take into account the individual heterogeneity found in partner violent men (Dixon and Browne, 2003), and represents a very limited viewpoint. However, as this research is exploratory in nature it was felt that their input was still justified as they could offer some preliminary and provisional insights about their perceptions of the IPV workbook, and that this could be compared with the perceptions of the members of staff also contributing as research participants. Table 1 gives an overview of the participants recruited including their gender, roles, and relevant experience in relation to the workbook. To maintain anonymity of those interviewed, each participant was allocated a participant number (see Table 1) and this will be used when presenting excerpts taken from the data.

[Table 1 About Here]

Design and procedure

Given the exploratory aims of the study, to obtain real-life insight of individuals with experience of using the workbook intervention, it was necessary to employ a qualitative methodology using face-to-face interviews to capture and record in-depth responses from participants. This enabled participants to relate their own unique experiences and provided them with the freedom to recall significant opinions. Ruane (2005) observed that interviewing is the most appropriate device for promoting understanding of a subject matter and "getting at the truth". Thus, a qualitative semi-structured conversational interview technique, as opposed to more formal questioning, was used.

Ethical clearance from the University's Research Ethics Committee and the National Offender Manager Service (NOMS) was obtained along with formal approval from the two probation services. All participants were provided with clear details about the study and assured of data confidentiality. Participation was voluntary and it was stressed that participation (or non-participation or withdrawal) would have no impact on individuals' employment or sentence/supervision. In-depth semi-structured audio-recorded interviews were conducted with each participant on an individual basis. The interview questions focused on experiences of the IPV workbook with specific reference to the content, one-to-one format, the challenges and barriers; e.g. "Are there aspects of the workbook that you consider to be more useful than others?" "What do you think are the characteristics of the module being delivered successfully?" "To what extent do you think the module achieves its objectives?"

The flexibility of semi-structured interviews allowed the participants to influence the direction of the interview; capturing issues that were most relevant to each participant. On average, the interviews lasted approximately 45 minutes. The interviews were all conducted at the location (i.e., probation office) where the workbook was delivered. Interviews were transcribed verbatim retaining all grammar, pauses, and unfinished sentences. All participants were thanked for taking part in the study and given the opportunity to check the transcript of their interview and/or have a copy of their interview transcript. All participants declined this.

Data analysis

Thematic analysis (TA; Attride-Stirling, 2001; Braun and Clarke, 2006) was used as it lends itself well to exploratory and preliminary work on a new topic. Braun and Clarke (2006) noted that it provides a useful and flexible research tool with potential to provide rich and complex accounts of data. The primary purpose of TA is to describe and interpret meaning from a data set to establish patterns of thinking around a concept that are embedded in the interviews (Rubin & Rubin, 2005). TA was therefore ideally suited to the present study in which a flexible approach was required to explore initial ideas, thoughts and experiences around the workbook, with no pre-determined theoretical position. It also gave the researchers the capacity to select themes of the most interest to the criminal justice professionals working with IPV offenders, to examine generic features of the participants' accounts and to look for distinctive elements within and across their accounts.

The researchers identified *themes* within the data set and analysed these through organisation and description, as well as by interpretation (Boyatzis, 1998). This process was guided by Braun and Clarke's (2006) six-phase approach (in-depth reading, initial coding, grouping codes, refining themes, defining themes and final analysis), which enabled the researchers to uncover salient themes in an inductive 'bottom up' way (see Frith & Gleeson, 2004). The development of thematic networks (Attride-Stirling, 2001) facilitated the structure and depiction of these themes. Networks are built from three classes of themes: (i) basic themes that are of the lowest order and derived from the textual data; (ii) middle-order organising themes represented by combinations of basic themes; and, (iii) super-ordinate global themes that that encapsulate the principle concept in the data as a whole (Attride-Stirling, 2001).

To maximise the credibility and confirmability of the research a number of practices, as informed by Shenton (2004), were employed: (i) following methodologies and procedures from those previously utilised in successful projects; (ii) keeping detailed memos, notes and extensive records throughout the analytical process to provide evidence that findings are data-orientated and offer transparency regarding the themes developed; and (iii) conducting systematic checks to ensure that the findings were always supported by the data and therefore offered an accurate representation of the participants' experiences. To ensure trustworthiness of the data a balanced presentation of the experiences of those interviewees is provided to support the themes

generated (Silverman, 2000) and direct quotes (OM=Offender Manager; O=Offender) are provided to promote verifiability (Murphy & Meyer, 1994).

Results and Discussion

Participants had both positive and negative perceptions of the IPV workbook, represented respectively by two global themes: (i) *Promising alternative to IPV intervention*; and (ii) *Compromises made in using the workbook*. Five organising themes were intrinsically linked to these two global themes, each containing basic themes, as represented in Figure 1.

[Insert Figure 1 about here]

Promising alternative IPV intervention

This global theme comprises two organising themes: *Personalised approach* and *Positive intervention content*, which were described as positive aspects of the workbook approach to intervention. The participants were in strong agreement that there was a 'need' for an alternative intervention for IPV offenders who were unable to access group work to ensure that they were encouraged to think about their offending behaviour and to manage the risk linked to their use of violence in intimate relationships. This was coupled with an acknowledgement that the workbook content was deemed useful and appropriate.

Personalised approach

This organising theme comprises three basic themes: (i) *Accessible treatment;* (ii) *Flexibility to tailor treatment;* and (iii) *Advantages gained through one-to-one.* Although these are individual themes in their own right they are all inextricably linked and represent the overarching theme that the workbook offers a personalised approach to offender management. The participants all identified that the workbook could be individualised according to the offender's risk, needs and requirements. Criticism has often been raised that most efforts to prevent IPV focus on a single group-format intervention, underpinned by the premise and historical practice of 'one dose will do' and that 'one size fits all' (Wolff, 2013, p. 88). The Risk-Need-Responsivity (RNR) model of rehabilitation (Andrews & Bonta, 2003; Andrews & Dowden, 2006; Andrews, Bonta, & Wormith, 2006) highlights the need to match the level, extent and type of intervention to each individual. Such an approach can be facilitated by the one-to-one

workbook and indeed was identified by participants as a promising element of it, as outlined in the following themes.

Accessible treatment. All OMs categorically noted that there was a need for an individualised response to IPV offenders who were unable to access group treatment for one reason or another (e.g., they could not attend sessions, complete the programme in the time available, or were not deemed suitable for group work). The workbook therefore offered an accessible alternative for a wider range of individuals.

> **OM1:** I think it is a useful tool for people who cannot go on a programme for whatever reason because you know before if they didn't fit or they didn't fit the box then they couldn't go on the programme…. people are out there living with partners and kids and without the [*workbook*] there's nothing really being addressed so in that respect I think there is a place for it [*workbook*] definitely.

OMs also identified that this intervention was particularly useful by being accessible for disruptive offenders for whom group programmes were not appropriate. IPV perpetrators have particularly chaotic lifestyles (Authors 2014) and some of the issues they have (e.g., substance abuse) exclude them from group programmes.

> **OM6**: I've had a client before who was just too disruptive to do the programme I take the call from the programmes facilitators whether they can or can't work with that particular individual ….sometimes people are just so chaotic with their drink and drug use that I need to put them on the workbook they're just not suitable at that time for the group.

One OM suggested that the workbook offered an alternative for individuals in denial. Despite the fact that it is commonly acknowledged that a high proportion of IPV males deny their behaviours (e.g., Catlett, Toews, & Walilko, 2010; Flinck & Paavilainen, 2008), a high proportion of interventions, including IDAP exclude men denying their offences.

> **OM9:** It has elements that surely it must make even the hardest of deniers, make them consider their own behaviour, and to that degree its gotta be a good thing. To what extent its reducing we don't know...but still I think your better to have some intervention which causes somebody to think about it than not.

The participants suggested that the IPV workbook offered an accessible individual response that they felt could have an impact on offenders, at least to some degree.

Flexibility to tailor treatment. Linked to the previous theme, this theme encapsulates how the workbook can address needs on an individual level as it is seen to be a flexible tool that can be tailored for each individual. The OMs thought that IDAP was very rigid in that treatment facilitators could not deviate from the prescribed sessions and allocated timeframes.

> **OM5:** When people are on the group programme, which is very structured, rigid I can't just stop it, you know and if he misses two sessions he might become very frustrated…..and even if a couple of people are struggling [*with IDAP*] it's delivered, done, it's over and you go on to the next session.

The workbook, in contrast, is far more flexible. For example, the OM can individualise the speed at which the sessions are delivered. "You can work with someone for weeks before moving on" (OM1) to make sure that all the information is covered at a pace that suits each individual.

> **OM5**: Well the strengths of the workbook is that it gives you an opportunity as the person delivering the session to understand the person you are working with and make adjustments as you go along. It's very well divided up to me and you can repeat… but you can break that [*workbook*] down into sections, you know depending on a person's ability to grasp or to understand.

This tailoring of the pace enabled OMs to reiterate some of the sessions where necessary, and to go back over and revisit sessions to make sure that the information and work was being digested and understood by each individual. This was also noted by one of the offenders as beneficial.

> **O2:** We worked at a steady pace, we'd go through sections and if we needed to go back to it to do more on it we would, it wasn't like one week we would do one and the next week we would do two.

The content could also be adapted, e.g., elements not included, the order adapted, so that it was most relevant or made specifically suitable for each individual. Although this flexibility was seen as positive by the participants, it is of note that the protocol specifies that all sessions should be delivered in the order set out in the workbook. Participants' responses indicate that this protocol was not being followed and in effect the workbook was not being used in the way that it was designed to be used. Nevertheless, it has frequently been argued that individual differences and learning styles within offender populations must be taken into account (Andrews, 1989). This is

important in this context, since those who use violence against an intimate are heterogeneous (Dixon & Browne, 2003) and the contextual and situational factors associated with men's use of violence are different for each individual (Authors 2014). It was evident that OMs used the workbook in ways that enabled them to tailor the intervention to individual learning styles and to align with the offender's individual, situation and contextual factors that were associated with their use of violence. It seems therefore that the workbook was viewed as the antithesis to IDAP; being used flexibly and responsively, rather than in the manualised fashion intended, or that required for IDAP.

Advantages gained through one-to-one. Although generally treatment programmes are designed using a group format (Bowen, 2011), as is the case for IDAP (Ministry of Justice, 2013) and the new Building Better Relationships (BBR) programme introduced to replace IDAP, the workbook was designed to be delivered in small groups or in a one-to-one format. None of the OMs interviewed had experienced using the workbook in small groups and indeed not all were aware they could use this format. All felt, however, that for some individuals a benefit of the workbook for a variety of different reasons was the one-to-one format. One OM felt that an advantage was that it prevented some individuals from interacting with others who posed a greater risk, or had more extensive offending histories.

> **OM1**: It's [*workbook*] for low to medium well not low should I say medium risk offenders I think its far better to work on a one-to-one basis than putting them into a group with high risk DV-ers that have got a huge history of call outs I think actually IDAP could possibly be detrimental in that instance rather than the [*workbook*].

Several OMs identified that group-work just does not suit all individuals who were more suited to a one-to-one approach.

> **OM5:** And some of the learning styles as well, some people don't learn well in a group and some of them might have literacy issues of which some of them are embarrassed, but in a one to one setting then they would have to worry so much about that and that would enable them to learn.

Another advantage of the one-to-one format links back to the previous theme in that it was felt that using this mode of delivery enabled tailored or individualised treatment; this inference being that this flexibility could not be achieved in a group format. For

example, OMs argued that the workbook was better for those with substance abuse problems, as the focus could be more easily placed on the specific issues of each individual. Likewise it was easier within this format to work with individuals who were resistant to treatment and/or lacked motivation to change.

> **OM2:** There are marked differences when you are working with an individual opposed to a group of people because the dynamic you have with [*workbook*] is just the person that is sitting in front of you that then gives you the opportunity to be more focused… the benefit with the … workbook you can work with people who are probably perhaps bit more you know resistant

The one-to-one format was also viewed positively by the offenders.

> **O2:** I personally I liked the one to one situation, I felt [*Offender Manager*] very trusting and easy to talk to and he brought the best out in me. I thought that from as soon as they offered it to me I was quite happy to be on a one to one basis.

Research that has compared the efficacy of group and individual one-to-one treatment for IPV perpetrators is sparse; however, Murphy and Meis (2008) found that one-to-one treatment increased clients' engagement with the change process, could be adapted to the clients' stages of change, could address pressing concerns (e.g., mood disorders and substance abuse issues) and could focus attention on case-specific change targets. In addition the authors suggested that one-to-one treatment could avoid potentially negative and antisocial peer influences that can be found in group format. Some research has examined the efficacy of group treatment versus individual treatment for other types of offending, such as sexual offending (for a review see Ware, Mann, & Wakeling, 2009) or for health behavioural changes, such as smoking cessation (for a review see Stead & Lancaster, 2005). However, for both sexual offending and smoking cessation, generally there are no significant differences on outcomes measures when comparing the efficacy of individual and group treatment formats. It is not known if this finding is the same for IPV due to the current lack of research that examines this relationship.

Positive Intervention Content and Materials

A number of participants described the usefulness of the workbook and outlined positive material contained within it, in some cases "giving weight" or credibility to its use as an intervention for IPV offenders. As such this organising theme comprises two themes: (i) *Practical toolkit*; and (ii) *Strengths-based approach.*

Practical toolkit. This theme represents the perception that the workbook was useful and practical and is labelled as such for two reasons: (1) it was a useful reference point and guide; and, (2) there were some exercises/features of the workbook that could be put to specific practical use. The following excerpt is representative of how the OMs particularly liked the fact that they could use the workbook as a point of reference.

> **OM3:** We never used to have any workbooks for domestic violence that was so when this came in it was real it was good to have some some so it was a good guide it's a good guide it's a good it works for some offenders it doesn't work for other offenders but its still there as a reference still there as guide as a guide.

The use of fictitious scenario-based material to explore attitudes and beliefs linked to IPV were found to be useful in developing discussions and promoting understanding.

> **OM1**: I particularly like the ones [*exercises*] with the kids...you know its a lot easier isn't it to talk about what someone else is doing wrong and its set up in a good way that they feel comfortable with doing that...and then they can talk about themselves...guys can get quite a lot out of this bit here when you're looking at the minimisation, the beliefs the intent...

The Power and Control Wheel was singled out by all the OMs as being useful. The reflective logbooks were also identified as a particularly helpful tool; e.g., "The reflective log is good….it opens up that discussion and it's good its good that it helps the offender when they are doing their own reflective log" (OM3), as they were seen as practical and enabled the OMs to address each offender's individual needs. The offenders also suggested that certain exercises and scenarios were useful for enabling them look at and address their behaviour.

> **O2:** We had the DVD…it was quite distressing at point…it was good in its way but it could be quite harsh at times. The DVD definitively worked….if we watched the DVD then we'd link it back, I'd go home and we'd do about emotions and feelings so in the session we'd talk about the characters at home I'd go away look at myself and put my feelings and emotions and stuff down.

While it is positive that the OMs and offenders singled out particular exercises and tools that they found useful, i.e., Power and Control Wheel, this comes with the caveat that this does not necessarily mean that they are effective.

Strengths-based approach. One OM discussed how the content of the workbook seemed to take a strength based approach, and that this could be very influential with the offenders when used correctly and persistently.

> **OM7**: By using the action plan, regularly we can keep focused on them, because that's the only thing with the action plan, you try to sell them as the window in to their reality...you know if you've got an action plan that your making as real as you can then that's something that they can work on, focus on, if you can engage them...'

This approach was described as a way of evoking offenders to engage more actively with 'change' by identifying the poignant component of their own situations, but more importantly examining what needs to be done differently in future. This involved setting positive goals so that violence was no longer a feature of their relationships. The OMs suggested that the workbook contained content that they used to evoke a change in behaviour, by encouraging offenders to think about positive change within the context of doing things differently.

> **OM8**: They all tend to move more towards the nice wheel, the equality wheel, so you do see these coming up a lot more...taking responsibility and listening...a lot less blaming, yeah that's a big one...being more mindful and spending more actual time together...'

A strengths-based approach emphasises the resources that people possess, and how they can be applied to positive change (O'Connell, 2005), focusing on life 'without the problem' rather than a detailed analysis of the dimension of the problem itself. It is a future orientated goal-focused approach to working, assisting individuals to work positively and pro-socially towards goal attainment. The purpose is to help individuals aim for valued and achievable goals to form a 'coherent whole', and create an action plan to work towards these goals (McMurran, 2010, p. 184). This type of therapy has been found to be effective with a range of different clients including orthopaedic patients, depressed clients, prison populations, antisocial offenders (Gingerich & Eisengart, 2000), and IPV offenders (Lee, Uken, & Sebold, 2012). .

Compromises made in using the workbook

Although there was a general consensus that the workbook offered a promising alternative treatment for IPV perpetrators, and was perceived as a positive, participants also identified some aspects of the workbook as having a potentially negative impact.

This is encapsulated in the global theme *Compromised made in using the workbook*, which is made up of two organising themes: (i) *Treatment integrity*; and (ii) *Advantages from group format lost.* These issues were identified as being potential weaknesses of this approach, particularly in comparison with the more traditional group-format approach to intervening with IPV perpetrators.

Treatment Integrity

The participants referred to the fact that the workbook was not always being used in the way that it was originally designed or there were elements of the workbook that did not offer what it was felt was required for effective treatment for IPV perpetrators. This is represented by the four themes: (i) *Disconnection between needs and intervention*; (ii) *Content not user friendly*; (iii) *Tick box exercise*; and, (iv) *No formal measures of success.*

Disconnection between needs and intervention. Questions were raised as to whether the workbook was always being used for the appropriate individuals, and as such could not effectively address such individuals' needs. Some of the principles on which the intervention was based and underpinned were not consistent with the features of the lives of some of the individuals who were completing the workbook.

> **OM4**: I personally believe that the programme was designed for the I don't.....a man who is 30 years old with two children in a in a relationship that was 20 years ago.. based upon power and control and instrumental intent to to do that but that is what the programme is designed for so therefore it doesn't fit the person you are working with all the time.

OMs felt that a better alternative could perhaps be offered to such individuals, taking account of the diverse characteristics, needs and contexts of IPV offenders. In addition, although the positives of the flexibility of the workbook was highlighted as discussed above, many OMs argued that the workbook could do more to take account of the range of different learning styles and needs.

> **OM7**: The main thing is that their getting the learning points and that you don't really need to go down a particular route to get those learning points if you can do it a bit more visually or kinaesthetically or whatever suits that person, cos there is that as well, learning style, and that isn't always taken in to account, erm with books. So I think it's not so much a criticism of the material for me it's definitely about erm how it's being allowed or encouraged to be used

Content not user friendly. Both OMs and offenders said that they thought that the content was not user friendly. One of the issues was the language used, which was not felt to be suitable for the intended audience.

> **OM3:** The language is not very simple for the offenders…the vocabulary I don't know what you might want to be using the vocabulary or the worksheets is too and the words are so complex and so hard for the offender to understand we are dealing with offenders with basic language basic needs.

Some OMs proposed that the content needed to be updated in places.

> **OM6:** I think the case study that's used is quite old fashioned; some of the language and it's a bit obvious.. I think sometimes some of the topics just don't apply to the individual.

This issue was also raised by the offenders; for example one argued that the way he felt when doing them was not appropriate.

> **P9:** I feel like I am doing a test I feel like I am doing an exam like I am studying for an exam I should feel like I am trying to better my life I shouldn't feel like I am doing an exam you know what I mean.

Tick-box exercise. Concern was raised that the workbook could just turn in to a tick-box exercise for both offenders and OMs.

> **O1**: I'm still going through it [*workbook*] I know I dunno to me it's just like you are ticking boxes.
>
> **OM2**: So the type of offenders that want to just jump through hoops which yes I am thinking of another specific case….they would just do that make sort of very nominal, minimal answers to it and then you don't feel like you have got something else to sort of draw on him it is ..and you end up assessing that this person just has not learnt.

It was felt that such a 'tick-box' approach would limit capacity for learning or have little effect on behaviour change. Engagement is linked to positive outcomes for individuals (Holdsworth et al., 2014) and although engagement does not guarantee behavioural and attitudinal changes, it could be argued that it is a necessary for the workbook to be effective. In group programmes, non-engagement has typically been defined as a 'lack of active participation in group work' (McCarthy & Duggan, 2010, p. 61) whereas 'participation in activities' has been identified as a sign of engagement (Sowards,

O'Boyle, & Weissman, 2006, p. 52). Using the workbook as a tick-box exercise implies a lack of active participation, which is likely to mean that it will not be effective.

No formal measures of success. This theme relates to treatment integrity in that OMs noted that there was no mechanism in place to measure the effectiveness of the workbook.

> **Interviewer:** How do you assess or measure if the workbook is effective?
>
> **OM1:** We don't. There is no measure, done it ticked the box

Some OMs noted that they generally monitored whether offenders engaged in further IPV incidents; e.g., when asked how success is measured OM3 stated: "If they commit any further domestic violence whilst doing the work book" and OM2 said: "If there are any more DV incidents reported even if they are not charged". Other 'assessed' success through other measures, such as engagement.

> **OM5**: You can get a sense of how successful it is by their engagement and their compliance with it. I think it is a personal judgement because you know you have worked with them in the room for many months I'm not sure what else.

These informal mechanisms, however, are not reliable measures of effectiveness and outcome evaluation research is needed to address this.

Advantages from group format lost

Although the participants all agreed that a clear strength of the workbook was the one-to-one format, it was also noted that this necessarily meant the loss of the benefits of group-work, represented by two themes: (i) *Lose impact of group dynamics*; *and* (ii) *Gendered problems.*

Lose impact of group dynamics. One of the consistent messages that came from the OMs about the advantages of the group dynamics is the power of individuals being challenged by their peers, which is lost that in one-to-one sessions.

> **OM5:** The biggest strength of IDAP is having a group of men that will instead of you challenging them they get challenged by their own peers there is nothing stronger. If another chap sitting next to him is saying well that is out of order you know or that's far more that's you know far more has much bigger impact than me sitting across a desk telling saying the same thing you know and you know they can draw strength from the group.

As well as having the benefit of the peers challenging each other in a group session, there were other 'peer roles' identified by the participants as being lost in the one-to-one format. These include:

Supporting each other

> **OM1:** Using one-to-one means not being in a group situation and not having the support of other members;

Listening to others and getting feedback

> **OM5**: This [*workbook*] might not work as well with is some people benefit from listening to other people what their issues are and how they've addressed there issues…and just listening to their feedback;

Sharing experiences:

> **OM9:** Good piece of work as well to in a group setting to share experiences, look at different ways, how people have addressed their experiences or even their behaviour and whatever they've done has worked compared to what you've been doing;

And generating conversations

> **OM7**: On IDAP it generates a huge conversation but with SIADA there is only two of you so there's you know if you're getting a bit stuck then they'll certainly be stuck because they will think what's she going on about then I think then you could run into a lot of difficulties.

The influence of the group as a particularly strong support system has been reported by several researchers (Authors 2014; Daniels & Murphy, 1997; Sheehan, Thakor, & Stewart, 2012; Silvergleid & Mankowski, 2006) who have found that relationships with other men in treatment groups facilitated behavioural change particularly through peers challenging each other, as well as them giving positive feedback that reinforced and shaped behaviour change, and through manifesting the feelings in the men that they were not alone in this.

Gendered problems

Some OMs pointed out that since there is only one facilitator, there is no possibility of a balanced gendered view.

> **OM11:** There is still that you know that relationship it's a woman that's running a workshop programme with a chap that's been committed of DV whereas with the IDAP you always run it as a man and a woman ok so you know you have got

> that balance whereas with this you have not got the balance its just two males, the OM and him and if he is really resistant to it this isn't going to cut it.

OMs reported that offenders sometimes tried to justify their offending trying to obtain support from the OMs based on their gender.

> **OM9**: Yes as a male delivering it I am painfully aware that one of the...what you'll get very quickly is them trying to collude with you err "you know what women are like" that kind of thing, you know, so you have to be very clear from the outset about 'I'm delivering it as a man but I'm not going to be sat here agreeing with you' sort of thing... you've gotta be very mindful as a male probation officer.

A female participant presented the counter-argument:

> **OM8**: Sometimes when its one to one you only see one side of them, you do miss out on maybe more masculine views that they might have, say for example, say sexist views, things like that, you don't hear as much of that particularly being a woman, because they do sort of behave themselves a little bit.

Mixed-gendered co-facilitation provides a model of healthy male-female relationships (Adams & Cayouette, 2002; La Violette, 2001), which is important as effective models can contribute to behaviour change (Bandura, 1974; Gist, Schwoerer, & Rosen, 1989). This can only be achieved with the workbook if it is delivered on a two-to-one (or two-to-small group) format.

Enablers and Inhibitors

This organising theme represents the issues or tensions (i.e., enablers or inhibitors) that drive the positive (*Promising alternative IPV intervention*) and negative factors (*Compromised made in using the workbook*) discussed previously. These enablers/inhibitors are all related to facilitators' skills and experience, expressed in four basic themes. Two themes summarised enablers that empowered OMs to deliver the workbook confidently and successfully: *Confidence: Previous IDAP experience;* and, *Training undertaken*. Two themes concerned inhibitors: *Lack of confidence in delivery;* and, *Training needs.*

Confidence: Previous IDAP experience. An enabler that increased positive perceptions of the workbook was OM confidence in delivering the material. OMs suggested there was a correlation between the effectiveness of the workbook and the level of skill and

experience of the facilitator. Often this confidence came from experience delivering the IDAP programme.

> **OM8:** I think my experience in IDAP has given me the confidence to take things in a different direction to be a bit creative if you like, erm so yeah I suppose that is the case. I think a number of officers will be very happy to say that they feel uncomfortable delivering it really.

The confidence gained from experience enabled OMs to use the workbook flexibly and adapt it for each individual.

> **OM4:** Me personally I'm alright I am happy to adapt it [*workbook*] for individual as I am very confident I have had loads of experience [*through IDAP*] you know so so you know and we have done loads of you know self-reflection and things like that so I am able to pretty much understand and overcome a lot of the barriers.

Lack of confidence in delivery. Conversely some OMs lacked confidence:

> **OM7:** There're [*OMs*] still daunted by that [*control logs*] and what questions to ask to explore a little bit more and they're not able to do that so it's giving them the confidence to use these tools in a way they don't feel threatened by them….take away the fear of delivery and then look at some of the tools.

Some OMs suggested that this lack of confidence could compromise the effectiveness of the intervention: "It's [*workbook*] only as good as the person delivers it" (OM10)

> **OM1:** If you know the person delivering it is not confident then I think it pretty much could be useless in some points. If you are not confident in in pulling though an exercise so you don't really know what you what that means and what you are looking for the outcome of it then the offender certainly isn't going to know what you are looking for…so it is not going to make any difference.

Training undertaken. OMs noted that their level or confidence was linked to the training that they had received, often in order to the deliver group IDAP programme.

> **OM1:** I'm quite confident in it [*workbook*] but then I did go through quite rigorous training with the IDAP.

Others reported that they had received training specifically on the workbook. These sessions, however, did not seem to be formal or mandatory.

> **OM5:** Mandatory training no there was voluntary training it was voluntary training that the treatment manager of IDAP actually ran on her own back really

> and it was sort of a drop in session that you could drop in and out of which was quite good because they would look at the exercises so if you were struggling with that exercise you could go down and take part in that particular one and get a few tips on how to put it across really so that was helpful.

Training needs. Conversely a lack of training was associated with a lack of confidence. The workbook states that it should only be delivered by OMs that have completed the IDAP environmental training but this protocol was not consistently followed.

> **OM7:** I think people need some programme training. I think they need some training in terms of delivering this workbook erm not just in erm not just in the material because they've all got you know an incredible amount of experience, but perhaps in some core skills...the newly qualified staff they have no programme experience at all. And I think the week of core skills training we get as programme facilitators is unbelievably useful just in ordinary one to one interviews without it being a book just in you know the style of questioning you adopt and things.

Summary

Based on this exploratory insight, the IDAP workbook as a response to the management of IPV offenders was perceived as helpful in engaging offenders in a process of change that enabled them to think about their abusive behaviour. The workbook provided probation staff with a framework structure to deliver individual intervention, employing a strength based and directive approach to discussions, to develop offenders' skills and behaviours which may assist in improving deficits linked to their use of aggression and/or violence. The workbook was also perceived as useful in facilitating treatment readiness and motivation to change, both of which have been identified as being associated with a greater likelihood of treatment efficacy (Ward, Day, Howells, & Birgden, 2004). However, findings also suggest that problematic factors linked to the offender, its delivery, and the current format of the workbook, burden its capacity to create change, and identifies a need for developing an approach that can be responsive to differing IPV offenders' needs. A clearer formal mechanism needs to be in place that can measure the success of the workbook to establish if delivery is related to positive outcomes. Formal evaluation of programme efficacy must be undertaken moving

forwards to determine if interventions are effective and under what circumstances this is likely to happen (Bowen, 2011).

Conclusions and Implications

The individual approach of the workbook offered in response to IPV offenders' needs was seen as positive as it enabled treatment to be matched to the individual's learning style. Pace of delivery could be adapted by the OMs giving them ample opportunity to revisit sessions when necessary and tailor the content of delivery to the offenders' specific needs. The one-to-one format enabled individuals who were unable to access or deemed unsuitable for other forms of intervention (e.g., IDAP) to receive an IPV intervention. There could be an assumption that any level of treatment will have some affect on the individual engaged in it; however the nature of that effect, i.e. positive or negative is unknown at this time. This needs to be examined to ensure that the workbook does not have an anti-therapeutic effect (Yalom, 1985), i.e., inadvertently increases the risk of reoffending (Bowen, 2011) but has a therapeutic effect, i.e., purposely decreases the likelihood of reoffending.

The qualities (confidence, experience, and training) of the facilitator and the therapeutic climate are important to the efficacy of the workbook. The therapeutic style of intervention required for IPV offenders linked to IDAP is reliant on consistent, direct, and often intensive confrontation of offenders and their espoused reasons for their abusive behaviour (Murphy & Baxter, 1997). It is acknowledged in this analysis that this is ultimately reliant on the skills of the facilitator; which is more crucial when the entire intervention is contingent on a single individual basis. Hence, the experience or confidence of facilitators who have to work in isolation is critical. The therapeutic climate of one-to-one working also meant the loss of the ability to model healthy male-female relationships, a process that effectively contributes towards behaviour change for partner-violent men (Adams & Cayouette, 2002; La Violette, 2001).

Maintaining quality and integrity is an important factor in the effectiveness of interventions (Lipsey, Landenberger, & Wilson, 2007). This study revealed that although the integrity of the workbook had not been maintained, deviation was grounded in a desire to make it more suitable for each individual, which is an important responsivity issue that may mean that the intervention tailored to individual needs is ultimately more effective, though research is needed to test this. A strength of the

workbook is that it can be used as a guide for offender managers, which they can adapt to work with a wider range of offenders than current group-based programmes.

The workbook, however, in its current format is not an ideal intervention. McGuire (2001) collated a body of research around 'what works' in successful interventions with offenders; those that are successful are well structured and focused, use multiple treatment components, focus on developing skills and use behavioural methods. They also target criminogenic needs linked to the offender (Andrews & Bonta, 2003). While some of these factors have been reported within the analysis themes, several omissions remain suggesting that a reconceptualisation of the workbook is required. This can only be achieved through further research and intervention development so that evidence-based practice is promoted.

This exploratory study was the first to examine individuals' perspectives about one-to-one interventions for IPV offenders but the findings must be interpreted within the limitations of the study. In particular, two main methodological issues were considered, relating to the size and composition of the sample. A sample size of thirteen participants is relatively small. However within qualitative methods a sample of this size would be considered adequate and qualitative samples are generally small in size (Ritchie & Lewis, 2003). Qualitative research takes a different sampling approach, whereby samples are not required to be generalisable to other populations. However, only two offenders were recruited for this study, and it is acknowledged that this can only offer a very limited viewpoint. Two offenders will not be representative of a sample that has been identified as being a heterogeneous population (Dixon and Browne), and therefore replication with a larger sample size is an absolute necessity. In addition in the present study purposive sampling was used. Because of this the findings cannot be generalised, however the sample offered an exploratory preliminary insight in to the perceptions of a professional group of individuals (within a probation service) associated with the delivery of the workbook, and individuals who had experienced the intervention.

It would be overly hasty to conclude that the workbook demonstrates efficacy, however, a recommendation for the future is that we need to develop an intervention for one to one delivery, with elements of the current workbook. Nevertheless these are very challenging interventions to deliver and instructions cannot guide facilitators in all issues and scenarios that may arise. Reflecting the challenging nature of the work future

guidelines would also need to set out minimum levels of training for probation staff and arrangements for monitoring quality and competence. Important questions remain surrounding the effectiveness of workbook interventions for IPV offenders, and understanding exactly how interventions are effective, however such mechanisms can be established in further research. For example, although the one-to-one format had certain advantages such as flexibility and adaptability to individual needs, the loss of the group format potentially had a large impact. Research has consistently shown that when treating IPV offenders, the role of peers in challenging each other, reinforcing behaviour change and supporting each other is an important element in the rehabilitation process (Authors, 2014; Daniels & Murphy, 1997; Sheehan et al., 2012; Silvergleid & Mankowski, 2006). By missing this important element programme effectiveness could be diminished. A replication of this study, particularly one that includes a much larger sample and one that is more representative of the offender population, and a more detailed, empirically grounded evaluation of outcomes in comparison to groups and non-treated populations is a necessity. This study was only exploratory in nature and therefore was not an evaluation of this type of intervention, and future research needs to include a robust evaluation of this approach. In order to determine the overall success of these interventions, re-offenders and non re-offenders would also need to be compared on psychological characteristics linked to the programme and offending history variables.

References

Adams, D. (1988). Treatment models for men who batter: A profeminist analysis. In K. Yllo, & M. Bograd (Eds.), *Feminist perspectives on wife abuse* (pp. 176-199). Newbury Park, CA: Sage.

Adams, D., & Cayouette, S. (2002). A group education model for abusers. In E. Alarondo, & F. Mederos (Eds.), *Programs for men who batter: Intervention and prevention strategies in a diverse society* (pp. 23-55). New York: Civic Research Inc.

Andrews, D. A. (1989). Recidivism is predicatable and can be influenced. using risk assessment to reduce recidivism. *Forum of Correction Research, 1*, 11-18.

Andrews, D. A., & Bonta, J. (2003). *The psychology of criminal conduct* (3rd ed.). Cincinnati: Anderson.

Andrews, D. A., Bonta, J., & Wormith, J. S. (2006). The recent past and near future of risk and/or need assessment. *Crime & Delinquency, 52*(1), 7-27. doi:10.1177/0011128705281756

Andrews, D. A., & Dowden, C. (2006). Risk principle of case classification in correctional treatment: A meta-analytic investigation. *International Journal of Offender Therapy & Comparative Criminology, 50*(1), 88-100. doi:10.1177/0306624X05282556

Atkinson, D. (2004). The 'what works' debate: Keeping a human perspective. *Probation Journal, 51*(3), 248-252. doi:10.1177/0264550504045900

Attride-Stirling, J. (2001). Thematic networks: An analytic tool for qualitative research. *Qualitative Research, 1*(3), 385-405. doi:10.1177/146879410100100307

Babcock, J. C., Green, C. E., & Robie, C. (2004). Does batterers' treatment work? A meta-analytic review of domestic violence treatment. *Clinical Psychology Review, 23*(8), 1023-1053. doi:10.1016/j.cpr.2002.07.001

Bandura, A. (1974). Behavior theory and the models of man. *American Psychologist, December 1974*, 589-569. doi:10.1037/h0037514

Bilby, C., & Hatcher, R. (2004). *Early stages in the development of the integrated domestic abuse programme: Implementing the duluth domestic violence pathfinder.* (Home Office on-line report No. 29/04). London: Home Office.

Bloomfield, S., & Dixon, L. (2015). An outcome evaluation of the integrated domestic abuse programme (IDAP) and community domestic violence programme (CDVP).

Retrieved from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/449008/outcome-evaluation-idap-cdvp.pdf

Bowen, E. (2010). Therapeutic environment and outcomes in a U.K. domestic Violence Perpetrator program. *Small Group Research, 41*(2), 198-220. doi:10.1177/1046496409357081

Bowen, E. (2011). *The rehabilitation of partner-violent men*. Chichester: Wiley-Blackwell.

Bowen, E., Brown, L., & Gilchrist, E. (2002). Evaluating probation based offender programmes for domestic violence perpetrators: A pro-feminist approach. *Howard Journal of Criminal Justice, 41*(3), 221-236. doi:10.1111/1468-2311.00238

Boyatzis, R. E. (1998). *Transforming qualitative information: Thematic analysis and code development*. Thousand Oaks, CA: Sage.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77-101. doi:10.1191/1478088706qp063oa

Bullock, K., Sarre, S., Tarling, R., & Wilkinson, M. (2010). *The delivery of domestic abuse programmes: An implementation study of domestic abuse programmes in probation areas and her Majesty's prison service. ministry of justice research series 15/10*. London, UK: Ministry of Justice.

Catlett, B. S., Toews, M. L., & Walilko, V. (2010). Men's gendered constructions of intimate partner violence as predictors of court-mandated batterer treatment drop out. *American Journal of Community Psychology, 45*(1-2), 107-123. doi:10.1007/s10464-009-9292-2

Daniels, J. W., & Murphy, C. M. (1997). Stages and processes of change in batterers' treatment. *Cognitive and Behavioral Practice, 4*(1), 123-145. doi:10.1016/S1077-7229(97)80015-6

Day, A., Chung, D., O'Leary, P., & Carson, E. (2009). Programs for men who Perpetrate Domestic violence: An examination of the issues underlying the effectiveness of intervention programs. *Journal of Family Violence, 24*, 203-212. doi:10.1007/s10896-008-9221-4

Dixon, L., & Browne, K. (2003). The heterogeneity of spouse abuse: A review. *Aggression & Violent Behavior, 8*(1), 107-130. doi:10.1016/S1359-1789(02)00104-0

Dutton, D. G., & Corvo, K. (2007). The duluth model: A data-impervious paradigm and a failed strategy. *Aggression and Violent Behavior, 12*(6), 658-667. doi:10.1016/j.avb.2007.03.002

Eadie, T., & Knight, C. (2002). Domestic violence programmes: Reflections on the shift from independent to statutory provision. *Howard Journal, 41*(2), 167-181. doi:10.1111/1468-2311.00233

Eckhardt, C. I., Murphy, C. M., Whitaker, D. J., Sprunger, J., Dykstra, R., & Woodard, K. (2013). The effectiveness of intervention programs for perpetrators and victims of intimate partner violence. Partner Abuse, 4(2), 196-231. doi:10.1891/1946-6560.4.2.e17

Feder, L., & Wilson, D. B. (2005). A meta-analytic review of court-mandated batterer intervention programs: Can courts affect abusers' behavior? *Journal of Experimental Criminology, 1*(2), 239-262. doi:10.1007/s11292-005-1179-0

Flinck, A., & Paavilainen, E. (2008). Violent behavior of men in their intimate relationships, as they experience it. *American Journal of Men's Health, 2*(3), 244-253. doi:10.1177/1557988308321674

Frith, H., & Gleeson, K. (2004). Clothing and embodiment: Men managing body image and appearance. *Psychology of Men & Masculinity, 5*(1), 40-40. doi:10.1177/1359105306058851

Ganley, A. (1981). *Court mandated therapy for men who batter*. Washington DC: Center for Women's Policy Studies.

Gingerich, W. J., & Eisengart, S. (2000). Solution-focused brief therapy: A review of the outcome research. *Family Process, 39*(4), 477-498. doi:10.1111/j.1545-5300.2000.39408.x

Gist, M. E., Schwoerer, C., & Rosen, B. (1989). Effects of alternative training methods on self-efficacy and performance in computer software training. *Journal of Applied Psychology, 74*(6), 884-891. doi:10.1037/0021-9010.74.6.884

Gondolf, E. W. (2007). Theoretical and research support for the duluth model: A reply to dutton and corvo. *Agression and Violent Behavior, 12*, 644-657. doi:10.1016/j.avb.2007.03.001

Hague, G., & Mullender, A. (2006). Who listens? The voices of domestic violence survivors in service provision in the United Kingdom. *Violence Against Women, 12*(6), 568-587. doi:10.1177/1077801206289132

Hanson, R. K., & Wallace-Capretta, S. (2000). *Predicting recidivism among male batterers. Report no. 2000-06*. Ottawa: Solicitor General of Canada.

Harwin, N. (2006). Putting a stop to domestic violence in the United Kingdom: Challenges and opportunities. *Violence Against Women, 12*(6), 556-567. doi:10.1177/1077801206289134

Hatcher, R., Palmer, E., Clark, C., Hollin, C., McGuire, J., & Bilby, C. (2005). *Preliminary outcome findings of the crime reduction pathway project (offending behaviour): Duluth domestic violence programme.* Unpublished manuscript.

Holdsworth, E., Bowen, E., Brown, S., & Howat, D. (2014). Offender engagement in group programs and associations with offender characteristics and treatment factors: A review. *Aggression and Violent Behavior, 19*(2), 102-121. doi:10.1016/j.avb.2014.01.004

Koons, B., Burrow, J., Morash, M., & Bynum, T. (1997). Expert and offender perceptions of program elements linked to successful outcomes for incarcerated women. *Crime & Delinquency, 43*(4), 512-532. doi:10.1177/1043986207309595

La Violette, A. (2001). Batterers' treatment: Observations from the trenches . *Journal of Aggression, Maltreatment & Trauma, 5*(2), 45-56. doi:45–56. doi:10.1300/J146v05n02_04

Lea, S., Auburn, T., & Kibblewhite, K. (1999). Working with sex offenders: The Perceptions and experiences of professionals and paraprofessionals. *International Journal of Offender Therapy and Comparative Criminology, 43*(1), 103-119. doi:10.1177/0306624X99431010

Lee, M. Y., Uken, A., & Sebold, J. (2012). Solution-focused model with court-mandated domestic violence offenders. In C. Franklin, T. S. Trepper, W. J. Gingerich & E. E. McCollum (Eds.), (pp. 165-182). New York, NY, US: Oxford University Press.

Leicester-Liverpool Evaluation Group. (2005). *Duluth domestic violence reconviction study*. Unpublished manuscript.

Lipsey, M., Landenberger, M., & Wilson, S. (2007). *Effects of cognitive-Behavioural Programs for criminal offenders: A campbell collaboration review*. Nashville: Center for Evaluation Research and Methodology.

Madoc-Jones, I., & Roscoe, J. (2010). Women's safety service within the Integrated Domestic abuse programme: Perceptions of service users. *Children and Family Social Work, 15*(2), 155-164. doi:10.1111/j.1365-2206.2009.00647.x

Marino, K. M. (2009). Probation management of sex offenders: An analysis of co-facilitators' perceptions of offender progress in treatment. *Criminal Justice Review, 34*(3), 382-403. doi:10.1177/0734016808328671

McCartan, K. (2012). Professionals' understanding of government strategies for the management of child sexual abusers. *Probation Journal, 59*(2), 124-137. doi:10.1177/0264550512438603

McCarthy, L., & Duggan, C. (2010). Engagement in a medium secure personality disorder service: A comparative study of psychological functioning and offending outcomes. *Criminal Behaviour and Mental Health, 20*(2), 112-128. doi:10.1002/cbm.758

Mcguire, J. (2001). What works in correctional intervention? Evidence and practical implications. In G. A. Bernfeld, D. P. Farrington & A. W. Leschied (Eds.), *Offender rehabilitation in practice: Implementing and evaluation effective programs* (pp. 25-44). Chichester: John Wiley & Sons.

McMurran, M. (2010). Goal-focused interventions with offenders. In A. Day, S. Casey, T. Ward, K. Howells & J. Vess (Eds.), *Transition to better lives offender readiness and rehabilitation* (pp. 180-194). Cullompton, Devon: Willan.

Ministry of Justice. (2013). Probation bench guide information for sentencers in staffordshire and west midlands. Retrieved from http://www.swmprobation.gov.uk/wp-content/uploads/2012/04/swm_benchguide_Mar2013_FINAL.pdf

Murphy, C. M., & Baxter, V. A. (1997). Motivating batterers to change in the treatment context. *Journal of Interpersonal Violence, 12*(4), 607-619. doi:10.1177/088626097012004009

Murphy, C. M., & Eckhardt, C. I. (2005). Treating the abusive partner. An individualized cognitive behavioral approach. New York: Guilford Press.

Murphy, C. M., & Meis, L. A. (2008). Individual treatment of intimate partner violence perpetrators. *Violence and Victims, 23*(2), 173-186. doi:10.1891/0886-6708.23.2.173

Murphy, C. M., & Meyer, S. L. (1994). Dependency characteristics of partner assaultive men. *Journal of Abnormal Psychology, 103*(4), 729-735. doi:10.1037/0021-843X.103.4.729

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. doi:10.1891/1946-6560.1.1.26

O'Connell, B. (2005). *Solution-focused therapy* (2nd ed.). Thousand oaks, California: Sage Publications Inc.

Pence, E., & Paymar, M. (1993). *Education groups for men who batter: The Duluth model*. New York: Springer Publishing.

Raynor, P., Kynch, J., Roberts, C., & Merrington, S. (2000). *Risk and need assessment in probation services: An evaluation.* Home office research study no. 211. London, England: Home Office.

Rees, A., & Rivett, M. (2005). Let a hundred flowers bloom, let a hundred schools of thought contend. *Probation Journal, 52*(3), 277-288. doi:10.1177/0264550505055111

Ritchie, J., & Lewis, J. (2003). *Qualitative research practice: A guide for social science students and researchers*. London: Sage.

Ruane, J. M. (2005). *Essentials of research methods*. Malden, MA: Blackwell.

Rubin, H. J., & Rubin, I. S. (2005). *Qualitative interviewing: The art of hearing data*. London: Sage Publications.

Scheela, R. A. (2001). Sex offender treatment: Therapists' experiences and perceptions'. *Issues in Mental Health Nursing, 22*(8), 749-767. doi: 10.1080/01612840152713009

Sheehan, K. A., Thakor, S., & Stewart, D. E. (2012). Turning points for perpetrators of intimate partner violence. *Trauma, Violence and Abuse, 13*(1), 30-40. doi:10.1177/1524838011426016

Shenton, A. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information, 22*(2), 63-75.

Silvergleid, C. S., & Mankowski, E. S. (2006). How batterer intervention programs work: Participant and facilitator accounts of processes of change. *Journal of Interpersonal Violence, 21*(1), 139-159. doi:10.1177/0886260505282103

Silverman, D. (2000). *Doing qualitative research: A practical handbook*. London: Sage.

Sowards, K. A., O'Boyle, K., & Weissman, M. (2006). Inspiring hope, envisioning alternatives: The importance of peer role models in a mandated treatment program for women. *Journal of Social Work Practice in the Addictions, 6*(4), 55-70.

Stead, L. F., & Lancaster, T. (2005). Group behaviour therapy programmes for smoking cessation. *Cochrane database of systematic reviews 2005* (2). doi:10.1002/14651858.CD001007.pub2.

Ward, T., Day, A., Howells, K., & Birgden, A. (2004). The multifactor offender readiness model. *Aggression and Violent Behavior, 9*(6), 645-673. doi:10.1016/j.avb.2003.08.001

Ward, T., Melser, J., & Yates, P. M. (2007). Reconstructing the risk-need-responsivity model: A theoretical elaboration and evaluation. *Aggression and Violent Behavior, 12*(2), 208-228. doi:10.1016/j.avb.2006.07.001

Ware, J., Mann, R. E., & Wakeling, H. C. (2009). Group versus individual treatment: What is the best modality for treating sexual offenders? *Sexual Abuse in Australia and New Zealand, 1*(2), 70-78.

Wolff, N. (2013). Domestic violence courts: The case of justice meets the serpents of the caduceus. In R. L. Wiener, & E. M. Brank (Eds.), *Problem solving courts* (pp. 83-112). New York: Springer.

Yalom, I. D. (1985). *The theory of practice and group psychotherapy* (3rd ed.). New York: Basic Books.

Table 1: Overview of participants' gender, roles, and relevant experience

Participant	Gender	Experience using 1:1 workbook	Other relevant Experience
1: Offender Manager (OM1)	Female	Used with 3 offenders	Tutor on IDAP, for about 3 years, some years ago
2: Offender Manager (OM2)	Male	Used with 3 offenders (2 have completed, 1 just started)	Tutor on IDAP for about 4 years
3: Offender Manager (OM3)	Female	Used for about 6 years with approximately 70% of caseload	Never run IDAP
4: Offender Manager (OM4)	Male	Used with approximately 15-20 offenders	Delivered IDAP 2 x weekly for about 5 years Delivered BRIDGE intervention for Relate
5: Offender Manager (OM5)	Female	Currently using with 1 offender	Delivered IDAP although not recently
6: Offender Manager (OM6)	Female	Used with approximately 15-20 offenders	Delivered 'Victim Awareness'
7: Offender Manager (OM7)	Female	Used with approximately 8 offenders	Accredited programmes facilitator (not IDAP).
8: Offender Manager (OM8)	Female	Used with approximately 6 offenders	Accredited programmes work (drink drive programme and IDAP) for 7 years. Delivery of one of the first IDAP groups
9: Offender Manager (OM9)	Male	Used with 'several' offenders; numbers not specified	Programmes tutor (not IDAP)
10: Treatment Manager (OM10)	Female	Not delivered (not part of role)	Extensive experience delivering IDAP and training facilitation of IDAP (and workbook)
11: Women Safety Worker (OM11)	Female	Not delivered (not part of role)	Not delivered (not part of role).
12: Offender (O1)	Male	Completed 6 sessions with their OM	Never attended any other treatment
13: Offender (O2)	Male	Completed whole workbook and all sessions with OM	Never attended any other treatment

Figure 1: Global, organising and basic themes that represent individuals' perceptions of IPV workbook intervention

Basic themes	Organising themes	Global Themes	Organising Themes	Basic Themes
		1. Promising alternative to IPV intervention	1.Personalised approach	*(i) Accessible treatment* *(ii) Flexibility to tailor treatment* *(iii) Advantages gained through one-to-one*
(i) Confidence: Previous IDAP experience *(ii) Training undertaken* *(iii) Lack of confidence in delivery* *(iv) Training needs*	5.Enablers and Inhibitors		2.Positive Intervention Content and Materials	*(i) Practical toolkit* *(ii) Strengths-based approach*
		2. Compromises made in using the workbook	3.Treatment integrity	*(i) Disconnection between needs and intervention* *(ii) Content not user friendly* *(iii) Tick box exercise* *(iv) No formal measures of success*
			4.Advantages from group format lost	*(i) Lose impact of group dynamics* *(ii) Gendered problems*