

Acknowledgements

The researchers would like to thank all those who contributed to this evaluation, particularly the men and their partners who were interviewed, the Strength to Change staff who facilitated the study and a large number of other professionals in Hull who participated in the research. Special thanks go to Tereasa Acaster, the STC Office Manager, who kept the Evaluation team fed with data and to June Rogers who formatted the report. We are grateful to Louise Robinson and Simon Hunter at NHS Hull and to members of the Strength to Change Steering Group who have supported this research over a period of two years.

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Foreword

We started our 'Strength to Change' journey in 2008 when we took the radical step of initiating a 'UK first' - a social marketing campaign aimed at the perpetrators of domestic violence. This journey has been long and challenging, yet at the same time encouraging as our hopes for the service were realised.

Strength to Change- the service - was developed as a response to the social marketing campaign. It has been a unique privilege to watch this very special team grow, expand and develop over the past eighteen months. I have recently attended the 'graduation' ceremony of the first men to complete the Strength to Change programme. This elicited a feeling of great pride that so much had been achieved by the men and the service-working together for change.

I hope that this evaluation will inspire and inform others to work with this client group. If we can continue to influence the life chances of those who live with domestic violence we will be able to demonstrate our contribution to the work of making women and children safe in their own families.

In Hull, we have pursued a steep learning curve over the past two years, starting with our insight research, 'Men's Talk' and culminating in this Evaluation of the Strength to Change programme. We have been offered a unique and humbling insight into the lives of this complex and hard to reach client group and have been privileged to be able to explore with them ways to engage them and help to change their abusive behaviour.

Although I will never be happy about the underlying reasons for having to develop a service like Strength to Change, I am proud to have been a part of this campaign and service. It has taught us all to be bold, to have faith in our beliefs that perpetrators of domestic violence deserve a chance to change and furthermore, trust that they have the strength to do so.

Strength to Change continues to provide me with the inspiration, encouragement and the confidence to believe that we can make a real difference to people's lives. I would like to thank Professor Stanley and her team for their sterling work and tireless enthusiasm for this extremely comprehensive evaluation. My particular thanks also go to the Strength to Change team- Mark, Pat, Tereasa, Annie and their co-facilitators for their passionate commitment, long hours worked and complete faith that they can help the men of Hull to find it in themselves to change their behaviour.

Chris Long

Chief Executive, Humber PCT Cluster

Executive Summary

Strength to Change: Report of the evaluation of a new initiative for perpetrators of domestic violence

Strength to Change

The Strength to Change (STC) service for male perpetrators of domestic violence opened in Hull in April 2009. The service was initiated and commissioned by NHS Hull working in collaboration with a range of other local agencies; it is managed by Hull City Council's Domestic Abuse Partnership. STC currently employs four staff but also relies on facilitators seconded from other services across the city of Hull.

The service was preceded by a research study and a social marketing campaign which were inspired by the successful *Freedom from Fear* campaign and service developed in Perth, Australia. The social marketing campaign was delivered in 2009 and 2010 and sought to raise local awareness of domestic violence, disseminate information about STC and attract men to the service as well as ensuring that it was responsive to needs of the target population.

Men self-refer to the service and they contact STC via a telephone helpline. Following assessment, they are offered a minimum of 10 weekly one hour individual sessions, followed by group work over 40 weeks. Demand for the service has been greater than its capacity to offer all those completing assessments immediate access to the programme so calming sessions have been introduced as a means of managing the waiting list. STC also provides a women's support service for men's partners. A follow-on service – *Strength to Strength* – has been developed for the cohort of five men who completed the full programme in March 2011.

The Evaluation

This evaluation was undertaken by researchers from the University of Central Lancashire and from Acton Shapiro, an independent research organisation, over the first 18 months of the project's life. It has included the following elements:

- 47 in-depth interviews with men and women using the STC service;
- analysis of helpline data, attendance data and service throughput;
- analysis of in-depth background data collected on 32 men and 11 women using the service;
- analysis of police data on domestic violence incidents and criminal offences for two years prior to men starting the programme and for the period they attended STC
- interviews with 7 staff and 3 members of the STC steering group
- two telephone surveys of local professionals.

Since the evaluation has been confined to the first 18 months of the project and since the first full STC programme did not complete until March 2011, it has not been possible to collect data on any hard outcomes for either men or their partners. However, the evaluation does provide an in-depth account of the work of the project and identifies those elements which service users, staff and other stakeholders

perceived as key to its capacity to retain and work with men to change abusive behaviour. All participants have been anonymised in the quotes used here.

Findings

Achieving Change

“I’ve learnt now how to, you know control, control myself sort of thing, before I didn’t think, I just flew off the handle sort of thing, now, I think about things now...” (Ian)

Evidence that the STC programme has achieved a positive impact on behaviour and attitudes was provided by a range of sources. Both domestic violence incidents and other offences reduced while men were on the programme in comparison to the period of two years prior to joining the programme. Most of the women participating in the evaluation identified positive change in their partner’s behaviour since attending STC. Over half the women interviewed reported feeling safer since their partner had been using the service. Men interviewed described a gradual process of change in which they assumed more control over their behaviour, learnt to distinguish between their own thoughts and reality, were calmer and more self-aware and aware of others. Some of these accounts were confirmed by men’s partners.

The STC Ethos

“I was quite surprised because they listened and they didn’t judge me, you know...they, they was just, well wasn’t alright with it, but they understood.” (Martin)

The STC service has succeeded in developing an approach which can be characterised as empowering and which is described by men and women as facilitating a process of change. Men are treated respectfully and in a non-judgemental manner and describe engaging in a trusting therapeutic relationship with staff where their capacity for change is emphasised. The service’s approach avoids a punitive stance while locating responsibility for change with individual participants and it is experienced as flexible and able to respond to individual need.

Women valued the accessible and informal approach of the Woman’s Worker and were signposted to a range of relevant services.

The Service Users

“Control, I think you feel that you have to control every aspect of your life, for some reason or other and I’m not sure why that is, when they fight against that, then that makes you more angry.” (Kevin)

STC engaged a cohort of men distinguished by high levels of risk factors for domestic violence that include histories of other forms of violence including weapon use, domestic violence and other criminal convictions, drug use, histories of childhood abuse and neglect. Analysis of police data suggests that the most serious and persistent offenders may be less likely to proceed beyond assessment although some exceptions to this were found among the men who participated in and completed the group programme. The question of which groups of men are most likely to engage with the programme needs to be explored by collecting data on user characteristics and programme participation over a longer period.

The majority of both men contacting and those using the STC service have fathering roles. Currently, STC does not provide a direct service to perpetrators' children but refers them to other local services.

Motivation

“I hope that ...it would do what it says on the tin, would help me change...give me the strength to change sort of thing.” (James)

The evaluation identified both extrinsic and intrinsic sources of motivation among men on the programme. Extrinsic sources of motivation such as access to children or fear of losing a partner appeared significant at the outset and men describing these types of motivation were more likely to engage with the programme for longer. Among the small numbers of men interviewed towards the later stages of the programme there was some evidence that their motivation had shifted to embrace more intrinsic factors. Men looked to being happier or better people and identified control of their behaviour as a goal.

Men who come to STC with a history of using services may be better prepared to engage with the programme.

Programme Retention

“Bit nervous about meeting other people, you know, talking about it in front of other blokes but it was okay once I started.” (Greg)

The largest group of users comprised those men who had completed five or more individual sessions. A substantial proportion of those who engaged with STC were therefore receiving a high dosage of the programme. The evaluation identified two key points where men were likely to drop out of the programme:

1. A high proportion of those offered an initial appointment failed to attend an assessment: introducing a basic screening tool at the point of contacting the STC Helpline might be a means of filtering out those who will not take up the opportunity of an assessment. However, the offer of an initial appointment may encourage men to contact the service again at a later date and STC should monitor this longitudinally.
2. The programme has been less successful in transitioning men to the group programme. Increasing the frequency of both the individual and group sessions might reduce drop-out and be therapeutically beneficial. Any such changes in programme intensity would have implications for staffing. At present, the reliance on co-facilitators, while ensuring the involvement of other agencies, puts pressure on the core staff group and limits the service's capacity to change and develop.

Social Marketing Campaign and Multi-Agency Support

“...the little card with a kid on the front, it says something about scaring your family and I realised yeah, I did scare my family. So I took the initiative to phone Strength to Change.” (Tim)

Analysis of calls to the STC Helpline showed that the social marketing campaign was influential in attracting men to the service. The congruence between the campaign

messages and the programme's ethos was considered helpful in securing men's engagement with the programme on positive terms.

The social marketing campaign contributed to raising awareness of the service amongst health and social care professionals who represent a main route through which men are directed the service. Those groups of professionals least likely to be aware of the service were GPs and front-line police officers although the second wave of the campaign had some impact on these groups.

Communication and collaboration with other agencies appear to have been assisted by the project's multi-agency steering group which in turn benefited from pre-existing collaborative structures in the field of domestic violence.

Recommendations

- While a substantial intervention is appropriate and necessary for the high risk group of men who engage with STC, delivering the same number of sessions over a shorter period of time could reduce drop-out and ensure that more men complete the group programme. A more intensive structure for both the individual and group programmes is recommended although the implications for staffing would need to be acknowledged and managed.
- Introducing screening procedures at the initial stage of contact with the Helpline could ensure that the programme is made available to those individuals most likely to make use of it. Key characteristics of men who engaged with the programme for longer were that they were more likely to be motivated by extrinsic factors at the outset and were less likely to be living with their partner. Those men with the very highest levels of criminal behaviour were less likely to proceed from assessment to engagement with the programme.
- While the use of seconded facilitators has assisted exchange of skills and knowledge between agencies, this approach to staffing has made for heavy demands on a small staff team and has contributed to slow programme throughput. If additional funding is available, increasing the core staff team is recommended.
- The evaluation identified a need to strengthen the project's data collection and management systems. In particular, data on women's use of the partners' support service and the monitoring information they provide needs to be regularly and formally recorded. The police should continue to provide data on participants' criminal offences and the programme should seek men's agreement to collect such information for at least two years post participation in STC.

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Chapter 1: Introduction

The Strength to Change (STC) service was initiated and developed by NHS Hull working in collaboration with a range of other local agencies to increase the safety of women and children affected by men's domestic violence by developing a model for engaging with male perpetrators. The model of a public education campaign that would feed into a service for perpetrators was derived from the successful Freedom from Fear Campaign and Service developed in Perth, Australia (see Donovan et al 1999 and 2006). A social marketing campaign informed by research (Stanley et al 2009) was delivered in Hull to raise awareness of the service and develop men's motivation to use it. The name of the service was selected on the basis of the research undertaken for the campaign. The service's opening on 23rd March 2009 was timed to coincide with the campaign which targeted men and was delivered across the city of Hull although it was most concentrated in wards with high levels of social exclusion where domestic violence was identified as a key problem.

Hull is a city with high rates of deprivation and unemployment. Levels of health and social need are high and it is estimated that around 25,000 women and 18,500 children live with domestic violence (Robinson and Hunter 2010). It is also a city marked by continuity where traditional attitudes towards gender roles and male violence are still prevalent.

This evaluation was commissioned and funded by NHS Hull. The evaluation has been undertaken in partnership by researchers from the University of Central Lancashire and Acton Shapiro, an independent research organisation based in North Yorkshire. In undertaking this study, the researchers were able to build on their experience of undertaking the formative research for the social marketing campaign. Data presented in this report have been collected from the point of service start-up to the end of September 2010, so covering the first 18 months of the service's life. In some cases, it has been possible to supplement these data with additional material collected between September 2010 and January 2011. Where this is the case, this is made explicit in the report. The methodology for this evaluation is described in Appendix 1.

1.1 Background to the Evaluation

Programmes for perpetrators of domestic violence have developed comparatively recently in the UK. Despite some early examples of perpetrator programmes (Burton et al 1998; Dobash et al 1999), the first large-scale implementation of such programmes did not occur in England and Wales until 2004 when the Probation Service rolled out its Integrated Domestic Abuse Programme (IDAP) based on the Duluth model (see Bilby and Hatcher, 2004, and Bullock et al, 2010, for evaluations of programme implementation). In 2009, Williamson and Hester identified 42 probation areas and five prison sites providing Probation run programmes for offenders mandated by the courts but found few services for men not engaged with the criminal justice system (Williamson and Hester 2009).

However, additional perpetrator programmes have been established in the UK by voluntary sector organisations or through voluntary-statutory sector partnerships. Such programmes take self-referrals with some also taking referrals from the courts and children's services. Some of these voluntary programmes have been independently evaluated (Burton et al 1998; Bell and Stanley 2005; ADVA and Sue

Penna Associates 2009; Williamson and Hester 2009) although the ability to generalise from these local evaluations is limited by the small numbers involved and the high drop-out rate from both the programmes and the research. However, Respect, the independent organisation that accredits and supports perpetrator programmes, has commissioned a multi-site evaluation of community-based perpetrator programmes in the UK which is currently in progress.

Gondolf (2002; 2004) undertook a large-scale US evaluation of perpetrator programmes over four sites over seven years, involving 840 men and their partners. His evaluation found that programme participation was more effective in ending men's violence than criminal justice sanctions and that the majority of men participating in programmes had not re-assaulted their partner four years after the programme. The effects of participation in programmes increased over time, with the highest rate for re-assaults taking place in the first six months of the evaluation and the rate of re-assaults reducing after that. At follow-up, which took place 30 and 48 months after programme commencement, over two-thirds of participants' partners reported that their quality of life had improved and 85 per cent felt very safe (Gondolf 2004).

In the UK, Dobash et al (1999) evaluated two Scottish perpetrator programmes for men mandated to attend by the courts. They used reports from programme participants and their partners, as well as reoffending figures, to compare the outcomes for these men with those for a group subject to other criminal justice sanctions, such as fines, admonishments, probation and imprisonment. At follow-up 12 months after the initial interview, 66 per cent of the men completing the programmes had remained violence free, while only 30 per cent of those in the control group had done so. The partners of men participating in the programme were also significantly less likely to report frequent violence. However, this evaluation did not consider the possibility that the risk profiles of completers and the control group might differ in meaningful ways (Graham-Kevan 2009) and the STC evaluation has addressed the issue of how programme participants' key characteristics and risk profiles affect progress through the programme.

Evaluations of group programmes delivered by the Probation Service (Bilby and Hatcher 2004 and Bullock et al 2010) have to date focused on implementation and process rather than outcomes. However, most of the 26 men interviewed by Bullock et al (2010) felt that the IDAP/CDVP programme had had some impact on them, that they were learning skills and techniques for managing their behaviour and that participation in the programme had influenced their work and family relationships as well as helping them to be calmer and to think before acting.

Gondolf's (2003) review of evaluation of US programmes poses the question:

“One of the lingering questions about batterer programs, assuming some programs are effective, is how to get non-arrested men into them.” (p624)

In Hull, the decision to underpin a programme for abusive men with a social marketing campaign represents an attempt to answer this question and one of the aims of this evaluation is to examine the reach and impact of the STC service and the campaign on local professionals as well as the success of the service in attracting and retaining men in the programme.

While it is generally agreed that programmes should encourage perpetrators to take responsibility for their abusive behaviour (Craig et al, 2006), a punitive approach has been criticised as unlikely to facilitate change (Taubman, 1986) and Milner (2004)

has argued that interventions that confront perpetrators with their abuse and that insist on them taking full responsibility for it, risk demonising and isolating them. Bell and Stanley's (2005) evaluation noted how, at the outset of their engagement with a perpetrator programme, men struggled with stigmatised identity of perpetrator. The quality of the therapeutic alliance between the therapist and client is one of the most robust predictors of treatment compliance and poor alliances are associated with client drop-out (Horvath and Bedi, 2002). The relationship between the client and the therapist is therefore of utmost importance, particularly for clients with lower levels of education (see Sharf et al 2010).

Dobash et al (2000) highlight that any intervention designed to reduce the incidence of domestic violence needs to address the fact that many men do not necessarily perceive it as a problem; they do not believe it harms their partners, and that they consider that cessation of violence is all that needs to occur for the relationship to be repaired. The formative research (Stanley et al 2009) undertaken to inform the social marketing campaign in Hull also found that men often failed to recognise that their behaviour was abusive and that they needed interventions that promoted this recognition while avoiding evoking the resistance that was produced when they felt blamed and stigmatised.

The perpetrator programmes delivered by the probation service have adopted a Duluth-based cognitive behavioural model. However, Rees and Rivett (2005) argue for a responsive model of intervention that harnesses the emotional dynamics that inform men's violence. The heterogeneity of perpetrators (Gilchrist et al 2003) and evidence concerning their experience of abuse in childhood (Dutton, 2007) as well as the prevalence of low self-esteem and feelings of powerlessness in this population (Bowen et al 2002) suggest a need for programmes that have the capacity to respond to individual as well as group needs. The evaluation therefore distinguishes between group and individual components of the STC programme and considers men's responses to its various components.

Gondolf's (2003) review of batterer programme evaluations notes that partners' perceptions were the strongest predictor of reoffending and it is now standard practice to include partners both in programme interventions and evaluation. At the level of programme delivery, this requires on-going communication between those working with perpetrators and those working with the partners of abusive men. However, this can be difficult to achieve in practice (Bell and Stanley, 2005; Bullock et al 2010) and, in addition to capturing partners' perspectives, the evaluation has considered how these are collected and recorded by STC staff.

The optimum length of programmes has been debated but Gondolf and Jones (2001) found that programme length had little effect on reassault rates; Gondolf (2003) suggests that programme intensity may be as significant as length. Kroner and Takahashi (2011) found that treatment dosage was an important predictor of recidivism and Bourgon and Armstrong (2005) researched treatment dosage in respect of offender treatment programmes for criminals and found that as offenders' risk levels increased, so did the dosage required to significantly reduce reoffending.

Pathways into programmes may also be significant. Williamson and Hester's (2009) evaluation of the South Tyneside programme noted the high numbers of men who did not proceed from initial contact to an assessment and the impact on men's motivation of children's social services referring perpetrators to the programme. The evaluation of the STC service addresses the work of the helpline in attracting men into the programme, local providers' awareness and perceptions of the service and

the ways in which the length and structure of the programme impacted on men's motivation to continue in it.

Perpetrator programmes are unlikely to be successful if they operate in isolation from wider systems and whole communities need to take responsibility for the problem of violence and help to develop approaches to eradicate it (Arias et al, 2002; Perilla, 2007). Multiagency activity that engages a wide range of local agencies is required (Dobash et al, 2000; Stanley and Humphreys 2006) and this evaluation also considers STC's success in forging links and communicating with other relevant local services and professionals.

1.2 About This Report

The following chapter, Chapter 2, includes a descriptive account of the various elements of the STC programme which is followed by analysis of service use which looks both at initial contacts made with the project and at men's subsequent progression through the service. Chapter 3 presents staff and Steering Group members' perceptions of the service. The following chapter, Chapter 4, uses in-depth background data collected by project staff on 32 men and 11 women to paint a more in-depth picture of the histories of service users. This chapter also considers outcomes in terms of reoffending while men were on the programme.

Chapter 5 uses data analysed from 47 interviews with men and women using the service to examine their perspectives on motivation, key aspects of the service and what they had learnt. Chapter 6 moves away from the service itself to consider how STC has worked with other agencies and other professionals' awareness of the service. Findings and recommendations are discussed in Chapter 7. An account of the methodology is included in the Appendix.

Chapter 2: The Strength to Change Service

The service was commissioned by Hull NHS (formerly Hull Teaching PCT) from the Domestic Abuse Partnership (DAP), which is part of Hull City Council's 'City Safe' initiative. NHS Hull funded the social marketing campaign and provided the funding for the Strength to Change service for the first two years. Some additional funding has been provided by other agencies: half the funding for the Woman's Worker/Specialist Family Practitioner post is provided by Hull City Council's Children and Young People's Service.

A multi-agency steering group provides overall guidance to the project and the service and project manager are managed by Hull DAP.

2.1 Components of the Strength to Change Service

2.1.1 Telephone Helpline and Website

The Helpline is directly available during Monday 10am-1pm and 2pm-5pm, Tuesday, Wednesday and Thursday 10am-1pm, and an answerphone takes messages outside these hours. Although the telephone service is known as 'the Helpline', this is perhaps a misnomer since the service does not offer telephone counselling but is rather the first point of contact for those who wish to use the service or to encourage others to use it. The administrator takes primary responsibility for answering calls, but other members of staff respond if she is not available.

The Strength to Change website (<http://www.strengthtochange.org>) provides information about the men's and women's service, but does not offer any additional routes to contact the service.

2.1.2 Perpetrator service

Initial referral

Only self referrals are accepted with the aim of ensuring that men are sufficiently motivated. Following initial contact by phone, men are invited to attend a face-to-face assessment session. Both staff and participants emphasise that the programme staff's initial and subsequent approach focuses on conveying respect for them as individuals whilst insisting that they recognise that they are responsible for their own behaviour. Men complete two scales – the partner abuse scale and the parenting abuse scale (developed by Calvin Bell, AHIMSA Safer Families) and these are both used at regular intervals in individual sessions.

Much of the initial assessment is spent on the service user's agreement with the service. All men sign a Participation Contract and a Core Programme Behaviour Code which includes a clause which requires men to report any violence they commit to the Police or Social Services. All written materials for the project have now been produced in a format suitable for a reading age of eight.

Men are screened out at this point if they do not present as committed to undertaking the programme and as taking some level of responsibility for their behaviour, or if they are considered to have mental health needs beyond the capacity of the programme. If the service is considered to be appropriate, a minimum of 10 weekly one hour individual sessions is offered, followed by group work over 40 weeks (2.5 hour sessions). Advocacy and advice are also offered to men where this is thought to be appropriate (e.g. advice and support on accessing housing).

Calming sessions

As the number of self-referrals started to exceed the capacity of the service to provide individual sessions, 'calming sessions' were introduced for men on the waiting list. Based on 'mindfulness' techniques, these group sessions last 35-45 minutes and provide a range of relaxation and calming exercises and opportunities for reflection (eg. sharing 'philosophical' quotes). The sessions are not 'content full', but allow space and silence for men to practise the techniques. Initially, these sessions did not set out to directly address individuals' presenting problems however, these sessions have become more interactive, and participation in calming sessions is increasingly being regarded as an important step in the programme. The sessions are facilitated by one of the co-facilitators and the service manager also attends.

Calming sessions are held twice a week. Whilst attendance is not compulsory attendance is regarded as a sign of commitment to the programme. Participants are expected to attend a minimum of six sessions, but can continue to attend once they have started the individual sessions. Whilst the calming sessions were originally intended as a 'holding place' for men on the waiting list, it has become apparent that they are valuable in themselves, as staff describe men as responding very positively and continuing to attend calming on a voluntary basis.

Individual sessions

The standard programme comprises ten individual sessions. However, the number of individual sessions varies by individual, with some men leaving the programme after less than ten sessions and others having more than ten individual sessions. A number of men have left the group programme and resumed individual sessions on the understanding that the group programme does not suit them. Individual sessions take place at a mutually convenient time (including evenings) and run for one hour. A range of therapeutic approaches are used: cognitive approaches, counselling, behavioural techniques together with some elements of the mindfulness approach. Risk and safety issues are addressed if a man has returned to the service after a period of absence.

Group sessions

Men who complete the requisite amount of individual sessions graduate to groups, one of which started up in September 2009 (4 men), while another started in January 2010 (4 men). These groups had a rolling intake so that men who subsequently completed the required amount of individual sessions joined one of these two groups. At the end of June 2010, 13 men were attending two groups and the groups merged in October 2010 when the group had seven participants. Five men completed the project's first 40 session group programme in March 2011.

The sessions include an initial 10 minute calming session, followed by a check-in for all group members, including the facilitators. Group participants then bid for the time that they want to use in the group, and individuals then have the opportunity to use the group setting to discuss and receive feedback on individual issues. The second half of the group comprises a structured session with the facilitators presenting prepared material on a theme (eg 'vulnerability') and inviting discussion on it. Responses to moving from individual to group sessions have been mixed and some men have not been able to make the transition successfully and have resumed individual sessions.

Follow-on Service

At the time of writing, this was not yet operational but was planned as a resource for the five men who completed the group programme in March 2011. The intention was for this group to be self-supporting although it would meet on STC premises once a fortnight and STC staff would be available to assist should the need arise. This follow-on group is called *Strength To Strength* to reflect the fact that it is for men who have completed the programme and have 'moved on' to some degree. One of the men from this group has completed the co-facilitator training with a view to co-facilitating a group in the future. Increasingly, STC staff are looking to identify other ways in which programme graduates can contribute to the service and two of these group members contributed to the process for appointing a new member of staff in December 2010 and were also involved in running a group induction session for men on the waiting list.

2.1.3 Women's service

Female partners and ex-partners of the men who agree to participate are contacted by the Specialist Family Practitioner and offered support. They are contacted initially by letter which is then followed up with a phone call. Practical support (including help with housing, benefits etc) and emotional support are provided on a flexible, open-ended basis, to suit the needs of the women involved and this continues, if desired, until her partner leaves the programme. If a perpetrator leaves the programme and his partner/ex-partner still requires support then the Women's Worker/Specialist Family Practitioner can signpost to other services (e.g. DAP) or continue support for a short time if this is seen as appropriate and necessary.

Women are also informed of their role in relation to the programme's monitoring of their partners' behaviour and the Women's Worker/Specialist Family Practitioner completes an abuse checklist with them every week. They are made aware that their partner is also completing the checklist every week.

In March 2010, regular coffee mornings for women were introduced in response to expressed interest but low attendance led to these being discontinued.

The service does not, as a rule, provide services directly to children (although this has happened on occasion). In general, where children's needs are identified, they are signposted to relevant agencies. Where children are deemed to be at risk, this is assessed and children's services are contacted as appropriate.

2.2 Project Staffing and Resources

The service currently has a core team of four staff: the Manager, the Domestic Violence Prevention Officer, the Administrator and the Women's Worker/Specialist Family Practitioner. With the exception of the Administrator who works a 34-hour week, these are full-time posts. The service relies heavily on facilitators who are seconded to the project from other services across the city of Hull.

The STC Manager was recruited seven months prior to the service opening to the public so that systems and processes could be put in place and co-facilitators could be recruited and trained. The role covers: general project management and outreach work; establishment of processes and systems; recruitment and supervision of staff and co-facilitators; overseeing team training and development; development of counselling tools and frameworks, undertaking assessments and delivery of individual and group sessions.

It became apparent early on that the workload of the Manager was unrealistic and additional funding was made available for the post of Domestic Violence Prevention Officer. Following some delay due to local authority recruitment freeze, the Domestic Violence Prevention Officer was appointed in March 2010; this allowed the Manager to withdraw from some of the direct work with clients to concentrate on more strategic developments. However, the initial post holder left the service in Sept 2010. A new full time Domestic Violence Prevention Officer (DVPO) was appointed at the end of 2010.

The Administrator started work at the opening of the service. The role covers: general administration; supporting the establishment of processes and systems; data input; staffing of the telephone helpline, and co-ordinating of appointments.

The Women's Worker took up her post work soon after the service opened. In August 2009, a Male Victims Worker (18 hours) was recruited by Hull DAP, funded by Supporting People monies. This post is not part of the STC service, but there are considered to be strong arguments for STC hosting this service as some men who identify themselves as victims are perpetrators of violence. The post holder works alongside the STC team, sharing administration and training opportunities. By June 2010, the Male Victims Worker had been contacted by over 70 men, but the vast majority of these were discovered to be perpetrators.

2.2.1 Co-facilitators

Co-facilitators have been recruited to contribute to the delivery of both individual and group sessions. These were planned to take the form of secondments drawn from agencies across the city, with each co-facilitator contributing half a day per week to the service for a period of 12 months. This model has reduced the costs of the project and has allowed the project to draw on existing skills and knowledge in the local workforce. However, recruitment of facilitators has been problematic and sickness and other problems have resulted in a lack of continuity and consistency in their input.

Calls for volunteer facilitators have been advertised through agencies represented on the STC Steering Group. There have been three separate calls for facilitators which resulted in 15 expressions of interest from which nine facilitators have been recruited. These facilitators have come from Health, Social Care, Police, Council, Goodwin Trust and the NSPCC.

One facilitator was only able to undertake the required training in their employer's time and subsequently worked for STC on a voluntary basis. By November 2010, sickness and family problems, together with the fact that the original group of facilitators had completed their year of commitment to the service, meant there were only two co-facilitators contributing to the service.

2.2.2 Mental health staff involvement

In 2010, there were plans for a clinical psychologist from Humber Mental Health Trust to provide the team with some sessions assisting them to administer standardised psychometric tests to men for the purposes of programme selection. These plans never materialised.

Two students from an MSc in forensic psychology programme undertook a placement for one day a week at STC for several months in 2010. Much of their input involved re-designing project materials for men with low reading ages. This arrangement has continued with two new students joining STC in April 2011.

2.2.3 Supervision

The manager provides overall management and debriefing opportunities for the co-facilitators, the DVPO, the Women's Worker and the MVW. However, formal individual supervision sessions where casework can be discussed in depth have proved difficult to arrange for most staff, particularly for the co-facilitators who are only in the office for short periods. Although staff have found the manager accessible and available when they needed to raise issues, some noted that regular supervision to discuss casework would be useful. The Women's Worker also receives supervision from the DAP manager and the MVW has quarterly supervision from the Supporting People manager. The STC manager received clinical supervision from an NHS clinical psychologist which he found helpful but this had ceased at the time of writing.

2.3 Premises

Early problems in securing appropriate and affordable premises hampered project start-up, delaying the introduction of office systems and processes as well as outreach work. This made for additional pressure on the Manager and Administrator in the early stages of the project, when service requests started to be received.

The first set of premises in a complex in central Hull were inadequate in size so at the beginning of February 2010, the project moved to a new base located in a major central shopping precinct in Hull. This is a walk-in public health centre where a range of services including 'health coaches', health MOTs, weight loss services, health information kiosks, stop smoking support and breast cancer screening are available in a retail environment. The STC team has welcomed the opportunity to work alongside these other services and has identified potential for some cross-fertilisation, such as referring men to health coaches to explore exercise as a means of reducing stress. The health setting was felt to be appropriate for the project which benefited from the non-stigmatised accessible environment:

"...the way we are placed, we're kind of within the Health Service, [it] takes some of that kind of stigma away from us being accessible and the building is accessible."

However, the limited space allocated to the project in the building continues to represent a problem: staff share a small office and have access to two additional rooms that can be booked for meetings and client sessions. Staff identified occasions when space restrictions had made for difficulties with confidentiality or with the management of distressed or angry men:

"...there is always a distinct lack of space to be able to see clients, you know, we've got a booking system and they are literally one in, one out and if you've got a client left distressed and you've gone a couple of minutes over your session and you've got someone knocking on the door waiting to get in the room, you know, that in itself is, is not good at all..."

2.4 Information Management Systems

STC originally planned to utilise the client management database developed by Respect, which is available on a national basis under licence. However, the database was not ready when required and the data it included were considered in

some cases too extensive while some basic gaps and shortcomings in the system were also identified. STC has therefore developed its own data systems with some assistance from the research team. These include a simple database that records service usage and a range of forms and assessment tools that collect more detailed information on men and women using the service. There are plans to adapt the NHS client management system for the project's use in the future.

The research team found that forms designed for monitoring purposes and to collect background data were not regularly and consistently completed and steering group members acknowledged the need to strengthen the project's data collection systems. This is not an uncommon problem for perpetrator programmes (see Bullock et al 2010) and may reflect the project's staffing levels. However, once the evaluation has reported, there will be fewer demands for staff to record and report information regularly and it is recommended that more robust and easy to use information management systems be introduced.

2.5 Use of the Strength to Change Service

2.5.1 Calls to the Helpline

This section looks at how the service was contacted and used in its first 18 months of operation from April 2009 to September 2010. Of the 312 callers, 210 were perpetrators, of whom all but one were male (no gender recorded for one caller). Figure 2.1 shows that most of the remaining 102 callers were professionals; 14 identified themselves as the partners of abusive men (one perpetrator's partner was male). The majority of those contacting the Helpline on behalf of others were female.

Figure 2.1 Other callers to STC Helpline in first 18 months

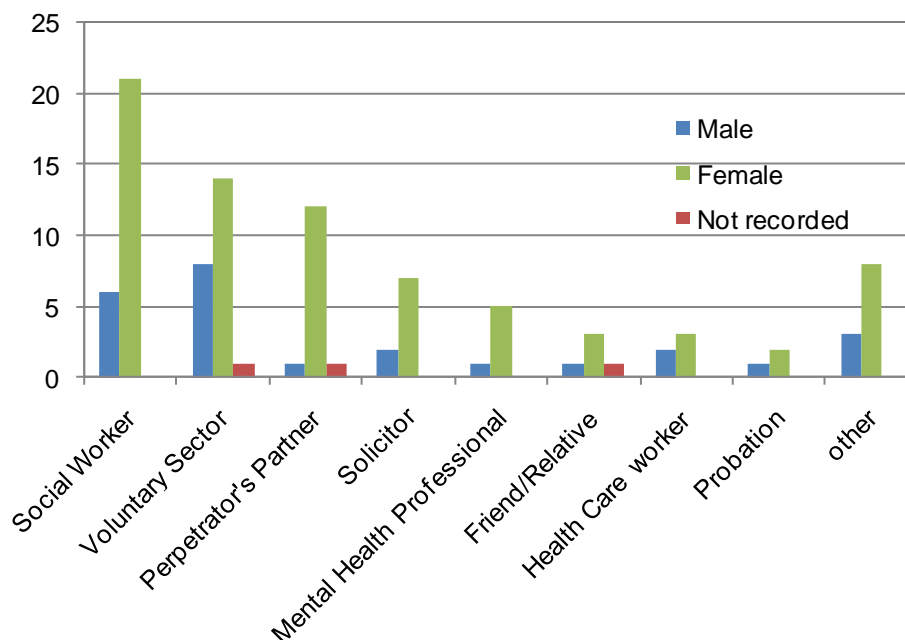


Figure 2.2 shows that the source of information about the helpline most frequently cited by all callers was health and social care professionals. Materials produced by

the social marketing campaign – newspaper stories, leaflets and flyers, local radio and posters - were cited by only 42 callers (13%).

Figure 2.2 How callers found out about the helpline

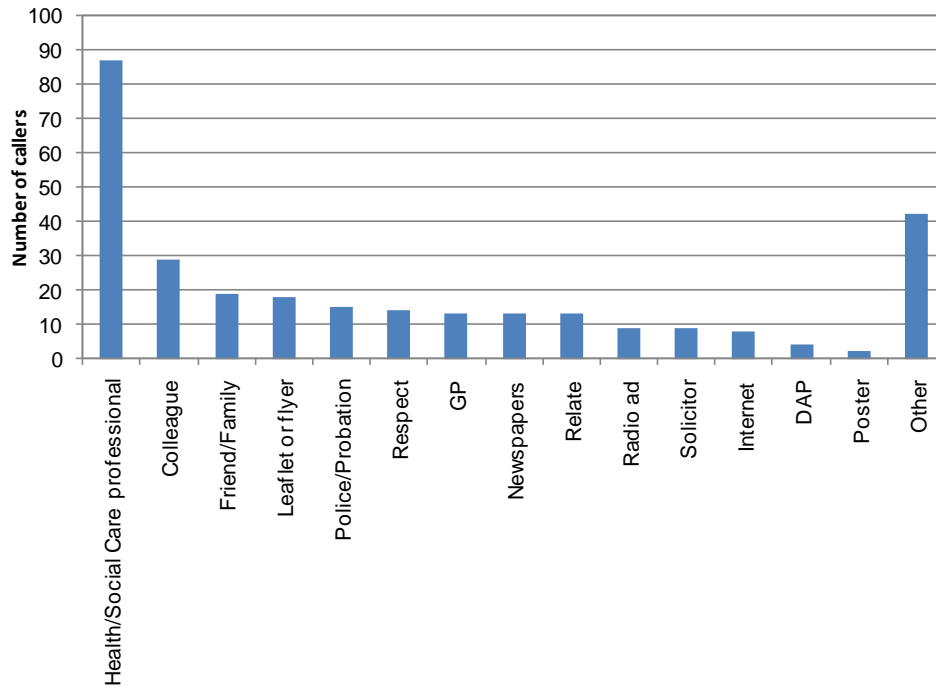
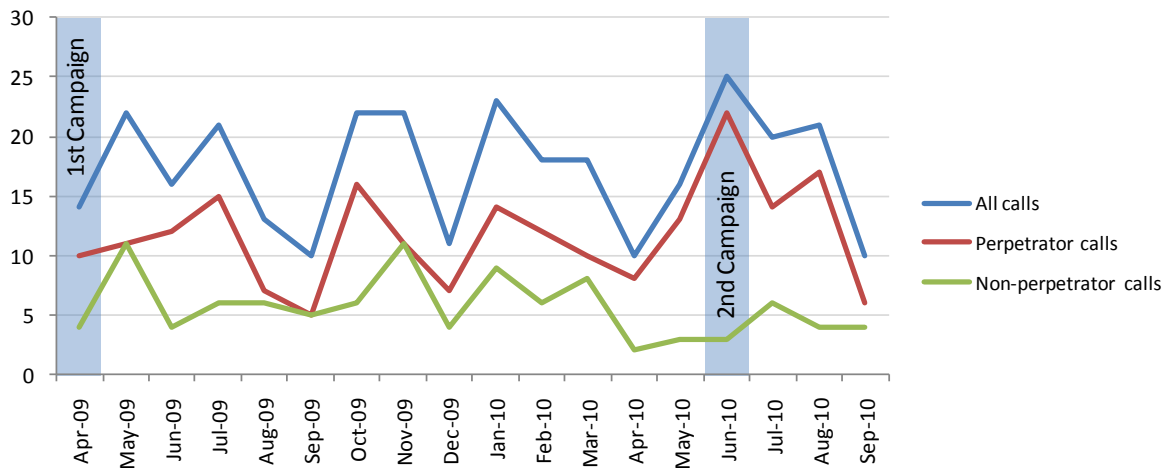


Figure 2.3 shows the time spread of all calls in the first 18 months of the project's life. Both waves of the social marketing campaign produced an increase in referrals; the second campaign was more successful in stimulating self-referrals, despite the fact that this campaign targeted professionals. Increases also occurred in September 2009 following the end of the summer holiday period and in January 2010 following the Christmas holiday period; this pattern resembles trends in service use for other health and social care services.

Figure 2.3 Calls to Helpline by month in first 18 months



2.5.2 Perpetrators' calls to Helpline

Figure 2.4 shows that the majority (79% of those whose age was recorded) of men calling the Helpline were aged between 20 and 39 years.

Figure 2.4 Ages of perpetrators calling Helpline in first 18 months

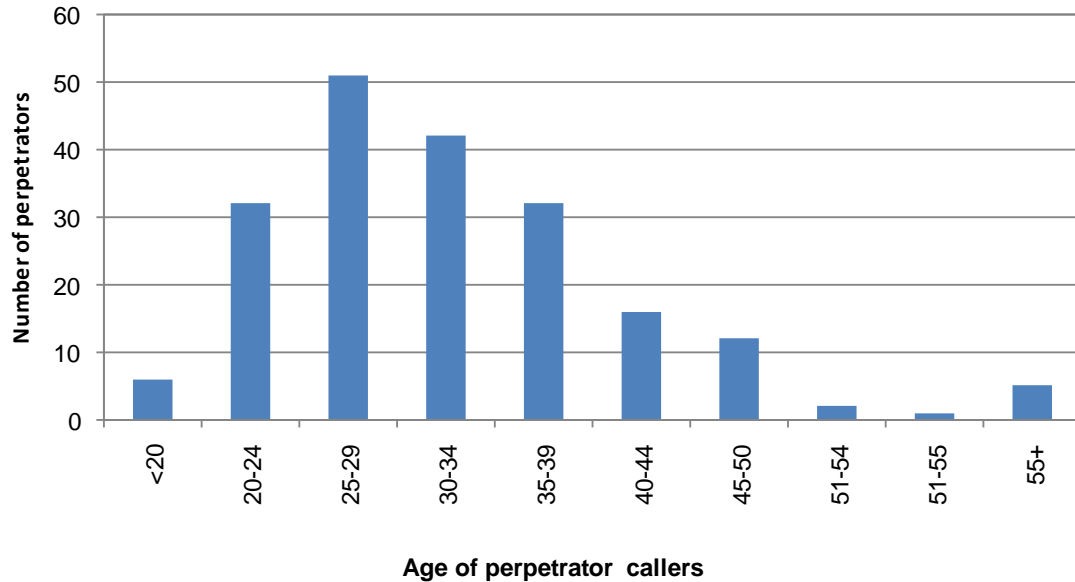


Figure 2.5 shows that the majority of men calling the Helpline in this period came from the areas of the city targeted by the social marketing campaign: East Hull, Orchard Park and Bransholme, areas of the city which are predominantly local authority housing with high rates of social exclusion. The Spring Bank area and city centre (HU3) also produced a high number of calls. The service also attracted calls from small numbers of men in North Lincolnshire (Scunthorpe, Grimsby and Cleethorpe) where there is no similar service.

Figure 2.5 Postcodes of perpetrators calling Helpline in first 18 months

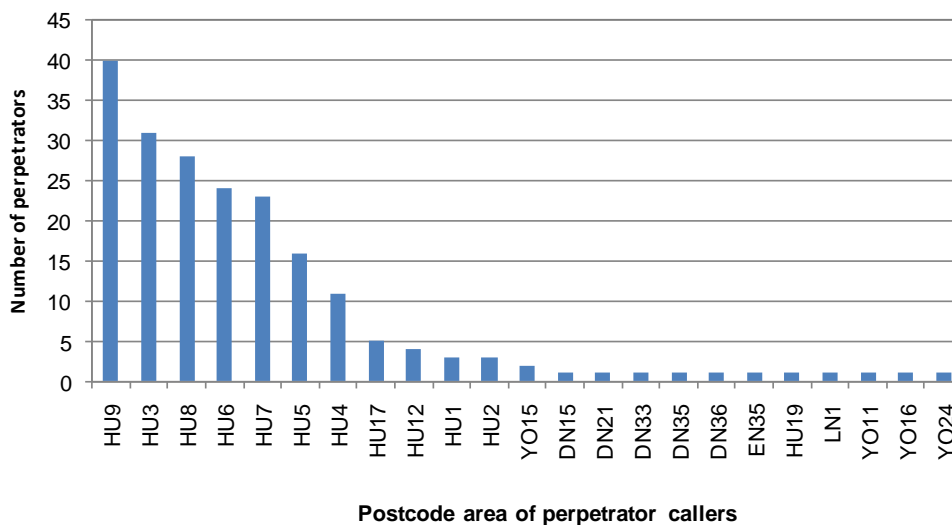


Figure 2.6 shows the convictions disclosed by perpetrators calling the Helpline in the first 18 months. In total, 53 men (25% of all perpetrators calling) had been convicted of violent crimes against persons.

Figure 2.6 Convictions disclosed by Perpetrators Calling Helpline in first 18 Months

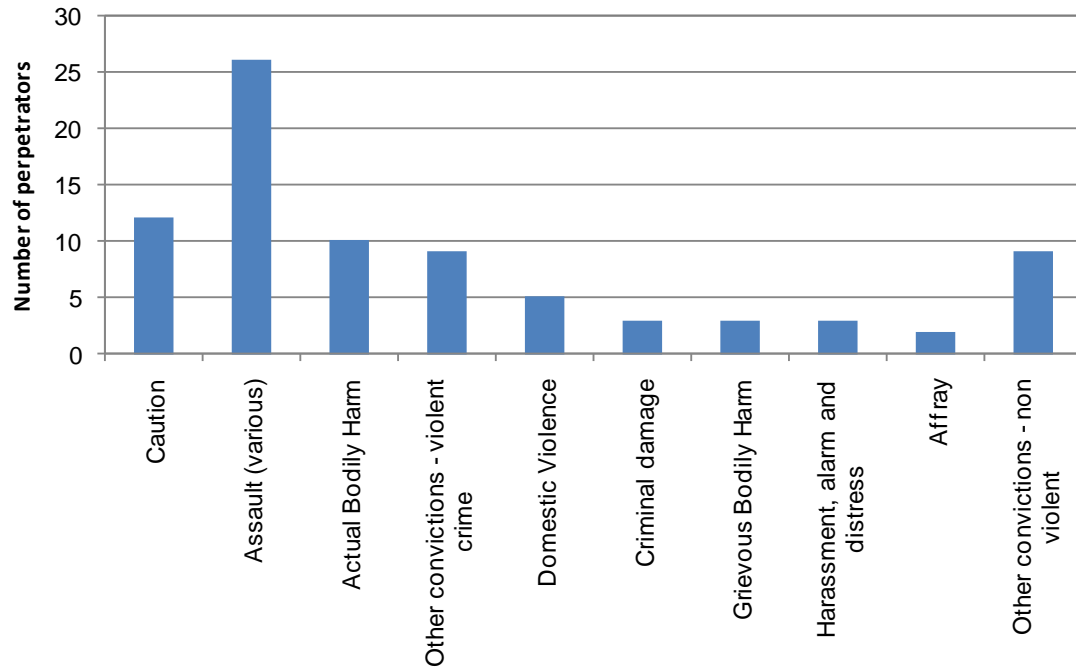


Figure 2.7 shows the histories of domestic violence reported by perpetrators calling the Helpline. Sixty-one men (41% of those for whom this information was available) reported that the violence had continued for over five years. Fifty-six men (37% of those for whom this information was available) described the violence continuing between one and four years and 33 men (22% of those for whom this information was available) described histories of domestic violence of less than a year.

Figure 2.7 Length of time violence has continued reported by perpetrators calling Helpline in first 18 months

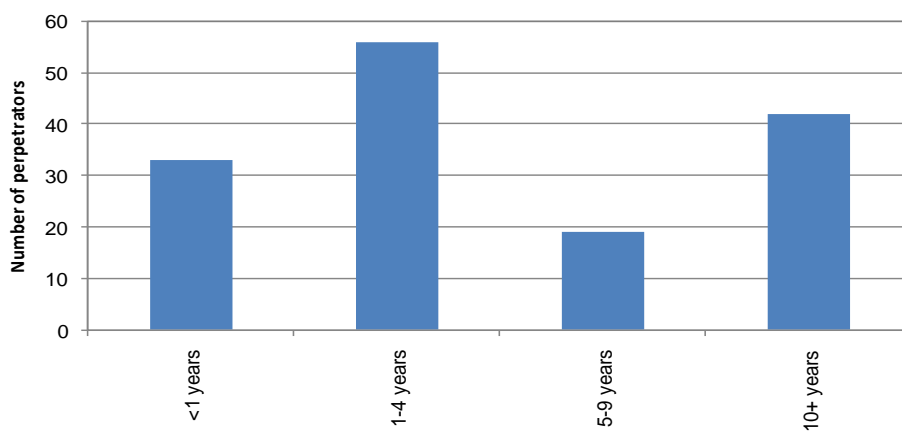


Figure 2.8 shows that 84 men (64% of those for whom this information was available) calling the Helpline reported less than 10 incidents of domestic violence/abuse. Twenty-three men (18% of those for whom this information was available) admitted to more than 50 incidents, while 19 said that they had not perpetrated any abuse but were concerned about their potential for doing so.

Figure 2.8 Numbers of incidents of violence/abuse reported by perpetrators calling Helpline in first 18 months

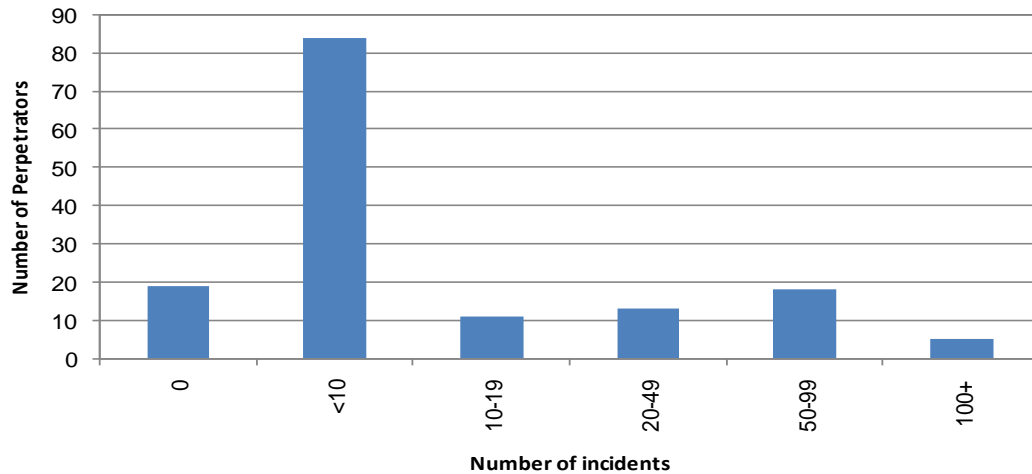
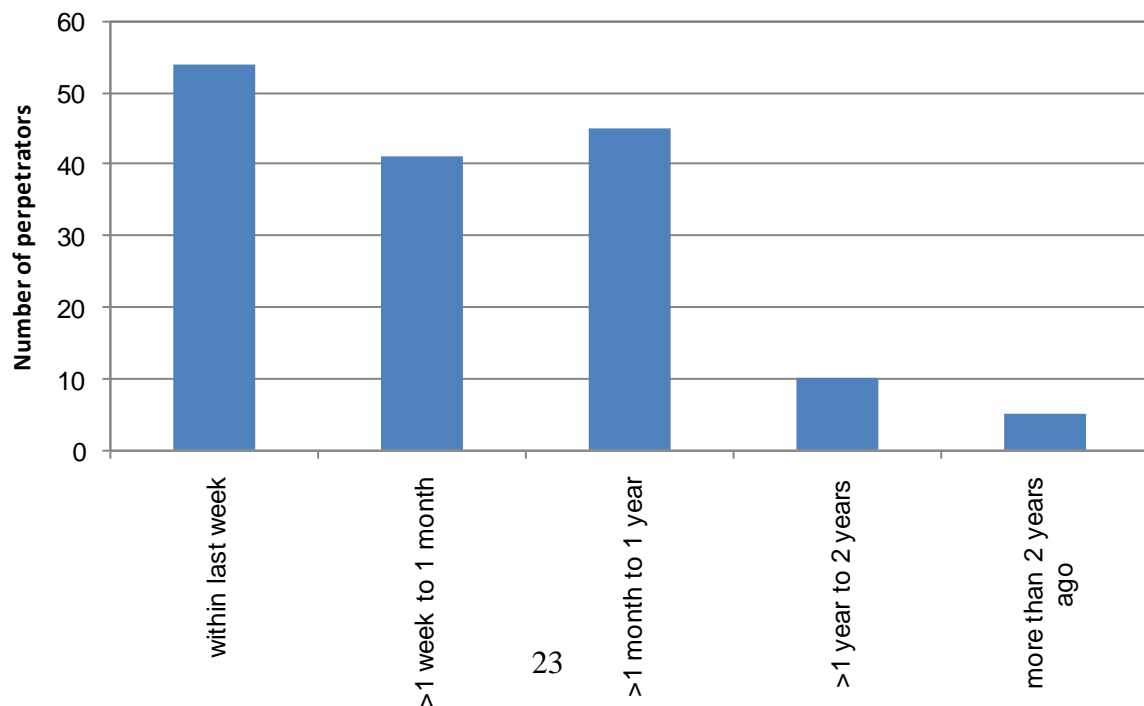


Figure 2.9 shows that most men calling the Helpline described the most recent incident of domestic violence/abuse as taking place in the last week or month suggesting that a recent incident contributed to motivation for contacting the service.

Figure 2.9 Most recent incident of violence/abuse reported by perpetrators calling Helpline in first 18 months



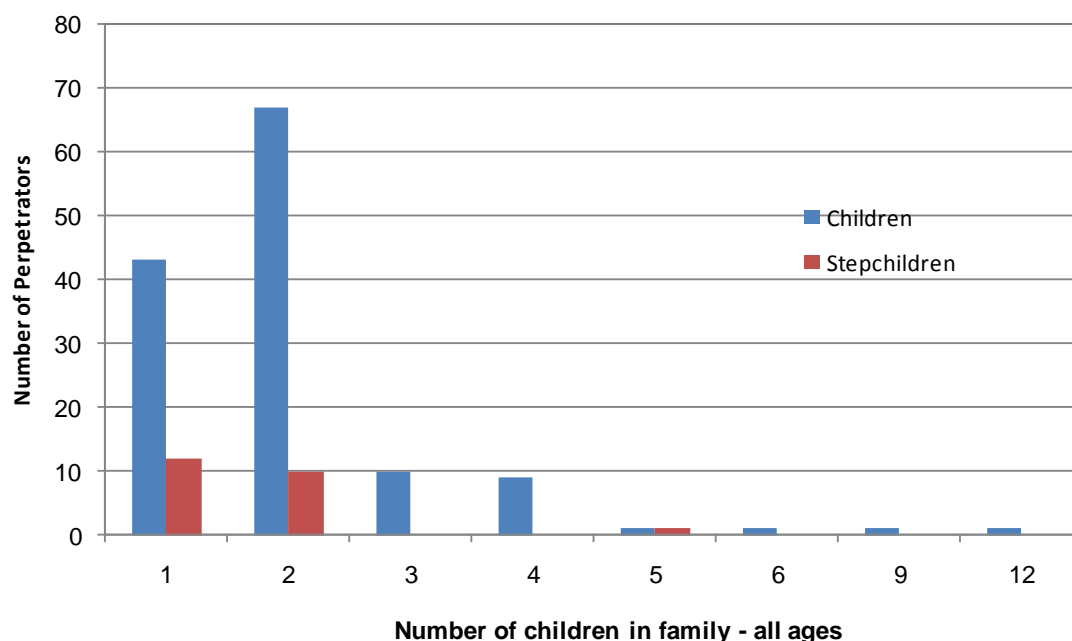
Information about the numbers and ages of children in the family was also collected from callers to the Helpline. In total, 136 of men and women calling on their own or their partner's behalf reported having children. As Table 2.1 shows, this represents 59% of all those calling and 72% for whom this information was recorded (this information had not been recorded for 40 callers).

Table 2.1 Parental status of men and women calling Helpline on their own or partner's behalf in first 18 months

Whether caller has children	Number	% of those recorded	% of total
None	54	28%	23%
Have children	136	72%	59%
Not recorded	40	-	17%
Total	230	100%	100%

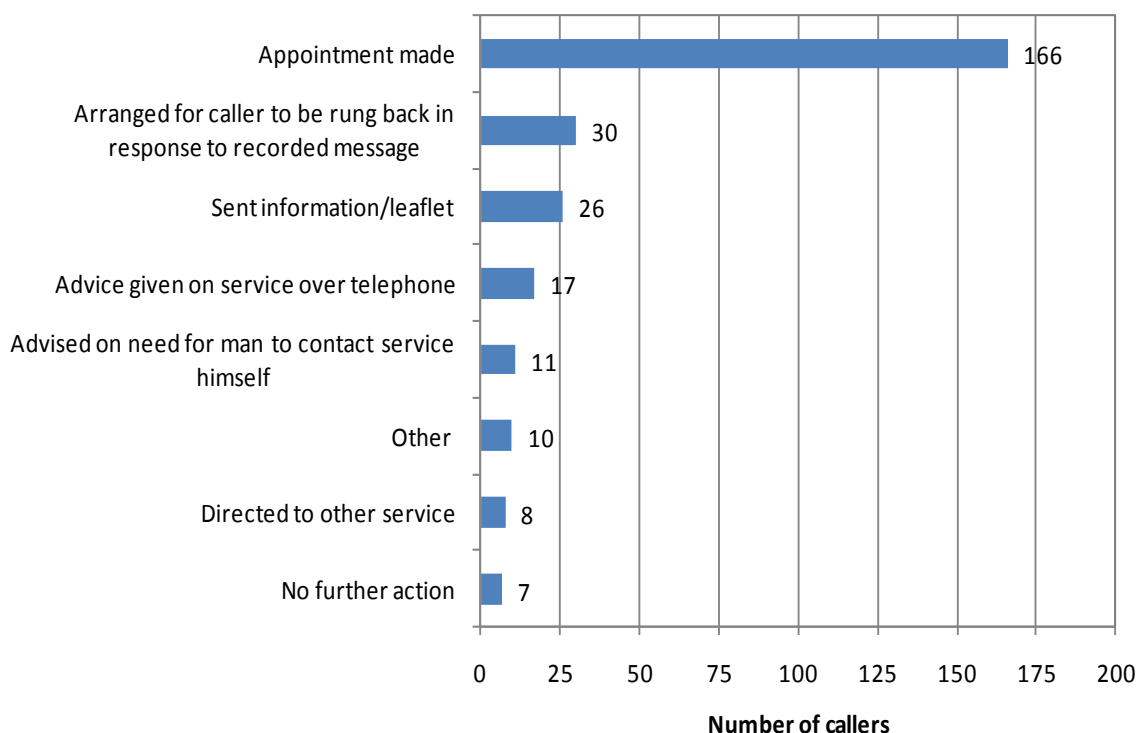
Figure 2.10 shows that most men reported one or two children in their families but 13 men described themselves as fathers to four or more children. Together, these figures indicate the high numbers of callers' children experiencing domestic violence.

Figure 2.10 Numbers of Children and Stepchildren reported by perpetrators calling Helpline in first 18 months



The immediate response to Helpline calls is recorded by STC staff and Figure 2.11 demonstrates that the majority of calls (60%) resulted in an appointment being made. Surprisingly few callers needed to be told that men had to contact the service themselves, suggesting that messages about how to contact STC had been well disseminated. Very few callers were directed to other services and there may be more potential for callers to be 'screened out' at this early stage although that might entail additional training for staff answering the Helpline which is currently staffed mainly by the project's administrator.

Figure 2.11 Actions Taken in Response to Calls



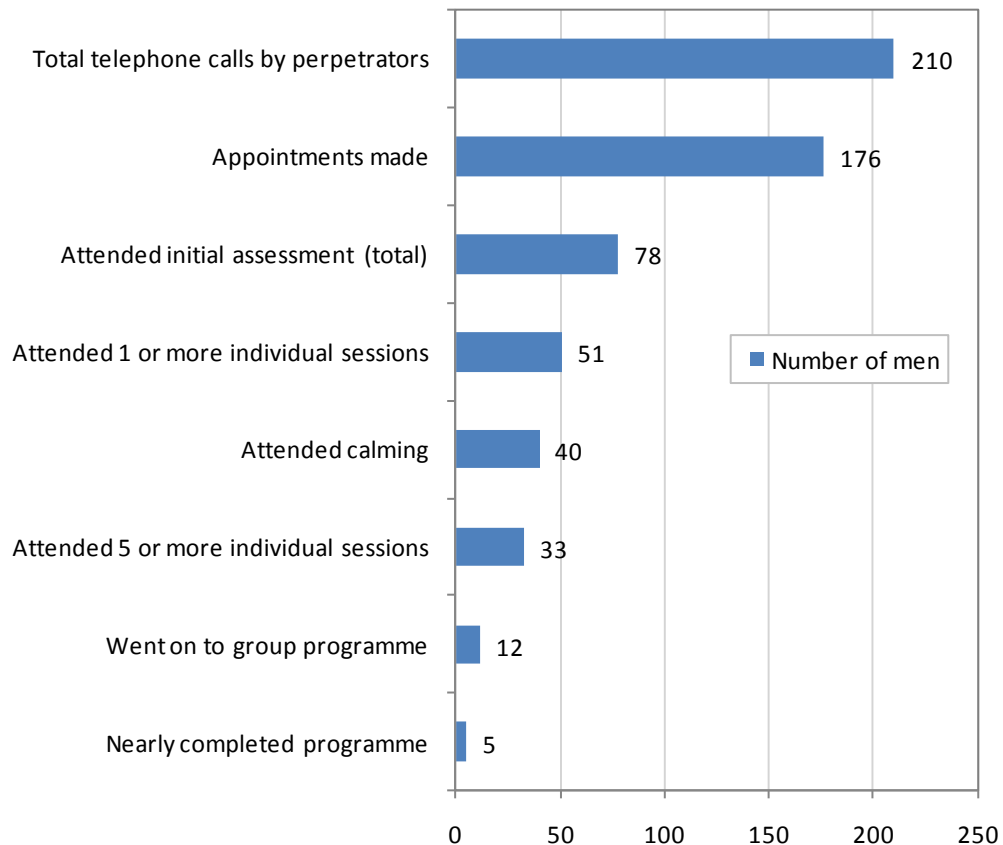
2.5.3 Men's attendance on the programme

The figures on men's attendance need to be interpreted with care. Since the programme has a rolling intake, the fact that some men had completed fewer sessions may be a consequence of their recent start on the programme rather than a failure to complete. The full programme consists of 10 individual sessions and 40 group sessions, and holiday breaks together with delays while a sufficient number of men reached the point where a group could be established have extended its duration. This has meant that even those who were referred to the programme at its start still had not completed the programme in January 2011.

The various categories of service use shown in Figure 2.12 are not mutually exclusive: those shown in the categories at the top of the bar chart also appear in the groups shown below. This allows us to identify attrition at different stages of the programme. In the first 18 months of the programme, 210 telephone calls from men identifying themselves as perpetrators of domestic violence resulted in a high number of 176 appointments (84%). This is an indication of the success of the programme's policy of requiring men to make direct contact with the service themselves. However, there is a steep reduction in the numbers who went on to complete an assessment. Seventy-eight men attended an initial assessment; this represents 37% of the original

210 men who rang the service and can be compared to the figures produced by other programme evaluations. The ADVA programme in Devon accepts both agency and self-referrals: 34% of initial contacts started the assessment and initial session (ADVA and Sue Penna Associates 2009). The evaluation of the East London DVIP (Price et al 2009) where men are referred to the programme by social services found that 48% of 202 referrals received in the 21 months covered by the evaluation completed an assessment.

Figure 2.12 – Men’s Attendance in first 18 months of STC Programme



Forty men had attended group calming sessions at STC since they were introduced in September 2009 as a means of maintaining the motivation of men who could not be offered a place on the programme immediately. The 51 men who attended one or more individual sessions represents 65 per cent of those who had an initial assessment and it might be the case that, at the point when these figures were collected, there were some men who had completed an initial assessment but had not yet completed an individual session because they were on the waiting list rather than because they had not taken up the offer of a session. The drop in numbers between those who had completed more than one session and those who had completed five or more is noticeable but is in part explained by the fact that some men might have only recently started the individual programme at the point when these data were collected in September 2010.

The largest drop in numbers is found when transition to and completion of the group programme are examined and this appears to be the point in its cycle where the programme’s ability to retain its users is weakest. Similar findings have been found for other UK perpetrator programmes (e.g. Bullock et al., 2010). Some service users

have acknowledged finding the shift to the group setting difficult and a few men have chosen to return to individual sessions having initially started the group sessions. Clearly, the programme's capacity to offer this option is limited since individual sessions represent a heavy demand on staff time. Another small group of men have decided, in consultation with programme staff, that they do not need to progress to the group programme and that having undertaken a sufficient number of individual sessions, they have completed the programme. The STC programme therefore retains a degree of flexibility regarding both its length and whether individual or group format is required.

Table 2.2 looks at men's use of the service in a different way, dividing programme users into discrete groups. Here we see that just over a third of those contacting the programme attended at least once while just under two-thirds made telephone contact only.

Table 2.2 Amount of Contact in first 18 months of programme

	Number of men	Percentage
Telephone contact only	132	63%
Men attending programme at least once	78	37%
Total number of perpetrators contacting programme	210	100%

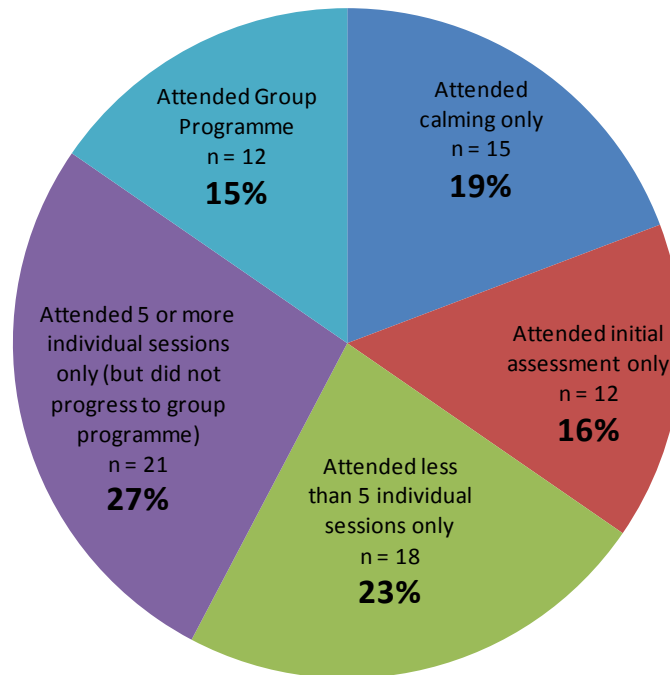
Table 2.3 also shows discrete groups of users and illustrates that, of those attending the programme at least once, the largest group of users at the end of September 2010 was those who had completed five or more individual sessions. Again this is evidence of the programme's capacity to retain men. However, the numbers graduating to the group programme drop sharply. This may in part be due to limited availability of the group programme.

Table 2.3 Men's levels of attendance in first 18 months of programme

	Number of men	Percentage
Attended initial assessment only	12	15%
Attended calming only	15	19%
Attended less than 5 individual sessions only	18	23%
Attended 5 or more individual sessions only (but did not progress to group programme)	21	27%
Attended group programme	12	15%
Total attending programme at least once	78	100%

Figure 2.13 shows this in diagrammatic form.

Figure 2.13 Men's levels of exposure to the STC programme in first 18 months



Data available in March 2011 also indicated the extent to which there had been drop-out from the group programme which took over a year to reach completion. Five of the 12 men who had originally started the group programme (starting points for the group varied, see Section 2.1.2) were still attending and completed the full programme in March 2011.

We can conclude from this analysis that while the proportion of men graduating to the group programme in the first 18 months was low at 15%, 42% of those who attended Strength to Change at least once went on to make substantial use of the service, attending a minimum of five sessions. This group can be described as receiving a 'high dosage' of the programme. However, as noted in Chapter 1, the intensity with which a programme is delivered is as important as the amount of sessions and individual completes. Both have been found to impact on reoffending in relation to criminal behaviour generally (Kroner and Takahashi 2011; Bourgon and Armstrong 2005). Research on treatment dosage suggests that the intensity of an intervention should be matched to the level of risk posed by the offender so that higher risk offenders should receive more intensive interventions, while low risk offenders should be offered lower intensity programmes (Ross et al., 2008).

2.5.4 Use of the women's service

Data on partners' use of the service and the monitoring forms which women complete in respect of their partners' behaviour while on the programme were not easily accessed by the research team and the service needs to ensure that these data are recorded regularly and stored securely. The data presented below record the work of the women's service up to January 2011 and therefore cover the first 21 months of the project. Forty three per cent of women with whom initial contact was made took up the offer of some form of support from the Women's Worker whether face-to-face or by telephone.

Table 2.4 Women’s Use of the STC Service over first 21 months

Pattern of contact with Strength to Change	Numbers of partners and ex-partners
Initial contact by letter/phone	119
Declined service	67
No further contact	1
Engaged with service	51

2.5.5 Working with Black and Minority Ethnic groups

Black and Minority Ethnic (BME) groups are small in Hull and the service has worked with low numbers of men from a range of BME groups – of the 94 men who were service users in January 2011, two were identified as African and four as ‘other’ minority ethnic groups. The service has not as yet had to use the services of an interpreter and staff voiced concerns about how this would work in practice. Staff knew how to access interpreters but wondered whether it would be feasible to use an interpreter in a group setting. There were also concerns expressed about whether interpreters recruited from the small local BME communities could offer the confidentiality men required.

Staff commented that for some BME perpetrators there were issues concerning their different cultural attitudes and beliefs and some challenges were experienced in relation to this.

2.6 Chapter 2 Summary Points

- The STC service has been successful in attracting direct calls from abusive men who represent over two-thirds of callers to the Helpline. The social marketing campaign appears to have stimulated interest in STC although health and social care professionals also play a key role in directing men to the service.
- Most men calling the Helpline in the first 18 months were in their twenties or thirties and came from those parts of the city with high levels of social exclusion which were targeted by the social marketing campaign. A quarter of men contacting the STC Helpline reported convictions for violent offences indicating that this was a ‘high risk’ group and over 40 per cent described their abusive behaviour as continuing for more than five years.
- Nearly three-quarters of the men and women contacting the Helpline were parents, indicating the large numbers of children likely to be affected by domestic violence.
- A high proportion of calls to the Helpline (84%) resulted in appointments being made for men but the proportion of callers who proceeded to an initial assessment fell sharply to 38 per cent. While this figure is comparable to that achieved by some other voluntary perpetrator programmes, it represents a high rate of missed/lost appointments.
- Calming sessions appear to be a useful means of maintaining men’s engagement with the programme when individual sessions cannot be offered immediately.

- In its first 18 months, the STC programme was successful in maintaining men's involvement over a number of sessions with the largest group of users being those men who had completed five or more individual sessions. A substantial proportion of men were therefore receiving a high dosage of the programme. More frequent sessions would be a means of increasing the intensity of this dosage.
- The programme has had less success in transitioning men to the group programme. One means of addressing this issue might be to increase the intensity of individual sessions offering two individual sessions a week so that men complete this stage of the programme more speedily and the period between commencing the individual sessions and graduating to the group programme is reduced. However, this would have implications for staffing.
- Limited data were available on women's use of the STC support service for partners. While informal communication between the Women's Worker and other STC staff appears well established, more formal types of record keeping for this group could usefully be strengthened.
- Staff need to have identified access to interpreters for individuals for whom English is a second language and to develop policies and confidence in working with for those for whom English is a second language.

Chapter 3: Staff and Steering Group Members' Perspectives

3.1 The Staff and Steering Group Members

This chapter reports on the views of STC staff members who, along with three members of the STC Steering Group, took part in individual interviews. The three steering group members were selected to represent a range of professional backgrounds and all three had extensive experience of working with domestic violence acquired at both practitioner and managerial levels. The seven members of staff in post at the time were interviewed between July and October 2010. They included the Programme Manager, the Women's Worker, the Domestic Violence Prevention Officer (DVPO), the Male Victims Worker (MVW), the administrator and two co-facilitators. Quotations used in this chapter are not attributed in order to protect staff's anonymity.

Three of the staff group interviewed were male and four were female. Most were aged between 35 and 49. Three members of staff were graduates and two had higher degrees. While three had counselling qualifications, two were qualified teachers. All, apart from the administrator and one of the co-facilitators, had received professional training related to domestic violence.

The manager and the DVPO both had over five years experience working in domestic violence services. Other staff had acquired relevant experience in women's centres, domestic violence agencies and criminal justice services.

All members of staff involved in programme delivery had participated in a 9-day training package delivered by Paul Wolf-Light from Ahimsa which delivers a perpetrators' programme in South Devon (the project manager had participated in this training prior to joining STC). This training was considered 'extremely useful' and was highly rated by all staff. However, the administrator who staffed the telephone helpline had not participated in this training. Other training accessed by team members as part of their work with STC included child protection training (for STC and co-facilitators); training on substance misuse and suicide intervention (for co-facilitators) and training in work with male victims (MVW). The Manager and DVPO had undertaken the Caring Dads training with a view to delivering that programme from STC, although that aspect of the service had not yet been introduced. In addition to mandatory NHS training, the Administrator had completed mentoring training which was considered 'too basic'.

Staff discussed their motivation for working with the programme. A number of those interviewed described their motivation in terms of tackling domestic violence at its roots:

"...the thing is the abuse is the men, isn't it? So why don't people work with the men, surely if you can stop the abuse within the men then the ripple effect is gone, because you remove the abuse rather than dealing with the aftermath..."

Staff also described their own experiences of contributing to the service. They were proud to be involved with an innovative project and felt that they had achieved a considerable amount. Some individuals commented that working with abusive men had helped them to develop a new perspective on their own life history. Female facilitators could encounter resistance from men on the programme but they felt they had something particular to contribute, both through feeding back the female victim's

perspective and through offering opportunities to model positive interactions with women:

“...because some of those guys have not had any healthy female relationships with, you know, with any relatives, friends, whatever and people that have, you know, but, you know, there's that, there's that kind of element of modelling that relationship...”

3.2 Empowering Service Users

Empowerment is rarely discussed in relation to interventions for abusive men but the STC service was repeatedly described by staff as delivering a programme which allowed men to experience some degree of control in the process of intervention. Self-referral was considered valuable in ensuring that men chose to use the service and approached the programme with high levels of motivation:

“...the voluntary nature of it, I think that's a big plus because obviously you hope that you get the people coming who want to come...”

One of the steering group members interviewed highlighted the way in which self-referral gave men some control:

“...that service, which is very much led by the men, you know, picking up the phone and self-referring.”

However, it was acknowledged that men's motivation varied and this was seen as particularly likely in the case of those men who used the service in order to achieve access to their children or to avoid children being taken into care:

“I mean I guess the question mark hangs over the men that are sent via children services, because there is a degree of, even if it's not explicit, but you know, there's a degree of coercion... And that's hard for us because, you know, we've always sort of said we want men to come that really do want to change, rather than those that are just playing the system, as it were, or ticking the boxes.”

The introduction of calming sessions was judged to have been successful in that they avoided the disempowerment associated with being assigned to a waiting list for a service:

“I do think the calming is a strength because anyone can access it... I feel that it's such a good idea because these guys aren't kind of ringing up then [we're] saying 'well we've got a waiting list'. You know, they can come, they, we can say 'yeah and you can come in on Tuesday and, and start learning something'.”

Staff emphasised that the use of individual as well as group sessions allowed the service a degree of flexibility and to be responsive to the individual's needs:

“...we're not rigid in the programme towards the men.. - one size does not fit all - and we don't try and squeeze people in to what doesn't fit, there are occasions where you need to adapt things for other people. Because we're asking them to be considerate of other people's feelings and their needs and so on and so forth and if we don't do that back then how are we teaching them anything?”

It was argued that the programme avoided being prescriptive and encouraged men to exercise power in a constructive manner:

“I think is the biggest strength of it, you know, we're not sitting here saying you're wrong, you know, you're doing, you're bad, you know, this behaviour is

wrong, this is how you should be doing it, it's kind of letting the man come to his own conclusions about his behaviour..."

3.3 Leadership and Team Culture

Staff noted that the project had benefited from the very high level of commitment from the project manager. Prior to the appointment of the DVPO in April 2010, the manager was the only member of staff directly employed by the service who was delivering the programme. He also undertook all assessments of men prior to the DVPO's appointment. Establishing, managing and delivering the programme resulted in a high workload for the manager who was described by all staff as working very long hours. However, he was explicit that he had expected to undertake a wide range of roles and was committed to delivering as well as managing the service. Steering group members noted that the demands on the project manager had been high from the outset:

"...it was a big ask, it's a small service and they had a lot more interest than we anticipated."

The project team was described by both staff and steering group members as 'skill sharing', 'supportive' and 'informal'. The manager was perceived to have created an inclusive team atmosphere and to be accessible to staff.

3.4 Project Staffing

All those STC staff interviewed described the service as under-staffed and identified the difficulties this caused in responding sufficiently swiftly to men wanting to use the service:

"...it's about the amount of people that want this service and the lack of people we have to do the actual work, that's just being quite blunt."

It was suggested that a children's social worker was required to take a lead on the family and child protection issues that many men brought to the service:

"...a senior social worker seconded full time into this team and who has decision making powers... And they wouldn't deal with anything else other than our clients and our families...and they'd be full time. They'd be trained to do the co-facilitating but primarily they would be here to fulfil their role as a senior social worker with child protection responsibilities. That would help in case management, it would help in child protection supervision, everything, it would streamline the processes."

Steering group members were enthusiastic about the opportunities that co-facilitators offered to 'cascade' knowledge about working with abusive men down through local services but acknowledged that the recruitment had not been easy and that training the co-facilitators was expensive.

The co-facilitators were described by staff as bringing high levels of enthusiasm, commitment and a range of skills to the service but, in the absence of more permanent staff, the reliance on them had proved problematic at times. The short-term (12 months) nature of their commitment and their vulnerability to being pulled 'back to base' meant that they could not replace permanent members of staff.

The use of co-facilitators who were only occasionally in the office could make for difficulties in maintaining communication across the team:

"...it's rare we get time to sit and, you know, talk for any period of time or, or you know, feel that they're integrated in the team."

The reliance on co-facilitators and subsequent changes among them was also felt to have resulted in a lack of continuity for some clients:

“I think continuity is the thing... given that people are baring their souls they need the same face and continuity and, you know, as far as I understand it we have got facilitators that are just coming and leaving...”

Staff were also concerned that, in a climate of cuts, facilitators could be ‘pulled back’ to their own services. It was suggested that the facilitators should be funded rather than relying on the goodwill of both the individuals and their employing agencies:

“...it's short term and...they may have some kind of commitment to want to do this work but again they're always going to be driven by the needs of their employers and their day job... So actually they could be pulled at any time which then leaves... the service in jeopardy really because we've got huge take-up in the way of, you know, completing assessments and people being accepted on to the programme and...a huge deficit in, in the ability to be able to, to see all these people within a, a realistic timescale... I think there needs to be a budget for co-facilitators...”

3.5 Chapter 3 Summary Points

- Staff described the service as offering men some control over the help-seeking process in that they approached the service on their own terms and a flexible approach was favoured over a prescriptive one.
- In its first 18 months, the service has benefited considerably from the high level of commitment from all staff but particularly from the Project Manager. Such high levels of commitment from individuals may be difficult to sustain in the long-term. There are also risks inherent in centralising too many functions and responsibilities in one individual.
- Staff described the service as under-staffed. While the use of seconded co-facilitators has facilitated the exchange of knowledge and skills between agencies in the city, the heavy reliance on co-facilitators has exacerbated the problems of a small staff team facing high demands. It has also made for difficulties in communication within the staff team and a lack of continuity.

Chapter 4: Key Characteristics of Men and Women using the STC Service

This chapter identifies key characteristics of men and women using the service in the first 18 months. The analysis is based on data recorded by STC programme staff on samples of 32 men and 11 women. Staff selected which clients they collected data on and we have no way of knowing how representative the samples are. However, the data provide a more detailed picture of the men and women who made use of the STC service in its first 18 months. The information collected by staff from their sessions with men and women is supplemented by information provided by the police on incidents of domestic violence and offending both prior to and while men were on the programme.

4.1 Men Using the STC Service

All but two of the 32 men were White British. The men's sample included nearly equal numbers of those who had completed less than five sessions and those who had completed five or more sessions. Data have therefore been analysed using this key distinction. A high number of the forms were incomplete and it was not evident whether an item was left blank because it did not apply, the respondent did not wish to answer, there was insufficient data available to make an assessment or the staff member completing the form missed the item out. It has not been possible to statistically control for missing data and so the analysis in this section was conducted on all available data which varied from item to item. Numbers of respondents are therefore included in the tables below. Since the numbers of forms completed was only 32 in total, descriptive statistics are presented and significance testing has not been utilised.

Fifteen of the 32 men had completed five or more individual sessions by the end of September 2010 and were therefore judged to have engaged with the STC programme. The remaining 17 men had all completed less than five sessions by the end of September 2010 and had left the programme by the end of October 2010. This group is therefore described as non-engaged. Table 4.1 shows that there was no difference in ages between the two groups which both had a mean age of 30, but on average the engaged group of men had had longer relationships than the non-engaged men. This suggests that the engaged men might have more stability in their lives than the non-engaged group and also that their capacity for continuing in the programme might be related to having 'more to lose'. The engaged group also reported more incidents of domestic violence, incidents of domestic violence happening over a longer period of time and a shorter duration since the most recent incident than the non-engaged men. One half of the engaged group, but under one third of the non-engaged group, reported having had previous relationships where there was domestic violence. These self reports were consistent with the information provided by the police (see below). Although the engaged men reported more incidents than the non-engaged men, they were less likely to describe their abusive behaviour as escalating than were the non-engaged men.

Table 4.1 Key characteristics of engaged and non-engaged men

	Engaged – completed 5 or more sessions	Unengaged - completed less than 5 sessions	Total
Age	Mean age = 30 yrs Range 20 to 48 yrs	Mean = 30 yrs Range 23 to 32 yrs	Mean = 30yrs
Length of current/most recent relationship	Mean = 6.7 years	Mean = 5.6 years	Mean = 6.25 years
Number of domestic violence incidents	Mean = 15.8 Range 0-10	Mean = 14.0 Range 0-100 incidents	Mean = 9.9
Previous abusive relationships	5 (Total responses = 10)	3 (Total responses = 11)	8 (Total responses = 26)
Time DV has lasted	Mean = 65.2 months	Mean = 47.6 months	Mean = 55.7 months
Length of time since the last incident	Mean = 84.6 days	Mean = 102.3 days	Mean = 96.7 days
Escalating domestic violence	1 (Total responses = 13)	4 (Total responses = 7)	5 (Total responses = 25)

4.1.1 Men’s parental status

Table 4.2 shows that most of the men were in fathering roles and had between one and four biological and/or step-children. Their children ranged from infants to adults. Of the engaged group, fourteen reported having children (one did not, although his partner was pregnant). Eleven out of thirteen of the non-engaged group had children. On average, the engaged group’s children were slightly younger than those of men who had not engaged. Three-quarters of the engaged men and over a third of the non-engaged men were having regular contact with their children and most of those who did not have contact were currently seeking it. It is possible that ongoing contact with children might have impacted on motivation to continue on the programme and collecting this data over a longer period for larger numbers might yield some interesting information in this respect.

Table 4.2 Fathering roles of engaged and non-engaged men

	Engaged – completed 5 or more sessions	Unengaged - completed less than 5 sessions	Total
Has children	13 (Total responses = 14)	11 (Total responses = 12)	24 (Total responses = 26)
No. of biological children	Mean = 1.6 Range 0-4	Mean = 1.9 Range 2-3	Mean = 1.8
No. of step children	Mean = 0.4 Range 0-2	Mean = 0.2 Range 0-14	Mean = 0.3
Age of youngest child	Mean = 2.9 yrs Range 0-14 yrs	Mean = 4.0 yrs Range 1-11 yrs	Mean = 3.4
Age of oldest child	Mean = 6.5 yrs Range 1-18 yrs	Mean = 7.8 yrs Range 1-13 yrs	Mean = 7.1 Range 1-18 yrs
Were having regular contact with children	9 (Total responses = 12)	5 (Total responses = 11)	14 (Total responses = 23)
Were seeking regular contact with children	5 (Total responses = 7)	3 (Total responses = 9)	8 (Total responses = 16)

Table 4.3 shows that non-engaged men were more likely to report currently living with their partner than were engaged men. Likewise, less than half of the engaged men, but more than half of the non-engaged men were currently living with their children.

Table 4.3 Cohabitation with partners and children by engaged and non-engaged men

	Engaged - completed 5 or more sessions		Unengaged - completed less than 5 sessions	
	Yes	No	Yes	No
Living with partner	4	11	7	5
Living with children under 5 yrs	2	5	4	7
Living with children over 5 yrs	2	6	4	8

4.1.2 Employment and finances

Table 4.4 shows that most of the men had some form of formal qualification, but engaged men were more likely to report leaving school with no qualifications and to have difficulties with reading (a fifth of engaged men but no non-engaged men were described as dyslexic). There are plans, as yet not implemented, for STC to run a literacy class with the assistance of the Adult Learning Service. Despite their literacy problems, men in the engaged group were more likely to be in employment, again indicating that perhaps they had more to lose. It is therefore not surprising that fewer than half the engaged men compared to two-thirds of the non-engaged men reported experiencing financial difficulties.

Table 4.4 Employment and finances by engaged and non-engaged men

	Engaged - completed 5 or more sessions		Unengaged - completed less than 5 sessions		Total
	Yes	No	Yes	No	
Currently employed	10	5	4	9	14 (Total responses = 28)
Financial difficulties	5	9	7	4	12 (Total responses = 25)
No formal qualifications	3	4	4	8	7 (Total responses = 19)
Reading difficulties	5	10	3	13	8 (Total responses = 31)

4.1.3 Men's risk factors

The men had experienced a variety of social and health problems as well as experiences of victimisation and loss; these are shown in Table 4.5. Both the engaged and non-engaged groups showed high rates of risk factors. Levels of drug and alcohol misuse were high in both groups with drug misuse characterising over half those for whom there was a response to this question. Most of the men reported being victims of violent crime. Of note was the high proportion (half) of engaged men who had spent time in the care system as children and this contrasted with the low level of such experiences in the non-engaged group. Engaged men were also more likely to report general (non-domestic violence) forms of violence and criminal behaviour than the non-engaged group. This is consistent with research that finds men's aggression towards men and towards women share similar risk factors (e.g. Capaldi & Owen, 2001; Connolly et al. 2000a, 2000b; Frye & Kaney, 2006; Kim & Capaldi, 2004; Moffitt et al, 2001). The engaged group reported experiencing more abuse and neglect as children (probably associated with their extensive experience of the care system). Interestingly, non-engaged men were more likely to report witnessing domestic violence as a child than were the engaged group (such behaviour might therefore seem more normative to them and therefore less in need of treatment).

Table 4.5 Risk factors by engaged and non-engaged men

Risk factor	Engaged - completed 5 or more sessions		Unengaged - completed less than 5 sessions		Total
	Yes	No	Yes	No	
Generally violent	9	6	9	3	18 (Total responses= 27)
Criminal Convictions	9	4	5	4	14 (Total responses= 22)
Access to weapons/has special combat skills	5	11	3	11	8 (Total responses = 30)
Used weapons in the past	4	11	2	9	6 (Total responses = 26)
History of self harm	3	12	2	8	5 (Total responses = 25)
Witnessed DV as a child	6	8	6	2	12 (Total responses = 22)
History of childhood abuse/neglect	6	7	4	6	10 (Total responses = 23)
Spent time in care as child	5	10	1	7	6 (Total responses = 23)
Victim of violent crime	9	6	10	0	19 (Total responses = 25)
Suffered significant loss	10	4	6	3	16 (Total responses = 23)
Drug use	7	8	6	4	13 (Total responses = 25)
Alcohol abuse	4	9	5	3	9 (Total responses = 21)
Convicted of DV	3	12	4	3	7 (Total responses = 22)

4.1.4 Men's service use

Overall, as Table 4.6 demonstrates, men had quite high levels of involvement with children's services, particularly for the engaged men and, as noted above, some of these men were seeking contact with children while others may have been receiving support from children's services or might be threatened with the prospect of losing their children.

Men had made quite high use of their GP, both in the last 12 months and while on the programme. Engaged men were more likely to have seen their GP in the past 12 months, but less likely to be seeing their GP currently, than the non-engaged group. Men in the non-engaged group were more likely to be seeing other professionals

such as GPs and substance misuse and mental health professionals whilst they were on the programme. This may reflect their high levels of need or may indicate that their needs were being met by other services and that they had less need of STC.

Table 4.6 Men's use of other services

	Engaged – completed 5 or more sessions		Unengaged - completed less than 5 sessions	
	Yes	No	Yes	No
Substance misuse services current use	2	11	3	4
Mental health services current use	2	12	4	2
GP current use	5	9	6	4
GP last 12 months	10	4	4	2
Children's services current involvement	11	4	3	3
Children's services last 12 months	7	7	3	3

4.2 Offending Patterns Prior to and During the Programme

Information on police call-outs to domestic violence incidents together with non-domestic violence crimes was available for men attending the programme both for the two-year period prior to joining the programme and while they attended the programme. While some data on domestic violence incidents and other crimes were available for the post-programme period in respect of those men who had left the programme by October 2010, in most cases, these data covered a very short period of only a few months and consequently do not represent an adequate follow-up period. Therefore they are not presented here but can be accessed from the STC Return on Investment Study (Perfect Moment 2010).

Table 4.7 shows police call-outs to domestic violence incidents and non-domestic violence crimes prior to and during the programme in relation to the extent to which they had engaged with the programme. These data were available for 72 men and the mean number of incidents of domestic violence and non-domestic violence crime are shown for different groups of men according to the extent to which they had participated in the programme.

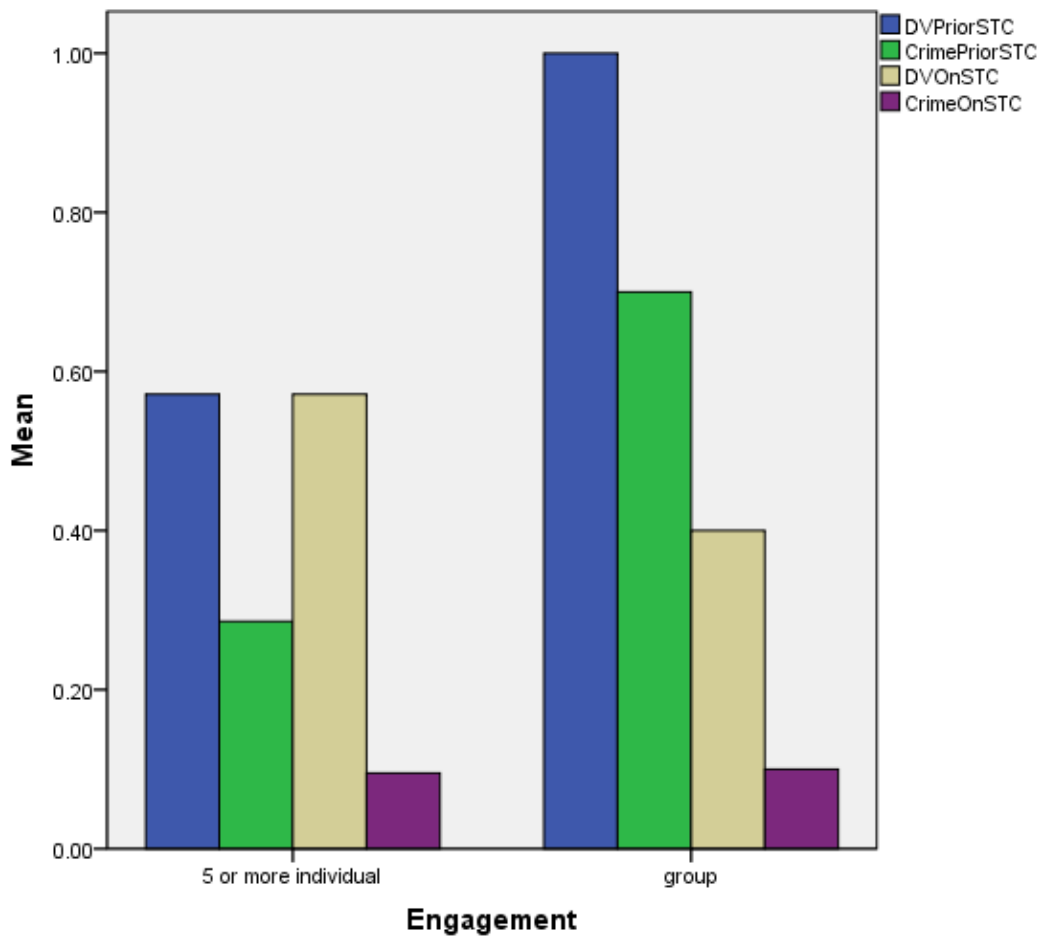
Table 4.7 Mean number of incidents of domestic violence and non-domestic violence crime by participation in the programme at September 2010

Police call-outs	Assessment Only (n=8)	Calming only (n=11)	1-4 individual Sessions (n=22)	5 or more individual sessions (n=21)	Progressed to group (n=10)
DV incident in 2 years prior to STC	4.5	1.6	1.3	0.6	1.0
Other crime in 2 years prior to STC	3.3	1.5	1.0	0.3	0.7
DV incident while on STC programme	0.3	0	0.1	0.6	0.4
Other crime while on STC programme	0.1	0	0.1	0.1	0.1

For all groups, both domestic violence incidents and other offences reduced while men were on the programme. This is a very positive finding for the programme but, as the period of time on the programme was a maximum of 18 months for those men who joined it at the outset and less for those men who joined it later or engaged for short periods of time, comparing incidents in this period with those for the two years prior to joining the programme means that equivalent time periods are not being compared. A longer period of follow-up is required for meaningful comparison. However, the data available to date show an encouraging trend.

Table 4.7 also suggests that engagement was inversely related to the number of domestic violence offences prior to STC. That is, those who had the lowest amount of exposure to the programme had the highest number of previous offences. Research on programme attrition has found that the profiles of dropouts can be distinguished from those of completers (drop-outs are more likely to be younger, less educated, unemployed, have higher exposure to violence as a child, severe psychopathology, a history of non-domestic violence prior arrests, clinical levels of problems with alcohol). This indicates a higher level of pre-existing risk factors (see Daly et al, 2001). The exception to this was those who progressed to the group programme, with this group having higher mean incidents than those men who were attending individual sessions. This pattern was also seen for non-domestic violence offences and is shown in Figure 4.1.

Figure 4.1 Criminal offences prior to and during programme by extent of exposure to programme



In order to assess whether the patterns observed in the data were statistically significant, a multivariate analysis of variance (MANOVA) was conducted. The MANOVA¹ revealed significant differences between the five groups of participants in relation to offending. A significant difference between the five groups of participants regarding previous domestic violence incidents ($F(4,67)=7,51, p < .001$) was found with the assessment only group having more previous domestic violence incidents than all the other groups. Likewise, a significant difference was found between the five groups of participants for previous other, non-domestic violence crimes ($F(4,67)=4.38, p = .003$), with the assessment only group again having more non-domestic violence offences than the group that had attended five or more individual sessions (the same pattern was seen for the 1-4 individual session group ($p=.070$) and the group that had progressed to group ($p=.067$) but these effects did not meet statistical significance ($p < .05$).

This analysis suggests that, although the programme is generally successful in engaging 'high risk' men, the most habitual and most serious perpetrators of domestic violence were less likely to proceed through assessment to participation in the programme. This finding offers some indication of suitability for the programme which could be used to inform the process of initial assessment. However, the men who progressed to the group programme had a slightly higher mean number of

¹ Non-parametric tests (independent Samples Kruskal-Wallis Test) replicated these findings)

previous domestic violence incidents than those who had completed more than five individual sessions (although this was not statistically significant) and, as noted earlier in this chapter, this group included a substantial proportion of men with multiple complex risk factors. This suggests that STC was able to engage some men with the highest risk profiles.

The programme needs to continue collecting data on participants' criminal behaviour and should seek men's agreement to collect and analyse such information for two years post participation in STC. This would facilitate a fuller picture of criminal offending before, during and after the programme and the findings could be used to develop criteria for screening men in and out of the programme at an early stage., Monitoring offending patterns over a longer period might also serve to identify whether some sub-groups of domestic violence perpetrators – such as those with the most frequent and severe offences – might benefit from a different kind of intervention. Additional research could be undertaken in respect of these questions.

4.3 Women Using the STC Service

Background data were collected for 11 women aged between 21 and 54 years with a mean age of 37 years. All the women classified themselves as White British. Five of the women reported that they were living with their partner and none reported currently living in a women's refuge. Seven of the women were employed and none of the women reported experiencing financial difficulties.

Six of the women had biological and/or step-children living with them. Two had regular contact and one was seeking contact with her children.

4.3.1 Partner behaviour since starting STC

Eight out of ten women reported a change in their partner's behaviour since becoming involved in STC. Of those who were still living with or romantically involved with their partner, five described a calmer, less violent partner - "he has got better in many ways, more chilled, and no domestic violence". One woman commented that her partner was no longer being verbally abusive to social services staff. Of the two who were commenting on their ex-partners, one reported that the verbal abuse she had previously experienced had now stopped. The other's experience suggested that she had more mixed feelings: "sometimes he accepts that they need time apart, at other times he is insistent on coming back to the family home".

4.3.2 Risk factors and involvement with children's services

None of the eleven women reported that their STC partner was a risk to others (for example, to the women's new partner or their children). Children's services were involved with six families and three of the women reported that this was due to domestic violence. Two of the women's mothers had custody of their children and a further one was only allowed supervised contact with them.

Only one woman noted that her partner had access to weapons. Two women reported that their partners had used or threatened to use a weapon against her in the past.

4.3.3 Women's risk factors

The women reported experiencing a variety of adverse past experiences and types of victimisation; these are shown in Table 4.8. Over a quarter of the women had been exposed to domestic violence or experienced abuse or neglect in childhood, with one woman experiencing both. However, unlike the men, none of the women had spent time in the care system as children. Almost half the women described being bullied at school (all between the ages of 12 and 14 years), but none of them reported being a victim of a violent crime. Almost half reported experiencing significant losses (e.g. the death of both parents, grandparent/s, friends, niece). One third reported that they had been involved in violent relationships in the past (including two who reported childhood abuse/neglect and/or witnessing domestic violence as a child). Of those who had been in involved in violent relationships in the past, one woman who had also witnessed domestic violence in her childhood was additionally seeking access to her children. None of the women reported past problems with substance abuse and only one reported such problems with alcohol.

Table 4.8 Women's risk factors

	Reported by women
Witnessed DV as a child	3
History of childhood abuse/neglect	3
Spent time in care	0
Bullied in childhood	5
Victim of violent crime	0
Suffered significant loss	5
History of previous abusive relationships with men	4
Substance misuse	0
Alcohol abuse	1

4.3.4 Women's service use

As Table 4.9 shows, women's service use differed substantially from that of the men on the programme. Almost all the women were currently using domestic violence services and their GP. Almost half were also currently seeing a solicitor and/or children's services social workers. No women reported engaging with community safety personnel and only one woman had been in contact with the police.

Table 4.9 Women's use of services

Service	Women using service
Current substance use	0
Adult services	0
Mental health services currently	1
GP currently	10
GP in last 12 months	0
Children's services currently	4
Children's services in last 12 months	0
Solicitor now	5
Domestic violence services now	9
Domestic violence services in last 12 months	0
Community safety	0
Police	1

4.4 Chapter 4 Summary Points

- Men reported extensive histories of domestic violence. Those men who had engaged with the programme for five or more sessions reported a longer duration of domestic violence and more domestic violence incidents than those who had engaged for less than five sessions.
- Men who had engaged with the programme for five or more sessions were more likely than those who had not done so to have had longer relationships in the past and to have or to be seeking on-going contact with children. They were also more likely to be in employment. These findings suggest that motivation may be increased by 'having more to lose' and that external sources of motivation such as enduring relationships, contact with children and the status conferred by employment are all relevant to developing commitment to a process of change.
- Men who had engaged with the programme for longer were also less likely to be living with their partner. Reduced contact with their partner may increase their opportunities for controlling their behaviour and for experiencing the programme as successful.
- As a group, the men's sample had high levels of risk factors: two-thirds had histories of other forms of violence; two-thirds had criminal convictions; over half

had histories of drug use or had witnessed domestic violence as a child; just under a half had histories of child abuse and neglect; a third had been previously convicted of a domestic violence offence and over a quarter had used weapons in the past.

- Those men who engaged for more than five sessions reported experiencing more abuse and neglect as children and were very much more likely than the non-engaged group to have spent time in the care system. A history of receiving services may promote engagement with the programme.
- Engaged men were also more likely to report general forms of violence and criminal behaviour than the non-engaged group. It is therefore evident that the STC programme is succeeding in engaging and retaining the involvement of men with high levels of risk for the perpetration of domestic violence.
- Men, particularly engaged men, had high levels of involvement with children's services both currently and in the previous 12 months and this appears to be positively associated with engagement with the programme.
- Use of the GP in the 12 months preceding the programme was high for those men who had engaged with the programme suggesting that engagement with STC was preceded by and perhaps enhanced by a history of using other forms of support. Men in the non-engaged group were more likely to continue to see other professionals such as GPs and substance misuse and mental health professionals whilst they were on the programme. This may reflect high levels of need or may indicate that their needs were being met by other services and that they had less need of STC.
- Analysis of police data on domestic violence incidents for 72 men who used the programme in the first 18 months showed that both domestic violence incidents and other offences reduced while men were on the programme in comparison to the period of two years prior to joining the programme. A longer period of follow-up is required for meaningful comparison. However, the data available to date show an encouraging trend.
- Statistical analysis of the police data suggests that the more habitual and most serious offenders were less likely to proceed through assessment to participation in the programme and this finding could be used to inform programme selection criteria. However, those men participating in the group programme were an exception to this, suggesting that the programme does have the capacity to retain some of those with the highest levels of risk factors.
- The background data available on 11 women using the STC service showed that a third had histories of previous abusive relationships and about half described being bullied as a child and experiencing significant losses. Over a quarter had witnessed domestic violence as children and/or been abused as children. Children's services were involved with about half the group and three women had lost custody of their children. A proportion of the women therefore have a high level of needs that are likely to contribute to their vulnerability to future abusive relationships if left without effective intervention.
- Most of the women identified positive change in their partner's behaviour since he had begun attending STC; the majority of those who lived with their partner described him as calmer and less violent. Most did not see him as a threat to other people.
- The women's pattern of service use differed from that of the men in that it appeared to have substantially increased recently. Most women were currently using specialist domestic violence services and seeing their GP; about half were

seeing a solicitor. Contact with STC appeared to have been successful in promoting use of other services.

Chapter 5: Men's and Partners' Perspectives

This chapter presents the findings from 47 in-depth interviews with men on the programme and partners or ex-partners of men who had used the programme. Themes from these interviews are presented together as, in many cases, women's views reinforced those of men although in some instances they diverged. Difficulties in recruiting men to interview meant that it was not possible to interview the whole sample at regular intervals throughout the programme. Twenty-one men were interviewed in total, six of these were interviewed more than once (two men were interviewed twice and four men interviewed on three occasions).

Thirteen men were interviewed only whilst they were on the individual programme or had just completed it; eight men were interviewed whilst on the group programme. Four of these eight were interviewed both near the beginning of the group programme and also at the point where they were close to graduating from the programme. The anonymised attributions used in this section of the report indicate what stage of the programme the individual had reached at the time of interview.

Thirteen women, ten of whom had current partners on the programme, were interviewed. Ten of these women were interviewed once and three were interviewed twice towards the beginning and towards the end of the programme. Seven of the women interviewed were the partners of men who were also interviewed, this allowed for some cross-comparison of views and experiences.

All those quoted here have been given pseudonyms to protect their anonymity.

5.1 The Men Interviewed

The 21 men interviewed had an age range of 20 to 49 with an even distribution as shown in Table 5.1. Nineteen of the men were White British, reflecting both STC's client group and the local population.

Table 5.1 Ages of men interviewed

Age	Number of men
20-24	3
25-29	4
30-34	3
35-39	3
40-44	4
45-49	3
Not recorded	1

The relationship status of the 21 men is shown in Table 5.2. Approximately half were in relationships and half were not. Only six were living with their partner at the time and eight were divorced or separated indicating histories of fractured relationships.

Table 5.2 Relationship status of men interviewed

Relationship	Number of men
Married and living with partner	1
Living with partner	5
Serious dating	2
Casual dating	1
Single	3
Divorced	1
Separated	7
Not recorded	1

The number of incidents of violence/abuse reported by the 21 men interviewed varied substantially ranging between 1 and 100. The breakdown is given in Table 5.3 below.

Table 5.3 Number of incidents of violence/abuse reported by men interviewed

Number of incidents	Number of men
1	4
2-9	6
10-19	1
20-49	3
50-99	0
100+	2
Not recorded	5

One third of the men interviewed had found out about STC from marketing products such as leaflets, posters and radio advertisements and nearly one third had heard about the service from a health or social care professional. Two had learnt about STC from Respect and two had come to the service through the family courts.

At the time of the first interview, nine of the men had attended ten or more individual sessions. One man said that he had attended over thirty individual sessions. Four men had completed between six and eight sessions and another four had attended about three sessions. One man had not yet attended any one-to-one sessions and had only participated in the calming sessions.

At the time of the second interview, four men had participated in over 10 group sessions; two men had attended two or three. One man had gone back to individual sessions after attending a couple of group sessions because he *“wasn't ready to be in a group”*.

5.2 The Women Interviewed

Six of the 13 women interviewed were living with their partner. Eleven of them had children, although two of these did not have children with their current partner.

5.3 Accounts of Previous Abusive Behaviour

Men were asked to rate their own level of violence prior to contacting STC using a scale of 1 to 10 where 1 was no violence and 10 was frequently violent. Not all those interviewed were willing to use this scale: some stated that it was just one incident or that there was hardly any physical violence, but rather verbal abuse. The ratings allocated are shown in Tables 5.4, 5.5 and 5.6 below. Table 5.4 shows that a wide range of scores were selected at first interview. The numbers participating in this ratings exercise were small and but they suggest that ratings may increase the longer men participate in the programme: those two men who rated their previous violence on three occasions gave it increasing scores over the course of the three interviews suggesting a shift in perceptions as programme dosage increased. This means of measuring shifting perceptions could be adopted by the programme in its internal ongoing evaluation of men's progress.

Table 5.4 Men's ratings of own violence prior to joining the programme – 1st Interview

Rating	Number of men
2-3	2
3-4	5
4-5	1
5-6	2
8-9	2
10	1

Table 5.5 Men's ratings of own violence prior to joining the programme – 2nd Interview

Rating	Number of men	Previous rating
4-5	1	3-4
7-8	1	5-6
8	1	8

Table 5.6 Men's ratings of own violence prior to joining the programme – 3rd Interview

Rating	Number of men	Previous rating – 1 st interview	Previous rating – 2 nd interview
3	1	2-3	Not rated
5	1	3-4	4-5
7-8	1	8-9	Not rated
10	1	5-6	7-8

Women's ratings of their partners' levels of violence prior to the programme are shown in Table 5.7. Again, the range is broad although there is more willingness to use the top end of the range than was discernible among the men at first interview. In the three instances where both partners in a couple provided ratings of the man's

violence prior to joining the programme, there was a considerable degree of consistency across men's and women's ratings.

Table 5.7 Women's ratings of partners' violence prior to joining STC

Rating	Number of partners
2-3	2
4-5	1
6-7	3
8-9	2

At the time of the first interviews, it was evident that, when asked to specify the extent of their violence, some men sought to minimise their behaviour:

"I'd just, maybe grab her and just throw her about sort of thing, that happened a couple of times in twelve years ...I don't really class that as domestic violence, the fact that I lost my temper twice in twelve years and grabbed hold of her, you know, and give her a little shake, I mean I know it's not acceptable but it's not the worst case of domestic violence is it?" (Chris)

"I'm not saying I was 100 percent violent, whereas yeah I've slapped her, I've pushed her away from me, I've restrained her, that maybe is classed as violence but it was all actually where it was needed apart from the slap which wasn't intentionally..." (Neville)

In common with those men participating in the formative research for the social marketing campaign (Stanley et al 2009), three men expressed the view that they should not have to assume all the blame for their past behaviour. However, the man quoted below, who was on the group programme at the time of the interview and had therefore completed a considerable number of sessions, was more equivocal in his allocation of blame:

"...I'm not saying it's all my fault, I'd say fifty, fifty percent of it, the blame's to me, fifty percent is blame to her ...I'm not trying to put the blame on to anybody for my actions, right, I've taken responsibility for what I've done..." (Eric)

One man who was nearing the end of the group programme described how his perceptions of the acceptability of his behaviour had shifted with his engagement with the programme:

"...my behaviour is me, is normal and natural, I suppose that's how I've always thought about it, until you go on to the programme, that your behaviour, there's nothing wrong with your behaviour, ...and then you come to... this is why I seeked [sic] help because you think well this can't be right, you know, this can't be normal behaviour, this behaviour is wrong..." (Kevin)

5.4 Understanding and Explaining Abusive Behaviour

The most common explanation for men's abusive behaviour offered by men (8) was exposure to a range of different forms of violence in childhood:

"I've come from a rough background...mine relates from when I was younger, from my father, the way I was disciplined and always put down but I've always been put down in everything I've ever done, so." (Richard)

“...well probably because I learnt it from an early age, bullied at school, Mam and Dad arguing, fighting, dad was an alcoholic, brothers fighting with my dad, brothers fighting with me, bullying me, getting bullied on buses at school, beat up, having to run home from school every day, running to school every day, not being able to concentrate at school, left school without having any qualifications because I couldn't read and write and so basically violence was around all over the place.” (Eric)

Two men described themselves as victims of sexual abuse.

Four men attributed their abusive behaviour to an inability to control their feelings of anger:

“Because I didn't have the skills, the tools to deal with my anger, erm, I'm learning now because I used to bottle everything up, I'm quite passive, you know, I used to let things bother me and I just be getting, you know, just explode...” (Chris)

Jealousy and a need for control were cited as underlying factors by a few men and some talked about these feelings with considerable insight, demonstrating that they had developed both a capacity for identifying with their partners' experiences and a recognition of the dynamics informing these behaviours:

“Control, I think you feel that you have to control every aspect of your life, for some reason or other and I'm not sure why that is, when they fight against that then that then makes you more angry ...you can't control everything and everybody, it's too much pressure...you're trying to manipulate the situation all the time instead of relaxing with it, so you're under constant pressure from yourself” (Kevin)

Women were more likely than men to attribute abusive behaviour to life circumstances such as unemployment, money worries or stress at work and this is consistent with the findings of longitudinal research (Frye & Kaney, 2006):

“I think it's just because he was stuck in all day, he didn't have a job, we hardly had any money, do you know and it, it made him unhappy...” (Becky)

Nine men believed that their partner's argumentative or (in four cases) aggressive behaviour had precipitated their violence:

“...just maybe the way she is I think maybe. Doesn't back down, she's just that, you know...more arguments than anyone else I've been with I think.” (Ian)

“I was decorating the house and cleaning it and doing everything in the house, you know, while she didn't do nothing because I was even up all night with the bairn and said no, she had her hands on the pram so I punched her hands, do you know off the pram? I mean she just went crazy and threw me on the couch and started smashing me in my face and then told my mam that I hit her, you know, but because a woman hits a man it's not as bad, you know, as a man hitting a woman, you know what I mean...” (Martin)

Four women described their partners attributing the violence to their behaviour. Women varied in their readiness to take on some responsibility for this:

“I'd get paranoid or I'd get jealous and that would make things worse, that would make him more angry.” (Heather)

“...he always said it was because I always nagged, do you know, at him?... So I always used to think it was me, do you know but I said to him every, every girlfriend you'd get will nag, do you know what I mean?” (Becky)

Three men said their violence was linked to drug misuse and three related it to alcohol abuse. One woman thought her partner's violence was due to alcohol abuse. Alcohol was also described by five men and three women as a factor which could make abusive behaviour more likely. This man described alcohol as removing the inhibitions that would otherwise have restrained his behaviour:

"The main thing was the drink, I mean I still say now that if I hadn't been drinking alcohol I don't think there would have been incidents of violence in the way of physical violence anyway, em but I do think there would have been arguments...the drink to me was the thing that pushed on my moral boundary in a way, sort of threw out all that was right and wrong and sort of put the line a bit further up so." (Jason)

Five men and four women described abusive behaviour as less likely to occur in public. Two women pointed out that this indicated a degree of control:

"You see this is it with X because even when X had a drink he would, he could control it and he used to say he didn't know what he was doing but he never lashed out when anybody was there, it was always when I was on my own..." (Rose)

However, two men and one woman found that having other people around didn't act as a deterrent:

"...he'd do it in front of anyone, more when we were out." (Heather)

5.5 Perceptions of Impact of Abusive Behaviour on Partner

Only one man thought his behaviour had had no impact on his partner. Seventeen men acknowledged their behaviour had had a major or damaging impact on their partner/ex-partner:

"Massively, massively really, it must have altered her quite a bit, how she sees me, in the fact that she doesn't want to be with me, erm, like she did do, erm, so the impact must have been massive really and not just the, the violence, I think it's the control as well, you know, that you don't want them to do things, I think that's the big, the worst thing for me and her is that control, not letting her live a normal life..." (Kevin)

Three women described the abuse as damaging their mental health:

"I don't know, I just, I just felt really quite weepy, I cried such a lot, my children used to say 'Mum you're always crying'... I became quite depressed I think. Like I was quite, quite needy." (Vicky)

Several men identified the mental health consequences of their behaviour for their partner:

"I think I, like emotionally, do you know, put her down. She, when I used to do things, she, she started cutting herself...and she started drinking and smoking drugs and stuff." (Martin)

Women described their fear of their partners and several men appeared to have developed an appreciation of that fear from the victim's perspective:

"...you go through stages when you're a victim, you go through that dread and the fear and the sick feeling, where you're so frightened..." (Rose)

"You know, if I like didn't close the curtains properly would we have a blazing row about it, would that blazing row then turn into something else? So it's, you, you scare the person that you live with and I, I can't, I, now

understanding how that works I can't imagine that, you know, living scared is, is a good position to be in.” (Brian)

The majority (8) of the women interviewed thought their confidence and self-esteem had been damaged:

“He just made me feel really low and worthless and, you know, as though I have to live under his rules and laws and stuff.” (Dee)

Three women described being isolated by their partner’s abusive behaviour:

“I suppose you, after a while you feel cut off from people...” (Katie)

5.6 Impact of Past Behaviour on Children

While five of the men interviewed described themselves as trying to prevent their children witnessing domestic violence, eight acknowledged that their children had been exposed to arguing and that it had affected them..

“I mean my little girl...she's seen us, she's seen us arguing, yeah, shouting and swearing at one another...” (Kenneth)

“...nothing physical, just the actual arguing, you know, just shouting backwards and forwards between me and my partner, you know, I think that's, she's remembered it... as soon as anyone raises their voice ...even if it's just a conversational argument, ...you can see her that she's like cringing a bit sort of, sort of thing.” (Harry)

Over half the men interviewed (13) thought that their past behaviour had had an effect on their children. Some of these accounts included the recognition that the harm inflicted had involved losses for the men in their role as fathers:

“I think the long term relationship that happened with my children I think it's made them scared of me, probably dislike me, hate me, uncomfortable within the same room as me, turned the kids against me...” (Eric)

“...they won't even talk to me if I'm in the street, which is very sad...” (Kevin)

Most of the women interviewed considered that their partner’s behaviour had impacted on their children:

“...she saw him hitting me and she's quite frightened of him even now, I mean not so much being younger but she says ‘what happens when I get to be bigger and I don't like what he says and is he going to do the same thing to me?’” (Maria)

“..he was really scared and protective and stuff...he would always intervene when he'd see his father abusively shouting at me and stuff but then when we left home he sort became his father... He started acting out his dad's behaviour towards me and his little brother and I was quite worried for a week or so but then I was told how to deal towards him... [by] the Nursery Nurse...and our Health Visitor.” (Dee)

The theme of loss recurred when both men and women described the long-term impact of the abuse on their lives and relationships:

“It's been terrible, I had a nervous breakdown, lost everything, my job and car, my house, ended up living in hostels...” (Chris)

“...it had been like a drip drip effect and we'd like lost, we'd lost the relationship that we had really and that was of great sorrow to me.” (Vicky)

5.7 Motivation for Contacting STC

The theme of seeking change emerged strongly from men's descriptions of their motivation and hopes for their engagement with the service. At the time of the first interviews, change was conceptualised in terms of changes in behaviour, changes in perceptions and understanding of self and wider life changes:

"...control me behaviour, hopefully to change so I could eventually have a normal relationship with a partner." (Kevin)

"I just, I thought that it was time for me to change, for me to maybe look at things from a different angle to what I've been looking at it for years." (Neville)

"...it's going to help me to focus on my life, help me towards changing my life, which it is doing. It's only through something like this that I can do that." (Tim)

For some men, change involved getting the right sort of help in contrast to previous negative experiences of seeking help:

"I ended up hitting her and I just want, I wanted to get proper help this time..." (Geoff)

Some of the associations found in the interview transcripts indicated that this focus on change reflected an identification with STC's name and ethos, suggesting that the programme's key message of optimism concerning the potential for change had been absorbed:

"I hope that it would, you know, that it would do what it says, would help me change, you know what I mean, give me the strength to change sort of thing." (James)

Motivation to contact and use the service was also shaped by extrinsic factors. Two men were prompted by their partner to contact the programme and one woman reported encouraging her partner to do so. Three men attending the individual programme thought their partners would end the relationship if they stopped attending.

"She'd leave me... She would, she'd go, she said if you quit it, you know what I mean? She says I will leave because if you're not willing to get the help then it's just going to carry on which is understandable, you know, I expected her to leave anyway but once I signed up for this place she was like 'no', she says, 'I'm not throwing away ten years'." (Geoff)

Two men identified the social marketing campaign as a catalyst for contacting STC; this man described responding to the emotional content of one of campaign messages:

"...the little card with a kid on the front, it says something about scaring your family and I realised yeah, I did scare my family. So I took the initiative to phone Strength to Change." [emotional] (Tim)

Likewise, one woman had seen an article in the paper that emphasised the targeted and confidential nature of the service and had seen these as aspects of the service that would make it relevant and acceptable to her partner:

"I saw the advertisement in the local magazine for Strength to Change in the April and I saw it and it said it was for men, it was confidential and it was especially for men and I showed him it and I asked him to go... it sounded like it was ideal for him because the thought of him going for any help or anything"

like that, he just wouldn't have done it and it, you know, the way it was in the paper was ideal for him really.” (Sue)

Access issues relating to their children and encouragement from Children’s Social Services were cited as external motivating factors by eight men. There was considerable variation concerning the degree of direction or pressure men had experienced from the court or children’s services, with some describing the programme as ‘mandatory’ for them and others noting that ‘they didn’t tell me to do this’. Although one woman was sceptical and wondered whether her ex-partner’s motivation was simply ‘to make him look good with Social Services’ (EPP1), the men themselves saw the court’s or social services’ involvement as a positive boost to their motivation:

“...obviously if I continue to go then there is, my, well my Social Worker's looking at closing the case as long as I complete this course, so I guess that's the, the biggest, well not the biggest incentive but you know, it's definitely a bit incentive.” (Alan)

“Well there, there's an issue about seeing my children and the court said that I should seek anger management, so I started looking and that's when I found Strength to Change... I'm jumping through the hoops, I'm...doing everything they've said, I've never put a foot wrong and I get to see my kids in September hopefully.” (Chris)

There has been some debate as to whether this form of incentive produces ‘real’ motivation or whether it promotes an instrumental approach to engagement with perpetrator programmes (Williamson and Hester 2009; Debonnaire 2010). However, if this factor is explicitly acknowledged by both the individual and programme staff there seems no reason why it should not enhance rather than reduce motivation. The evaluation of the East London DVIP (Price et al 2009), a perpetrators’ service jointly commissioned by the London Boroughs of Barking and Dagenham and Newham and Waltham Forest found that approximately two-thirds of referrals came from children’s services; early findings from this evaluation appeared promising. Hester’s (2009) final evaluation of the South Tyneside Domestic Abuse Perpetrator Programme found that although programme staff were concerned about the effect of children’s services’ involvement on men’s motivation, the men interviewed were positive about the benefits of the programme. In the case of this evaluation, one of the four men who were close to completing the full programme at the time of writing acknowledged that his original motivation for joining the programme had derived from a court recommendation, but he had found his motivation broadening to embrace other factors, particularly his relationship with his partner, as he proceeded through the programme.

It is useful to distinguish between extrinsic motivation and intrinsic motivation. In the case of extrinsic motivation, the rewards for change are located outside the individual. Extrinsic motivation may be based upon a desire to reconcile with an ex-partner and/or secure contact with children. Hester et al’s (2006) study found that losses or anticipated losses were often ‘triggers for change for perpetrators. Intrinsic motivation comes from within rather than from any external or outside rewards. This intrinsic motivation may be evident in men’s statements about wanting to control behaviour or change their lives. While both forms of motivation are valuable, intrinsic motivation is generally associated with greater long term behaviour change and is thought to increase with growing awareness of the severity of a client’s perceived problems (DiClemente et al, 1999). We would therefore expect intrinsic motivation to increase over the course of the programme.

5.8 Women's Expectations of the Programme

The women interviewed were evenly divided in their expectations that their partner would be able to end his abusive behaviour. Those whose partners were nearing the end of the full programme were among the six who were hopeful that he would be successful in achieving change:

"And you want to go back, it's like everything I want, wish for, it's, everything is lovely, he's loving, he's a different person..." (Katie)

However, six women were sceptical at the outset about their partner's or former partner's capacity to achieve change:

"And he's going to Strength to Change, he's talking and getting some support and that. And then it's like, when he's on the bus back he just forgets it all and comes back and does the same thing. It's just a cycle at the minute." (Joni)

As noted by the first of the women quoted above, a couple of women expressed the hope that they could go back to *'the man I first married'* (Katie) and some men understood that this was what their partners wanted. However, some men recognised that reconciliation with their partner was not a feasible goal for them:

"I still think she's hoping or wishing that one day we'll get married but I don't think that's the answer and I don't think it's the right thing to do because of the way I am." (MG 3)

Working with partners to achieve realistic expectations concerning the prospect of reconciliation is a task that could be addressed by the Specialist Family Practitioner.

5.9 Anticipating Joining the Programme

Men described having a number of concerns about joining the programme. These included feeling nervous and uncertain about what to expect. A number of men were anxious about being judged or labelled and the stigma and shame attached to domestic violence were also cited:

"I felt quite ashamed that I'd got to go and put my hands up to some...even going into the building, to the reception...my head was hanging in shame, I'd got to tell the lady on reception, she knows why I'm there, she's bound to know why I'm there" (James)

Three men anticipated having to disclose painful feelings and experiences:

"Anxious about it. Bring up memories, bring up past..." (Tim)

Two men were concerned that information they disclosed would be used against them:

"...I've done a lot of things in my past and things like that that I wondered if they were going to be used against me...so at first I told them [STC] a lot of things but I kept a lot back." (Tim)

In contrast, half of the women interviewed had been pleased at the prospect of their partners joining the programme.

"I was really happy because I thought well, at least he's, he's sorting, he's trying to sort himself out." (Becky)

5.10 Experiencing the STC Programme

5.10.1 Men's views of staff

All those men interviewed were positive about the staff and their skills. Nearly half the men described staff as good at listening; for some being listened to was a rare occurrence:

"They do listen, you know, and they don't interrupt you, do you know, when you're talking, they listen to you and when you're finished and they say, do you know, what they want to say, so that's got, do you know, instead of saying something and butting in halfway..." (Martin)

The approachability and communication skills of staff were also frequently remarked upon:

"I think [the Programme Manager's] the kind of guy who makes you naturally feel at ease and open to talk to." (Alan)

"...he gets the message across very well, very positive, you know good and bad you know he doesn't beat round the bush you know he tells you how it is really which is what you need really." (Kevin)

The approach was described as non-judgemental and respectful:

"...you wasn't being judged." (Greg)

"...there's definitely a mutual respect there..." (Chris)

Staff were also perceived as supportive, knowledgeable, experienced and consequently trustworthy:

"...if I could have I would have [the Programme Manager] on one shoulder and [the co-facilitator] on the other, I wouldn't care about the bloomin' weight of carrying them round all day." (Tim)

"And I trust them like, you know, I can tell by talking to them that they know their stuff like, so I trust them like." (James)

Men were conscious of the team's high level of commitment and experienced this as evidence of their positive regard for the service users:

"I think [the Programme Manager's] just gone beyond, beyond just doing his job when he's phoned up and asked about certain things at certain times when he knew that I was struggling with things and you just know that he's not just a jobsworth... and the same with [the Administrator], first time I talked to her on the phone she calmed me down, she calmed me down a lot." (Tim)

Two men considered that having a female facilitator who could represent women's experiences of abuse in the group sessions was valuable:

"I think having an input from a woman, having somebody there giving their input from a female's point of view." (Eric)

5.10.2 Women's views of staff

Nine the women interviewed saw the women's worker at regularly intervals: weekly or once a fortnight. Some maintained contact with her by telephone. Women described higher levels of contact initially but were happy for contact to be reduced over time.

The women interviewed were generally very positive in their views of the women's worker who was their primary contact point with the service. She was described as supportive, available and accessible:

"She really is wonderful, she's easy to talk to, she's really down to earth and you know that she genuinely means the support that she gives you..." (Sue)

"I can pick the phone up any time to her, she said, you know what I mean, within working hours obviously, yes, and if I can't get hold of her she always ring me back, yeah." (Katie)

The women's worker's approach was characterised as direct and informal and three women compared her to a friend or sister:

"...that's what she feels like to me, a very good friend. I'll tell her all my problems and that and she'll just sit there and tell me that I am worth something, that I don't deserve it and that." (Joni)

She was also described as a good listener and as someone who explained things clearly:

"...she talks to me about looking like I say, different angles, on the pros and cons of things, just trying to think, I mean she gives me information, leaflets and stuff, you know..." (Katie)

In common with the men, women valued staff's non-judgmental approach:

"I found it wasn't like a, it wasn't a judging service, it wasn't ...judging us or preaching to us, they was there to give us support, not to preach to us..." (Emily)

The previous chapter noted that a proportion of those women for whom background information was available had a high level of need that might require specialist intervention; one woman contrasted the women's worker's approach with her previous experience of counselling and noted that what she offered was befriending rather than counselling.

5.10.3 Calming sessions

Men varied in their views of the calming sessions. Six men thought that the calming sessions were helpful and offered a practical approach for dealing with their emotions and anger that could be implemented outside the sessions:

"...it helps change your mindset, when you, when you're outside and you, you can think about how to calm yourself if you ever...if you ever need to, it's, I think it's good practical stuff that you can, that you can use." (Alan)

Five men however described struggling to get to grips with the approach, despite some finding it useful, while three men found the calming sessions boring or felt 'out of their depth':

"I mean half the stuff I didn't understand what she was really on about, you know." (Geoff)

"If I, if I'm going to be totally honest...I thought it was just, it wasn't for me whatsoever... It just seemed a bit far out sort of thing, a bit sort of, if I can say it, just a bit hippyish and I just thought I just really can't see this being what I need you know." (Harry)

5.10.4 Individual sessions

Several men described valuing the opportunity to have the space to talk freely about their problems and feelings. Two men noted the freedom that came from talking to someone who did not previously know them. The positive regard of the therapist was cited as an important component of the sessions:

"I don't know, talking to [the Programme Manager], you know, because when, when I leave here, you know, it feels as if a big weight's been lifted off my shoulders, you know, for what me and [the Programme Manager] talk about." (Martin)

"...being able to sit and talk to someone and tell someone, I mean she knows all about my past and like... Someone's actually willing to give me the time to help me, you know, like an outsider, it does feel really good, you know..." (Geoff)

However, some men found that the one-to-one sessions could provoke anxiety or be experienced as challenging:

"...they can be quite challenging like, you know, and there's, there's, there's questions that are put to you and stuff that are, is quite challenging like, yeah." (James)

The importance of encountering non-judgemental attitudes was a recurrent theme across the interviews and the feeling that they were being asked to shoulder all the blame could provoke resistance:

"...it was probably after about six, sixth or seventh session I just thought I'm getting blame for all of this and it can't, it surely can't be all me and it just seemed that I didn't come here to be blamed for, for everything bad happening and I found that really hard to accept." (Richard)

Three men found the handouts they were given to read between sessions useful:

"...some of the leaflets I've had in between, there was one it's like about men ... what shame is and that was helpful, there was another one, a frustration one, that was very helpful as well, we'll still be doing all the work there, I do get frustrated now and then, a bit stressed out, so it was a bit helpful with that, reading what it was about and I did sort of calm down a bit." (Jason)

5.10.5 Group sessions

Six men had been initially apprehensive about joining the group.

"Bit nervous about meeting other people, you know, talking about it in front of other blokes but it was okay once I started." (Greg)

Four men described having negative expectations of other group members prior to meeting them:

'like rough people, like hardened criminals or something but...they're not at all, not at all.' (Alan)

Men appreciated the opportunities offered by the group to hear about other people's thoughts and experiences:

"I think what you do is you go there, you learn, you learn things every week, you pick up things off other people, you, you relate to people, how, how they're dealing with things, you know that the majority of things that they've gone through you've already done it, or you've been, you've been through half of it or, or whatever else, you relate to stuff like that, so you take something

away every week, whether it's a small thing, a big thing, a major thing or whatever..." (Eric)

Encountering non-judgemental attitudes from other group members was also identified as important:

"I was quite surprised because, do you know, they listened and they didn't judge me, you know, for what I said, they, they was just, well wasn't alright with it but they understood." (Martin)

The positive regard of other group members was emphasised by several men and the commonality of experience was seen as dissolving the shame and stigma that disclosure of abusive behaviour would have evoked in other contexts:

"I get a lot of positive feedback from the rest of the guys, the rest of the guys like are real supportive and we all really support each other, so if anyone's got like an issue ...the group sort of pulls together and give you a little bit more inspiration to keep going." (James)

"...the support you get from Mark and the other members of staff, the other, the candidates or whatever in the group... when things do go wrong... that's a big positive. There is somebody out there to talk ...you can run past them and they can put it in a different light, you know, with them being in the same situation, you can't just ask anybody a question like that because obviously they're not in the same predicament as you, you know, they aren't thinking like you, you know." (Kevin)

The group setting was described as offering men the opportunity to learn from other men's experiences, recognising both commonalities and differences. Men also described taking on a helping role in the group setting:

"you listen to the problems from other people and you can relate to them problems and you can help them the way you've dealt with things, or the way you, you sort of like work through them, helps them and it also helps you as well, listening to them talking to you about it because you think well look I was there, I was, I was in the middle of all that and they're going through the same thing, you know." (Eric)

Men emphasised the 'bonded' relationship with other men in the group and the process of 'sharing':

"...sharing the stories that, you know, with other, the other guys, seeing yourself in what they've done as well, you know, and talk about it." (Greg)

Five of the eight men who had started the group programme said that they preferred the group work to the individual sessions because the group made the views and support of other people available to them. Two of these eight said that the one-to-one sessions suited them better.

Difficult aspects of the group work included having to talk about yourself and being challenged:

"They challenge you about your behaviour which is helpful although sometimes you don't like what you hear. The thing about group sessions is that you can see yourself in other people and can see how they can put their lives right. But it's hard to do the same thing for yourself." (Kevin)

In relation to the groups' rolling intake, most of those who discussed this issue were not concerned about new men joining, with two of them identifying benefits of hearing new viewpoints. Two men were initially uncertain about it as they thought it could be

disruptive and perhaps inhibit disclosure however, one of these men changed his views after a new member had joined his group.

5.10.6 Advocacy and other support for men on programme

Five men described the programme offering them additional support often in the form of advocacy. One man had been assisted negotiations with housing services, in communicating with probation services and had also been accompanied on a visit to the police station. Another had been assisted to attend a course; one man had been supported by programme staff when he appeared in court, and one man had been assisted in liaising with social services. The Programme Manager had set up and attended a meeting with one man's GP to try to address his problems with depression.

5.11 Evaluations of the STC Service

5.11.1 Men's views

When asked, ten men said that there was nothing that they would change about the programme.

"I couldn't think of anything to change to be honest. Like I said it's been a lot better than I thought it would be." (Jason)

Although some thought the groups were sufficiently structured, four men said that they would prefer more structure to the sessions:

"It would be nice if it was like kind of structured ... like, you know, today in this session we're going to talk about this, this and this and maybe at the end of each one just summarise it, yeah, 'this is what we've talked about and think about this over the next week and then next week we'll talk about this, this and this...' ..I think at the minute it'd just feel like I'm coming here and just sitting down and talking for an hour...without any form of where we are or where we're going kind of thing... I feel like there's no aim to them like."
(Alan)

Two men noted that the number of people at the reception desk in the shared building could be intimidating and one man thought that the STC office should have a doorbell because there had been times in the evenings when he had not been able to get in because the group had already started.

The previous chapter noted the importance of high and intensive programme dosage and two men on the individual programme wanted more or longer sessions:

"I mean an hour here and an hour and half there you know each week, I don't know if it's long enough." (Eric)

Two men were concerned about confidentiality – one man's wife had been rung by mistake by the programme thinking she was his ex-wife and another man had had post from STC go to the wrong address.

Other suggestions for improving the service (each offered by a different man) were to have a better booking system for appointments to prevent double booking; to employ a mental health specialist to address mental health issues; to ensure there was input from a female counsellor in the group sessions; to make more use of visual aids such as DVDs in the group sessions and to produce a 'calming' CD.

5.11.2 Women's views

Four women expressed very positive views about the programme and emphasised the extent to which their partners had changed:

“it's ...such a good service, it's, you know, it's been almost like a Godsend, it's been, you know, a total miracle worker...I didn't expect it to work as well as what it worked.” (Emily)

This woman emphasised the empowering approach of the programme:

“What I loved most of all as well, it wasn't like an authoritative thing that was coming over him, like the Police or Social Services... Or someone who was going to tell him off, it was more someone who was going to help him...” (Vicky)

One woman thought the programme was effective with men who were motivated but she did not think it would work for her partner because he “*went for all the wrong reasons*” (Rose).

Women identified both the emotional and practical support provided directly to them as very helpful. They had been signposted to other services including refuges, legal services and mental health services. Five women had been offered support for their children by the Women's Worker but only one of these had taken it up. Two were already receiving assistance from children's services and two felt that their children did not need extra support.

Women made a range of suggestions as to how the service might be improved: two women suggested joint sessions with the couple and two noted that it would be better if they didn't have to complete the same forms repeatedly. One woman suggested offering a crèche facility and another thought that men could be offered help with parenting.

5.12 The Process of Change

All those men interviewed, regardless of what stage they were at on the programme, felt that it had impacted on them positively in some way. However, it needs to be acknowledged that those men interviewed were those who were sufficiently motivated to have engaged with the programme and to volunteer and participate in an interview. Nine of the 13 women interviewed considered that the programme was having some impact on their partner. Two women (one ex-partner and one whose partner was living elsewhere at the time of interview) said that they did not see any impact on their partner but this was attributed to their lack of contact with him. Two other women didn't think the programme was having an impact on their partner or did not believe it that was possible for their partner to change. The benefits identified by men varied and are discussed below together with the women's views of programme impact.

Men both noticed changes in themselves and in other programme participants as well as drawing on other people's perceptions of change:

“Oh it, it's a gradual change isn't it? ... So it, it's definitely gradual change and you can see how, some of the guys that I'm working with, when we first started the, I mean they must be able to see the change in me, I can see the change in them...” (Brian)

“...all my family, my friends and my partner can, do you know, tell that I've changed. I, my, my mam's husband's known me for five years and the other

day he says he's seen a big change in me, do you know, from like I used to be to now... And so has my mam....” (Martin)

Four men who had graduated to the group reported that their partners had noticed a change in them. Those women who identified a positive change cited both their own and others' perceptions of change:

“I mean everybody's noticed a difference in him, you know...I mean he has medical appointments... when he goes in for them, [they] say 'you're looking well X, whatever you're doing keep it up'... And he does, he looks totally different and he's acting totally different ...there's no strain at home any, anymore,... Just can't believe, he is, he's just like a total different person.” (Emily)

The gradual nature of change was noted by a few men and a couple of men commented on ways in which they had resisted change in the past:

“I'm not trying to fight it or, you know, mask, mask my feelings with humour or, you know, or not listening or, you know, trying to fight what they're saying like, you know what I mean? So I think it's having quite a positive effect on me really.” (James)

Ten men described benefits in terms of learning to control their behaviour. This was seen to involve thinking and reflecting on their behaviour more than they would have done in the past:

“I've learnt now how to, you know control, control myself sort of thing, before I didn't think, I just flew off the handle sort of thing, now, I think about things now...” (Ian)

“...you're conscious of your behaviour more and your feelings... what triggers things off, what doesn't, knowing about yourself really, learning about yourself.” (Kevin)

Half of those men interviewed described themselves as anticipating their own behaviour much more frequently:

“...it's thinking about it before I do it and just stopping and thinking about the actions, my actions ...what my actions would cause.” (Tim)

A couple of men also identified a need to distinguish between feelings and thoughts and the interplay between them. Men also felt that they had been assisted to distinguish between reality and their fantasies, particularly jealous fantasies:

“Yeah you've got to have more positive thoughts, thoughts of nothing is going to happen you know, they've been out before and they've come back and nothing's happened and try not to make a big song and dance of it all really, you know to be able to think about something else rather than thinking about all the scenarios what come in your head...” (Kevin)

Increased cognition was seen to produce an understanding of the consequences of abusive behaviour for others and a recognition of personal responsibility:

“It's made me realise... what I was and what I was doing with my family, that's the biggest effect. It's just by talking and me realising, me taking the time to realise exactly what's been going off, making me realise without being judged.” (Tim)

Increased 'reflexivity' and sensitivity to the needs of others have been identified as outcomes of participation in perpetrator programmes by other evaluations (Burton et al 1998; Bell and Stanley 2005). Women's accounts dovetailed with these findings

and a few described their partners as more self-aware or more sensitive to others' feelings:

"I think [he] will always be able to think about what he's doing and how, you know, how it will affect other people first...not just how he will feel about it but how other people will feel about it if he, you know, lost his temper and that, and I think that's what, what's so good about Strength to Change, it's made him realise that it's not all about him... it's, you know, totally different" (Emily)

Eight men described feeling very much calmer as a consequence of the programme:

"...in the past, you know, I'd be thinking well and what she has done it would have like riled me up in the head and, you know, made me stressed and made me angry and everything, you know, but now I feel that when I do feel, think about them I feel a calmness, you know, I think ...if it does start just niggling at me I think oh forget that, you know, don't think about it, move on..." (Kevin)

Four women also characterised their partners as calmer since they had been on the programme:

"Now he's a lot more mellow. It is helping him..." (Louise)

Three men described feeling happier and another three described feelings of increased self-esteem:

"And it just makes you feel a little bit better when you're walking round on a night, think oh yeah, yeah, I did that right today." (Kenneth)

One woman thought that her partner's self-esteem had improved:

"...he's not as negative, he doesn't take things as personal as he used to and I see that his self-confidence and his self-image has increased." (Tracey)

Men also described barriers to change. Four men described the process of getting in touch with their feelings, particularly feelings about past events, as difficult:

"Well we talk about this wall that we have inside ourselves where you stop the true feelings coming to the surface and it's ... that's probably the biggest thing I've done is I've got this wall here and it's been like that for years and it's a whole sort of dead zone... So basically it's the bricks in the wall that we dealing with, the bricks in the wall, cause I've to take the bricks away to start getting the true feelings come up, that's the biggest thing, that's why I've got to deal with." (Eric)

"I think the hardest thing for me to change would be when, when they, when they tell you to sit with an emotion and look at it without acting out on it like, you know, and to just feel it and it took quite, quite a few weeks for me, you know, to under, to get the grasp like but I'm just starting to grasp it now and, you know, that's working well for me as well like, so." (James)

Two men said that changing established behaviour patterns was hard to achieve:

"I mean you hope you're going to change straight away but obviously you're coming, you know, to my age, 48, it's very difficult to change all your thoughts and behaviours overnight." (Kevin)

Other men described 'negative thoughts' and depression as barriers to change.

5.13 Putting it into Practice

The majority men of men (14 of 18) who answered the question whether they discussed what they did on the programme with their partner said that they did do so, suggesting that they were integrating what they had learnt on the programme into other areas of their lives. Twelve men had discussed the programme with members of their family, usually their mothers. Five had discussed it with friends, and one said he discussed the programme with 'everyone'. Five men had not discussed it with anyone except their partner. Two men had talked about being on the programme with their children in one case these were school age children while in the other case they were adults.

Seven men said that they used what they had learned at STC 'most days', three men talked about using it 'all the time' or 'every day'. Two men described themselves as having acquired the 'toolset' which allowed them to deal with different situations without resorting to violence. Two of the men who were close to completing the programme talked about this new approach to dealing with problems having become 'second nature'.

Men described using what they had learnt in the day-to-day domestic context:

"Yeah, it's just your day to day arguments, could be something stupid like you ain't done the washing up yet, that's how bad things got, you know, have an hour's argument over that... You know, it's, ain't done it, get up and go and do it rather than arguing..." (David)

This learning was also used in negotiating and managing relationships and this man demonstrated his ability to reflect on the impact of his behaviour when he described writing a letter to his ex-partner that was substantially less controlling and demanding than it would have been in the past:

"...what I tried to do was to just, you try and reason on a level that is non-confrontational and doesn't put the other person kind of in the corner because the only way they're going to come out is fighting..." (Brian)

Men also considered that they could use what they had learnt in a range of contexts:

"I'm not going to say I've got a halo above my head now and everything's all right, but it is managing to keep a lid on things for me, if I put into, if I put into practice what I've been taught I can keep a lid on things. It's not all about just relationships, I can pull what I've learnt ...into every aspect of my life, you know, difficult phone calls with difficult, people, you know, banks, whoever." (James)

5.14 Ending Abusive Behaviour

Details of reoffending were provided for a larger sample of men in Chapter 4 but those men interviewed were asked to rate their current level of abusive behaviour on a scale of 1 to 10 where 1 was no violence and 10 was frequently violent. Although 1 was intended to be the bottom of the scale, a number of men gave zero as their answer. Some men did not feel able to use these ratings. Table 5.7 shows the breakdown of those who did and indicates a drop in men's self-ratings across the course of the three sets of interviews. All those interviewed a third time who allocated a rating gave themselves the lowest rating.

Table 5.7 Ratings of current levels of abusive behaviour

Rating	Number of men – 1 st interview	Number of men – 2 nd interview	Number of men – 3 rd interview
0-1	10	5	4
2-3	2	2	0
4 or more	0	0	0

Note: The same men did not consistently provide information across all three interviews, so this table should be seen as a reflection of group, not individual, scores.

Only four women gave their partners' abusive behaviour a rating at the first interview and only two did so at the second interview. However, those four women who did allocate a rating at the first interview gave their partners the lowest possible rating and the two who did so at the second interview did likewise. Only one woman provided a rating at both interviews. It was notable that at the first interview she rated her partner's as zero but emotional violence was scored at four. At the second interview (when her partner was near the end of the programme) she rated all forms of abuse, including emotional abuse, at zero.

One woman who did not allocate a rating to her partner's abusive behaviour argued that she was the one who had controlled her behaviour:

"I've never really got him mad enough. I always know now when to walk away from it but I know that if I said, if he came in tonight and I say to him 'right I want you out by the end of the month' I'd have no house left, he would absolutely knock me from one end of the house to the other." (Rose)

In those cases where both partners gave the man's abusive behaviour a rating, scores tended to be consistent.

5.15 Police Involvement since being on Programme

Men were asked if they had been involved with the police at all since being involved in the programme. Only one man admitted to police involvement in a domestic violence incident near the beginning of the programme. Another described being involved in a non-domestic violence incident which the police had attended. All those men who were close to completing the programme (four) said that there had been no police involvement whilst they had been attending the group.

Two women gave accounts of their partner's involvement with the police that differed from those provided by the men. In both cases, the women reported that the police had been called out on more than one occasion although their partner said that they had not been involved with the police since starting the programme. One of these women had contacted the police on the advice of the STC women's worker. These discrepancies highlight the importance of collecting regular feedback from men's partners.

5.16 Impact of STC Programme on Partners

Seven of the 13 women interviewed reported feeling safer since their partner had been attending STC. In three cases, women said that they no longer felt that he posed a threat:

"I used to be really scared of him... But I'm not no more." (Becky)

In two cases, feeling secure was attributed to the boundaries and monitoring that STC offered:

"I just feel like because he's there, I feel like there's someone there watching us sort of thing, like to know what's going on and if anything happens, they know what's happening. He knows that as well, he knows that I'm getting support as well." (Heather)

Two women said that they felt safer because they had been provided with information about what to do if their partner was violent again by the women's worker.

"...yes, because if anything did happen, I mean [the women's worker] has given me information and that." (Joni)

Two women said they now felt safer because their partner/ex-partner was not living with them/near them.

"I feel safer because he lives a million miles away, well he lives about twenty minutes away and he can't come to my house... But I still don't feel safe when I go to court and things like that...there's still the fear there but I think it's because I don't see the change in him because obviously I have nothing to do with him, so all I remember is how he used to be." (Maria)

Three women said they had felt better/happier in themselves since their partner had been using the STC service. One woman said that she had been suicidal before her partner had contacted STC but that she was more able to cope with things since he had been attending:

"Now I wouldn't look for my tablets anymore, I wouldn't look for a way out, I would look for a way out where I could speak to somebody and seek the help I need." (Emily)

One woman felt validated because her partner had disclosed his violence to another person:

"I feel like I'm just not on my own with this because now he's, he has actually admitted to somebody what he's done, he can't just sort of say oh she's lying, she's making it up because now he's actually admitted it. So in, in some ways that has made me feel better." (Rose)

Five women felt that their partner's behaviour had changed sufficiently so that he no longer posed a threat and three described themselves as more confident since their partner had been attending STC. This woman saw her increased confidence as facilitating help seeking in the future:

"I think now because of Strength to Change as well, I think I'm a stronger person, I'm, you know, I mean at first before this I was frightened of everybody and you know, I didn't like to ask for help, didn't want to admit that ...this was wrong and that was wrong whereas now, you know, I would never be afraid to ask for help anymore, you know, to say no, now this isn't, this isn't right, this is wrong..." (Emily)

Three of the men interviewed said that they thought their partner's confidence had increased since they had been on the programme:

"...she's feeling a bit more confident, wanting to get out, you know, get out of the house and do stuff but she isn't actually doing anything just yet, she wants to go on a course and learn something because she wants to go back to work and so I can already see that we're getting some benefits from it because she's starting to regain her confidence back, you know." (Geoff)

One man attending the group programme said that he found it difficult that his partner was becoming more able to assert herself and conveyed some fear about what the long term consequences of this might be:

"I suppose I'm being, being a bit selfish here but, you know, the counselling has it helped her move away from me, you know? ...maybe the support she's getting has helped her see more clearly what's happening to her in her life rightly so but you just don't, you know, from a selfish point of view you don't want that to happen, you know, but I can understand why." (Kevin)

His partner (in her second interview) agreed that she was more able to stand up to him now.

Four women were clear that their partners were not yet ready to leave the programme and expressed some anxiety about the possibility that they might do so:

"I don't know, like I said it's the last bit of help that he's got really. There's nowhere else in Hull that he can go for support ...it's just sitting back and twiddling your thumbs waiting for a day that he's got to go because I don't think he'd change if he left it." (Joni)

5.17 Impact of STC Programme on Relationships

Five women felt that their relationship with their partner had improved; three of these were women whose partners had nearly completed the programme:

"I'm really enjoying the fact that we're, seem to be a team, more of a team, more working together, yeah." (Vicky)

One woman described trust returning to the relationship:

"I mean our relationship now is completely different to what it was six months ago, you know, it's, the, the trust is coming back..." (Emily)

Four women described different ways in which their partner's involvement in the programme had affected whether they stayed in the relationship. This woman saw participation in the programme as a joint commitment which had strengthened their commitment to one another:

"It has, it has, it comes to a positive and now we just, you know, now we both say, you know, we've been through so much and we've overcome so much then, you know, we're, we're sticking to it." (Tracey)

In contrast, this woman saw engagement in the programme as something her partner had achieved and interpreted this as evidence of his commitment to her:

"I think it's made our relationship stronger, you know, it's, it's made us, it's made me realise as well that he's willing to do things to change the relationship and make the relationship safe." (Emily)

This woman conceptualised the programme as her partner's 'last chance' and felt that if he was abusive again, she would have the evidence that everything had been tried that would allow her to leave:

"There was a time when I wanted to finish with him, that I thought nothing would change and I was on the point where I was going to give it up. There was a time that I nearly did but he said, give me a chance, give me a chance, let me go on this course and I did... but I don't know, if he hurt me again that would be it, I wouldn't accept it again because I think if he can't help himself at this Strength to Change then he can't help himself at all." (Heather)

Seven men (five currently attending the individual programme and two attending the group programme) said that their relationship with their partner had improved; additionally, two men felt that their relationship with their ex-partner had improved:

"I can't stop going on about this holiday because it was just totally different, I was so at ease, we was having a laugh and a joke virtually every day, obviously because of the way I am, it's not going to change overnight, I lost my temper a few times but it was quashed literally within, within minutes, I mean if I did something wrong she'd point it out to me, whereas before she might stand there and either accept it or argue with me but we, we, never had such a relaxing and fantastic holiday..." (Richard)

"... we're separated at the moment. What impact has it had on her? I think, I don't know really, we're a lot better now, we, obviously we don't argue at all now, we've had the odd bicker on the phone but we haven't actually argued for, you know, a while now." (Simon)

Two men who had nearly completed the programme said that attending STC had made them realise that maybe they should not be in a relationship at the present time:

"At this present moment I think I'd be easier and safer to stay, stop on my own. Yes, it's a very lonely life and yes it's, it's a bit sad but for me to keep safe and keep out of trouble and, and eventually come to terms with who I am and, and sort of like, I don't know, carry on, I think having relationships causes a lot of pressure..." (Eric)

5.18 Impact of Programme on Children

The formative research for the social marketing campaign (Stanley et al 2009) noted that children's views and wellbeing represented an important source of motivation for men contemplating contacting a perpetrators' programme. Twelve men expressed the hope that their participation in the programme would make some difference to their children. A couple of these expressions of hope related to the prospect of acquiring access to their children again; three men hoped that participation in the programme would make them a better father:

"I would hope it's going to make me a better father, yes, I do simply that, hope that the Strength to Change programme is going to help me be a better parent." (Chris)

Five men discerned a positive impact on their children's behaviour as a result of their attendance at STC.

..."it has had an impact, yeah, I mean my son's a lot calmer and obviously we're not living together at the moment but my son's a lot different, you know what I mean...he's a lot different, a lot, he doesn't argue as much, you know,

back, we don't argue, you know, we spend quality time together sort of thing, so it has, yeah, a good impact to be honest, positive.” (Simon)

Men were able to specify ways in which their parenting had changed:

“where we have conversations now with the kids, where they get into a temper or a strop about something, it gives you the ability to just sit there and talk and say ‘hey, you know’, rather than just losing your temper and carrying off, you know, ‘why didn't you just come and talk to me about what's happened and we'll see if we can fix it?’ And that seems to work.” (Brian)

Four women identified a positive impact on their children.

“He's more calmer now... the one thing that his dad did do was he was... a door slammer and a chucker, he used to throw things and slam doors, and my little boy was getting to copy that, you know, if he wasn't happy about something he would slam the door...but because he's not seeing his dad doing those things anymore he's not doing those things anymore and I have seen that difference... He is a much more sensible parent than what he was six months ago and I think a lot of that is from, I do think a lot of it might be from the course.” (Sue)

5.19 Impact of Programme on other Relationships

One man who was nearing the end of the programme felt that his relationships with other people had been better since he had been participating in STC:

“And my relationships with other people have been a lot less, more chilled out, you know, I get on, I can get on better with a lot more people now, you know...” (James)

Five men described relationships at work as improved and felt they were dealing with situations more appropriately.

“Use it at work, use it all over. Like I say things get on top of you, there's not, like some days things can get on top of you, like when the gaffer's on your head, oh I want this doing, I want this doing and just think and, and why don't you just go do one, you know, to the gaffer but obviously you can't say that to your gaffer because you end up getting sacked but that's when you've just got to bite your top lip and [breathing noise].” (Kenneth)

5.20 Looking to the Future

Men were asked what they thought would happen if they stopped attending the programme now. Six men (two of whom were on the group programme and therefore approaching the end) considered that they had ‘changed’ and would not now resort to violent behaviour. This man was nearing the end of the programme:

“I'd want to finish the course so that I, you know, I'd, I definitely took plenty out of it but I wouldn't go back to how I was but obviously I think the more you work at it the easier it becomes for you.” (Simon)

However, six men thought that they would revert to old patterns of behaviour if they left the programme now and for a couple of men, continuing on the programme had been conceptualised as matter of personal integrity:

“You know, but obviously things take time, you know, and I mean I'm, we're both getting help and I intend to stay and do it all, I mean I don't want to quit, no matter...” (Geoff)

The idea that change took time was reiterated by several men at different stages of the programme:

"...it's not a thing that's a fixing overnight...it's a long process..." (Eric)

Those men who were nearing the end of the programme emphasised their ongoing need for continued support of some sort, albeit at a reduced level:

"just somewhere you can go for, or drop in and have a chat, if anything's depressing you or, you know, you want some guidance and reassurance really, if you're doing the right thing or if you think your behaviour is slipping..." (Kevin)

Men's expectations as to how the programme would help them in the future were considerably less focused on the extrinsic factors that had characterised their accounts of their initial motivation. Five men talked about being 'happier' or a 'better person' as a consequence of participation in the programme. This man had completed a large number of individual sessions:

"...so long time in the future, a year or so down the line, another year, hopefully it's going to create a better person, hopefully I'm going to create a better person, if I break up with my partner and move on to the next relationship, I'm not going to have the baggage and everything else with me, what I've always had. So... I see this as a long term investment." (Tim)

Four men articulated an expectation that they would be able to manage their behaviour better. This man was someone whose initial motivation had been primarily extrinsic:

"I hope things improve, I hope things, I hope I get the correct tool, I hope I can stop things happening before they happen, I hope I can stop where a bad situation's going into a bad situation and back off and hopefully try and keep safe and try and change the whole, the whole situation altogether before it gets out of hand." (Eric)

In common with the man quoted above, a few men talked about the need to continue using the skills or 'tools' the programme had given them.

Four men were prepared to envisage ending their current relationship or managing without a relationship in the longer term:

I really think, yes I think I've realised that I'm happier without the relationship, you know, I mean it's sad to say that because I think we all need love and closeness and intimacy and things like that as a human being but for me I think that, you know, that isn't just totally possible with me, so to be happy in my own skin is, is a big thing for me..." (Kevin)

5.21 The Completers

Four of the men interviewed had just completed the STC programme at the time of writing (one further man also completed the group programme but was not interviewed). The experience of this group offers the opportunity for an overview of progress through the programme which is summarised in Box 5.1.

Box 5.1 Case Study: The Completers

The four men who completed the programme in March 2011 range in age from 39 to 50. They have all attended Strength to Change (STC) for at least 18 months. Three out of the four live alone, the other lives with his partner. Of the three who live alone, one has no current partner and the other two have partners but their relationships are not stable. All four men have children but none live with them. Three have children under 18 with whom they have contact. Three of the men are employed and one is unemployed. Two of the men gained qualifications at school, one has vocational qualifications and the other has no formal qualifications. Half the group have reading difficulties. All four men have a history of neglect or abuse as children, they witnessed domestic violence and were bullied. All four have been in a number of relationships characterised by high levels of conflict. One man has been convicted of violent offences, one has been convicted of non-violent offences and one has been cautioned concerning domestic violence. One man has served a custodial sentence for a violent offence. Two men have sought help for mental health problems and one has a history of substance misuse.

Two of the men heard about STC through the marketing campaign and two were directed to the service by professionals they were involved with. Of the four men, three contacted STC of their own volition because they wanted help to deal with their violent behaviour. One man called the STC helpline because it had been made a condition of continued contact with his children. All four men have previously sought professional help regarding their violent behaviour or have attended programmes aimed at addressing their behaviour. None feel that these services have been very helpful.

Over the course of the programme, the motivation of the man who initially attended STC in order to maintain contact with his children has shifted from being dependent on extrinsic factors to intrinsic forms of motivation. All of four men describe the process of change as a gradual one; there is no 'miracle cure'. STC gives them the 'tools' to manage their behaviour but it takes time to learn how to use them. The men identify barriers which have impeded their progress and describe difficulties in getting in touch with their feelings whilst at the same time being able to stay in control of those feelings.

The three men who are not living with their partner or do not have a partner have all come to the conclusion that they may be better off without a relationship at this time; they feel it may be safer and less stressful. Despite these issues, as they near the end of the programme, two men feel confident that they have changed and that what they have learned has become 'second nature' to them. The other two men are more wary and although they do see significant changes in themselves, they have concerns about maintaining those changes. All four men feel that they will need the option of continued support from the programme in the future.

5.22 Chapter 5 Summary Points

- Most of the men interviewed acknowledged the damaging impact of their abusive behaviour on their partners; women described a range of adverse effects on their mental health. The majority of both men and women interviewed described the negative effects of domestic violence on their children. Domestic violence was described as inflicting a range of losses on both men's and women's lives.
- Men attributed their abusive behaviour to a range of causal and precipitating factors including exposure to violence in childhood, an inability to control anger, jealousy and a need to control others and substance misuse, but just under half considered that women also provoked the abuse by their behaviour.
- Men described both intrinsic and extrinsic forms of motivation. Intrinsic forms of motivation related to wanting to change or achieve more control over their behaviour and men appeared to have absorbed the programme's messages about the potential for life changes. Men were also influenced by extrinsic factors such as the threat of losing their partner or access to their children.
- Men appreciated the programme staff's capacity for listening to them, their non-judgemental approach and positive regard. They found them flexible and approachable and it was apparent that project staff had succeeded in creating a climate of therapeutic trust that operated across both the individual and group components of the programme.
- The Women's Worker's informal and accessible approach was valued; women found her emotional and practical support helpful and had benefited from being signposted to other agencies.
- Men were mixed in their views of the calming sessions with some finding them culturally inaccessible while others valued being taught practical techniques. Perceptions of the group programme were consistently positive with men identifying opportunities for learning in the group context and finding that sharing experiences dissolved barriers of shame and stigma.
- Those men interviewed described a gradual process of change in which they assumed more control over their behaviour, learnt to distinguish between their own thoughts and reality, were calmer and more self-aware and aware of others. Women interviewed confirmed the accounts of increased calmness and sensitivity to others' feelings. Men reported using the 'tool box' of skills and techniques they had acquired to control their behaviour on a regular basis in daily life and the majority talked to their partner about what they were doing on the programme.
- Men's ratings of their abusive behaviour dropped across the course of the programme. However, comparison of accounts of police involvement in domestic violence incidents showed that women reported some incidents which men failed to disclose to the researchers, indicating the importance of eliciting partners' accounts.
- Over half the 11 women interviewed reported feeling safer as a consequence of their partner attending STC. For most, this was because they considered that his behaviour had changed but for a small number this feeling of increased safety was attributed to the fact they were no longer living together/nearby or to the information they'd received about safety planning. A few women described feeling more confident as a consequence either of the changes in their partner or the support they'd received themselves.

- A third of men and a quarter of women interviewed reported that the STC programme had had a positive impact on their relationship with their partner. A quarter of both men and women interviewed also identified positive effects for their children who were described as calmer while men were seen as less likely to lose their temper with them. However, a small number of men had recognised they should not be in a relationship either at the present time or in the long-term; where they had partners it was not clear whether their partner shared this view.

Chapter 6: Working with the Wider Community

6.1 Engagement with other Agencies

Project staff had identified the need to build working relationships with other agencies as a key objective. Outreach work was undertaken with local agencies, particularly in the early phase of the project's life, using a range of materials including leaflets and posters. Staff described having established good links with the Drugs Action Team and Housing Services and a monthly meeting takes place with children's services to address child protection issues. Other agencies where the project has developed contacts include Hull DAP, the Police, probation services, community health services and a range of third sector organisations (Women's Aid, NSPCC, Mind, Relate). A link has also been forged with the local prison, which is considering developing support service for offenders who do not have access to support from the probation service and the possibility of developing an STC service based in the prison has been raised.

The project steering group was considered to have been successful in engaging senior managers from a wide range of relevant agencies from an early stage and its approach was described as 'hands-on'. The success of the steering group was attributed by one steering group member to the fact that it was founded on the well-established Domestic Abuse Partnership in Hull. Another steering group member considered that steering group members had been effective in facilitating the flow of information between STC and relevant agencies, particularly the police.

Multiagency engagement with STC, both through the steering group and at the level of work on individual cases, was generally seen as very positive by project staff:

"It links in with all the right agencies and in appropriately, you know, in an appropriate way and they're good links... I feel it flows."

"Partnership working is working really well and that goes for ...if you need to refer someone to another, to another service or you need some advice."

A steering group member noted the importance of strong multi-agency communication when working in a high risk area:

"I could pick up the phone really to somebody from almost every service in Hull that's got an interest in it and they would be able to, willing to and happy to help or contribute in some way and I, that makes, that, that makes it a very secure feeling when you're working in an area as dangerous as this."

At the level of national networks, STC is in the process of acquiring Respect accreditation. It was anticipated that Respect accreditation would allow the service to strengthen their association with CAF/CASS and perhaps undertake contract work for the Family Court on behalf of CAF/CASS; this would be a means of generating income for the service.

STC has developed links through Respect's National Practitioners Network with other perpetrator services across the country and this network offers opportunities to exchange experiences and examples of positive practice.

6.2 The Social Marketing Campaign

Chapter 2 of this report showed that both waves of the social marketing campaign stimulated calls to the Helpline. Staff and steering group members were agreed that the campaigns had played a key role in attracting users to the service and saw certain elements of the campaigns as particularly successful in stimulating demand. In relation to the first campaign in April 2009, the radio adverts and a first-person account by a former perpetrator published in the local newspaper were thought to have had a considerable impact as had the beer mats and posters:

“...the radio ads and the newspaper articles of people's own specific experiences seem to be the biggest triggers... when a man describes what he's been through and how he's turned his life around and things, I think had quite an impact...” “I was quite surprised it meant the people ...I'd spoken to on the helpline and taken their details ...had either heard it on the radio or seen a poster or something somewhere, so it clearly had a beneficial effect.”

Not only had the campaign messages reached potential users of the service, they had also conveyed messages that were consistent with the approach of the service:

“I think for someone to phone up and say I heard this on the radio and actually this, this relates to me and I feel I, like I need to do something about it, is really sort of a good place for someone to start, when coming on to the programme...there's some kind of internal motivation, whether it's guilt or shame, to pick up that phone... the information came across as not coming from an... enforcement point of view and it obviously motivated them to pick the phone up, so it feels like the advertising was fit for purpose...”

This congruence between the marketing messages and the service may be attributable both to using research with local men to inform the campaign (Stanley et al 2009) and to the involvement of the programme manager and other local domestic violence service providers in the design and planning of the campaign from the outset.

The second wave of the social marketing campaign took place during June and July 2010. The campaign emphasised ‘internal segmentation’ with the aim of informing and educating practitioners across a range of local agencies but also involved marketing aimed at the public such as adverts on buses and on the radio. This second wave was viewed by staff as successful in raising professionals’ awareness:

“And I guess the second wave that we've just completed has had more of an impact in a way because we spent most of the money...on mugs and mouse mats...it's on somebody's desk 24/7 and that makes a difference to just seeing a poster up for a week... So that stuff is there, it's in your face, you can't ignore it. And for social workers, again, you know, the response has been really good... And I think that's been, I do think that's been money well spent and quite effective.”

Staff felt that the campaigns had been successful in raising public consciousness and shifting attitudes towards domestic violence more broadly. One member of staff suggested that the campaigns had had the effect of shifting professional attention onto work with perpetrators:

“...for professionals, it's making them take a step back and look at the way they've worked, because one of the biggest things to come out of the whole marketing thing is that a lot of other services are saying ‘actually we constantly work with the victims and the more we work with the victims the

more we create more victims because we're doing nothing about the men, it's time to start working with men and stop having victims'. Which was quite massive considering it was a mindset, you know, to support victims all the time, but we've got judges and Probation Officers ...actually saying... 'we're allowing men to be out there creating more victims for us', so, I think it's definitely opening people's eyes to a different way of working."

A steering group member described using the campaign materials in ongoing training and debate with a range of local professionals, indicating that the impact of the campaign extended beyond those periods when it was delivered in Hull:

"I think it helped to raise awareness massively of the service, and I think it gave quite an impact really as well in terms of how the posters were developed, in terms of the some of the kind of myths around domestic violence ...I think it's helped to, to remove some of those stereotypes, so I think it's had, you know, a positive effect in that way and everywhere you go you see the posters and they always generate discussion and debate between people when we give them out at training events."

Some staff thought that the social marketing campaigns had reached the right audiences but one member of staff thought that campaign materials had not taken account of the low levels of literacy among men who might use the service.

6.3 Other Professionals' Perspectives

In order to establish the extent of local professionals' awareness of the STC service, two small-scale telephone surveys of local professionals were completed in 2009 and 2010. In selecting practitioners to participate in these surveys, the researchers targeted those areas of the city where the social marketing campaign had been concentrated and where rates of domestic violence were known to be high. Practitioners were identified for interview through a range of local contacts including members of the steering group.

Thirty-eight professionals were interviewed in November and December 2009. In total, two-thirds (25 of 38) of practitioners surveyed had heard of the service. Figure 6.1 shows the number of practitioners from each professional group who had heard of STC. Although the number of participants from each professional group was small, it was clear that police officers/ police community safety officers and GPs were the least likely to have heard of the service. This raises some concerns as these are two groups who are likely to have a high level of contact with perpetrators: front-line police officers are likely to be called to domestic violence incidents and GPs have been identified as the professional group male perpetrators of domestic violence are most likely to disclose their abusive behaviour to (Stanley et al 2009). Frontline police officers interviewed suggested that knowledge of domestic violence services was not part of their remit and that such knowledge would reside with specialist domestic violence officers:

"We have domestic violence officers in the Family Protection Unit."

"We only deal with community related problems."

Figure 6.1 Practitioner Survey 1 – extent of awareness of STC by profession

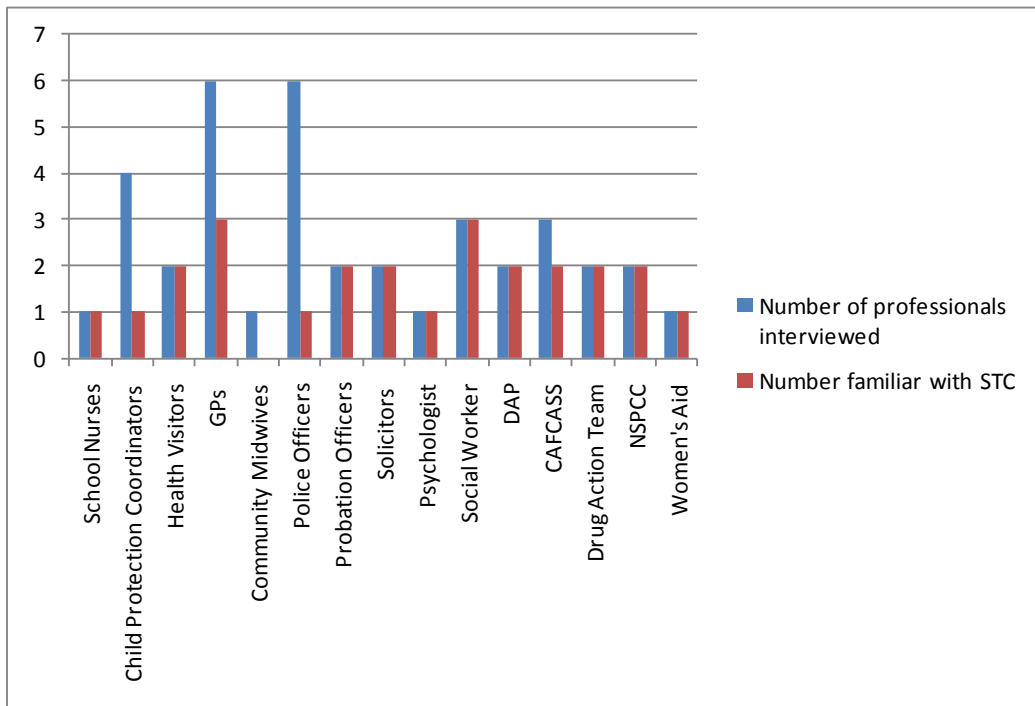
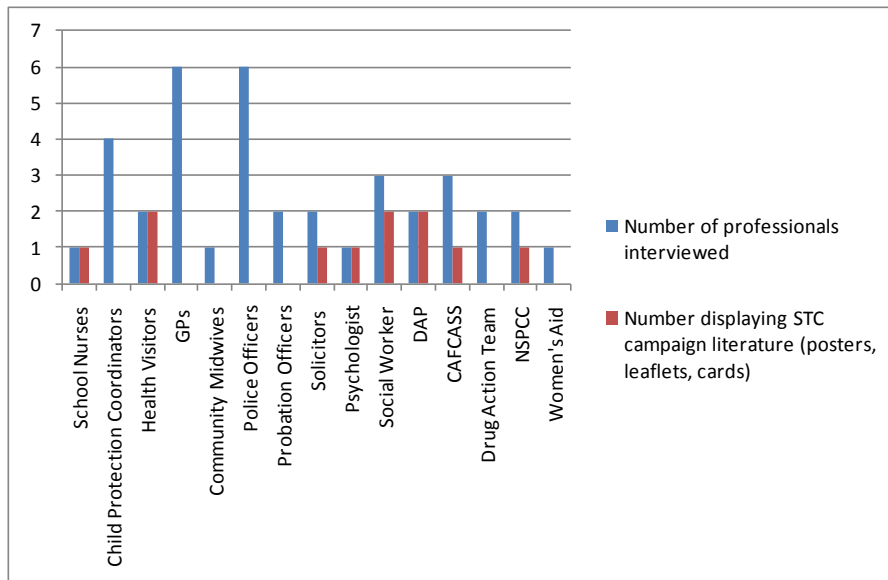


Figure 6.2 shows that only 11 of the 38 participants in this first survey were displaying STC or campaign literature in their workplaces. No police officers/police community safety officers were displaying these materials. Many of those interviewed said that they had seen no literature concerning STC and the general consensus was that more advertising was required for STC to become more widely known. Those who had heard of STC but had no campaign literature on display said they had not been offered it but would be happy to display it.

Figure 6.2 Practitioner Survey 1 – STC and campaign literature displayed in workplace by profession



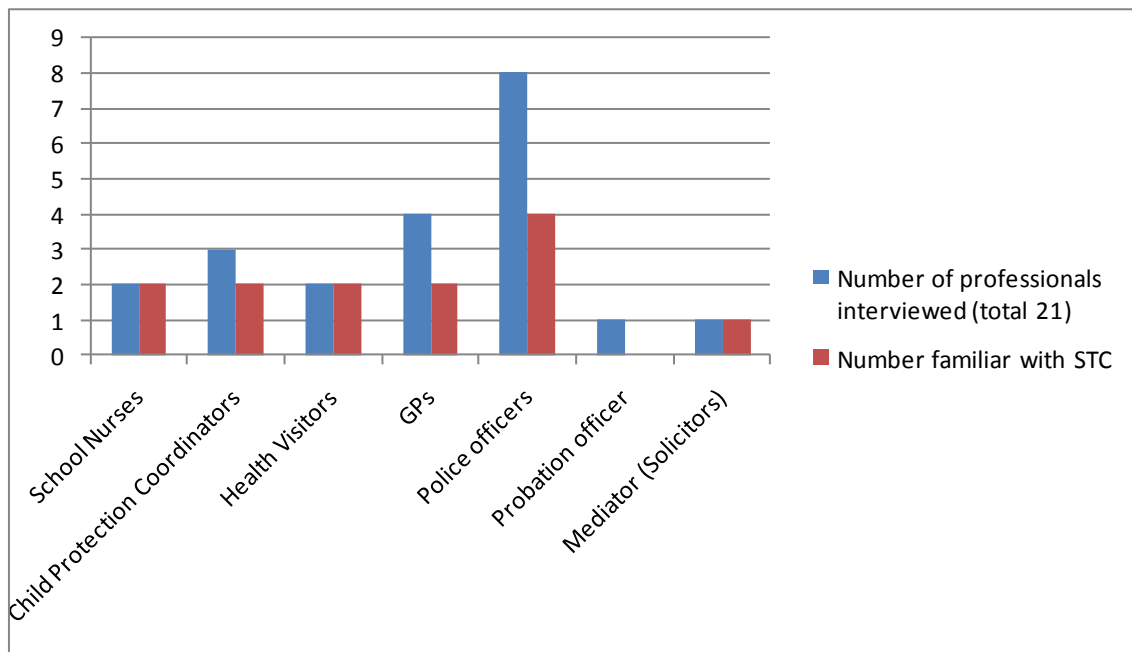
All those participants who had heard of the STC service were also aware that men had to refer themselves to the service. A few professionals saw this as a deterrent to accessing the service and noted that a waiting list could reduce men’s motivation to use the service. They noted that in their experience victims of domestic violence often requested information on help for their partner but that the partners often failed to access support for themselves. However, some professionals saw self-referral as a positive aspect of the service and some commented that STC was filling a gap in provision:

“Before STC...to be honest for those that weren’t convicted there was nowhere really...STC has filled a real gap in services for men.”

(Voluntary sector professional)

These findings were used to inform the second wave of the social marketing campaign in June/July 2010 which included the distribution of a range of marketing materials to local professionals. This second survey included 21 different professionals (since those taking part in the first survey would have been alerted to STC by participation in the survey) who were recruited from the same professional groups and parts of the city as the first set of participants. Figure 5.3 shows levels of familiarity with STC in October 2010 subsequent to the second wave of the social marketing campaign: in common with the first survey, two-thirds (13 of 21) of the professionals surveyed had heard of the service. Although GPs and police officers remained the two groups with the lowest levels of awareness of the STC service, half of those interviewed in each of these professional groups had heard of STC in October 2010; this compares favourably with none in July 2009 and indicates that the second wave of social marketing had had some impact.

Figure 6.3 Practitioner Survey 2 – extent of awareness of STC by profession



Again, those police officers who weren't aware of STC argued that this knowledge was the remit of the specialist domestic violence unit. However, it was notable that in 2010, four front-line police officers were informed about the service.

The numbers of those displaying STC literature in their workplace remained low as was the case in the first survey: six of 21 surveyed were doing so in 2010 compared to 11 or 38 surveyed in 2009. Some of those interviewed did acknowledge that they had seen STC campaign literature in other locations around the city; these included on buses and bus stops, in GPs' surgeries and in newspapers.

Information about the service appears to be gradually disseminating across the city through a variety of channels: two police officers had heard about the service from service users and another two had accessed information about the service from the police's intranet. Two of the three schools child protection coordinators had learnt about the STC service at core group meetings held by social services.

A few of those professionals (a health visitor, a solicitor and a police officer) surveyed in 2010 described themselves as actively directing clients to STC although health visitors interviewed described difficulties in raising the issue of domestic violence with mothers:

"...it can be difficult to find an appropriate moment to ask them about domestic violence because it needs to be when they are alone."

Although two of three schools child protection coordinators were aware of the STC service, they were not displaying any literature about it and had not directed families to the service. School nurses, who encountered high numbers of reports of domestic violence, suggested that they needed training in how to best communicate with families about STC, commenting:

"I'm unsure how I'd go about it. I've got all the leaflets but I don't know what I'd say."

Comments such as this suggest that distributing information about STC may not on its own be sufficient to prompt practitioners to direct clients to use the service. The lack of confidence associated with opening the 'Pandora's box' of domestic violence remains an issue for some practitioners.

6.4 Impact of STC on Local Services

In an order to measure any impact of both the social marketing campaign and the introduction of the STC service on the workload of other local services, systems were established to facilitate the regular collection of data on domestic violence incidents and referrals to other relevant services. Data collected included calls reporting incidents of domestic violence to the police in Hull, monthly referral figures for Relate in Hull and monthly referral figures for the Hull Refuge. It was anticipated that increased levels of awareness of domestic violence evoked by the campaign and the STC service might produce an increase in these figures.

No relevant trends were evident in the figures supplied by Relate and only very small numbers of Relate's service users reported that they had heard of STC; domestic violence is only one reason among many for use of the Relate service. Similarly, figures from Hull Refuge (which changed its approach to monitoring referrals in June 2010 making for some difficulties in identifying trends) gave no indication of any effects. However Refuge staff did note receiving referrals from the STC service.

Police data on reports of domestic violence incidents in the districts targeted by the campaign as well as city-wide statistics were reviewed for the period from January 2008 to Sept 2010 but it was not possible to discern any substantial impact arising from either of the two waves of the social marketing campaign or the start-up of the STC service.

6.5 Chapter 6 Summary Points

- The service has placed considerable emphasis on disseminating information about the service across relevant organisations in the city and a range of outreach events and meetings have been established to facilitate this process.
- Interagency communication on individual cases was considered to have been strengthened by the multi-agency steering group which secured the engagement of senior managers from relevant agencies. The steering group itself was built on a local history of interagency collaboration in the field of domestic violence.
- Staff considered that the social marketing campaign had been successful both in attracting individuals to use the service and in raising awareness of the need to engage with perpetrators across the professional community. They noted that the content of the campaign messages had been congruent with the ethos of the service and considered that this consistency meant that men's motivation at the point of contacting the service was more likely to be appropriate.
- Two-thirds of the two surveys of local practitioners undertaken in 2009 and 2010 had heard of the STC service and those professionals who were aware of the service had absorbed the message about the need for men to self-refer.
- The two professional groups who were least likely to be aware of the service in 2009 were GPs and frontline police officers/police community safety officers. The second marketing campaign in 2010 targeted local professionals and awareness of the service was found to have increased among GPs and frontline police officers/police community safety officers, although these groups remained the two professional groups with the lowest levels of awareness. There was some indication that, although information about the service was disseminating across the city, some practitioners continued to feel anxious and unprepared to ask questions about domestic violence.

Chapter 7: Conclusions and Recommendations

7.1 Conclusions

7.1.1 The STC ethos and approach

The STC service has succeeded in developing an approach which can be characterised as empowering and which facilitates a process of change. Men participating in the programme are treated respectfully and in a non-judgemental manner and describe engaging in a trusting therapeutic relationship with staff where their capacity for change is emphasised. The service's approach avoids a punitive stance while locating responsibility for change with individual participants and it is experienced as flexible and able to respond to individual need.

7.1.2 Changing behaviour

The evaluation has demonstrated that the STC programme has achieved a positive impact on a number of measures. Both domestic violence incidents and other offences reduced while men were on the programme in comparison to the period of two years prior to joining the programme. Most of the women participating in the evaluation identified positive change in their partner's behaviour since he had begun attending STC. Over half those women interviewed reported feeling safer since their partner had been using the service. Men interviewed described a gradual process of change in which they assumed more control over their behaviour, learnt to distinguish between their own thoughts and reality, were calmer and more self-aware and aware of others. Some of the partners interviewed confirmed these accounts of increased calmness and sensitivity to others' feelings.

However, the evaluation has only addressed the first 18 months of the programme's work and, since the first full programme has taken 18 months to complete, the evidence presented here does not encompass any hard outcomes. The emphasis is rather on process issues such as men's engagement with the programme, staff perceptions and men's and their partners' assessments of the programme and of change achieved. In respect of these measures, the STC programme can be described as highly successful.

7.1.3 Men using the service

The service has also been successful in attracting and engaging a cohort of men who are distinguished by high levels of risk factors for domestic violence that include histories of other forms of violence, including weapon use, domestic violence and other criminal convictions, drug use, histories of childhood abuse and neglect. Analysis of data provided by the police on domestic violence incidents suggests that the most serious and persistent offenders may be less likely to proceed beyond assessment although some exceptions to this were found among the men who participated in and completed the group programme. The question of which groups of men are most likely to engage with the programme needs to be explored over a longer period with a view to distinguishing what level of risk the project can most effectively work with. This information could be used to inform initial screening processes.

The majority of men both contacting and using the STC service are in fathering roles, indicating the large numbers of children in the city of Hull who are exposed to domestic violence. Currently, the STC service is not offering a direct service to perpetrators' children but refers them to other local services.

7.1.4 Retaining men in the service

In its first 18 months, the STC programme was successful in maintaining men's involvement over a number of sessions and the largest group of users was those men who had completed five or more individual sessions. A substantial proportion of those who engaged with the programme were therefore receiving a high dosage of the programme.

The programme lost a high proportion of initial callers in the stage between offering men an appointment and undertaking an initial assessment. Attrition at this early point is a common feature of perpetrator programmes but a high number of unmet initial appointments is wasteful of staff time and undertaking some basic screening at the point of initial contact with the service might make for a more effective initial filter at entry point to the service.

It is possible however that those men who fail to attend initial appointments are not ready to embark upon change, but the offer of an initial appointment may act to make these men aware that there is a service available to them. The offer of an initial appointment may be related to later service use and STC should monitor this longitudinally. In addition, face-to-face contact may be perceived as threatening to these men and other means of engaging these men should be explored. Further research could usefully explore whether alternative modes of intervention could be developed for particular sub-groups of men. For instance, drop-in, on-line or telephone support may be more appropriate for those men who cannot sustain face-to-face contact.

At present, the Helpline is staffed by the Administrator who has recently undertaken training alongside other staff. The Helpline may represent the first attempt some men have ever made to address their domestic violence and frequently such contact will be made at a time of crisis. It is therefore essential that Helpline staff are trained and sufficiently experienced to respond effectively to all types of callers who may contact the service.

The programme has been less successful in transitioning men to the group programme. This may be a consequence of the limited staff resources available to the service. One means of addressing this issue might be to increase the intensity of individual sessions, offering two individual sessions a week so that men complete this stage of the programme more speedily and the period between commencing the individual sessions and graduating to the group programme is reduced. In addition the group showed signs of attrition and this may also benefit from a more intensive programme of two sessions per week, which is consistent with the therapeutic literature on what works in reducing reoffending. However, such changes in programme intensity would have implications for staffing.

7.1.5 Key elements of the service

The introduction of calming sessions represents a constructive approach to managing what is, in effect, a waiting list for the service. Men's evaluations of these sessions suggest that they are most likely to be experienced as useful when they are presented as a collection of techniques or tools for controlling behaviour. Those

aspects of the calming sessions which are perceived as 'hippyish' and therefore inimical to the local working class culture should be de-emphasised.

The group programme was generally experienced very positively by participants and, in line with the service's increasing use of more experienced participants to provide encouragement and support to more recent service users, group members are being used to mentor and encourage those individuals who are wary about the transition from the individual to the group programme. Men appeared to be using the skills and techniques acquired on the programme in a range of settings outside the programme. However, those nearing the completion of the programme emphasised their need for follow-up support and this has been identified as a key component of perpetrator programmes if change is to be embedded and sustained (Sartin et al 2006). Programme staff have acknowledged and responded to this need and resources should be made available to ensure that the Strength to Strength follow-up service is supported and maintained.

7.1.6 What makes for engagement with the STC service

The evaluation identified both extrinsic and intrinsic sources of motivation for men participating on the programme. Extrinsic sources of motivation such as access to children, fear of losing a partner or social status appeared significant at the outset of the programme and there was evidence that men with these types of motivation were more likely to engage with the programme for longer. This evaluation did not find that an instrumental approach to the programme at the outset made for low levels of engagement.

The numbers of men interviewed towards the later stages of the programme were small but there was some evidence that their motivation had shifted to embrace more intrinsic factors. Men looked to being happier or better people and identified control of their behaviour as a goal.

When the characteristics of men who engaged with the programme are examined, data provided by the police on domestic violence incidents suggest that the most serious and persistent offenders may be least likely to proceed beyond initial assessment although some exceptions to this were found among the men participating in the group programme.

Additionally, those men who engaged with the programme were more likely to have had contact with their GP in the previous year. They were also more likely to have been in care as children. This suggests that men who come to STC with a history of using services may be better prepared to engage with the programme.

7.1.7 Partners' experience of the STC service

Women using the partners' support service valued the accessible and informal approach of the Women's Worker (known as the Specialist Family Practitioner) and appeared to have been signposted to a range of relevant services as a result. Some of those women using the service appeared to have high levels of need and might benefit from more specialised forms of support.

In those cases where men had reached the conclusion that control of their abusive behaviour would be more likely to be maintained if they were not in a relationship, their partners might benefit from interventions designed to address their expectations in this respect.

7.1.8 Staffing the service

The reliance on co-facilitators seconded to the STC service from other organisations has placed pressure on the core staff group and limits the service's capacity to change and develop. It has also meant that the service is heavily dependent on the very high levels of input and commitment of some key members of staff. This can create vulnerabilities for the service in the longer term and may raise questions about whether the service can continue to work with a group that includes a substantial proportion of men characterised by high levels of risk factors.

7.1.9 Social marketing campaign

The pattern of calls to the STC Helpline provides evidence that the social marketing campaign has been influential in attracting men to the service. The congruence between the campaign messages and the programme's ethos was considered to have been helpful in securing men's engagement with the programme on positive terms.

The social marketing campaign had also contributed to raising awareness of the service amongst health and social care professionals who represent a main route through which men are directed to the service. Those groups of professionals least likely to be aware of the service were GPs and front-line police officers although the second wave of the social marketing campaign appeared to make some impact on these groups. However, some front-line practitioners in the city remain wary of engaging with the issue of domestic violence.

7.1.10 Engaging other agencies

Communication and collaboration with other agencies appear to have been assisted by the project's multi-agency steering group which in turn benefited from pre-existing collaborative structures in the field of domestic violence. The project has also prioritised work aimed at developing robust interagency relationships.

7.2 Recommendations

7.2.1 Programme intensity

Programme intensity is related to successful outcomes and the longer a programme continues, the greater the chance of losing participants. While a substantial intervention is appropriate and necessary for the high risk group of men the programme is working with, delivering the same number of sessions over a shorter period might have the effect of reducing drop-out and ensuring that more men graduate to and complete the group programme. A more intensive structure for both the individual and group programmes is recommended although the implications for staffing would need to be acknowledged and managed.

7.2.2 Screening for programme suitability

Some of the findings of this evaluation could be used to inform initial screening procedures with the aim of ensuring that the programme is made available to those individuals most likely to make use of it. Key characteristics of men who engaged with the programme for longer were that they were more likely to be motivated by extrinsic factors at the outset and were less likely to be living with their partner.

Those men with the very highest levels of criminal behaviour were less likely to proceed from assessment to engagement with the programme.

Options for strengthening STC's capacity to distinguish those men most likely to make extended use of the programme include ensuring that trained and skilled staff are operating the Helpline and/or introducing a screening tool at the point where men make direct contact with Helpline staff.

Further research could usefully explore whether some sub-groups of men – such as those with the most frequent and serious histories of offending – might benefit from alternative modes of engagement and intervention.

7.2.3 Staffing

While the use of seconded facilitators is considered to have enabled the exchange of skills and knowledge between agencies, this approach to staffing the service has made for heavy demands on a small staff team and has contributed to slow throughput through the programme. Although the current climate is one where other agencies are currently experiencing severe resource shortfalls, it seems relevant to note that STC is working with a sizeable proportion of families who are also engaged with children's safeguarding services and that other similar projects in England are directly funded by children's services (see Price et al 2009).

7.2.4 Information collection and management

The need to strengthen the project's data collection and management systems has been identified and this will be particularly necessary once the evaluation team is no longer making regular demands for information. In particular, data on women's use of the partners' support service and the monitoring information they provide in respect of their partners' progress needs to be regularly and formally recorded.

In order that some hard evidence can be collected in respect of recidivism, it is recommended that the programme continues to be provided with police data on participants' criminal offences and should seek men's agreement to collect and analyse such information for two years post participation in STC.

7.3 Future of the Project

Strength to Change has shown that an innovative and flexible approach which seeks to empower men to achieve change while supporting women can be successful in shifting attitudes and behaviour in a community where patterns of male violence and traditional patriarchal attitudes are deeply embedded (see Stanley et al 2009). Staff attitudes and the therapeutic stance of the programme emerge as key in this process.

Issues such as programme intensity, initial screening and project staffing have been identified as areas where the programme can refine its work; continuing to monitor throughput and performance on an ongoing basis will provide information to feed into this process of development.

The success of the STC project to date can be attributed to the high level of research and planning which informed its inception, multiagency support at the local level and the commitment of the staff team. These elements are vital to the service's work and they need to be sustained in the future.

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Appendix : Evaluation Methodology

The evaluation was carried out over a period of two years between March 2009 and March 2011. This allowed the research team to observe the early stages of project start-up (STC became operational in April 2009), to follow the first cohort of men attending the group programme through to completion and to collect and analyse 18 months' worth of throughput data.

The evaluation included a range of approaches to data collection and analysis which were as follows:

1. Monitoring STC process and development

This included a number of activities designed in collaboration with STC staff and others. In addition to drawing on data collected by the service and the police, research team members observed project activities such as calming sessions and maintained ongoing contact with STC staff. Key data collected and analysed included:

- Collection and analysis of statistical data on calls to the STC Helpline over the first 18 months. Information recorded by Helpline staff included the identity of the caller and the reason for calling. For perpetrators and victims calling the Helpline, additional questions were asked regarding relationship and parental status, as well as domestic violence duration, intensity and frequency
- Service user attendance and throughput for the first 18 months – data collected by STC staff was used to develop a picture of the number of sessions attended by men together with progress through the service and attrition patterns
- Police data on domestic violence incidents and criminal offences covering the period for two years prior to starting the programme and while men were attending STC was supplied to the researchers for analysis. Permission for these data to be accessed was integral to men's initial contract with the service
- Project history – an on-going record of project development covering the first 18 months of the STC's operations was compiled with the assistance of project staff.

2. Analysis of Service User and Partner Characteristics

An easy-to-use data collection tool was designed for STC staff to record core data on STC service users. This captured information on the history, service use, social and family context, patterns of abuse and risks for all men and their partners using the service. STC staff recorded this data for 32 men and 11 women using the service. These data were coded and analysed statistically using SPSS and MANOVA analysis of variance was applied.

3. Interviews with Men and their Partners Using the Service

Forty-seven in-depth interviews were completed with 21 men and 13 partners of men who volunteered to be interviewed. The original aim was to interview men at the

outset of the programme, at completion of the individual programme and at the point when they were close to completing the group programme, but since transition to the group programme did not occur for many men while others were inaccessible to interview, only six men were interviewed more than once (2 men were interviewed twice and 4 men were interviewed on 3 occasions). Although numerous attempts were made to contact them, it was not possible to secure interviews with any men who chose not to use the service or had discontinued use of the service.

Ten of the 13 women were interviewed once and three were interviewed twice, once towards the beginning and once towards the end of the programme. Seven of the women interviewed were the partners of men who were also interviewed and care was taken to ensure that the confidentiality and safety of both partners was protected throughout the research process.

Semi-structured interview schedules were used for all interviews which were recorded and transcribed. Most men's interviews were conducted face-to-face although some were telephone interviews; all women were interviewed by telephone. Informed consent procedures were adopted and all interviewees have been anonymised. The transcriptions were coded and analysed with the assistance of NVivo, a software package that assists storage and sorting of qualitative data.

4. Interviews with STC staff and steering group members

The views of all seven project staff and three representatives of the project's steering group were captured through a series of semi-structured interviews undertaken in 2010-2011. These interviews covered facilitators and barriers encountered by the service, the process of implementation, the service's achievements and future directions. Interviews were recorded, transcribed and analysed using NVivo.

5. Local Impact Data

Two telephone surveys of local professionals were undertaken in 2009 and 2010 with the aims of establishing the impact of the two waves of the social marketing campaign and examining local practitioners' awareness of the service. The first survey following the social marketing campaign in April/May 2009 involved 38 short telephone interviews with a wide range of professionals in Hull. This was replicated with a similarly constituted but different group of 21 local practitioners subsequent to the second social marketing campaign which took place in June/July 2010. Data from the telephone survey were analysed manually.

Secondary data were collected from local services – the police, Relate and Hull Refuge – with a view to discovering whether the development of the STC service had any discernible impact on the workload of these organisations.

6. Ethical Approval

Ethical approval for the research was provided by the Faculty of Health Ethics Committee at the University of Central Lancashire and the study was subject to local NHS research governance procedures.