



Survey briefing: Survivor views and experiences of perpetrator interventions

Introduction

The Drive Partnership was established in 2015 by SafeLives, Respect and Social Finance. Together we have developed the Drive Project to address a gap in work with high-harm, high-risk perpetrators of domestic abuse. We work to end domestic abuse and protect victims by disrupting, challenging, and changing the behaviour of those who are causing harm. The Drive Partnership also works to advocate for change and to develop sustainable, national systems in England and Wales that respond effectively to all perpetrators of domestic abuse.

The Drive Partnership believes a victim-focused approach is key to effective perpetrator work. To better understand their experiences, we have asked survivors of domestic abuse for their views on how a range of services respond to perpetrators, as well as their experiences of interventions designed specifically for domestic abuse perpetrators.

Whilst the findings from this survey do not necessarily tell us anything new, the difference is that we have gathered collective feedback from victim/survivors. These invaluable insights show a strong need for continued input and guidance from survivors on the impact of perpetrator programmes.

This online survey was conducted in July-August 2021 and gathered responses from 470 victims/survivors of domestic abuse within England and Wales. The survey asked survivors to reflect separately on wider public services – such as police and social care - and interventions specifically designed for those who use abuse in their relationships.

Responses in both areas varied: some survivors had negative experiences of services and/or spoke about programmes with apprehension, whereas others spoke about interventions with optimism and saw a need for an expansion in interventions that seek to reduce the harm perpetrators pose. However, responses suggested a need for improvements in a wide range of services, some of which, however well intentioned, may be further harming victims/survivors. Community organisations and other health services, such as A&E and specialist drug and alcohol services, fared best in their rating from survivors, but there was still indication of room for improvement.

The Domestic Abuse Commissioner conducted a broader mapping survey earlier this year which found that only 7% of survivors who wanted their perpetrator to receive support to change their behaviour were able to get it, highlighting significant gaps in access to perpetrator programmes¹. These results are mirror our own findings, further showcasing the urgent need for greater consistency and availability of quality-assured perpetrator interventions across England and Wales.

¹Early Findings from the Domestic Abuse Commissioner's Mapping of Domestic Abuse Services across England & Wales <https://domesticabusecommissioner.uk/wp-content/uploads/2022/07/DAC-Mapping-briefing-paper-final.pdf>

Section A: Public Services

What did victim-survivors tell us about how services can better respond to perpetrators?

When asked the question “What could have been done differently by services/organisations to better respond to those who perpetrated abuse?”, survivors gave a range of ways public services could respond to perpetrators more effectively.

The most common theme, which over a quarter of survivors expressed, is that services must take a victim-focused approach. For many, this meant being listened to, believed, and taken seriously. Some shared their experience of the impact of poor work in this area:

“Due to past experiences of reporting abuse not being believed and being blamed on me, I did not feel safe or comfortable to report my abuser to any agency.” - Anonymous

The need for services “to do something” came out loud and clear. Nearly a quarter of survivors noted that services can improve by simply acting when they know domestic abuse is present:

“All parties involved in this matter could have responded better by acknowledging the abuse and taking steps to PREVENT him from continuing.” - Anonymous

Around a quarter spoke of the need for services to better understand domestic abuse. Survivors explained that professionals need to identify the signs and respond better when they knew a victim-survivor and children were involved. Many called for training across public services to ensure that professionals can better support victim-survivors.

“Make domestic abuse awareness training mandatory for all professions dealing with victims and perpetrators i.e., healthcare, social care, police, legal teams / judges”. - Anonymous

Others shared that the absence of support was compounded with a lack of understanding around male survivors, LGBTQ+ survivors and those from other minoritized backgrounds.

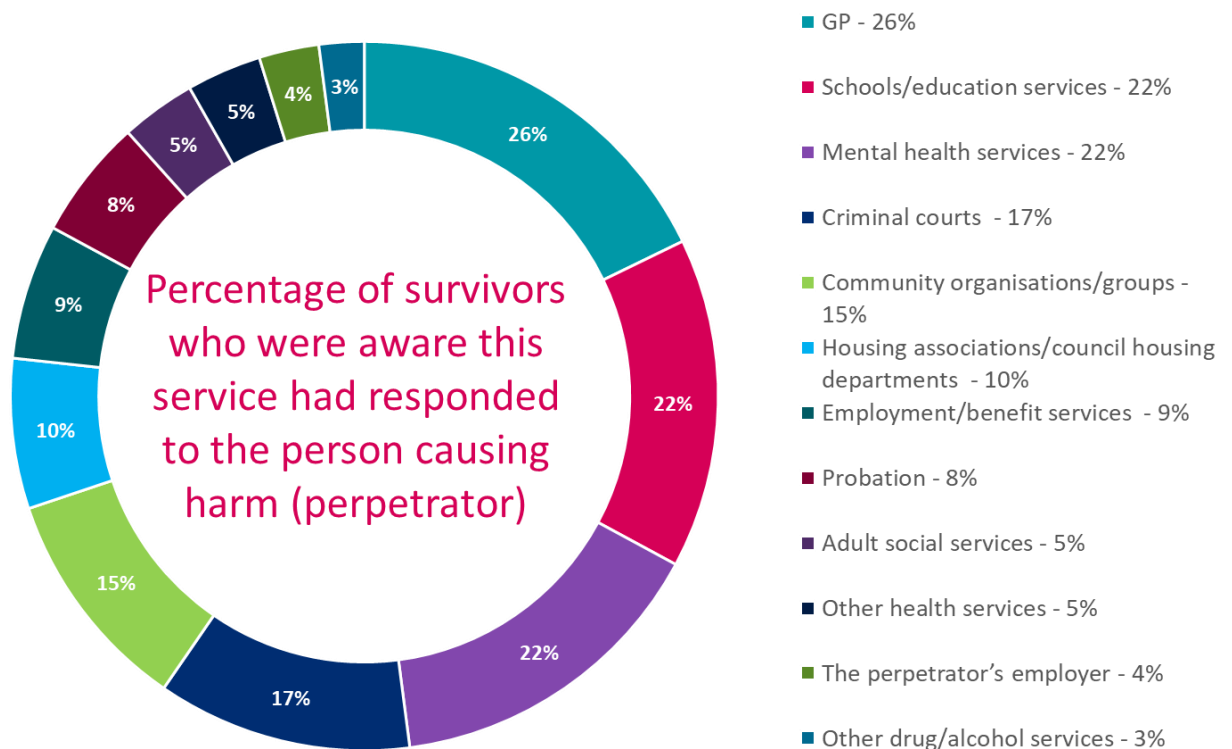
“More proactively inclusive towards LGBTQI+ community.” - Anonymous

Furthermore, around a fifth of respondents shared that services must focus on perpetrator accountability.

The phrases used across the responses that reflect on perpetrator accountability show a feeling for what survivors want from services addressing perpetrators. Many used words such as “challenge”, “identify and label”, “holding to account”, “understanding consequences”, “educating”, “addressing abusive behaviour” and “tougher penalties”.

What did victim survivors think about for the performance of individual public services?

Victim/survivors were asked about organisations that had responded to the people who had perpetrated domestic abuse against them. They were asked whether key services had responded or not, and about how helpful or unhelpful those organisations' responses were.



In terms of the quality of these responses, the Children and Family Court Advisory and Support Service (CAFCASS) was recorded to be the most unhelpful service, with 69% of victim/survivors with experience of CAFCASS responding that the service had been unhelpful. In a similar theme, just 15% of respondents said that children's services were helpful when they responded, while two thirds (69%) felt it was unhelpful. When considering the Police, one third (33%) said the police had been helpful overall. However, a greater proportion, nearly half (46%) felt they had been unhelpful.

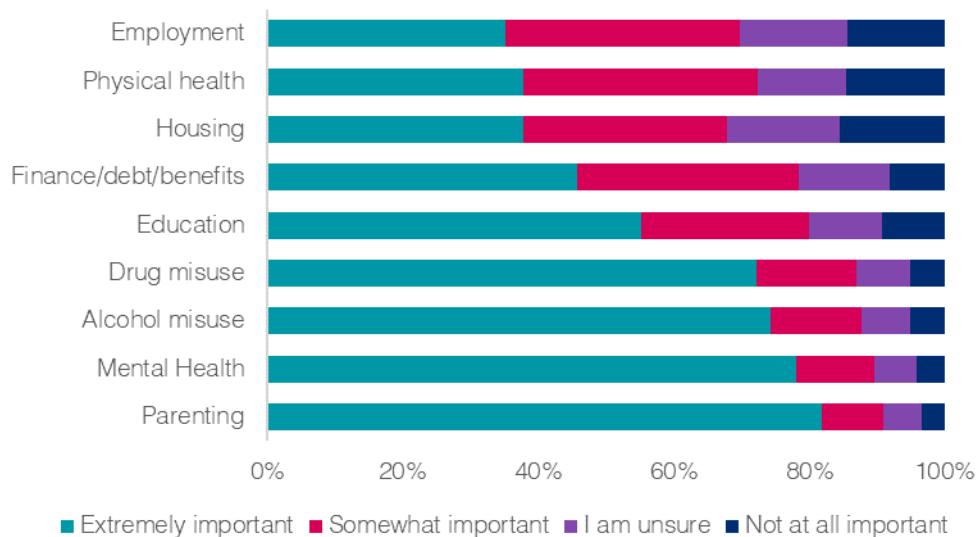
In contrast, the organisations most likely to have been helpful to victims/survivors in the way they responded to those perpetrating abuse were community organisations/groups (73%) and other health services (73%), which includes health services that are not a GP or Mental Health. Therefore, this could include A+E, maternity services, community care and so on. These were followed by housing associations/council housing departments, where 47% of respondents were most likely to be helpful.

Service delivery in principle and practice

Survivors were asked about the importance of providing specific services to perpetrators of domestic abuse. What the survey shows is that while survivors are very supportive of the

idea of perpetrators receiving services in principle, the reality of the impact of the services falls short of expectations.

The following percentage of respondents felt that it was extremely important for perpetrators to receive the following services: parenting (77%), mental health (73%), alcohol misuse (68%), drug misuse (66%), education (51%), finance/debt/benefits (41%), housing (34%), physical health (34%) and employment (32%).



However, when considering their own personal experiences, over half of the respondents stated that the services had no effect (52%), one third of respondents (30%) described negative effects and concerningly fewer than one out of ten respondents claimed that the services had a positive effect (8%).

Some survivors raised concerns that services gave perpetrators an excuse to justify their behaviour.

“He received nonspecific mental health support only, not relating to perpetrating. I know he lied, denied, and made himself out to be a ‘victim of my own demons’. Mental health services being involved validated that he is mentally unwell and therefore not responsible for his own behaviour. It made it harder for me to get people to see him as an abuser. He was very public about his apparent mental health to get sympathy and praise. [...]” - No pseudonym

“They told him he was stressed and needed to communicate more.. he took that as an excuse for his abuse” - Anonymous

“Was referred to talking therapies and that made the abuse worse, he felt the therapist supported his behaviours and manipulated her” - Anonymous

This shows how important it is that non specialist services that are working with perpetrators of abuse engage in relevant training, to equip professionals to recognise and respond to harmful behaviour more effectively.

The few positive impact examples were on housing – where housing services enabled the perpetrator to leave the family home and on parenting whereas one respondent said:

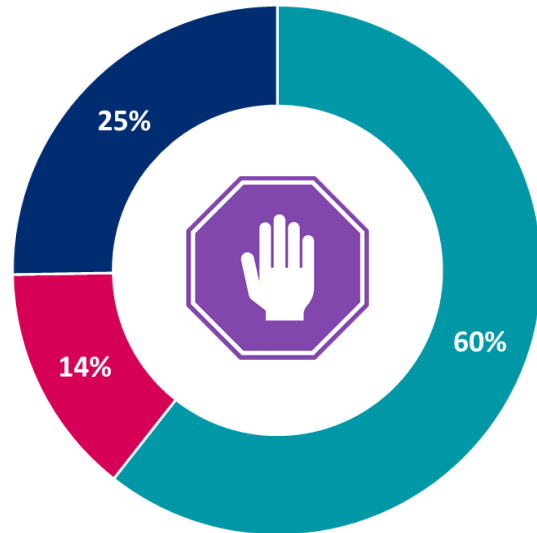
“The parenting support did actually result in his behaviour becoming more child centred and less hostile towards me” - Anonymous

Section B: Specialist services for perpetrators

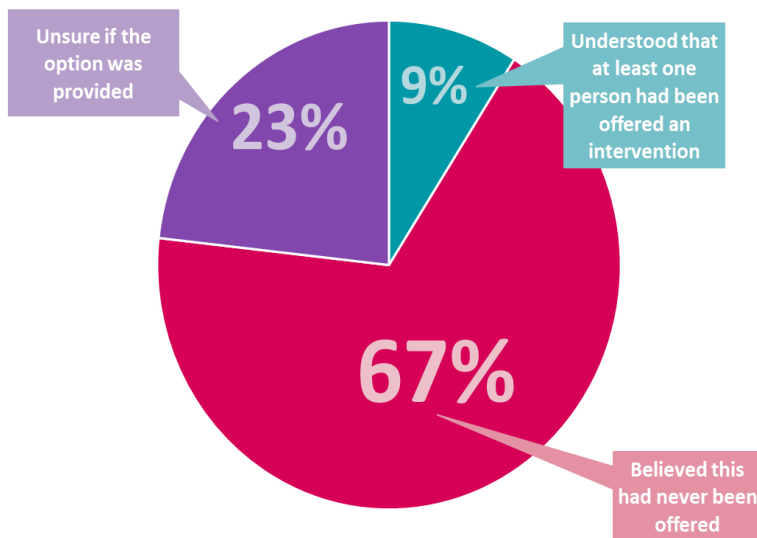
Are behaviour change programmes being offered to perpetrators?

In the survey, we asked whether the person who caused them harm had joined a special programme for people using abuse in their relationships or been offered a chance to. We also asked whether the survivor would have liked such a service to be offered.

It was clear that a majority of survivors (60%) would like to see the option of a perpetrator programme, but only a small minority (9%) stated that the person who caused them harm had been offered some form of intervention.



- Would have liked them to go on a programme
- Would not have liked them to go on a programme
- Unsure



However, just 9% recalled that at least one person who used abuse against them had been offered the opportunity to engage in this type of intervention. 67% believed this had never been offered, while 23% were unsure if the option was provided.

In terms of why so few of those that caused harm had been offered a programme, one theme that arose is that there is nowhere near enough offered. In fact, when we asked about what needed to change regarding perpetrator programmes, around a quarter of survivors observed that availability was an issue.

“There is nowhere near enough [...] programs for perpetrators unless they have committed very extreme act of violence.” - Anonymous

Impact of behaviour change programmes on victim-survivors

Only one in ten (9%; 46 in total) respondents stated that at least one of their perpetrators attended a behaviour change programme. Worryingly, half (50%) of these victim/survivors shared that they believed the interventions had no effect, and one third (33%) said they had negative effects. Just one victim/survivor (who worked in the domestic abuse sector) felt the programmes had positive effects (2%), while 11% reported mixed effects overall.

The survey asked these victims/survivors some open-ended questions to better understand the effects of perpetrator(s) going on behaviour change programmes. There were a total of 42 respondents who answered these questions, with varied responses, including a range of topics. The following percentages are given based on the number of people who answered these questions.

Concerningly, more than 60% of respondents said that there was no change in the abusive behaviour of their perpetrator(s). Victims/survivors said that they were often blamed by the perpetrator for having to go on a behavioural change programme. They also shared that they didn't feel their perpetrator(s) took responsibility for the abuse.

"The final report stated that his attitude towards his abusive behaviour had not changed and he blamed his victims, he took no responsibility for his behaviour even after completing the programme" - Tina

"While on the perpetrator program they behaved engaged and willing to work towards change, but continued to control, manipulate and abuse at home." – Anonymous

"He only volunteered to attend to try and manipulate the situation. He had no intention of seeing his behaviour as wrong and I don't believe he has the mental capacity to change" - Anonymous

Participants who saw no change in their perpetrator(s) abusive behaviour often felt that the perpetrator(s) were not motivated to attend a programme in order to change their behaviour, but to satisfy a 'tick box' exercise, or to have access to their children.

"They "faked" the program benefiting them until they were comfortable enough to resume the abuse" - Shannon

"He was ordered in family court to attend one to get to see his kids with his ex partner (who he had abused too). He'd go to that, behave himself, then come home to abuse me (his new wife)." – Anonymous

Alarmingly, more than a quarter of participants (26%) said that their perpetrator's behaviour worsened after attending a behaviour change programme. In some cases, victim-survivors said that the programme gave their perpetrator(s) the tools to hide their abusive behaviour better, and to become more controlling and manipulative.

"They were always manipulative, but they became more so and learned how to keep just under the legal radar whilst continuing unpleasant antics. They also learned how to mess with my head even more and turn the 'abuse table' on me. But once the ADAPT program has ended, there is no follow up. They don't know the outcome." - Anonymous

"It taught them how to present better and pretend they were the victim before being suspended for nonattendance." - Anonymous

12% of participants described problems with programmes that involved groupwork, in which perpetrator(s) compared themselves to other programme attendees to minimise the abusiveness of their own behaviours.

“After the building better relationship course, perpetrator commented ‘others in the room were worse than me. I am the good guy in there.’” – Hoseana

12% of participants also highlighted that the views of victim-survivors were not acknowledged in behavioural change programmes, which ended up putting them further at risk and causing more damage. Importantly, one survivor highlighted that they felt these programmes needed to be delivered in the long term because short term programmes could have mixed effects due to how long behaviour change can take.

What changes did victim-survivors recommend regarding behaviour change programmes?

Just 9% (46 responses) of survivors had experience of the person who had abused them going on a behaviour change programme. There is a patchwork of perpetrator interventions available, with no compulsory standards for providers to stick to, and it was not possible to establish in this survey which exact intervention survivors had experience of and whether that was a quality-assured programme.

However, the information provided on referral routes give us some sense of the types of programmes perpetrators may have been accessing. This shows that the most common referral route was self-referral by the perpetrator at 30% (16 responses), followed by probation 28%, (13 responses), children’s social services 17% (8 responses), then family court/CAFCASS 15% (7 responses).

Survivors’ response to questions on behaviour change programmes indicate that some of the programmes may not have met quality standards, with worrying comments relating to lack of contact with the victim or the central role of safety. Support for victim survivors is intrinsic to perpetrator programmes that are quality assured and these comments further highlight the need to ensure all programmes meet a high standard of practice.

It was observed that perpetrator courses need to offer a more comprehensive and long-term service, which have a more rigorous standard for checking and ensuring progress:

“He was made to do a 3-day perpetrators course to make him look good in court. They should be made to do longer courses and actually followed up and not just discharged after the 3 days.” – Vicki

Another survivor spoke about how perpetrator interventions must check in with the victim-survivor to ensure the programme is having a positive impact:

“The need to be in touch with the victims too, so they know that the perpetrator is genuinely working on themselves and not using the course as a box to tick” – Anonymous

It’s important to learn from the 33% of respondents who did not feel that behaviour change programmes would have made a difference in their situations. Some of this was due to feeling that their perpetrator(s) would not properly engage, but many felt generic programmes were not suitable for every perpetrator.

“In order to make the change they need to accept their behaviour. My ex does not accept his behaviours and takes no responsibility for what he has done” - Lullabelle

*“I don’t think there is a one size fits all, it may be of benefit and work for some, others are too set in their ways and don’t think they’re the problem”
- Anon*

This highlights the need to acknowledge the limitations that this work sometimes has, but also the need to come up with creative, adaptive solutions to ensure the safety of victim/survivors. Direct behaviour change programmes might not suit all situations and that’s where alternatives such as the Drive Project’s multi-agency disruption work could be effective. This feedback also shows a need to expand the scope of these programmes to include, and be tailored to, a wider demographic, including those in same-sex/gender relationships.

Despite thinking a behaviour change programme would not make a difference in their situations, 23% of these respondents would have none the less wanted their perpetrator(s) to attend. This might indicate that incorporating survivor’s feedback in how these programmes are run could go far in improving survivor’s opinions of this work.

At the end of the survey survivors were asked, “Thinking about interventions for domestic abuse perpetrators, is there anything else you’d like to tell us?”

In response to this, around a quarter mentioned the need for programmes to be high quality and to centre survivor safety to ensure that these programmes are not putting the victim-survivor at greater risk:

“I’d like programmes to ensure that risk isn’t increased to victims – that he is not angry that he is completing a programme and taking it out on the victim.” – Anonymous

The numbers reporting personal experience of perpetrator programmes are quite small, so it is difficult to draw clear conclusions; however, the results do point to the importance of ensuring that behaviour-change programmes are quality assured and supported with ongoing expert advice.

Conclusion

The results of the survey suggest an urgent need for improvements in how a range of generic public services and specialist perpetrator interventions respond to perpetrators.

An obvious place to start for perpetrator specific services is investment in quality assurance and rigorous adherence to published standards. The safety of victim/survivors should be at the core of perpetrator programmes and the responses to this survey show that this is not consistent, further reiterating the need for standardised, accredited programmes.

Additionally, many survivors raised concerns about the effectiveness of behaviour change programmes, highlighting the need for robust ongoing learning and evaluation. Furthermore, survivor responses reflected that there are significant gaps in the availability of perpetrator interventions across different geographies, which needs to be addressed.

Every public service and specialist service that comes into regular contact with perpetrators of abuse should be monitoring its impact and taking steps to ensure that what it is doing is safe and has a positive impact. This should be underpinned by a training and workforce development to better equip professionals to recognise and respond to perpetrators. The need for these measures is particularly urgent in the family courts and children’s social care settings, where high numbers of survivors said responses had a negative impact. There is some specialist research on how different areas of public service can better work with perpetrators, for example Research in Practice’s, “Working with people who perpetrate domestic violence and abuse in families”², and services should work with specialist organisations to implement best practice.

The findings from this survey are in line with what we currently understand about the challenges of responding to perpetrators across systems and sectors. Importantly, these results clarify that the feedback of survivor-victims with experience of these programmes offers invaluable first-hand insights into the response from different agencies and services to perpetrators. Only through gathering feedback and centring the experiences of victim/survivors can we ensure that interventions are meeting their primary function of reducing the risk that perpetrators pose and increasing safety for victim/survivors.

We would like to thank the victims and survivors who responded to our survey for taking the time to share their experiences with us, and re-commit The Drive Partnership to centring the voices and experiences of survivors in all of our work.

² Working with people who perpetrate domestic violence and abuse in families: Evidence Review (2021) <https://www.researchinpractice.org.uk/children/publications/2022/february/working-with-people-who-perpetrate-domestic-violence-and-abuse-in-families-evidence-review-2021/>