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Evaluating group-based programmes for individuals who use violence and abuse in their intimate relationships

Chapter 45

Evaluating group based programmes for individuals who use violence and abuse in their intimate relationships

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ABSTRACT

This chapter will explore what we have learnt about working with those who use violence and abuse against their current or former intimate partner, with a particular focus on group based programmes, and their evaluation. Drawing upon current evidence about the effectiveness of such programmes, the chapter will explore the underpinning research methods and how our understanding of whether group based programmes are effective is inextricably linked to the design of studies and the methodological choices made. These are framed, in turn, by our broader understanding of what causes and sustains such behaviour. While the evidence to date questions whether group based programmes are effective, this may be as much about the quality of research to date. There is some evidence that programmes do work for some individuals in some circumstances, but programmes are often attempting to work with too broad a range of characteristics and needs, including those who are mandated to attend by the criminal justice system alongside those who are voluntarily seeking help. Additionally, we need to better understand the role of group facilitators versus programme content in bringing about change. The chapter concludes by highlighting areas for consideration in future research studies.

Introduction

Many national policies and local strategies addressing domestic violence and abuse typically consist of three complementary strands: firstly, to introduce measures to prevent domestic violence occurring in the first instance or to limit its reoccurrence; secondly, where domestic violence does occur, to ensure that victims receive prompt and comprehensive support; and finally, to ensure that those who use violence and abuse against their current or former partner are held to account for their behaviour (Devaney and Lazenbatt, 2016). However, one of the challenges for such an objective is that "the problem targeted by preventive interventions are often complex, embedded in multiple levels of social and environmental context, and occur across the developmental lifespan" (Hassmiller-Lich et al. 2013, p. 279). It is within this context that research can assist in providing a bridge between what we seek to

achieve and what we could do. As with many social interventions, the goal and the intervention are framed by wider conceptualisations of what causes and sustains the behaviour we are seeking to change, and this requires unpacking and examination within the process of evaluation.

This chapter will explore these issues by focusing on what we have learnt about working with those who use violence and abuse against their intimate partner, with a particular focus on group based programmes, and their evaluation. Drawing upon the current evidence about the effectiveness of such programmes, the chapter will explore the underpinning research methods and how our current understanding of whether group based programmes are effective is inextricably linked to the design of studies and the methodological choices made, which in turn are framed by our broader understanding of what causes someone, typically men, to behave in an abusive manner towards those they profess to care about, most usually women and children.

Within the professional and research communities the language used to refer to those who use violence and abuse is varied – including offender (as some of the behaviour is clearly unlawful and constitutes a crime), perpetrator (as much of the behaviour of concern is directed by one individual against another) and batterer (although this term is becoming less popular as we now recognise the many varied ways that individuals can control and terrorise their adult and child victims without needing to use much actual physical violence). In this chapter I will use the term *individual who uses violence and abuse* as a more encompassing and also neutral term. This is not to lessen the concern for victims or to minimise the impact of violence and abuse on their lives, but is part of a wider debate about whether a focus on holding individuals to account, primarily through a criminal justice focused response, is actually appropriate and effective. As Goodmark (2018) has noted, the framing of domestic violence within a criminal justice discourse has certainly brought some benefits to victims, but it has also had a number of unintended consequences for adult and child victims, such as help being predicated on keeping them safe, rather than meeting their holistic needs, of which safety is just one. This framing has resulted in significant funds being expended on trying to make the criminal justice system more efficient and effective, with little evidence that this serves the needs of victims well, and reducing the funding available for other support services.

The typical criminal justice framing also tends to homogenise individuals into a singular group, rather than recognising that individuals who use domestic violence engage in a range of different behaviours, and their motivations for doing so are often varied (Johnson, 2010). As noted elsewhere, the vast majority of those who use violence and abuse are not arrested and never convicted, let alone sentenced and mandated to attend a programme for rehabilitation (Devaney, 2014; Goodmark, 2018). An alternative view of accountability is that men should be supported and encouraged to take personal responsibility for their behaviour, and to hold themselves to account for how they have behaved in the past and will behave in the future, rather than seeking to force or shame them into change (Camp, 2018; Kaplenko et al., 2018). This perspective is rooted in a belief that personal change is more likely to be achieved and sustained when individuals make their own free choice rather than being sanctioned or coerced into change. This of course is problematic in situations where the behaviour of one individual can have such drastic consequences for others, but as we have seen in other fields, such as substance misuse, there can be a much wider benefit in thinking about how we intervene in ways which are ultimately more likely to be effective (Henninger and Sung, 2014). However, some individuals may not be willing or able to change their behaviours, regardless of the quality of supports and interventions available. In these instances, external controls to try and manage the risk that individuals pose to others need to be implemented, particularly for those who pose the greatest risks.

The above is rooted in a belief that, as Gadd and Corr (2017) note, professionals need to support individuals to imagine a different, and better future for themselves. This involves acknowledging and taking responsibility for what they have done, and the impact, but also allows them to move beyond being defined by their past behaviour. However, such an approach must be rooted in ways of working by professionals which are likely to achieve this outcome for both the individual who has used violence in their intimate relationships, as well as their former, current and future partners.

This debate is at the heart of one type of intervention aimed at those who are domestically violent – group based programmes. The remainder of this chapter will now focus on what we know about group based programmes for individuals who use violence in their intimate relationships, the evidence about the effectiveness of such interventions, and how this evidence has been shaped by the underlying methods used in the research.

Discussion and Analysis

History of the development of group based programmes for individuals

The first group-based programme for domestically violent men, Emerge, was created in Quincy, Massachusetts, in 1977 (Adams, 1988). Such programmes were not developed as an alternative to criminal justice interventions, but rather as an experiment to explore whether men could be engaged in a process of change, and symbolically, to highlight the importance of men being accountable for their behaviour and its impact on others (Kelly and Westmarland, 2015). The programmes were premised on the belief that violence in intimate relationships is embedded in wider structural inequalities within society. Behind men's abusive behaviour lie their need for power and control in their intimate relationships, that is, getting their own way and being in charge. These beliefs and behaviours are underpinned by a set of ideas about how the world should operate, creating high expectations for the behaviour of one's partner. These expectations are imposed on others, and when they are not met can create extreme frustration and resultant violence. As Gondolf (2012, p.21) notes: "Men have plenty of reinforcement for these expectations, and aggression to enact them. They learn then from the examples of their fathers, their peers, and television and movie characters, as well as from watching or playing sports, and military experience."

This is further reinforced by societal structures that preference men more widely in society. Therefore, responding to and intervening effectively with domestic violence and abuse requires change at both an individual and societal level (Laing et al., 2013).

In the mid to late 1980s, a second wave of intervention programmes emerged to address the increasing demand for intervention services and the need to develop co-ordinated community responses, of which group based programmes were one important element. Duluth's Domestic Abuse Intervention Project was developed in 1981 in Duluth, Minnesota, as a means to (a) change the privacy and secrecy which often surrounded domestic violence, and instead make it public, (b) make communities safer for victims and (c) hold individuals accountable for their behaviour. The Duluth model pioneered the Coordinated Community Responses (CCR) system that prioritised victim safety and advanced ideas related to that approach. The basic premise of the CCR is to bring together the different parts of the system (i.e. police, courts, victim support services, housing, social services) in order to address issues of domestic violence. The Duluth Model (Pence and Paymar, 1993) is regarded as a hybrid of feminist and cognitive behavioural principles in that accountability for one's actions, challenging and changing beliefs/attitudes, and education are central to changing the violent behaviour of men who abuse their partners. The model is grounded in the belief that arrest

and prosecution coupled with court-mandated intervention, primarily in the form of group work, is crucial for change. As the Duluth model views domestic violence as learned behaviour, treating psychological problems and/or attempting to change personalities is not considered part of the process. Group facilitators typically avoid psychiatric-type diagnoses and do not consider their work to be "therapy." Instead, facilitated group work between peers is viewed as the best means for individuals to re-learn gender sensitive, non-violent behaviours (Lehmann and Simmons, 2009).

Critical to the Duluth model is the belief that male-only groups are the safest and most ethical means of helping men take responsibility for addressing and changing their behaviours. The groups typically take place over a period of 6 months (or more) in weekly 1½ to 2 hour group sessions. The curriculum content and delivery is a manualised one. A core premise of this approach is the belief that domestic violence is a learned pattern of intimidation, coercive control, and socially sanctioned behaviour against women. Thus, the work of groups is to re-educate participants in a structured manner by challenging individual's (a) sense of gendered entitlement and misogynist attitudes towards women, and (b) their minimization and denial of abusive behaviour, and challenging each man to take responsibility and to be fully accountable for his behaviour. As part of the Duluth approach participants sign a release-of-information form and a programme contract with the understanding that acts of violence and breach of court orders (i.e. for legally mandated individuals) will be reported to the court, and that noncompliance with programme rules will likely result in suspension from the group. In this model of intervention, those who participate on a voluntary non-mandated basis are treated in the same manner as those who are court-mandated.

While the majority of intervention programmes base much of their curricula and policies on the feminist cognitive behavioural principles outlined in the Duluth model, a few alternatives exist. Of those developed in the last two decades, cognitive behavioural therapy (CBT) in the form of therapeutically orientated men's groups is the most prominent (Murphy and Eckhardt, 2005). In contrast to the Duluth model, a CBT approach conceptualises domestic violence as a consequence of problems with the person's thoughts, assumptions, beliefs, and behaviours (Lehmann and Simmons, 2009). The underlying idea of those operating from a CBT perspective is that violence is used because it is functional for the person using it. That is, individuals use violence against their partner to reduce inner tension, to achieve victim compliance, to end an uncomfortable situation, and/or to give the themselves a feeling of

power and control over a situation. Therefore, CBT approaches to intervention focus on behavioural skill building/role playing with the intent of reducing anger, conflict management, and increasing positive interaction (such as active listening and/or nonviolent assertiveness). A range of CBT informed group based programmes have been developed and evaluated, such as Acceptance and Commitment Therapy (Zarling, Bannon and Berta, 2019) and Dialetical Behaviour Therapy (Graham-Evans and Bates, 2020). However, Babcock et al. (2004 p. 1026) observe that:

> "Most modern cognitive-behavioural groups also usually address perpetrator attitudes and values regarding women and the use of violence toward women. To the extent that CBT groups address patriarchal attitudes, and Duluth model groups address the learned and reinforced aspects of violence, any distinction between CBT and Duluth model groups becomes increasingly unclear."

Over the past two decades there has been a proliferation of group-based programmes for domestically violent individuals, including those in same sex relationships, and women who are domestically violent within heterosexual relationships (Devaney and Lazenbatt, 2016). A recurring finding from reviews of studies of the effectiveness of programmes is that they are often seeking to accommodate a diverse group of participants. While in the US in particular, groups have been established for females who have used abuse within their intimate same sex and different sex relationships, the evidence of effectiveness is very limited due to a lack of published research (Babcock et al., 2016). At the most basic level, most groups are single gender in terms of participants, however this might include individuals who have been violent and abusive within same sex and different sex relationships. While working with perpetrators from same sex relationships in a group setting is believed to be appropriate, there is a concern over whether involving gay or lesbian individuals in groups with heterosexual participants runs the risk of creating additional dynamics due to widespread homophobia in society (Hamel, 2014).

In one of the few articles exploring work with lesbian perpetrators, Coleman (2003) argues that it is essential that the professionals involved in facilitating this work are knowledgeable about lesbian issues, and practice lesbian/gay affirmative treatment. From such a perspective, homosexuality and a lesbian lifestyle are healthy and normal cultural variations. Professionals must be knowledgeable about lesbian identity development and the impact of homophobia and heterosexism on lesbians. When working with lesbians of colour, the impact of racism

and the ways in which racism can compound experiences of homophobia and heterosexism need additional consideration.

The use of group based programmes is now common internationally (for example, see Lilley-Walker et al., 2018; McCloskey et al., 2016; Niaz and Tariq, 2017; Santoveña and da Silva, 2016). Programmes all have a similar set of underlying principles of which the primary goal is to increase victim safety. As noted by Lilley-Walker et al. (2018) programmes vary considerably, not just in philosophical orientation but also in format, duration, approach and who is involved. There is a tension between whether programmes should be more orientated towards rehabilitation efforts or alternatively holding individuals to account for their behaviour, drawing some programmes more in one direction than the other (Graham-Kevan and Bates, 2020). Many programmes work with individuals who are in denial about their abusive behaviour, and there is a debate about whether acceptance of responsibility should be a precursor for attendance, or part of the process of change that programmes seek to bring about (Moore, 2009; Tew, 2016). On the whole programmes, for the most part, still draw upon a gender-based, cognitive behavioural approach to inform their content and mode of delivery (Maiuro and Eberle, 2008). As Gondolf (2012, p. 14) notes "the fact that programmes have aspects of both treatment and education, and of both accountability and punishment, make them an unwieldy enterprise."

However, there does appear to be a consensus around some core objectives of programmes, which are to:

- help individuals to stop being violent and abusive towards former, current and future partners;
- help individuals to learn how to relate to their partners in a respectful and equal way;
- show individuals non-abusive ways of dealing with difficulties in their relationships and cope with their anger; and,
- keep their current, past or future partner safer from further violent and abusive behaviour.

One key distinction is that some individuals are externally mandated to attend the programme, for example by a court or child protection services. In such cases it is to be expected that some individuals may not acknowledge their need to attend or change. In contrast some programmes are designed for individuals who self-refer on the basis of

recognising that they need help to change. Of course in practice these two groups, the mandated and non-mandated, may not be as distinct as presented here, but such a distinction reflects an important dynamic that underpins the delivery of and engagement with the intervention.

Importantly, many commentators and activists in specific communities have proposed that perpetration and justification of, and explanations for domestic violence, varies significantly between different ethnic or cultural groups (Laing et al., 2013; Debbonaire, 2015). They often then conclude from this that interventions should ideally be specific to or contain specific understanding for individual cultural or ethnic groups. To date though, scant research examines the difference in effectiveness of programmes between different racial and ethnic minority groups (Babcock et al., 2016). However, such an approach runs the risk of conceptualising identity of an ethnic group or culture as singular and fixed, and that from a practical point of view it is unlikely that specific programmes dealing with specific groups is financially feasible. Rather than establish separate programmes for individuals from ethnic minorities, it is proposed that groups are inclusive, with active attention given to both explicit barriers (such as language) and implicit barriers (such as racial bias of the facilitators) (Debbonaire, 2015).

This brief history of the development of domestic violence group based programmes is important in thinking about how we can build a body of evidence about what programmes or elements of an intervention might work for which individuals and in what circumstances. At first look, group based programmes may appear more similar than dissimilar, but the underpinning theory of change both informs and shapes the basis on which individuals attend, the nature of programme content and the process of the group. As such, the theory of change is central to how we might understand what change we are expecting to see, and how this might be gauged (Moran, 2011; Graham-Kevan and Bates, 2020). Additionally, it can underpin the methods chosen and the conclusions drawn in evaluations of such programmes.

Evidence of the effectiveness of group based programmes
The effectiveness of group based programmes for individuals who are domestically violent has been debated for years with little clear research evidence that such programmes work (Babcock et al., 2016). At best, it is argued that such programmes may have significant but very small effects, with Babcock et al. (2004) indicating that someone in such a programme

is only 5% less likely to perpetrate physical aggression toward a female partner than a man who has only been arrested and sanctioned.

As with the evaluation of many social interventions there is a need to unpack such findings, to clarify whether the evidence of lack of effectiveness is robust, and a reflection of the actual utility of the intervention under investigation, or possibly an artefact of the quality of the research to date. As noted by Eckhardt et al. (2013, p. 225) "Interventions for perpetrators show equivocal results regarding their ability to lower the risk of intimate partner violence, in part because of widespread methodological flaws".

Kelly and Westmarland (2015) reviewed 49 published studies of programmes designed for individuals who use violence and abusive behaviour in their intimate relationships, and found that there have been two 'generations' of studies. 'First generation' studies concentrated on behavioural responses to interventions with success defined as a reduction in the frequency and severity of violence measured by further criminal justice convictions and/or the self-reports of the male group participants. Whilst these studies demonstrated that those who completed programmes were less likely to re-offend in the following 12 months, both in the US and the UK, the limitations of the measures of success resulted in a strong methodological critique. Studies using women's reports as an outcome measure found significant disparities in the assessment of change reported by male group participants compared to their female partners (Kelly and Westmarland, 2015). 'Second generation' studies took one of two routes to address these shortcomings: an experimental research design that randomly assigned group participants to either intervention or non-intervention conditions; or a systemic, multi-site evaluation of established programmes (Kelly and Westmarland, 2015).

Eckhardt et al. (2013) found 20 studies that were deemed adequate for their review of the effectiveness of programmes for domestically violent men - 14 of those studies were Duluth-type programs, 4 were CBT-type programs with a therapeutic focus, and 2 with other foci, including a culturally focused CBT group for African American males. To be included in the review, the study had to have (a) an intervention for perpetrators, (b) one or more comparisons groups, (c) a measure of recidivism, and (d) to have been published since 1990. Nine of the 20 programs showed significant reductions in partner aggression, but of the 6 studies that had a no treatment control comparison, there were no differences in the recidivism rates and 2 of these 6 studies were Duluth-type programs. Eckhardt et al. indicated

that quasi-experimental groups are more likely to show change, but as the methodological rigour of a study increased, the likelihood of obtaining significant effects decreased.

In a review of 60 published and unpublished evaluations relating to domestic violence programmes for men across 12 European countries, involving 7,212 participants, Lilley-Walker et al. (2018) identified a range of evaluation approaches to the study of the outcomes of such programmes. Only two adopted a randomised controlled trial design, one conducted in a prison setting in Spain with 36 male prisoners convicted for domestic violence–related crimes, and one in a substance misuse clinic in the Netherlands evaluating an integrated programme for substance misuse and partner violence. Of the remaining studies, 14 employed various quasi-experimental designs, comparing intervention outcomes between either different sites, different settings, different interventions, different cohorts of men, or different offender populations.

Experimental designs are often presented as the most robust in evaluation research, and have in the main found limited effect for domestic violence group based programmes. Smedslund et al. (2011) undertook a Cochrane systematic review of randomised controlled trials that evaluated the effectiveness of cognitive behavioural therapy for men who had physically abused their female partner and included a measure of the impact of the intervention on violence. Their review extended from 1950 –2010. Only six trials, all from the US, involving 2,343 participants, were deemed of sufficient rigour to be included. The authors found that, at best, group-based programmes work for some men who engaged in a programme, in some circumstances, some of the time, but for whom, how and when was still very unclear. Overall they concluded that there were still too few randomised controlled trials to draw conclusions about the effectiveness of cognitive behaviour therapy for men who use violence and abuse within their intimate relationships. More recently, Nesset et al. (2019) undertook a follow up to the Smedlund et al (2011) review, looking at all relevant studies published between January 2010 and February 2018. Nesset et al. (2019) identified six new studies that met the inclusion criteria: four randomized controlled trials (three from the US and one from Norway) and two nonrandomized trials (from Sweden and Spain) involving 1,585 men. Three of the randomised controlled trials found a reduction in intimate partner violence after treatment. The fourth randomised trial found that a subsample of responding partners reported a reduction in violence but no changes in the men's self-reported violence after treatment. No effect could be detected in the two nonrandomised studies. Analysis of risk of bias revealed mixed results, indicating both strengths and weaknesses within and across the

included studies. They concluded that there is still insufficient evidence to confirm that group based CBT for men engaged in intimate partner violence has a positive effect. They also restated the conclusion by Smedlund and colleagues (2011) that future research should focus on randomised controlled studies, and that such studies need to distinguish between convicted and non-convicted populations where violent behaviour is the primary outcome.

A limitation of Cochrane and other forms of systematic reviews is that they are often focused on data from particular types of studies and then only if these studies have been published. The ability to conduct randomized control trials in the criminal justice system is hindered by a number of implementation challenges. The ethics of such studies – leaving women and children outside potential support for the sake of study design, and the fact that professionals may refuse to implement them 'by the book' raises critical questions about the appropriateness and fidelity of trying to undertake traditional 'gold standard' evaluations (Kelly and Westmarland, 2015). The pivotal element are the challenges in achieving a random assignment of subjects when so many opt-out of a study, practitioners (such as judges) over-ride the assignment of individuals between intervention and comparison groups, and agencies oppose or resist assignment (Gondolf, 2012). In addition, similar to other experimental studies, they can suffer from the effects of sub-groups, insufficient monitoring of the fidelity of the intervention, compensating treatments in the control group, intention-to-treat versus treatment-received effects, simplistic outcome measures, and low or biased follow up response (Gondolf, 2012). Such threats to internal validity can lead to experimental designs being seen more as a 'bronze standard' rather than the treasured gold (Berk, 2005, p.416). Gondolf (2012), a proponent of group-based programmes, is less pessimistic, arguing that programmes do work in some instances. He has arrived at this conclusion based upon his own research and a review of some of the same studies in the Smedslund et al. (2011) review that meet at least a 'bronze' standard of research quality. Gondolf subscribes to the view that those who use violence and abuse within their intimate relationships are a heterogeneous group, and as such individuals are likely to be differentially responsive to treatment as they have both differing patterns of behaviour and motivations for their behaviour (Emery, 2011). Accordingly, future research might better emphasize and investigate what components of particular programmes are likely to work for particular individuals, and for certain groups of individuals.

A further criticism is the implicit presumption that programmes can be studied independent of their context, when, in fact, they are frequently delivered as part of co-ordinated local

responses (Kelly and Westmarland, 2015). The alternative quasi-experimental design allows for consideration of such contextual factors. The most methodologically rigorous study to date is Gondolf's (2002) multi-site evaluation, which found that programmes situated within a co-ordinated community response can improve the safety of the majority of women. This study also found that data gathered more than a year after completion yields few new findings.

In what they call a 'third generation' evaluation, Kelly and Westmarland (2015) have studied domestic violence perpetrator programmes for men in England, Scotland and Wales. The authors identified six key measures by which such programmes should be measured:

1. An improved relationship between the programme participants and their current or previous partner underpinned by respect and effective communication.
2. Expanded 'space for action' for women which restores their voice and ability to make choices, whilst improving their well-being.
3. Safety and freedom from violence and abuse for women and children.
4. Safe, positive and shared parenting.
5. Enhanced awareness of self and others for men, including an understanding of the impact that domestic violence has had on their partner and children.
6. For children, safer, healthier childhoods in which they feel heard and cared about.

The authors report that for the majority of participants (both men and their female partners) participation in the programme and the accompanying support for partners did result in positive benefits and improvements in abusive behaviour.

The promotion of a common set of standards that programmes must adopt in order to be seen as a credible programme for those who use violence and abuse has done much to promote key elements of intervention, such as providing support for current and recent former partners (Babcock et al., 2016; Respect, 2017). However, this approach has been critiqued as the issue of domestic violence has been framed from a feminist perspective as an issue of gender inequality, rather than a source of generating hypotheses to be tested against alternatives (Graham-Kevan and Bates, 2020). It has therefore restricted the type of research that can be carried out, and has adopted the defensive position of countering findings from a range of alternative psychological and sociological viewpoints (Dixon et al., 2012).

This poses the question of whether a particular form of programme or specific elements within programmes is core to bringing about change, or, as is put forward by others, it is

more about the nature and quality of the relationship between group facilitators and group participants (Mahon et al., 2009).

Challenges and Considerations for Future Research

<u>Evaluation method</u>

As noted earlier there have been a wide range of methods used to evaluate the efficacy of programmes. More robust evaluation approaches seek to ensure that those undertaking an intervention are compared at baseline and completion with a comparable group undertaking either no intervention or a different intervention. Research with those who pose a risk to others must engage with the thorny ethical issue that once identified, those who pose such a risk should indeed be offered some sort of intervention, and that in many cases they may be subject to compulsory requirements such as probation supervision. In their review Babcock et al. (2016) highlighted that most studies using a randomised design failed to find significant differences in programme effectiveness, whereas the opposite pattern was observed among quasi-experimental studies, which were more likely to show evidence of effectiveness relative to no-treatment control groups. However, some authors, such as Gondolf (2010), highlight how various designs can helpfully use statistical controls for selection biases present in nonrandomized designs (e.g., propensity score analysis) in studying the effectiveness of programmes, and in their review Eckhardt et al. (2013) found some of the strongest evidence of a programme effect when such statistical methods were employed (e.g., Jones and Gondolf, 2002).

<u>Types of outcome measures</u>

The central issue in any effectiveness evaluation is to identify the outcome(s) which the intervention is designed to bring about. For example, in the review by Smedslund and colleagues (2011) the primary outcome they were seeking to gauge was physically violent behaviour towards a man's female partner, wife or ex-partner. They also included other violent behaviour, like verbal aggression and hostile attitudes, but overlooked the many other forms of domestic abuse covered in this Handbook. Secondary outcomes were: improved self-esteem, reduced substance abuse and anger management. As noted earlier, first generation studies typically sought self-reports of changes in behaviour or reports from criminal justice agencies to gauge the success or otherwise of participant change. This later moved, in second generation studies, to include reports from partners and others as men might not come to the attention of the police again, and could not be trusted to disclose their

behaviour, especially if it might have serious implications such as being brought back to court. Reflecting on the positions of some women whose current or former partners were on programmes, and the utility of follow-up interviews, Westmarland and Kelly (2015) have raised questions about the now accepted orthodoxy that women's accounts should be the key benchmark of programme outcomes. Women who were no longer in a relationship with the man, especially those where the relationship ended some time ago, were not in a position to assess change on some dimensions. Other women who had separated chose not take part since they were seeking to move on. The fact that some men at Time 2 admitted to abuse also challenged the positioning of them as inherently unreliable, untrustworthy informants. However, as the example from Smedslund et al. (2011) demonstrates, outcomes sought may go beyond the safety of others to also seek to take account of factors, such as problematic substance use, which may influence behaviour. This reflects the earlier discussion about different conceptualisations of what programmes are seeking to do, and how they do this. For example, Lilley-Walker et al. (2018) found that in the fourteen studies within their review using various quasi-experimental designs, the majority (including 10 from Spain) used a range of psychometric instruments to measure pre–post changes in psychopathological and psychosocial characteristics, such as hostility, anger, depression, anxiety, self-esteem, persecutory ideas, attitudes toward women and the use of violence, and levels of maladjustment to assess the extent to which the participants' current problems affect other areas of their life. Such an approach reflects an orientation to domestic violence as arising from intra-psychic difficulties as much as living with an unequal and patriarchal society. As such, it is unsurprising that reviews of extant studies might struggle to form a coherent and consistent view of whether programmes work whenever the underlying conceptualisation of what needs to change and how to measure this differ so radically.

Heterogeneity of group participants

One key distinction in programme participation is that some individuals are externally mandated to attend the programme, for example by a court or child protection services. In such cases it is to be expected that some individuals may not acknowledge their need to attend or change. In contrast some programmes are designed for individuals who self-refer on the basis of recognising that they need help to change (for example, Stanley and colleagues, 2012; Williamson and Hester, 2009). Of course in practice these two groups, the mandated and non-mandated, may not be as distinct as presented here, but such a distinction reflects an

important dynamic that underpins the delivery of and engagement with the intervention (Devaney and Lazenbatt, 2016).

In addition, as mentioned earlier, groups often do not differentiate between individuals in same sex or different sex relationships, or participants from different ethnic groups, assuming that wider structural inequalities such as homophobia or racism are not 'in the room' with both other group participants and even facilitators. The intersection of such issues is often not considered as part of either the design or evaluation of many programmes, yet seems so important.

In summary, some of the findings to date about the effectiveness of programmes may be as a result of programmes seeking to work with such a diverse range of participants, and therefore future studies need to be better able to capture these differences and to control for them in their analyses.

Programme content or process

As noted earlier, the content of programmes has been developed to address the needs of participants, reflecting the underlying assumptions about what are the primary causes for individuals using abuse and violence within their intimate relationships. Yet, as with research on other types of behaviour change, there is evidence that the way a programme is delivered is as important, and maybe even more important, than the programme content. A feature of many group based programmes is the high level of attrition or non-completion of the programme. As noted earlier, programmes require significant commitment over a period of months, and often include high expectations in respect of attendance. However, the alliance between group facilitators and participants appear to be a crucial element in whether participants move from a position of defensiveness and resistance, to one of engagement and acceptance of the need to change (Lømo et al., 2018). How therapist and facilitators work with resistance and respond to participant's invitation to see their perspective and engage with their narrative appears important in the process of change (Lømo et al., 2019). As such, it is important to consider the full range of evaluation methods to assess process, outcomes and impact.

The alliance between group facilitator and participants is likely to be influenced by a range of facilitator related factors, such as experience, and factors that the facilitator must contend with, such as group size. For example, in a survey of programme characteristics in the United

States and Canada, Cannon and colleagues (2016) found that the average number of participants per group was 8 (n = 166), with a wide range from 1 to 42. The modal number of participants in a programme at any given time was 10. No experimental studies have been conducted on group size, but Babcock et al. (2016) propose that clinical experience suggests that group cohesion and a strong client-facilitator alliance, so important for group retention and lower levels of post-treatment violence, may not be possible with larger groups of more than 10.

Conclusions

As noted by Devaney and Lazenbatt (2016) domestic violence is a much misunderstood phenomenon. While there is an increasing recognition of the existence of violence and abuse within intimate relationships, and a growing appreciation of the different forms that it takes, there continues to be a simplistic, and at times unhelpful, conceptualisation about who uses such abuse and violence, and why. There is a tendency, amongst professionals as well as the general public, to talk about individuals who engage in domestic violence as though they are a homogenous group, behaving in similar ways, for the same reasons, and possessing common characteristics and personality traits (Holtzworth-Munroe and Meehan 2004). The danger of such a discourse it is that it is easy to assume that one approach to intervening with such individuals should work for everyone, and if it does not, it reinforces the belief, held by some, that the majority of those are domestically violent are beyond help. Yet, there is an alternative thesis, one that proposes we need a range of ways of working with individuals reflecting their behaviour and needs, and that we need to become more discerning in assessing who might benefit from an intervention, and in which circumstances. This requires us to have a stronger evidence base of which interventions are effective, and for who and when. In doing so we can, more effectively, seek to reduce the incidence of domestic violence, and therefore create a safer society.

Critical findings

- Considerable resources have been poured into developing and running a range of group based programmes for individuals who use violence and abuse within their intimate relationships
- Programmes are premised on different conceptualisations of what causes and sustains domestic violence

- Many programmes are seeking to meet the needs of a diverse range of individuals
- Many participants of groups have co-existing challenges in their life, including poor mental health and/or problematic substance use
- The facilitation process of group programmes seems to be as important as the content
- The current evidence base is inconclusive about whether such group based programmes are effective, but this may be related to the quality of the research
- Quasi-experimental studies appear to be more likely to identify change across a broader range of domains compared to RCTs
- Key findings indicate that group based programmes do work for some men in some circumstances, but the key components of change are still unclear

Keys implications for policy, practice and research

- Need to see individuals who use violence and abuse within their intimate relationships as heterogeneous
- Consideration should be given to supporting individuals to take responsibility for their own behaviour
- Group programmes should seek to work with individuals who are more similar rather than dissimilar to one another (e.g. mandate for attendance, sexual orientation, ethnicity).
- Greater attention should be given to designing programmes that are amenable to being evaluated across a range of domains which victims and participants rate as important
- Greater collaboration between programme providers and evaluators on core information to be gathered and analysed would likely assist in improving the ability to make a judgement about which elements of programmes are effective, and for who and in what circumstances
- The role of group facilitators could be studied more closely to ascertain their influence on the outcomes achieved
- Future research could usefully compare the efficacy of group based versus individual interventions

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