Evaluation readiness, program quality and outcomes in men's behaviour change programs

Practice and policy implications of an ANROWS Perpetrator Interventions Research project

October 2018

ANROWS

AUSTRALIA'S NATIONAL RESEARCH ORGANISATION FOR WOMEN'S SAFETY

to Reduce Violence against Women & their Children

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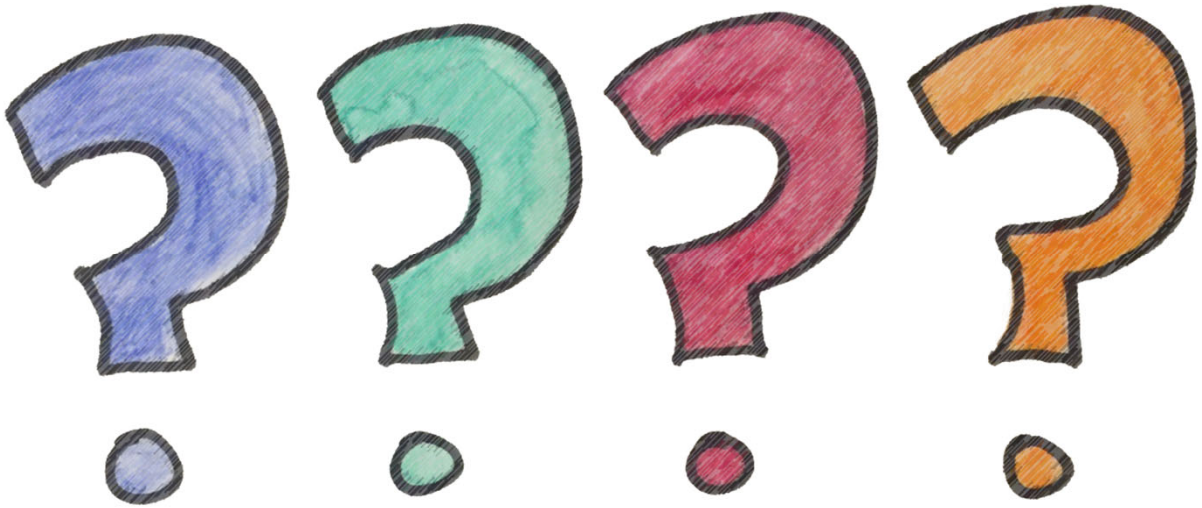
Why this research?



Components of the research

Evolution

Evolution

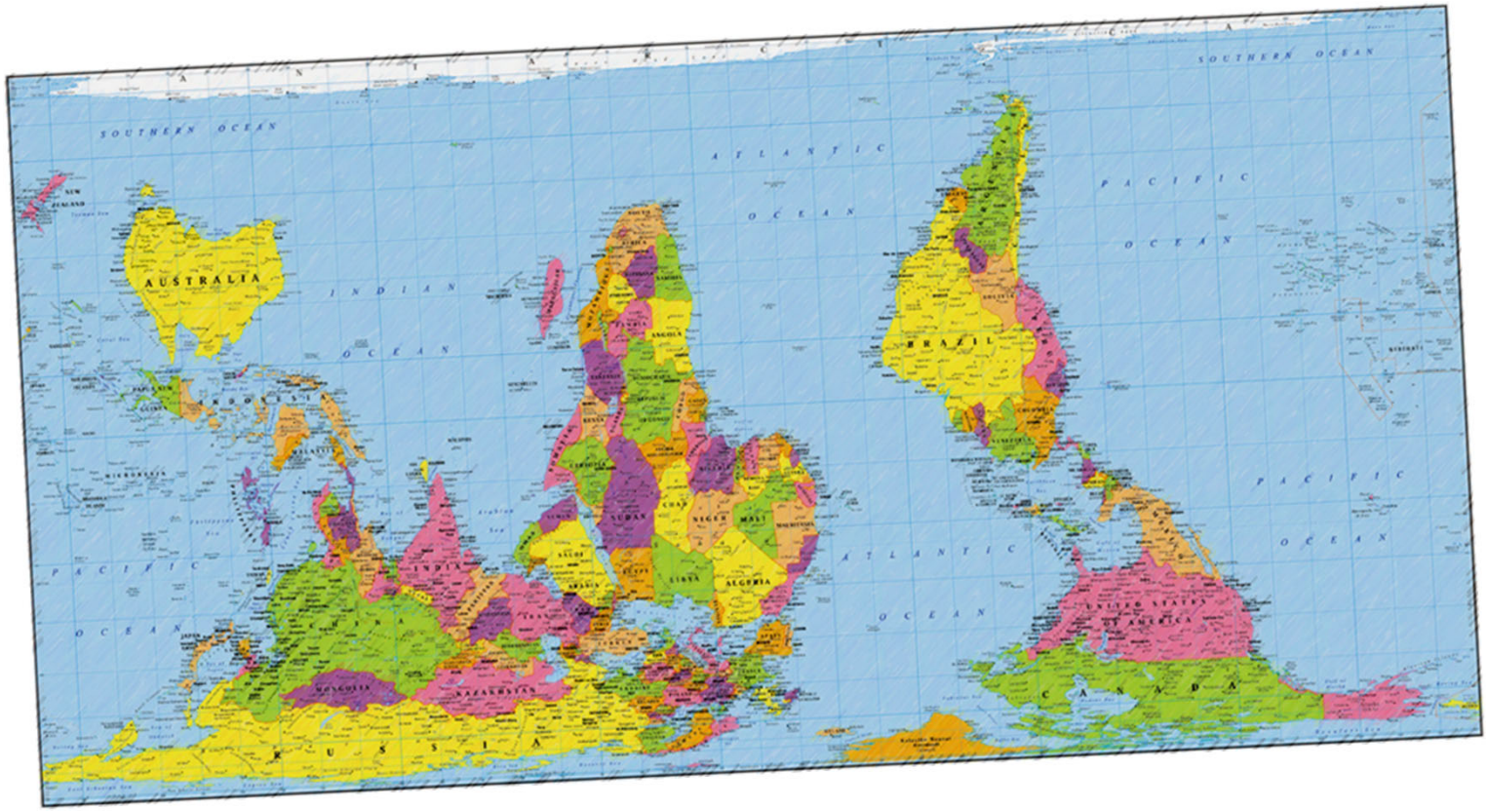
Evolution

Evolution

State of knowledge on the effectiveness of MBCPs

Minimum standards

Approaches taken by other jurisdictions



Minimum standards

Where's the

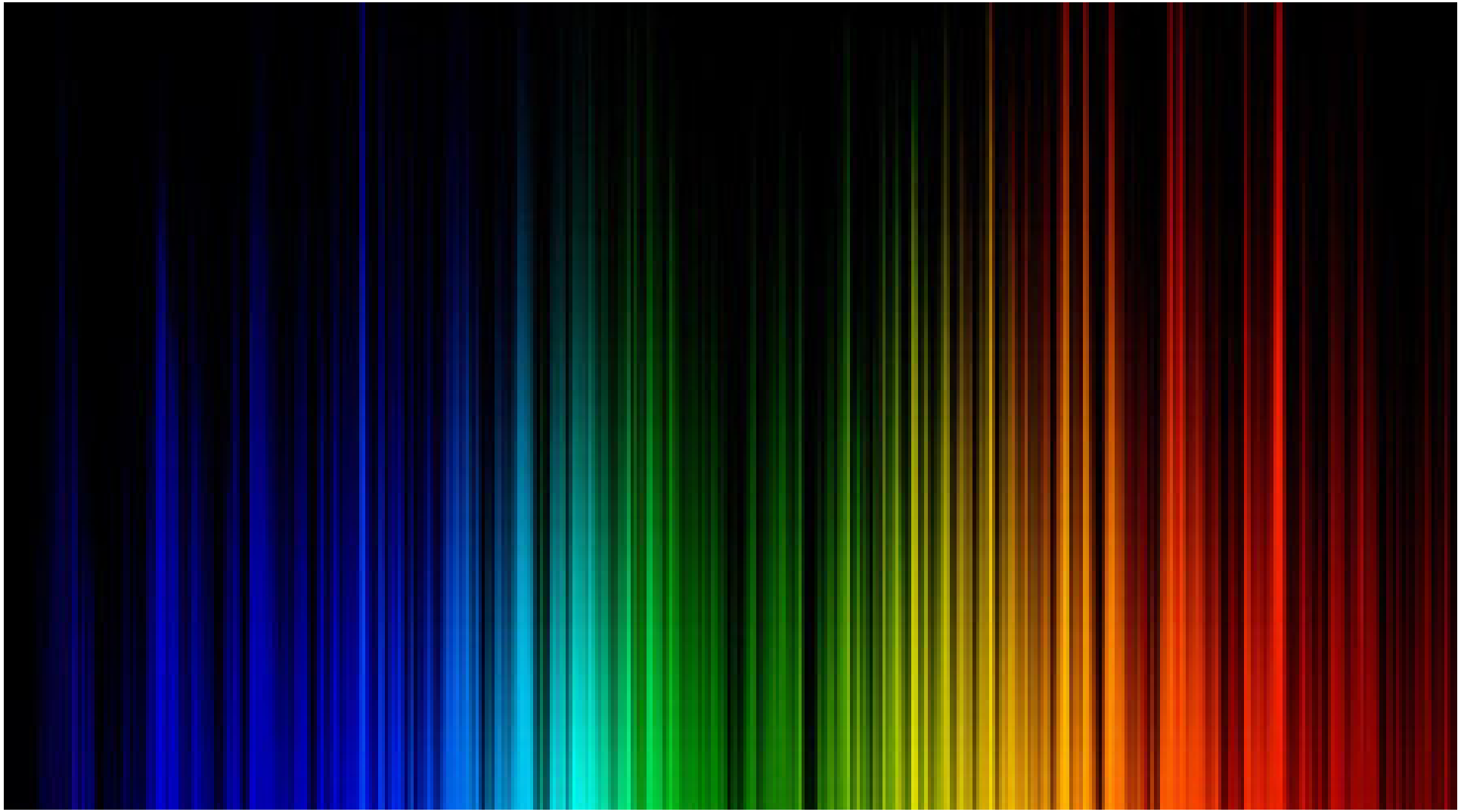
Minimum standards

Principles and intent, or prescriptions?

Compliance with minimum standards

Beyond MBCPs

A spectrum of perpetrator interventions



Minimum standards

Minimum standards

Practice guidance

Minimum standards

- Support for program providers to comply with standards

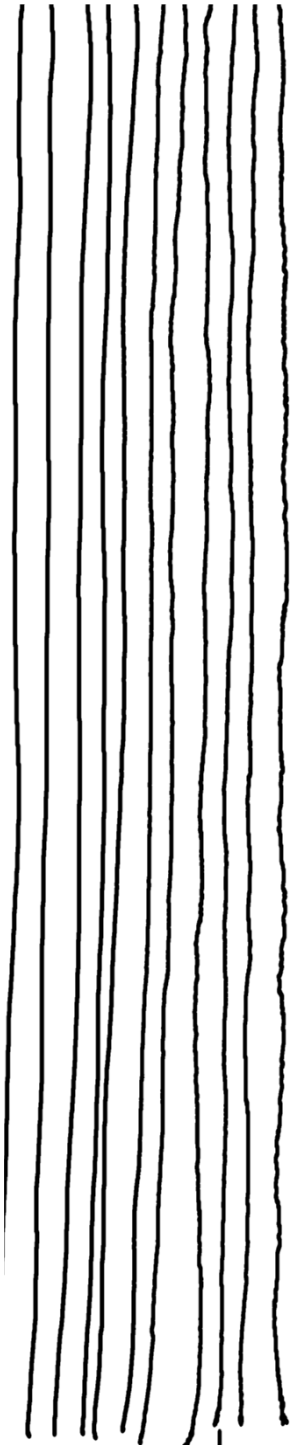
Minimum standards

- Funding to enable compliance

Minimum standards

Let's innovate!

Accreditation systems



Key principles

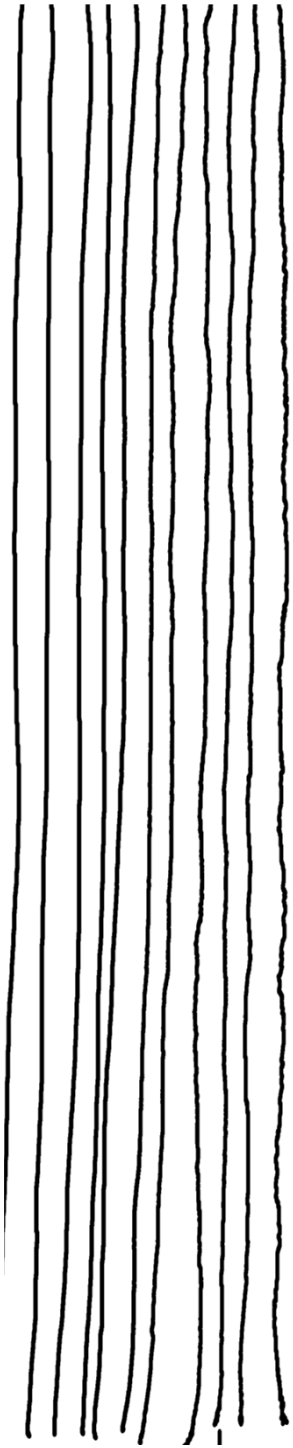
- Be clear and transparent
- Support providers to become accreditation-ready
- Have sufficient accreditation-related tools, templates and resources to scaffold accreditation-readiness
- Not be too time consuming
- Utilise accreditors with some independence from the accrediting body
- Have a review and appeals process
- Have some flexibility for program providers to demonstrate compliance in ways that make sense in local contexts
- Enable opportunities for program providers who do not meet particular standards to improve their practice to do so
- Be based on a positive rather than punitive spirit

Accreditation systems

Accreditation systems

Accreditation systems

Program or organisational level?

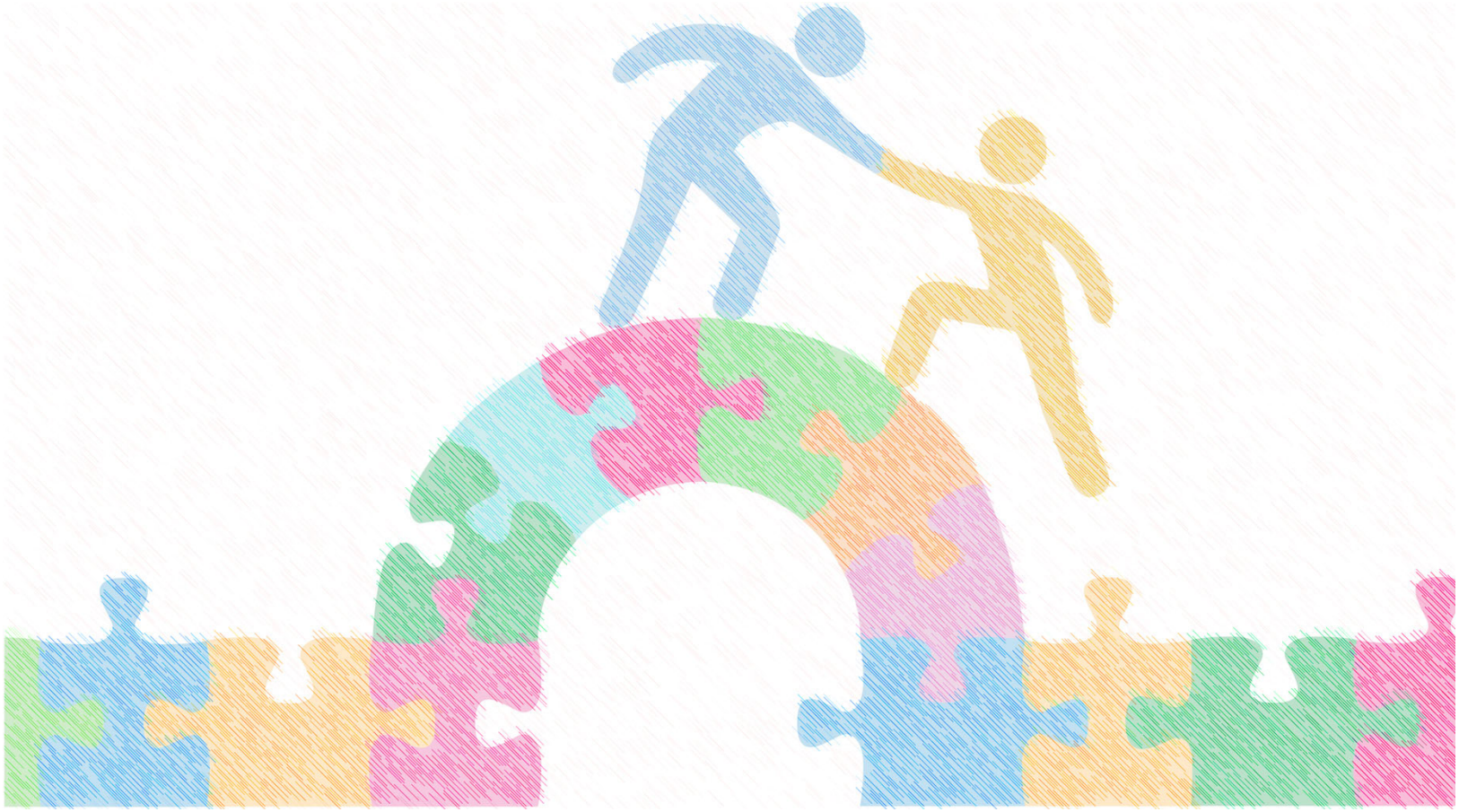


Components of comprehensive accreditation systems

- Three-yearly program audits
  - live observations of practice
  - client files
  - staff files
  - policies & procedures documentation
- Informal, more regular check-ins
- Peer-review of practice
- Innovation support
- Complaints mechanism

Accreditation systems

A supportive accreditation approach

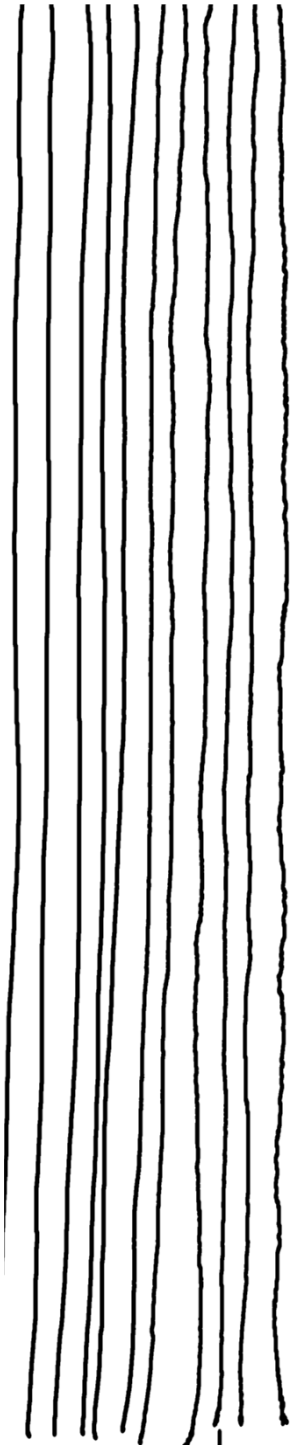


Beyond MBCPs

Standards and accreditation systems that encompass an expanding diversity of perpetrator intervention programs

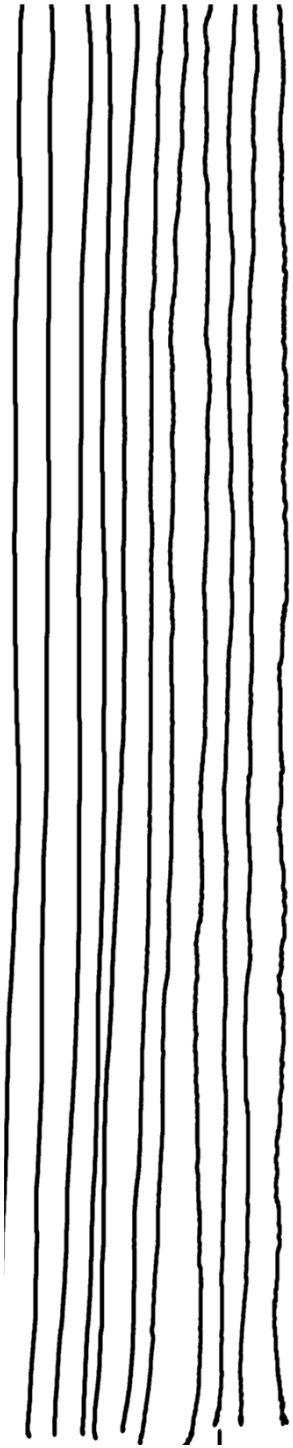
Specialist qualifications & training

Facilitating communities of practice

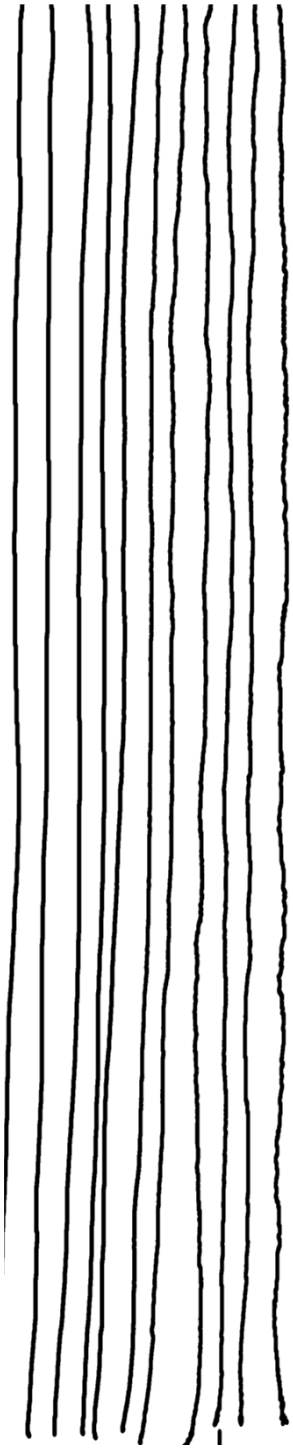


Female partners' experiences of MBCPs

- 6 women, aged 30 – 42, two separated with VROs
- 5 were relieved he was in a MBCP – an outsider / professional having 'eyes' on him
- Partner contact seen as important
- Experiences of partner contact were very mixed however … not sufficiently timely … not sufficiently assertive … not focused on children … wasn't clear what it would involve
- Varied responses to whether the MBCP was making a difference … some reported a positive difference … major fear that changes will be short-lived once he completes the program



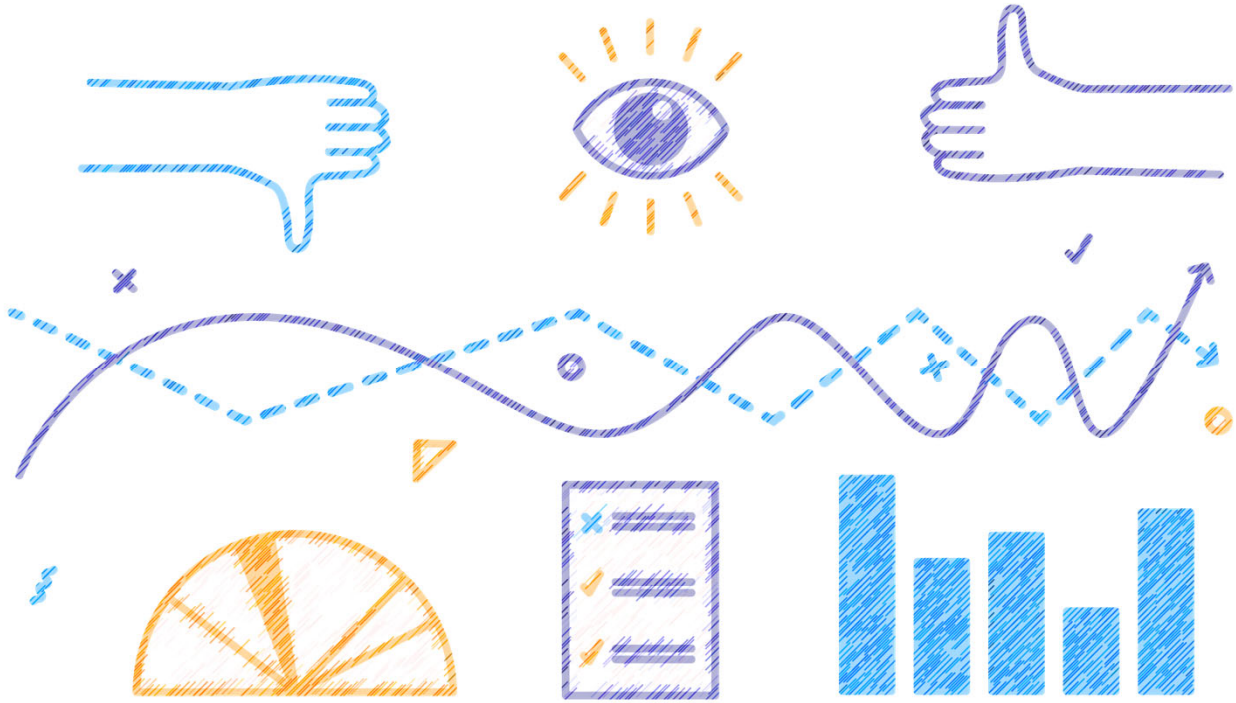
“…because everything I know about the program is from him. Like, what’s going on, what’s the steps, one-to-one, or he told me about something they’re moving on to, like, a group or maybe you need one-to-one, or you need bookings, and if he doesn’t tell me I would not know”.



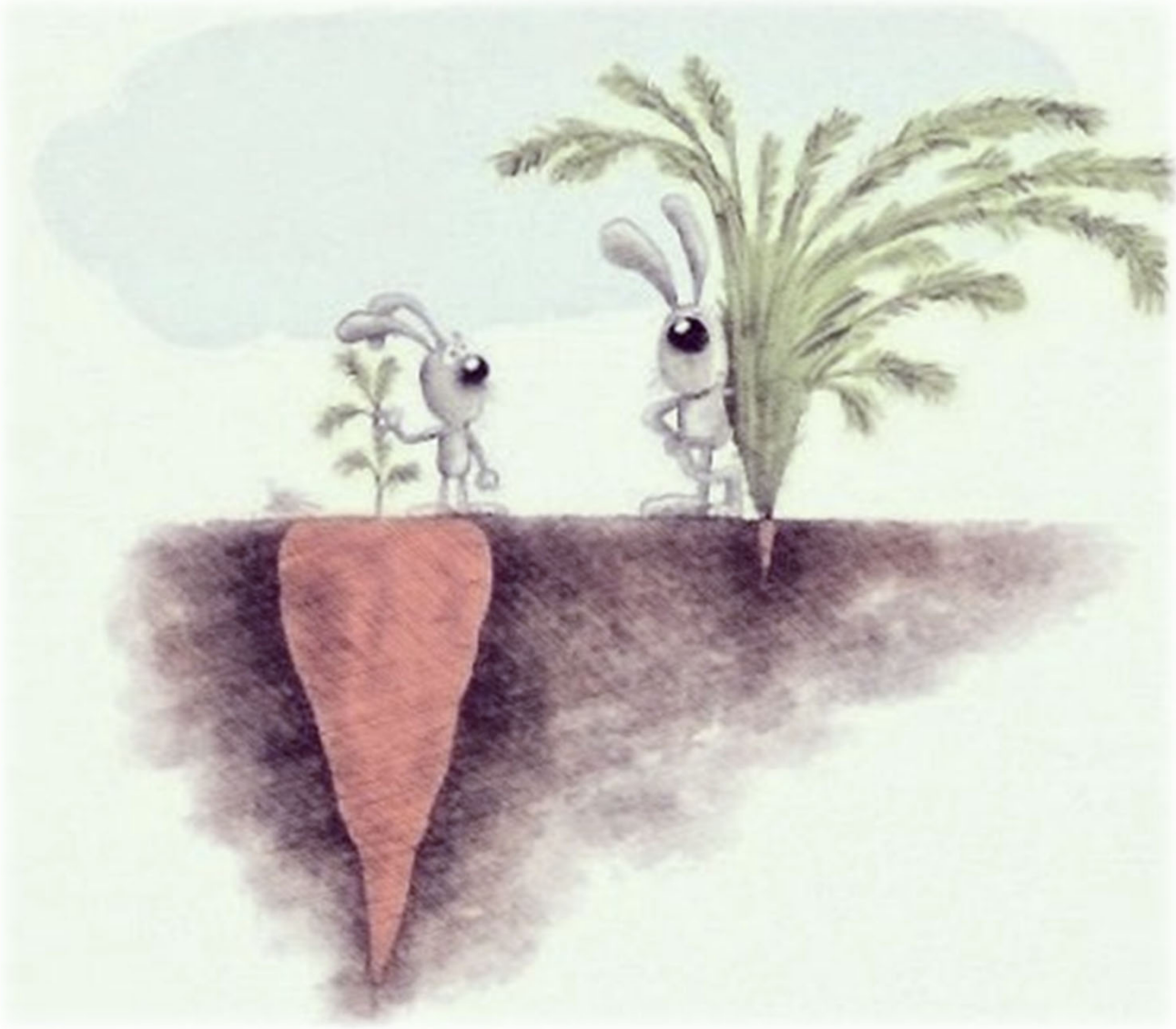
“Because, I was just like, look, you know, you have these services available, and I’m asking you for them, but yet I don’t get them. You know, you don’t follow up, you don’t call me back, you don’t…you know, you said that, you’d try and do this, and I don’t hear from you. I get that he’s the one with the problem, you know I understand that, he’s the one that needs fixing, but he’s left a trail of destruction in his wake, and the kids need help, you know, let alone me. My kids need help, I can deal with myself, but when you have got a child who is trying to stab himself and he’s cutting himself with glass, what more is it going to take, for you to listen and help?”

Program evaluation

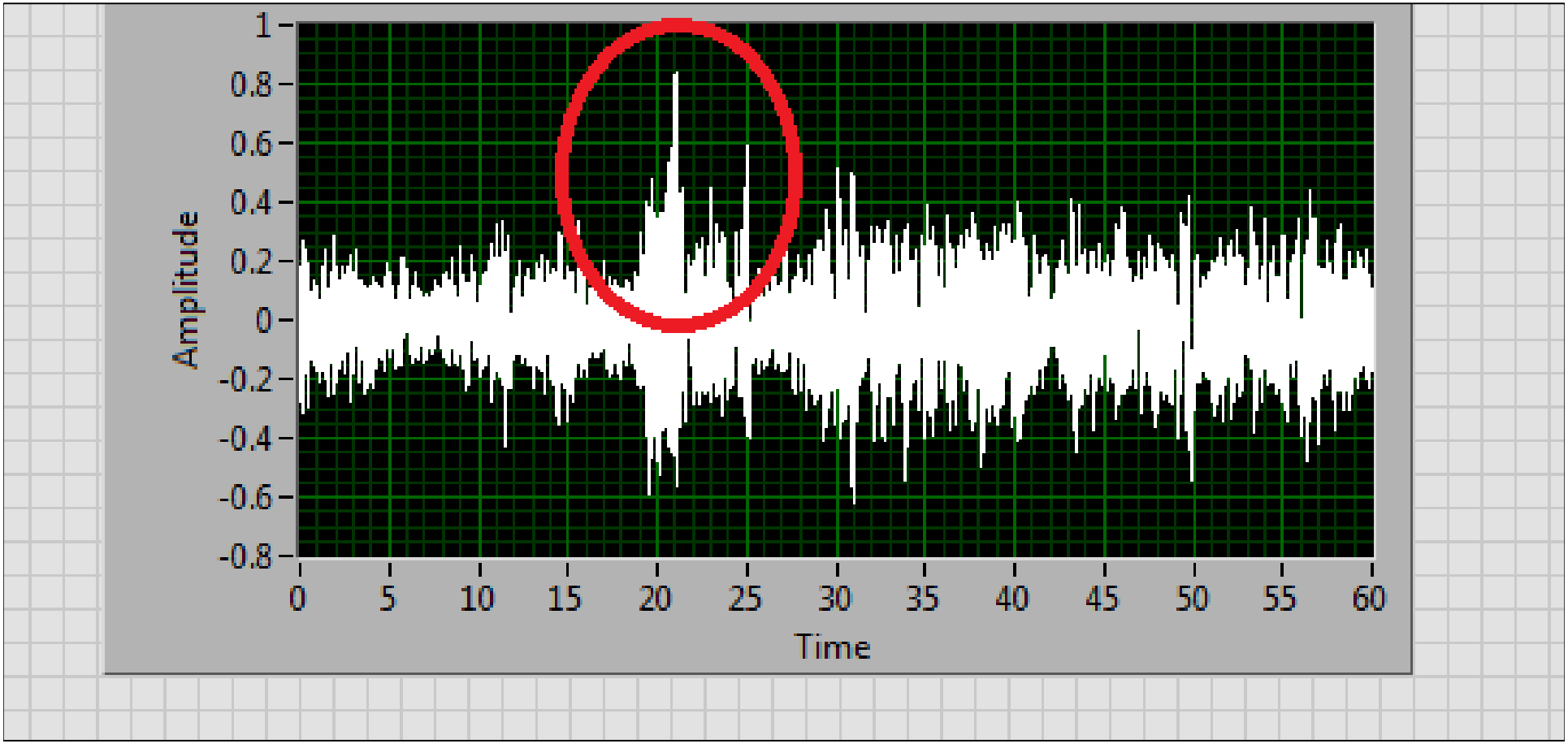
- Evaluation in a systems context



Program evaluation



Incidents of violence or patterns of coercive control and social entrapment?



Program evaluation

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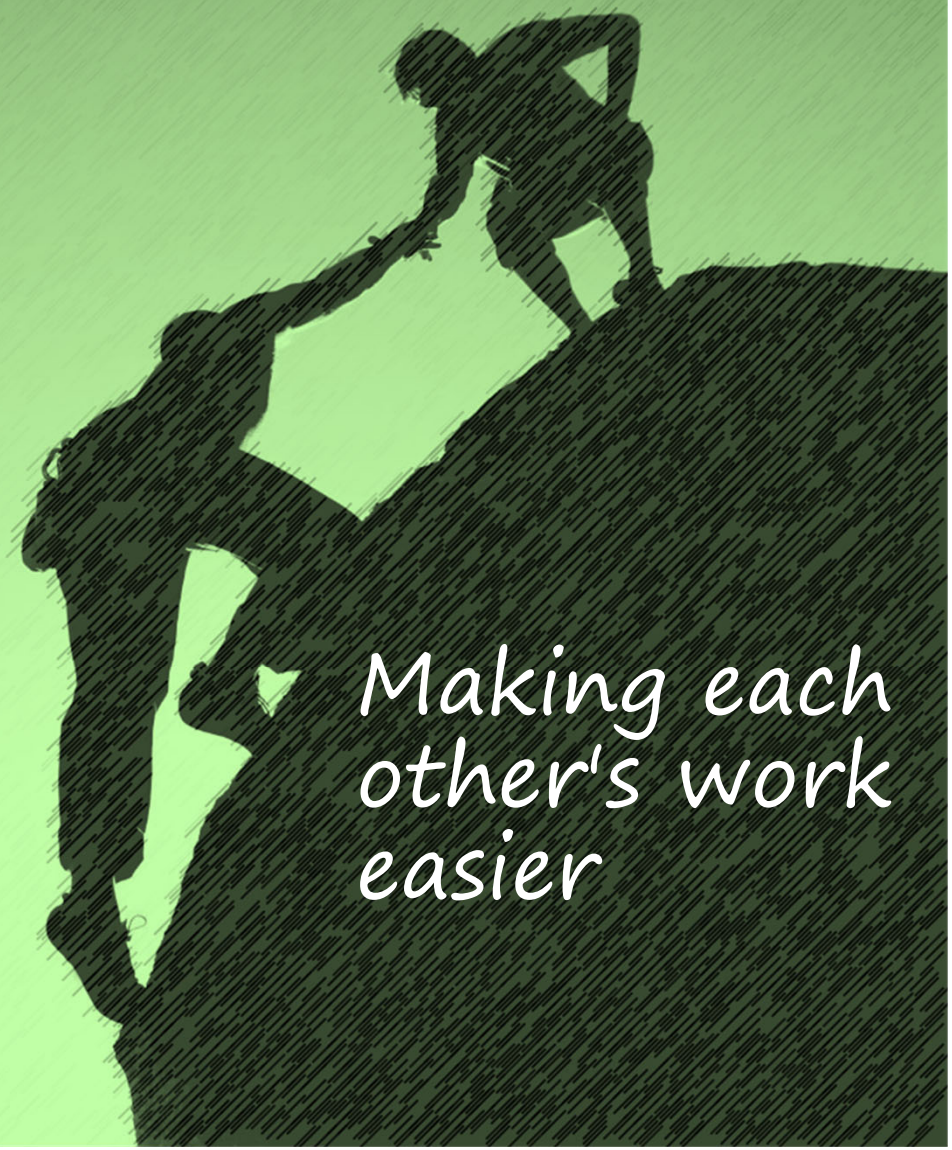
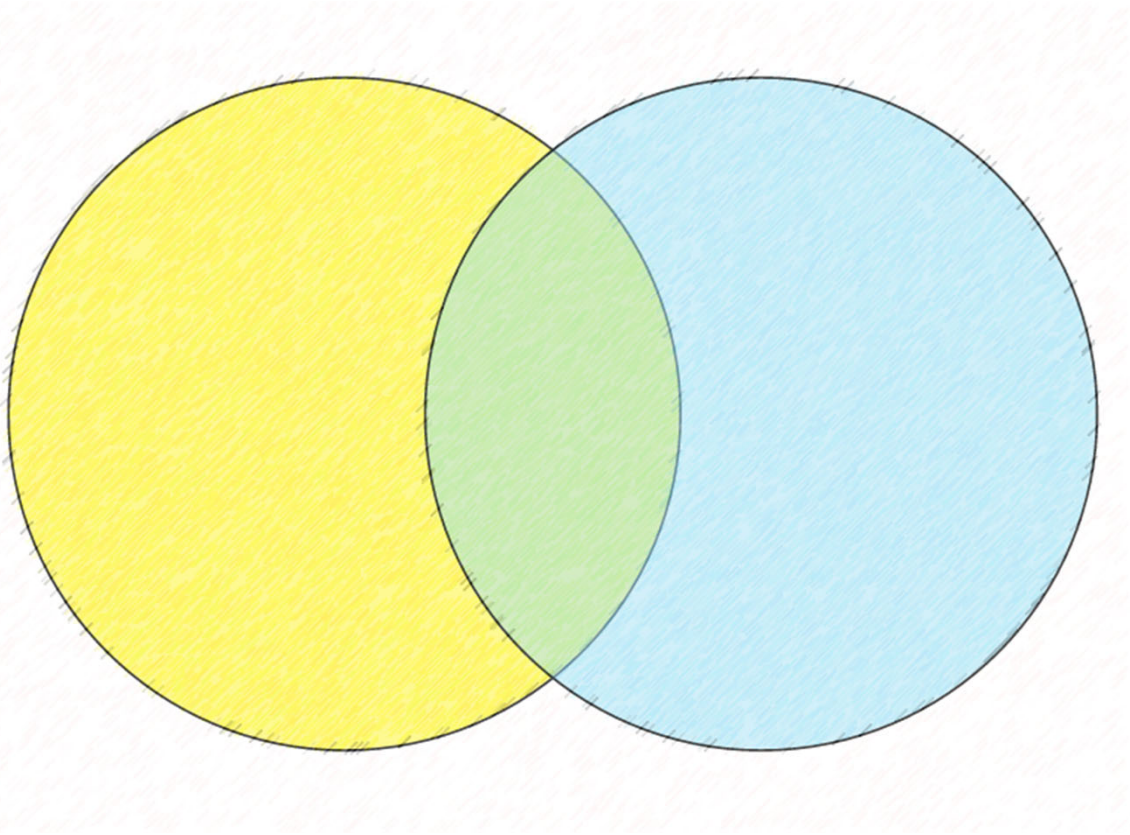


Outcome measures:
Proximal measures of change



Outcome measures: Tools and scales

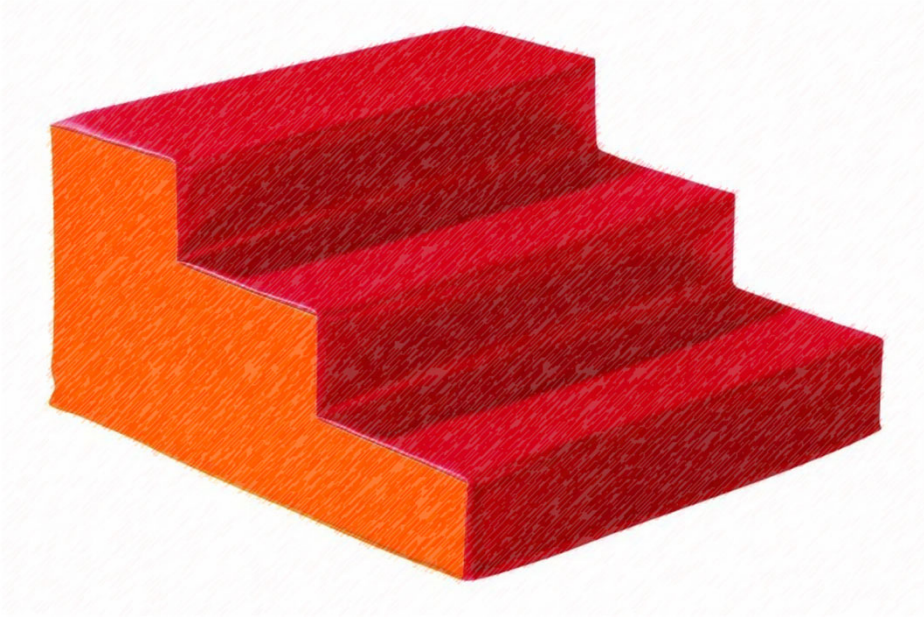
- Project Mirabal scales
- Actuarial risk assessment scales
- Violent & controlling behaviour checklists
- Project IMPACT

Program logic

Boring bureaucratic process …
or genuine driver of program quality?

3 levels of program logic models

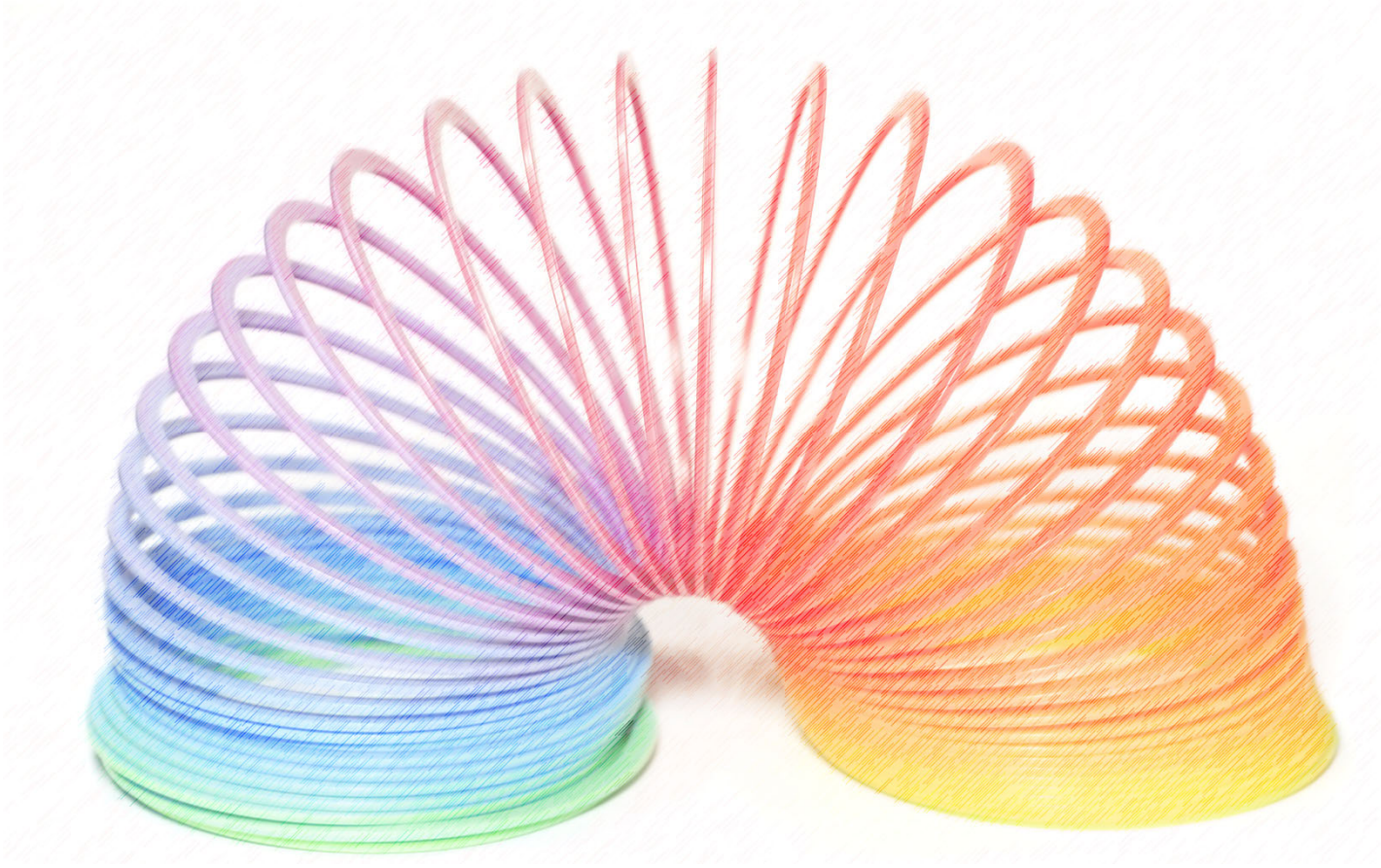
1. Systems level
2. Program level
3. Individual change level



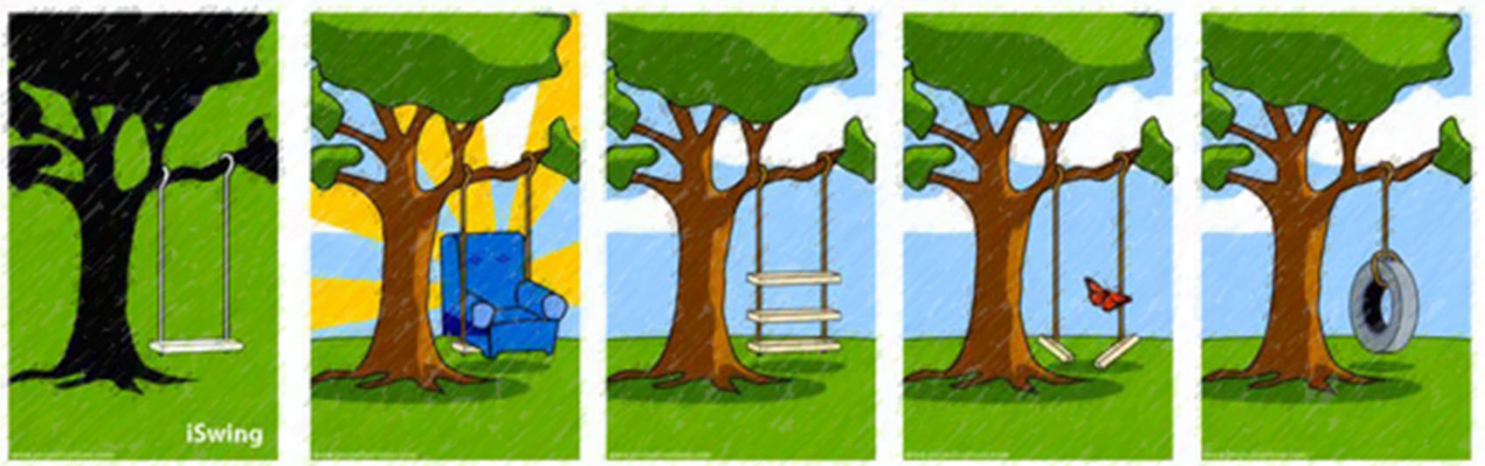
Monitoring & evaluation frameworks

Without conceptual clarity about objectives and change mechanisms, you can't evaluate

Program integrity



Monitoring program integrity



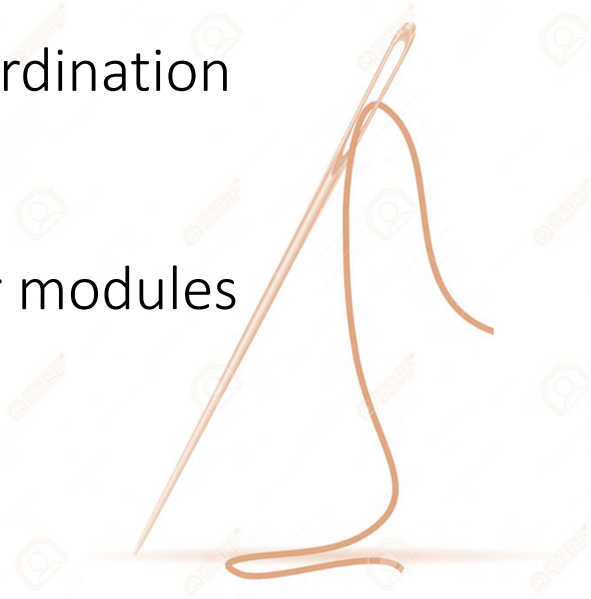
Tailoring interventions

RNR

Differential responses?

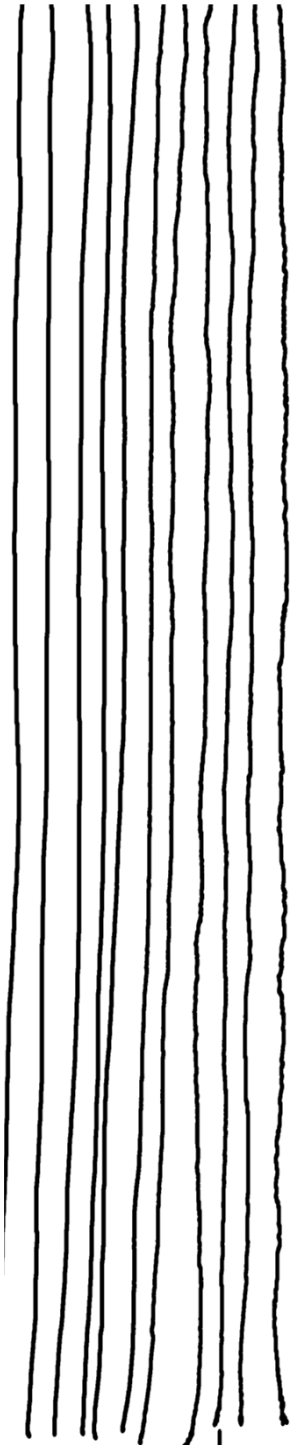
Tailoring interventions in practice

- More time for initial and ongoing assessment
- Strengthening program readiness and capacity to participate
- Case planning
- Case reviews … including joint reviews with the referrer
- Case management … and service coordination
- Supplementary individual sessions
- Optional intervention components or modules
- Safety & accountability planning



Tailoring interventions

Barriers to tailoring



Practitioner focus groups

- Managing low levels of readiness to change
- Assessment tools often not fit for purpose
- Quality of the program materials affects program integrity
- Little consistency about the signposts for change
- Very little window into outcomes
- Some attempts towards individualised safety planning
- Relationships with referrers …

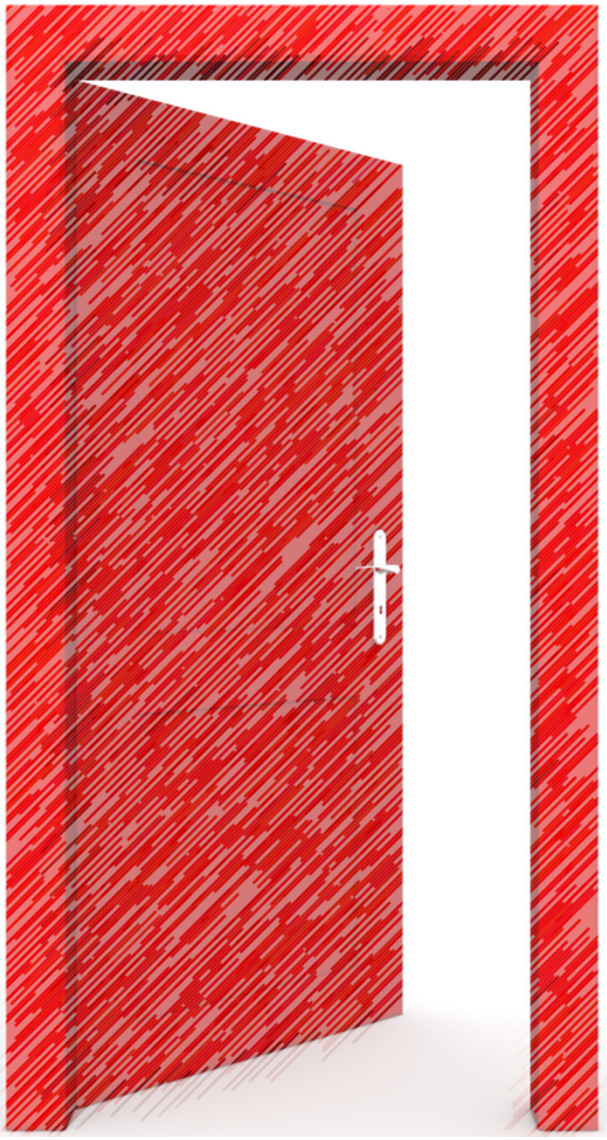
Tailoring interventions

- Providing a program or responding to risk?

Safety & accountability planning

Safety & accountability planning

More than an exit plan



Safety & accountability planning

Building it in throughout the program

Process as important as the product

Initial assessment phase

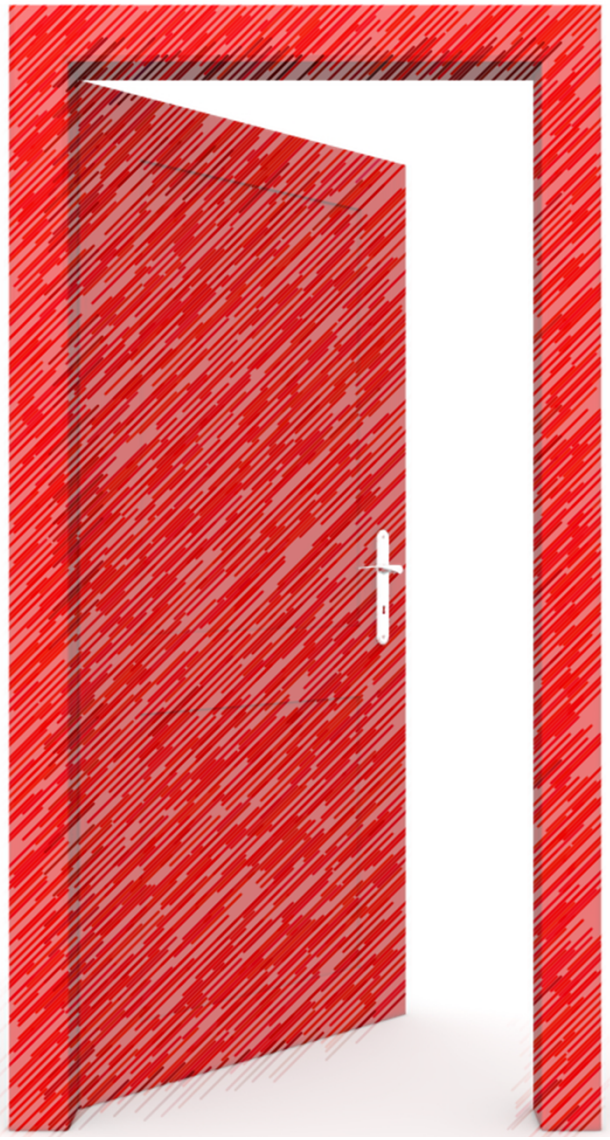
Safety & accountability review processes – harnessing involvement of the group

Use of individual sessions

Strengthening plans after high impact sessions

Extended exit process

Follow-up on whether he is using it!



Safety & accountability planning

Safety & accountability planning

Not a practitioner case formulation or case plan

Creativity required!

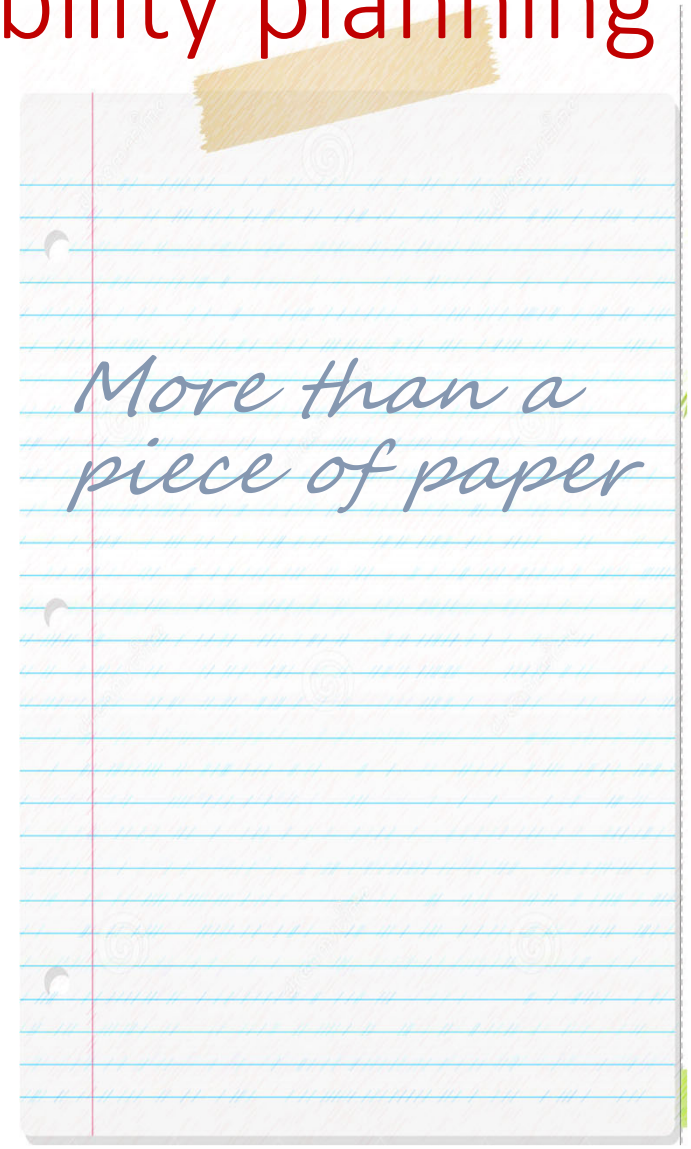
Active involvement of the man – *it's his plan to be accountable to those his violence impacts upon*

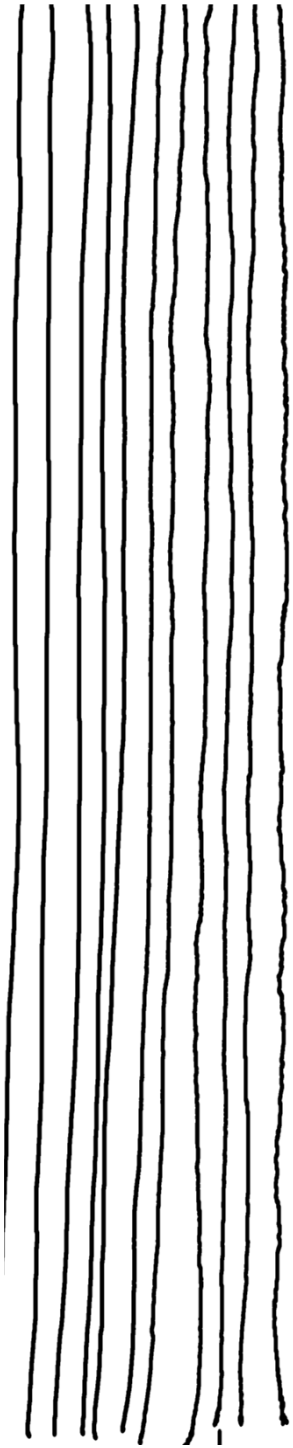
… though scaffolding his work on developing the plan is required

… some men will need more scaffolding than others

Attuned to his preferred learning and information processing styles

Uses media / formats that he will most readily access, and that have impact





Recommendations

1. Program providers should be supported to give more attention to their program's theory of change, including the development of program logic models.

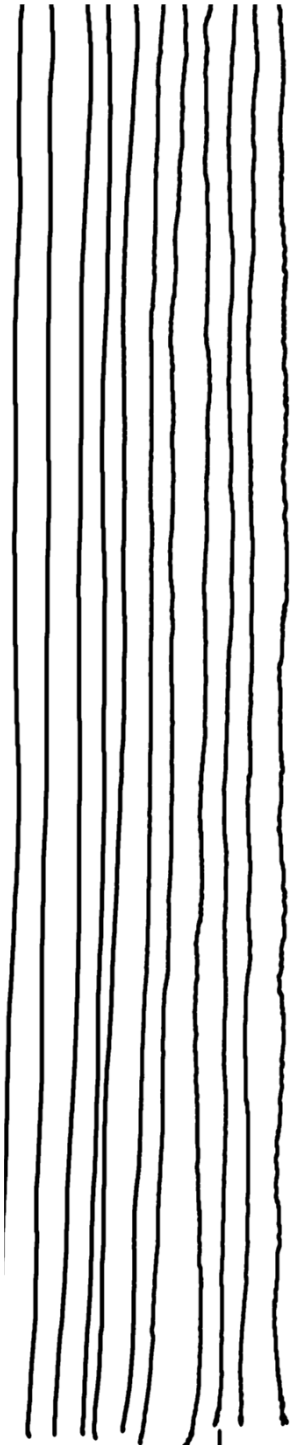
2. Program logic models should consider systems-level, individual-level and (if appropriate) community-level impacts and outcomes.

3. Program providers should be supported to implement processes that monitor and improve program integrity and fidelity – but not in a way that leads to rigid, over-manualised approaches.

4. The development of minimum standards, at the current time, should be based on (sufficiently detailed, articulated and nuanced) practice principles rather than practice prescriptions.

5. Minimum standards should focus as much on an organisation's capacity to safely and sustainably provide a range of specialist perpetrator interventions as on the specifics of any particular program run.

6. Accreditation systems based on monitoring program provider compliance with minimum standards need to be multi-component rather than singular 'tick and flick' registration processes, and include observations of live practice.



7. Accreditation systems should be constructed and enacted in ways that support program providers to reflect upon and improve the quality of their practice in line with agency-level vision and ethos – not only as a means to monitor adherence to standards.

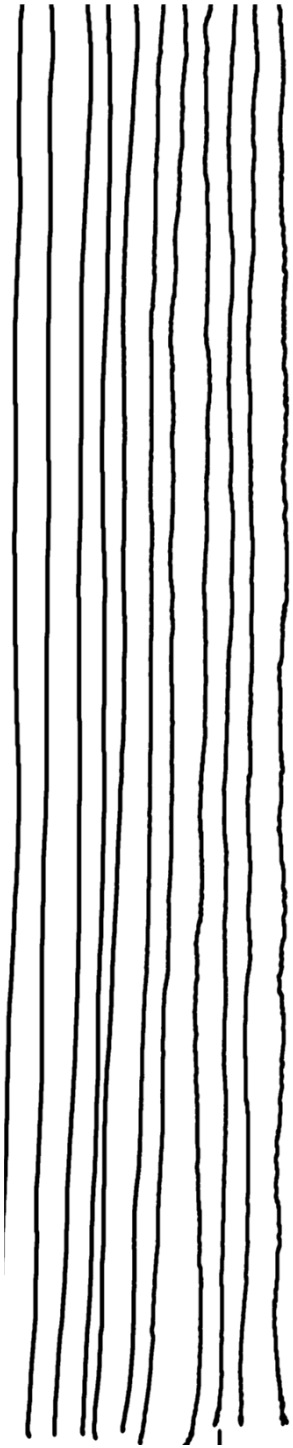
8. Safety and accountability planning should be prioritised in sector and practice development efforts as a potentially high impact way to improve the quality and effectiveness of MBCP provision.

9. If calls are to continue for community-based MBCP providers to adopt RNR and other principles to tailor their programs to individual perpetrator and family circumstances, they need to be funded and equipped to do so.

10. A national, MBCP outcomes framework should be developed to engender some consistency in evaluation frameworks and evaluation activity, and to help build the evidence base.

11. Program providers should be supported to extend their program logic models into evaluation and performance monitoring plans, even if not all aspects of the plan can immediately be implemented.

12. Australian jurisdictions should consider shared work to develop the equivalent of the European Project Impact outcome evaluation tools and researcher-practitioner partnerships.



13. A suite of outcome evaluation tools should include victim-centred measures that focus on exposure to coercive control.

14. Evaluation plans should include measures of impacts on adult and child victims that do not rely on changes in the perpetrator's behaviour.

15. Proximal measures of the impact of MBCPs offer considerable promise to guide clinical and program evaluation efforts, but work in this area needs to be embedded within a research and evaluation stream that is adequately resourced.

16. Research to identify quality practice in partner support and safety work is urgently needed.

17. Partner support and safety work needs to be properly funded and prioritised, rather than remaining secondary relative to resources allocated to engaging perpetrators. Please consider removing this list for consistency with the executive summary and repetition with the below tables of recommendations.

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