



Government of Western Australia
Department for Child Protection
and Family Support

Practice Standards for Perpetrator Intervention: Engaging and Responding to Men who are Perpetrators of Family and Domestic Violence

FREEDOM FROM *FEAR*



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Introduction

Family and domestic violence is a gendered crime perpetrated mainly by men against their female intimate partners or family members. In Australia, anywhere between one in three (Mouzos & Makkai, 2004) and one in five women (ABS 2005; 2012) experience violence by an intimate partner or family member and one in four children witness this abuse while they are growing up (Indermaur, 2001). For Aboriginal women and children, the rates are even higher with up to one in two experiencing family and domestic violence (Mouzos & Makkai, 2004; AIHW, 2006).

The impacts of family and domestic violence for adult and child victims are pervasive, affecting all aspects of health and wellbeing. Family and domestic violence is the leading cause of: perceived and actual threats to safety for women and children (ABS, 2005; 2012); non-accidental injury and death for women aged between 15 and 44 (VicHealth 2004); homelessness for women and children (Tully, Faulkner, Cutler & Slatter, 2008); mental health diagnoses and substance misuse for women (Golding, 1999; Keys & Young, 1998); and physical and emotional harm (or risk of) for children (Humphreys 2007).

The prevalence of family and domestic violence and the magnitude of its effects on the health and wellbeing of adult and child victims, is caused in part by the often inconsistent, incoherent and ineffective responses to the men at risk of or using violence. This includes:

- ☉ engaging women and children around strategies to keep themselves safe in isolation of a response to the perpetrator. This often leads to men who use violence being 'invisible' to the service system which can reduce women's confidence in the service response and exacerbate risk;
- ☉ inconsistent responses/decision making within the criminal justice system;
- ☉ siloed approaches to service delivery including agencies and organisations working in isolation with limited to no sharing of information or case coordination;
- ☉ inadvertent collusion with perpetrators deflections, minimisations or victim blaming;
- ☉ limited capacity to identify and respond to perpetrators of family and domestic violence when they present in non-violence related fields e.g., substance misuse, mental health; and
- ☉ limited capacity to respond to men using violence who have complex or diverse needs such as co-occurring substance misuse or mental health issues, men with disability or English as a second language.

As a result, the safety for women and children experiencing family and domestic violence is regularly undermined or compromised; men who use violence continue to do so without consequence; service providers feel increasingly frustrated and hamstrung; and violence supportive community attitudes are reinforced.

To redress this situation, the Western Australian government has committed to improving the safety and outcomes for women and children experiencing family and domestic violence through introduction of an *integrated* and

accountable systems response that prioritises victim safety and perpetrator accountability. This is formalised through the state government's commitment to the *National Plan to Reduce Violence against Women and their Children 2010-2022* and *Western Australia's Family and Domestic Violence Prevention Strategy to 2022*.

Integrated responses to family and domestic violence are recognised nationally and internationally as best practice. The term 'integrated response' refers to government agencies and community sector services working in a coordinated and collaborative manner to provide holistic, safe and accountable responses to victims and perpetrators of family and domestic violence; streamlined pathways through the service system; and coordinated service delivery between agencies. Integrated responses increase the collective capacity and effectiveness of the service system to identify and respond to victims and perpetrators. With regards to men who are using violence, the important functions of an integrated response include but are not limited to: promoting gender equity; reducing community tolerance to violence through information, education and direct action; identifying men using violence; engaging men about their violence; assessing, managing and monitoring risk; supporting behaviour change; and providing options for the containment of violence and risk.

Accountable responses to family and domestic violence prioritise the safety of women and children and hold men responsible for their use of violence. In practice, an accountable service response to men using violence provides consistent and constant messages and actions that violence will not be tolerated, is not justifiable, normal or excusable. The actions that may result from this stance will vary according to the agency or organisation involved. However, at a minimum, would include: providing consistent information and messages that violence is not tolerated or accepted; not colluding with men's deflections or victim blaming; providing referrals to behaviour change interventions; sharing information about risk; reporting criminal offences; reporting concerns about the child and adult victim to child protection (and/or other relevant authorities); participating in multi-agency case (risk) management; and contributing to the monitoring of a man's use of violence.

Practice Standards for Perpetrator Intervention

The purpose of the practice standards is to support agencies and organisations to provide a response to men using violence that holds them accountable and provides opportunity for them to take responsibility for their behaviour. The practice standards are separated into two distinct parts: minimum standards for men's family and domestic violence behaviour change programs and outcome standards for perpetrator intervention. A summary of each is outlined below.

1. *Minimum standards for men's family and domestic violence behaviour change programs.* The minimum standards establish the key components of program governance, design, delivery and review/evaluation that all men's behaviour change program must adhere to.
2. *Outcome standards for perpetrator intervention.* The outcome standards establish the overarching standards of best practice necessary for leading effective work towards safety for women and children. These standards apply to all aspects of the service system including legislation, strategic and operational policy, procurement processes and service provision.



The Practice Standards for Perpetrator Intervention

The minimum standards for men's family and domestic violence behaviour change programs and outcome standards for perpetrator intervention aim to promote good practice responses to men who are using violence towards their intimate partner, children or family.

Developing the Practice Standards for Perpetrator Intervention

The Practice Standards for Perpetrator Intervention were developed by the Department for Child Protection and Family Support in consultation with an across government working group that included:

- ☉ Professor Donna Chung, Curtin University;
- ☉ Department of Corrective Services;
- ☉ Department of the Attorney General;
- ☉ Legal Aid;
- ☉ Western Australia Police; and the
- ☉ Women's Council for Domestic and Family Violence Services.

The standards are based upon the following documents which were adapted with permission to suit the WA context including legislative and policy frameworks. The working group also drew upon the advice and guidance of *No to Violence: Male Family Violence Prevention Association*.

1. *Minimum Standards for Men's Domestic Violence Behaviour Change Programs*, Department of Attorney General and Justice, New South Wales.
2. *National Outcome Standards for Perpetrator Intervention*, Department of Social Services, Commonwealth.¹

Focusing on men who use violence

The aim of these standards is to enhance the safety of women and children through the provision of an integrated and accountable response to men who are using violence. The decision to focus these standards on men using violence is not intended to imply that men are always the perpetrator of intimate partner or family and domestic violence, or that they do not experience violence in these contexts. Rather it reflects that the context in which violence is perpetrated and experienced is important for informing responses. In the case of these standards, the critical context is gendered violence.

Overview of the Practice Standards for Perpetrator Intervention

This document is comprised of three parts: definitions of key terms and concepts; the minimum standards for the development and delivery of men's family and domestic violence behaviour change programs; and the outcome standards for perpetrator intervention².

¹ Under development, due for release in 2015.

Target audience

This document has two distinct target audiences:

- ☀ Service providers, agencies and organisations who procure or facilitate men's family and domestic violence behaviour change programs. The minimum standards for men's behaviour change programs and outcome standards for perpetrator intervention are relevant to this target group.
- ☀ Service providers, agencies and organisations who are involved in responding to adults and children experiencing or perpetrating family and domestic violence (including those who may procure these services). This includes services who are engaged with men who are using violence but who may not be involved in providing a direct response to the violence e.g., alcohol and other drugs and mental health services. The standards for perpetrator intervention are relevant to this target group.

Endorsement and implementation

The standards have been endorsed by the:

- ☀ Minister for Child Protection
The Department for Child Protection and Family Support is the lead agency responsible for family and domestic violence strategic planning and the Minister for Child Protection is responsible for overseeing this work.
- ☀ Family and Domestic Violence Senior Officer's Group (SOG)
The SOG is convened by the Department for Child Protection and Family Support and includes representatives from state and commonwealth government departments that have a role in responding to family and domestic violence and the community services sector through the Women's Council for Domestic and Family Violence Services. The SOG is responsible for overseeing the development, implementation and monitoring of an integrated and accountable systems response to family and domestic violence in Western Australia.

For family and domestic violence services funded by the Department for Child Protection and Family Support or the Department of Corrective Services, the Practice Standards for Perpetrator Intervention form part of service agreements.

Related policies and procedures

The Practice Standards for Perpetrator Intervention are complemented by or align to the following policy and procedures. Professionals, organisations and agencies implementing these standards must be familiar with and guided by these documents:

- ☀ Western Australia's Family and Domestic Violence Prevention Strategy to 2022;
- ☀ Family and Domestic Violence Common Risk Assessment and Risk Management Framework;
- ☀ Guidelines for Multi-Agency Case Management;
- ☀ Memorandum of Understanding: Information Sharing between Agencies with Responsibilities for Preventing and Responding to Family and Domestic Violence in Western Australia;
- ☀ Practice Guidelines: Women's and Children's Family and Domestic Violence Counselling and Support Programs; and the
- ☀ National Outcome Standards for Perpetrator Intervention.²

² This document is under development, due for release in 2015.

Definitions

Family and domestic violence

The following definition is adapted with permission from *No to Violence: Male Family Violence Prevention Association*, Victoria.

Family and domestic violence is characterised by a pattern of coercive control that one person exercises over another to dominate and get their way. It is behaviour that physically harms, creates fear, prevents a person from doing what they want, or compels them to behave in ways they do not freely choose. The use of coercive controlling behaviour is deliberate, systematic and often occurs over a long period of time.

Family and domestic violence can occur in many different kinds of intimate or family relationships including from one partner towards another, from a parent to a child, from an adult to an elderly relative, and from an adolescent towards a parent. Most frequently however, family and domestic violence is perpetrated by men against their female intimate partners and children.

Forms of violence are wide ranging and can include any kind of behaviour that provokes fears or seeks to compel or control another person's behaviour. The following 'categories' of violence are typically referred to in the family and domestic violence field however they should not be regarded as definitive.

- ☉ **physical violence** — any behaviour that is intended to cause harm e.g. pushing, slapping, punching, choking and kicking;
- ☉ **sexual violence** — forced sexual contact/activity. "Forced" in this context refers to individuals who are physically coerced to participate or who are not in a position to say no as a result of fear, threats or intimidation;
- ☉ **emotional violence** — threats, put-downs, insults, shouting, mind games, manipulation, humiliation, making the person feel worthless or no good;
- ☉ **social violence** — keeping the victim away from friends, family, work and/or other social opportunities;
- ☉ **financial violence** — controlling the money and decisions around its use, taking or limiting money, stealing;
- ☉ **spiritual violence** — keeping someone away from places of worship or forcing them to participate in spiritual or religious practice that they do not want to be involved with (Carrington & Phillips, 2003; Tually, et al., 2008).

A note on language: In this document the term 'perpetrator' and a man who is using violence are used interchangeably.

Victim safety

The terms 'victim' and 'victim safety' are used throughout this document. 'Victim' refers to adults and children harmed or at risk of harm as a result of family and domestic violence. The term is broadly used to include women and children who are experiencing family and domestic violence and those that may be affected or harmed through secondary exposure/victimisation. In Western Australia exposing a child to family and domestic violence is a form of child abuse and the person responsible for causing harm to the child is the perpetrator of the violence³.

'Victim safety' is a term used to denote a victim's relative safety in relation to the risks posed by the perpetrator. Victims of family and domestic violence cannot and will not be safe if the risks associated with the perpetrator have not been managed. Assessments of victim safety must consider their physical, emotional and social wellbeing and economic security over the short and long term. Good practice assessment includes a structured professional judgement that is informed by family and domestic violence risk indicators, professional judgement and the victim's perspective about their level of risk and safety⁴.

Perpetrator intervention

The term perpetrator intervention is used to describe actions, initiatives, strategies and responses aimed at increasing or promoting the safety of women and children through responses to men who are at risk of, or using violence. Perpetrator intervention can occur across a continuum from primary prevention which may include social marketing campaigns or community education through to tertiary intervention including responses within the civil and criminal justice systems.

Men's family and domestic violence behaviour change programs

A men's family and domestic violence behaviour change program is an intervention that works to increase the safety of women and children by engaging perpetrators of family and domestic violence in a group program that:

- ☉ deconstructs violent and abusive attitudes and behaviours;
- ☉ addresses the social context within which violence towards partners and children is situated;
- ☉ creates opportunities for men using violence to understand the impacts on partners and children, emphasising their choice to use violence and abuse; and
- ☉ develops alternative strategies to their use of violence.

The paramount consideration for men's behaviour change programs is the safety of adult and child victims. Safety is managed through the ongoing assessment of risk, partner contact and information sharing, referral and collaboration with other agencies and organisations in the community including police, courts, corrections and women's family and domestic violence services.

3 Family and Domestic Violence Policy, Department for Child Protection and Family Support.

4 See the Family and Domestic Violence Common Risk Assessment and Risk Management Framework for further information about risk assessment.

Minimum standards for men's family and domestic violence behaviour change programs

The minimum standards outlined in this document are for all men's family and domestic violence behaviour change programs operating in Western Australia. This includes voluntary and mandated programs, programs offered in community or prison, and programs run or facilitated by government agencies and community sector services.

The minimum standards are underpinned by an explicit stance that ***all forms of violence are unacceptable and will not be tolerated***; and ***men who use violence are responsible for their behaviour and can choose to not use violence***. The minimum standards are grouped under the following five principles. The principles reflect the aspects of men's behaviour change work that are considered to be the most critical/fundamental for supporting safe and accountable responses to men who are using violence. The principles are:

1. Safety of women and children must be given the highest priority.
2. Victim safety and perpetrator accountability are best achieved through an integrated systems response that ensures that all relevant agencies work together.
3. Challenging family and domestic violence requires a sustained commitment to professional and evidence based practice.
4. Perpetrators of family and domestic violence must be held accountable for their behaviour.
5. Programs should respond to the diverse needs of the participants and partners.

In addition to these principles, the minimum standards are informed by the following ethics. These are referred to throughout the minimum standards but are considered essential to the safe delivery of programs, therefore are reiterated below:

1. An important source of information about risk, safety and behaviour change is the man's current and/or former intimate partner/s.
2. The operation of men's behaviour change programs must occur in partnership with agencies and organisations in the community and be open and transparent with those agency partners.
3. Information sharing is critical for assessing, managing and monitoring risk and must be an ongoing feature of men's behaviour change practice.
4. A commitment to evidence based practice including continual monitoring, review and evaluation is imperative for furthering the safety of women and children.

Key terms used throughout the minimum standards include:

'Participant/man/perpetrator': used interchangeably to refer to the man participating in the men's family and domestic violence behaviour change program (MBCP).

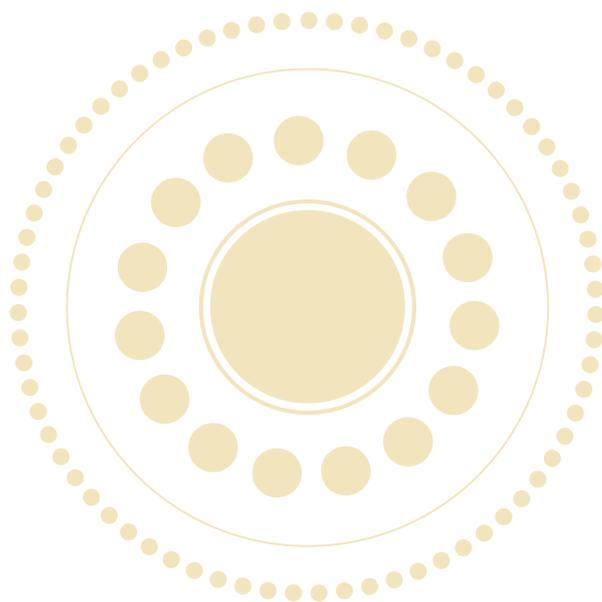
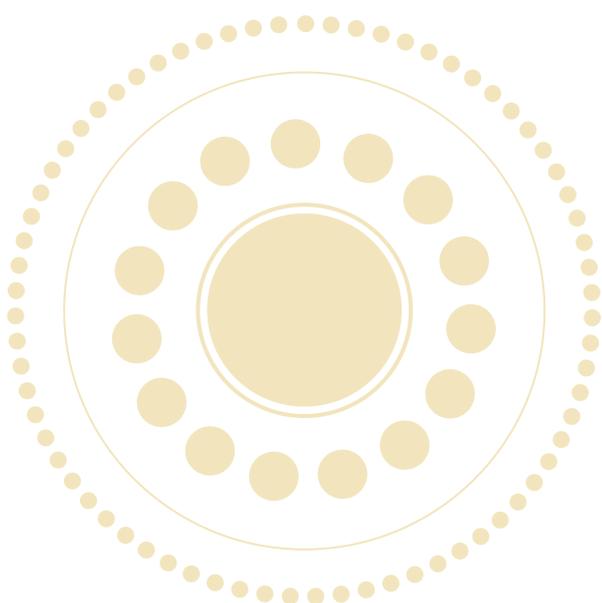
'Women and child/adult and child victim/man's partner': used interchangeably to refer to the person/s experiencing or at risk of violence.

'Program provider': refers to the organisation that is delivering the MBCP.

'Program/group facilitator': refers to the practitioners who are responsible for delivering the MBCP.

'Partner contact': is a program component of the MBCP that involves continual contact with a man's current and/or former partners (the victims of his violence).

'Partner support worker': refers to the practitioners responsible for partner contact.



Principle 1

The safety of women and children must be given the highest priority

Standard 1.1: Program providers will develop and operate from written procedures that address risks to women and children

In planning behaviour change group programs, providers must give priority to the safety of women, children and victims of program participants.

Program providers must develop and implement policies and procedures regarding:

- ☉ regular and systematic monitoring of threats or risks to safety;
- ☉ responsibility of the provider in managing, or otherwise responding to, the risks identified;
- ☉ responding to perceived threats of safety including reviewing critical incidents;
- ☉ responding to criminal acts and potential breaches of court orders;
- ☉ notifying relevant authorities of possible risk to children; and
- ☉ convening or being a part of multi-agency case management for perpetrators that pose high risk of future harm to their partner and children.

These procedures will be explained to men, partners and children upon entry to the program, and thereafter as needed.

Standard 1.2: Program providers will ensure that current partners of program participants are provided with support prior to and during the program

Partner contact should commence from the date a man is first engaged by the men's behaviour change program i.e., for initial assessment. At a minimum, partner contact should occur weekly, including during waitlist periods between initial assessment and program commencement, with additional support provided as needed to suit the needs of women and children.

Details about the purpose of partner contact, the role of partner support workers and minimum requirements regarding training/qualifications and professional experience is outlined in standards 1.3-1.8.

Partner contact can be provided by an external agency, through a partnership with a local victim support service, or internally through a designated partner support worker. The provision of partner contact by an external agency may be an ongoing arrangement and/or could be used in circumstances where a support agency is already providing domestic violence advocacy and support services to the woman and children, and it is considered that

they would be best placed to provide the services that would ordinarily be offered by a partner support worker. This should be considered in circumstances where the partner support worker is having difficulty contacting or engaging the woman.

Whether partner contact is provided internally by the program provider or by a victim support service, the facilitators of the men's family and domestic violence behaviour change program and workers (or service) providing partner contact must work closely together to support victim safety and the management of risk. This must include: continual information exchange and discussion about risk, safety and wellbeing concerns; and joint planning to support the safety and wellbeing of the woman and children.

When partner support is provided by an external agency, a memorandum of understanding must state the obligations of the external agency concerning the provision of victim support. Refer to the note on page 13 for further information.

Standard 1.3: Partner support workers will prepare women for the participation of their partners in a behaviour change group program

A partner support worker will provide information on:

- ☉ the rights of the adult and child victim/s including safety, legal protection, support and information;
- ☉ the limitations of men's behaviour change group programs including the real possibility that the violence and controlling behaviours may not stop;
- ☉ the participant's attendance and participation in the group including what the group will be talking about;
- ☉ what the program provider will do in the event of a participant breaching a court order or committing any act of violence against them or their children; and
- ☉ support services and resources.

Standard 1.4: Partner support workers will complete individual risk assessments and safety plans

The risk assessment will be conducted using the common approach outlined in the Family and Domestic Violence Common Risk Assessment and Risk Management Framework which includes: consideration of evidence based risk factors; professional judgement about further/additional risk, vulnerability or protective factors such as age, disability, isolation, cultural background, religious background, family pressures, sexuality and financial dependence; and the victim's assessment of the level of risk posed by the perpetrator.

Safety planning will be individualised and include developing a plan that anticipates and reduces known risks, clarifies how a woman can respond to emergencies, identifies indicators of escalation of violence and clarifies how she can communicate with the contact support worker, agency or police emergency contacts.

In cases of high risk, the partner support worker will participate in multi-agency risk management (see standard 2.2)

Standard 1.5: The partner support worker is to provide emotional and practical support for women and children

Women and children must have access to emotional and practical support through the partner support worker and/or other referral options.

Partner contact must be delivered in a manner that supports the diversity of women's and children's needs by offering a flexible and timely service.

Standard 1.6: The partner support worker is to disclose to women any new expressed or perceived threat to their safety

Policies and procedures will be developed regarding actions to be taken where there is threat (expressed or perceived) to the safety of women and their children. Procedures must include that any information that indicates new or increased risk is immediately communicated by the group facilitator to the partner support worker and in turn to the woman.

Where there are concerns about the immediate safety of a woman and child/ren, the group facilitator and partner support worker will take all necessary action to secure immediate safety. This should involve directly contacting the partner to explain the risk and plan for their safety and liaising with relevant agencies to manage the risk.

Standard 1.7: Group facilitators and partner support workers will have appropriate knowledge and training about the impact of family and domestic violence on women and children

This includes:

- ☉ knowledge about family and domestic violence including the gendered nature, dynamics, and impacts on women and children. Knowledge and experience must be at a sufficient level to enable quality risk assessment;
- ☉ knowledge of legal and statutory responses to family and domestic violence including the criminal justice system, child protection, family law and extensive knowledge of violence restraining orders and how they operate; and
- ☉ formal training about family and domestic violence. Where possible, training should be provided by a recognised training institution or facilitators with expertise in family and domestic violence and/or perpetrator intervention.

It is the responsibility of the program provider to ensure group facilitators and partner support workers possess the requisite knowledge and undertake the required training.

Standard 1.8: Partner support workers must have relevant knowledge, training and experience to enable them to support and advocate for women and children

Any person undertaking partner support work will have as a minimum:

- ☉ experience in advocacy for victims of family and domestic violence; and
- ☉ family and domestic violence case management, risk assessment and safety planning skills.

Note about partner contact delivered through an external agency

When partner contact is provided by an external agency, a memorandum of understanding detailing roles and responsibilities must be developed. In particular, the memorandum of understanding must include clear and specific guidelines about:

- ☉ *information sharing between the men's family and domestic violence behaviour change program and the partner contact agency;*
- ☉ *roles and responsibilities of the partner support worker with regards to minimum standards 1.2 – 1.8; and*
- ☉ *strategies for monitoring and review of the partner contact work and the relationships between the agency delivering partner contact and the men's behaviour change program.*

Principle 2

Victim safety and perpetrator accountability are best achieved through an integrated and accountable systems response

Standard 2.1: To ensure program transparency, accountability and integration, program providers will develop a formal relationship with relevant local agencies

At a minimum, formal relationships will be developed with Western Australia Police, Department for Child Protection and Family Support, Department of Corrective Services, family and domestic violence services for women and children and relevant men's services. Program providers should also seek to establish relationships with local services for Aboriginal people, people from culturally and linguistically diverse backgrounds and people who are of diverse sexuality and gender.

This formal relationship should be established by the program provider and include a documented agreement (or terms of reference) about how the agencies will be involved in the development and ongoing functioning of the men's behaviour change group program.

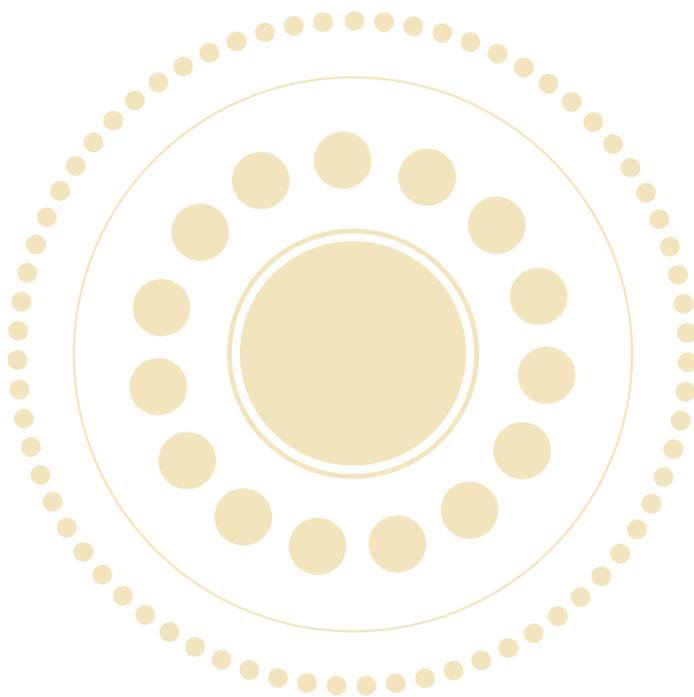
The purpose of the relationship will be to develop processes to:

- ☉ maintain the integrity of the program with its theoretical base including through evaluation and observation/monitoring procedures;
- ☉ ensure that victim safety remains the primary consideration of the program;
- ☉ monitor the implementation of the standards;
- ☉ promote cultural relevance of the program for people who are Aboriginal or culturally and linguistically diverse;
- ☉ promote relevance of the program for people who are of diverse sexuality and gender;
- ☉ develop, implement and monitor information sharing protocols;
- ☉ develop, implement and monitor referral protocols;
- ☉ develop, implement and monitor protocols governing responses to disclosures of violence, breaches of violence restraining order, and non-attendance and/or non-compliance with the program; and
- ☉ review program evaluation results to inform future program planning and delivery.

Standard 2.2: To support risk assessment and risk management, program providers will work collaboratively with relevant local agencies

Program providers will work collaboratively with relevant agencies to assess, manage and monitor risk. This will include:

- ☉ exchanging information with agencies to support/inform:
 - ☉ assessment, management and monitoring of risk;
 - ☉ perpetrator accountability across all systems and services; and
 - ☉ coordination of service responses to the adult and child victim and perpetrator.
- ☉ use of warm referral procedures;
- ☉ case consultation;
- ☉ reporting child protection concerns;
- ☉ reporting criminal and/or high risk behaviour to relevant authorities; and
- ☉ convening and/or participating in multi-agency case management.



Principle 3

Challenging family and domestic violence requires a sustained commitment to professional and evidence-based practice

Standard 3.1: Group facilitators must have relevant knowledge and training

In addition to Standard 1.7 practitioners facilitating men's family and domestic violence behaviour change programs will have, as a minimum, formal group work training from a recognised training institution, which could include tertiary or vocational training.

Standard 3.2: All programs will have a minimum of two group facilitators

One facilitator should be female and one facilitator male to enable positive role-modelling. One of the two group facilitators must have significant experience. Significant experience means a minimum 50 hours supervised practice in delivering men's domestic violence behaviour change group programs.

Standard 3.3: Group facilitators must undertake supervision

Group facilitators must take part in formal, individual, clinical supervision to apply knowledge to practice, to develop skills, and to challenge ideas and practice. Group facilitators who are not experienced will undertake fortnightly supervision. Experienced group facilitators will undertake supervision at least monthly.

The clinical supervisor must have tertiary education in a relevant discipline for example, social sciences, psychology, social work, family and couple therapy as well as relevant clinical experience and knowledge about family and domestic violence.

Standard 3.4: Program providers will develop policies to ensure that group facilitators undertake ongoing professional development

Beyond the initial training required to facilitate men's family and domestic violence behaviour change group programs, it is the responsibility of the program provider to ensure that group facilitators undertake ongoing professional development to build on existing knowledge and maintain an awareness of the current research and practice trends.

Standard 3.5: Programs will have a duration of at least 24 hours

Programs will vary in length and intensity; however programs of less than 24 hours are considered ineffective in changing behaviour.

Standard 3.6: Program providers will complete an operational review of each program focussing on process and content

In order to support continual improvement and maintain a strong focus on women's and children's safety and perpetrator accountability, program providers will conduct an operational review at the end of each program (or every three months). The purpose of the review is to support and sustain the quality and effectiveness of future programs and will include:

- ☉ a review of critical incidents;
- ☉ a review and critical examination of the program's content and delivery;
- ☉ an examination of how the program can be improved to further promote victim safety;
- ☉ an examination of the accessibility to and engagement with participants from a range of cultural backgrounds; and
- ☉ an examination of the extent to which program delivery meets the minimum standards.

To support the review processes, program providers must keep records about critical incidents including incidents involving partners and children and those which occur in program sessions.

Standard 3.7: Program providers will evaluate the impact of programs on the safety of the participants (ex) partner and children

Group facilitators will systematically evaluate the impact of the program on victim safety. To this end, evaluations must include pre and post program assessments of: risk and safety; the participant's use of violence; and the participants' possession of violence supportive attitudes. To enable effective assessment across these three areas, evaluations must incorporate information from multiple sources including the man's partner, police reports, workers (program facilitators and partner support workers), other relevant services and participant self-report.

Standard 3.8: Program providers will contribute to an evidence base for behaviour change programs

Program providers will be required to collect data to contribute to an evidence base for the effectiveness of behaviour change group programs. The data required will be outlined by respective program funding bodies.



Principle 4

Perpetrators of family and domestic violence must be held accountable for their behaviour

Standard 4.1: All aspects of program promotion and delivery promote the safety, wellbeing and equality of women and children

The following core messages should be integrated and emphasised in all aspects of program promotion and delivery:

- ☉ the safety of women and children is priority;
- ☉ there are many ways that a man can be violent and controlling;
- ☉ male family violence has wide-ranging, long lasting negative effects on those who experience it;
- ☉ male family violence is never acceptable or excusable and some forms of violence are illegal;
- ☉ every man has a choice to use violence or not use violence;
- ☉ it is each man's responsibility to stop his violence and abuse;
- ☉ men who use violence are not safe fathers, men can choose to be a safe parent by stopping their use of violent and abusive behaviours; and
- ☉ women and children are in the best position to judge whether men are behaving in less violent and controlling ways.

Standard 4.2: Programs must be grounded in an evidence-based theory of change

The theoretical approach of programs will vary, however it is important that programs are based on evidence of what works. Programs must clearly articulate how the program is intended to change the behaviour of the participants. The programs content and delivery should be consistent with this theoretical base.

Standard 4.3: Program providers will document and implement thorough participant assessment procedures

A structured pre-assessment will take place with the prospective participant and the lead group facilitator. The purpose of the assessment is to contribute to risk assessment, understand the circumstances of the man's family and relationship status and assess their suitability for the men's behaviour change program.

The nature and the content of the assessment needs to be clearly specified in the provider's documentation, and should include:

- ☉ current relationship status, and relationship history;
- ☉ parenting status, and if there are Family Court orders in place;
- ☉ history of using all forms of violent and controlling behaviours;
- ☉ capacity for using all forms of violent and controlling behaviours;
- ☉ possession of weapons;
- ☉ legal standing, including current or previous court proceedings or orders, charges or convictions, and any reports required by statutory or other bodies;
- ☉ understanding of the need for change and willingness to change;
- ☉ commitment and ability to attend group sessions;
- ☉ acceptance that throughout the group program women and children who have been affected by his violence will be contacted; and
- ☉ willingness to accept the policies regarding limited confidentiality and information exchange, and responding to criminal acts and breaches of court orders.

A man may be considered unsuitable for the program if they:

- ☉ are assessed as not having the preparedness to change;
- ☉ are assessed as being unable to successfully participate due to health or safety issues;
- ☉ are unwilling to abide by program requirements that ensure the safety of adult and child victims; or
- ☉ are at any stage considered to have a detrimental impact on the group process or other participants.

If a prospective participant is assessed as not being suitable for the group program, they must be appropriately referred e.g., to violence focussed individual counselling.

Standard 4.4: Program providers will have procedures for engaging participants, which challenge them to acknowledge their abusive behaviour

Procedures should include participation agreements that require prospective participants to:

- ☉ acknowledge their violent behaviour;
- ☉ show a commitment and capacity to attend and participate in the entire program;
- ☉ agree to a worker having regular contact with any women and children who might be affected by their violent and controlling behaviour;
- ☉ acknowledge they are obliged to abide by the law, including all the requirements of any legal orders in force;
- ☉ disclose their access to guns or other weapons (in which case safety risks and safety planning with their partner must be discussed);
- ☉ agree to an ongoing evaluation, and monitoring of their progress in changing their violent behaviour and attitudes;
- ☉ agree to the provider's policies on limited confidentiality and responding to criminal acts or breaches of court orders; and
- ☉ agree that information will be shared between the program provider and referring agency and with relevant government and non-government agencies.

Standard 4.5: Program content will include information on different forms of family and domestic violence and provide opportunities for participants to come to an understanding about the nature of their offending behaviour

Programs will engage participants and assist them to:

- ☉ identify and challenge any ideas, attitudes, beliefs and myths that stand in the way of them taking responsibility of their behaviour in the past, present and future;
- ☉ recognise the many ways that they can be violent and controlling;
- ☉ recognise the impact of family and domestic violence on their capacity to be a safe and responsible father;
- ☉ recognise the effects of their violent and controlling behaviour on others;
- ☉ place others' needs, emotions and welfare on at least an equal footing to their own;
- ☉ use appropriate non-violent and non-controlling behaviours and ways of relating; and
- ☉ prioritise settings and personal relationships (e.g., friendships) that support their choice to use non-violent and non-controlling behaviours and ways of relating.

Standard 4.6: Program content will include information about the impact of violence on a man's parenting including their capacity to be a safe father to their children

Programs will incorporate information about the impact of a man's violent and controlling behaviours on his parenting capacity.

Standard 4.7: Program providers will develop procedures for non-attendance of participants

Where a participant fails to attend or participate in a group program the man's partner, referring agency and agencies involved in the assessment, management and monitoring of risk, will be notified. Program providers must set and enforce clear and consistent policies to deal with non-attendance.

Standard 4.8: Program providers will have procedures for group facilitators to prevent their implicit or explicit collusion with participants' attitudes that support violence against women

Group facilitators must develop skills in identifying and responding to attitudes that support violence against women and underpin abusive behaviour. This will be a specific focus in supervision and in the evaluation of the program.

Standard 4.9: Program providers will offer appropriate referrals to meet participant's additional needs

Participant's additional needs might include housing, alcohol and other drug support, mental health treatment, employment support, therapeutic support and other needs.

Standard 4.10: Program providers must comply with the requirements of a referring agency for a report on a participant's completion of a program

A report should be prepared following participant's completion of the program or following their termination or withdrawal. The report must include:

- ☉ assessment of risk (pre and post program);
- ☉ attendance at the program;
- ☉ assessment of the participants level of insight and behaviour change; and
- ☉ other issues relevant to risk and safety.

A copy of the report should be provided to the referring agency within two weeks of the participants' withdrawal or termination from the program and four weeks following completion of the program. A copy of the report should also be provided to agencies where it may be relevant for informing risk assessment and safety planning.

Please note: the provision of reports does not preclude the need to share information with the referring and other partner agencies throughout the man's participation in the program.

Programs should respond to the diverse needs of the participants and partners

Standard 5.1: Program facilitators must establish and sustain cultural competence through training, secondary consultation and professional networks that include services for Aboriginal people and people of culturally and linguistically diverse backgrounds

Cultural competence is the ability to interact effectively with people across different cultures, this includes an awareness of one's own cultural worldview, the assumptions and biases as well as a positive attitude towards cultural differences, knowledge of different cultural practices and worldviews and cross-cultural communication skills.

Cultural competence of staff is critical for supporting access to and engagement in men's behaviour change and partner contact work.

All staff (program facilitators and partner support workers) must develop and sustain cultural competence for working with Aboriginal people.

Where the community's demographic profile includes a particular cultural group all staff should be supported to develop their knowledge and understanding about that cultural group.

To develop and sustain cultural competence, services should:

- provide or support access to formal training;
- establish professional networks that include services for Aboriginal people and people from culturally and linguistically diverse backgrounds; and
- encourage secondary consultation with service providers (internal or external) who are from that cultural group and/or have expertise in that area.

Standard 5.2: Program materials will use/incorporate language, topics and materials that are culturally relevant

In addition to services and their staff being culturally competent it is important that program content and materials are culturally relevant.

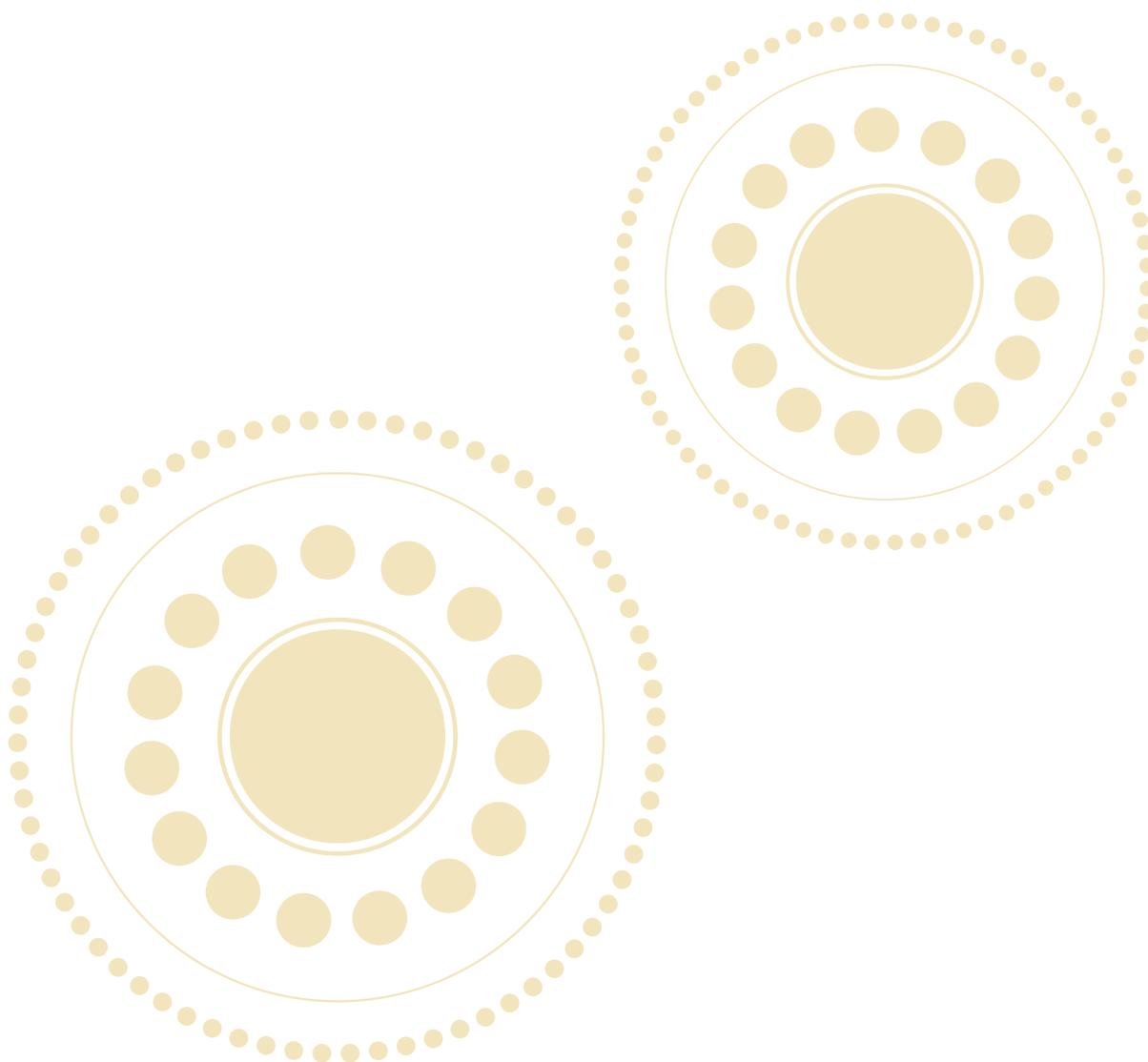
Standard 5.3: Programs addressing other forms of family violence will be specific to the participant's needs

The majority of men who participate in family and domestic violence behaviour change group programs do so in the context of heterosexual relationships, however men who use violence are not always heterosexual and the application of the minimum standards are therefore also relevant for men in same-sex relationships.

Programs must consider issues of safety for gay, bisexual and/or transgender men due to the possibility of homophobic abusive behaviour from other men and facilitators in the group.

Outcome standards for perpetrator intervention

The outcome standards for perpetrator intervention are currently being finalised by the Department of Social Services. It is anticipated that they will be released in 2015. They will be added to this document, along with the corresponding practice requirements for Western Australian government agencies and community sector services, when available.



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