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"The Other Side of the Story: Perpetrators in Change" (OSSPC)

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**Public policy recommendations on the needs and importance of developing perpetrator
programmes in the form of noncriminal justice intervention in The United Kingdom**

formulated within activity

Time for Change: Evidence based research for new practice approaches (WP 2)

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1. Introduction

"The Other Side of the Story: Perpetrators in Change" (OSSPC) project is a collaborative project, **co-funded by the European Union** in the framework of **The Rights, Equality and Citizenship Programme (2014-2020)**, which aims to prevent further domestic violence and to change violent behavioural patterns by increasing the capacity of frontline workers that will further teach perpetrators of domestic violence to adopt non-violent behaviour in interpersonal relationships and understand the impact of domestic violence on them, their family and the community.

The OSSPC project is being implemented between 1.05.2020-30.04.2022 by: The Association for the Prevention and Handling of Violence in the Family - APHVF, Cyprus, **as coordinator**, and Bournemouth University -BU, United Kingdom, Centro di Ascolto Uomini Maltrattanti Onlus- CAM, Italy, The Union of Women Associations of Heraklion Prefecture -UWAH, Greece, European Knowledge Spot, Greece and Direcția de Asistență Socială și Medicală -DASM, Cluj-Napoca, Romania, **as partners**.

The Set of Policy Recommendations on domestic violence perpetrator intervention programmes is part of activity **Time for Change: Evidence based research for new practice approaches (WP 2)**, which aims to map and comparatively analyse the current work with perpetrators in the participating countries; estimate the scale of the problem; provide a needs assessment and discover potential referral routes, suggesting relevant perpetrator programme for professionals in the form of non-criminal justice intervention.

Each partner has formulated a set of policy recommendations on domestic violence perpetrator intervention programmes, taking into consideration the specificities of each country. The specific recommendations regarding policymaking emanate from the national research and comparative analysis which every partner of the consortium has completed.

2. Defining the problem / identifying the needs

There is extensive evidence as to the extent of domestic violence and abuse (DVA) in the UK. The Office for National Statistics estimate that 25% of women and 10% of men have been a victim of partner abuse, and the Home Office (2020) reports that there are 2.4 million victims of DVA, the majority of whom are women. A significant level of DVA involves repeat victimisation however





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less than 1% of DVA perpetrators receive specialist intervention support (Home Office, 2016). The extent of harm caused by DVA has a correspondingly high impact upon criminal justice systems, including police, court, probation, and prison services. The costs of DVA in the UK are estimated to be £66 billion (Oliver et al, 2019) and the cost of managing perpetrators without intervention support programmes is estimated to be as much as £63,000 for each incident (The Drive, 2020).

There is a range of legal and voluntary routes for victim-survivors and perpetrators of DVA in the UK, underpinned by the UK Government's Violence Against Women and Girls Strategy 2016-2020, the introduction of coercive and controlling behaviour as an offence through the Serious Crime Act 2015 and the current Domestic Abuse Bill. Despite this, this research identified that there exists only very limited and piecemeal intervention support programmes for perpetrators. Those programmes that do exist have evidenced successful outcomes for perpetrators, but remain constrained by lack of awareness of the services available, a lack of funding, lack of engagement by some perpetrators and an inability to offer timely and local access for all those in need. Resourcing and funding constraints are an ongoing issue for victim-survivors, perpetrators, and professionals.

Following the research developed within Work Package 2 of the above project, the following problems were identified:

- a) Lack of effective inter-agency collaboration and service provisions for victims-survivors, including:
 - i. Lack of timely access to support;
 - ii. Victim blaming narratives by some agency staff;
 - iii. Victims-survivors not being taken seriously when disclosing the abuse to service providers and/or criminal justice agencies;
 - iv. Victim-survivors' intersectional identities impacted on their experiences of seeking help.
- b) Lack of effective services for perpetrators, including:
 - i. The majority of perpetrators were not prosecuted through the CJS;
 - ii. Perpetrators encountered difficulties in negotiating and accessing perpetrator intervention programmes due to lack of joined up service provision between agencies;
 - iii. Perpetrators were initially wary or anxious about engagement in





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- programmes and did not recognise their behaviour as problematic. Some commented on negative associations with the label 'perpetrator';
- iv. Considerable time delays in accessibility to programmes, particularly for those perpetrators who had to complete substance abuse programmes before starting DVA intervention programmes;
 - v. Lack of available housing resources for perpetrators removed from the family home, leading to risk of return to home environment or consequent homelessness;
 - vi. Intervention support services varied considerably by region creating a 'Postcode lottery' in the UK;
 - vii. Interventions offered rely on the localised contexts of local commissioning and political will;
 - viii. Insufficient support/awareness from healthcare providers relating to support pathways, resulting in missed opportunities for referrals to support services.

c) An on-going presence of patriarchal and sexist attitudes about DVA, which indicate that there is still a widespread understanding of the issue as:

- i. Private;
- ii. An extension of generalized marital issues, and
- iii. Framed within a physical injury model whereby if the injuries are not seen as severe this is indicative that the DVA is thus not severe.

Consequently, there is a focus on Individual over Structural causes and consequences of DVA in the UK context.

3. Beneficiaries affected by the effects of the policy recommendations

We believe that the benefits of these policy recommendations impact upon all in society. These include:

- Current and potential future victims-Survivors of DVA
- Perpetrators of DVA
- Children of both victims-survivors and perpetrators of DVA





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- Families of both victims-survivors and perpetrators of DVA
- Criminal justice agencies
- Social care, health care and social service providers
- Schools and educational settings.

4. Public policy recommendations (proposed solutions to solve the identified problems)

4.1 & 4.2. Public policy recommendations at local / county / regional level

Following these research findings, the following proposed solutions were identified:

- Widespread coordinated service community response to DVA, at local, county and regional levels;
- Consistent and transparent inter-agency collaboration for service provision pathways for both victim-survivors and perpetrators;
- Local inclusive, holistic intervention programmes for perpetrators and their families;
- Extensive additional funding for perpetrator programmes to ensure there is no 'postcode lottery' of service provision;
- Local arrangements for housing provision for those perpetrators who are removed from the family home and have nowhere else to live;
- Local education and prevention awareness programmes embedded in school and educational curricula;

Justification:

The research found that victim-survivors were often not supported or believed and reported many inappropriate and ineffective responses to their disclosures. Their experiences demonstrated patriarchal and gendered assumptions about the roles of men and women in relationships, which were a significant barrier to being taken seriously, and to gaining support. Additionally, the extensive research with professionals and service providers highlighted the current inadequacies of much of inter-agency engagement and emphasised that working collaboratively was a priority in order to engage with perpetrators quickly and effectively. They called for a holistic pathway of





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services for perpetrators and their families, where they can be supported throughout the intervention programme and beyond. Service providers and perpetrators highlighted significant success in programmes that engage in relationship-building and self-realisation. Here perpetrators take responsibility for their actions, acknowledge the harm they have caused, and are given practical tools to enable them to change their behaviour. This is seen as particularly effective where early intervention was possible. Additionally, the research demonstrated how positive role-modelling, mentoring and education on gender equality and indicators of

DVA were needed in schools and educational environments in order to recognise any inappropriate behaviour, promote healthy relationships and reduce potential future offending and victimisation. However, evidence emphasised a gap in adequate provision and resourcing for perpetrator programmes, including the training of service providers, which means that services are piecemeal, inconsistent and subject to regional variation. The findings recommend additional funding, training and provisions for victim-survivors, perpetrators and professional service providers in order to meet the current demand for intervention programmes, and reduce the impact of DVA on families and wider society.

4.3. Public policy recommendations at national level

In addition to those recommendations made above, we further propose the following at national level:

- a) National roll out of CARA conditional caution model, to ensure an earlier intervention following initial arrests for DVA related offences.
- b) Specialist training on DVA amongst frontline healthcare professionals especially GPs and mental health professionals;
- c) Specialist perpetrator services which would work with people who had a substance abuse issue alongside the DVA;
- d) Training to upskill professionals in key roles (i.e. those who are likely to support/meet victims of abusive such as health workers, social workers, and the police) aligned to the new legislation on coercive control;
- e) Uniform national funding for local coordination of support services for both victim-survivors and perpetrators of DVA;





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- f) Ratification of the Istanbul Convention so that there is a legal obligation to provide perpetrator intervention services.
- g) National additional specialist training on DVA causes and responses for health care, social care and social service agencies to improve awareness, recognition and referrals.
- h) National housing provision for those perpetrators who are removed from the family home and have nowhere else to live;
- i) National extensive additional funding for perpetrator programmes to ensure there is no 'postcode lottery' of service provision;

Justification: The research findings demonstrated a dearth of specialist intervention programmes for perpetrators and disparity between regions in terms of provision. They highlighted significant delays in accessing programmes due to funding restrictions. Despite a welcome increase in funding for perpetrator programmes from the Home Office, the majority of which was delivered to Police and Crime Commissioners to allocate on a regional basis, there continues to exist a 'postcode lottery' of provision. These recommendations are to increase the current £10 million to ensure that regions have sufficient financial support to extend their programmes to include unmet need.

Secondly, in line with the report's findings, the Home Office (2020) has also emphasised the importance of a coordinated multi-agency response to DVA, and our evidence suggests that there continues to be a lack of training and specialism in this field. Of particular note was the absence of GP and other healthcare setting referrals and a recommendation for additional training and resources to promote awareness and improve referrals.

Furthermore, as highlighted above, there is significant financial and economic cost associated with repeat offending by perpetrators of DVA. The roll-out of holistic, therapeutic-informed perpetrator intervention programmes, which have achieved success in reducing recidivism, is recommended nationally, to reduce overall cost to the State. We know these are often repeat (with the same victim) and serial (with different victim) offenders. As such, ensuring one perpetrator desists, has the potential to save many victims in terms of physical, financial (hospital admissions, victim-survivor support services, child services, mental health care) and obviously emotional costs.

Additionally, UK wide charities have created a 'Call to Action' to complain that the Domestic





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Violence Bill does not go far enough in ensuring comprehensive perpetrator provision. They have also campaigned for the need for ratification of the Istanbul convention. Without ratification there continues to be a lack of legal grounding to ensure perpetrator work is being conducted in line with the Conventions' articles. Therefore, there is need for a national focus on providing support for perpetrators, grounded in the ratification of the Convention.

5. Authorities that have the capacity to initiate / promote / implement / support public policy recommendations

UK Government, Welsh Government, Scottish Government, Northern Ireland Executive (national level), including Dept for Education, Dept of Health and Social Care, Home Office, Ministry of Housing and Local Government, Ministry of Justice, Dept for Communities
Local authorities (regional & county level)

UK DVA Charities, including the Charity Commission

Police Services in England and Wales, Police Scotland, Police Service for Northern Ireland, British Transport Police Authority

Border Force

Offices of the Police and Crime Commissioners (England and Wales)

National Crime Agency

College of Policing

HM Prison and Probation Service

HM Inspectorate of Probation

RESPECT

CAFCASS

Crown Prosecution Service

NHS Providers & NHS England

Care Quality Commission

General Medical Council

Nursing and Midwifery Council

Health and Care Professions Council

Social Care Wales

Public Health England

Social Work England





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Child Safeguarding Practice Review Panel
National Institute for Health and Care Excellence
Ofsted
Health Education England
Advisory Council on the Misuse of Drugs
Equality and Human Rights Commission
Family Justice Council
Office of the Children's Commissioner
Victims Commissioner
Social Science Research Committee





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References

Home Office. 2016. Ending violence against women and girls strategy: 2016 to 2020. March 2016.

Home Office. 2020. £7.17 million awarded to PCCs for tackling perpetrators of domestic abuse. Available at: <https://www.gov.uk/government/publications/717-million-awarded-to-pccs-for-tackling-perpetrators-of-domestic-abuse>. Accessed: 7 Dec 2020.

Oliver, R. et al. 2019. The economic and social costs of domestic abuse. Home Office Research Report 107. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/918897/horr107.pdf

Hester, M. et al. 2019. Evaluation of Year 2 of the Drive Project – A Pilot to Address High Risk Perpetrators of Domestic Violence. Bristol.

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