

What works in delivering Domestic Abuse Perpetrator Programmes?

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We have been the evaluation partner for a number of Domestic Abuse Perpetrator Programmes (DAPPs), which form part of the wider response to domestic abuse.

Here we present the findings of our review of the literature¹ regarding the principles of good practice in delivering DAPPs, based on guidance documents and existing evaluations. The review also discusses the robustness and challenges of the DAPP evaluations completed to date.

Please get in touch with our Head of Research, [Dr Stephen Boxford](#), for more detail or to continue the conversation.

1 Context

1.1 What are Domestic Abuse Perpetrator Programmes?

1.1.1 Defining 'domestic abuse'

The cross-government definition of domestic abuse is:

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to the following types of abuse: psychological; physical; sexual; financial; emotional.

[\(Home Office, 2018\)](#)

The latest statistics from the Crime Survey for England and Wales (CSEW) report that around 7.5% of women (1.2 million) and 4.3% of men (713,000) experienced some form of domestic abuse in 2016-17. The proportion who have experienced domestic abuse at some point since they were 16 years old is estimated at 26% (4.3 million) for women and 15% (2.4 million) for men ([ONS, 2018](#)).

¹ If you would like details on the methodology used for the literature review, or a full bibliography, please get in touch with the Cordis Bright research team: info@cordisbright.co.uk

Key terms

A wide range of terminology is used by agencies, services and service users with regards to domestic abuse. Below we outline the terms we use in this review and explain our decision regarding which terms to use.

Domestic abuse

In this review we use the term ‘domestic abuse’ to describe abusive behaviour between intimate partners or family members, as described above. This definition aligns with the cross-government definition introduced in the new draft [Domestic Abuse Bill](#).

Domestic Abuse Perpetrator Programmes (DAPP)

In this review we use the term DAPP to refer to all programmes focused on education and behaviour change for people who have committed any type of domestic abuse. We recognise that other terms for these programmes are in use, including Domestic Violence Perpetrator Programmes, Domestic Abuse Prevention Programmes and perpetrator interventions. However, we use the term DAPP because it is the most widely-understood terminology for this type of behaviour change programme and because it is in keeping with our use of the term ‘domestic abuse’.

People who commit domestic abuse

Where possible, we talk about people who commit domestic abuse rather than ‘perpetrators’. This is to reflect the fact that use of domestic abuse does not define the individual, and that the term ‘perpetrator’ is often not used by providers of domestic abuse programmes or by programme participants. However, we do use the term when directly related to programmes focused on education and behaviour change for people who have committed domestic abuse (see above). Where we refer specifically to men who commit domestic abuse, this is because the relevant research or policy focuses specifically on men.

1.1.2 Why Domestic Abuse Perpetrator Programmes?

Domestic Abuse Perpetrator Programmes (DAPPs) have formed part of the broader response to domestic abuse since the 1980s. Research has shown that reoffending with regard to domestic abuse is common ([Kelly et al, 2015](#)), and as such attempts to work with people who commit domestic abuse are seen as a logical tactic for preventing future abuse and improving outcomes for victims, survivors and children as well as the people committing domestic abuse.

Whilst historically some have called into question the impact of DAPPs and the robustness of their evaluations, recent studies have outlined the programmes’ capacity to “*extend men’s understanding of violence and abuse*”, aiding them to recognise patterns of control ([Kelly et al, 2015](#); [Bloomfield et al, 2015](#)).

1.2 Policy on Domestic Abuse Perpetrator Programmes

Across policy and best practice documentation there is a consistent appreciation of DAPPs as an important part of the effort to tackle domestic abuse (e.g. [Hughes et al., 2015](#); [Standing Together, 2013](#); [NOMS, 2016](#)).

The Istanbul Convention

In response to a perceived variation between national strategies on domestic abuse, the Council of Europe put forward the Istanbul Convention in an attempt to harmonise prevention efforts and legal standards. As of August 2018, the convention has been ratified by 33 of the original 46 signatories. The UK is a signatory but is still in the process of ratifying it. Article 16 of the Convention outlines the responsibility of governments to “support programmes aimed at teaching perpetrators of domestic violence to adopt non-violent behaviour” with a view to “preventing further violence and changing violent behavioural patterns” ([Council of Europe, 2011, Article 16](#)).

Ending Violence Against Women and Girls (VAWG) Strategy

The Government’s Ending Violence Against Women and Girls (VAWG) Strategy makes a commitment to supporting interventions “that lead to sustainable behaviour change in perpetrators themselves”. This commitment informs the ‘Vision for 2020’ which aims to achieve “a lower level of offending” with “greater focus on changing the behaviour of perpetrators through a combination of disruption and support” ([HM Government, 2016](#)). The Strategy highlights ‘Drive’, a joint initiative from Respect, SafeLives, and Social Finance, which was being piloted in 2016 in Sussex, Essex, and South Wales in partnership with local Police and Crime Commissioners.

Statement of Expectations

Support for DAPP initiatives is reaffirmed in the Statement of Expectations produced by the Home Office to support the Government’s Strategy. One of the five key expectations of local strategies is that they “have a clear focus on perpetrators in order to keep victims safe”. As part of this, commissioners should ensure that there are “robust services in place to offer behavioural change opportunities for those willing and able to engage with them” ([Home Office, 2016](#)).

Domestic Abuse Bill

A new draft Domestic Abuse Bill and accompanying guidance for action was published by the Home Office and the Ministry of Justice in January 2019. The consultation that informed the draft Bill explored transformations to “review the perpetrator journey from identification to rehabilitation” and one of the aims of the draft Bill is to work with people who have committed domestic abuse to prevent reoffending, including through promoting the use of DAPPs and developing measures to ensure the quality of interventions ([Home Office & Ministry of Justice, 2019](#)).

1.3 How have Domestic Abuse Perpetrator Programmes changed?

Over the past 30 years, the Duluth Model has served as the logic framework for the majority of DAPPs delivered across the U.K., America and Australia ([Langlands et al 2009](#); [Guy et al, 2014](#); [Hughes, 2017](#)). This is a programme developed in the 1980s which uses feminist theory to help participants to understand and alter their patterns of abuse ([Hughes, 2017](#)).

One of the key delivery mechanisms for the traditional Duluth Model was the use of group work to foster understandings of gender and to enable men to change through seeing themselves through others' eyes, being challenged by their peers and input from skilled facilitators ([Kelly et al, 2015](#)). This involves men attending classes where they are asked to examine and manage their behaviour through a variety of techniques. The programme itself was intended to be supported by wider multi-agency support provided to victims and survivors, as well as robust policing and probation services emphasising the criminality of domestic abuse.

Over recent years programmes have sought to incorporate more individualised models of delivery, which focus on the needs, strengths and goals of individual participants, using for example cognitive behavioural therapy (CBT) techniques ([Langlands et al, 2009](#)). Such approaches can also be delivered in conjunction with more traditional models of group work ([Hughes, 2017](#); [Langlands et al, 2009](#)).

Since the 1980s, delivery of DAPPs has evolved from voluntary and community-based responses to domestic abuse to a blend of self-referral and court-mandated programmes. When they first emerged in the 1980s, DAPPs worked with both self-referred and court-referred men. Court-referrals later developed into court mandates whereby men faced consequences for non-compliance. As a result, by the mid-1990s two settings for DAPPs had emerged: programmes run by probation and prison services for men mandated by the criminal court to attend, and community-based programmes for men entering through other non-mandated referral routes ([Kelly et al, 2015](#)).

The available evidence on the effectiveness of the different models of DAPPs outlined is provided in section 2.3.

2 Best practice in Domestic Abuse Perpetrator Programmes

This section begins by discussing what we know about the effectiveness of DAPPs and key findings from evaluations of programmes which have shown some evidence of effectiveness. We then present the current evidence for principles of good practice in delivering DAPPs, based on the primary guidance documents and the most common debates from the literature regarding best practice.

2.1 Findings from evaluations of DAPPs

The available evidence to date is ambiguous in terms of whether DAPPs are effective or not. However, certain features of programmes, in particular motivation-enhancing interventions, have been shown to enhance effectiveness ([Vigurs et al, 2016](#)).

Evaluations of DAPPs are an opportunity to strengthen the evidence base on the extent of their effectiveness, the efficacy of specific models and in particular the factors which contribute to success. However, it should be noted that some previous evaluations have not been very robust methodologically and have tended to emphasise reoffending as the sole metric in understanding the efficacy of programmes ([Kelly & Westmarland, 2012](#); [An et al, 2017](#)).

Figure 1 presents a standards of evidence scale that we have developed for use in our work, which builds on previously existing scales. Recognising the need for a robust approach to evaluating programmes that looks beyond reoffending rates and uses a blend of qualitative and quantitative measures, this review includes only the evaluations that have achieved the highest level in the standard of evidence scale, i.e. Level 3, and that show some evidence for effectiveness. The review under this criteria returned a selection of evaluations of DAPPs, which are presented in Figure 2. From this a number of key elements for enhancing the effectiveness of DAPPs emerged:

Multi-agency working: Securing effective multi-agency relationships and information sharing may be critical to a DAPP's effectiveness, both in terms of ensuring increased referrals to DAPPs and providing victims and survivors with vital support.

Staff commitment: Recruiting, training and retaining committed staff to deliver the programme was reported as a key contributor in the success of a DAPP.

Setting: The setting for group work sessions was reported to be highly influential. For example, the physical and interpersonal settings which support participants to feel calm, welcomed and trusted was seen as particularly valuable.

Flexibility of sessions: Offering sessions at flexible times, such as outside of normal working hours, was reported to have supported participation.

Mixture of group and one-to-one work: Where group work may not be appropriate, for example due to language barriers, one-to-one sessions should be offered to ensure participation is supported where there is will from the person who has committed domestic abuse.

Figure 1 Standards of evidence scale

Level	Description
Level 1	Programmes/interventions have a clear theory of change/logic model in terms of how they aim to impact on outcomes. However, there may not yet be clear evidence that they are achieving this impact.
Level 2	Programmes/interventions at this level meet level 1 criteria plus evidence indicating observed impact on desired outcomes. This could include a pre- post- measure on outcomes. A robust comparison group or equivalent is not essential for level 2.
Level 3	Programmes/interventions at this level meet level 1 criteria and include evaluations that clearly demonstrate observed impact on its desired outcomes. It is necessary at this level to clearly demonstrate that any positive outcomes achieved were likely to have resulted from the programme/intervention and as such require comparison with a well-matched control group or equivalent.

Figure 2 Summary of DAPPs with evaluations at Level 3 standard of evidence

DAPP	Objectives and/or intended outcomes	Key features of the programme	Evaluation methods	Key findings
Drive (Hester et al. 2019)	Participant risk level decreases Abusive behaviour decreases Victim/survivor perceived safety and wellbeing increases Child safety increases	<ul style="list-style-type: none"> 10-month intervention Involves individual work with participant; information sharing, risk management and work to disrupt domestic abuse at multi-agency level; and individual IDVA² support for associated victims/survivors. Works with randomly allocated people who have committed domestic abuse deemed to be high-harm risk who are associated with victims/survivors who have been referred to a MARAC³. 	Randomised control trial (RCT) design Analysis of quantitative monitoring data Analysis of case notes Qualitative interviews with practitioners, participants and victims/survivors	<p><i>N.B. Only emerging findings are available at this time, with a final evaluation due in late 2019.</i></p> Reductions in abuse by participants across the duration of the intervention Victim/survivor safety is increased The intervention itself did not cause greater harm to victims/survivors Securing effective multi-agency relationships and information sharing was critical to the programme's effectiveness

² Independent Domestic Violence Advisor

³ Multi-Agency Risk Assessment Conference

DAPP	Objectives and/or intended outcomes	Key features of the programme	Evaluation methods	Key findings
CARA (Cautioning and Relationship Abuse) (Strang et al. 2017)	Reduction in re-offending	<ul style="list-style-type: none"> Day-long Cautioning and Relationship Abuse (CARA) workshops over two weekends. The workshops involve group work with 5-7 other males. Attendees are perpetrators of low-risk intimate partner violence who have received a first domestic abuse offence. Attendees were randomly assigned and attendance was mandatory. 	RCT design Analysis of crimes arrested for in the year following commencing participation Use of Cambridge Crime Harm Index (CHI), prevalence and frequency of repeat offending counts to come outcomes for CARA group against control group	CARA group members were arrested for new domestic abuse crimes with 27% less CHI severity than the control group
Brighter Futures (Bandyopadhyay et al. 2017)	Reduced prevalence of domestic abuse amongst participants Increased participant understanding of the impact of their behaviour of the victim/survivor	<ul style="list-style-type: none"> 10 x 1.5-hour sessions Work can be delivered to groups or individuals. Feedback is also provided and received from other agencies working with participants. 	Quantitative analysis of police recorded offending data Quantitative analysis of self-reported offending data Qualitative interviews with three participants and three programme facilitators	Participants who have completed the programme commit significantly fewer domestic abuse incidents after the programme than people who have committed domestic abuse but do not participate in the programme.

DAPP	Objectives and/or intended outcomes	Key features of the programme	Evaluation methods	Key findings
				<p>Staff commitment, the physical and interpersonal setting of the programme, and flexibility in when the sessions were offered were reported as key contributors to the programme's success.</p> <p>Where the programme's group-work approach was not suitable (e.g. due to language barriers), one-to-one sessions were offered.</p>

2.2 Findings from key guidance documents

There are a number of documents which provide key guidance on commissioning and delivering DAPPs, including:

- NICE. 'Domestic violence and abuse: Multi-agency working' ([NICE, 2014](#))
- HM Government. 'Ending Violence against Women and Girls Strategy 2016-2020' ([HM Government, 2016](#))
- Home Office. 'Violence Against Women and Girls: National Statement of Expectations' ([Home Office, 2016](#))
- NOMS. 'Guidance for Working with Domestic Abuse' ([NOMS, 2016](#)).
- Project Mirabal. 'Final Report: Domestic Violence Perpetrator Programmes – Steps towards Change' ([Kelly and Westmarland, 2015⁴](#))
- RESPECT. 'Outcomes for service providers working with perpetrators of domestic violence and abuse' ([Respect, 2017](#))
- Kings College London. 'A framework for working safely and effectively with men who perpetrate intimate partner violence in substance use treatment settings' ([Hughes et al, 2015](#)).

The following **key themes** were particularly prevalent and strong across the above guidance documents and wider key guidance literature:

- Prioritising outcomes for victims, survivors and children.
- Effective multi-agency working.
- Targeting provision based on local need.
- Thorough risk assessment and management.
- Engaging participants who are motivated to change and/or including support to increase motivation to change.
- Offering a blend of group and one-to-one work.
- The assessment and support offered by programmes should take account of related issues, e.g. substance abuse and mental health, which may require

⁴ In addition to the final report referenced here, a range of other publications is available here: <https://www.dur.ac.uk/criva/projectmirabal/>

offering support as part of the programme or linking participants into other relevant services.

- Understanding long-term impacts of programmes.

Figure 3 provides a more in-depth explanation of each of these themes

Figure 3: Key success factors in commissioning and delivering DAPPS identified in key guidance documentation

Important success factors	Elements	Source(s)
Prioritised outcomes for victims, survivors and children	Ensure interventions primarily aim to increase the safety of the partner and children of the person who has committed domestic abuse (if they have any). Ensure this is monitored and reported. In addition, staff should report on the participant's attitudinal change, their understanding of violence and accountability, and their ability and willingness to seek help.	NICE, 2014
	A positive outcome for children whose father has participated on a DAPP has a range of dimensions. <ul style="list-style-type: none"> • Men on DAPPs should be actively encouraged and supported to tell their children about their attendance. • There is a need for more direct support services for the children of men on DAPPs. 	Alderson, Kelly, Westmarland 2013
	Programmes should engage with fathers' desires to forge relationships with their children, emphasising the impact domestic abuse has on this possibility.	Guy, 2014 ; Meyer, 2018
	Programmes require strong links between their theoretical foundations and the empirical evidence underpinning those theories. This requires strong evaluation, as well as the development of tangible, measurable targets.	Dempsey, 2009 ; Day, 2009
Effective multi-agency working	Approaches should use multi-agency approaches effectively to understand and meet the support needs of victims, survivors and family members.	Home Office, 2016

Important success factors	Elements	Source(s)
	Local partnerships should include frontline practitioner representatives, service users or their representatives, and agency representatives (preferably senior officers) from health, local authority, public health, sexual violence services, housing, schools/colleges, PCCs, community safety partnerships, criminal justice agencies (including probation), CAFCASS and specialist voluntary/community/private organisations.	NICE, 2014
	The involvement of other agencies and the need to share information should form part of the risk management plan when working with people who have committed domestic abuse.	NOMS, 2016
	Multiple reviews have found that increased multi-agency working across the criminal justice system, health and social services, and other agencies are effective at increasing referrals, reducing further abuse and supporting victims and survivors.	Gondolf, 2012
	Relevant agencies should have information concerning the goals of the programme disseminated to them in advance. This information-sharing should continue throughout the delivery of the programme in line with confidentiality protocols.	Williamson, 2009; Hughes et al, 2015
	Risk assessment is best carried out through multiple agencies in order to disseminate information about high-risk cases and co-operatively develop safety plans for victims and survivors.	Schucan-Bird, n.d; NOMS, 2016; NICE, 2014;
	Multiple agencies should use a formalised process for referral, follow-up and evaluation which is clear to frontline staff.	Diemer, 2013; Hughes et al, 2015

Important success factors	Elements	Source(s)
	Consider inviting people from agencies to provide insight into their work and how to link with services.	Kings College London, 2015
Targeting provision based on local needs	Commission tailored interventions for people who commit domestic abuse, in accordance with national standards and based on the local needs assessment.	NICE, 2014
	This should include access to a broad diversity of provision, for example, services for black and minority ethnic (BME), disabled, LGBTQQI ⁵ and older people who commit domestic abuse in order to increase the safety of victims and survivors. Particular consideration may be needed for: people with complex needs who commit domestic abuse; having specialist workers in local primary healthcare and GP surgeries; ensuring local professionals are trained to spot warning signs; and having specialist workers in Children’s Services.	Home Office, 2016
	Identifying which services are needed locally and a forum to ensure victims, survivors and service providers can share their views and experiences to help shape services for people who commit domestic abuse.	Home Office, 2016
	Interventions should be effectively targeted based on participants’ likelihood of further harm/offending, and intensity of intervention matched to the level of risk and need presented by participants.	Respect, 2017
	Project Mirabal found that an overarching local strategy to responding to domestic abuse, including working with people who have committed domestic abuse and drawing on local need, was integral to the coordinated community response approach.	Kelly and Westmarland, 2015

⁵ Lesbian, Gay, Bisexual, Transgender, Queer, Questioning and Intersex

Important success factors	Elements	Source(s)
Thorough risk assessment and management	Commission robust evaluations of the interventions to inform future commissioning, with an appreciation for the short, medium, and long term effects across various levels of risk.	NICE, 2014
	Assessment of risk must be continuous and dynamic, with ongoing risk assessment identified as an effective element of effective management of people who have committed domestic abuse.	NOMS, 2016
	Risk management requires the use of skills, knowledge and the right data, and is a regular ongoing process which re-evaluates new information and leads to measures being adopted to reduce risk and escalation.	Kings College London, 2015
Engaging people who have committed domestic abuse who are motivated to change	Interventions should monitor and regularly report on participants' ability and willingness to seek help.	NICE, 2014
	Placing people on behaviour change interventions who are not motivated to engage can be both a waste of resources and risk giving false messages to victims and survivors that change is possible.	Respect, 2017
	Engaging and motivating participants, and the subsequent reduction in attrition rates in intervention attendance, is key to improving the success of programmes. In group settings this can be achieved through regular reminders and follow-ups.	Day, 2009
	Men who voluntarily attend programmes are more likely to be motivated to change.	Brooks et al, 2014

Important success factors	Elements	Source(s)
	<p>Engagement and motivation can come through one-to-one ‘motivational interview’ sessions in which counsellors are sure to:</p> <ul style="list-style-type: none"> • Express empathy for the client’s situation without judgement or criticism • Develop discrepancy between the current situation (and behaviour) and what the client has identified as personal goals • Engage with resistance by inviting the client to actively engage with identifying issues and seeking solutions • Support self-efficacy through belief in the possibility for change 	<p>Vigurs et al, 2016</p>
<p>A blend of group and one-to-work</p>	<p>Group work is important as it enables men to change through seeing themselves through others, being challenged by peers and having skilled facilitators.</p>	<p>Kelly and Westmarland, 2015</p>
	<p>Individual interventions enable offenders to develop ‘relevant and realistic’ plans to improve.</p>	<p>Langlands, 2009; Dempsey et al, 2009; Eckhardt, 2008</p>
	<p>Blended group and individual work provides the best coverage to deal with the diversity of people who commit domestic abuse and their motivations.</p>	<p>Guy, 2014; Kelly and Westmarland, 2015</p>
<p>Remaining mindful of broader issues e.g. substance abuse</p>	<p>Particular consideration should be given to the ‘toxic trio’ of domestic abuse, mental ill health and substance misuse which, when occurring together, are key indicators of significant risk of harm to victims and children and young people. Assessment and support should take into account these factors.</p>	<p>NOMS, 2016</p>

Important success factors	Elements	Source(s)
	Consideration should be made for the wider issues such as substance abuse; programmes should be considerate of these in their approach whilst linking with services which help in the relevant areas.	Guy, 2014
	Cranstoun advocates a programme design which incorporates substance day-programmes into its response to DAPPs. This approach has also been advocated elsewhere.	Cranstoun 2015 ; Schucan-Bird, n.d
Understanding long-term impacts of programmes	Commissioning should be informed by robust evaluation which appreciates short, medium, and long term impacts.	NICE, 2014
	The organisation should measure changes to a range of forms of abusive behaviour, including, but not limited to, physical abuse, sexual abuse and coercive control, and ensure data is collected over a meaningful time period to give clear evidence of effectiveness.	Respect, 2017
	There is no 'quick fix' for preventing domestic abuse, and programmes need to place an emphasis on longer term outcomes with robust evaluation frameworks.	Brooks et al, 2014

2.3 Key debates regarding best practice

Three prominent areas of debate surrounding the effectiveness of different models for delivering DAPPs emerged from the literature reviewed.

Critique of the Duluth model

Recent studies have found a weak link between Duluth-style programmes and reduced rates of reoffending ([Stover et al, 2009](#); [Eckhardt et al, 2014](#)). The model has also been criticised for being too prescriptive in its appliance of feminist theory, and failing to take into account the different behaviours, experiences and characteristics of the individuals who are committing domestic abuse ([Hughes, 2017](#)).

Group work as a mechanism for delivering DAPPs

The emphasis of Duluth-style models on working with groups of men as opposed to a more individualised approach has also come under criticism. Critics have argued that programmes should be tailored for individuals, with a greater emphasis on the wider context for their abusive behaviour ([Dempsey et al, 2011](#); [Eckhardt et al, 2013](#)).

Project Mirabal, a widely-cited study into the efficacy of DAPPs, provides a defence of group work as vital in enabling men to change through seeing themselves through others' eyes being challenged by their peers and input from skilled facilitators ([Kelly et al, 2015](#)).

It is now accepted that group work is a valid component of a wider suite of preventative programmes, providing it is delivered in conjunction with more individualised programmes, such as CBT, and takes account of the different behaviours, experiences and characteristics of individual participants through the assessment and support offered by the programme and related needs([Hughes, 2017](#); [Langlands et al, 2009](#)).

Court mandated versus voluntary participation

The split between voluntary and mandatory attendance of programmes has been a subject of contention within research on DAPPs. Researchers have highlighted how mandating men to attend programmes could reduce their overall effectiveness ([Brooks et al, 2014](#)). The reverse also appears to be likely - men who attend programmes voluntarily have been seen to be best placed to make positive changes to their behaviour ([Morran, 2013](#)).

Encouraging and maintaining engagement is a challenge for all DAPPs, irrespective of whether they take voluntary or mandatory referrals. A number of solutions have been presented to help tackle the issue of maintaining participant engagement with programmes. Reminder phone calls and follow-ups are identified as common strategies deployed in group settings ([Day, 2009](#)), whilst one-to-one techniques such as motivational interviewing have been shown to have a positive impact on reducing attrition rates ([Vigurs et al, 2016](#)).