



**REACHOUT MEN'S COMMUNITY OUTREACH SERVICE**  
***CONNECTIONS AND CONVERSATIONS WITH A PURPOSE***

**AN EVALUATION OF THE PILOT**

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**April 2014**

## ACKNOWLEDGMENTS

I am indebted to the many men and women who participated in this evaluation and generously spent time with me to share their experiences and views about the design and establishment of the ReachOut service and its first twelve months of operation. Your in-depth descriptions, deep understandings, thought provoking insights and candid reflections have been pivotal to writing the ReachOut story: *ReachOut Men's Community Outreach Service: Connections and Conversations with a Purpose*. Your voices have provided the means with which to offer a rich account of the various successes and challenges inherent in the stages of the life cycle of a new service development. Moreover, you have contributed to our further understanding about effective ways of working with men to influence their decisions to begin the journey towards a violence-free life and thereby enhance wellbeing for themselves, for their families/whanau and for their communities.

I would also like to extend a special thank you to those who helped me contact the men and women who participated respectively in the telephone interviews and the focus group discussions; the New Zealand Police for providing statistical data for this evaluation report; and, those who provided me with numerous other types of secondary data.

Finally I would like to thank Aviva who provided me with the opportunity to be involved with the ReachOut Men's Community Outreach Service throughout the first twelve months of its operation.

“I had a dream ... all these men floating in the ocean. There was a boat with ReachOut’s name on the bow. Those men who put up their hands got into the boat and were supported on the change journey. It’s important for men to reach out ... to come forward, even if it’s the first time in their lives they have done that. Men have to put their hands up first and admit they have a problem ... if they do that, then they can be supported with their decisions to change.”

*Extract from one of the interviews with a ReachOut client*

## TABLE OF CONTENTS

<b>1</b>	<b>Introduction and Methods .....</b>	<b>16</b>
1.1	Introduction .....	16
1.2	Evaluation Purpose and Objectives .....	18
1.3	Methodological Strategy of Evaluation .....	18
1.3.1	Evaluation Approach.....	18
1.3.2	Evaluation Design.....	22
1.4	Data Collection Techniques .....	26
1.4.1	Data Collection Techniques to ‘Surface’ the Intervention Logic Model .....	27
1.4.2	Data Collection Techniques to Describe the Implementation of the Service .....	27
1.4.3	Data Collection Techniques to Describe Stakeholders’ Experiences and Assess Impact.....	28
1.5	The Procedure .....	31
1.5.1	The Procedure for Collecting and Analysing the Primary Data.....	31
1.5.2	The Procedure for Collecting and Analysing the Secondary Data .....	33
1.6	Ethical Considerations .....	33
<b>2</b>	<b>Family Violence: The Current Landscape .....</b>	<b>37</b>
2.1	Prevalence and Impact: An International Perspective .....	37
2.2	Prevalence and Impact of Family Violence: The New Zealand Situation .....	38
2.3	Current Causal Theories and Family Violence .....	41
2.4	Current Responses to Family Violence .....	43
2.5	Current Level of Empirical Support for the Effectiveness of Intervention Programmes for Men who Perpetrate Family Violence .....	49
2.6	Current Explanations for the Inconclusive Empirical Results about the Effectiveness of Intervention Programmes for Men who Perpetrate Family Violence .....	51
2.7	Transformative Change for Men who Perpetrate Family Violence: Unpacking the Current Problem .....	53
<b>3</b>	<b>Outreach Services.....</b>	<b>57</b>
3.1	Outreach, Help Seeking and Hard-to-Reach Groups .....	57
3.2	Men Who Commit Family Violence Offences As a Hard-to-Reach Group: Why Are They Reticent About Engaging with the Helping Services? .....	58
3.3	Outreach: Origin, Outcomes, Models of Service, Unique Characteristics and Success Factors .....	60
<b>4</b>	<b>Engaging Men in the Journey towards a Life Free of Family Violence: Promising Approaches and Strategies .....</b>	<b>72</b>
4.1	Integrating the Trans-theoretical Model of Behaviour Change and the Protection Motivation Model: A Promising Framework for Engaging Men in the Journey of Change Across a Continuum of Varying Levels of Readiness.....	72

4.2	The Efficacy of Motivational Interviewing in Enhancing Engagement and Readiness to Change .....	77
4.3	The Value of the Therapeutic Alliance in Promoting Engagement.....	78
4.4	Language as a Tool for Maintaining Engagement Whilst Countering the Dilemma of Collusion.....	81
4.5	One-to-One and Individualised Services: Potential for Increasing Engagement ....	82
<b>5</b>	<b>Engaging in the Process of Change: Perspectives and Experiences of Men and Women Affected by Family Violence .....</b>	<b>84</b>
5.1	Turning Points: Perspectives from Men About Factors that Influence Engagement and Change .....	84
5.2	Women’s Perspectives and Experiences Before, During and After their Partners Participation in Men’s Stopping Violence Services .....	88
<b>6</b>	<b>New Service Developments: A Word about the Phases in the Design of a Service Innovation Model and Lessons Learnt about Success Factors .....</b>	<b>91</b>
<b>7</b>	<b>Pre-Conditions for the Effective Implementation of a New Service Development.....</b>	<b>94</b>
7.1	Pre-Conditions for Success Associated with the Nature of the Service .....	94
7.2	Pre-Conditions for Success Associated with the Nature of the Providers of the Service.....	97
7.3	The Nature of the Supporting Organisational Infrastructure .....	98
<b>8</b>	<b>Establishing a New Service: Key Elements Involved in Crystallising an Idea into Reality.....</b>	<b>102</b>
8.1	Identifying the Need.....	102
8.2	Experiential Wisdom: Drawing on Grounded Evidence from the Police’s Experience .....	105
8.3	Factors in the Environment .....	107
8.3.1	Canterbury Earthquake Events: Impact on the Prevalence of Family Violence ...	108
8.3.2	Organisational Change in Strategic Direction: Shifting to a Whole-of-Family Model of Service.....	110
8.4	Community Conversations and Collaboration .....	112
8.5	Theory of Implementation: Drawing on Experiential Wisdom to Articulate the New Paradigm of Change for ReachOut .....	119
8.5.1	Theory of Implementation: Structural and Contextual Enablers.....	119
8.5.2	Theory of Implementation: Building a Trusting Worker/Client Relationship as an Enabler .....	120
8.5.3	Theory of Implementation: ‘Conversations with a Purpose’ – An Enabler that Facilitates Men’s Authentic Engagement with Change.....	121
<b>9</b>	<b>Implementing the ReachOut Service: A Case Study to Illuminate How the Service Functions .....</b>	<b>128</b>
9.1	Demographic and Social History Variables of the Individuals Contributing to the Case Study .....	128
9.2	Circumstances and Approaches at First Contact .....	130

9.3	Engagement Processes and Strategies .....	135
9.3.1	The Foundation is the Powhiri Process .....	135
9.3.2	Establishing Whanaungatanga.....	135
9.3.3	Men Tell Their Stories.....	137
9.3.4	Making Connections and Surfacing the ‘Heart Hook’ .....	139
9.3.5	Establishing Ownership and Responsibility for Actions that Contribute to the Safety of Self and Others and Maintaining Change.....	141
9.3.6	Final Observations from the Case Study: Influencers Underpinning Men’s Change Decisions and Shifts Along the Continuum of Stages of Change .....	148
9.4	Characterising the ReachOut Service: Perspectives of Women’s Family Support Workers .....	150
9.4.1	Demographic and Social History Leading Up to ReachOut’s First Contact with the Men: Perspectives of Women’s Family Support Workers .....	150
9.4.2	Men’s Position on the Stages of Change Continuum and ‘Turning Points’: Perspectives of Women’s Family Support Workers.....	153
9.4.3	Context and Consequences of ReachOut: Perspectives of Women’s Family Support Workers.....	153
<b>10</b>	<b>Implementing ReachOut.....</b>	<b>160</b>
10.1	Elements of the Service that Make the Greatest Contribution to the Outcomes Sought: Views from Professionals and Those with Lived Experience of Family Violence.....	160
<b>11</b>	<b>ReachOut’s Achievements Against Objectives: Outputs, Benefits and Outcomes.....</b>	<b>175</b>
11.1.1.1	Table 1: Key Steps in the ReachOut Model of Service Process	179
11.2	Achievements: Intake and Contact.....	180
11.2.1	Overview of North Canterbury Police Family Violence Investigations.....	180
11.2.1.1	Table 2: Family Violence Investigation Statistics, North Canterbury: Year Ending 31 March 2010 – 2013	180
11.2.1.2	Table 3: North Canterbury Family Violence Investigations by Selected Police Stations for the Year Ended 31 March 2013	181
11.2.2	North Canterbury Police Family Violence Investigations: ReachOut Intake for Year Ending 31 March 2013.....	182
11.2.2.1	Table 4: Men Named as Offenders on North Canterbury POL 1310 Reports on More Than One Occasion during the Year Ended 31 March 2013	183
11.2.2.2	Table 5: Responses to Family Violence Incidents Where Men Were Named as Offenders on the POL 1310 Reports by Location within North Canterbury	184
11.2.2.3	Table 6: Demographic Variables of the Men Listed on the North Canterbury POL 1310 Reports as Offenders during the Year Ended 31 March 2013	184
11.2.3	ReachOut Contacts and Agreements to Engage for Year Ending 31 March 2013	185
11.2.4	ReachOut Engagements and Intervention Strategies for Year Ending 31 March 2013 .....	187
11.2.4.1	Table 7: Demographic and Social History Variables of Men Who Engaged with ReachOut on an Ongoing Basis	189
11.3	The Counter Factual: Women’s Perspective and Experiences When Men Do Not Accept an Offer to Engage with ReachOut.....	191
11.4	Benefits from the Implementation of ReachOut.....	193
11.5	Outcomes Achieved From Implementing the ReachOut Service .....	198

<b>12</b>	<b>Success Factors and Challenges Within and External to the ReachOut Service: Stakeholders' Experiences.....</b>	<b>205</b>
12.1	Place Within and Contribution to the Family Violence Sector .....	205
12.2	Establishing ReachOut: Environmental Factors Impacting on this New Service Development.....	210
12.3	Establishing ReachOut: Issues to Consider During the Design Phase .....	212
12.4	Stages in the Life Cycle of the ReachOut Pilot: The First Twelve Months .....	216
12.4.1	The First Six Months: Challenges Faced and Milestones Achieved .....	216
12.4.2	The Second Six Months: Challenges Faced and Milestones Achieved .....	225
12.5	Moving into the Second Year of Operation: Strengths to Nurture and Suggestions for Fine Tuning.....	228
<b>13</b>	<b>Extending ReachOut to Other Localities: Fidelity Versus Reinvention .....</b>	<b>237</b>
13.1	Community Development and Collaborative Approach .....	238
13.2	Essential Elements of the ReachOut Model of Service that Contribute to its Value Proposition.....	239
13.3	Supportive Organisational Infrastructure .....	241
13.4	A Final Word about Fidelity Versus Reinvention .....	241
<b>14</b>	<b>References.....</b>	<b>243</b>
<b>15</b>	<b>Appendix: Data Collection Documents .....</b>	<b>269</b>
15.1	Appendix A: Sample Letter to Participants .....	269
15.2	Appendix –B: Sample Participants Information Sheet .....	271
15.3	Appendix – C: Sample Consent Form .....	274
15.4	Appendix – D: Questionnaire for Professional Informants .....	275
15.5	Appendix – E: Questionnaire for Telephone Interviews with the Men .....	279
15.6	Appendix F: Questionnaire for Focus Group with Women.....	282

## Executive Summary

Family violence is a major issue that affects the lives of many New Zealanders and creates significant social and economic costs across the wider society (Ministry of Social Development, 2002). The New Zealand Police's reported incidences of family violence have substantially increased over the past decade. Incidents rose by 140% from about 11,300 in 1994/1995 to 27,165 in 2004/2005. Offences rose by 87%, from about 14,600 to 27,343 (Lievore and Mayhew, 2007). In the Canterbury region, the reported incidence and severity of family violence has also increased since the significant earthquake events and continued aftershocks during the period from September 2010. For example, a "53% ... increase in domestic violence (was reported) following the September 2010 earthquake;" <sup>1</sup> and in the Waimakariri district, immediately after the February 2011 earthquake event, the North Canterbury Police reported a 40% increase in reported family violence and levels of reported family violence continued to be greater than those recorded before this natural disaster. <sup>2</sup>

In order to address this burgeoning problem of family violence in North Canterbury and to address a significant service gap for men responsible for family violence incidents, <sup>3</sup> Aviva (formerly Christchurch Women's Refuge) applied for and successfully secured funding to support the design, implementation and evaluation of ReachOut. A first in New Zealand, this unique and innovative service is an outreach initiative involving collaborative partnerships with the Police, Child

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<sup>1</sup> "According to Inspector John Price of the Christchurch Police, 61 cases were reported from 4.35 am Saturday to 2.30pm on Monday, compared with 40 in the previous year" (Source: <http://www.transitionhouse.net/2011/02/earthquake-increases-domestic-violence-we-prepare>; <http://www.nzfvc.org.nz/?=node/72>; [http://www.nzherald.co.nz/nz/news/article.cfm?c\\_id=1&objectid=10671808](http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=10671808)).

<sup>2</sup> Source: Aviva (January 2012:6) Ministry of Social Development Canterbury Social Support (Earthquake) Fund application.

<sup>3</sup> Apart from mandated services for men who are involved in formal legal and criminal justice processes, there are currently no follow-up services operating in New Zealand for men who are responsible for family violence incidences.

Protection Workers and those working across the family violence, criminal justice, local government and other sectors.

In 2012 Aviva commissioned an independent evaluation of the process and impact of ReachOut during its first twelve months of operation. The objectives for the evaluation of ReachOut were:

- To provide an indication about the benefits and the extent and level of progress made against the outcomes sought for a) men as family violence perpetrators b) women and children, who have experience of family violence and c) the North Canterbury community.
- To understand more fully and articulate key aspects of the ReachOut service that are expected to influence and bring about the desired outcomes
- To provide an evidence base with which to inform decisions about continuous quality improvements to ReachOut's operation
- To provide an evidence base to inform decisions about its potential for rollout and transferability to other locations.

The evaluation adopted a multiple methods approach in order to maximise the comprehensiveness of the qualitative and quantitative information collected to answer the evaluation questions and address the evaluation objectives. The principle evaluation methods used included the synthesis of the pertinent international and national literature and the operationalisation of a single case, time series design. This design involved a holistic analysis of the people, service, decisions, policies and organisations involved in the ReachOut service and drew on both secondary data and primary data collected through participant observation, interview and focus group methods.

### **Benefits and Impact of ReachOut**

The evaluation findings suggest that during its first twelve months of operation ReachOut achieved results across multiple layers of the family violence system including those for the community networks, cross disciplinary teams within and across different human service organisations and through direct service delivery to

the target client group – the men who committed family violence offences in North Canterbury.

- For the community, ReachOut contributed to a range of health promotion and family violence prevention activities and provided an additional social support service for community members to access when required.
- For the family violence system, ReachOut provided additional intelligence that was previously inaccessible. This intelligence increased the level and accuracy of information that informed a range of family violence professionals' evidence-based decision making around risk assessments and safety planning for all family members who were a party to family violence incidences.
- For the men who perpetrated family violence and who engaged with ReachOut, the service provided them with an opportunity to access support that has hitherto been unavailable to them; an opportunity to engage with an earlier intervention service at a point of crisis when they were most likely to be open to change efforts; and an opportunity to experience pro-social influence, take responsibility and ownership for effecting their own change and thereby break their pattern of recidivist family violence offending. The evidence suggests that as a result of implementing various change strategies, the men's ability to effectively manage the crisis situation improved, thereby reducing the risk of harm to self and others. Moreover, the majority of men who interacted with ReachOut made progress along the stages of change continuum.
- For women and children, ReachOut contributed to the increased effectiveness of their safety planning and risk mitigation strategies; relieved them of the responsibility of supporting their male partners; and in cases where men took responsibility for demonstrating pro-social attitudes and behaviours, they reported improved quality of life and more respectful relationships within their families.

## Key Aspects of Service that Influenced Outcome Achievement

The evaluation findings suggest that ReachOut's value proposition is founded on its unique combination of key service and contextual characteristics that enabled the achievement of outcomes sought. The service and contextual characteristics that contributed to the results included:

- *Immediacy*: ReachOut engages with men at the point of crisis when they are most likely to be amenable to change and the influence of outside motivators.
- *Outreach*: An assertive, proactive and outreach approach, such as that utilised by ReachOut, is required to engage hard-to-reach groups such as men who perpetrate family violence; as well as shifting the locus of the worker's interaction with the men towards the community – meeting clients in everyday places rather than offices.
- *Men's Family Support Worker Capabilities*: ReachOut had outreach workers with high levels of emotional intelligence and senior-level experience of working with men in the context of the family violence sector. The workers were able to build therapeutic alliances with men that were imbued with trust and hope together with an ability to effectively link with professional colleagues in a way that brought synergy to the combined efforts of those in the family violence system working to address the family violence issue.
- *Therapeutic Alliance*: The ReachOut service involved the establishment of trusting worker/client relationships that were non-shaming, non-judgemental, genuine and honest. These relationships provided the context that facilitated men reducing their defences and further provided the conditions for men to take responsibility for change.
- *Responsibility for Solutions*: With a focus on self-determination, ReachOut provided a context that invited and fostered men's decisions to take responsibility and ownership for the change journey as well as accepting the consequences of their decisions – responsibility and ownership for constructing personally-meaningful change goals and strategies that enhanced motivation for change in the present and sustained such motivation into the future.

- *Individualised and Tailored:* ReachOut uses an approach that respects diversity and adopts appropriate intervention types and approaches that match each man's individual characteristics, presenting needs and level of readiness to change – a tailored approach that enables a particularised focus on change targets that address in a holistic manner the co-morbid conditions that present risk factors for further offending and that are likely to be barriers to the change effort.
- *Family and Community-Systems Centred:* ReachOut provides a model of service that recognises that change occurs within the interactional experiences and relationships between the men and other members of his family and his community. Thus, change strategies are couched within the context of these relationships with the aim of providing pro-social role models and guidance within each man's natural environment and promoting healthy and productive family and community relationships in the future.
- *Achieving Early Change Successes:* Enabling each man to identify personally meaningful, pragmatic and achievable change actions within the context of their everyday lives, that facilitate early benefits for self and others that are likely to further motivate men to continue the journey of change and begin to experience the benefits of a new non-violent identity.

As well as these service-focused success factors, contextual success factors were also critical to ReachOut's point of difference. These contextual factors included:

- *Community Development and Collaboration:* ReachOut was designed, established and implemented within a milieu that valued and nurtured existing networks and relationships within the family violence sector and beyond. This collaborative and community development approach enabled the service to draw on local expertise and experiential wisdom that secured an ownership and passion for the service by key stakeholders and various communities of interest.
- *Sustained Presence and Relationships within the Community Based on Reciprocity:* Devoting time to the development and maintenance of community relationships and networks is a critical success factor for ReachOut. These relationships facilitate the credibility and legitimacy of the ReachOut service

and the trust ensuing from such credibility enables an effective process of information sharing across family violence sector agencies – information sharing that enhances the safety and security of women and children with lived experience of family violence. These trusting professional relationships also enhance men’s access to the ReachOut service through recommendations and referrals from others.

### **Fine Tuning for the Future**

The evaluation findings suggest several areas of focus for those responsible for the continuous improvement of the ReachOut service. These include:

- Developing a results-based performance accountability framework that is outcome focused and reflects the unique combination of success factors associated with an outreach service that targets a hard-to-reach group – factors that centre of aspects of quality, rather than quantity, such as accessibility, responsiveness, relationships and the various enablers of change that contribute to desired results
- Further enhancing progress in relation to the family-centred model of service: With the recognition that many families affected by family violence decide to remain together and/or continue to interact, more is required from ReachOut in partnership with other segments of the family violence sector to further advance a family-centred model of service for families with lived experience of family violence. Whilst acknowledging that Aviva, including ReachOut, has already begun to implement this way of working by including within one agency staff who are respectively working with the men, women and children from one family, the findings suggest that there is a growing willingness to progress this further. This further development would include involving all family members as well as others in the extended community environment in developing plans and actions with which to counter further family violence recidivism and begin the process of building healthy relationships amongst family members
- Promotion for Further Enhancing Access: The evidence suggests that more is required to promote the service in the community to further enhance its accessibility for this hard-to-reach group. Enhancing men’s access to

ReachOut has the potential to further increase its contribution to increasing the safety of women and children and reducing the incidence of family violence recidivism. In association with such promotional activities, ReachOut will need to put in place strategies to ensure there is a balance in the service capacity/client demand equation.

- Further joint promotion of the service by the Police and Aviva as key partners of ReachOut. This promotion would seek to build further understanding about this innovative model of service to ensure the integrity of its implementation is maintained.

### **Rollout and Potential Transferability to Other Locations**

The evaluation findings suggest that extending ReachOut to other localities would involve achieving the appropriate balance between ensuring the fidelity of the 'what works' components of the ReachOut service are implemented with integrity whilst at the same time acknowledging that some customisation will be necessary to meet the diverse needs of different communities. Notably this inclusion of a local flavour to suit local needs was a critical success factor for ReachOut in North Canterbury – a necessary aspect in the establishment and implementation of ReachOut that ensures that wherever this service is implemented stakeholders have an opportunity to build a sense of ownership of and passion for its ongoing success.

**PART ONE**

**INTRODUCTION AND METHODS**

# 1 Introduction and Methods

## 1.1 Introduction

Family violence is a major issue that affects the lives of many New Zealanders and creates significant social and economic costs across the wider society (Ministry of Social Development, 2002). Although its extent cannot be estimated precisely due to under-reporting and variability in definitions and measurement approaches, the numbers of “domestic incidents” and recorded offences flagged by the police as family violence have substantially increased over the past decade. Incidents rose by 140% from about 11,300 in 1994/1995 to 27,165 in 2004/2005. Offences rose by 87%, from about 14,600 to 27,343 (Lievore and Mayhew, 2007).<sup>4</sup>

The significant earthquake events and continued aftershocks, experienced by those residing within the Canterbury region during the period from September 2010, have had a significant impact on the reported incidence and severity of family violence. For example, a “53% ... increase in domestic violence (was reported) following the September 2010 earthquake;”<sup>5</sup> and in the Waimakariri district, immediately after the February 2011 earthquake event, the North Canterbury Police reported a 40% increase in reported family violence and current levels of reported family violence continue to be greater than those recorded before this natural disaster.<sup>6</sup>

In order to address this burgeoning problem of family violence in North Canterbury and to address a significant service gap for men responsible for family violence

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<sup>4</sup> An overview of the extent of family violence in Aotearoa New Zealand is located on the website of the New Zealand Family Violence Clearing House ([www.nzfvc.org.nz](http://www.nzfvc.org.nz)).

<sup>5</sup> “According to Inspector John Price of the Christchurch Police, 61 cases were reported from 4.35 am Saturday to 2.30pm on Monday, compared with 40 in the previous year” (Source: <http://www.transitionhouse.net/2011/02/earthquake-increases-domestic-violence-we-prepare>; <http://www.nzfvc.org.nz/?=node/72>; [http://www.nzherald.co.nz/nz/news/article.cfm?c\\_id=1&objectid=10671808](http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=10671808)).

<sup>6</sup> Source: Aviva (January 2012:6) Ministry of Social Development Canterbury Social Support (Earthquake) Fund application.

incidents,<sup>7</sup> Aviva (formerly Christchurch Women's Refuge) applied for and successfully secured funding to design, develop implement and evaluate a crisis intervention service for men named on Police Incident Reports as offenders or subjects. The service became known as ReachOut. A first in New Zealand, this unique and innovative pilot service is an outreach initiative involving collaborative partnerships with the Police, Child Protection Workers and those working across the family violence, criminal justice and other sectors. Operating alongside existing services and supports for women and children provided by the local refuges, ReachOut's Family Support Workers deliver a service that includes:

- A system of rapid response and early intervention practices that engage men voluntarily and earlier in services to address their violent behaviour;
- A strengths-based outreach approach that provides information, support and advice; and,
- Facilitated referral to other services that positively contribute to the achievement of personal safety plan objectives.

The target group for the service is men who have been named on a Police Incident Report (POL 1310) or Police Safety Order (PSO) as a perpetrator or potential/suspected perpetrator of family violence within the North Canterbury district.

ReachOut is designed to reduce the rate of recidivist family violence; build family safety; and achieve sustainable, healthier relationships. In particular, desired outcomes sought by ReachOut, in the immediate, medium and longer term include:

- Earlier intervention with men who are responsible for family violence
- Increasing rates of uptake and receipt of support by men who are offered it
- A reduction in repeat incidences of family violence in North Canterbury
- Increased safety experienced by women and children

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<sup>7</sup> Apart from mandated services for men who are involved in formal legal and criminal justice processes, there are currently no follow-up services operating in New Zealand for men who are responsible for family violence incidences.

- Increased sense of security for women and children

As part of its funding application, Aviva requested and received funds to commission an independent evaluation of the process and impact of this service's first twelve months of operation. The findings of the evaluation are intended to inform decisions about continued quality improvement of its operation; to inform decisions about its potential for rollout and transferability in other locations; and to assess the impact of ReachOut on the service's target group and the benefits for the wider community.

## **1.2 Evaluation Purpose and Objectives**

There are four main purposes of this evaluation endeavour:

- Service clarification: Clarifying the existing design and implementation of ReachOut
- Service improvement: Ongoing refinements of the implementation and delivery of the ReachOut service
- Service Transferability
- Accountability: Accounting for the resources spent on developing and implementing ReachOut (Owen, 1993:73).

Thus, the purposes are essentially instrumental and utilisation focused.

The specific objectives for the evaluation of ReachOut are:

1. To understand more fully how and why ReachOut operates in a certain way and how it can be enhanced
2. To provide an indication about the extent and level of progress made against the outcomes sought for a) men as family violence perpetrators b) women and children who have experience of family violence and c) the North Canterbury community.

## **1.3 Methodological Strategy of Evaluation**

### **1.3.1 Evaluation Approach**

The overall approach for this evaluation was developed to ensure that it was responsive to those with a vested interest in the delivery and impact of ReachOut. In

order to facilitate such responsiveness, elements of three main approaches were combined:

- Collaborative approach
- Naturalistic inquiry
- Action research

### ***Collaborative Approach***

Kettner, Moroney and Martin (2008:8) have poignantly noted that most problems addressed by human service agencies are so complex that it is unlikely that service from one agency can have a significant and measurable impact. For this reason, they argue that a number of agencies will often collaborate to address the problem in the interests of achieving a more comprehensive impact.

ReachOut exemplifies this observation. It acknowledges that no one organisation or service can address family violence in isolation, and is working collaboratively with other statutory and non-government agencies in a multi-agency partnership to provide a more holistic and systemic approach to family violence within the North Canterbury district. The key agencies involved in this multi-agency family violence prevention effort include the Police, those providing specialist services for women and children (including Aviva and Battered Women's Trust), the Community Probation Service, Child Youth and Family, Waimakariri District Council and Relationships Aotearoa – a diverse group of agencies that may have somewhat different organisational philosophies, operational procedures and knowledge bases, but who have come together with a commitment to reduce the level of family violence within the North Canterbury district. Representatives from these agencies comprise the membership of ReachOut's Steering Group who meet regularly to steer the design, development, implementation and evaluation of this pilot service.<sup>8</sup>

In line with the partnership working required to steer and operationalise ReachOut, this evaluation was committed to a collaborative approach between the evaluative and operational arms of ReachOut.

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<sup>8</sup> Source: North Canterbury Men's Family Violence Intervention Project Steering Group's Terms of Reference.

As part of the evaluation process and in order to develop and implement the evaluation plan, the evaluator and representatives from the partnering agencies on ReachOut's Steering Group explored and came to an agreement about what they wanted to find out, how they hoped to use the information and what could be realistically achieved within the resources available. This ongoing collaborative relationship involved coming to a mutual understanding about the evaluation methodology including:

- The purpose of the evaluation
- The plan for conducting the evaluation, including the key evaluation questions and the types of methods used; and,
- The interpretation of the results

There were several reasons for adopting a collaborative relationship between the evaluator and the members of ReachOut's Steering Group. These included:

- Providing an 'inside' perspective on the requirements of the evaluation project and the ways in which the findings would be used – a perspective that ensured the evaluation work took the right direction and that the findings had utility
- Involving people with experience of the domestic violence sector in the various stages of the evaluation provided the opportunity to generate information about the appropriate orientation and procedures that matched the context within which the evaluation took place, for example information about ways in which to ensure the safety of all those involved in the evaluation was maintained
- Involving stakeholders collaboratively in the evaluation process also had the potential to spark creativity by opening doors to new ways of thinking and perspectives on the issue of family violence and ways in which to address it.

This collaborative approach to the evaluation not only engaged with members of ReachOut's Steering Group, but also engaged and partnered with those responsible for the front-line implementation of the service and the potential beneficiaries of the service – the men perpetrating family violence offending and the women and children who have lived experience of family violence. By involving and consulting with these

parties on their experiences of ReachOut and the impact it had on their lives, the evaluation was enriched in the following ways:

- Those implementing ReachOut and those who may be directly affected by it were most capable of sorting out effective from ineffective service elements and explain why particular techniques or approaches were or were not appropriate, responsive and effective<sup>9</sup>
- It provided a feedback loop for practitioners by offering insights into how they were perceived by those accessing the service; the effective aspects of service provision that they experienced; and, identified areas of service that could be considered for improvement (Weinstein, 2010:164).

### ***Naturalistic Inquiry***

A naturalistic approach was adopted for this evaluation as it has the greatest potential for describing the complexity, richness and context of the ReachOut service. There were several reasons for adopting this approach of naturalistic inquiry including:

- *Accommodating a range of purposes:* Naturalistic inquiry enabled the employment of several data collection and analysis strategies with which to glean the information required to meet the range of purposes associated with this evaluation. This approach was well suited to the tasks of developing the descriptive knowledge about how and why the ReachOut service operates the way it does; and exploring the intended and unintended outcomes of the intervention.
- *Context specific:* Naturalistic inquiry was conducted in a context specific manner enabling an examination of factors within the internal and external environment that influenced the process and outcomes of the ReachOut service

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<sup>9</sup> Ramon (2000) argues that involving those responsible for implementing the service and those who are beneficiaries of the service “leads to a generation of new and more in-depth knowledge, more truthful information from participants” and a better understanding by evaluators of the lives of service beneficiaries.

- *Pluralistic perspective*: Because naturalistic inquiry is largely an inductive approach, it has the potential to uncover pluralistic perspectives about the process of service delivery and areas for enhancement. In addition, the approach recognises the value of both 'insider' and 'outsider' perspectives that enhance the richness of understanding and interpreting the experiences of providing and receiving the ReachOut service.
- *Transferability of the findings*: Naturalistic inquiry enables other contexts, for example urban and rural contexts, to extrapolate the principles, methods and components of the ReachOut service, as applicable.<sup>10</sup>

### **Action Research**

As an innovative pilot service and with its focus on continuously enhancing the service provided to clients and the associated organisational infrastructure that supports the service, an action research approach was ideally suited to this evaluation of ReachOut.

Building action research into this evaluation study had utility because it provided the service's team with the opportunity to look at the meaning, context and process of their work, document their strategies and test and refine them over time. In addition, the action research approach can help to build knowledge about what works and what does not work in particular contexts so others can learn from these experiences.<sup>11</sup>

#### **1.3.2 Evaluation Design**

The evaluation adopted a multiple methods approach in order to maximise the comprehensiveness of the qualitative and quantitative information collected to answer the evaluation questions and address the evaluation purposes. The principle evaluation methods used included the synthesis of the pertinent international and national literature (secondary data) and the operationalisation of a single case, time series design. The single case, time series design involved a holistic analysis of the

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<sup>10</sup> DePloy, E. & S. Gilson (2003) *Evaluation Practice: Thinking and Action Principles for Social Work Practice*. Canada: Brooks/Cole.

Owen, J. (1993) *Program Evaluation: Forms and Approaches*. NSW, Australia: Allen & Unwin.

<sup>11</sup> Lienert, T. (2002) *Doing an Action Research Evaluation*. Stronger Families Learning Exchange Bulletin No. 1 autumn pg 16-20. Retrieved on 05 October 2012 from [www.aifs.govt.au/sf/pubs](http://www.aifs.govt.au/sf/pubs)

people, service, decisions, policies and organisations involved in the ReachOut service and drew on both secondary data (service documentation and records and management information system data pertinent to the process and outcomes of the service) and primary data collected through participant observation, interview and focus group methods.

### ***Secondary Data: Synthesis of the Literature***

The literature review involved a systematic search for and review of published and unpublished research conducted internationally and in New Zealand. Because there was very little existing literature on outreach services for men within the family violence context, the literature search covered wide-ranging, but pertinent, topic and contextual areas and utilised a range of databases that accessed multi-disciplinary journals and other sources.

Research, evaluation and practice-focused articles were sourced through the 'Multi-Search Database Link' from the university database search engine. Combinations of relevant search terms were used to source data for the literature review, these include: "outreach services and family violence," "effectiveness and family violence programmes," "evidence-base and family violence," "domestic violence and New Zealand," "family violence and New Zealand," "family violence and theories," "men's family violence programmes," "help seeking and family violence," "hard to reach groups and family violence," "change and family violence," "motivational interviewing and family violence," "family violence men," "family violence perpetrators," "family violence batterers," "engagement and family violence," "crisis intervention and family violence," "domestic violence and group programmes," "individualised service and family violence," "criminal justice and family violence," "strengths based and family violence," "risk and domestic violence," "innovation and family violence," "good practice and family violence," "readiness for change and domestic violence," "collaboration and family violence," "family violence and prevention," "what works family violence," "family violence success factors," "new service developments and domestic violence," "transferring services," and "evaluation domestic violence."

In addition to the databases, the internet was searched using the Google search engine for additional 'grey' literature. The search terms included all of those listed above.

The literature examined included research and evaluation studies and policy and programme documents. In addition, the review encompassed administrative and service-based data collected by government and non-government agencies.

The review was not an exhaustive review of all available data sources, as this could not be achieved in the time frame for the evaluation. The review describes common or divergent findings across information sources and this information is presented in thematic form around the following categories:

- Understanding the current family violence landscape, including the international and New Zealand situation, causal theories and current responses
- Outreach services, including an examination of hard-to-reach groups, outreach models of service and outcomes
- Change processes, including enabling factors and perspectives and experiences of those with lived experience of family violence
- New service developments, including pre-conditions for effective implementation, success factors and lessons learned

### ***Single Case Design***

The case study design was selected as the frame with which to structure the evaluation of the ReachOut service. This design was selected because it lends itself well to situations of an unusual nature, such as those that are ground breaking and innovative and when the theory underlying the service is largely unknown; and it provides an analytical structure and systematic way with which to describe and explain the operational process and impact of a single service. <sup>12</sup>

From a descriptive perspective, this design involved a detailed analysis of the ReachOut service to explore and determine how it was operating, what challenges to service implementation had been encountered, what strategies had been most

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<sup>12</sup> Yin, Robert K. (2009) *Case Study Research: Design and Methods*. Fourth Edition. California: Sage Publications.

Thomas, G (2011) *A Typology for the Case Study in Social Science Following a Review of Definition, Discourse and Structure*. *Qualitative Inquiry*, 17, 6: 511-521.

successful, and what resources and skills were necessary. Answers to these questions can be useful for those interested in identifying and illuminating key elements of the ReachOut service and in generating hypotheses about the service's impact that can be tested in an impact analysis.

From an explanatory perspective, the case study design can be used to explore causation in order to make explicit the underlying principles of the ReachOut service and the ways in which the service's clients were successful in engaging with and using the service to facilitate positive change for them and those with whom they relate in their personal and social environment.

### ***Enhancing the Case Study Design with Intervention Logic and Time-Series Measures***

The basic case study design for the evaluation of the ReachOut service was further enhanced by including two additional features: the use of an intervention logic model that included both implementation theory and a service theory; and the use of time-series measures with which to investigate changes in the service at a number of points during the implementation of this pilot service.

In combination, the development of implementation and service theories comprising ReachOut's intervention logic add value by respectively:

- 'Surfacing' and making explicit the activities involved in the service – the implementation theory; and,
- Discovering the 'how' and 'why' the various mechanisms of change within the service result in the desired outcomes – the service theory.

In summary, implementation and service theories form the basis for enhancing an understanding about what impacts occurred or failed to occur and how and why. Thus, the evaluation findings aimed to make more explicit our knowledge about the mechanisms of change operating within the ReachOut service. This offered the potential to not only benefit this service and any future endeavours to replicate the

service in other contexts, but also provided the opportunity to uncover the conditions that enabled or obstructed its success.<sup>13</sup>

#### **1.4 Data Collection Techniques**

The evaluation used multiple methods to collect the qualitative and quantitative data used to address the purposes for which the evaluation was commissioned and answer the key questions posed. This mixed method approach has several advantages including complementarity and triangulation.

While quantitative and quantitative data are distinct, they are also complementary. Quantitative data has provided numeric measures on various aspects of the ReachOut service, such as profiles of the target population, the intensity of service and client outcomes. Qualitative data provided a fuller picture of the experiences and concerns of those with a stake in the service and the context within which it is operationalised. In addition, the qualitative data collection techniques offered the opportunity to explore the diversity of perceptions amongst key informants without having to manipulate any variables for the purpose of the evaluation. The qualitative data collection techniques were used inductively to explore and describe important variables about the service from the perspective of the various informants and then build patterns and themes that emerged from within the data collected.

Qualitative and quantitative data on the same question helped in triangulating the evaluation findings. The collection of two sources of information not only provided the opportunity to gain a more complete understanding of the ReachOut service, but it also presented an opportunity to verify the accuracy of such information.

The key methods for collecting the qualitative and quantitative data that informed this evaluation included participant observations, semi-structured discussions, face-to-

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<sup>13</sup> Bacchus, L., Aston, G., Murray, S., Vitolas, C. and P. Jordan (2008) *Evaluation of an Innovative Multi-agency Domestic Violence Service at Guy's and St. Thomas' NHS Foundation Trust*. London: King's College, University of London.

Weiss C. (1995) Nothing as practical as good theory: exploring theory-based evaluation for comprehensive community initiatives for children and families. In Connell AC, Kubisch L, Schorr B, Weiss CH. (Eds), *New approaches to evaluating community initiatives: volume 1, concepts, methods and contexts*. Washington DC: Aspen Institute.

Weiss C. (1997) How can theory-based evaluation make greater headway? *Evaluation Review* 21: 501–24.

face and telephone key informant interviews, a key informant focus group and document review.

#### **1.4.1 Data Collection Techniques to ‘Surface’ the Intervention Logic Model**

In order to surface the intervention logic underpinning the ReachOut service a semi-structured discussion with five key members of ReachOut’s service delivery team was undertaken in November 2012. The purpose of this discussion was to invite members of the service delivery team to articulate their thoughts and assumptions about how the various steps and activities that comprise the ReachOut service were expected to work and the chain of desired results (outputs and immediate, intermediate and longer-term outcomes) that might be expected from each of these steps.

In addition, a face-to-face interview was undertaken in February 2013 with one of the key designers of the ReachOut service to surface its underlying theory of action. The purpose of this interview was to draw on this informant’s practice wisdom about the ‘what works’ approaches inherent in the ReachOut service that had the potential to enable and facilitate the target groups’ engagement in the journey of change towards a violence-free life.

Both the group discussion and the face-to-face interview provided the data required to develop the service’s intervention logic model – the sequence of activities involved in the implementation of the ReachOut service and the way in which these activities contributed to the desired outputs and outcomes from the service.

#### **1.4.2 Data Collection Techniques to Describe the Implementation of the Service**

In light of the fact that the subject of this evaluation is a service innovation, a time-series approach to collecting data about the service and the clients it serves was adopted. Previous research indicated that the components and complexity of pilot services often evolve over time; and moreover, that there is a need to explore the degree of diversity amongst the clients served and understand whether the service is delivered in a tailored manner in order to effectively respond to such diversity.<sup>14</sup>

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<sup>14</sup> Jackson, S., Feder, L., Forde, D., Davis, R., Maxwell, C. D., and Taylor, B. G. ( 2003). *Batterer Intervention Programs*. Washington: National Institute of Justice. [www.ojp.usdoj.gov/nij](http://www.ojp.usdoj.gov/nij)

Gondolf, E. W. (2002). *Batterer Intervention Systems*. California: Sage Publications Inc.

Baseline data about the ReachOut service during its establishment and design phases was drawn from documentation held by the service's host organisation and those who had significant involvement before the service was implemented (for example, meeting presentations, discussion documents, funding applications, Aviva's strategic plan and planning documents). In addition, to the document sources, three face-to-face interviews were undertaken with those associated with initiating this innovation – interviews that sought to gather more qualitative baseline information about the service.

This baseline data was juxtaposed with data collected from time to time throughout the twelve-month period of the pilot – data which informed the ongoing developments of this service innovation including successes achieved and challenges faced. This data was collected through the evaluator's participant observation at the monthly ReachOut Steering Group meetings and other organisational meetings in which significant matters were being discussed; and by ongoing receipt of any newly-created documents associated with the service's development (for example, performance monitoring reports, media releases, meeting minutes and updated policy and procedures documents). While these data collection processes mainly focused on the management and administrative aspects of the implementation of the ReachOut pilot, data collected about the practices and approaches used by the service were collected through five in-depth interviews (a total of twelve hours) with the Family Support Workers – data that formed the basis of the case study described in the findings of the evaluation report. This data was collected respectively from the Family Support Worker for the men who accessed the ReachOut service and the Family Support Workers for the women and children – an approach adopted with which to surface the nuances of the services delivered; meet the inductive purposes inherent in the evaluation's naturalistic approach; and enhance the validity of the findings.

#### **1.4.3 Data Collection Techniques to Describe Stakeholders' Experiences and Assess Impact**

The evaluation used face-to-face and telephone interviews and a focus group to explore key stakeholders' experiences of the ReachOut service and its impact. This qualitative data was augmented by the collection and analysis of quantitative data sourced from the ReachOut database and the New Zealand Police's operational database.

### ***Key Informant Face-to-Face Interviews***

Seven key informant face-to-face interviews were undertaken in June 2013. These informants were purposefully selected on the basis that they possessed a body of knowledge, experience and diversity of perspectives on ReachOut. These informants included representation from a number of government, local government and non-government organisations working within the domestic violence sector as well as representation from those responsible for implementing and managing the ReachOut service. The aim was to maximise variability in order to gather multiple perspectives on ReachOut's operationalisation and impact.

A structured data collection instrument was used to guide these key informant interviews. This interview schedule included mostly open-ended questions. This form of questioning was adopted in order to gain an understanding of the full range of perspectives and experiences held by the informants about ReachOut. Moreover, it did not pre-suppose responses. The interview questions were developed to illicit information about topics that pertain to the various elements associated with implementing ReachOut, including contextual factors, as well its perceived benefits for those with a stake in the service.

Each informant interviewed was asked the same questions and in the same order. This procedure ensured that each informant was responding to the same stimulus and providing comparable responses. The interview began by introducing the purpose of the interview and how the information would be used. The informant's consent for digitally-taping the interview was confirmed. Questioning began with inquiries that were easy to answer, concerned experiences that were easy to recall and were non-threatening. Questions on similar topics were grouped together and statements were used to lead the informant from one topic to another. The interview schedule finished by inviting informants to add any additional information that they thought had been overlooked. Their responses were coded in thematically - orientated categories.

### ***Key Informant Telephone Interviews and Focus Group***

Previous research has noted that many evaluations of family violence services do not include either men as family violence offenders or their partners with lived

experience of family violence.<sup>15</sup> Gathering clients' and their partners' views and experiences of receiving a service and its impact on their lives has the potential to significantly augment more quantitative assessments of service delivery and impact.

To counter this noted omission, this evaluation used telephone interviews as a method of collecting information about the experiences and impact of the ReachOut for the men as clients of the service.

A convenience sampling method was used to invite men who had received service from ReachOut to participate in a telephone interview. Men were invited to participate in the evaluation on the basis that they met the criteria of interest (men who engaged with the ReachOut service) and were willing and available to be involved in a telephone interview with the evaluator. Of those invited to participate in the evaluation, six men agreed to be interviewed. These interviews were conducted during June 2013.

A structured data collection instrument was used to guide these telephone interviews. The interview questions were mostly open ended and invited the men to share their experiences and views about ReachOut including, questions about their awareness and access to the service; their experiences of the initial contact; their experiences of the engagement and intervention process; their views about the impact of the service on their lives; and their views about any further improvements required of the service. Their responses were coded in thematically -orientated categories.

In order to ascertain perspectives on an outreach service for men, women with lived experience of family violence were invited to participate in a focus group. A convenience sampling method was used to invite women who had lived experience of family violence to participate in the focus group. The Family Support Workers invited women who were participating in a Ministry of Justice approved ten-week group programme on domestic violence during June 2013 to participate in the evaluation on the basis that they were willing and available and that their safety would not be compromised. Of those invited to participate in the evaluation, five women agreed to participate in a focus group discussion. This focus group discussion was conducted in June 2013.

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<sup>15</sup> Gondolf, E. W. (2002). *Batterer Intervention Systems*. California: Sage Publications Inc.

An open-ended data collection instrument was used to guide the focus group discussion with the women. The instrument included questions about the help seeking behaviours of men who had committed family violence offences; effective elements of a men's outreach service; issues to be considered in relation to their safety and that of their children; and the potential benefits for families and communities. The evaluator posed each question in turn and invited the women to describe their experiences, views and opinions. Each response offered by the women was followed up with neutral probes such as 'Can you say more about that?' or 'Can you give an example?' until complete data on a topic was gleaned.

## **1.5 The Procedure**

### **1.5.1 The Procedure for Collecting and Analysing the Primary Data**

*Pre-testing the Interview Schedules:* Draft interview schedules were pre-tested to check the cultural appropriateness of the questions; identify and remove any ambiguities within questions to maximise the way informants understood the questions; omit any redundant questions or add others to ensure all information sought was covered; and rearrange some questions to facilitate the logical progression of themes within each interview schedule.

*Letter of Introduction:* Introductory letters were sent to prospective informants. The introductory letters are one mechanism used to enhance response rates, informant cooperation and the quality of the information received. A sample letter of introduction is located in Appendix 1.

The introductory letter described the purpose and subject matter of the evaluation project; identified ReachOut as the commissioning agent, including an invitation to contact that service for verification and clarification; offered an outline of the expected benefits; and, provided an explanation of the ethical issues associated with the evaluation.

Attached to the introductory letters to key informants was a Participant Information Sheet. The Participant Information Sheet included:

- Details about the purpose and proposed benefits of the evaluation
- Identified the evaluator

- Detailed the time and focus of each participant's involvement in the evaluation process
- Described the way in which the ethical issues associated with the evaluation had been addressed; and,
- Invited participants to seek more information and ask questions about both the ReachOut service and the evaluation project.<sup>16</sup>

Introductory letters and the Participant Information Sheet were distributed by Aviva and included the ReachOut trademark.

*Initial Telephone Contact:* Shortly after the introductory letters were mailed to potential informants, the evaluator made an initial telephone contact. The purpose of the telephone contact was to answer any outstanding questions posed by potential informants and to ascertain their willingness and consent to participate. Once consent was given, mutually suitable dates, times and places for the face-to-face and telephone interviews were established.

*Focus Group:* The focus group with women as partners or ex-partners of the men who had engaged with the ReachOut service was co-facilitated by the evaluator and two of the women's Family Support Workers – workers with knowledge and experience of working with women with lived experience of family violence. Each participant in the focus group was invited to give their consent to participate before the focus group commenced.

*Individual Key Informant Face-to-Face and Telephone Interviews:* Individual key informant interviews were conducted during June and July 2013. Each informant was invited to sign a Consent Form before the interview commenced.

The interviews and the focus group were conducted during June and July 2013. The reason for this timing was because earlier research conducted within the family violence sector indicated that if an evaluation engaged with potential informants too early, their experience of the service was insufficient for them to offer information

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<sup>16</sup> A sample Participant Information Sheet is located in the Appendix.

and views in sufficient detail to provide a complete picture, nor would enough time have elapsed to allow desired behavioural and other changes to occur.<sup>17</sup>

*Letters of Thanks:* All those who participated as informants in the evaluation project received letters of thanks.

*Data Analysis:* Information from the focus group and individual key informant interviews was coded. Each type of response within each response category was tabulated and grouped. The organised data was interpreted and synthesised into general conclusions and understandings. These results were complemented with examples that describe each different response grouping, including the use of quotes.

### **1.5.2 The Procedure for Collecting and Analysing the Secondary Data**

In addition to the collection and analysis of the primary data, the evaluation project was also informed by collection and analysis of secondary data. This secondary data included:

- A review of the organisational and service-focused documents and data
- Demographic, social history and service level data held within the management information systems of ReachOut and the New Zealand Police

Overall, the secondary data was analysed to identify emerging patterns and themes and the findings were organised into tables, and other forms of presentation.

## **1.6 Ethical Considerations**

This evaluation recognised that there are potential risks associated with any study carried out within the family violence sector and was committed to putting in place a range of procedures and adequate precautions to maintain the safety of all those involved. To counter some of the ethical issues, including concerns about safety, that may have arisen as a result of this evaluation project a number of preventative measures were put in place.

*Informed Consent:* All potential informants were advised in the introductory letter of the purpose, nature and possible benefits of the evaluation so they could exercise choice about whether to be involved or not. Informed consent was sought from all

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<sup>17</sup> Gondolf, E. W. (2002) *Batterer Intervention Systems*. California: Sage Publications.

potential informants. The evaluation was conducted within the premise that it is each individual's right to decide whether and how to contribute information. Their judgement on these matters was respected. In addition, informants were invited to ask questions at any time.

*Freedom to Withdraw:* Participation in this evaluation was voluntary and any informant was free to withdraw at any time and/or refuse to answer any questions without negative consequence.

*Confidentiality:* The anonymity of the informants and/or the organisations that they represent was maintained. Notes from interviews and the focus group do not have any names attached. Rather names were replaced by a code number. The key that links names or any other identifiers and codes was kept in a locked file. Information collected from particular individuals has been collated and presented in aggregate form. At no time is there to be any reference to the names of particular individuals, organisations or places which might be used as identifiers.

*Conflicting Interests:* Evaluation that is conducted within a contestable environment is bound to be confronted with conflicting interests. For example, there may be subtle pressure to ignore evidence or suppress negative results. To counter this ethical issue, the evaluation was conducted without bias and the results have been disseminated in a sensitive manner.

*Storage and Use of Data:* Data collected during the course of the evaluation has been securely stored by the evaluator to ensure the material is only used for the purpose for which it was gathered. Informants have been advised that the data is to be used for the purpose of gathering information about the implementation and impact of the ReachOut service.

*Promises to Supply Information Fulfilled:* All requests by individual participants for copies of their interview notes have been met.

*Wellbeing of Informants:* The evaluation may expose the vulnerabilities of some of the informants invited to participate. To counter this ethical issue, the evaluation was conducted in a sensitive manner and in a way that respected human dignity and worth. In addition, the focus group was co-facilitated with people who had considerable experience working within the family violence sector to ensure that if

any 'sensitivities' were raised during the discussion, they could be handled in a professional manner to negate any potential threat or harm to the participants.

*Guided by Internationally Recognised Ethical Standards for Evaluation:* The evaluation was conducted in a robust manner and complied with the Australasian Evaluation Society Incorporated 'Guidelines for the Ethical Conduct of Evaluations' and the American Evaluation Association's 'Guiding Principles for Evaluation'. In addition, the evaluator is a member of the Aotearoa New Zealand Evaluation Association, which aims to promote excellence in evaluations conducted in Aotearoa New Zealand and in particular, focuses on the maintenance of appropriate ethical standards for members of the profession.

**PART TWO**

**LITERATURE REVIEW**

## 2 Family Violence: The Current Landscape

### 2.1 Prevalence and Impact: An International Perspective

Worldwide family violence is recognised as a significant social, public health and criminal justice issue (Cismaru and Lavack, 2011; Hayward et al., 2007). Across a range of international jurisdictions, studies have demonstrated high prevalence rates of intimate partner violence (Tjaden & Thoennes, 2000; Schafer et al., 1998). For example, the World Health Organisation's multi-country study of women's health and domestic violence against women found that between 15% and 71% of women have experienced some form of family violence in their lifetime, with the prevalence in 2005 ranging from 4% to 54% (World Health Organisation, 2005). Roberts and Roberts (2005) estimated that worldwide some 8.7 million women are victimised by a current or former partner every year; and, Whitaker et al.'s analysis of the 2001 National Longitudinal Study of Adolescent Health data found that 24% of the relationships of the 11,370 adults in the study included some form of violence (Whitaker, Haileyesus, Swahn & Saltzman, 2007). Moreover, intra-familial violence has been documented across all racial, ethnic, socio-economic groups and amongst people across a range of educational levels and is undertaken by both men and women in heterosexual, gay and lesbian relationships (Muldoon and Gary, 2011; Huang and Gunn, 2001).

Family violence, including physical, sexual, psychological, economic, and other forms of violence, have immediate, intermediate and long-term physical, emotional and economic costs for those who are victims of violence, those who perpetrate violence, their families and communities (Eisenstat & Bancroft, 1999; Mears & Visher, 2005; Wen-Li et al., 2005; Woodtli, 2001).

For the women who are victims, studies have linked family violence to:

- Adverse physical health effects, including chronic pain and chemical dependency (Campbell et al., 2002; Centres for Disease Control, 2003; Kendall-Tackett, 2004; Loue, 2001; Wisner et al., 1999)

- Mental health issues, such as depression (Danielson et al., 1998; Golding, 1999; Wisner et al., 1999)

Children exposed to family violence are more likely to experience emotional and behavioural problems than children not exposed to family violence (Appel & Holden, 1998; Edleson, 1999; Edleson et al., 2007; Fantuzzo & Mohr, 1999; Felitti et al., 1998; Lehmann, 2000; Rossman, 2001).

Studies have also shown that those who perpetrate violence also experience negative consequences, such as feelings of rejection, depression, loss of respect for themselves, loss of their families, harm to their children, substance abuse and imprisonment (Department of Justice, Canada, 2002; Walker et al., 2010).

There are also extensive economic costs associated with family violence, including the costs associated with the criminal justice system, property losses and medical expenses as well as losses in employment and household productivity (Centres for Disease Control, 2003; Max et al., 2004; National Centre for Injury Prevention and Control, 2003).

## **2.2 Prevalence and Impact of Family Violence: The New Zealand Situation**

Various international and national reports show that New Zealand has a high rate of family violence. A 2011 report published by the United Nations Women noted that New Zealand has high rates of family violence compared with other Organisations for Economic Development and Co-operation (OECD) countries. For example, the report noted that a third of the country's women reported experiencing physical violence from a partner during the period from 2000 to 2010 and that this finding puts New Zealand as the worst affected of the 14 countries that responded to the question (Retrieved on 03 April 2013: <http://www.stuff.co.nz/national/5332717/NZ-worse-for-domestic-violence> ).<sup>18</sup>

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<sup>18</sup> This finding is supported by findings from a number of earlier New Zealand studies. Fanslow and Robinson (2004) surveyed women aged between 18 and 64, who had ever had a partner, and reported that 33-39% had experienced at least one act of physical or sexual assault from a partner during their lifetime and between 19-23% had experienced severe physical violence during their lifetime. Leibrich, Paulin and Ransom's (1995) study of men's use of violence found that 35% of men questioned reported physically violent to their partner in their lifetime; 20% of men reported assaulting their female partner during the previous year; and, 50% of men reported using psychological abuse during the previous year. Morris, Reilly, Berry and Ransom's (2003) national survey of men and women found that 26.4% of women and 18.2% of men, who had ever had partners, had experienced physical violence from their partner.

Every day the New Zealand Police are involved in about 200 family violence incidences, approximately one every seven minutes, although they estimate that only 18% of such incidences ever come to their attention

(<http://www.areyouok.org.nz/statistics.php>). Statistics from the New Zealand Police; the District Court; the Family Court; the Taskforce for Action on Violence within Families, Family Violence Indicators Report; and, National Collective of Independent Women's Refuges provide further evidence of the incidence of family violence in New Zealand. These statistics include:

- Police recorded 85,617 family violence occurrences in 2010, at which 94,099 children were present (New Zealand Family Violence Clearinghouse (2012) Data Summary: Violence Against Women)
- Data from the POL 400 forms on family violence related incidences and entered in the Police Family Violence Database show that in 2006, 50% of the victims were current partners of those committing the offences and 23% were ex-partners (separated, divorced or formally in a relationship). Of the offences recorded in this Database in 2006, 42% were physical violence incidences and 22% were recorded as verbal abuse or threats (Families Commission, 2009).
- Police recorded family violence related offences and arrests show that in 2010 there were 8925 recorded Male Assaults Female offences of which 82% resulted in an arrest; and, 5332 offences for breaching a Protection Order of which 68% resulted in an arrest (New Zealand Family Violence Clearinghouse (2012) Data Summary: Violence Against Women). New Zealand Police statistics (2001; 2005) noted that half of all murders in New Zealand are family violence related (28 of 53 murders in 2001; 29 of 61 murders in 2005).
- Police data from 2004/2005 to 2008/2009, related to repeat victimisation of more than once or twice a year, show an increase in 2005/2006 and this remained constant at 40% of family violence events, with a further rise to 41% in 2008/2009. Repeat offending and victimisation of three or more incidences a year was 20% of the family violence events in each of the years from 2005/2006 to 2008/2009 (New Zealand Family Violence Clearinghouse (2012) Data Summary: Violence Against Women).

- Family Court data for the years 2000 to 2008 show applications for a Protection Order reduced by 26% from 6015 applications in 2000 to 4433 applications in 2008. The percentage of applications that became final Protection Orders decreased from 61% in 2000 to 57% in 2008. In 2008, 90% of the applicants who filed for a Protection Order were female and 88% of the respondents were male (New Zealand Family Violence Clearinghouse (2012) Data Summary: Violence Against Women).
- The number of hospitalisations for assaults on women aged between 15 and 50 years, and reported in the Taskforce for Action on Violence within Families, Violence Indicators Report, is based on the data about people admitted to hospital recorded by the New Zealand Ministry of Health. Of the 1210 hospitalisations for assaults on women recorded in 2009, 53% had resulted from family violence assaults (New Zealand Family Violence Clearinghouse (2012) Data Summary: Violence Against Women).<sup>19</sup> The findings from the 2006 New Zealand Crime and Safety Survey showed that of those admitted to a public hospital as a result of an assault, abuse or neglect at the hands of a spouse or domestic partner, women, those aged between 20-39 years and who identified as Maori predominated (Mayhew and Reilly, 2007).
- Statistics about the services delivered by the National Collective of Independent Women's Refuges and reported in the 2009/2010 Annual Report, show that 58,485 crisis calls were received; 12,513 women and children accessed their community-based advocacy services; and, 3,885 women and children accessed the safe house services (Retrieved on 02 April 2013: <http://www.womnesrefuge.org.nz/users/Image/Downloads/PDFs/NWR-Annual-Report-09-10.pdf> ). In 2010/2011, the Women's Refuges provided services to 13,937 women and 11,014 children (Centre for Social Research and Evaluation, Ministry of Social Development, 2010).<sup>20</sup>

A number of New Zealand based reports over the last twenty years have noted that family violence affects a significant number of people in the community, including

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<sup>19</sup> Note that the family violence status was unknown in 25% of the cases of hospitalisations for assaults on women aged between 15-50 years recorded in 2009.

<sup>20</sup> These statistics exclude the crisis calls received and the community-based advocacy and safe house services provided by refuges not affiliated to the National Collective of Independent Women's Refuges.

those across age groups, socio-economic status and ethnic groups, and that it is physically, emotionally, mentally and socially damaging (Family Violence Prevention Coordinating Committee, 1989; Stasiak et al., 2004). For example, Mayhew and Reilly (2007) reported that three out of ten victims of partner offending experienced physical injury. Fanslow and Robinson (2004) noted that lived experience of family violence is associated with increased mental health problems and increased use of health services.

In 1994, Suzanne Snively estimated the economic cost of violence against women aged 15 years and older and children aged 0-14 years. Using the one in seven prevalence assumption for direct costs associated with Police callouts, the 1994 costs were noted as \$2.74 billion per annum; and, the overall cost to New Zealand society of family violence was estimated to be up to \$5.3 billion per annum (Snively, 1994). In today's costs that would equate to \$8 billion per annum (Retrieved on 02 February 2013: <http://www.areyouok.org.nz/files/statistics/ltsnotOK> ). Moreover, Snively (1994) noted that family violence impacts on, and increases costs for the business sector through absenteeism,<sup>21</sup> loss of productivity and staff turnover.

### **2.3 Current Causal Theories and Family Violence**

Kirst-Ashman and Hull (2009) observe that a range of theories have been articulated to explain the occurrence of violence within families and identify the variables and processes that are related to change in abusive behaviour. Theories that seek to explain the development of family violence include family systems theory, feminist theory, object relations theory, attachment theory and cognitive-behavioural theory. Theories that seek to explain behavioural change include the family belief model, the theory of reasoned action, the information-motivation-behaviour skills model and deterrence theory.

Family systems theory (Bowen 1966) includes two core elements: Differentiation, which is the degree that individuals are able to balance their emotional and intellectual functioning and their intimacy and autonomy functioning within family relationships; and, chronic anxiety fed by a perceived threat of what might be. Faber (2004) maintains that violence can occur in families where the members have a low degree of differentiation and as a consequence a high level of chronic anxiety. When

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<sup>21</sup> Mayhew and Reilly's report on the findings from the 2006 New Zealand Crime and Safety Survey found that 12% of interpersonal violence offences involved someone taking time off work.

tensions in a household are heightened, the emotional connectedness amongst family members becomes stressful and this can result in violence between intimate partners. On the basis of this theory, workers focus on teaching and modelling differentiation with those in intimate partner relationships. Stubbs (2007) and others (Walker, 2009) are highly critical of the application of this theory within the context of family violence, arguing that mobilising this theory in practice could result in the person carrying out the violence not being held responsible for the offending behaviour.

Carden (2005) and Adams (1988) state that feminist theory conceptualises family violence at the socio-political level maintaining that men are acculturated into roles of power and women are acculturated into roles of passivity. Bitter et. al. (2009) state that feminist theory argues for egalitarian relationships, power sharing, and, valuing the perspectives of women. Aymen (2008:323) observes that feminist theory underpins psycho-educational interventions with men who perpetrate family violence and that this approach aims “to debunk men’s stereotypic beliefs about women” and “replace power and control relationships with equality relationships.” Zosky (1999; 2005) and others (Dutton et. al., 1994) question the applicability of feminist theory in practice settings maintaining that micro-level theories are more applicable to helping us understand why some men engage in acts of family violence whilst others do not.

Object relations theory describes the progressive stages during infancy required for individuals to successfully differentiate themselves from others (Maher, Pine and Bergman, 1975). Zosky (2005:50) explains that men who perpetrate family violence were unable to successfully separate themselves from others during infancy as a result of insecure attachment to a significant other and lack of experience of unconditional love; and, as a result of these experiences in infancy they “use their partners to unconditionally satisfy their needs ... (which) explains their intense need to control and sense of jealousy that many batterers engage in.” Within a practice setting, Hockenberry (1995) observes that this theory suggests that those working with men who perpetrate family violence need to engage their clients in an empathetic and supportive manner whilst holding them accountable for their behaviour.

Cognitive-behavioural theory suggests that violence is a learned behaviour and therefore it can be unlearned (Adams, 1988). Babcock et. al. (2004) observe that

programmes for men who perpetrate violence and which are underpinned by cognitive-behavioural theory seek to teach participants positive and acceptable ways of thinking and behaving through the use of a variety of teaching tools including communication, assertiveness and social skills training together with anger management techniques.

Combining systems, ecological and social constructionist theories, Pardeck and Yuen (1999) argue that addressing the issue of family violence requires attention on all aspects of the individual and their family unit (social, emotional, psychological, physical, financial, social and cultural) and that intervention strategies should incorporate empowerment and strengths-based approaches together with an emphasis on collaboration amongst professionals to provide wrap-around services.

Theoretical perspectives from health psychology seek to understand and predict behaviour change and shed light on the processes involved in the cessation of family violence. These theories include the health-belief model (Becker, 1974); the theory of reasoned action (Fishbein & Ajzen, 1975); and, the information-motivation-behaviour skills model (Fisher & Fisher, 1992). Theories such as these “focus on the relationship between behaviour change and individuals’ judgements about the advantages of the desired behaviour in comparison to the current behaviour; their ability to perform the desired behaviour; and, the perceived utility of behaviour change for offsetting personal injury or emotional damage” (Scott & Wolfe, 2000:828).

Scott and Wolfe (2000) and Scott (1998) note that there is a paucity of evidence supporting the utility of any of these theories for predicting and promoting change in behaviour for those who perpetrate family violence.

## **2.4 Current Responses to Family Violence**

### ***Overall Response to Family Violence – Levels of Prevention***

In recent times, it has been recognised that effective responses to family violence must be multi-pronged, occur at multiple levels of prevention and be integrated and collaborative.<sup>22</sup> There have been many prevention campaigns initiated to

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<sup>22</sup> The Australian Institute of Social Relations has identified three levels of prevention in the context of family violence: “Primary prevention – preventing violence before it occurs (interventions delivered to the whole population or to particular groups at high risk of experiencing or using violence; secondary prevention – early interventions aimed at changing behaviours or increasing skills of individuals or groups (e.g. addressing

encourage an overall change in the public's response to this problem (for example, White Ribbon Campaign; Purple Ribbon Campaign, Step it up Campaign) (Campbell et al., 2010); and, significant resources and efforts that have focused on not only the protection of women and children (Gewirtz & Edleson, 2007; Tutty et al., 1993), but also on the design and delivery of services that aim to reduce the risk of further offending by men who perpetrate family violence (Day et al., 2009).

The literature describes a range of responses that seek to address the issue of family violence and specifically target men who have perpetrated violence. Such responses include those embedded within the criminal justice system and commonly referred to as 'integrated' or 'coordinated' responses as well as those delivered by community based organisations and relatively independently of this system, for example, in relationship counselling or community health based services (Day et al., 2009:203).<sup>23</sup> This array of responses also vary in terms of their core understanding of the nature of family violence, their stated purpose, their counselling approach, their disciplinary emphasis, the duration and extent of services and their linkages to services for victims and other statutory and non-government services (Gondolf, 1999; Day et al., 2009).

Of the 'integrated' responses to family violence, the most commonly described service system includes a combination of a criminal justice response with a referral to a group intervention programme for men and the provision of support services for women and children (Day et al., 2009:204)<sup>24</sup> Muldoon and Gary (2011:145) state that "(b)atterer intervention programs (BIPs) are a well-established therapeutic service for men who batter women and are the current treatment of choice" (Arias et al., 2002; James & Gilliland, 2005; Leverque, Driskell, Prochaska and Prochaska, 2008; Leverque, Velicer, Castle and Green, 2008; Kistenmacher and Weiss, 2008; Aldarando & Mederos, 2002). The operational attributes of such intervention

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controlling behaviours before they become established patterns); (and), tertiary prevention – longer term interventions following violence ... (that) would include social support for victims as well as criminal justice and therapeutic interventions for perpetrators."

<sup>23</sup> Gelles (2001) and Mederos (2002) reported that interventions that sought to treat men who perpetrate family violence individually or in couples therapy was ineffective and 'possibly dangerous.'

<sup>24</sup> The basis for such responses largely originates in North America, particularly from the Duluth Programme, and because of the research that demonstrates that many women continue in relationships with their abusive partners because of a lack of economic resources, social support networks and low self-efficacy the paramount focus is on the continued safety of the victims (Chronister, 2007)

programmes for men who perpetrate family violence are typically described in the literature in terms of their approach and underlying philosophy, structure, curricular, leadership and support systems. The predominant themes associated with these programme descriptors are:

- *Approach and Underlying Philosophy:* The principle intervention approach with men typically used within the context of 'integrated' responses is psycho-educational in nature although the theoretical conceptualisations and intervention techniques of cognitive behavioural approaches are also commonly utilised (Price and Rosenbaum, 2009; Maiuri and Eberles, 2008; Gondolf, 2007; Babcock et al., 2004; Healey and O'Sullivan, 1998; Feder and Wilson, 2005). The values and principles underpinning this psycho-educational approach are derived from the feminist and sociological analysis of family violence, which positions family violence as an outcome of gender power imbalances and conceptualises it as a form of power and control. Pence and Paymar (1993) maintain that the educational component aims to confront the 'belief system of masculinity'
- *Programme Structure:* The most common treatment modality reported in the literature is a male-only, open-ended group format (Aldorondo and Mederos, 2002; Maiuro and Eberle, 2008; Austin and Dankwort, 1999). Sinclair (2002) and others (Adams & Cayouette, 2002) note that the group format is preferred not only because it provides the opportunity for men to mentor each other, share experiences and challenge anti-social attitudes and beliefs in a social context similar to that from which the behaviour is thought to have originated, but also it is regarded as more cost-effective (Dutton & Sonkin, 2002; Gondolf, 2002). Of the duration of intervention programmes, Rosenbaum et. al. (2001) and others (Gondolf, 1990; Maiuro et. al., 2001; Muldoon and Gary, 2011) observe that that they vary greatly. For example, Austin and Dankwort (1999) observed that the duration of programmes for men who perpetrate violence can range from 12 to 52 weeks; and, in a study of the characteristics of intervention programme across 45 states in the United States of America, Price and Rosenbaum (2009) found that respondents' programmes ranged from 6 to 90 sessions and individual sessions ranged from 60 minutes to 120minutes in length. Their analysis concluded that the typical length of intervention programmes for men was 40 total hours.

- *Intervention Strategies:* Pence and Paymar (1993) outline the strategies used within the context of delivering psycho-educational programmes for men who perpetrate violence, stating that such programmes use an educational and counselling approach, rather than a therapeutic approach and focus attention on the 'power and control' wheel and the 'equity' wheel. They maintain that such programmes seek to have participants understand that their acts of violence were means of control; examine the cultural and social contexts in which they used violence; examine the negative effects of their behaviours; accept responsibility for their actions; and, change abusive behaviours. Teaching tools included the 'check-in', during which participants explained steps they took to work toward change; action plans, or written records of their goals and steps toward change; as well as videos, role-play and group exercises.

Of programmes that adopt a cognitive-behavioural approach of intervention, Schmidt et al. (2007) state that programme objectives include expanding men's understanding of behaviours used to control their female partners; increasing their awareness of their intentions that support their choices to abuse; increasing their understanding of the negative consequences of their behaviours; encouraging them to take responsibility for their behaviours; motivating them to change; and, providing support for ensuring their partners' safety.

Price and Rosenbaum (2009) add that more than 50% of programmes in their study included an alcohol and substance abuse module or referred participants to other substance abuse services in recognition of the relationship between substance abuse and family violence found in a range of studies (Bushman & Cooper, 1990; Gondolf, 1999); and, over three quarters (76%) of the programmes included an anger management module in their programmes despite that the fact that many studies caution against including either anger management or stress control modules in programmes for men who perpetrate violence arguing that family violence is a controlled behaviour and concerns power and control rather than an anger response (Bancroft & Silverman, 2002; Gondolf & Russell, 1986).

- *Typologies of Men who Perpetrate Violence*: Holtzworth-Munroe and Stuart (1994) challenged the notion that men who perpetrate violence are a homogeneous group and that there is a singular underlying cause of family violence incidents. They found three different groupings amongst men who commit family violence offences:
  - *Family-only type*: typically engage in low levels of violence; such violence is related to situations such as stress at work; and, they show high levels of remorse and are eager to maintain their relationships with their partners
  - *Borderline/dysphoric type*: typically engage in moderate to severe levels of family violence; show characteristics of psychological distress and borderline personality disorder; and, are dependent, jealous and hostile towards women
  - *Generally violent anti-social type*: typically engage in severe levels of violence and abuse both at home and in general; and, are antisocial, impulsive and aggressive.

Building on the premise of these three sub-types, Saunders (1996) argued that there was little empirical support for the effectiveness of one-size-fits-all approach to intervention programmes. Rather he proposed matching differential types and approaches to intervention with different categories of participants. For example, Saunders (1996) demonstrated those classified as the 'anti-social' type responded better to a cognitive-behavioural approach; and, those with dependent personalities responded better in process-psychodynamic groups. In Price and Rosenbaum's (2009) study they found that the theory of matching intervention approaches to different participant characteristics was not reflected in the practice of those organisations that participated in their survey. This study found that almost all participating organisations (90%) reported that they did not offer differential interventions to programme participants. These authors conclude: "... despite the consensus in the field that batterers are a heterogeneous group and that programmes matched to batterer sub-types and stages of readiness to change are necessary, they are almost nonexistent in actual practice" (Price & Rosenbaum, 2009: 768).

Of those referred to intervention programmes, most appear to be court-mandated (Price and Rosenbaum, 2009).

- *Leadership and Facilitation:* The literature shows that most intervention groups for men who perpetrate violence are facilitated by a male-female co-leader team. Such co-gender facilitation teams are preferred based on the belief that participants' attitudes to women are more likely to surface in the presence of a woman and that such co-gender teams provide the opportunity to model egalitarian male-female interactions (Adams & Cayouette, 2002). Commentators in the literature report varying educational and specialist training requirements for group facilitation staff amongst programmes. For example, Mederos (2002) and others (Geffner & Rosenbaum, 2001) reported that in the programmes they examined, many facilitators had no tertiary qualifications or specialised family violence training. Other commentators reported that some programmes utilise a peer re-education model in which senior participants take on leadership roles, whilst others require their programme facilitators to have at least a university-level qualification in human services as well as additional family violence specialist training (Maiuro & Eberle, 2008).<sup>25</sup>
- *Programme Logistics and the Issue of Victim Safety:* The pre-eminence of victim safety is a universal principle associated with the family violence sector across all international jurisdictions. To this end, Mederos (2002) and Price and Rosenbaum (2009) note that in the United States of America, most intervention programmes implement the practice of contacting the victims in order to facilitate safety planning, referrals for service and sharing information related to the man's violent behaviour. Interestingly, in the Price and Rosenbaum (2009) study only 28% of those who participated in the survey reported that they shared information with victims, courts and/or probation officers – a finding that these authors interpret as a reflection of maintaining the balance between maintaining sufficient levels of confidentiality of

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<sup>25</sup> Price and Rosenbaum (2009) observed that some programmes for men who have perpetrated violence require their facilitators to be violence-free for a fixed period of time before they are allowed to facilitate groups, whilst other programmes will not recruit those who have previously perpetrated family violence into group facilitation roles.

participants' disclosures in the course of attending the intervention programmes and the need to make victim safety a priority.

Together with considering the relationship between the information sharing and confidentiality practices of intervention programmes and victim safety, Price and Rosebaum (2009) also expressed concern that their study showed that almost a fifth of the organisations surveyed did not know what happened to court-mandated clients who were classified as non-completers because of poor attendance or re-offending – a concern that could also have implications for victim safety.

## **2.5 Current Level of Empirical Support for the Effectiveness of Intervention Programmes for Men who Perpetrate Family Violence**

While Dobash et al. (1999) note that 'integrated' responses have been successful in providing an inter-agency approach linked to the criminal justice system and raising awareness of the problems experienced by family violence victims, questions remain about the quality and nature of the services offered to men who perpetrate violence (Dutton & Corvo, 2007) and the empirical support for the effectiveness of such services in reducing further incidences of family violence is unconvincing (Stuart et al., 2007; Lee et al., 2007; Shahane, 2009; Buchbinder et al., 2008; Corvo and Johnson, 2003; Levesque et al., 2008; ).<sup>26</sup> While some researchers purport that intervention programmes for men may be effective at reducing the degree of partner violence towards women (Brewster et al., 2002; Dutton, 1998; Gondolf, 2002; Palmer et al., 1992; Rosenbaum, 1986), others report negligible effectiveness (Eisikovits & Edleson, 1989; Gondolf, 1997; Healey, Smith & O'Sullivan, 1998; Levesque & Gelles, 1998; Rosenfeld, 1992; Tolman & Bennett, 1990).

Some quasi-experimental studies have found that intervention programmes for men reduce recidivism rates for those who consistently attend and complete the programme (Buttle & Carney, 2004; Buttle & Pike, 2003; Gondolf, 2002; Tower, 2003), however, further analysis of these results shed light on several issues that cast doubt on the overall success of such programmes. For example, Babcock et

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<sup>26</sup> Scott et al., (2011) report that over 40 studies, five meta-analyses and numerous commentaries have been published that examine the efficacy of intervention programmes in reducing men's violence and abuse of their partners.

al., (2007) and others (Edleson & Tolman, 1992; Palmer et al., 1992) found that between 10% and 47% of men attending these group intervention programmes re-offend. Van Womer and Bednar (2002) and others (Edleson & Tolman, 1992; Gondolf, 1986) found that while group interventions reduce men's physical violence, their psychological abuse tended to increase. These evaluations also showed that there is a dropout rate of 59%, on average, after intake, and, a 39% dropout rate, on average, after the programmes had commenced. Scott and King (2007) found that many men who do participate in intervention programmes were reluctant to participate and unmotivated to change their behaviour.

In addition to these quasi-experimental studies, a number of randomised control trials and meta-analytic studies have been undertaken. For example, in a meta-analysis of twenty two batterer intervention studies in which a comparison group was included (for example, programme dropouts, non-equivalent controls), Babcock et al. (2004) found that the effect sizes associated with different approaches to family violence were small with the base rates of re-offending across studies reported to be 21% based on police reports and 35% based on partner reports. Moreover, such effect sizes were reduced further when only experimental designs were considered and the authors interpreted these results as meaning that "a woman is 5% less likely to be re-assaulted by a man who was arrested, sanctioned, and went to a batterers' program than by a man who was simply arrested and sanctioned" (Babcock et al., 2004:1032).<sup>27</sup> These less than promising results were also supported by a meta-analysis of ten controlled studies that used randomisation of participants conducted by Feder and Wilson (2006:239). When using police reports of recidivism, these authors found a 7% decrease in recidivism beyond traditional criminal justice responses, such as probation; and, when they used partner reports as the outcome measure, which is arguably a higher and more accurate estimate of violence recidivism, they concluded that "the mean effect for victim reported outcomes (for mandated clients) was zero."

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<sup>27</sup> The effectiveness of these programmes in reducing further incidences of family violence was consistently low regardless of the source of information about such incidences came from police records or partner reports or the theoretical basis for the intervention (e.g. feminist or cognitive behavioural therapy) (Stuart et al., 2007)

## 2.6 Current Explanations for the Inconclusive Empirical Results about the Effectiveness of Intervention Programmes for Men who Perpetrate Family Violence

Although commentators in the literature acknowledge the contributions of the feminist-cognitive-behavioural approaches in advancing intervention programmes for men who perpetrate violence, they also acknowledge that the largely inclusive results about the efficacy of such programmes opens the way for those working within the family violence sector to revisit the existing programmatic options for family violence offenders and better understand and explain the less than positive results currently published (Lee et al., 2013). A number of researchers have begun to offer some suggested reasons for the apparent ineffectiveness of intervention programmes for men who commit family violence offences. These reasons include those related to research designs and those related to operational and implementation issues. The research design issues surfaced in the literature include:

- *The lack of well-designed and controlled research to adequately assess the effects of the services:* For example, Gondolf (2004) points out that meta-analysis has some utility for appraising the results from single site evaluations. However, he and others (Scott & Wolfe, 2000; Fagan, 1989; Valliant, 1982) note that there are limitations with this type of design because such approaches tend to de-contextualise the evaluation by failing to examine the components within the programme and other variables that may be linked to successful outcomes and thereby precludes adequate interpretation of the results. Rather on the basis of his multi-site, longitudinal study that showed that the “vast majority of men referred to batterer counselling appear to stop their assaultive behaviour” (Gondolf, 2004:623), he called for more multi-site evaluations that include an analysis of the influence of system components on service outcomes.

In addition to these research design concerns Scott and Wolfe (2000) note other methodological problems such as low recruitment and high dropout rates.

- *Insufficient Evidence-Base Supporting Design:* Eisikovits and Edleson (1989) and Stevens (1994) observe that one likely factor contributing to the failure of intervention programmes to successfully end men’s use of violence is the lack

of theoretical and empirical information about the appropriate content of such programmes; and, Stuart et al., (2007) comment that intervention services for men who commit family violence were operationalised before their efficacy was assessed.

- *Questions about the integrity with which services are delivered in line with the designer's intentions:* For example, in their review of two intervention programmes using the 'integrated' approach, DeMaris and Jackson (1987) noted variance in the modes of intervention respectively utilised. This and other studies that examined the integrity with which programmes for men who perpetrate family violence adhere to key elements of the Duluth and cognitive behavioural approaches, respectively noted the scant attention given to male privilege in sessions and that treatment was rarely individualised, that inadequate therapeutic alliances were formed and that there was insufficient attention to self-monitoring and skill development (Day et al., 2009; Chung et al., 2004)

According to Day et al., (2009), issues associated with service integrity are underpinned by two challenges. First, those responsible for delivering services have little guidance about what a high integrity programme looks like; and second, it may be difficult to develop clear guidance with which to guide family violence interventions when such a framework needs to embrace both individual and structural explanations for family violence.

- *Inadequate resourcing:* Inadequate financial resources to support intervention services for men who commit family violence offences may result in workers being overworked and undertrained (Stuart, 2005; Holtzworth-Munroe, 2001).
- *More Tailored Services:* Murphy et al., (2008) comment that a number of commentators in the literature question whether a one-size-fits-all approach, generally adopted by group interventions for men who perpetrate family violence offences, has the potential to be successful for the diversity of circumstances and dispositions of those who are referred to such programmes. Moreover, Stuart et al. (2007) and Levesque et al. (2000) add that generally interventions are not tailored to match the context, level of motivation or individual characteristics of each man.

- *Mandated participation*: Stuart et al., (2007) and others (Murphy and Baxter, 1997; Daniels and Murphy, 1997; Ganley, 1987; Hamberger & Hastings, 1986) noted that engaging men in an intervention process under mandatory conditions while surrounded by other men who may resent and blame their partner, the system or both for the current situation reduces the likelihood of significant change.

## **2.7 Transformative Change for Men who Perpetrate Family Violence: Unpacking the Current Problem**

Inconsistent findings regarding the effectiveness of currently-available intervention options for men who perpetrate family violence has led many commentators in the family violence field to consider more closely both the various contributing factors associated with this result and promising strategies for enhancing the system's impact on reducing the rate of family violence recidivism. Some of the contributing factors and problems identified in the literature, and further examined in the following paragraphs, include those associated with increasing our understanding of the change process; enhancing motivation and readiness for change; and, supporting and facilitating access.

- *More is Required to Better Understand the Complexity of the Transformative Change Process*: The currently prevalent models of intervention for men, who perpetrate family violence, emphasise outcome - the cessation of violence - over process. According to Buchbinder et al. (2008), this perspective de-emphasises the complexity of the phenomenon whereby a series of transformative processes occur, which reflect the experiences men undergo during the change process

The majority of the current literature is quantitative and outcome orientated and there is a paucity of qualitative studies that examine the various elements of the change process. For example, Babcock et al., (2004) pointed out that "interventions that had a singular focus on cognitive-behavioural processes failed to pay attention to the battering men's inner world of emotions." Denzin (1984) and Gilligan (2001) maintain that "this is important if intimate partner violence can be viewed as a symbolic-emotional act organised in the form of a self-narrative or life story" (Maruna, 2001). Hence, these commentators maintain that there is a need to pay more attention to the processes men experience during the change process.

- *Exploring the Utility of One-to-One Engagement within the System of Responses to Family Violence*: Although the predominant intervention format for men who perpetrate violence is the group format and some commentators in the literature claim that one-to-one or individualised interventions <sup>28</sup> with this target population are inappropriate (Austin & Dankworth, 1999), there are no empirical studies supporting the claim that group intervention is more efficacious or safer than individual services. Conversely a controlled study undertaken by Musser et al. (2008) found that an individual client intake service that used motivational interviewing was more effective in promoting family violence offenders' subsequent engagement in treatment when compared to an intake service that relied on a group format.
- *Varying Levels of Motivation and Readiness for Change*: Studies of community domestic violence agencies suggest that there are considerable disparities in readiness and motivation to change amongst those presenting to participate in group programmes (Begun et al., 2003; Levesque et al., 2000). For example, a study undertaken by Murphy et al. (2005) found that amongst those who presented for group programmes, some were committed and prepared to change their behaviour; some were unprepared and resistant to any change efforts; some were ambivalent about change; and, some believed they had already made the changes necessary to prevent further instances of family violence. Given these varying levels of motivation for change, and that two large longitudinal studies have found that men who perpetrate violence and complete an intervention programme are about 20% less likely to be involved in further family violence incidences than those who dropout (Bennett et al., 2007; Gondolf, 2002) and that readiness for treatment is a significant predictor of such programme completion, there appears to be an opportunity to better address motivation and engagement amongst this target group.
- *Small Percentage of Men Access Family Violence Intervention Programmes*: While group programmes are an integral part of the multi-faceted response to ending family violence and provide oversight and monitoring of men who have

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<sup>28</sup> Murphy and Meis (2008:174) state that "individualised treatment ... (involves) tailoring counselling styles, interventions, and/or, services to specific individual's needs ... (and) require individual assessment and case formulation along with individual case management and/or individual treatment."

been the subject of various levels of criminal justice sanctions and helping prompt men's accountability; many men who perpetrate family violence do not access such programmes, either because the sanctions imposed by the criminal justice system do not include a mandate to attend an intervention programme,<sup>29</sup> or, their behaviour is not reported and they never receive the help and support from intervention programmes for their violent behaviour (Mbilinyi et al., 2008). Moreover, Andrews et al. (2001) reported that less than one third of male experiencing psychological distress will seek help from professionals. Campbell et al. (2010:414) observe that "the greatest challenge with such programs is that they are barely scratching the surface of the population of men who require these interventions."

- *Lack of Awareness about Where to Seek Help:* Many men do not know where to go to seek help to address their family violence behaviour. For example, in a study of the help-seeking behaviours of men who committed family violence offences, and undertaken by Campbell et al. (2010:418), 41% of the men who participated in the study reported they did not know where to go to receive help and support from someone who had an understanding and knowledge of the dynamics of family violence in an intimate relationship. Moreover, many of the men in this study's focus groups reported that "when they went looking for help ... there was nothing in the community being offered for male batterers."
- *Exploring Strategies that Increase the Safety of Women and Children:* Campbell et al. (2010) observed that more is needed to proactively engage men who perpetrate violence to further enhance the safety of women and children with lived experience of family violence; and, the Australian Institute of Social Relations point out that such engagement is a key gap in service delivery. This concern has been prompted by the knowledge that many women continue in relationships with their abusive partners for a variety of reasons including, a lack of economic resources, social support networks and low self-efficacy (Chronister, 2007; Hamberger & Hastings, 1993; Jennings, 1987; Synder & Scheer, 1981); and, findings from studies that examined the circumstances of men following the imposition of criminal justice sanctions, showed that many men return to "a

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<sup>29</sup> Boudouris and Turnbull (1985) note that criminal justice sanctions that do not include a rehabilitative component, such as custodial sanctions, are unlikely to deter men from further family violence offending.

relationship that was highly dysfunctional” and even when the relationship had been terminated men experienced “grief, ... extreme jealousy ... and in their state of emotional anguish” further acts of family violence occurred (Hamm & Kite, 1991:237).

This evidence suggests that more could be done to reach out and engage with men who commit family violence offences and that such engagement has the potential to mitigate recidivism and further enhance the safety of women and children.

## 3 Outreach Services

### 3.1 Outreach, Help Seeking and Hard-to-Reach Groups

A number of commentators in the literature have advocated for the use of outreach services as a means with which to access hard-to-reach populations (Snell-Johns, Mendez, and Smith 2004; Glennie et al. 2005; Coe et al. 2008).<sup>30</sup> Boag-Munroe and Evangelou (2010) define hard-to-reach populations as those who have significant needs and who, for various reasons, do not access support and services. A range of studies have sought to not only understand the circumstances associated with hard-to-reach populations but also the dynamics which might contribute to the lack of interaction between service providers and potential service users within the hard-to-reach populations.

Some of the circumstances associated with hard-to-reach populations, and of relevance to the focus of this literature review, include living in rural isolation (Doherty, Stott, and Kinder 2004; Crowley 2005; Glennie et al. 2005; Landy and Menna 2006; Brackertz, 2007b; Coe et al., 2008); domestic violence (Brocklehurst et al., 2004; Statham 2004; Crowley 2005; NESS 2005; Landy & Menna, 2006; Korfmacher et al., 2008); unstable relationships; chaotic domestic situations; entrenched behaviours; difficulty in asking for help; poor mental health; and, poor attachment (Boag-Munroe & Evangelou, 2010).

Bird (2004) and others (Crozier & Davies, 2007; Social Exclusion Task Force, 2007; Landy & Menna, 2006) point out that such circumstances focus exclusively on the individual and yet analysis suggests that there are both structural and individual reasons that explain why such populations might be hard to reach. For example, Doherty et al. (2003) found that there were three main dynamics involved in explaining why people do not access supports and services. These dynamics include:

- Under-representation, in which factors such as social disadvantage and disconnection from opportunities, lower awareness of services, and raised

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<sup>30</sup> Boag-Munro and Evangelou (2010) note that there are a range of synonyms for 'hard-to-reach,' including under served, disengaged, non-(or resistant) users, and high risk at risk.

structural barriers result in hard-to-reach populations being under-represented in services

- Invisibility, in which service provider organisations fail to take responsibility for recognising certain populations and appropriately meeting their needs and thus such populations are overlooked in service provision
- Service resistance, in which individual circumstances or previous adverse service experiences cause potential service users to decide not to engage.

### **3.2 Men Who Commit Family Violence Offences As a Hard-to-Reach Group: Why Are They Reticent About Engaging with the Helping Services?**

Ghate et al.'s (2000) study of men's attitudes towards help seeking found both structural and individual reasons for men not engaging with supports and services. Reasons these authors presented included, traditional views of masculinity which reinforce ideas of men's independence and self-sufficiency and which were antithetical to asking for help; difficulty accessing services because they were only available during working hours; and, issues of shame and self-consciousness.

These findings provided a backdrop to studies that specifically focused on exploring the reasons why men who commit family violence offences might resist engaging with the helping services – reasons which might contribute to our understandings about why this population group might be amongst those groups that have been identified as hard to reach. Commentators in the family violence literature have identified four main reasons why men who commit family violence offences do not engage with intervention services and/or take up opportunities to begin the journey towards a violence-free life: resistance; beliefs about the male gender role; missed opportunities; and, awareness and availability of services.

*Resistance:* Drawing on their study's findings from the qualitative data collected from experts on domestic violence treatment and adult males attending a domestic violence programme, Levesque et al. (2008) uncovered eight strategies men use to resist engaging either with helping services and/or engaging with the change effort. These reasons included system blaming (for example, believing that the criminal justice system treats men unfairly in domestic violence cases and that women abuse the legal system); problems with partners (for example, blaming their partner for the

violence or focusing on their partner's difficult behaviour); problems with the helping relationship (for example, focusing on the worker's inability to assist the client to feel understood, safe and supported); social justification (for example, their belief that change would be difficult given the social, cultural or religious norms within their environment); hopelessness (for example, feeling overwhelmed or anxious about making changes); isolation (for example, lack of support for their change endeavours from family and friends); psychological reactance (for example, responding angrily and negatively to external pressures to change) ; and, passive reactance (for example, participating minimally and putting little real investment into the change effort).

In addition to these identified reasons for men's resistance to engaging either with the helping services and/or engaging in the change effort, Synder and Anderson (2009) comment that resistance can also occur when there are one of a number of cultural differences between the worker and the client.<sup>31</sup> For example, the languages of some cultures do not recognise the term family violence and, in such cases, family violence may not be perceived as a crime resulting in some confusion when the criminal justice system mandates programme attendance (Lemberg, 2002). McLeod et al. (2010) maintained that men may resist participating in a change intervention because this would bring shame and stigma for the family of origin; or, be perceived as supporting the 'establishment;' or, because of language barriers; or because of fear of deportation, particularly for those from refugee and migrant communities.

*Beliefs About the Male Gender Role:* Studies carried out by Blazina and Watkins (1996) and Good et al. (1989) found that men who supported traditional attitudes about the male role in society, such as never expressing emotion or showing concern for other men, tended to avoid seeking help. Furthermore, a study undertaken by Mendoza and Cummings (2001) that sought to investigate the relationship between reference group identity dependence and help-seeking attitudes amongst men who committed family violence offences, found that those who expressed negative help-seeking attitudes had a tendency to feel connected to other men who viewed help-seeking as an inappropriate activity based on gender-role expectations. In particular, these researchers found that men who shared

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<sup>31</sup> These authors identified a range of cultural influences that underpin resistance to change including race, ethnicity, socioeconomic status, age, religion, family structure, degree of acculturation, language, ability status and citizen status.

experiences of the criminal justice system had lower help-seeking attitudes than those who self-referred to services.

Campbell et al. (2010) argued that more is required to shift societal norms to promote voluntary help seeking behaviours and encourage views about the desirability of men engaging in family violence services. Similarly, Mendoza and Cummings (2001: 839) suggested that family violence professionals who work with involuntary clients utilise a range of strategies “to turn these involuntary clients into more voluntary clients.” The strategies they suggested included showing “clients that they do have options (for example, breaching their probation, considering alternative counselling methods, attending group);” countering negative beliefs by emphasizing “that help seeking is normal (and) acceptable;” and, addressing “stereotypic attitudes and behaviours associated with traditional masculinity ... to help them to feel more comfortable in seeking ... help.”

*Missed opportunities:* In addition to societal influences that preclude men’s help seeking, a number of studies have found that when men do seek help they prefer to approach more formal sources of assistance, such as counsellors or doctors (Campbell et al., 2010; Ashley & Foshee, 2005). However, other studies have shown that professionals, particularly those in the health sector, frequently failed to identify and appropriately respond to those affected by family violence (Gerbert et al., 2002; Mbilinyi et al., 2008; Alpert, 2007). Campbell et al. (2010) recommended that more needs to be done to develop initiatives that equip professionals with the tools required to effectively engage with men involved in family violence.

*Awareness and Availability of Services:* In Campbell et al.’s (2010) study of help-seeking behaviours amongst men who commit violence against women, 41% of the men reported that they did not seek help to change their violent behaviour because they either did not know where to go for such assistance, or, there were no services in their communities for men in their situation.

### **3.3 Outreach: Origin, Outcomes, Models of Service, Unique Characteristics and Success Factors**

#### ***Outreach Origins and Outcomes***

Leviton and Schuh (1991) stated that the concept of ‘reach out’ was first evidenced in the settlement house movement of the early twentieth century, where social workers and public health nurses visited poor families in their homes to provide

guidance and information in attempts to ameliorate the effects of poverty (Gilbert, 1940; Freeman & Holmes, 1960; Larner & Halpern, 1987). Since then more formalised models of 'reach out' services have been employed in a range of contexts and described in the literature including, those designed to serve unemployed youth (Leviton & Schuh, 1999); those designed to enhance access to primary health care services (Anderson & Aday, 1978); those designed to target the homeless with mental health conditions to get them off the street and into services to meet their needs (Burwell et al., 1989; Hopper, Mauch & Morse, 1990); those involving police–mental health/advocacy partnerships designed to provide community-based outreach services to victims of intimate partner violence (Berkman, Stover, & Marans, 2007; Davis, Maxwell, & Taylor, 2006; Hovell, Seid, & Liles, 2006); and, those offering a domestic violence home-visit intervention by police advocate teams within 72-hours of domestic incident to provide safety, psycho-education, mental health, legal, or additional police assistance for women (Stover et al., 2009).

Melchior et al. (1999) and others (Rowe et al., 2002) comment that a range of studies have demonstrated both the effectiveness and cost effectiveness of outreach services (Zanis, McLellan, Alterman & Cnaan, 1996; Wright-De Agueero, Gorsky & Seeman, 1996; Pinkerton, Holtgrave, DiFranceisco, Stevenson & Kelly, 1998).

Outcomes reported from such studies include:

- Behavioural change resulting from outreach risk reduction interventions, for example, Booth & Weibel (1992) have demonstrated that outreach by peers of the target group (that is, the indigenous leader model) resulted in a reduction of HIV risk behaviours among substance abusers; and Richard et al. (1996) contend that the risk reduction interventions delivered by outreach services were more likely to lead to desired changes in behaviour than more formal interventions
- Motivating and facilitating individuals, who might not otherwise access services (for example, those with substance abuse problems and those with experience of HIV), to enter and participate in various treatment and behavioural change programmes (Gottheil, Sterling & Weinstein, 1997; Brown & Weissman, 1993; Weissman & Brown, 1995, 1996).
- Enhanced help-seeking following engagement with an outreach service: For example, within the family violence sector evaluations of two outreach police-social work interventions targeting women affected by domestic violence

incidences and delivered immediately following such incidences, found that these women were more likely and more rapidly to report subsequent abuse to the Police. Such outreach services included assistance, both immediately following the domestic violence incidents as well as follow-up interventions, and included information on services and legal interventions, crisis intervention, referrals to services, and, support to access and participate in various legal proceedings (Davis et al., 2006; Hovell et al., 2006; Stover et al., 2009).

Moreover from a policy perspective, Rowe et al. (2002) argued that such findings provide persuasive support for outreach services when the broader social costs of not providing such services are taken into account – costs such as health care costs (for example, repeated hospital emergency admissions and treatment of associated health and mental health issues); incidence of criminal offending and the associated imposition of criminal justice sanctions; increased family burden; and, lost work productivity.

### ***Models of Outreach***

Morse et al. (1996) observe that descriptors of outreach services often overlap with other service types, particularly crisis intervention and case management, and definitions of such services can vary from those that are narrow in nature to those that are broad and somewhat vague. For example, Axleroad and Toff (1987) note that narrow definitions might include a singular function of referral, linkage and liaison, while other authors describe outreach services that involve numbers of varying types of functions that meet both the clinical, advocacy, brokerage and resource needs presented by service users (Axleroad & Toff, 1987; Hopper et al., 1990; Morse, 1987; Morse et al., 1996).

Leviton and Schuh (1991) noted that although there are a variety of outreach services currently reported in the literature, they believed that such variations can be accommodated within two main models of outreach: the specific-focused model and the advocacy-based model.

These authors described the specific-focused, outreach model as seeking clients with the purpose of delivering a singular type of activity, such as a brief educational intervention or facilitate clients' access to other services. Within the context of this model, they noted that workers are not usually residents of the target areas for

intervention and have not established a recognised presence. They argued that this outreach model is suited to services that aim to canvass large areas and contact a large number of people for a short period of time.

Alternatively, Leviton and Schuh (1991) stated that the advocacy-based outreach model is designed to offer more sustained worker/client contact, as well as a growing understanding of the issues faced by the target population and the community resources available to address such issues. This sustainable presence within the community of interest facilitates workers gaining credibility and legitimacy. As a consequence, this reputational factor influences the degree to which others share information with which to better understand the issues faced by the affected target population and workers gain enhanced access to clients through others' recommendations and referrals to the outreach service. In addition, the continued or open-ended contact associated with the advocacy-based model of outreach service enables the worker to address newly identified client issues over time; advocate to overcome newly identified service barriers; and/or, reinforce desired client changes. This model presumes that addressing client issues in the short-term will improve their chances of longer-term desired changes.

Levy (1998) stated that little has been written about the specific processes involved in an outreach model of service. To redress this shortfall this author presented a comprehensive model that described the various stages of the client-worker interaction during an outreach process with homeless people who were experiencing crisis and unstable situations. This outreach model of intervention is founded on and combines two perspectives – an ecological perspective (Germain, 1991; Germain & Gitterman, 1980) and a psychosocial developmental perspective (Erikson, 1968). The ecological perspective maintains that the various stages (from first contact to termination) in the worker/client relationship involve adaptations and transactions between the worker and their client that are influenced by the qualities of the respective individuals and elements in the environment within which they interact. The psychosocial developmental perspective is premised on the notion that the change process involves incremental steps and involves developing a trusting relationship between the worker and the client, and a belief that each client has the capacity to adapt and create positive change in their life.

This outreach model of service includes five stages:

- Pre-engagement, which focuses on developing trust and safety so that the worker and client establish effective communication. Levy (1998:126) commented that this stage can take between “several seconds to several months ... (and) is potentially lengthy with more regressed people who are extremely isolated and non-social ... (and at times) aggressive.”
- Engagement, which focuses on establishing a working relationship that involves communicating with empathy and authenticity to maintain trust and defining roles and boundaries to ensure the developing working relationship is based on mutuality, rather than dependency or manipulation
- Contracting, which focuses on mapping out strategies towards reaching specific goals, both of which are owned by the client. This stage involves the worker adopting an approach of openness and positive regard and using a solution-focused approach that includes negotiating reachable goals for change and assisting the client to “work through defences of denial, projection, and rationalisation, as well as addressing an often profound sense of helplessness, self-doubt (shame), guilt (I am bad), and anger in relation to the current situation” (Levy, 1998:129).
- Contract implementation, which concentrates on the achievement of goals and can include preparing the client for services beyond the outreach service – preparation which involves facilitating the client’s readiness to enter such services by teaching stress management techniques, by encouraging the development of inter-personal skills, and, by rehearsing via role play; as well as engaging with the service environment to prepare the way for the client (Levy, 1998).
- Termination which consists of redefining the worker/client relationship, consolidating gains and redirecting the client to the established and ongoing support systems.

In recognition of the client resistance faced by many outreach workers, Levy’s model placed most emphasis on the pre-engagement, engagement and contracting stages of the model, particularly the engagement stages as the author astutely noted “if the engagement stage is not successful, then there is little hope of a ... person entering ... voluntary treatment” (Levy, 1998). Because this outreach model is based on

universal perspectives of ecology and development, Levy (1998) argued that it has the potential to be applicable and tailored to a range of sectors, practice environments and issues, including family violence.

Like Levy (1998), Morse et al. (1996) endeavoured to provide more information about the key tasks involved in outreach services. Their continuous relationship model emphasised the criticality of establishing and maintaining a trusted and meaningful relationship between the worker and the client – a task which these authors described as involving “labour-intensive and clinically-challenging effort” (Morse et al., 1996: 263).

Morse et al. (1996) described five tasks that they considered essential to successful outreach: establishing contact and credibility; establishing trust and identifying the issues; engagement; conducting assessments and planning; and, providing various service activities. The tasks associated with this outreach model and recommended activities include:

- *Contact and Credibility*: Establishing contact with a target population who does not readily access more formal office-based services either because of their reticence, or their unwillingness, or their lack of awareness, requires workers to actively reach out; use non-traditional contact methods (for example, contacting clients through assertive outreach; work with clients both where they are geographically and where they are in terms of their level of motivation for change); and, carry out the work in non-traditional settings within a community.<sup>32</sup> Morse et al. (1996) observed that establishing credibility in such circumstances can involve offering needed services and/or resources that are not available elsewhere; and/or offering a mobile service that enables the worker to contact members of the target population through connections with other service providers already trusted by such individuals; and/or by meeting members of the target population in every-day settings to “share space in a non-intrusive manner” in order “to create a sense of familiarity and safety” (Morse et al., 1996: 264)

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<sup>32</sup> Fisk et al. (1999) and others (Dennis et al., 1999; Barrow et al., 1999) also reported that outreach requires staff to shift the location of their work from offices to various community settings.

- *Establishing trust and identifying issues:* Informal conversations between the worker and the client during the initial contact, together with careful observation, begin the process of identifying issues and problems. Morse et al. (1996) noted that this more informal approach has the potential to build trust, that once established, enabled the outreach worker to question the client directly about current issues and psycho-social history. They stated this process ideally morphs into engagement.
- *Engagement:* Morse et al. (1996) advised that engagement involved both patience and perseverance; began with non-threatening talk; included accepting each client's timetable for opening up; included activity orientated encounters to further build trust; and, focused on tackling client-identified issues that were concrete in nature and thus more easily solved (Morse et al. 1996)
- *Assessment and planning:* Assessment and planning involved identifying client's issues and goals and the corresponding resources (including existing support systems and client strengths) and services to meet these goals (Morse et al., 1996)
- *Providing service interventions:* A wide range of service interventions should be available to the outreach worker in order that services can be tailored to best meet each client's individual circumstances. Such services might include maintaining a professional working alliance with the client; providing linkages to services; and, using both non-directive and directive intervention approaches. Of such intervention approaches, Morse et al. (1996) wrote:
 

“(These) activities seek to help the clients better understand themselves and their environment, to learn new skills and attitudes to cope with situations, and to make different life choices ... (W)orkers need to be flexible (in terms of) length, spacing and location ... (for example) “car therapy” ... (using) a client-centred approach to communicate unconditional positive regard ... (that) enables clients to change negative self-images ... (using) a direct psycho-educational approach to help clients identify, label and change certain behaviours” (Morse et al., 1996: 267).

### ***Outreach Characteristics and Success Factors***

In addition to providing some more information about the key processes and tasks involved in outreach service models, the literature also described a range of critical characteristics and success factors associated with outreach services. Some of the characteristics that seem to differentiate 'outreach' services from others include:

- An activity or process, rather than a state, that an organisation undertakes to actively seek and contact potentially hard-to-reach clients (Crozier & Davies, 2007; Coe et al., 2008; Flanagan & Hancock, 2010; Cortis, 2012; Leviton & Schuh, 1991)
- Services are often delivered in non-traditional settings, for example outside an office setting, and involve shifting the locus of provision towards the community (Doherty et al., 2003; Boag-Munroe & Evanelou, 2010)
- Flexibility in when services are delivered, often involving weekend and evening interactions with service users (Morse et al., 1996; Fisk et al., 1999; Flanagan & Hancock, 2010; Avis et al., 2006; Brackertz, 2007; Coe et al., 2008; Korfmacher et al., 2008; Ghate et al., 2000; Landy & Menna, 2006; de la Cuesta, 1994)
- Services target client populations that might otherwise be ignored or not be served, for the purpose of reducing various barriers to service such as, lack of awareness; requiring support to access; lack of trust; fear of engagement; lack of client/worker ethnic match; etc (Stover et al., 2009); and, delivering various types of services to improve the target population's functioning and/or utilisation of services that address their identified needs (Leviton & Schuh, 1991; Morse et al., 1996; Richard et al., 1996).
- Lipsky (1980) referred to the concept of "people processing" – a concept that embodies the understanding that services work with people for a specified number of sessions regardless of the unique circumstances and needs presented by each individual. This author argued that this type of approach to service provision, often associated with purchase-of-service contracting, was antithetical to the values inherent in outreach – values of developing relationships with clients and staying with them during their process of change until they are ready to move on. For example, Coe et al., (2008) emphasised that workers often had to make repeated attempts to contact and build

relationships with hard-to-reach clients, and, Cortis (2012) observed that developing such high trust relationships with this client group consumed more staff time and effort than that required to develop relationships with other societal groups.

Some of the success factors identified in the literature that are associated with 'outreach' services include:

- *Trusting and meaningful client/worker relationship*: Without exception, studies in the literature emphasised that establishing and maintaining trusting and meaningful worker/client relationships within the context of outreach services with hard-to-reach groups was the most critical ingredient for success (Boag-Munroe & Evangelou, 2010; Forehand & Kotchick, 1996; Katz et al., 2007; Moran et al., 2004; Cortis, 2012). Commentators note that such relationships are characterised by trust and respect; being non-judgemental; and being able to relate to people in a way that is empowering (Flanagan & Hancock, 2010; Landy & Menna, 2006; Cortis, 2012).

A range of studies noted that building relationships with which to engage hard-to-reach clients (for example, those who are experiencing unstable or poor family relationships, those struggling to organise themselves and, those living in chaotic situations) in the process of change was time intensive and required a high level of professional skill (Brocklehurst et al., 2004; Milbourne, 2002; Statham, 2004; Zeanah et al., 2005). Avis et al. (2007) and others (Barrett, 2008; Moren et al., 2004; Stanley & Kovacs, 2003) state that quality relationships with 'resistant clients' require one-to-one contact and engagement to clarify service processes and address emerging concerns. Cortis (2012) suggested that considerable time and effort needs to be expended by workers to fully understand each client's unique history and build the required layers of connections within the worker/client relationship – connections that enabled the worker to gradually introduce suggestions for change. Morse et al. (1996) noted that relationship building is essential to gain each client's cooperation and participation in help-seeking, and once established, such relationships could be used as an instrument for developing improved interpersonal relationships with others. These commentators wrote that "motivation (will) result through the clinical relationship" and the

application of interventions, such as supportive and educational interventions, and this combination would promote incremental change over time (Ageriou & McCarthy, 1990; Osher & Kofed, 1989).

*Balancing hope with realism:* Rowe et al. (2000) argued that encapsulating the humanistic values, including a belief that positive change is possible for all, is a critical success factor for outreach services. Morse et al. (1996) agreed, but note that hard-to-reach clients often presented for service with a sense of frustration and hopelessness and cautioned outreach workers to simultaneously provide their clients with a sense of hope for the future, whilst maintaining realistic expectations about the time and effort needed to make changes.

- *Person-centred and individualised services:* Hopper et al. (1990) and others (Rog, 1988) argued that effective outreach services were both intensive and personalised and that services that just focused on screen-and-refer approaches were unlikely to achieve desired results. Melchior et al. (1999) and Morse et al. (1996) supported this position. They noted that tailoring was required because outreach services often target populations that presented with a varying multitude and complexity of issues and in such circumstances, they argued that the amount of contact required between workers and clients may vary considerably. In addition, individualising services was required because clients presented in varying positions of readiness to change (Landy & Menna, 2006). Such individualising or matched interventions have been found to be effective in improving compliance with men who commit family violence offences (Kistenmacher & Weiss, 2008).

Like individualising services, empowering hard-to-reach clients to make decisions about the actions they will take to progress along the journey towards was noted as a success factor. For example, studies undertaken by Arias et al. (2002) and others (Erez, 1986; Murphy & Baxter, 1997) have found that involving men who have committed family violence offences in setting goals for change facilitated their acceptance of such goals, enhanced their commitment to change, and, enhanced the effort they apply to the change process.

- *Integrating motivational approaches across the stages of engagement in outreach services:* Rowe et al. (2000) and others (Landy & Menna, 2006) recognised the strong family resemblance between motivational interviewing and outreach. They suggested integrating these approaches to enhance service effectiveness with hard-to-reach clients. For example, they contended that both approaches recognised that people were often ambivalent about changing their behaviour; that such ambivalence was normal; and, behavioural change involved a gradual process that required working with each client's external and internal motivations and values. Moreover, they observed that both approaches involved working with clients through a process that included a series of stages: In motivational interviewing the process involved a series of engagement stages - pre-contemplation, contemplation, determination/preparation, action, maintenance and termination; and, in outreach the process involved a series of engagement stages that included contact, trust building, acceptance that change is required, supporting change efforts and, maintaining positive behavioural changes.

Landy and Menna (2006) observed that the first three stages of change (pre-contemplation, contemplation and determination/ preparation) were often the stages that outreach services engage with clients. Furthermore, they argued that it was these stages of engagement that were most challenging for services. Rowe et al. (2000) contended that outreach was often the motivator for clients to start the change process and even if clients were not initially interested in receiving support and service, workers needed to begin the process of building a trusted relationship and continue to be available so clients could return when they decided to begin the journey of change.



## **4 Engaging Men in the Journey towards a Life Free of Family Violence: Promising Approaches and Strategies**

### **4.1 Integrating the Trans-theoretical Model of Behaviour Change and the Protection Motivation Model: A Promising Framework for Engaging Men in the Journey of Change Across a Continuum of Varying Levels of Readiness**

#### ***Transtheoretical Model of Behaviour Change***

The trans-theoretical model of behaviour change, first proposed by Prochaska and DiClemente, (1985) has been used as the theoretical framework for motivational interventions that seek to modify a variety of problem behaviours, including family violence (Daniels & Murphy, 1997; DiClemente & Prochaska, 1982; Prochaska & DiClemente, 1983). Numerous studies in the literature have demonstrated that men who engage in stopping violence services use the processes and constructs defined in the trans-theoretical model of behavioural change (Babcock et al., 2005; Daniels & Murphy, 1997; Dutton, 1986; Dutton & Starzomski, 1994; Levesque et al., 2000; Maiuro et al., 1988; Murphy & Baxter, 1997; Pense & Paymar, 1993; Rosenbaum & O'Leary, 1986).

This model postulates that there are five stages in the process of behaviour change:

- Pre-contemplation, in which individuals are not considering behaviour change
- Contemplation, in which individuals are seriously considering behaviour change
- Preparation, in which individuals have made a decision to take action in changing their behaviour
- Action, in which individuals are actively modifying their behaviour; and,
- Maintenance, in which individuals continue to maintain the new behaviour pattern and apply various strategies to avoid relapse.

Prochaska and DiClemente (1992:185) described each stage of change using a “specific constellation of attitudes, intentions and behaviours”<sup>33</sup> and these characterised an individual’s readiness for change and their level of engagement in the change process.

Within the context of these stages of change Prochaska and colleagues have described two types of change processes: experiential and behavioural (Prochaska, DiClemente & Norcross, 1992). Experiential processes involved thinking about, or reacting emotionally to, one’s problem behaviour and its impact on others and the environment. Behavioural processes involved behaviour change or altering the environment to support such changes. Prochaska et al. (1988) have empirically validated five experiential processes (consciousness raising, dramatic relief, environmental re-evaluation, social liberation and self re-evaluation) and five behavioural processes (helping relationship, stimulus control, counter-conditioning, reinforcement management and self-liberation). These authors observed that experiential processes of change predominate in the ‘pre-contemplation’, ‘contemplation’ and ‘preparation’ stages of the model before the individual has made a decision to change; and, the behavioural processes predominate during the ‘action’ and ‘maintenance’ stages when the individual was actively attempting to change their behaviour.

### ***The Protection Motivation Model***

The protection motivation model, first described by Rogers (1975, 1983), identified five main variables that influenced people’s motivation and decisions to change their problematic behaviour. These variables are:

- Vulnerability which refers to an individual’s subjective perception of the risk of negative consequences for continuing their family violence offending
- Severity which refers to an individual’s subjective perception of the severity of negative consequences for continuing their family violence offending

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<sup>33</sup> Wierzbicki and Pekarik (1993) note that the stages of change are based on attitudes of resistance versus motivation, blame versus responsibility and unresponsiveness to treatment versus proactivity.

- Response efficacy which refers to the degree to which individual's believe that changing their family violence offending will be effective in reducing or eliminating the negative consequences
- Self-efficacy which refers to the individual's belief that they have the capacity and capability to lead a non-violent life style
- Costs which refers to the individual's estimation of the amount of effort, discomfort and inconvenience required to change their problematic behaviour in order to lead a non-violent life style

Studies undertaken by Cismaru et al. (2008) and others (Floyd et al., 2000; Milne et al., 2000; VicHealth, 2007) have demonstrated the explanatory and predictive power of the protection motivation model in behavioural change and therefore it has utility for initiatives that aim to influence men who perpetrate family violence to change their offending behaviour in favour of violence-free behaviour.

***Combining the Trans-theoretical Stages of Change and the Protection Motivation Models: Enhanced Understanding of Appropriate Intervention Strategies to Match Characteristics of Individuals Across the Change Continuum***

Cismaru et al. (2008) and Cismaru and Lavack (2010) maintain that in combination, the trans-theoretical stages of change model and the protection motivation model have utility for better understanding and identifying the characteristics of individuals within each stage of the change process. As a result of such identification, intervention approaches can be selected that are most likely to motivate and influence individual's decisions to shift from one position along the continuum of the behavioural change model to the next. For example, Cismaru and Lavack (2011) explain that the protection motivation model variables associated with pre-contemplation are severity and vulnerability; variables associated with contemplation are severity, self-efficacy and cost; variables associated with preparation and action are response efficacy, self-efficacy and cost; and, variables associated with maintenance are severity, vulnerability and cost.

*Pre-contemplation Stage:* Characteristics frequently associated with those in the pre-contemplation stage include being unaware of the consequences of their behaviour for themselves or others (Donovan & Vlasis, 2005; Daniels & Murphy,

1997); believing that there is no problem to change (Donovan & Vlasis, 2005; US Department of Justice, 1984); and, not being involved in any change strategies.

Daniels and Murphy (1997) have demonstrated that movement out of the pre-contemplation stage of change occurs when men are faced with the realities of their violent behaviour and begin to see themselves as different from the people they want to be. Therefore, recommended intervention strategies include encouraging men to recognise the signs and forms of violent behaviours (for example, emotional abuse and controlling behaviours); the consequences of such behaviour (for example, losing their families; hurting their children; losing contact with their children; and/or facing criminal charges if they fail to comply with court orders); the discrepancies between their actual violent relationships and desired healthy relationships; and, emphasising the benefits of building healthy relationships, such as the link between such relationships and outcomes such as enhanced wellbeing and protective factors that shield people from the negative effects of life stress that can in turn affect their health and work (Daniels and Murphy, 1997).

*Contemplation Stage:* The characteristics associated with those in the contemplation stage of change include, acknowledging that they are committing family violence offences, perceiving that they may have a problem and weighing up the pros and cons and the effort that they may have to make to resolve it. However, they have yet to make a commitment to take the necessary actions required to make positive change.

Several commentators in the literature have suggested possible intervention strategies that can be used by workers during the contemplation stage. For example, Block and Keller (1998) suggest providing men with the opportunity to further consider the severity of their violent behaviour by encouraging them to quantify and name it and its negative effects (for example, the physical and mental health consequences for those affected by family violence, such as the negative effects for children who witness family violence; the loss of significant relationships; and, the negative effects on men's own health, self-esteem and legal status). In addition, Slater (1999) suggests emphasising the positive benefits to be gained by positive behavioural change, whilst simultaneously reducing perceived costs and increasing self-efficacy.

*Preparation Stage:* Recognising that there will be significant benefits from changing to a life that is violence free and believing that they have the capacity to take the necessary actions to achieve this goal, are the key characteristics associated with individuals in the preparation stage of change. With this self-efficacy and response efficacy in hand, men in this stage of change actively seek and assess information about available options for assistance and support and select the preferred option from amongst them.

Prochaska et al. (1992 and 1994) recommend that the work of the helping profession during this stage of change should focus on helping individuals commit to action by maximising opportunities to act. Daniels and Murphy (1997) suggest that workers focus on assisting men to set realistic goals, for example, restraining from physical violence and threats; providing men with opportunities to act by suggesting ways in which to accomplish steps towards goal achievement; and, providing opportunities for men to discuss their current situation and express their feelings about their problems and proposed solutions.

*Action Stage:* During the action stage, individuals are characteristically putting considerable effort into leading a life that is violence free, and yet they are continuing to evaluate the costs, self-efficacy and response efficacy associated with the changes they have made.

Rosenbaum and O'Leary (1986) advise workers during this stage of the men's change process to continue emphasising the benefits of leading a violence-free life, whilst at the same time providing concrete alternative actions to violence such as, time out; staying seated during difficult conversations and/or holding such discussions when fatigue or distractions are minimal; engaging in positive lifestyle activities, such as exercise or using relaxation techniques; and, including pleasant activities within their lives.

*Maintenance and Relapse Stage:* The maintenance stage is associated with leading a life free of family violence. Whilst Cismaru and Lavack (2011) state that workers during this stage should focus on strategies that reward men for their efforts to maintain positive behavioural change, they also recognise that many find it difficult to sustain such changes and instead revert to their former family violence offending. With this recognition in mind, Daniels and Murphy (1997) suggest that workers provide men with relapse prevention strategies that include recognising and

effectively managing high-risk situations and, strategies that promote life style balance.

Muldoon and Gary (2011) conclude that to be effective, family violence workers need to assess each client's stage of readiness to change with an appropriate set of change strategies. For example, Alexander and Morris (2008) and Kistenmacher and Weiss (2008) state that for those clients in the pre-contemplation stage of change, workers should use motivational strategies to increase client's awareness of the impacts of their violent behaviour and with such awareness clients may shift to the contemplation stage of change and begin to identify reasons for changing.

#### **4.2 The Efficacy of Motivational Interviewing in Enhancing Engagement and Readiness to Change**

Sheehan et al. (2011) support the use of motivational interviewing to facilitate 'turning points' where men recognise their abusive behaviour as problematic and Miller and Rollnick (2002) argue that motivational interventions use a range of non-confrontational methods to facilitate individuals discovering their own reasons for change. These methods are based on the assumption that establishing a supportive working relationship with clients will reduce their defensiveness and increase their willingness to explore the need for change. Musser and Murphy (2009) agree with these observations and state "(motivational interventions focus on) "increasing awareness of the problem behaviour, including its positive effects and negative consequences, affirming autonomy and choice, and resolving ambivalence about change."

Two studies have demonstrated the benefits of motivational interviewing within the context of individual interventions for men who commit family violence offences. Kistenmacher and Weiss' (2008) randomised control study of the use of motivational interviewing as a pre-batterer intervention programme, found that those who participated in a motivational intervention decreased the extent to which they blamed their violence on external factors and improved on the various elements of the readiness to change subscales. In the second study men were either assigned to two sessions of motivational interviewing before being referred to a cognitive behavioural group or assigned directly into a community-based stopping violence programme. Findings from this study showed that compared to the control group, the motivational interviewing group had a higher homework compliance in the

subsequent group programme; higher group facilitator ratings for the working alliance; enhanced help seeking outside the context of the group programme; enhanced personal responsibility for their abusive behaviour; and, significantly lower rates of physical partner assaults during the 6 month period after completing the group programme (Musser et al., 2008). Taft et al. (2003) and Brown and O’Leary (2000) argue that motivational interviewing facilitates the development of a working alliance between the worker and the client which in turn predicts lower post-treatment rates of abuse.

### **4.3 The Value of the Therapeutic Alliance in Promoting Engagement**

A number of researchers note the significant challenges associated with both establishing a working alliance with men who commit family violence offences and engaging them in the process of change. For example, Feazell et al. (1984) note the high rate (33%-50%) of service refusal amongst this target population; Hamberger and Hastings (1989) and Saunders (1994) comment that between 30% and 40% of participants in stopping violence group programmes dropout; and, DiGiuseppe et al. (1994) observe that many participants in their study found it difficult to define goals for change because they were of the view that they did not have a problem. Instead, the men in this study identified a number of external forces that caused the violence and because of this belief, they tended to deny, minimise and blame others for the incidents of family violence. Murphy and Baxter (1997:609) note that the approach most commonly used in family violence service provision is to directly confront such defences and that participants’ responses to confrontation include “vociferous counterarguments, silence, phony agreement, or termination of treatment” – an approach that may well strengthen such defences. Moreover, these commentators and others (Alexander & French, 1946; Safran & Muran, 1996) maintain that a confronting approach reinforces the clients’ negative interpersonal schemas that support beliefs that relationships are based on power and control, rather than based on understanding, support and trust; that this approach, particularly in the early stages of engagement, precludes the development of a collaborative alliance between workers and clients – an alliance that has been found to be a critical element in motivating behavioural change (Mooney and Padesky, 2000); and, Scalia (1994) argues that confrontation increases men’s aggression resulting in a worsening of their potential for further abuse.

In contrast to other contexts, a number of authors have observed that those working within the family violence field have tended to downplay the significance of developing a positive therapeutic relationship within the context of service provision (Daniels & Murphy, 1997; Jennings, 1987; Murphy & Baxter, 1997). Taft et al. (2004) and others (DiGiuseppe et al., 1994; Murphy & Baxter, 1997; Rosenberg, 2003) have argued that a strong working alliance is essential for motivating individuals to engage in behavioural change, particularly those who present as resistant, angry and mistrustful; and, Sonkin and Dutton (2003) have found that responding to clients with empathy and attunement during the early stages of contact results in such clients feeling better understood and not judged – an experience which facilitates their developing a different perspective of themselves, their relationships with others and their abusive behaviour. Moreover, Johnson and Talitman (1997) maintain that a positive working alliance facilitates men’s sharing the emotions and thoughts that underpinned their violent behaviour – sharing that has been found to assist their efforts to change such behavioural patterns. Miller et al. (1993) and others (Miller, 1985; Miller et al., 1980; Kivlighan & Shaughnessy, 1995; Mallinckrodt, 1996) agree with these observations and conclude that supportive and empathetic approaches are predictive of improved family violence service engagement, continuance and results - results such as increased ability to receive social support and enhanced interpersonal functioning.

Bordin (1979) describes the working alliance as the collaboration between client and professional in working towards change. Such working alliances are reciprocal in nature and involve not only the worker’s contribution but also the client’s ability and effort to work on presenting issues. The working alliance includes three elements:

- A warm and supportive bond between the client and the professional that is characterised by trust, acceptance and confidence
- Mutual agreement and shared understanding of the service goals and outcomes sought
- Mutual agreement and shared understanding about the utility of the tasks and actions required for goal achievement

Of establishing the supportive bond associated with the working alliance, Taft and Murphy (2007) note that the worker needs to show interest, openness and

understanding in order for clients, particularly those with whom rapport is not easily established, to develop a sense of trust and attachment. This observation is supported by Campbell et al.'s (2010) study of help-seeking behaviours amongst men who commit violence against women. In this study, the male informants stated that they would prefer to engage in a discussion about their violent behaviour with professionals who were trustworthy, non-judgemental, knowledgeable about family violence, and who were bound by client-professional confidentiality.

A number of studies have also highlighted the significance of the goals component of the working alliance, particularly its link with levels of client commitment to ongoing service attendance. For example, a studies undertaken by Brown et al. (1997) and Cadsky et al. (1996) found that there were lower levels of service dropout when there was worker/client agreement on service goals and when such agreed goals were associated with mitigating client-identified problems. Moreover, Lee et al. (2007) found that client-determined goals assisted them to move away from blaming others for their violent behaviour; increased their awareness of the choices open to them; offered them an opportunity to play an active role in their process of change; and, held them accountable for developing a better and different future.

A large number of well-designed studies have demonstrated a significant correlation between the working alliance and positive outcomes and across outcome measures provided by family violence workers, family violence service clients and independent raters (Murphy & Baxter, 1997; Horvath & Symonds, 1991). For example, Rosenberg's (2003) study involving in-depth interviews with men at the completion of a 52-week family violence intervention programme, found that of all the identified programme elements the study's informants reported that the supportive alliance between worker and client was the most helpful in their efforts to address their violent behaviour patterns. Moreover, a range of studies that examined the relationship between positive working alliances and drop-out rates, have found that the therapeutic alliance is the strongest predictor of successful service completion (Cadsky et al., 1996; Rondeau et al., 2001; Stosny, 1994; Tolman & Bhosley, 1990; Taft et al., 2001). Other studies have found a significant association between ratings of positive working alliances and reduced levels of physical and emotional abuse following service completion (Brown & O'Leary, 2000; Taft et al., 2003).

Whilst it is clear that a large number of process and outcome studies have described positive results from creating a positive working alliance with clients who have committed family violence offences, the authors of these and other studies are also mindful of the need for workers to put in place strategies to counter the risk of collusion between themselves and their clients. For example, Musser et al. (2004) and others (Taft et al., 2001; Millar & Rollnick, 2002) suggest adopting strategies from motivational enhancement approaches to counter this risk – strategies such as providing post-assessment feedback; developing goal-centred contracts; exploring the costs and benefits of continuing violent behaviour; and, engaging in open discussions about the consequences of not making the changes necessary to lead a violence-free life.

#### **4.4 Language as a Tool for Maintaining Engagement Whilst Countering the Dilemma of Collusion**

Adams (2012) draws attention to the dilemma often faced by those who work with men who are violent to their partners. On the one hand the foundational model upon which many professionals base their work with men is the pro-feminist approach – an approach that views male partner violence as a socio-political issue; reasons that men are violent towards their partners because of the gains they receive from such actions and, that such gains go unchallenged because of the socially sanctioned inequality of power between men and women; and, seeks to challenge men's belief systems that support their control and violence of their female partners (Pence & Paymar, 1993). On the other hand, when professionals make contact with men when they first present for services they observe that men perceive themselves as powerless (Gondolf & Hanneken, 1987) – an experience of powerlessness derived prior experiences of being physically, emotional or sexually abused (Fitch & Popantonio, 1983; Kivel, 1992); and/or issues with substance abuse (Kivel, 1992; Roberts, 1987; Testa, 2004); and/or employment loss (Fitch & Popantonio, 1983; Sonkin et al., 1985; Howell & Pugliesi, 1988); and/or an inability to express their emotional needs (Allen et al., 1989; Maiuro et al., 1986; Holtzworth-Munro & Anglin, 1992; Goldstein & Rosenbaum, 1985); and/or insecurity about their relationships (Roy, 1982; Dutton et al., 1994); and/or involvement with the criminal justice system and associated restrictions imposed (Adams, 2012); and/or social isolation (Allen et al., 1989; Kivel, 1992; Levenson & Gottman, 1983).

The dilemma for professionals, therefore, is maintaining the balance between challenging men's use of power and control in a way that does not result in their withdrawing from service during the initial period of engagement and, adopting an approach that encourages continued engagement without colluding with the various justifications offered by men for their violence. In order to manage this dilemma in favour of continued engagement, Adams (2012) suggests an approach that utilises language as a critical tool for neutralising communications that reinforce men continuing their abusive behaviour whilst simultaneously creating opportunities for men to make positive change. This approach requires practitioners to recognise when men are using language that justifies their continued violence and abuse, for example minimising and justifying; neutralising such language in a way that maintains safety and avoids collusion, for example, asking questions, the answers to which, make such justifications less viable; and, grasping any opportunities to validate men's expressions of their own personal realities, for example, providing opportunities for men to monitor and express feelings and explore the priorities in their lives, such as family, achievement at work or maintaining good health - opportunities that reinforce the value of their own realities (Adams, 2012:463).

#### **4.5 One-to-One and Individualised Services: Potential for Increasing Engagement**

Murphy and Meis (2008) comment that there is a paucity of research literature on individual services for men who commit family violence offences. These authors make the distinction between individual and individualised services. Individual services involve working with men on an individual or one-to-one basis, whereas individualised services are those that tailor the style and intervention approach to meet the unique circumstances and needs of each individual. They argue that individualised services have a range of potential benefits. These benefits include:

- The opportunity to identify and address co-morbid conditions, such as substance abuse and significant mood conditions, that may not only present a risk for further abusive behaviour, but also be a barrier to engaging in the change effort
- The opportunity to tailor intervention strategies to match each client's position on the continuum of stages of change

- The opportunity to focus attention on specific change goals pertinent to the needs and risk factors associated with each client's specific circumstances.

While there appear to be no empirical studies that support the notion that group interventions are more effective and safer than individual services (Murphy and Meis, 2008), Musser et al.'s (2008) study found that an individual client intake strategy that included elements of motivational interviewing was more effective in promoting men's motivation for behavioural change in comparison to a group intake format. In addition, other studies have shown that individual sessions enhance engagement in the change process, particularly where empathetic reflection was used to deal with client anger and resistance, and Brown & O'Leary (2000) maintain that such approaches assist the development of a therapeutic alliance between worker and client and this in turn predicts lower levels of abusive behaviour following service.

Whilst one-to-one service formats for men who perpetrate family violence appear to add value to the system of family violence responses, Day et al. (2009) cautions workers to ensure their interactions with this client group focus on enhancing men's responsibility for their violent behaviour together with raising their awareness about the negative impact such behaviour has on women and children.

## **5 Engaging in the Process of Change: Perspectives and Experiences of Men and Women Affected by Family Violence**

### **5.1 Turning Points: Perspectives from Men About Factors that Influence Engagement and Change**

A range of studies have sought to identify factors related to change through qualitative analyses of information gathered from men in various settings (for example, criminal justice and community-based settings) and at various stages of the change process (for example, those who were participating in family violence intervention programmes; those who had completed family violence intervention programmes; and, those who had, for a number of years, led lives free of family violence) (Scott & Wolfe, 2000; Stefanakis, 2000; Wangsgaard, 2001; Pandya & Gingerich, 2002; Silvergleid & Mankowski, 2006; Buchbinder & Eisikovits, 2008).

These studies found that men's decisions to change are influenced by internal and external factors. For example, studies undertaken by Wangsgaard (2001) and Stefanakis (2000) highlighted the importance of having both an externally presented opportunity to create a new nonviolent identity (e.g. a supportive person or a spiritual experience) and the internal psychological agency to make the most of the provided opportunity. Moreover, these studies noted that the external factors facilitated men's engagement with the internal psychological processes that facilitated their respective change processes.

Of the external influences of change, Silvergleid and Mankowski (2006) and others (Sheehan et al., 2012:32; Pandya & Gingerich, 2002; Muldoon & Gary, 2011) found that the imposition of a criminal justice intervention, 'turning into the likeness of his father that he despised', fear of losing partners and children and/or involvement of child protection services were identified by their study's informants as critical drivers that initiated their journey towards a violence-free life. Within the social service environment, this study and others (Wangsgaard, 2001; Gondolf & Hanneke, 1987; Muldoon & Gary, 2011) found that key influences of change included the skills and attributes of the workers and the support and modelling of peers. For example, change was influenced by workers who were empathetic, supportive and respectful – factors that created an enabling and safe environment in which men could share and

explore new ways of being and behaving whilst acknowledging the way their behaviour had negatively impacted on others and taking responsibility for changing their behaviour. Not only were the skills and attributes of the workers influential factors in driving change, but also the commonality of lived experiences of family violence and sharing of stories by peers enabled men to gather helpful suggestions about how to act differently – a process of re-socialisation where individuals learnt “new ways of being men ... adopting language that communicates respect for others ... accountability, non-sexist beliefs, and a willingness to be vulnerable” (Silvergleid & Mankowski, 2006:151).

As well as identifying key external influences of change, men’s accounts in the literature also identify a number of internal processes that were significant for them in facilitating their respective journeys towards a violence-free life. Some of these internal influences of change identified in a range of studies include:

- *Taking Responsibility*: Overcoming denial of past violent behaviour and being honest and taking responsibility for such past abuse as well as taking responsibility for change, including the adoption of new ways of thinking and acting (Scott & Wolfe, 2000; Wangsgaard, 2001; Pandya & Gingerich, 2002; Silvergleid & Mankowski, 2006). Catlett et al. (2010) and others (Flinck & Paavilainen, 2008; Scott & Wolfe, 2000; Silvergleid & Mankowski, 2006) emphasise the correlation between situations where men make the decision to change their behaviour autonomously and of their own volition and their active engagement in the journey towards a violence-free life. For example, quantitative studies of the application of the trans-theoretical model of change within the family violence arena, confirmed the hypothesis that those in the latter stages of the change continuum (preparation, action and maintenance) have an awareness of the problem, are motivated and, have made a self-determined decision to actively modifying their behaviour (Alexander & Morris, 2008; Babcock et al., 2005; Brodeur et al., 2008; Daniel & Murphy, 1997; Eckhardt et al., 2008; Murphy & Maiuro, 2008; Simmons et al., 2008; Scott & Wolfe, 2003).
- *Empathy*: Developing empathy with others, particularly for their partners’ victimisation experiences (Scott & Wolfe, 2000)

- *Dependency*: Reducing dependency including deciding and accepting responsibility for changing their abusive behaviour and coming to the realisation that their partners are autonomous individuals with a right to make their own decisions about relationships (Scott & Wolfe, 2000; Wangsgaard, 2001; Pandya & Gingerich, 2002; Silvergleid & Mankowski, 2006) <sup>34</sup>
- *Communication and Other Skills*: Adopting and practicing new skills, including how to take time out, identifying and controlling feelings, engaging in positive self talk and improved communication skills (Pandya & Ginerich, 2002; Scott & Wolfe, 2002; Gondolf & Hanneken, 1987; Silvergleid & Manowski, 2006). Silvergleid & Manowski (2006) reported that men in their study stated that such skills provided them with the impetus to change because they raised their awareness and motivation as well as providing them with concrete alternatives to behaving in a violent manner. Of learned communication skills, the men in Scott & Wolfe's study (2000: 837-838) noted that conflict management and resolution skills and learning to listen during difficult conversations allowed them to communicate negative feelings and listen to other's expressions of negative feelings without having such discussions escalate into abusive arguments. In this same study, the men also noted the importance of learning the skills for intimate conversations that enabled them to share feelings with others and "support their partners' expressions of feelings towards them". <sup>35</sup>

Interestingly, while Scott and Wolfe (2000) note that empathy and responsibility have a predominant role in many stopping violence programmes (Pirog-Good & Stets-Kealey, 1985), there is little evidence in the literature that links these factors with change in abusive behaviour. Conversely, both qualitative and quantitative studies have demonstrated the link between variables associated with men's relationships, such as communication and dependency, and change in abusive behaviour – an

<sup>34</sup> Predicated on attachment theory, a range of studies have demonstrated that the presence of exclusive dependency is a predictor of incidences of family violence (Bartholomew & Horowitz, 1991). For example, Dutton et al. (1994) found strong positive correlations between fearful attachment and men's domination, isolation and emotional abuse of partners.

<sup>35</sup> Scott and Wolfe (2000) note that communication as a variable associated with change and identified by men in their study, is supported by a range of quantitative studies that compared abusive and non-abusive men. These studies showed that communication skill deficits were more likely to be associated with abusive men (Allen et al., 1989; Holtzworth-Munroe, 1992)

observation that has led these authors to suggest that interventions with men who have committed family violence should focus on developing healthier relationships.

Using a somewhat different approach from many other studies to the analysis of the data collected in their study of men's experience of the intervention process, Buchbinder and Eisikovits (2008) sought to apply an existential analysis to men's perceptions of the factors that facilitate positive and lasting change to a life of non violence. In adopting such an approach, these authors sought to challenge providers of family violence services to shift from a focus on coping to growth mechanisms of change. Their analysis surfaced some principles for working with men who perpetrate violence. They argue that these principles have the potential to induce real change, growth and the acquisition of new meanings about intimate partner relationships for men who have committed family violence, rather than a focus on coping mechanisms that allow men to maintain their status quo position and "merely" teaching them to speak therapeutic jargon and recite scripts of understanding, insight and change" (Buchbinder and Eisikovits, 2008:627).<sup>36</sup> The principles described by these authors include the need for family violence interventions to:

- Assist men to deal with the anxiety they experience as they begin the process of change and enter situations of uncertainty – anxiety that is experienced when men begin to confront their previous self-deception; face feelings of guilt, pain and failure; and, search for a new sense of self overcome
- Facilitate men's development of a positive and future focused non-violent identity, which provides the means with which they can realistically understand the impact their violent behaviour has had on their intimate partner relationships, and, establish and maintain the momentum of change required to reach the desired future-focused identity.
- Recognise that, for the men, the family violence intervention involves a struggle for authenticity – the process of building an alignment between their internally-driven, rather than externally-driven, commitment to and sense of

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<sup>36</sup> Buchbinder and Eisikovits' (2008) approach to family violence intervention is also supported by Maruna (2001) who argued that those who remain crime free over time are those who make sense and attach new meaning to their lives.

responsibility for taking a course of action towards a way of being that is non violent and the actual way in which they act in the world.

- Enhance each man's acceptance of responsibility for what he has done to contribute to where he currently is in his life by helping them to face and challenge his defences and evoke his will and agency for change to a life without violence

## **5.2 Women's Perspectives and Experiences Before, During and After their Partners Participation in Men's Stopping Violence Services**

Gondolf (1997) observed that there are few studies that describe women's responses to their partners' participation in stopping violence interventions and Dankwort and Austin (1995) note that there are even fewer studies that seek to gain women's perceptions on the impact of such programmes for men, women and their families. A number of commentators in the literature draw attention to the importance of exploring the perceptions, experiences and impact of stopping violence interventions for men. Valente (2002) and others (Krishnan et al., 2001; Hayward et al., 2007) maintain that many women choose to stay with their partners for a variety of reasons including faith, money, shame, love and familiarity, and therefore, it is critical to understand whether such interventions result in healthy relationships, promote safety and reduce the risk of recidivism. Moreover, Weisz et al. (2000) state that women's perspectives can offer views about the actions that need to be taken by service providers to keep them safe; and, Miller and Meloy (2006) note that women's input about their experiences should influence the content and approaches used in stopping violence interventions for men.

The available literature focuses on women's experiences before, during and after their partner has participated in a stopping violence intervention. Most women interviewed in Gregory and Erez's (2002) study revealed that their partners had a substantial history of family violence offending involving several different relationships; that these women had experienced multiple incidents of family violence over an extended period before their partners accessed a stopping violence service; and, the study found that the average length of time between the women's first experience of a family violence incident and the incident that led to their partner accessing a men's stopping violence intervention was seven and a half years. Many studies describe a range of causes for the family violence incidences that women

cite including jealousy and possessiveness (Cascardi et al., 1995; Tolman, 1989; Walker, 1979); substance abuse (Kantor & Straus, 1989; Lindquist et al., 1997); financial pressures; children; threat of separation or divorce; work or school participation; family and friends; and, household chores (Gregory & Erez, 2002).

Prior to their partners' involvement with a stopping violence intervention, the women in Gregory and Erez's (2002) study expressed mixed expectations about the potential impact for their partners and themselves. While they hoped that the intervention would bring about positive changes in their partners' behaviour, they were sceptical about whether significant and lasting effects would eventuate and experienced fear and uncertainty about their own safety. Gondolf (1997) warned that many women are blamed for their partners having to attend a stopping violence intervention and that reactionary abuse is a real risk for many women. He therefore, recommended that safety plans and crisis intervention services are made available to women during the period that men attend such interventions.

Of the impact of men's participation in stopping violence interventions, women reported various results including:

- *Level of Safety*: Most women reported increased feelings of safety following their partners' attendance at a stopping violence intervention. In many cases this increased perception of safety was as a result of the cessation of physical violence, but most reported the continuation of verbal, emotional and psychological abuse (Gregory & Erez, 2002; Hayward et al., 2007; Coben et al., 1999; Gondolf, 1999; Milner, 2004)
- *Level of Responsibility*: Studies indicate that while some men do increase their level of responsibility for their family violence offending, many continue to attribute the fault for such incidences to their female partners (Gregory & Erez, 2002; Hayward et al., 2007; Erez & Belknap, 1998; Gordon, 1996)
- *Behavioural Changes*: Women's observations of their partners' behavioural changes included, improved communication, for example, improved ability to appropriately express feelings and an increased level of shared decision making; the use of diversionary techniques, such as time out; and, reduced substance abuse. The reasons offered by the women for such positive changes included recognising the negative consequences of their family

violence offending; and, wanting to contribute positively to family life (Gregory & Erez, 2002; Hayward et al., 2007).

Of concern are the remaining unresolved issues observed by a number of the women who participated in studies of women's perspectives, post intervention, about the lasting impact of men's participation in stopping violence interventions. For example, in Gregory and Erez's (2002) study the women questioned the sincerity of their partners' efforts to change and maintained that their negative attitudes towards women remained. They suggested that more needs to be done to continue supporting men's change efforts over the long term; more needs to be done to continue communicating with and supporting women to provide a vehicle for them to express their feelings of apprehension and provide them with the resources for their own transitions into nonviolent living (Gregory & Erez, 2002; Ford, 1991).

## 6 New Service Developments: A Word about the Phases in the Design of a Service Innovation Model and Lessons Learnt about Success Factors

The management literature recognises the importance of innovations within organisations, to not only appropriately respond to the ever changing priorities and directions within the external environment, but also to further enhance the effectiveness of initiatives that seek to achieve desired outcomes for key stakeholders (Melton & Hartline, 2010; Smith et al., 2007). The purpose of this section is to provide a brief overview of a generic new service development model, including the various phases in the design and development process; and, outline some of the success factors associated with new service developments that prevail in the literature.

Bullinger and Schreiner (2006) describe the various phases in the process of developing a service innovation. Their model includes six phases:

- *Start*: The start phase involves generating new service ideas
- *Analysis*: The analysis phase involves a consideration of the costs, time, risks and opportunities and as a result of this analysis the most promising idea is selected (Song et al., 2009)
- *Design*: The design phase involves detailing the service specifications, including result and performance expectations and the various aspects of the service delivery process that will contribute to the desired outcomes.
- *Preparation*: The preparation phase involves estimating and allocating the resources required to implement the new service
- *Test*: The test phase involves piloting the draft service specifications in order to detect areas for enhancement
- *Implementation*: The implementation phase involves the final launch of the new service.

The literature delineates three areas and associated elements which contribute to the success of implementing an innovative service. These areas include that related to the culture, structure and capabilities of the organisation; that related to the key features of the service innovation; and, that related to the process of developing the new service.

Of the new service development success factors associated with the culture, structure and capabilities of the organisation, significant success factors noted in the literature include strategic business planning that is responsive to changing needs that emerge in the environment (Ottenbacher & Gnoth, 2005; Robinson & Bawdon, 2007); a continuous learning culture (Lui, 2009); and, an organisation where management is supportive and promotes creativity (Brentani, 2001). Other organisational factors associated with successful innovations include sourcing knowledge and information from both within and external to the organisation with which to explore and evaluate the potential of innovative ideas (Leiponen, 2005; Lin et al., 2010); and, an orientation and understanding of the needs and expectations of the target client group (Ordanini & Parasuraman, 2011).

During the process of designing new services, many studies note the involvement of a range of stakeholders is critical to the success of the venture (Melton & Hartline, 2010). Such involvement could be facilitated by setting up a development committee comprised of representatives with expertise in a range of functional areas from both within and external to the organisation (Froehle et al., 2000; Avlonitis et al., 2001; Blindenbach-Driessen & van den Ende, 2006) and seeking input from representatives of potential clients for the new service (Cooper & de Brentani, 1991; Magnusson, 2009; Melton & Hartline, 2010; Lin et al., 2010). Studies note that stakeholder involvement in the design and development of new services brings a wide range of expertise to the development project (Blindenbach-Driessen & van den Ende, 2006; Neu & Brown, 2005; Leiponen, 2006; De Brentani, 2001); raises support and enthusiasm for the new service (Cooper et al., 1994; Melton & Hartline, 2010; Ordanini & Parasuraman, 2011; Song et al., 2009); and, enhances development project efficiency (Froehle et al., 2000).

For example, in their report of lessons learned during programme development, Long et al. (2004) urge those developing new services to plan and implement specific strategies with which to forge collaboration amongst stakeholders at the very

earliest stage of designing a new service. Of the suggested collaborative activities with the organisation's staff, Long et al. (2004) comment that staff involvement in the development of the new initiative's policies and procedures encourages buy-in, ensures the acceptability of the model of service and, facilitates their promotion of the initiative amongst their communities of interest.

Not only does Long et al.'s (2004) study urge early collaboration with those internal to the new service's organisation, but they also urge early collaboration with leaders of the community within which the initiative is to be piloted. According to these authors early collaboration with community leaders is beneficial since their input into defining various aspects of the new service secures their support; and, moreover their experience of the community enables them to share identified concerns which can be addressed prior to the launch of the service thereby strengthening its actual implementation.

In addition to the success factors associated with the new service's organisation and the design process, the literature also provides guidance about key success factors associated with the proposed new service development itself. First, a number of commentators in the literature have found that to be successful new service developments need to provide a unique way in which to respond to clients' needs (Cooper et al., 1994) and such services need to be of good quality (Easingwood & Storey, 1993; Melton & Hartline, 2010). In addition, new services should be designed to ensure their compatibility with existing services and capabilities (Easingwood & Storey, 1993; Ottenbacher & Harrington, 2010); suitable for the sector in which it will operate and responsive to the identified needs of the target client group (De Brentani, 1991; De Brentani, 1998; Copper & De Brentani, 1991; De Brentani, 2001); and, include the development of an identifiable brand that potential clients can immediately associate with the service (De Brentani, 2001).

## 7 Pre-Conditions for the Effective Implementation of a New Service Development

A number of commentators in the literature have defined a range of pre-conditions that underpin the successful and effective implementation of new service developments. This section outlines the pre-conditions for success associated with the nature of the service; the pre-conditions for success associated with those who deliver the service; and, the pre-conditions for success associated with the organisational infrastructure supporting the new service development.

### 7.1 Pre-Conditions for Success Associated with the Nature of the Service

*Integrating the service within the context of a systemic response:* Gondolf (2003;1999) and others (Laing,2003; Muldoon & Gary, 2011) argue that the success of individual services for men who commit family violence offences depends on their location within the broader domestic violence intervention response system. They argue that service effectiveness depends on the way in which it interacts and is integrated with other arms of the family violence sector, for example, Police arrest practices, court procedures, probation monitoring, services for women and children affected by family violence and other community services. Moreover, these parties within the response system need to develop common understandings about the target client group and their presenting issues and risks as well as agreed and appropriate practices that aim to enhance the safety of women and children and hold men responsible for their violent behaviour (Mulroney, 2003; Doherty et al., 2004; Doherty et al., 2003; Statham, 2004; Barrett, 2008).

Commentators in the literature identify several benefits resulting from services working in partnership with others. First, Doherty et al. (2004) maintain that hard-to-reach individuals, such as men who commit family violence offences, often present to services with multiple and complex issues and in such circumstances multiple agencies and multiple services need to work together to provide a holistic and sustained response. Second, Cortis (2012) and others (Coe et al., 2008) argue that networks of services working together facilitate the outreach service gaining access to potential clients; enable the accumulation of more complete information about

clients' circumstances; and, provides continuity of service for clients. In their discussion of service continuity, Morse et al. (1996) recognise that outreach services are not a 'panacea' and often clients presenting with complex issues require referral to other services to receive required longer-term support. To enable continuity of service for clients and mitigate potential linkage or transition problems for clients, these authors suggest a range of strategies for use by outreach services – incorporate the expectation of transition to another service provider early in the engagement process; actively involve the client in the referral process; provide the receiving service provider with full information about the client's issues and characteristics; and, once the referral has been made provide follow-up support on a gradually declining basis. Third, Provan and Milward (1995) comment that partnerships between the outreach service and other service providers provide an opportunity for joint training. Their study found that such joint training for cross-agency staff improves the effectiveness of all services; and, provides the opportunity for learning about each other's operations – knowledge which enhances service coordination.

Whilst these studies outline some of the benefits of inter-agency and systemic responses, Cortis (2012) warns that collaboration is time consuming and relationships can be fragile especially when there is competition for funding amongst the parties.

*Clear rationale and clearly defined and evidence-based service model:* Dittus et al. (2004) and others (Robinson & Bawden, 2007; Landy & Menna, 2006; de la Cuesta, 1994) found that successful outreach services were underpinned by an explicit rationale and a conceptual basis for the intervention. Furthermore, Robinson and Bawden (2007) state that the model of service should be based on 'what works' practices; and, Morse et al. (1996) argue that the effectiveness of outreach services is dependent on their being multi-faceted in order to address both the clinical and resource issues presented by the target client group.

*Evidence-based principles:* A key success factor for services implemented for men who perpetrate family violence is that they are underpinned by a set of principles based on evidence from international research (Laing, 2004; Rakil, 2006; Gondolf, 2002; Humphreys, 2007). Principles noted in the literature include:

- Violence is unacceptable and the responsibility of the person who perpetrated violence
- Promoting the safety of women and children is the central reference point for the work
- Assessing the level of risk to women, children and workers through reviewing case histories and gleaning information through links with other services in the family violence system (for example, refuges, child protection services, agencies working within the criminal justice system and other local family violence services) should occur before making contact with the men and be an ongoing process throughout all worker/client interactions

*Location and flexible hours of service:* Location of the outreach service both physically and organisationally appears to play a major role in the success of outreach services. Provision in the community assists with removing both physical and psychological barriers to client access; and, several studies suggest that location of the outreach service within the context of other services and/or service units provides the opportunity for outreach workers to interact with colleagues – an opportunity that has the potential to counter the feelings of personal and professional isolation often experienced by outreach workers, particularly in situations where there is a sole worker (Boag-Munroe & Evangelou, 2010; Robinson & Bawden, 2007; Doherty et al., 2003).

A number of studies also recognise that flexible hours of service provision, including provision of services in the evenings and at weekends, improve client accessibility to outreach services and thereby contribute to their success (Coe et al., 2008; Ghate et al., 2000; Landy & Menna, 2006; de la Cuesta, 1994; Flanagan & Hancock, 2010).

*Timeliness of Outreach Service:* Muldoon and Gary (2011) and others (Reitzel et al., 2006) believe that timely contact with men who commit family violence offences is a success factor for services for men. They urge providers of services for men who commit family violence offences to recognise that there is a very limited window of time in which to engage men in the process of behavioural change. For example, Reitzel et al. (2006) found that delays in engaging men undermined their motivation and resulted in them blaming the agency for thwarting their efforts for behavioural change. Moreover, these authors are of the view that delayed contact becomes an

ethical dilemma – a dilemma that risks the man committing further incidences of family violence and thus further victimisation of women and children.

## **7.2 Pre-Conditions for Success Associated with the Nature of the Providers of the Service**

*Outreach worker capabilities and attributes:* Robinson and Bawden (2007) argue that the personal qualities of the outreach worker need to be a paramount consideration in any recruitment process. Cortis (2012) and others (Forehand & Kotchick, 1996; Katz et al., 2007; Moran et al., 2004) argue that because relationship building and the establishment of a therapeutic alliance between the outreach worker and their clients is the most critical aspect of effective outreach services, those selecting candidates to carry out such roles should focus on their personal style, skill and flair for working with the target client group and their ability to link with other critical agencies and personal within the intervention system (Edwards, 2005). Other capabilities noted in the literature that are associated with effective outreach workers include, having a non-judgemental, respectful and flexible approach (Campbell et al., 2010; Landy & Menna, 2006; Cortis, 2012); excellent communication skills including the ability to communicate to different audiences and the use of active listening skills (Glennie et al., 2005; Stratham, 2004; Avis et al., 2006; Doherty et al., 2003; Doherty et al., 2004); an ability “to become artists of sorts” (Rowe et al., 2002:264) balancing a range of contradictions and dilemmas (for example, balancing contradictions and dilemmas such as empathy and collusion; persuasion and coercion; advocating and client responsibility; confidentiality and reporting communications that suggest serious safety or life risks for the client and/or others; and, dependency and empowerment) often faced by outreach workers (Morse et al., 1996; Rowe et al., 2002); the ability to operate within a multi-faceted service that requires workers to assess both the clinical and resource needs presented by clients and make sound judgements as to the best course of action to pursue (Morse et al., 1996); and, a general approach that is underpinned by a perspective that change is possible and an expectation that motivation for such change will occur as a result of both the quality of the client/worker relationship and the application of techniques such as supportive, motivational and educational interventions (Ageriou & McCarthy, 1990; Osher & Kofed, 1989; Morse et al., 1996). In addition to these capabilities and attributes, Ghate et al. (2000) argue that the employment of male staff in the context

of outreach services for men is essential as the worker's gender can be a service entry enabler for clients.

### **7.3 The Nature of the Supporting Organisational Infrastructure**

*Clearly delineating policies and procedures:* Long et al. (2004) and others (Robinson & Bawden, 2007) argue that new service developments need to ensure that they have a systematic way of documenting the various policies and procedures associated with the initiative as such documents provide guidance and consistency for workers as they interact with the target client population and undertake administrative tasks associated with the role. In addition to the policies and procedures required to guide the front-line work, these authors also maintain that the organisation sponsoring the new service development needs to prepare a range of other plans, including a recruitment plan; a plan for staff training that includes induction training as well as strategies for ongoing professional development; and, guidelines for collecting, collating and reporting information to meet various stakeholder accountability requirements (Robinson and Bawden, 2007).

*Professional support and supervision:* Several authors in the literature draw attention to the emotional and physical demands placed on outreach workers and in particular those who work within the domestic violence sector. For example, Iliffe and Steed's (2000) study of the impact on workers of working within the domestic violence sector found that many of the informants interviewed experienced symptoms of vicarious trauma, changes in their cognitive schema, particularly in relation to safety and gender power issues and symptoms of burnout. Fisk et al. (1999) reported similar findings with their cohort of outreach workers. Other studies have commented on the stress experienced by outreach workers due to high staff caseload ratios and the demands on time to work intensively and engage hard-to-reach clients whilst meeting other organisational responsibilities such as attending meetings and completing the administrative tasks required of the role (Robinson & Bawden, 2007; Stanley & Kovacs, 2003; Cortis, 2012; Morse et al., 1996). Fisk et al. (1999) suggest the provision of support and supervision from managers – supervision which has the potential to provide guidance on issues such as client-staff boundaries, ethical issues and staff physical and emotional safety. In addition, Iliffe and Steed (2000) suggest the implementation of a range of coping strategies, including monitoring caseloads, debriefing, collegial support, self-care and involvement with professional networks.

*Maintaining communication with stakeholders:* Long et al. (2004) recommend establishing a protocol for regularly engaging with the key stakeholders of the new service development, including funders. This could involve face-to-face meetings several times each year after the service is launched to present summary reports on the initiative's achievements; provide information about any further developments within the service; discuss any issues that have arisen and draw on the stakeholders' expertise and wisdom to address any such issues; and, share media-related information.

*Proactive strategies for managing controversial issues:* The literature suggests that new service developments should consider taking a proactive stance in relation to contentious issues that might arise during its implementation. For example, the media could investigate the potential for concerns within the community about the notion of an outreach family violence service being delivered within a community setting. To manage such potential issues, Long et al. (2004) suggest developing a media plan that provides guidance about ways in which staff should handle any media inquiries and this could include specifying which organisational positions take responsibility for engaging with the media; include a questions and answers section; and, a plan for providing media training for those delegated to communicate with the media.

*Using a variety of communication channels to enhance awareness of the service:* Avis et al. (2006) draw attention to the fact that many hard-to-reach target client groups may have difficulty accessing information about available outreach services. To overcome this potential barrier and enhance the visibility of the outreach service, commentators in the literature suggest using various social media tools and placing leaflets about the service in everyday locations (for example, general practitioner surgeries and citizens' advice bureaux) that might be used by hard-to-reach populations (NESS, 2005; Garbers et al., 2006).

*Sustainable funding source:* Boag-Munro and Evangelou (2010) and Robinson and Bawden (2007) argue that sustained and adequate funding needs to be in place to provide the staff and other organisational infrastructure required to support outreach to hard-to-reach target populations.



**PART THREE**

**FINDINGS**

## 8 Establishing a New Service: Key Elements Involved in Crystallising an Idea into Reality

Cumulatively a range of factors were brought to bear to move ReachOut, as a new service development, from the idea stage to the establishment stage. These factors included identifying the need, experiential wisdom, environmental conditions, collaborative action built on existing networks and relationships and courageous leadership within the host organisation to introduce a new paradigm for working within the family violence sector.

### 8.1 Identifying the Need

Each year the New Zealand Police attend between 600-800 family violence incidences in North Canterbury.<sup>37 38</sup> For each of these family violence incidences, the New Zealand Police are required to complete a Family Violence Form Set, commonly referred to as the Family Violence Incident Report (FVIR). These Reports are received by the Police Family Violence Coordinator for North Canterbury who reviews the contents of each report and disseminates them variously to agencies depending on the circumstances of the incident and the characteristics of those involved.<sup>39</sup>

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<sup>37</sup> Source: Police (April 2011) Services for Men Involved in Family Violence Incidences in North Canterbury: A Discussion Paper.

<sup>38</sup> New Zealand Police Disclaimer: 'The views outlined in this report are those of the individual Police employees who participated in this research and do not necessarily constitute the position of the Police.'

<sup>39</sup> The Family Violence Incident Reports are disseminated each day to core agencies within the family violence sector that have respectively entered into a Memorandum of Understanding with the New Zealand Police. These agencies include the Community Probation Service, Child Youth and Family, Victim Support and a number of women's refuges. These agencies also meet each fortnight at the North Canterbury Family Violence Round Table "to discuss every POL ... At that meeting Victim Support says whether they have made contact and describe what the situation is like ... CYF states whether they are involved and what steps they are taking ... CPS indicate if they have an interest in the offender, what they can offer in support; and, whether restrictive measures need to be put in place. This meeting could be the end of involvement for some agencies but not for others, for example the women's refuges and CYF. The members of this meeting also review high risk cases. These are priority cases that are revisited regularly ... an action plan is put in place and it is this plan that is revisited."

Of such incidences attended by frontline Police, only a fraction of these result in an arrest. The family violence professionals noted that traditionally this response – “arrest and associated criminal justice system processes” - was the only way in which men could access formal support. For example, of those arrested, the Court may impose conditions of bail that facilitate further monitoring “to attempt to maintain the safety of women and children;” and, once sentenced, some may subsequently gain access to services for men (via special conditions associated with Court-imposed sanctions), for example, access to a mandated and Ministry of Justice accredited stopping violence programme. Family violence professionals’ comments and various documents reviewed illustrate these observations:

*“80% of family violence incidences (reported to the Police) don’t result in an arrest being made.”*

*“Only 12% of Police reports go through to the justice system ... to court and then a programme ... (and) even those who get access to a programme might have to wait from between a week to a month before anyone engages with them.”*

*“In some circumstances where an arrest is not made, but the Police suspect further violence might occur, they can issue a Police Safety Order which can require the perpetrator to leave the premises for up to five days. Police Safety Orders are also passed on to a local refuge for follow up with the women, but there is no follow up with the men.”<sup>40</sup>*

*“The major risk was that men only received support via the mandated programmes and they received no other support.”*

For many key family violence professionals, it was evident that although support was available for women and children immediately following receipt of a Police Family Violence Incident report, there was no such support for men unless they were listed as a victim in such reports. In such cases, men as victims were contacted by the Victim Support Service.

Thus, although men as victims of family violence offences received support services, for most others there was no service available to contact them to “provide support at

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<sup>40</sup> Under the Domestic Violence Amendment Act, 2009, a Police Safety Order can be issued when “Police attend a family violence event and the person who seems to constitute the risk is not arrested for any offence relating to the violence against the other person, but the attending constable has reasonable grounds to believe that the issue of a Police Safety Order is necessary to ensure the safety of the ‘person at risk’ and any children.”

the point of crisis ... to listen and care about the man's story ...to offer a vehicle for men to talk about their experience of events" (family violence professional). Moreover, the family violence professionals were of the view that even for those men who accessed stopping violence services via the criminal justice system more was required to support them around the time of the family violence incident. They noted that there was often a time lag between the date of the family violence incident and their access to accredited stopping violence programmes – a period during which they received no support. Furthermore, the family violence professionals noted "the engagement of the majority of men who are referred by the Courts to programmes is not high because they have been forced to undertake the programme and labelled as a convicted offender in the process." In such instances, they believed that a men's support service could play a role by working with men prior to programme attendance to enhance their motivation and readiness to fully engage with such formal and mandated programmes – an approach that may well make a contribution to further enhance the effectiveness of such programmes. An extract from an application to the Family-Centred Services Fund submitted by the Waimakariri Safer Community Council in April 2011 summarises the situation as described by a number of the other family violence professionals.

*"Other than court mandated referral to Stopping Violence Services, where an arrest has been made, there is no current agency actively engaging with the male party to ensure that the contributing factors and risks associated with his offending are identified, mitigated and managed to ensure effective resolutions.*

*Feder and Wilson, 2005, refer to the inadequacy of mandated programmes alone in reducing re-offending ... Without ... support, evidence shows that these men will go on to re-offend, either upon returning to their families or in new relationships (Carson et al., 2009)."*

For many of the family violence professionals interviewed, this identified service gap for men "failed not only the men, (but also) posed significant safety risks for women and children who have been living with the violence." This observation was further illustrated by another family violence sector professional's comments:

*"After an incident where no arrest has been made the situation may still be very dangerous for women and children. Offences may be committed that are not revealed to the Police."*

Such identified risks for women and children were further identified in a stakeholder presentation delivered by the Waimakariri District Safer Community Council in 2011:

- *“Offender continues to abuse family members*
- *Victim seeks advice and then returns to a relationship with the offender*
- *Police return many times to the same family*
- *Concerns about the wellbeing of children in the household.”*

## **8.2 Experiential Wisdom: Drawing on Grounded Evidence from the Police’s Experience**

While key family violence professionals recognised this service gap for men within the family violence sector, they were unanimous in their views that it was the experiences of one Police employee’s interactions with men following a family violence incident that provided the foundational elements for this service innovation. Over a three-year period, as part of the Police’s prevention strategy and in his role as a Police constable and more latterly as the Police Family Violence Coordinator in North Canterbury, this employee proactively initiated contact with men, classified as high-risk, soon after a family violence incident. Such contact was based on a number of assumptions:

- That men will respond positively to an outreach approach that is supportive and invites voluntary engagement
- That gathering additional information from men during the days following a reported family violence incident would supplement the information noted in the Family Violence Incident Reports and collected at the time of such incidences; and, that this additional information and insight would provide a more complete picture of the situation, enhance the accuracy of assessments about the level of risk for all parties involved, and thereby enable better management of such identified risks
- That providing men with accurate information and advice during the immediate aftermath of a family violence incident had the potential to de-escalate the situation and reduce the rate of repeat family violence incidences
- That by providing support to men, the safety of women and children will be enhanced

Some of the family violence sector professionals interviewed offered examples of the way in which this Police 'cold calling' initiative with men provided 'grounded evidence' that the approach would be well received by men; assist with risk management; and, achieve results.

*"I thought it might be useful to find out what was going on for men ... What I found was when I contacted the guys by phone they thought I was getting them to come into the Police station to arrest them or they had fallen off the change process. When I asked them how things were going for them ... how can we help ... asked them what support they needed ... When I took this approach the men interacted and they started calling me. I found this heartening."*

*"We were concerned about what was going on in the whole picture. Traditionally, the focus has been on the women's perspective, not his perspective about what happened. Also, most men will not open up to the Police."*

*"Police know they only get part of the story ... contacting the men means that you get her story, his story ... know where he is at and what he is thinking ... and this adds insight into what happened."*

*"Men might get a Protection Order without notice and because of a number of background issues such as mental health issues, beliefs, lack of full information, the situation could escalate. So the man was rung and provided with accurate information ... you may not be able to see your children for two to three weeks, but this Order does not mean you can't ever see them. This defused the situation."*

*"A guy might top himself or do something stupid if he thought he could not see his children anymore. The call to the man could involve checking that he had contact with his GP ... checking the safety issues. It would be a tragedy if men killed themselves because they believe they will never see their children again when the provision of correct information could prevent this happening. "*

*"I had this situation where a guy was arrested, charged and a Protection Order put in place ... sentenced on the charges. He breached the Protection Order and I contacted him to ask him what was going on? ... Why did this happen? ... met with him twice here and worked out that he had depression issues ... told him to go and see a doctor. He followed this suggestion and saw a doctor who prescribed medication. Through this interaction there was no further offending as he had found a better place for himself ... no re-offending at all. This was a man mandated to attend a stopping violence course as a result of being convicted for DV offending. At no point during that interaction with professionals did they identify what his issue was ... they provided no place for him to express his frustrations. Making a difference like that is heartening."*

Most family violence professionals recognised that this proactive contact initiated by the Police, together with the ‘grounded’ evidence collected and communicated to stakeholders, was integral to “the success of getting the project (ReachOut) off the ground.” However, during the three years of working in this preventative manner, it was also recognised that for the Police this approach had limitations “because we had to keep the Police hat on as well.” For example, “some of the interactions were useful” - enabling men to receive advice on charges pending and additional information about the criminal justice processes, while others were challenging. A family violence professional explains:

*“One of the issues was ... had no training to work out the family violence issues/dynamics of each client’s situation ... with difficult (interactions) he didn’t know what to do.”*

This “cold calling” experience of the Police provided further impetus for establishing an outreach, crisis intervention service for men. The key experiences gleaned from the Police’s initiative and which supported the further development of this service innovation included:

- There was an ever increasing demand for an outreach service for men
- The growing recognition that more could be offered in terms of support and help for men if the outreach service was delivered by an experienced family violence worker employed within the non-government organisations sector
- The Police’s experiential evidence about the sorts of results that could be achieved by an outreach, crisis intervention service for men.

### **8.3 Factors in the Environment**

The success or otherwise of any new service development is in part contingent upon various environmental factors. These environmental factors included those operating in the external socio-economic landscape, as well as those operating within the organisation responsible for initiating any service innovation. During the period in which the ReachOut service was being crystallised, two environmental factors appeared to have been significant drivers impacting on its establishment. These factors included the earthquake events and aftershocks experienced in the Canterbury region since September 2010 and the change of strategic direction

introduced by the service's host organisation, Aviva (formerly known as Christchurch Women's Refuge).

### **8.3.1 Canterbury Earthquake Events: Impact on the Prevalence of Family Violence**

The significant earthquake events and continued aftershocks, experienced by those residing within the Canterbury region during the period from September 2010, have had a significant impact on the reported incidence and severity of family violence. The New Zealand Police reported an increase in calls relating to domestic disputes and family violence with many callers referring to the stressors resulting from the earthquake events;<sup>41</sup> and, various women's refuges noted an increase of between 10% and 20% of calls as well as reporting an increase in the severity of family violence incidences during 2010 and 2011.<sup>42</sup> Such trends are supported by both New Zealand and international research which report increases in the incidence and severity of domestic violence both immediately and for lengthy periods following natural disasters.<sup>43</sup> For example, while patterns of crime for most offence types generally returned to normal patterns within a reasonable amount of time, some types of offending, such as domestic violence, continued to increase over the immediate and longer term as stress and other factors associated with family violence took their toll on people during the recovery and rebuilding phases. In New Zealand, research focusing on the correlation between domestic violence and natural disasters found that there is likely to be a three-fold increase in the incidence of family violence and that agencies could expect to be dealing with earthquake-related cases for 2 years or more.<sup>44</sup> It is almost three years after the first Canterbury

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<sup>41</sup> Following the September 2010 earthquake the New Zealand Police reported an increase of 53% of domestic violence incidences (<http://www.radionz.co.nz/news/canterbury-earthquakes>. Reported on 08 September 2010 and retrieved on 03 October 2012. In March 2011, the New Zealand Police noted that 400 family violence reports (18 per day) had been received in Christchurch since the first earthquake event in September 2010. This compared with an average of 273 reports of family violence emergencies (13 per day) received during the same period over the previous 4 years. (<http://stuff.co.nz/national/christchurch>. Reported on 09 March 2011 and retrieved on 03 October 2012.

<sup>42</sup> <http://www.starcanterbury.co.nz/news/quake-stress-leads-to-rise-in-domestic-violence> Retrieved 03 October 2012.

<sup>43</sup> Price, Craig (2012) Domestic Violence Following Earthquakes. <http://www.christchurchpsychology.co.nz> Retrieved on 03 October 2012.

<sup>44</sup> Rosalind Houghton, 2010, School of Psychology, Victoria University, Wellington. Retrieved on 03 October 2012 from <http://tvnz.co.nz/national-news/quake-related-abuse-to-get-worse> and <http://www.nzherald.co.nz/nz/news>

earthquake in September 2010 and the impact of the unique and severe series of aftershocks that followed continues to unfold.

While it is acknowledged that natural disasters, such as the earthquake events experienced across the Canterbury region, are not the root cause of family violence, there is evidence to suggest that they are associated with increased levels of the risks factors underpinning family violence – factors such as increased alcohol consumption and gambling, increased stress, anxiety and insecurity, sleeplessness and increased worry about the safety of family members, in particular children (Sullivan and Wong, 2011).<sup>45</sup> Within the context of this observed increase in levels of such family violence risk factors, the Canterbury region has experienced significant shifts of population groups away from the most affected neighbourhoods and in particular, population shifts to rural districts such as the Waimakariri and Selwyn districts. A family violence sector professional explained the association between such population shifts and family violence incidents:

*“Many people moved into rural areas for an increased sense of safety from the uncertain natural environment ... when they moved they took their existing issues with them. If they had experienced family violence in the city, they took family violence with them to rural communities. The combined result has been a dramatic increase in reported family violence in North Canterbury and ... the severity of the violence has increased.”*

Thus, with the changes in population concentrations in the Waimakariri district, there was a dramatic rise in reported family violence and the severity of that violence.<sup>46</sup> For example, immediately after the February 2011 earthquake event, the North Canterbury Police reported a 40% increase in reported family violence.<sup>47</sup> Moreover, a family violence sector professional noted that “an examination of the number of

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Sullivan, S. & Wong, S. (2011) *An Enhanced Primary Care Role Following Psychological Trauma: The Christchurch Earthquakes*. Journal of Primary Health Care: Volume 3, No. 3.

<sup>45</sup> The Southern Cross Healthcare Group National Survey administered five weeks after the February 2011 earthquake found stress levels were highest in Christchurch compared to other major New Zealand cities and 61% of Christchurch respondents said they were more stressed than at the same time twelve months earlier.

<sup>46</sup> Sources: Waimakariri District Safer Community Council (2011) Men’s Advocacy Programme. A presentation delivered to a meeting of Family Violence Sector stakeholders; [http://digital.hurunui.co.nz/olive/ode/hur\\_daily/LandingPage.aspx](http://digital.hurunui.co.nz/olive/ode/hur_daily/LandingPage.aspx); Police (April 2011) Services for Men Involved in Family Violence incidences in North Canterbury: A Discussion Paper.

<sup>47</sup> Source: Aviva (January 2012:6) Ministry of Social Development Canterbury Social Support (Earthquake) Fund application.

Police Family Violence Incident Reports compiled before and after the Canterbury earthquake events, showed an increase of such reports from an average of 40 per month to 65 per month in 2012.”

This burgeoning problem of family violence in the North Canterbury region provided further impetus for stakeholders to consider ways in which to build the capacity and capability with which to address the identified service gap for men responsible for family violence incidents.<sup>48</sup>

### **8.3.2 Organisational Change in Strategic Direction: Shifting to a Whole-of-Family Model of Service**

In its 2012-2015 Strategic Plan, Aviva introduced a significant strategic shift in the way in which the organisation planned to deliver services to break the cycle of family violence. In particular, the organisation introduced a systemic ‘whole of family’ service model and a new set of strategic principles to guide its work with families, including children, women and men. Aviva’s 2012-2015 Strategic Plan notes:

*“Our new service model ... aims to deliver integrated services for whole families – women, men and children – in order to reduce short-term risk, ... whilst simultaneously supporting families on a path towards a fulfilled life free of violence. The model further recognises that overcoming family violence can be a long, complex and challenging journey, that families should be empowered to lead their own change and that an integrated system of services is required to provide support and encouragement along the way.”*

This new systemic approach to delivering services for all family members was founded on the overarching premise that ‘the safest place for all New Zealanders should be our homes and that, in order to achieve this, families and communities should be empowered to enable homes to become violence free. Whilst the organisation has mapped out a number of strategies with which to achieve this intention – strategies involving the implementation a range of both innovative and traditional services for women and children<sup>49</sup> – it was the design and implementation

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<sup>48</sup> As noted earlier, apart from mandated services for men who are involved in formal legal and criminal justice processes, there are currently no follow-up services operating in New Zealand for men who are responsible for family violence incidents. This observation was supported by various communications amongst members of the Police’s Family Violence Network throughout New Zealand. Members of this Network reported that “there were traditional men’s services operating in their regions, (but) they were not aware of a similar service (outreach, crisis intervention service for men) anywhere else in New Zealand.”

<sup>49</sup> The Aviva Strategic Plan 2012-2015 identifies a range of services that have an established implementation history and that focus on women and children (for example, 24 hour telephone information, advice and

of new services for men that completed the integrated system of services for all family members. A number of beliefs underpin the organisation's intention to develop a range of services for all family members, including men. These included:

- The effectiveness of services for women and children will be enhanced by providing a broad range of effective services for men
- Achieving a fulfilled life free from family violence is possible for everyone, if “offered the right support, at the right time, in the right way”
- Services should be offered within the context of a family's healthy or potentially healthy relationships, which families should be empowered to strengthen
- “People who have overcome family violence are uniquely experienced to inspire and encourage those needing support and encouragement to travel the same path” (Aviva Strategic Plan and Business Plan 2012/13).

Thus, Aviva's Strategic Plan for 2012-2015 indicated that the organisation was strategically and uniquely positioned to design and implement services for men who committed family violence offences, particularly in areas where service gaps had been identified – services such as an outreach, crisis intervention service for men.<sup>50</sup> Furthermore, the organisation recognised that establishing and maintaining partnerships with diverse community groups and diverse human service organisations was a critical ingredient in its endeavours to assist family members on their journey towards a violence-free life. The development of these cross sector and cross service partnerships, not only reflected the importance of designing services for men that were holistic in nature, but also that the nature of the journey of change takes time, for some men many years, and that a men's outreach service was but one part of the solution. Moreover, the organisation recognised that its development of a ‘whole of family’ service model would require it to establish

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support; participation in the FVIARS process; 24 hour access to Safe House services; access to DVA programmes), as well as new service developments such as Safe@Home Canterbury; and, Specialist Peer Support.

<sup>50</sup> In addition to the intention to design and deliver an outreach, crisis intervention service for men, the Aviva Strategic Plan 2012-2015 also notes that it intends to respond to other service gaps for men. These other service gaps include the provision of alternative accommodation for men who are required to leave their family home following a domestic violence incident; and, the provision of specialist peer support.

partnerships with other agencies that also advocated for the delivery of family-centred models of service – partnership arrangements that would facilitate the delivery of “whanua ora plans” and services with all members of families “to support changes towards beliefs and behaviours that created healthy relationships.”

The delivery of the organisation’s ‘whole-of-family’ service model and its partnering relationships with other stakeholders and organisations across the family violence sector and beyond are founded upon a set of core values – relationships, integrity, social justice, biculturalism, diversity and excellence.

#### **8.4 Community Conversations and Collaboration**

Prior to the establishment of ReachOut a range of relational and inclusive processes were implemented that drew on the expertise, interests and views of various family violence, social services, community and local government stakeholders.

Developing relationships with these key stakeholders and building on existing networks, partnerships and experiential knowledge were regarded as pivotal to not only the success of the ReachOut project, but also to making a difference to families that were affected by family violence in the North Canterbury district. The collaborative approach, adopted during the establishment of ReachOut, is illustrated by two family violence sector professionals’ comments:

*“This was a community driven, collaborative initiative that has the potential to make a difference to the families who are experiencing family violence in our community.”*

*“Collaboration was there from the word go. We wanted to ensure there were no hidden agendas.”*

Throughout 2011 a number of conversations were initiated with stakeholders across New Zealand, Christchurch and within the North Canterbury district. The purpose of these conversations was to invite stakeholders to draw on their experiences and offer their views about the experiential and empirical evidence that might underpin the proposed service; their views about its potential scope and viability; and, their views about potential risks and challenges that might be encountered if a “male advocacy service” was implemented.

At the beginning of 2011 the Police emailed “all Police Family Violence Networks to see if anyone was doing a similar intervention.” The purpose of this email was to ascertain whether any other groups across New Zealand were delivering services for

men who had committed family violence offences, but who were not mandated to attend men's Domestic Violence Act accredited stopping violence programmes. It was hoped, that, if such services were being offered elsewhere across the country, those interested in developing a 'Men's Advocacy Service' in North Canterbury might be able to draw on their experiences and lessons learnt.

*“(I) sent an email to all in Police Family Violence Network to see if anyone was doing a similar intervention ... a service open to all men listed on the Family Violence Incident Reports. Thought this was a national issue (and) wondered whether traditional men's services might be doing different things.”*

While the responses to this email indicated that “men's workers contacted the odd guy and acted as a support person” in two or three regions in the North Island of New Zealand, the general consensus was that no one “was aware of a similar service anywhere else in New Zealand.”

Having established that no other 'Male Advocacy Services' appeared to be operating within New Zealand, a “discussion document” was developed. This document outlined the current situation and practice associated with responding to domestic violence incidents; the nature of the problem; the proposed solution; and, the anticipated benefits (Police, April 2011. Services for Men Involved in Family Violence Incidents in North Canterbury). The discussion document was distributed to the members of the North Canterbury Family Violence Network.<sup>51</sup> It also provided the basis for one-to-one discussions with key family violence stakeholders in North Canterbury, as well as discussions with a range of representatives from men's services in Christchurch. A family violence sector professional commented on the extent of the consultation process:

*“... interacted with those in the Family Violence Network ... Probation, Child Youth and Family, Victim Support, Refuges, Council, schools, local lawyers ... and went to Christchurch to engage with the men's services.”*

This discussion document also provided background information for a “community discussion” meeting facilitated by the New Zealand Police and the Waimakariri

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<sup>51</sup> “The North Canterbury Family Violence Network is a collaborative network of professional practitioners who have a stake in addressing family violence in North Canterbury. This group is comprised of representatives from a variety of key stakeholder groups in relation to family violence specifically: Christchurch Women's Refuge, Otautahi Women's Refuge, Battered Women's Trust, Police, Barnardos, Probation, Relationship Services, Children and Young Persons Service and Safer Community Council (Waimakariri Safer Community Council, April 2011. Family-Centred Services Fund application).”

District Council's Safer Community Council.<sup>52</sup> The Waimakariri District Council's interest in the emergence of the 'Men's Advocacy' service was described in the following ways:

*"When the idea was first floated, the Council's involvement was centred on its interest in wellbeing ... wellbeing fits with the role of local government. We are one of the few TLAs to be accredited as a World Health Organisation Safe Community. This accreditation means that we have been measured against several criteria for safety, including violence prevention."*

Held in April 2011, the "community discussion" meeting was attended by "about 30 people" who had a stake in issues concerning family violence. Meeting attendees included representatives from the "Family Violence Round Table, Men's Services in Christchurch, Community Probation Service, Refuges, Council, Police and others." The family violence professionals noted that many of the meeting attendees belonged to existing networks or collaborative processes within the family violence sector and that many had well-established relationships.<sup>53</sup>

*"The Safer Community Council project facilitator had great networking abilities and this enabled us to be able to put out the invitation to the meeting to lots of interested people. We got a good response."*

The meeting agenda was guided by the contents of a power point presentation and included:

- An overview of family violence

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<sup>52</sup> The Waimakariri Safer Community Council was formed under the umbrella of the Waimakariri District Council to bring together existing organisations that were working in the injury, crime prevention and road safety fields. Over 100 groups and individuals have taken part in co-ordinated, community safety efforts. The team creates synergy and a co-ordination of effort in the Waimakariri to address a wide range of community and public health issues. The major outcome is community ownership with a safety culture being built in the Waimakariri District. The Waimakariri Safer Community Council works on a number of safety promotion activities, including violence prevention. The current partners include Aviva (previously known as Christchurch Women's Refuge), Police, Corrections, Barnardos, Battered Women's Trust, Child Youth and Family, Waimakariri district Counsellors, local primary and secondary schools and local businesses. The current programmes of activity listed include: 'Recognise, Respond and Refer child abuse education for health and education professionals; White Ribbon promotion; Public Seminars e.g. Leslie Elliot and Brainwave Trust; and, ReachOut Men's Advocacy campaign (Retrieved from <http://www.safercommunities.org.nz/sc/w/view> on 01 July 2013).

<sup>53</sup> Networks mentioned by informants included the Waimakariri Safer Community Council, the North Canterbury Family Violence Network and Family Violence Round Table.

- Details about family violence in North Canterbury prior to and after the Canterbury earthquake events
- A definition of the problem
- An outline of the proposed 'Male Advocacy Service'
- A number of questions for the meeting attendees.

When the family violence professionals were asked about the reasons why they attended the meeting, most said that they “had heard about the idea (of establishing a Male Advocacy Service), were interested, were curious about what it was all about, and, wanted to know more.”

The family violence professionals stated those at the meeting endorsed the information presented about the increased level and severity of family violence following the Canterbury earthquake events; endorsed the description of the problem; and, endorsed the collaborative approach to the initial application for funding that would provide the financial resources with which to “develop, promote, monitor and evaluate the service.” Comments from the family violence professionals illustrate these endorsements:

*“There was evidence from the Family Violence Network that the number of POL 400s had gone up. The family Violence Round Table also alluded to the sharp increase in numbers and the increased severity of the violence. This was a real drive for this (Men’s Advocacy Service).”*

*“Members were concerned about what was going on in the whole picture ... the focus has been only on the women’s perspective and not his about what happened ... noted that men will not open up to the Police. The major risk was that men only received support via the mandated programmes and they received no other support.”*

*“They thought more should be done to help men. They are in the community with no support.”*

*“The first meeting was a brainstorming about where we were headed. There was agreement that there was an issue and a service gap to be filled.”*

*“The community had been talking about the need for this for some time and the fact that if you don’t support the perpetrators then the rest of it is a waste of time. The feedback came from both gender and agency perspectives ... so it was a good balance.”*

*“The key issue discussed was what could we do to help the men. There was a ‘we’ in the conversation ... implied that we needed to consider it as a women’s issue and therefore women were involved in its establishment.”*

*“This was a really positive meeting ... an exciting meeting. There was unanimous support for the notion of a Men’s Advocacy Service.”*

*“Part of the collaborative action from the meeting was that the Council should put in an application to MSD for funding.”*

The “community discussion” meeting also considered a range of scoping issues.

Questions were posed such as:

- “How would it look? - Cold calling? Needs assessment? Wrap around service? Beefed up support for women and children? Engagement of whanau and supports such as marae, church etc? Ongoing monitoring?
- What models need to be included in the scoping exercise/research?
- Who needs to be involved in the collaborative project development? - Police, Stopping Violence Services, He Waka Tau, Women’s Refuge, Child Youth and Family, Otautahi Social Services and who else?
- What mechanism should we use to engage a provider for delivery? - Preferred provider identified by tender process? Other ideas?
- What needs to be included in promotion? – Professional publications? Agencies? Networking forums? Community groups? Other ideas?
- Who needs to be engaged in terms of wider networks? – churches? whanau? extended family? marae? Who else?
- Who would provide ongoing monitoring? – Safer Community Council? Other mechanisms?
- What risks need to be managed? – Lack of support from social support sector? Lack of uptake from perpetrators? Lack of active engagement from perpetrators? Re-offending? Compromising the safety of women and children? Others?” (Waimakariri District Safer Community Council, April 2011. Men’s Advocacy Programme power point presentation).

One family violence sector professional provided an overview of the questions asked of those who attended the “community conversation” meeting:

*“A lot of questions were asked ... what challenges might there be? Brainstormed what the likely uptake would be ... considered whether services would support it ... looked at how the service would become known and how partners could be identified so that they could deal with things on a case-by-case basis ... needed to look at wider whanau and networks men are involved with.”*

When the family violence sector professionals were asked to identify the key comments and feedback gleaned from those who attended the “community conversation” meeting, there was overwhelming agreement that “people supported the idea for a men’s service” and few issues were raised. Of issues raised at this meeting, informants identified four main areas of conversation:

- The “newness and innovative nature” of the proposed new service development and whether there might be “potential risks for women, the worker and others”
- The source of the financial resources to support the new service development
- A description of the preferred provider, for example, meeting attendees were of the view that this new service development should be hosted by a “Non-Government Organisation” and that the organisation should have “specialist family violence expertise rather than a wellbeing focus.” While attendees provided guidance about some of the key qualities that were required of the preferred provider of this proposed new service development, “no one agency put their hand up to do the work.”
- How to get the target group for the “Men’s Advocacy Service” engaged with this proposed new service development.

According to the family violence sector professionals, this question of ‘take up’ and ‘engagement’ by the proposed target group for the service was a major topic of discussion by the meeting attendees. Some wondered whether men would want to be engaged and if contacted whether they would be open to talking about their experiences. A comment from one of the family violence sector professionals described some of the content of the discussion amongst those who attended the meeting:

*“It was not expected that men would talk, but some of the workers who work with men said that they found that men did want to talk. This implied that men must really want support.”*

Other family violence sector professionals noted that there was a widely held perception that men were hard to engage; that it was “a waste of time trying to engage with men;” and, that such male-to-male engagements would result in “collusion and an inaccurate analysis of the family violence situation.” Two family violence sector professionals’ comments described the tenor of the discussion about engagement:

*“People assume that men are hard to engage. Why do people think that? It’s not my experience. The issue is that no one really engaged with them ... had to go through the system before anyone engaged with them. The recidivist pattern of domestic violence is partly caused by the fact that people believe that it is too risky to engage with men, but no one tried to engage with them.”*

*“One of the reasons why people don’t engage with men could be the risk of collusion and making an inaccurate analysis of the domestic violence situation. These assumptions are connected to the way we use the words victim and perpetrator. If men are engaged in the right way, and the right service is provided, then this gives men the opportunity for men to talk about the harder issues.”*

Other family violence sector professionals stated that meeting attendees acknowledged that men, who were referred to mandated stopping violence programmes, mostly presented as “really resistant.” Furthermore, they argued that mandating attendance alone did not improve either service compliance, or desired service outcomes. One family violence sector professional noted:

*“Very few perpetrators are self referrals. It’s the external motivators that make them turn up. The first Saturday of a programme is a whole day of induction and assessment ... the focus is on telling them the rules. What you get is a group of anti guys turning up ... just been convicted and all wound up.”*

Overall the meeting attendees were said to have recognised that resistance was normal, but emphasised that it’s “what you do with reluctant clients” that is critical to facilitating the process of change. For example, some noted that considerable effort was expended within mandated stopping violence services to build relationships with the men Court ordered to attend in order to overcome such resistance.

The family violence sector professionals reported that the “community discussion” meeting was a very “positive,” “exciting” and that there was “overwhelming support”

for the “Men’s Advocacy Service.” These sentiments are illustrated by one family violence sector professional’s reflections:

*“I thought that the meeting would raise a lot of safety related issues and risks, but there weren’t many raised. It was a really positive meeting.”*

## **8.5 Theory of Implementation: Drawing on Experiential Wisdom to Articulate the New Paradigm of Change for ReachOut**

The designers of the ReachOut service stated that establishing an outreach service for men introduced a paradigm shift – a theory of implementation that was somewhat different from that underpinning current family violence services and programmes for men. Those responsible for designing the men’s outreach service described their theory of implementation for this service – that is, the way in which this new service development was expected to work at different stages of its implementation, and why they believed the service needed to be set within a particular context. In order to articulate their beliefs about the way in which they thought this new service development would work, the service designers drew on their prior experience, practice and knowledge.

The theory of implementation that the designers of this outreach service articulated included, enabling factors associated with the structure and context within which the service was to be implemented; enabling factors associated with the worker/client relationship; and, enabling factors associated with men’s decisions to change.

### **8.5.1 Theory of Implementation: Structural and Contextual Enablers**

The designers stated that engagement was the central concept in the ReachOut theory of implementation. The purpose of the service was to “engage men in life-changing decisions and actions ... working out how to move men to a different space.” They believed that the “essence that energises such changes is relationships,” in particular the worker/client relationship, but also the whanau-like relationships the worker has with other colleagues and agencies within the human services system. According to those who described this ReachOut theory of implementation, the organisational structures required to support this approach were somewhat different from those most commonly and currently employed. A service designer explained in more detail this commonly and currently employed

organisational and programmatic structure – a structure that was somewhat different from the ReachOut approach:

*“What we employ people to do now is to make appointments and deliver programmes ... the phone assessment is one hour followed by another hour-long assessment with another person. It’s all formulaic and time restricted ... the planning, the assessments and the programmes. Once on programmes, men are introduced to people at the same time as they are doing the content ... The emphasis is not on engagement and relationships. In contrast to this, ReachOut emphasises the importance of building relationships to secure engagement ... recognises that there can’t be time restrictions on building relationships ... have to be with the person for as long as it takes.”*

### **8.5.2 Theory of Implementation: Building a Trusting Worker/Client Relationship as an Enabler**

For ReachOut, the key to creating relationships was to “employ the right person who has strong inter-personal qualities.” The designers believed that the recruitment process needed “to elevate the importance of emotional intelligence in the work (along with) technical competence.”

*“To get the results, what is needed are workers that bring their heart and mind to the work.”*

Success factors or conditions associated with developing a trusting worker/client relationship, and noted by the designers included:

- ***The first encounter between the worker and the client has to be a winner.***

This first contact was described as welcoming and greeting each person respectfully, “... much the same as you would when you welcome someone into your home;” embracing the person “regardless of who they are and what they have done;” and, ensuring there is a link between the worker’s characteristics and those of the client – a link that creates a sense of connection and familiarity

*“If a person does not feel accepted, this will add to the stress they are already experiencing and they will begin to withdraw. Put yourself in their shoes ... broken relationship, been to court, seen the probation officer and here’s another person ... if they are a six foot mongrel mob member and there is just someone there only interested in taking the administrative details, they will retreat from the relationship and not say anything.”*

- ***Genuineness and authenticity.*** Contact between the client and the worker needs to be genuine, focusing on understanding “who you are and what is important to you.” The worker needs to “like and believe in people’s potential to

change” and hold a “sense and a willing heart that they can make a difference to each client’s life.”

*“Clients have their antennae up (when they meet a worker). They can sense how genuine you are. They test you ... before they start to do stuff.”*

- **Honesty:** Help seeking for men was described as challenging. The experiential evidence suggested that many are reluctant to take the first step to explore the possible opportunities that an interaction with another person or service might present. Therefore, the initial conversations between the worker and the client would involve exploring the degree to which the client’s interaction with the service was to meet their expectations or those of others. In addition to uncovering the true influences that brought the men to service, workers would also surface the internal drivers and capabilities that enabled the client to present for service. One of the designers illustrates the conditions that might facilitated the client’s journey towards “entering the gate” and the types of questions that might be used to explore, in an honest manner, each client’s process for attending the initial meeting:

*“(The worker) makes an inquiry. ‘Tell me if I’m wrong, but you really don’t want to be here today. So let’s make it as easy as possible. How long have you got? Who sent you here and what are their expectations? What are your expectations? Under all this pressure, what did you tell yourself to enable you to get here? 60-70 percent of guys do not come in ... but you came and are sitting here with me ... that takes courage. What was different about today that enabled you to come the whole way? What things did you draw on to get here?’”*

### **8.5.3 Theory of Implementation: ‘Conversations with a Purpose’ – An Enabler that Facilitates Men’s Authentic Engagement with Change**

The identified enablers associated with structural and contextual factors and the establishment of a trusting worker/client relationship, were not the only change mechanisms associated with ReachOut’s theory of implementation. These were supplemented with a number of other assumptions about the enabling factors that facilitate men to take responsibility for their decisions and actions to authentically engage with the change process.

These enabling factors were described within the context of a continuum of positions on a journey towards a life free of family violence – a multitude of positions from point “A to point Z” that involved the service utilising a powhiri process to engage and

influence men's decisions and actions to change. Positions along the continuum were grouped within clusters referred to as "outside the gate" positions and "inside the gate" positions. The designers stated that the "outside the gate" cluster was where "all the hard work is done" by the service to engage men and find solutions that influence their decisions to change. The "inside the gate" cluster was where a service supports men, who are actively involved in the change process, until they reach the point where "they are on their own." The ReachOut service was positioned "outside the gate" and it used "conversations with a purpose" to facilitate men's authentic engagement and influence their decisions to change. The desired outcome was "when men accept the invitation to come through the gate."

These "conversations with a purpose" were assumed to involve a number of elements including:

- ***Outreach and active listening as methods of initiating conversations with a purpose***

The designers commented that many men who attend services are present at the behest of others and that while "they are physically present, they are not emotionally engaged."

*"Ultimately we want people to be engaged and change their lives. If you force people into a service ... and they think it is something they have to do because of other's expectations ... the Police, lawyers ... then maybe you have their physical presence ... maybe you get good retention rates, but that's not engagement. You can give them information, but once outside the service they will 'chew it up and spit it out' ... 'put it in the boot of the car until next week's session.'"*

To counter this identified issue and begin the process of enlisting each man's interest in engagement and the process of change, the designers of the ReachOut service argued that most success occurs when the worker takes the first step to reach out to the client - "knock on people's doors ... go to the workplace, go out to families, meet them in familiar community settings."

Together with this outreach approach, the initial conversation between the outreach worker and each man focused on providing a context of openness and unlimited time to talk about their experiences, realities and the things in life that mean the most to them as they perceive them. The worker employed active listening skills to

encourage “participation that may, or may not directly involve the issue of family violence.” The designers explain the strategy:

*“Initially you have to put aside the treatment around family violence and work out how to engage with this person and have a conversation ... address the safety issues. You have to give them space to be heard and acknowledge that they have been heard ... could be there for two hours or more. If you do that, then something different will happen in the room.”*

According to the designers the point of such initial conversations is for the worker to listen for the issues that are concerning each man – issues such as “their past history, their employment issues, their gambling, their mental health issues ...” and the things in their lives that have significant meaning for them. “By capturing and holding the essence of what he is saying,” the worker is then able to use this information to assist men to make the connections between what they have said and the vision they have for their lives. In this way, each man is offered the opportunity to begin to create a vision for the future that focuses on the things in their lives that have meaning for them and begin the process of identifying what they can do to manage current and future risks to the achievement of that vision. Thus, the worker facilitates a process whereby the man begins to make explicit the way in which current issues and behaviours get in the way of their achieving their future vision for themselves and their families. Such clarity, it was argued, may influence men’s decisions to change.

- ***Facilitating Men’s Ownership and Responsibility for Decisions and Actions for Change Through Conversations with a Purpose***

These initial conversations aim to engage men on an emotional level, whereby they begin to define and articulate their goals for life. This in turn opens up questions about what each man can and is willing to do to reach such self-identified goals. The assumption here is that if a man determines his own personally meaningful goals and what he can and will do to achieve them, then he will take responsibility for any actions taken to further advance the achievement of such goals. Furthermore, there is the assumption that any positive change efforts undertaken by the men, even those not directly related to their violent behaviour, result in other positive changes because people operate within a system of inter-related elements. Therefore, positive change in one part of a man’s life is likely to positively impact on other parts

of their lives. One of the designers illustrated the way in which the worker can facilitate a man's decision "to change their world:"

*"(A man may say that he) 'wants a better life for his kids' and that opens up the opportunity for the worker to ask him how can you help your kids to have a better life? You need to shift the discussion to what he can do. The safety plans currently focus on what he can't do ... it's the medical model that focuses on the problem, but this needs to be substituted with what he can do. This is really a shift from the notion of accountability to responsibility ... taking responsibility for him developing his own future."*

The designers argued that this approach is an effective way in which to engage men in solutions that are relevant to their unique circumstances and within their current capabilities to achieve. This more therapeutic approach, they argued, is grounded in each man's reality and assists with enhancing their belief and motivation to accomplish positive changes. One of the designers explained why this approach has more potential to achieve desired outcomes:

*"Many services for men are based on educational, not therapeutic approaches. However, a lot of these guys don't have an educational foundation ... they failed to learn at school and so when they are given new information within the context of a prescribed model, they have no where to put it ...no educational framework. If you invite men to provide ideas about what they can do about the things that get in the way (of achieving their goals) and invite them to step up and participate in these actions, then they have a sense of ownership ... they get a whole new energy to do something."*

- ***Exploring How to do Things Differently Through Conversations with a Purpose***

Assisting men to engage with life in a way that is beneficial for them and those with whom they relate involves conversations that construct a different reality from that which they have previously experienced. The purpose of these conversations between the worker and the men is to find ways in which to empower them to discover the ingredients that will lay the foundation for a life that is free of violence. The worker's focus, in this situation, is to engage men in talking about "the real things of life and to do this you have to get down to the nitty gritty" and use concrete analogies to promote the "vision of how to do things differently." An example about the way in which a worker might approach a conversation about relationships was offered by one of the designers:

*“To build a house to last 100 years you have to get the foundation right. Who has ever had to do this? It’s the hardest thing to get the foundation right. Let’s say you wanted to build a relationship with your partner that would last all of your life and you could pass this type of family life on to your children. What would you need to have to build a solid foundation for this sort of relationship? When you ask this question 9 out of 10 men will not mention sex, rather they say that the foundational ingredients for a lifetime relationship would be communication and honesty. Then you talk about what your grandparents did to build a relationship ... engaged for 2 years ... built a friendship ... got to know each other before they made the final decision to marry. Men get this. Most men start with the roof first ... then they have a couple of kids ... live together for 10 years, not communicate with their partner ... not respecting or trusting her. When you ask them who lives in a relationship where they trust their partner ... no one puts their hand up. The worker’s task is to invite men to consider when they might be ready to build the foundation of a good relationship? Explore what might be getting in the way? And help them to identify the first behavioural steps they might take to towards a different and desirable change.”*

- **Choices and Consequences Surfaced Through Conversations with a Purpose**

This theory of implementation also recognises, that for some of the men who are contacted by an outreach service, there will be a “dissonance between what they say they really want and what they are currently doing.” In such circumstances, workers use various tools from the motivational interviewing approach, to assist men in these circumstances to take ownership of their decisions not to change and squarely face the consequences of such decisions. Two examples illustrate the use of such motivational interviewing tools:

*“(Workers might say to men) you are doing this but you say you would really like to be different. When do you think you will be ready to go after that? What’s getting in the way? So you say you’re not ready to change now ... that’s your choice. So who needs to know? How will tell (your partner) and your children that you are not ready to have a violent free lifestyle yet ... not ready to let go of that? You have to respect people’s choices, but let them face up to the consequences of their choices.”*

*“It’s your decision not to change. What do you need to do as a result of that decision? (The worker) has to help men to think about what they are going to tell the judge ... that they do not want to do something to change. They need*

*to be honest ... stand in their mana. The guy will say ... (the judge) will send me to jail. (The worker) might say, sorry you're saying that you don't want to go to jail and would rather stay here (in the community). (The worker) needs to facilitate their taking ownership of their choices and let the consequences belong to them. Workers have to let people make decisions and not blame other people ... get people to take responsibility and stop rescuing them ... get people to do things for themselves."*

- **A Systemic Approach Based on Whanaungatanga Involving Conversations with a Purpose**

The theory of implementation for ReachOut recognised the importance of a systemic response to family violence – a response that is based on the inter-relationships and collaboration of various inter-disciplinary and cross-sector contributions to the positive outcomes sought. This perspective acknowledged that those who access an outreach service may well require support from others with alternative forms of expertise, for example, those with expertise in working with those with experience of mental health issues and/or alcohol and drug issues. Furthermore, the perspective recognised that the outreach service had the potential to effect other parties, for example women and children; and, that forming alliances with professionals who worked with such other parties, provided opportunities to strengthen the overall response to family violence for individuals, families and communities.

Such alliances with other disciplines and sectors required a connection as a 'one-people' relationship, in which the parties within the relationship "hold similar world views and philosophies" and work in an environment of "high trust." This "operational interactive response amongst practitioners" is encapsulated in the concept of whanaungatanga. Those involved in the alliance would share a belief in the unique capacity of each individual to find solutions for themselves by developing self-determined goals and actions towards a violence-free lifestyle and that through such self-determination they will take ownership of and responsibility for the process of change. This synergy of practice across disciplines and sectors counters the risk that the outreach "engagement work and the trust established does not get undone." One of the designers illustrated the way in which this cross-discipline inter-connected, or whanaungatanga approach, enabled men to maintain their change efforts:

*“A lot of men require access to a broader range of services to address the relevant components of their (solutions) to create a future without family violence. This could be to deal with the mental health stuff. The workers in these other services need to take a ‘whanau’ worker approach ... they have to interact with the man in the same way ... focus on the things that the man has identified are important for him... things he wants to work on ... not develop a new plan and priorities for action based on their professional expertise. All the workers involved with the man need to be able to trust each other and work together in the same way. The ReachOut worker would go with the man and introduce him to the next ‘whanau’ worker ... practitioners work together. If you don’t send men to the right place all the trust established (with the ReachOut) worker gets undone.”*

## 9 Implementing the ReachOut Service: A Case Study to Illuminate How the Service Functions

Multiple in-depth interviews with the outreach worker provided the opportunity to explore and describe in detail and depth the story of the ReachOut service – a story that chronicles and provides insight into the steps in the process of the intervention and the variables at play at each stage of this intervention that are likely to contribute to the overall outcomes sought. In all, nine cases were described. These cases were purposefully selected to maximise variability amongst the characteristics and circumstances of each case that contributes to the overall case study. Moreover, and in order to enhance the external validity of the findings from the case study, these characteristics and circumstances were selected on the basis that they have been shown through empirical evidence to be associated with the population of men who commit family violence offences.<sup>54</sup>

### 9.1 Demographic and Social History Variables of the Individuals Contributing to the Case Study

The demographic characteristics and social histories of the nine individuals who contributed to this case study include age, ethnicity, relationships, employment status, substance abuse, mental health issues, children, previous family violence history, previous criminal justice history and previous history of family violence interventions. The distribution across these variables is outlined in the following list:

- *Age*: including representation across the following age ranges: 15-19 years (1); 20-29 years (2); 30-39 years (2); 40-49 years (2); and, 50-59 years (2).
- *Ethnicity*: Including, New Zealand European (3); Maori (1); New Zealand European/Maori (2); European (2); Unspecified Minority Ethnic Group (1)
- *Relationships*: Married and living with intimate partner (2); defacto relationship and living with intimate partner (1); separated (4); parent/child (2)

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<sup>54</sup> Hilton, N.Z., Harris, G.T., Rice, M.E., Lang, C., Cormier, C.A. and Lang, K.J. (2004) A Brief Actuarial Assessment for the Prediction of Wife Assault Recidivism: The Ontario Domestic Assault Risk Assessment. *Psychological Assessment*. 16(3): 267-275.

- *Employment Status*: Employed (5); Self-Employed (2); Unemployed (2)
- *Substance Abuse*: Substance abuse issues present (6); Substance abuse issues not present (3)
- *Mental Health Issues*: Mental health issues present (4); mental health issues not present (5)
- *Children*: Children either of the most recent intimate partner relationship or partner's children (8); no children (1)
- *Previous family violence history*: First reported family violence incident (5); More than one reported family violence incident (3); No reported family violence incidents (1)
- *Criminal justice history*: Previous criminal justice history (3); no previous criminal justice history (6)
- *Previous history of family violence interventions*: Previous history of family violence interventions (5); No previous history of family violence interventions (4)
- *Most recent family violence offence*:<sup>55</sup> Physical assault and abuse (4); Psychological abuse (5); Emotional abuse (8); Harassment and stalking (1)

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<sup>55</sup> The most recent family violence offence(s) associated with the units of analysis that informed the case study were defined with reference to the definitions noted by the Australian Bureau of Statistics (Australian Bureau of Statistics, 2013 *Defining the Data Challenge for Family, Domestic and Sexual Violence*. Australia: Commonwealth of Australia). Note some of the units of analysis involved more than one form of family violence behaviours.

**Physical assault and abuse:** actual or threatened, causing pain, injury and/or fear including: direct assault on the body (strangulation or choking, shaking, eye injuries, slapping, pushing, spitting, punching, or kicking); actions leading to disablement or murder; use of weapons including objects; assault or neglect of children; and, sleep and food deprivation.

**Sexual assault and abuse:** actual or threatened, including sexual assault and the sexual abuse of children including: any form of pressured and unwanted sex or sexual degradation by an intimate partner or ex-partner, such as sexual activity without consent; non-consensual sexual acts; causing pain during sex; assaulting genitals; forcing or coercing a person to have sex without protection against pregnancy or sexually transmitted disease; and, making the victim perform sexual acts unwillingly (including taking explicit photos)

**Psychological abuse:** involving manipulative behaviour to coerce, control or harm; denying a person's reality; unfairly blaming a person for adverse events or making them feel they are a problem; or constant comparisons with other people, which work to lower confidence and self-worth; driving dangerously with the intent to incite fear or cause harm to another person; making threats regarding

## 9.2 Circumstances and Approaches at First Contact

Referral sources that provided the impetus for the first contact between the ReachOut Family Support Worker and the men were varied. Specifically, the referral sources for the nine individuals that informed this case study included two referrals from agencies; two voluntary self referrals; and, five referrals from Police Incident Reports (POL) and Police Safety Orders (PSO).

In circumstances where men were referred by an agency worker, having an established professional relationship between the ReachOut Family Support Worker and the professional who made the referral appeared to be influential in facilitating men's decisions to agree to a 'first contact' interaction. Such professional- to-professional relationships were characterised by high trust, professional credibility and a knowledge of the efficacy of the parties' professional practice.

*“(ReachOut Family Support Worker) approached by (a professional) who knew of my work in a previous role ... had appreciated my work ... already had a relationship with them and they knew how I worked. (They) thought it would*

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custody of, or access to, any children; acts intended to control an individual; and, asserting that the police and justice system will not assist, support or believe the victim should they seek assistance or report abuse.

**Emotional abuse:** blaming a person for all of the problems in the relationship; constantly comparing the victim with others to undermine self-esteem and self-worth; sporadic sulking, withdrawing all interest and engagement (such as periods of silence); and, emotional blackmail.

Verbal abuse: actual or threatened, designed to humiliate, degrade, demean, subjugate, intimidate; threat of physical violence; and, swearing and verbal attacks that focus on intelligence, sexuality, body image and capacity

**Economic Abuse:** actual or threatened, including; deprivation of basic necessities; seizure of income or assets; withholding or controlling, against a person's will, their access to money, food, clothes and personal items such as car keys or phone; unreasonable denial of the means necessary for participation in social life; and control of money or financial resources/information, including: • preventing access to bank accounts; • providing an inadequate 'allowance'; not allowing the victim to seek or hold employment; and, • using all wages earned by the victim for household expenses.

**Social abuse:** actual or threatened, through forced isolation from family or friends; control of all social activity; deprivation of liberty; deliberate creation of unreasonable dependence; systematic isolation from family and friends through techniques such as ongoing rudeness to family and friends to alienate them; instigating and controlling the move to a location where a person has no established social circle or employment opportunities; and, forbidding or physically preventing a person from leaving the home and meeting people.

**Property damage:** actual or threatened, including; damage to an individual's personal or shared property; damage to the property of children, friends and/or parents; and, violence towards pets.

**Harassment or stalking:** actual or threatened, such as; constant phone calls/texting to a workplace or home; repeated visits to a workplace or home; bullying; monitoring and surveillance; and, cyber-stalking.

**Spiritual abuse:** actual or threatened, denial and/or misuse of religious beliefs or practices to; force victims into subordinate roles; and, misuse of religious or spiritual traditions to justify physical violence or other forms of abuse.

*be a good idea for me to be involved with this (man). The worker introduced the idea to the man ... suggested it was a good idea to meet with ReachOut Family Support Worker ... knew how I worked and so were able to relay that to the (man) to get him interested. They prepared the way by saying that I worked solely with men and they talked to him about the benefits of working with (the ReachOut Family Support Worker. Familiarity with others in other agencies in this work is helpful.”*

Such credibility and reputational characteristics associated with the ReachOut Family Support Worker also seemed to be key factor for men’s decisions to further engage with the service after the first outreach ‘cold call’ even in circumstances where this first telephone contact was initiated as a result of a Police Incident Report referral.

*“The POL noted a Protection Order was in place and that there was a real concern about him not being able to let go of the relationship. I made a number of attempts before being able to reach this man ... The aim is to put the offer out there as soon as possible after getting a notification from the Police about a family violence incident. He agreed to meet because he said he knew someone who I had worked with previously and she told him I had a good reputation.”*

The men who self referred seemed to access information about the ReachOut service and relevant contact details from their partners – partners who were engaged with the women’s Family Support Workers. Of the factors that appeared to influence men’s decisions to self refer and make the initial telephone contact with the ReachOut service, two scenarios predominated – scenarios that while linked to their relationships with their partners and children varied depending on the status of those relationships. For those self referrals where the man was, at the time, residing with his family, men presented with awareness of the nature of the problem; some insight and acknowledgment about their role in relation to the problem; and, appeared highly motivated to “to do the right thing for their families.”

*“When he phoned he mentioned that his partner had given him the (ReachOut) phone number ... that she really wanted him to contact me. He said he thought he needed help ... wanted support to change how he talked and related to his partner and children. He was concerned and motivated ... wanted to meet.”*

In contrast to this self-referral scenario, some men, for example those who have recently separated from their respective partners, contacted the ReachOut service in a vulnerable post-crisis state – a state in which their previously used coping

mechanisms do not seem to be working. It appears that when men find themselves in this type of situation, they experience a state of disequilibrium and it is this experience that influences their decision to seek help. In situations where the ReachOut Family Support Worker identified that the men contacting the service were either experiencing either emotional turmoil and/or there is a situation of dangerousness or lethality, steps were taken to rapidly establish rapport; explored the dimensions of the problem in a holistic manner using open questions; surface potential coping strategies within the man's own environment; offer additional suggestions for coping in the immediate term; and, provide an invitation to contact should the need arise. An example illustrates this kind of scenario:

*"He contacted me at 5pm on Friday ... said his partner had given him the phone number ... in the middle of a separation so took the opportunity to make contact ... said I don't know if you can help me. He felt things were over with the marriage and was keen to meet. He seemed pretty depressed and I asked him what was going on? ... Got him to say what his need was. (He) said wife says I'm not good with the children and don't show her respect ... he thought the language wasn't such a big deal. Inquired generally about his health ... work situation and seemed like he was under a lot of pressure ... irregular attention to exercise ... no water intake. Made an appointment to meet him first thing Monday ... asked him if he had a work mate who could support him over the weekend ... suggested that over the weekend he put in place some self care stuff ... drink eight glasses of water each day ... get physical exercise ... together these things help people to think more clearly ... energise so not so down focused... also suggested some other things to get the motivation going in a good direction. He promised to do all this stuff .. said he could contact me over the weekend if he needed to. When he contacted he was suffering from depression ... sense of hopelessness about losing his family. When we finished speaking I noticed a lift in his voice ... we had an appointment and he had things to do over the weekend.*

This notion that men may be more amenable to seek help and more open to outside influences and change during times of crisis, was also noted during the initial interactions with men who received a 'cold call' by the ReachOut Family Support Worker following receipt of a Police Incident Report. For some contacted in this way, issues of shame and/or fear of the consequences ensuing from the public awareness of the man's family violence offences, seemed to also be influential in men's decisions to engage with the ReachOut service. This type of influencing variable is illustrated in the following extract:

*“When I phoned he was keen to engage ... only 24 hours since the offence and willing to meet with me ... there was shame and fear of going to jail. This work we do with men with domestic violence ... after the Police callout we ring and offer support and they are ready to meet. A Police Safety order was put in place and he was staying at a friend’s house. He thought working with (the ReachOut Family Support Worker) would be seen as a positive thing by the judge ... after he went to court and the Judge said he was happy that he had engaged, he was eager to keep meeting.”*

While experiences of shame and fear about the consequences ensuing from a Police callout to a family violence incident influenced some men’s decisions to engage, for others the ‘turning point’ was the opportunity “for a good future ... an offer of hope.” This sense of “hope” that men pick up is inherent in the underlying philosophical approach adopted by the ReachOut Family Support Worker – an approach that is imbued with a belief that all people have the potential to make positive changes in their lives no matter what their background or current circumstances.

*“I think it’s the offer of hope ... a new opportunity ... hope for a good future despite what the men have gone through. They can be rat bags ... then they get sick of the lifestyle and want to change. Even with the worst case scenarios you approach it with a hope for the best outcome and then as a worker you receive what comes back at you.”*

When asked about what elements of the ReachOut service most influenced men’s decisions to agree to engage further after the first contact, it was “the good introduction about the ReachOut service because once you deliver that well and get past that stage men tend to want to engage.” The concept of whanaungatanga was a critical success factor associated with this first cold call following receipt of the Police Incident Report. In this context whanaungatanga involved creating a shared understanding about what the service can offer the men; a shared understanding about how the work together might evolve; and, a shared understanding of the experiences, feelings and thoughts that men have during this period immediately after a family violence incident.

*“Focus of this (first contact) is whanaungatanga ... get a shared background ... what I do and what I hope we will do if we engaged. I start by telling them that I am aware that there has been a Police callout ... that I wanted to find out how they have been since the incident ... that my work is to engage with men who have been involved in similar incidents and provide support and a listening ear ... invite them to meet up and have a chat to see how I can help ... ask them whether they might be willing to engage and look at themselves.”*

While there were successes in influencing men's decisions to further engage after the first telephone contact, "there are lots of calls where nothing seems to work." An example of a typical interaction between the ReachOut Family Support Worker and men who decide to decline the offer to be further involved with the service follows:

*"I speak to the guys on the phone to sound them out ... offer support to address their DV ... say that I am aware there has been involvement with the Police and that I am ringing to offer support. They listen for bit or mumble 'thanks mate for calling ... everything good now ... just a misunderstanding and we were drinking but we're not drinking anymore.' I always remind them that they have my phone number and that they are welcome to get in touch any time if they need support in the future. The reality is that some men are not ready to change. There are a lot of calls like that."*

Upon further examination of situations where outreach does not lead to further engagement, there appeared to be no pattern of demographic or social history characteristics that were associated with those who declined support from the ReachOut service.

*"There is no real pattern amongst these cases ... they cover the whole spectrum of offending and all ages ... some are embarrassed and ashamed ... some are not interested in caring about other people ... not ready to be in a relationship but rather go into one relationship after another. The population who are not interested includes men in their twenties, thirties, forties ... married or been with a partner. Once I have engaged with the men I have no problem working with them."*

Typically the men who decide not to engage with the ReachOut service tend to blame other people, alcohol or circumstances for their violent behaviour or minimise, justify or deny their use of violence during the initial outreach call following the family violence incident. The content of these men's conversations and their attitude "shows me that they are not interested in addressing their domestic violence." An example illustrates such content and attitudes:

*"The man had separated from his (partner)... referred to her as a bitch, trollop, slut because she had been unfaithful a number of times ... only admitted verbal abuse. He had a current partner and was only interested in talking if I helped him to meet with his daughter. To him it was my responsibility to help him see his daughter. As the conversation drew to an end, I said he was welcome to get in touch any time in the future if he needed support."*

## **9.3 Engagement Processes and Strategies**

### **9.3.1 The Foundation is the Powhiri Process**

For the ReachOut service the elements in the engagement process are grounded in a powhiri model – a powhiri process that has a unique mauri or life force. This powhiri process includes four significant phases:

- Making connections and building relationships: Establishing whanaungatanga
- Men tell their story: Spending some time in mauri mate to explore “the challenges and pain experienced by men. You have to go to mauri mate because if you ignore this part of the process then you won’t get anywhere. Men need to talk and they are often in this space when they do.”
- Making connections and surfacing the ‘heart hook:’ Kaupapa of the engagement – “redirecting the conversation to the present and the future and acknowledge the kaupapa of the meeting which might be to achieve certain goals together.” (includes focus on what is important for men)
- Establishing ownership and responsibility for defining goals and taking action: Beginning the journey towards mauri ora – men taking ownership and responsibility for the changes required to lead a better lifestyle by “going through the change process with integrity so that they can make positive strides along the journey of change.” (include aspect of hope; achievable actions)
- Maintaining change on the journey to mauri ora

### **9.3.2 Establishing Whanaungatanga**

Building a trusting relationship between the ReachOut Family Support Worker and the men was described as a crucial first step in engaging men on the change journey. In order to establish a worker/client relationship of this nature and make a meaningful connection during the first face-to-face meeting with the men, the worker focused on building credibility, establishing parallelisms and linkages between the men’s situations and that of the worker, and, creating a milieu of genuineness about the way in which the worker and the men would interact during the men’s journey of change. Establishing credibility, parallelisms and genuineness involved describing the worker’s whakapapa, work history, current role (as a ReachOut Family Support

Worker) and the reasons for taking up the role, some self disclosure about his lived experience of family violence and journey to a lifestyle free of such family violence, and a description of principles and approach that would guide their work together. An example of the way in which whanaungatanga between the worker and the men is created is described in the following reflections:

*“The first face-to-face meeting is about whanaungatanga ... making connections. You have to build a bridge of trust between the worker and the men ... an emotional connection. I start by sharing a bit about myself ... introduce myself ... the history of my tribal/kiwi family ... about the role ... how I got into this line of work ... why I was interested in the role ... and what drives me to do the work. I tell them about the stages that I have gone through before coming to this role ... that I started work in the prisons as a tutor and then my work at the Community Probation Service ... that this focused on the enforcement side of things and how I wanted to work in another way ... rehabilitative, motivational, about better lifestyles, about reintegration ... energising work and that I have a passion to help men in this way and that I have worked with men in similar situations before. This was my pathway to my current job ... its more than just a job, it’s my passion.”*

*Let them know that our work is confidential unless there is a concern and then I would need to inform the appropriate agencies ... no judgement in the work we do together ... whatever he tells me I will not judge him ... similar background and know what it is like being in a position of helplessness ... how I’ve made mistakes ... got up and saw the light ... realised I loved my family more than the reward of the immediate things ... put good practices to use ... and followed a better path and doing better things. This is done to break down the feelings of shame. The men come to see that I can understand their situation because I have been there ... can empathise ... and that I have experience of both sides of the spectrum. This approach helps the men to let down the barriers ... they see a similarity ... just a chap like him ... this enables them to begin to talk and open up.”*

Such relationship building strategies appear to provide men with a sense of the worker’s experience and “history of work with men” within the context of the domestic violence sector. Not only was experience important to building whanaungatanga between the worker and the men, but also providing the men with the opportunity “to see you really want to support them ... genuinely want to help.” Such honesty about appropriate and bounded disclosure of aspects of the worker’s professional and personal life opened up the possibility of creating linkages between the two parties – linkages that appear to facilitate men’s decisions to “drop the barriers that may have been lingering about how much to tell this stranger and to be totally honest.”

Moreover, providing men with the opportunity to hear about the “success stories of others (enables) them to make a connection for themselves ... ‘if they can do it, then I can do it;’ It provides a sense of hope for the future.”<sup>56</sup> With the barriers down, men appear more open to help seeking.

### **9.3.3 Men Tell Their Stories**

Providing the space for the men to tell their stories has three main objectives. First, the men needed time to further assess for themselves the worker’s genuineness, sincerity and trustworthiness. Essentially, this required the worker to approach this first engagement with the men with positive self regard – an approach that suspended judgement; accepted, valued and supported each man regardless of what he said or had done; and, required the worker to listen with grace and a belief that people have within them the potential and ability to change. It is assumed that if the worker approaches the men in this way when they are telling their stories that it provided the conditions within which to nurture men’s decisions to accept and take responsibility for their circumstances and accept the invitation to make positive changes.

*“During engagement the men just want to talk. They have often not experienced an ear that listens to them in a non aggressive manner. They have sometimes tried to talk to others but they just give opinions ... enforcement agents, partners, relations ... they have not listened and so have not picked up on things before that the men have brought up. They just tell the men what they need to do, but have not listened. Listening helps the man gauge the worker’s sincerity ... if you really listen to them in a dignified manner and with respect the men get the message that the worker really cares for me. The worker needs to be genuine and listen to the men.”*

Second, providing the space for men to tell their stories gave them the opportunity to “get things off their chests ... release the pressure.” Experiential knowledge of working with these men suggested that if men were not provided with an outlet to

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<sup>56</sup> Point Research found that family violence workers who had previous ‘like’ experiences to the men with whom they worked had a greater influence on their clients’ decisions to change if the clients “believed (the worker with whom they interacted) had made positive change; (and used an approach that was) real, genuine, respectful, helpful and non-judgemental; (and) had the ability to radically challenge previously held beliefs” (Point Research Limited, 2010:37).

express their concerns and frustrations, they would most likely commit further family violence offences.

*“The worker needs to let them talk because if you don’t then the behaviours we are concerned about will continue.”*

When men talked about their circumstances they often described a family history that included witnessing and/or being a victim of family violence as a child; their current situation and the factors that led up to the family violence incident; their frustrations and concerns about key family relationships; as well as their concerns about other troubles in their lives such as health, mental health, financial and/or employment issues. During this ‘story telling’ phase, men frequently entered a mauri mate space – a space “around the dead and sickness ... the force that controls distorted and wrong thinking.” While it was acknowledged that men may well need to be in this space for a time as part of the process, it was the worker’s role to know when to “re-direct the conversation away from this space to the present and the future.”

*“The process involves men talking about the challenges and pain they are experiencing. You have to go to mauri mate because if you ignore this part of the process then you won’t get anywhere. There is a risk if the focus on the self in this space goes on too long. Sometimes men need to talk in this space for a long time but with other men they only stay there for a short time. The task is to move them from there to the present and future.”*

Third, actively listening to the content of men’s stories and the meaning they give to their experiences provided the worker with the opportunity to begin the process of not only identifying those aspects of each man’s life that have value for them, but also identifying factors that appear to be contributing to their current circumstances and precluding their reaching their future aspirations. By identifying such factors specific to each man’s situation, the worker was then able to use this information later in the engagement to individualise and particularise the way in which to work with them to facilitate the change journey. Some comments illustrate the worker’s role during this stage of the engagement process:

*“You have to be patient to get them to open up ... talk and every now and then you pick up an avenue to follow ... this stage is about listening more than talking ... paying attention and holding on to things that they say that you can use later.”*

*“This part of the engagement is about looking in every area of men’s lives and finding a hook to change ... look to find things that have significance for men ... recognise that no one person has the same experience as another person ... these are the underlying factors that guide my work with the men.”*

*“You have to have the energy to engage with energy ... no time limits or pressures to follow a standard format ... got to present as relaxed ... not hard core drilling. When you talk you have to have some things behind you (from the men’s stories).”*

*“The task is to get a picture of the layout of things while we engaged ... body language and match that with what they (the men) are saying in the interaction.”*

#### **9.3.4 Making Connections and Surfacing the ‘Heart Hook’**

The various elements involved in building a trusting relationship between the worker and the men, including providing the space necessary to actively listen to the men’s stories, were all critical to laying the foundation required to transition the engagement to the stage where men were invited to consider beginning the journey of change. Specifically, a critical influencing factor in men’s decisions to change was the establishment of an emotional connection and a sense of familiarity between the worker and the men – a connection that sets the stage for the worker to summarise and feedback a picture of each man’s current situation, as well as reflections about what the men have said are important to them in their lives, currently and in the future.

*“This whanaungatanga element is related to the historical traditions on the marae. You have to spend some time in the realms of the dead ... stay for a short time to acknowledge and then move into the realm of the living again.”*

*“You have to get an emotional connection first and then you can successfully use that as a means for change. There needs to be a connection. It’s like a family environment ... in a perfect family everyone is familiar with each other and with this familiarity each person wants to please ... do well for the family and make a good contribution. If these conditions are met the worker can say anything to a family member without getting a negative arousal from the opinions expressed.”*

*“Once you have built the trust with them you can be blunt and the feedback can be real. The impact of the bluntness is dissipated because of the lead-up conversation and the description of what I had experienced ... you can acknowledge their experiences but you need to bring it back to where it is now and where do they want to go ... this is the challenging part of the process.”*

Drawing on the information provided by the men, the ReachOut Family Support Worker then began to “put together the pieces of the puzzle for the men” – a picture that summarised and contrasted the reality of their current situation with their descriptions about the aspects of their lives that have significance for them and their aspirations for a different way of being.

*“Most men run here and there and cannot make sense of what is happening to them. The aim is to put together the puzzle and once they see how the bits fit together they usually make progress. When you do talk you start by identifying the situation the man is in ... the concerns other people have ... that this is not the behaviour of a man who loves his children. Once you have built trust you can deliver in a way that enables men to be empowered to see the truth. The negative reality has to be compared with relief and hope for the future. Then you put it back of the men to decide what to do.”*

This relief and hope for the future was heavily anchored in what was referred to as the “heart hook.” The “heart hook” was described as a “hook into their deepest desires that will attract them to think about whether to change or not.” “Heart hooks” vary for each man, but commonly they include “their love for their family;” “being a great Dad;” “wanting to be happy;” and/or “their culture and their identity as a positive male role model within that culture.” Surfacing this reason for wanting to embark on the journey towards a life free of family violence was described as a different approach from that traditionally used within the family violence sector. Rather than a challenging approach that focused on issues of power and control, the ReachOut approach focused on the men’s self-identified desires to have a different life from that which they have experienced in the past. This contrasting approach is described in the following extract:

*“Men that I work with need a different way to relate to others. When I work with the men I have to bring it forward in a subtle way. Other (approaches) emphasise aggressive challenge and a focus on power and control. I work differently ... work hard to find a hook that gives men a different way of seeing what it is to be a man. They need a reason for being different. Men will resist if they are forced or pressurised ... never get anywhere if you try to coerce them. You have to find what will attract them to change that is greater than the alcohol and drugs and will keep them motivated when the service is not around ... keep the motivational force upper most in their minds when the pressure comes on ... stops them from setting off into violence. If you don’t achieve that then they will stay the same and things (more family violence) will happen.”*

Once the current reality and the things in men's lives that they identified as important to and valued by them were surfaced, the ReachOut Family Support Worker invited the men to take responsibility for choosing whether or not to engage in the journey of change towards a life free of family violence. Such choices needed to be self-discovered, self-initiated, self-determined and made with integrity.

*“(The) secret is not to tell the men, but let them discover it for themselves through comparing the past and where they want to go. When men see what being a man (without violence) is, the difference is huge. At the beginning they can see no hope. If I work with men by going through a process ... good preparation and men have good support to see hope then the work is done.”*

*“Can acknowledge their experiences but important to bring it back to where it is now and where do they want to go. Focus on the positive things they want and the truths about where they are at this stage. Do you love marijuana above your family? Who do you love most? The aim is to make them choose. What choice will you make for yourself? This or, that?”*

*“The intent of the work is to get them to choose. Either they are just there to try to satisfy other people's expectations ... just attend. When this happens it shows through when the challenge comes ... they're just fooling themselves ... or they are willing to be motivated when the challenge comes ... they see the value and pick up the challenge. The worker's role is to come in peace and test the calibre of the men when the challenge comes ... they have to make a decision ... have the honesty to not choose the current situation but rather choose the path to change.”*

For ReachOut, this element of the engagement process aligns with elements in the powhiri process. An informant explains:

*“The powhiri can involve words that say one thing and actions that say another ... people might be invited onto the marae but the actions might be very aggressive. The process might acknowledge old grievances whilst at the same time acknowledge the kaupapa of the meeting ... to achieve a goal together. These stages mean that people enter with a clear mind and good intentions ... past resentments are left outside the gate. The process has to be applied with integrity. When this is applied to our work, if men go through the change process with integrity, they can make positive strides along their journey ... otherwise if they don't they're just playing the game – saying one thing and acting in another way.”*

### **9.3.5 Establishing Ownership and Responsibility for Actions that Contribute to the Safety of Self and Others and Maintaining Change**

For ReachOut engaging the men's participation in creating new ideas about the actions they may be willing to take to assist their efforts to exclude violence from

their intimate relationships is critical to their taking ownership and responsibility for their journey of change. The focus is on initiating pragmatic solutions to mitigate violence in intimate relationships and enhance the safety of all affective parties – solutions that create changes in an effective and timely manner. In order to progress this focus the ReachOut Family Support Worker adopts language and approaches that involve identifying solutions and identifying previous occasions when they used pro-social behaviours. Once these are identified they are then further defined, supported and reinforced throughout the engagement process.

The worker's conversations of change invited the men to consider the people that were most significant in their lives, what their role would look like if the relationship between them and those they cared about was free of violence, and, "what they are going to do to keep everyone safe with each other".

*"I focus on what's important to them ... being a great Dad, being a positive role model for their families, love of their family, having a great relationship, culture, identity, managing life's realities and pressures better ... (and) get them to consider ... As a person who wants to change for the better what are you going to do to care for your family? How are you going to deal with situations when you feel under pressure? What are you going to do to make things better?"*

In order to facilitate men's identification of self-determined actions for beneficial change, the ReachOut Family Support Worker also included exceptions questions – What have you done in the past to maintain your dignity as a man?

All the energy during this element of the engagement process is focused on building the men's ownership and responsibility for deciding on actions that will contribute to beneficial change. Many types of actions were described, but they had several characteristics in common. They were meaningful for the men; they were pragmatic, achievable within the context of the men's everyday lives and observable; and, they involved small steps towards a future without family violence. Examples of the actions that some of the men took responsibility for incorporating into their lives included:

- *"Recognising and acknowledging feelings of pressure and stress ... and using breathing and other relaxation techniques to deal appropriately with the situation."*

- *“Sharing with partners planned actions (by the men) to keep everyone safe when feeling pressured ... walk away ... call others in for support”*
- *“Complying with Protection Orders by being a great Dad at a distance ... providing an example to your children by showing them respect.”*
- *“Building and practicing positive interpersonal relationship skills that enhance the welfare of the family ... active listening to pick up the content and meaning of the communication ... no interruptions ... responding in a positive manner ... using respectful language.”*
- *“Using counselling in conjunction with engaging with ReachOut ... use it to benefit you and demonstrate your love for your partner and children ... take the good things from this on board and use them every day”*
- *“Attending stopping violence ... anger management ... alcohol and drug services that are conditions of sentences, whilst engaging and receiving support from ReachOut”*
- *“Taking positive action to include tangible things into their everyday lives and associated with a healthy lifestyle ... good habits ... exercise ... drinking water”*
- *“Seeking budgeting advice”*
- *“Getting employment ... if you fill your mind with finding a job, this will help you to take positive action”*

These personally meaningful actions taken by men who engaged with the ReachOut service are examples of the way in which they began to take ownership for small behavioural steps towards desirable change. The underlying principle is to use men’s self-identified motivators to facilitate their taking responsibility for practicing viable solutions that were well matched to their unique circumstances. The worker’s role was to elicit, expand on and consolidate the actions generated by the men.

*“You have to realise that it’s not all in you (the worker) to make it work ... guys have got to do it for themselves. I can’t do it for them.”*

*“Men have to make the required changes themselves. Each man needs to feel the love for his family ... see it and want it.”*

ReachOut recognised that establishing and maintaining behavioural change required the men to exert considerable effort and every day practice the actions for change that they have made a commitment to implementing. A range of conditions were necessary to sustain such change efforts including:

- Ensure that the change actions were defined by the men. It was assumed that externally-imposed actions could well be inappropriate and irrelevant to the men's particular circumstances and that men were more likely to put more effort into their change actions if they had defined them themselves and found them personally meaningful
- In the event that men overlooked some potentially useful change actions, then the ReachOut worker's role was to present these opportunities for men to explore and consider during discussions with the worker, as well as providing opportunities for them to practice during a worker/client engagement meeting
- The ReachOut worker needed to facilitate opportunities for consolidating the roadmap for a violence-free future for the men by helping men to observe and make explicit the benefits their efforts had for themselves and the people they cared about. By providing such opportunities, men began to see the interconnectedness between what they were doing differently and the good results achieved for them and those with whom they related. By making such connections, it was assumed that this would provide further motivation for men to stay on course towards a violence-free life.
- Ownership of the actions and successes, mean that men are more likely to accomplish and sustain meaningful change because they have made the choices. The worker's role is to help the men to make the connection between their behavioural change efforts and the choices they made.

These conditions with which to sustain men's change efforts are reflected in the following informant comments:

*"Unless he makes the decision and makes the effort to be conscious 24/7 about what he needs to do to change, then change will not happen. He has to really want to change and the trick is to get them to the stage where they really want to be different."*

*"You need to engage them in applying (the change actions) in practice and link that to the 'heart hook' – the thing that means a lot to them ... takes time to change behaviour ... to change habits ... need to put into practice for a long time to establish the habit ... first step is to slow down and remember what to do instead of the first reflex reaction ... the fists."*

*“You can give advice and ideas and support their (change strategies) and when they take those on board and put them in place in their lives they begin to see a positive reaction from others. They see the value in it and want to continue to make positive progress.”*

Whilst many men who engaged with the ReachOut service took action to shift towards a life style free from violence, others did not. Of this latter group of men, some decided not to change because “the relationships they valued were gone and the buy-in was not there.” For others, the effort required to change outweighed the potential benefits as perceived by them; and, for still others no “heart hook” could be identified with which to influence their decisions to take action to change and the men continued to rationalise, minimise and legitimise their violent behaviour . The following comments illustrate these three respective ‘resistance-to-change’ positions:

**First ‘resistance-to-change’ position:** *“It’s hard for the person to make the decision to change if the relationships they value are gone ... buy-in not there ... get them to think about why they have gone. They need a comparison ... a relationship ... access to their children ... otherwise they will fail to put in the effort. You have to make them see that there is life after this ... provide an opportunity to see into the future ... or same thing will happen again ... point out the history ... do they want the same thing to happen again. They hear what you say but their heart is not in it.”*

**Second ‘resistance-to-change’ position:** *“They have to do the hard yards and take action ... they need to consider what supports they need ... counselling ... SVS, anger management to learn the techniques for stress release ... not really motivated to do anything ... wanted his family back, but unable to put two and two together. He loved alcohol more than his relationships*

*I was worried at our first meeting ... another relationship with the same problems. When one relationship goes on the rocks then they get involved with someone else. The hook was the alcohol. This is an example of the taha wairua dimension of wellbeing. If a man can leave a relationship and his kids in the first place, he can leave anyone. If a man severs his wairua, then he replaces that with a physical dimension (alcohol). He believes no one can tell him what to do ... he tells them what to do. It’s not hard for him to sever relationships. He cannot fix his wairua using this dominating mentality. He requires some humility to do this. He had never experienced mutuality in relationships ... His wonderful dream of having a great relationship was not achieved as he could not see how that works. Instead, he thought bullying could get all things.”*

**Third ‘resistance-to-change’ position:** *“When I engaged with him he just wanted to talk. He was extremely angry ... said he had nothing to lose. I*

*listened to him as best as I could ... tried to follow his story ... find a direction... look for a sensitive area and a place to speak ... bring up something for him to think about... just couldn't find a hook (that might provide a reason to change) ... nothing I said sunk in ... the blockages he put up ... his attitudinal stance and the way he talked about women ... he was expressionless ... blaming people ... believed they had done the dirty on him ... held grudges and was working to get back at them ... couldn't move these ... not able to reach a stage where there was any common sense.*

*He was extremely angry ... said he had nothing to lose ... his level of risk was serious. I told him I would need to speak to others about what he had said ... inform the Police ... concerned he would take action and harm someone. He said he had to go to (counselling) ... valuable as a place to let off steam ... release the pressure ... able to get that out. Sometimes there is a build up of pressure and that can be a trigger to violence. If he blew up and the trigger happened then someone could die. This was a high risk case ... Police involved ... CYF involved ... Refuge assisted the woman."*

In these 'resistance-to-change' scenarios, the men respectively demonstrated that:

- They had not been able to connect with an internal driver and emotionally meaningful link that provided the focus and impetus for their change efforts;
- They were unable to perceive mutuality in intimate relationships. Despite having a history of failed relationships in which intimate partners became alienated and disenchanting and eventually made decisions to leave, for these men the violence and other issues, such as substance abuse, remained functional.
- They did not perceive that there was a problem to be addressed; were immune to the negative consequences for them or others of continuing their family violence; and, instead perceived only benefits from continuing to behave violently as a means of asserting and maintaining their male authority

In circumstances such as these men's efforts to change were negligible or minimal at best and unlikely to be sustained. The focus of ReachOut's work in these sorts of situations is risk management – identification of the level of dangerousness and lethality of the men and the safety of those affected by his violent behaviour and "with the support of the network of agencies within the family violence system put in place a safety plan to manage the high risk cases."

*“All parties in the family violence system were made aware of the situation and all the agencies were involved (The core members of the North Canterbury Family Violence Round Table including the Police, Child Youth and Family, Refuge). The support ReachOut provides in these situations involves informing other agencies of our concern for the risk of harm to self or others. This network of agencies and having a good relationship with them is important. I feel so supported when working with these high risk men ... it's a safety net and good to have the different perspectives in the discussion about how best to respond to ensure the safety of the community.”*

*“The emphasis is always on him (to make a decision). If the trust has been built (in the worker/client relationship) you can say look mate you are just a player ... not interested in doing good. What are you going to get out of that (decision)? What will your partner get out of that (decision)? Make a choice and after you have made that decision ... then point out the consequences.”*

Whether or not men chose to engage in the journey of change to a violence-free life, this pro-active outreach service has the potential to enhance the safety of those affected by family violence as well as enhance the overall safety of the community.

*“The process (proactive outreach engagement) is not all roses and chocolates ... it's like going through a string of thorns ... but in the end, it's great to get even a small chocolate.”*

For those who chose to engage with the ReachOut service “in a worthwhile and positive manner ... it means they want to be here ... want to look at things and when the pressure comes on, they have given themselves the opportunity to work out in their minds how they can respond to that differently and they have the tools to take positive steps.”

Alternatively, in situations where the ReachOut service has “tried to engage with men and they refuse the invitation” such responses also provided additional information with which to enhance the accuracy and appropriateness of the family violence system's actions to mitigate “their potential dangerousness to others, (for example), enforcement action that might contribute to the safety of women, children and the community.”

### **9.3.6 Final Observations from the Case Study: Influencers Underpinning Men's Change Decisions and Shifts Along the Continuum of Stages of Change**

Across the individual cases that contributed to this case study, ReachOut had between one and five face-to-face meetings with each man with the typical number of interactions, at the time the data was collected, being between two and three. Typically these face-to-face meetings occurred on a weekly basis, lasted between one and four hours, and, were supplemented, at times, with contact via the telephone or via text communications.

When the first of these face-to-face meetings occurred, the men were at various positions along the journey of change towards a violence-free life.

- Fifty six percent were considered to be in the pre-contemplation stage of change – perceived there was no problem to be addressed; lacked awareness of the consequences of their violent behaviour for self or others; and/or were discouraged by previous attempts to change
- Thirty four percent were considered to be in the contemplation stage of change – acknowledged they had abused their partner; considered they had a problem and thought they should address it; and, were considering putting some effort into overcoming the problem, but as yet had not made a commitment to action
- Ten percent were considered to be in the action stage of change – had been working to abstain from violence over a period of months; and, were continually evaluating the effort required to change, their capability to carry out the changes required and the effectiveness of the changes made.

During the men's interactions with the ReachOut service, the men were observed working through a number of cognitive processes that seemed to influence their subsequent decisions to consider making the attitudinal and behavioural changes required and/or their decisions to take action to change their behaviours. While these decisions were variously influenced by a range of factors in their environment, such as their prior experiences, they were also influenced by various exchanges of information, learnings and insights gleaned through their engagements with the ReachOut Family Support Worker. For example, such engagements for some men enhanced their self-efficacy – their belief that they had the capability to abstain from violence.

*“He came to know that he had the ability to abstain from violence. He made reference to how working with a positive male Maori role model let him realise that he had the potential to change within himself.”*

For other men, the engagements with the ReachOut Family Support Worker enhanced their response efficacy – their belief that actions will be effective in assisting them on the journey of change to a violence-free life style.

*“When we met I demonstrated the way in which these techniques for change would work in the real world and when he tried them (at home) he saw they had value.”*

For still other men, the engagement with ReachOut resulted in their beginning to weigh up the effort required to change their behaviour.

*“He had a life time of experiences of blaming others for his behaviour ... he started to think about the effort required to change ... started to try to change.”*

Other men’s decisions to take action for change were influenced by the risk of negative consequences if they chose not to.

*“He was sentenced to a community-based sanction ... had to attend an anger management programme. The initial aim was to get him on board with that ... present the options ... if you choose not to do this then other things might happen ... not look good to the judge ... if you got a jail sentence, then it would be difficult to be a good parent. This helps them decide what to do to make progress.”*

Of the individuals described in-depth for this case study, some seventy eight percent appeared to make some progress along the continuum of the stages of change model whilst the men were interacting with the ReachOut service. For example, the men who were gauged as pre-contemplative at first contact with the service shifted to the contemplation stage of change after a number of engagements with the ReachOut service.

*“Once you get a ‘heart hook’ like clear love for his children, then it’s easier to motivate and you can relate all change strategies to that. (For example), if you breach the Protection Order how is that being a great parent? You need to do the time to be a great parent. You need to make the most of your referral to anger management and use those things from the course that you find fruitful to make you a good parent.”*

Furthermore, although some of the men remained high risk, their engagement with ReachOut resulted in “reduced risk of harm to self and others ... a plan of action that

met the immediate safety needs of the parties affected by the family violence and this also provided the basis for later change work with him.”

#### **9.4 Characterising the ReachOut Service: Perspectives of Women’s Family Support Workers**

In order to complement the in-depth experiential perspective about the ReachOut service’s implementation process that informed this case study and provided by the men’s Family Support Worker, a characterisation of the service was also sought from the perspective of some of the women’s Family Support Workers. This characterisation has been included in order to better understand the nature of the circumstances leading up to and at the point of contact between the outreach worker and the men; as well as, the impact of the service on the lives of women with lived experience of family violence and the women who work with them.

##### **9.4.1 Demographic and Social History Leading Up to ReachOut’s First Contact with the Men: Perspectives of Women’s Family Support Workers**

The family violence experienced by the women that triggered the first contact with the ReachOut service, ranged across a wide spectrum. This violence included physical assault and abuse, for example, strangulation, eye injuries, punching and broken bones; psychological abuse, for example manipulative behaviour to control and harm, driving dangerously to incite fear and blaming the women for adverse events; emotional abuse, for example verbal abuse and communications aimed at undermining women’s self-esteem; and, harassment and stalking, for example, constant texting and surveillance.

In all cases, violence of various kinds was a recurring feature of the relationships between the men and the women. Many had histories of multiple Family Violence Incident Reports with the balance having records of at least one previous Police callout. For some, the families were “known to agencies within the family violence sector,” for example, the families had had previous interactions with the Community Probation Service; the Family Court; the youth justice and care and protection sections of Child Youth and Family; and, women’s refuges.

*“(These are) houses where there is a history of power and control ... and normalised violence.”*

In addition to these features associated with the families, some family circumstances were further complicated by the fact that the parties were also listed on previous

Police Family Violence Incident Reports as “perpetrators” on some occasions and “victims” and/or “witnesses” on other occasions. Typically this feature was associated with parent/child family violence.

*“A disruptive family ... abused and abusive.”*

*“(He) was named as the perpetrator on the POL, but not clear cut as she is abusive too ... many where (parent) named as the perpetrator.”*

The men in these relationships were either currently or historically subject to a range of family violence interventions, including Protection Orders, Parenting Orders, Police Safety Orders and/or Court-imposed community-based sanctions with special conditions to attend stopping violence programmes or anger management programmes.

Of the family relationships, the majority of the men and women were married with pre-school and primary school aged children, some of whom were separated or in the process of separation; while the others were in co-habiting or parent/child relationships. Alcohol and drug abuse was a feature within two-thirds of the families<sup>57</sup> and mental health issues were present for about a third of the cases.

In addition to the demographic and social history attributes of the families at the point of contact between the outreach worker and the men, geographic isolation was a particular feature of the predominantly rural nature of the North Canterbury region in which the ReachOut service was operationalised.<sup>58</sup> The geographic isolation of many of the families was noted as a particularly challenging issue for those working in rural areas and tasked with enhancing the safety of women and children. This issue was particularly pertinent for those families who resided outside the main

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<sup>57</sup> Reiss and Roth (1993) and Summer and Parker (1995) note that alcohol and drugs have disinhibiting effects which affect judgement and distort perceptions. Dobash and Dobash (1979) and others (Mullender, 1996; Ptacek, 1988) comment that drugs and alcohol provide a social context in which violence is more likely to occur.

<sup>58</sup> The ODARA (Ontario Domestic Violence Assault Assessment), currently used by the New Zealand Police, was developed for frontline Police Officers or victim counsellors to improve the identification of men at risk of wife assault recidivism. ODARA is comprised of a number of items, including ‘barriers to victim support.’ This item requires an assessment of the victim’s circumstances at the time of the family violence incident and includes a number of possible scenarios – has one or more children 18 years or under who live with her and for whom she provides care; she has no telephone; she has no transport; she is geographically isolated; she consumed alcohol or drugs just before or during the index incident or has a history of alcohol or drug abuse (Hilton et al., 2004: ODARA).

provincial towns, where the Police on-duty rosters were confined to certain hours and days of the week.

*“There are issues in rural locations ... If the Police have left the (office) for the day or are not working ... off duty, then in a crisis they may have to come from Rangiora or even from Christchurch. In a crisis this is really frightening ... makes safety planning difficult.”*

While all the women who had been cited as victims in the Police Family Violence Incident Reports had been contacted by the Women’s Family Support Workers, not all accepted this offer of assistance and of those who did they were engaged in various ways – some accepted periodic outreach calls; some agreed to face-to-face meetings on one or more occasions; and, some were participating in a Ministry of Justice group or individual 10-week education programme on domestic violence.<sup>59 60</sup> Some extracts from the interviews illustrate the different levels of engagement between the women and the Family Support Workers:

*“She was noted on the POL, but refused refuge assistance.”*

*“The woman did not engage ... accepted a call from the Refuge, but not honest about what was going on. Any questions were seen as interfering ... became defensive. The approach was what can we do for you? ... If we challenged, then she would disengage.”*

*“We (the Women’s Family Support Worker) keeping ringing the women every now and then to check they are OK. They often don’t want to talk ... later they will ring when things are not OK. The focus is on creating an engagement so that they learn it is a safe place and feel they can make contact when they want to begin the real work.”*

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<sup>59</sup> Various types of services could be accessed by women. These included receiving information on safety planning; support to gain protection orders; support to gain access to financial support; assistance to link to Housing NZ; referrals to support networks; and, various other types of practical assistance. In addition to these services, women could also participate in Ministry of Justice approved group and individual 10-week education programmes on domestic violence (Retrieved from <http://www.avivaservices.org.nz/Services/Children> on 28 June 2013).

<sup>60</sup> A few of these families’ children were also attending Ministry of Justice approved group or individual services for children (under 18 years old). These services included an early intervention and prevention Tamariki programme, which is designed to promote well being and break the intergenerational cycle of domestic violence. The programmes aim to help the children begin to make sense of what is happening to them (Retrieved from <http://www.avivaservices.org.nz/Services/Children> on 28 June 2013).

*“Our relationship with her is on her own terms ... difficult for her because of family and work commitments and her rural, isolated location. (Initial) meeting was focused on education and safety ... raise awareness about what is happening to her within the cycle of power and control ... aim is to provide women with information so that they are better informed about their (family violence) experience ... with that knowledge they are in a better position to make decisions for themselves ... assertive outreach now and then to check on her (regarding) risk. ”*

*“Some are attending the women’s group programmes currently.”*

#### **9.4.2 Men’s Position on the Stages of Change Continuum and ‘Turning Points’: Perspectives of Women’s Family Support Workers**

The Women’s Family Support Workers were asked if they were aware of any factors in the families’ situations that could be considered ‘turning points’ that influenced men’s decisions to engage with the ReachOut service. In many cases the informants had insufficient information with which to answer this question. However, where they did have information they reported that while a “few men are self referrals ... no Police Incident Reports ... just ring for support and to talk about how they are feeling, most men don’t make contact ... they receive a cold call from the service as a result of the POL.”

In relation to the men’s position on the ‘stages of change’ continuum, the women’s Family Support Workers noted that most presented to the ReachOut service as “pre-contemplative.”

*“Pre-contemplation ... not take any responsibility (for the violence).”*

For others who presented as being in the contemplation stage of change, the informants were of the view that this might well reflect “the hearts and roses stage of the cycle of violence ... when they might take action for a short period.”

*“He (could be) in the hearts and flowers stage of the cycle of violence ... provides a little calm time where the relationship can be great ... but had (many) years to make the relationship work.”*

#### **9.4.3 Context and Consequences of ReachOut: Perspectives of Women’s Family Support Workers**

The women’s Family Support Workers observed that for many of the families who are the target population for family violence services for men and women, such as the women’s refuges and the ReachOut service, their experience of violence has been normalised.

*“Perpetrators think it is more normal to be violent. It takes a lot of work to change that ... to get them to think about how they can help their children to experience something different.”*

*“She didn’t realise that a black eye and a broken nose was serious ... thought most people experienced a bit of that ... really shocked when she became aware (through education at the refuge) that this was not a normal situation.”*

Moreover, they maintained that societal structures continued to support “men to stay the way they are.”

*“Society supports men to retain their sense of entitlement. From a gender perspective men are set up to fail ... experienced violence as children ... not prepared for healthy relationships. Most men want to do the right thing ... be a good partner, father ... get good self esteem from doing that. Patriarchy and men’s peer groups do not support men to do that. The socialisation reinforces that family violence, sexual harassment is OK.”*

*“Boys often say they don’t want to be like their Dad even though they are already like that. Men are socialised poorly ... lust, power and control and treat their children the same way their Dad did. Socialisation ... Dad violent ... violent teenagers ... hard work to change that.”*

Within this context, the women’s Family Support Workers acknowledged that for men “giving up the abuse is hugely difficult;” and, that “harm minimisation” is the main purpose of ReachOut and that this is achieved through “planting the seeds for change” and facilitating a process whereby men “can take small steps towards change.”

*“Because of the normalised violence in these families where many of them (have grown up in families) where they have witnessed violence as children ... it takes a long time before things get better. While ReachOut is involved with the men things are a lot safer for women and children. The men’s involvement with the men’s service (ReachOut) is good ... pick up things like suicide risk, poor impulse control and getting away with violence can mean death. The service is working with men to get their support needs met and this is harm minimisation.”*

The women’s Family Support Workers believed that the work undertaken by the ReachOut service positively impacted at a community level, at a family violence system level and at an individual level. At a community level, they noted the “social change” work undertaken by ReachOut within schools to “educate and engage young men about what it is to be a male in society” and to “challenge traditional perceptions about what it is to be a man.”

*“To support the White Ribbon Day messages, (ReachOut) goes to the schools to talk about what it is to be a man to support your family, be respectful to your family, be more loving to your family. Children aged 9 to 10 years ... perfect age to start engaging young men about this ... open to the intervention as this is when they are beginning consider relationships with girls. They take it seriously and talk openly about it. This is addressing the issue (family violence) at a social change level and involves getting positive messages to them about what it is to be a man.”*

Not only did the women’s Family Support Workers note ReachOut’s contribution to a community-level response to family violence, but they also noted the service’s contribution to the family violence sector’s efforts to address family violence issues within the North Canterbury district. Members of the family violence sector meet formally each fortnight to consider the contents of the Police’s Family Violence Incident Reports and develop a joined-up response to further enhance the safety of those named in such Reports as well as mitigate potential risks of further family violence offending.<sup>61</sup> In addition, workers from these government and community agencies regularly communicate with each other during the intervening period between such meetings to share information that enhances the accuracy of their respective understandings about the risks and safety issues associated with the men, women and children with whom they work. Since its inception, the women’s Family Support Workers maintain that ReachOut has added another dimension of information about the circumstances faced by families affected by family violence – a dimension that was hitherto absent for those working within the family violence sector.

*“(ReachOut’s) involvement helps to get the whole picture. It’s important to have both stories (from the perspectives of those working with the men and the women) ... adds knowledge to see the whole picture ... the complete situation helps and we can use this to focus our work with supporting the women and children.”*

This information dimension provided by the ReachOut service was perceived as beneficial for those working to enhance the safety of women; those working to enhance the protection of children; and, those tasked with an enforcement role.

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<sup>61</sup> Members of the North Canterbury Family Violence Round Table meet fortnightly to discuss the Police Family Violence Incident Reports and monitor progress against the proposed actions noted within the safety plans of those assessed as high-risk. The members of this Round Table include the Police, Child Youth and Family, Community Probation Service, Victim Support, women’s refuges and ReachOut.

Moreover, the information transferred by the Police and the women's refuges to the ReachOut service assisted with the way in which this service was able to focus the engagement with men on issues of particular risk to the safety of women and children.

Ways in which the intelligence gained from a ReachOut perspective assists Women's Family Support Workers, Child Youth and Family and the Police are illustrated by the following comments:

*"ReachOut's involvement has a focus on looking out for children ... the child protection agencies get a strong message when they get information about guys that choose not to take up the support (ReachOut) provides even though he offers to ring them at night. The work gives CYF extra information to ensure the safety of the children ... it's positive to get information to protect the children as it's often not safe for them."*

*"(ReachOut) was working in the court and noticed a guy appearing on a Breach of a Protection Order who had refused support from the service (when contacted) ... heard that his partner had gone out to pick him up at 10pm and had the child with her. We (used this information) to work with her to help her understand that she was the protective factor in the child's life and that she had to set boundaries with him."*

*"The contact between ReachOut and the men gets information about (the potential for further offences) and this can be given to the Police."*

Pertinent information can also flow from the other members of the family violence sector to the ReachOut service and such information may be used to focus that service's interaction with the men on critical issues that were contributing to the level of risk and safety for women. Such information provided another perspective to the information men provided to the service – a perspective that enhanced the accuracy of the men's Family Support Worker's understandings about the families' circumstances.

*"Women's work would be in isolation if we did not have the support from the men's service (ReachOut). Having the women's perspective in high risk situations gives insight into what is actually happening in the house .. the controlling, stalking and psychological abuse continued... controlled who she saw and this is a high risk situation. This is the real situation. Our information provides the men's worker with a focus for his work and this work enhances safety."*

*“Different perspectives on the story are important ... men can deny the concerns (about family violence) ... honesty not there ... really manipulative ... when you speak to him really plausible. When you only get the stuff to work with that the man gives ... so hard to know what is really going on. This is a concern for the personal safety of women and children. From the women and children in the groups you pick up information about the continued emotional abuse ... what they have experienced and this ‘other-than-his story’ helps us to make a call about what to do with the men.”*

*“(From the comments in the children’s groups) we pick up information about the looseness of the arrangements around Dad’s access with the children ... at the pub with Dad ... can share that information with CYF and the men’s worker.”*

For women the contact and support offered to men by the ReachOut service provided a range of benefits. The specific activities undertaken by ReachOut that were noted by the women’s Family Support Workers and regarded as beneficial for women and children included:

- Provides current information about the men’s emotional, behavioural and cognitive status following a family violence incident that supports safety planning for families by working with men to effectively manage the crisis situation

*“ReachOut provides a service that is given at the right time and in the right place. If you don’t have that then you don’t know what the men’s reactions might be.”*

*“Some women don’t want the refuge’s support ... psychological abuse continues. In these cases (the men’s service) is hot on the trail to provide support for the men ... demonstrates that he does not support their violence and is looking out for the women and children. We think the involvement of the men’s service is positive.”*

- Provides men with support and accurate information that assists them to respond to adverse situations in ways that enhance the safety for the parties affected by family violence

*“Every situation has a sting ... what ReachOut does is to take the sting out of the bite ... man had a Protection Order served as we were worried about the level of risk. ( ReachOut) provided a calming influence ... explained to the man about the Protection Order ... the consequences and how to deal with it to keep everyone safe ... at the same time the woman was offered support*

*from the refuge. Both aspects enhance women and children's safety. There has been no further violence since (ReachOut) was involved."*

- Mitigates the potential for further family violence offences during the period following family violence incidents by providing men with the means to release feelings of anger, grief and frustration

*"A very violent and high risk man ... contacted (ReachOut) after a number of engagements and spent a lot of time with him ... man realised he was down and dejected ... said he has begun to explore his situation and came to realise a lot of things ... said he hated the way he was ... cried. This was a success ... enabled him to express his grief ... showed some compassion ... violent man who had been unable to express himself before."*

- Releases women from responsibility for male partners

*"ReachOut absolves them (women) from their sense of responsibility for the men ... helps them let go. She was relieved there was someone there for him ... took away some of the burden. She was so damaged by the abuse ... she felt sorry for him even though he (abused) her nightly for months. (ReachOut) stepped in as part of the safety plan. There were Protection and Occupancy Orders in place and the service contacted him and found someone for him to stay with. Women feel so responsible ... think this (the abuse) is what they deserve."*

*"They (women) have an over-developed sense of responsibility ... even when they are separated some are still emotionally connected. They (men) make contact ... say they are suicidal ... presents himself as 'poor old me.' The women listen ... they try to fix his situation ... think he has no one else and no other place to go. Now we have ReachOut, she can let go. He can work with the support worker to do what he needs to do. This means she can let go ... move forward ... separate from that responsibility and start thinking about themselves and their children. She told us that she felt it was great that he wanted to engage with ReachOut."*

- Enhancing respectful relationships during the separation process

*"ReachOut supports men so there is a respectful separation ... the role is to ensure there is dignity when women decide to separate from the men."*

*"Very violent man ... after separation he continued the emotional abuse and harassment. The men's service focused the work with him to get him to see a psychologist ... harassment stopped."*

*"One aim for the men's service is to help the men have respectful relationships with their children during access."*

- Provides the opportunity for men to begin the journey towards a violence-free life

*“Positive outcomes can occur if men have some motivation to change.”*

*“Men do make some changes and any changes they make increases the safety of women. Even if (ReachOut) plants some seeds (to influence change) this might change the dynamics of relationships for the next generation.”*

According to the women’s Family Support Workers the coordinated response to family violence provided respectively by the men’s and women’s services aimed to “get men to change so that future relationships with women and children are respectful” and “strengthen women for future successful relationships ... a hugely difficult task.” Whilst the women’s Family Support Workers noted that the women’s circumstances varied both in terms of the status of their relationship with the men and their own journey away from family violence,<sup>62</sup> the men with whom ReachOut engaged were largely at the pre-contemplation or contemplation stages of the change journey. In such circumstances, therefore the priority focus of the service was “harm minimisation” and providing an additional means with which to ensure both the “physical and emotional” safety of women and children. The women’s Family Support Workers were of the view that as a result of the various activities undertaken by the ReachOut service, the safety of the parties involved was enhanced – a level of safety that was tenuous at times depending on a range of factors that included the challenges associated with changing the entrenched nature of the violent attitudes and behaviour of many of the men with whom ReachOut contacted as well as the women’s circumstances in relation to their own journeys towards a life free of violence.

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<sup>62</sup> The status of the women’s relationships with the men included those who decided to remain in the relationship; those who were in the process of deciding to separate; and, those who had separated. In terms of their journeys to a life free of family violence, the women had variously “reached their goal of being free from violence;” “wanted to separate, but were very affected emotionally, worn down by the abuse and had lost confidence to make decisions;” “become emotionally disconnected and were open and energised to focus on personal growth;” and, “lacked insight, were collusive and did not say anything.”

## 10 Implementing ReachOut

### 10.1 Elements of the Service that Make the Greatest Contribution to the Outcomes Sought: Views from Professionals and Those with Lived Experience of Family Violence

In order to surface the components of the ReachOut service that were perceived as mostly likely to contribute to the outcomes sought, stakeholders were asked to identify the features of the service that not only defined its point of difference, but also had the potential to influence the immediate-term results for men and members of their families as well as the longer-term results for communities. The 'what works' components of the ReachOut service identified by stakeholders included:

- **Proactive and Outreach:** Many stakeholders commented on the reticence amongst men to seek help to overcome their family violence behaviour – a reticence that they assumed could be related to societal expectations of men's responses when confronted with challenges in their personal lives and/or prior less-than-helpful experiences with various helping agencies. Some of the professionals' comments reflect these views:

*"The reality is that it is a societal issue ... hard to get men to step up ... not good at getting pro-social needs met."*

*"This has opened up an opportunity. You'd be surprised how many men say, they have asked for help before and not got it. Nobody has listened to them or they can't fund it. They (men convicted and sentenced for family violence offences) only get help when they come on a sentence. They say, 'I don't know what to do ... (other people) know how to push my buttons and I don't know what to do'."*

*“Most have not had good experiences with social service agencies in the past ... not positive with CYF, counsellors, Police, anyone who has tried to support them to change their behaviours in the past ... not good experiences.”*

Men, as ReachOut clients, commented on their views about help seeking prior to their engagement with this service

*“Men do not know what to do or where to go for help. I have been independent all my life and was stuck.”*

*“I am a very private person ... (ReachOut) was my first step to get help. It was a big deal for me.”*

*“Probably a man thing, think I thought I could deal with it myself.”*

*“Men don’t engage because of ignorance, scared, stubborn ... Some people don’t care. They only focus on themselves ... not care about their families or the impact (of family violence) on others.”*

*“Some people don’t believe they have a problem. It’s the partner that needs help. Both need help.”*

Men, as ReachOut clients, commented on their prior experiences with receiving services from social service agencies and compared these experiences with that received from ReachOut

*“ReachOut was a good service. I haven’t had this kind of help before. I’ve had food and other grants before ... trying to budget with the rent going up, power up and other commitments ... been tough. (ReachOut) offered someone there to listen ... better thing.”*

*“Had some counselling that work paid for. (ReachOut) is not for everyone. Some men are really negative. You have to approach the service in a positive way.”*

*“Other services mucked me around ... (confusion) around whether to self-refer or need to be referred (by another agency). Men’s violence group not help me either ... had to be sentenced. Had an assessment at (name of agency) and it took six months before anything happened. Compared to (ReachOut) awesome ... set up appointment and saw me at home ... really impressed with the speed that I was seen.”*

Contrary to these experiences, stakeholders explained that the implementation of the ReachOut service offered men who perpetrate family violence an option to access a pro-social support service, rather than one that was punitive and

mandated at a point of crisis when they may well be more open to begin the journey of change towards a violence-free life. Moreover, they argued that the service enhanced the accessibility of such support for men by virtue of its proactive and outreach nature.

*“The mechanism to engage is about picking up the phone; dialling the number; saying hello; this is what I do; and, do you want to chat? From all accounts the guys are surprised to hear someone on the other end of the phone.”*

*“Call them (men) ... say are you OK? How can we help you? This is a totally different way to support men in Canterbury/North Canterbury ever. It’s a first ... set up a place for men to go to and done that really well.”*

*“Men have someone who calls them ... contact is the key thing. If they are chucked out of their house, the men have an option ... a choice other than being alone.”*

*“Getting them (men) through the door is the key ... point of crisis where she doesn’t want him back ... open and desperate to get help to get the relationship back on track ... this is the factor that gets him through the door ... not everyone is empowered to do that for themselves. The outreach enables the service to do the initial work ... get information so they can work on themselves ... if they can do that then know done a good job.”*

- **Timely and Immediate Response at the Point of Crisis:** Stakeholders argued that one of the most unique features of the ReachOut service was its timely connection with men following the crisis of a family violence incident. At this point, they believed that such contact provided men with the opportunity to make a decision or engage in a turning point in their lives, because it is during such crisis events that people are most amenable to change as a result of outside influences. Moreover, they believed that in circumstances where the men made the decision to establish a connection with the ReachOut service, this had the potential to prevent further family violence offending and preclude the use of more expensive and extensive resourcing required to respond to further serious family violence incidences in the future.

*“What is unique and special is that (ReachOut) calls right now and there is space to see the guys relatively quickly ... How long is an appointment? Kaupapa Maori (response) till the work is done.”*

*“Talk to the Police who are concerned about someone and can respond quickly.”*

*“It’s focused on a particular area ... engagement after the flash point.”*

*“Where the service is responsive is they get the information from the Police report directly after the incident and quickly deal with that and engage the men. Some men who are contacted via the POLs seem to think the process is being forced upon them until we talk ... bit of a challenge as not want to be the ambulance at the bottom of the cliff ... this is an early start to address issues before they have gone to the next stage ... accident/emergency stage. This is different.”*

Men, as clients of ReachOut, commented on the responsiveness of the service

*“(ReachOut) contacted me and had meeting arranged soon after. He texted me before the meeting to make sure I remembered.”*

*“Really impressed with how quickly we could get a time to meet.”*

*“He was there at the right time and that really helped me to overcome my issues and problems.”*

*“The best thing was the availability of the service. I had my first meeting within 24 hours of being arrested. When people want help they need it now, not weeks later. This was immediate ... when I needed it.”*

- **Voluntary Participation and Self-Determined Choice to Take Ownership and Responsibility for Change:** Stakeholders noted that many men who commit family violence offences are resistant to change and that such resistance is maintained even if they are mandated to attend stopping violence services. Moreover, they commented that many of the men who may be contacted by the ReachOut service would hold expectations that contact following a family violence incident would include aspects that were punitive and coercive – expectations derived from their previous contact with various organisations in the criminal justice system. In contrast to these expectations, stakeholders described the ReachOut service as taking an approach that was client driven and that invited the men to take responsibility for and ownership of their choices about whether or not to engage in a journey of positive change. Moreover, they believed that by shifting the decision making to the men, it opened up opportunities for facilitating a process that surfaced motivators for change that were meaningful to them as well as making explicit the consequences for them of their decisions.

*“Once they realise (the call from ReachOut) is not from the Court or the Police requiring them to do something because of what they have done ... once they get past that ... that the service is there to support them to address their DV if they want to change their lives ... once they get that then it’s possible to move to the next stage (of engagement). Even with those who are not initially interested ... hear hesitation ... good as know where they are at. With (the men who are not initially interested) start to explore some of their immediate motivations for change ... could be a court hearing coming up. This gets their buy-in to start changing their behaviour.”*

*“Had client who did not want to talk to me (initially) ... ‘What do Police want now?’ was his initial reaction. As I engaged with him on the phone, something clicked and when we met face-to-face, he said this is nothing like what I expected ... met with him three times now”*

*“Give it a go ... when we meet, if you don’t like it, then you are welcome to not sign up. You’re in control of the process now, but if things happen negatively (further family violence, criminal justice intervention etc) then you won’t be in control of the process. Give them the choice to make the decision.”*

*“For guys to engage, talk to the guy on the other end of the phone ... if arrogant then they won’t engage. (ReachOut) can make itself engaging, but ultimately it comes down to whether the guy at the end of the phone wants to engage or not. Where are they in their lives? Do they see they have done something wrong? Do they feel they need to talk to someone about it? There are many different factors and there are a percentage of personalities that think they have done nothing wrong, she deserved a slap ... that is their belief.”*

#### Men, as clients of ReachOut describe the voluntary nature of the service

*“Rang me and talked to me ... offered the service in such a way that there was no pressure ... no pressure to take up the service ... said here if I needed help. The way he went about it was so different. I really needed the help and I took up the offer.”*

*“It was a better thing ... completely voluntary and someone to listen.”*

*“Can’t fault (ReachOut) ... his honesty, nice and not mean about things.”*

*“He’s engaging when we work out what to do and honest ... motivated me ... his presence was motivating. I think it was the way he related in such a relaxed way. It didn’t feel like punishment .”*

- **Establishing Whanaungatanga Between the Men’s Family Support Worker and the Client:** Stakeholders noted that a key influencer of change within the

ReachOut service was the worker's approach to the men who were contacted. This approach was described as non-shaming, non-judgemental and imbued with unconditional positive regard. This approach to working with the men was essential to reducing their defences and offered the essential conditions necessary for them to begin the process of taking responsibility for their personal growth and change. In addition to providing these essential conditions for change, the worker also worked to establish a connection with each man – a connection, established through a shared experience or a mutual understanding that built trust and hope which in turn were integral to influencing change.

*“Engagement is about knowing how to talk to the men ... using the right language ... not a book passage, talking text book to them. Have to get to know them to begin with ... get them to trust you ... the worker orchestrates that.”*

*“When first engage the (man) meet them as a person, not a perpetrator ... treat them with respect as a person, as under the anger is the shame. Need to be patient, not over the top, not tell them, not judgemental, welcoming, draw them out without cross examining them.”*

*“Approached in various ways with each individual, but what has helped is the whanaungatanga ... finding a connection with each man. Could be peer support ... having someone whose had the experience and come through it and this offers hope for change. They want to change. If show it is possible, that they can have this kind of life, then get the buy-in, suss out what each man wants (goal) and show them how they can have that.”*

*“Once there is whanungatanga they have the freedom to express.”*

Men, as clients of ReachOut, explain why establishing whanaungatanga was an important motivator for them to engage with the change process

*“Said he was not there to judge ... there to help ... no judgement at all. We connected ... said been there done that so knows exactly how I feel about issues ... most people don’t know. I listen to him because it makes sense ... he’s been through it and come out a better person. I’m in the middle of it and I listen to his advice.”*

*“I liked the way he came across ... the way he introduced himself. Maybe it was because we were not in an office could have been part of it. It was so relaxed. His approach was really straight up. It was hard at first, but it really worked. He gave me honest feedback ... straight to the point ... what I had done wrong. When I do stuff, I did not realise that I over talk and interrupt ... some of the ways I speak about things, I use the wrong words and they do not reflect what I really mean to say.”*

*“He didn’t make me feel I was all wrong, his demeanour and the way he listened when I was so low. I just needed to talk to someone then.”*

*“Perfect individual to do the job. Willing to come round ... outside the norm. Had a good talk about the service ... spent several hours here and said he would not leave until I was right. Having someone to talk to who had a similar upbringing to me ... talked about it and his experience. He’s been through that and knew what I was going through. The one-to-one help with no judgement, no pressure, genuine and understanding. He concentrated on me, offered personal care. We talked through the issues. What he did changed my life ... best support.”*

*“He’s the right person because he has experienced that type of life before. He’s a family man and got his head skewed on right.”*

*“Talked to him and found we shared similar experiences. That’s why I wanted to go back for more.”*

*“Emphasised his lived experiences and the power of that made me want to change.”*

- **Active Listening and the ‘Miracle Question:’** Providing the space for the men to talk about their circumstances and experiences was regarded as an essential pre-condition to creating the right environment in which they could hear and provide a considered answer to the ‘miracle question’ – a question that provided the men

with the opportunity to think about the possibilities of change and begin the process of creating a different vision for their respective futures.

*“After the introductions ... you have to just listen while they let off steam ... need to vent.”*

*“Men need time to vent their frustration ... given a space to do that so that eventually they are ready to be challenged about it. Not allowed to do that in violence programmes ... told to be quiet ... not allowed to look at the behaviour in the context of the family and how to change in that context. This is different. (Men) given space to get rid of the negative to the point where they can relax and we can work with them. If stop them in mid drift, then it builds up more energy and they are unable to listen. There was reluctance in the past to engage with men in this way because of the fear of collusion. (The aim) is to get them to offload enough to get them to a space where ask the critical question: Would you like to be different? To be different, what do you need to do differently? They then take responsibility for their reactions.”*

*“Could be a three hour conversation and it’s only the last twenty-five minutes that the men really started to talk ... a small success as the man got through the anger and then talked.”*

Men, as ReachOut clients, describe the process that underpinned their decision to change

*"Initially I had to change my approach. I realised that I am not perfect, need to change and need help. I decided I didn't want to be the way I was before ... continue living in that situation. I decided to be different."*

*"Gave me a different perspective on how to look at things. The focus of our meeting was to invite me to think about how I could work things out."*

*"I used to believe that I didn't have a problem. I know I have to be responsible for my own reactions no matter what happens. I have to respond respectfully."*

*"This is not for everyone. Some men are really negative. When it happened, I thought I have not done anything wrong. (ReachOut) has opened up my eyes and now I look at things differently. I had to approach the service in a positive way ... want to change ... listen to the advice, otherwise it wouldn't work."*

*"Initially we discussed ways to work out what the problems were in me ... identified what other people saw. He gave me different ideas that I could try. Told me about his problems in the past ... how he had hit the wall in his life ... decided he had had enough ... decided he was willing to change. A light went off for me and I started to change."*

*"It was perfect timing for me ... desperate to talk to someone and I didn't know it existed until the Police gave me the card about the service."*

- **Surfacing the 'Heart Hook' for Maintaining Change:** Stakeholders believed that ReachOut provided the opportunity for each man to construct their own personally meaningful goals for the future. Enabling the men to create a picture of their own futures was regarded as a critical aspect of the change process. It was argued that since men are the main instigators of their change process, they are more likely to work harder if the goal is personally meaningful for them.

*"(ReachOut) is the first port of call in many cases to get the (men) to buy-in, have the desire, know the 'heart hook' that will engage them to continue improving themselves for the rest of their lives. If (the men) get that and they are willing to address that every day, it will help them either continue with other agencies after (ReachOut) or even if they decide to go it alone ... strong (meaningful goal) to keep them motivated."*

*"Taha wairua is the spiritual path ... gives the men an edge, an open door and guide (for change). This is the number one element of (ReachOut) ... what*

*really helps (men) to change ... the path to do good ... to keep them motivated, safe."*

*"Essence of the service is conversations about the present and the future ... identify solutions and goals – become a better Dad; identify what gets in the way of the goals and take small steps towards the future state; focus on responsibility by getting the men to identify self-determined goals and take ownership of their choices and the consequences of those choices; and, create whanau with other providers of service."*

*"If men don't believe in something, then no amount of enforcement action will get them to change ... just ride the waka as a passenger and do what he has to do but not really engage (with the change process)."*

Men, as ReachOut clients, described their primary motivation for continuing to engage with the service

*"To be a better Dad and husband ... I want my family. I want to live with my family. I wanted to find out how I could be with them. I wanted other things in my life and didn't want things to continue."*

*"To be a more loving and happy family at home."*

*"Needed to deal with my anger and fear that CYF would not let us get back together ... we're trying to get back together."*

*"To increase the safety of our family."*

- **Individualised and Tailored:** Stakeholders maintained that the one-on-one service offered by ReachOut meant that the worker's approach could be adapted to each man's stage of change; enabled focus on addressing a range of presenting issues, such as substance abuse or mental health issues, that may have influenced the desired outcome; and, enabled focus on the particular change targets that were pertinent to each man's circumstances.

*"Not a set formula ... it's real, not a clipboard person coming along ... just another case. The individuality and authenticity is real ... people feel that they matter and it's not just a person's job."*

*"In group interventions, the men get the language, canny, streetwise ... they get where you are going really quickly and adopt the language ... talk the talk. With individual work walk the line between counselling and programme work ... go in and out of it. With 1:1 work you can pursue an area that is important for the man more than you can in group work, for example his triggers can be*

*explored and how that played out ... his reactive stuff. In group work it is structured session by session and that is what is worked with for every person. With 1:1 depending on whose sitting in front of you, you can go deeper into certain issues because you think that is where the shift will come ... able to tailor the intervention to where they are on the wheel of change.”*

*“ReachOut) is there for as long as the men need the service. During the times when things are going well not need to see them, but it is there if they need the service in the future. Not too dependent on you as they need to do it themselves. But the support is there ... if someone has been abusive all their lives, not going to change that in six sessions ... most want to change but don’t know how.”*

Men, as ReachOut clients, describe their preferences for the one-on-one approach adopted by the service

*“The thing that sold me was not doing the group thing ... done that and know I was not honest because there are a bunch of people listening. You just want them to move on to the next person. With (ReachOut) it’s like counselling. You know in the first ten minutes whether you can connect to them ... know by talking to them. Tell them the truth.”*

*“(ReachOut) was spot on. All men are different and (the men’s Family Support Worker) would adjust his style and approach to meet different men’s needs or the problems they have to work on.”*

*“I find myself being more open because of the individualised service. He’s only dealing with you.”*

*“The ReachOut service was two hundred times better than the anger management group. Three quarters of the stuff in the group programme was not relevant to my situation.”*

- **Family/Whanau Systems Centred:** Stakeholders observed that ReachOut has adopted a family systems approach to addressing the issue of domestic violence. This approach, they argued, recognised that change occurs within interactional experiences and relationships both within the immediate family/whanau circle as well as in the context of the ‘extended whanau’ of relationships with other providers of service and with members of the community in each man’s natural environment. The intention was to couch change strategies within the context of such relationships in order to promote healthy and productive future interactions. Moreover, some stakeholders viewed the ReachOut service as having both a

preventative and community development focus – preventative because it aimed to prevent further incidences of family violence and enhance the safety of men and their families; and, community development, because it sought to engage members of the wider community with whom men interacted to provide pro-social role models and guidance for men within their natural environment.

*“Recognised that many families stay together ... when you recognise that and work with clients to promote change in that context, then the clients feel they can be more honest about the situation at home. If you don’t have that, then people are more likely to tell lies because they are worried about the implications for themselves in relation to their families. Through getting honest feedback, the service can target interventions more appropriately.”*

*“The reality is that (family violence) is a societal issue ... (people) need to see it as a whole family issue ... whole thing needs to change and focus on relationships.”*

*“The (ReachOut) men who were working with the men, also had the mandate to look at the preventative stuff across the spectrum. They considered the question of how to get the message out there that violence is not OK for men. Targeted sports clubs, men that violent men might see as mentors ... in a sports club do these guys respond to the coach and what messages might the coach give. This is about how to connect men with the ‘extended whanau’ to create safety.”*

*“The paradigm is to engage people in life changing things ... to develop a relationship with them which is the essence that energises the change ... hold men responsible for developing their future ... sell to people how they can do it differently ... what can be done with families to achieve their goals.”*

Men, as ReachOut clients, talk about their experiences of a family-centred approach

*“(The men’s Family Support Worker) is so passionate about helping other families be happy, loving and have good lives. The life he was living until he became a counsellor and his own family experiences is why he is so good with our family. We get the fruits of his good advice so that our family can be good and loving. I realised I wasn’t being a ‘real man’ ... thought being a tough guy was a ‘real man.’ Now I’ve taken action ... made that first step and reached out because I’ve got something important (family) to seek help for change. Changing myself and all the ups and downs that goes with that ... (family) helps me to keep focused and not let my guard down.”*

*“Been great for me ... getting all that advice. (Partner) is part of the women’s group at the refuge and the kids are also doing a programme. Follow up together and discuss plans and goals and review progress ... really good.”*

*“You need to listen to what your loved ones are telling you ... be patient ... understand what people are trying to say to you ... listen to how what you say and do makes people feel. I didn't mean to be like that with my family ... best to talk about it and not ignore it.”*

*“Wish there was a counsellor for women like (the men's Family Support Worker) ... been a lot of help for me and like her (partner) to learn the same nuts and bolts stuff. Then what he learns from me and what her (worker) learns from her ... put it all together and get a plan. The when we come together everything will slot into place.”*

- **Achieving Early Successes:** Stakeholders observed that ReachOut's approach to working with men involved facilitating men's identification of their self-defined goals for themselves in relation to others that they cared about; and, creating opportunities for the men to achieve small and concrete steps towards those goals. They commented that ReachOut helped men to identify, practice and achieve the first small behavioural steps towards desirable change. Moreover, it was the achievement of these first small steps that had the potential to further motivate men to continue their change journey.

*“Try to work with the best of the person ... getting their buy-in to interact and engage with (ReachOut) so that the service can support them and the other people in their lives in the future. How can we help you to make a better life and find a better way? Helps them to open up to the change process if their needs are met ... address A and D, medical issues, anger management, personal relationships and communication. It's important that they achieve their goals. Say to them, if you want to create a safe family environment, look at your dialogue, body language, way you speak, way your mind is affected when under pressure ... need to maintain an awareness of all these things.”*

*“People are motivated by getting their needs met. I can help you to get your needs met more easily with less risk to yourself and others.”*

*“The tools are a method to pinpoint things earlier ... practical use in their lives ... use them and then see how they make a difference from what happened previously in their lives. They help to keep his mind on track ... mind not darting all over the place ... now have a specific method on which to focus. Non-stigmatising approach ... show men the process people go through when they are angry and violent ... focuses the conversation with the men. What*

*makes you feel like that? What are the early warning signs? It's a gentle approach that is not shaming.”<sup>63</sup>*

### Men, as ReachOut clients, described their small steps of change

*“I am now standing back a bit ... thinking about what I want to say ... old ways of relating caused all the difficulties and now I have some different ways of interacting with my wife and kids. Showed me what to do and learnt how to control myself ... changed my habits in the house and put in place things about how to be a better Dad. I keep going over things to help me relate better to my family.”*

*“It's always worth a go ... gave me ideas about what I could do to change and invited me to see if they worked for me. These suggestions made sense to me and now I look at how I relate differently ... changed the way I relate. Also told me how to use breathing to relax.”*

*“Every day is a new day and new issues arise, but now I deal with them better. Amazing the difference that has made. I'm handling things differently.”*

*“I've got a goal and safety plan and a time out contract. The time out contract means that I am not away for longer than half an hour and I have to go to a certain place. The safety plan is really about how to reach the goal. There is a plan for me and a plan for my partner ... things to do to keep safe. If things get out of hand then ring our parents, go for a drive, call the Police, go for a run. Keeps everyone safe. I knew about timeout but good to have refresher. Now use breathing techniques. He's passionate about what he teaches, shows you and gets you to practice how to do it ... found this really calming. Learnt a lot ... got to maintain all the steps, otherwise fall into old ways. Said he was there for me, so I keep trying.”*

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<sup>63</sup> ReachOut uses a range of tool for assisting the men to practice behavioural change within their homes and communities. These tools include: My Personal Safety Plan; My Triggers and Signs; My Time Out Contract; and, Goal Setting – the SMART way.

## 11 ReachOut's Achievements Against Objectives: Outputs, Benefits and Outcomes

Within the context of the enduring problem of family violence within New Zealand and the sustained increase and severity of reported family violence within the North Canterbury district following the Canterbury earthquake events throughout 2010 and 2011, the ReachOut service emerged as an integral element of a whole-of-family approach to this significant social issue. Historically, while women and children received proactive support, advice and advocacy services following family violence incidents, no such services were available for the men who committed family violence offences. With the advent of ReachOut, a hitherto absent dimension to the whole-of-family approach to family violence was introduced within Aviva's North Canterbury team. Essentially, this service's emergence provided Aviva with the means with which to provide a proactive, strengths-based, outreach service for men that complemented and enhanced the existing services for women and children; and, as a whole, enabled the organisation to offer an integrated service model that supported all members of families affected by family violence. In the immediate term, this integrated service model sought to enhance the overall safety of each family member. However, in the longer term, as risks to the safety of all have been mitigated, this whole-of-family model of service seeks to facilitate family-led planning and strategy development that not only addresses the violence that has negatively impacted on family relationships, but more importantly builds a future for families (regardless of whether the adults choose to remain in an intimate partner relationship or not) that is characterised by healthy relationships and enhanced overall wellbeing for all.

In the immediate term, ReachOut aims to:

- Provide an earlier intervention service for men who have committed family violence offences immediately following family violence incidents and/or for men who are considered likely to commit family violence offences
- Contact all men named on the Police Family Violence Incident Reports, except victims, and proactively offer them support

- Engage men in a process of self examination and/or change and safety planning by offering them support, advice and resources
- Secure men's access to and participation in a range of support services in accordance with their safety plans and in order to meet their holistic personal needs

In the intermediate term, ReachOut aims to:

- Improve men's ability to make progress on their own journeys of change by making and implementing safe choices in the interests of child, adult and family safety
- Enhance men's understanding about the ways in which their violent behaviour affects family relationships and enhance their ability to manage stress, anxiety and implement pro-social behaviours
- Reduce the incidence and impact of repeat family violence in North Canterbury
- Reduce the use of Police resources required to respond to repeat family violence incidences
- Increase the safety and security of women and children

In the longer term ReachOut aims to contribute to:

- Increase whole-of-family wellbeing
- Reduce the social impact of family violence for the community
- Increase wider understanding of family violence and its impact on individuals, families and communities
- Increase community involvement in overcoming family violence via recruitment of community members through peer support or by participating in community education

In order to achieve and/or contribute to these results, and in conjunction with the Police and other local agencies, ReachOut offered services to all men, except those identified as victims, named on the Police Family Violence Reports (POL 1310) and Police Safety Orders (PSO); men referred to the service by other agencies; and,

men who seek service directly and voluntarily by contacting the 0800 ReachOut telephone helpline.

The process undertaken by the North Canterbury Police prior to ReachOut's receipt of the Police Incident Report includes the following steps:

- Receive information concerning a new or historic (for example, receipt of calls about family violence incidences that occurred at some previous point in time) family violence incident
- Police attend the address where the family violence incident occurred and following investigation one of the following actions are taken;
  - Man is arrested, charged with domestic assault and bailed on condition that they do not return to the address where the family violence incident occurred
  - No arrest is made, but Police issue a Police Safety Order which precludes the man from returning to the address where the family violence incident occurred for up to five days
  - No arrest and the parties associated with the family violence incident remain at the address
- At each family violence incident, where a man is present and not a victim, the Police advise them that they will be contacted by the ReachOut service and they give them one of the service's pocket cards that includes service and contact details
- Front-line police prepare a Family Violence Incident Report, which is forwarded to the North Canterbury Police's Family Violence Coordinator who reviews the contents of the Reports; validates the Ontario Domestic Assault Risk Assessment (ODARA) scores; and, notes any additional risk factors (for example, risk factors associated with children; previous family violence history, etc)
- Family Violence Incident Reports (POL 1310) are disseminated to various family violence sector agencies comprising the members of the Family Violence Round Table. For example, Child Youth and Family and the

Community Probation Service receive a copy of all POL 1310 Reports; Victim Support receives a copy of those POL 1310 where the man is named as the victim; the duty refuge receives every POL 1310 Report;<sup>64</sup> and ReachOut receives every POL 1310 report, unless the man named on the report is a victim.<sup>65</sup>

Within the context of the North Canterbury Police's process for creating, auditing and disseminating the POL1310 Reports and decisions by referral agents and decisions by men to voluntarily self initiate contact with ReachOut, this service then begins implementing its model of service process. Table 1 outlines the key steps in the ReachOut model of service process.

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<sup>64</sup> In North Canterbury Aviva and Battered Women's Trust have agreed to share receipt of the POL 1310 reports. For example, these two organisations have arranged a two-week on and two-week off roster for sharing receipt of the POL 1310 reports.

<sup>65</sup> Note in addition to these agencies variously receiving the POL 1310 reports, they also attend the fortnightly meeting of the North Canterbury Family Violence Round Table. At this meeting every POL 1310 is reviewed by the members. Each agency's representative reports to the other members the follow up actions that they have each respectively taken as well as providing updated information on the situation from their respective perspectives. In addition to the Police, Child Youth and Family, the Community Probation Service, Aviva Women's Services, Battered Women's Trust and ReachOut, this meeting is also attended by a representative from the Safe at Home Service. As well as reviewing the POL 1310 reports received during the previous fortnight, the representatives also monitor progress on action plans developed for high risk cases.

**11.1.1.1 Table 1: Key Steps in the ReachOut Model of Service Process**

<b>Service Elements</b>	<b>ReachOut Model of Service Process: Description of Key Elements</b>
<b>Intake</b>	<ul style="list-style-type: none"> <li>• Receipt of POL 1310; agency referrals; and/or voluntary self referral</li> <li>• Considering the contents of the POL 1310 Reports and other background information provided by the referral source</li> </ul>
<b>Contact</b>	<ul style="list-style-type: none"> <li>• ‘Cold calling’ during the first twenty-four hours following a family violence incident to build understanding about what the ReachOut service offers; what the work with the service might involve; and, a shared understanding of the experiences, feelings and thoughts that men might have immediately following a family violence incident.</li> </ul>
<b>Engagement</b>	<ul style="list-style-type: none"> <li>• Making connections and building collaborative therapeutic relationships</li> <li>• Men tell their stories</li> <li>• Surfacing personally meaningful goals for the present and future</li> </ul>
<b>Planning</b>	<ul style="list-style-type: none"> <li>• Safety and change plans developed that establish ownership and responsibility through defining goals and the strategies for goal achievement</li> </ul>
<b>Intervention</b>	<ul style="list-style-type: none"> <li>• Sharing and practicing the tools, techniques and strategies for change</li> </ul>
<b>Case Closure</b>	<ul style="list-style-type: none"> <li>• Consolidating change gains</li> <li>• Keeping the door open by offering opportunities for future re-engagement</li> </ul>

## 11.2 Achievements: Intake and Contact

### 11.2.1 Overview of North Canterbury Police Family Violence Investigations

The New Zealand Police's Family Violence Investigation statistics for the year 01 April 2012 to 31 March 2013 indicated that 578 such Investigations were undertaken during that twelve-month period.<sup>66</sup> Table 2 shows that while this number of Family Violence Investigations for the year ending 31 March 2013 was 10.55% lower than that for the year ending 31 March 2012, it was an increase on those undertaken during the years ending 31 March 2010 and 31 March 2011 by respectively 13.1% 08.3%. This observation supports earlier expectations that the incidents of family violence would increase during the years following the Canterbury earthquake events.

**11.2.1.1 Table 2: Family Violence Investigation Statistics, North Canterbury: Year Ending 31 March 2010 – 2013**

<b>North Canterbury Family Violence Investigation Statistics: Total Investigations that Involve Offence(s) and No Offences for the Year Ending 31 March 2010 – 2013</b>			
<b>2009/10</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/13</b>
502	530	646	578

Source: New Zealand Police

Table 3 shows that of the 578 Family Violence Investigations undertaken by the North Canterbury Police during the year ending 31 March 2013, the majority were located in Kaiapoi and Rangiora.

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<sup>66</sup> The New Zealand Police's Planning and Performance Group provided the Family Violence Investigation Statistics that informed this evaluation. The statistics were accompanied by the following guidance for interpretation.

"These statistics have been produced from a new database that is still under development, and which will in the future produce Official Statistics. Information on how to interpret these statistics can be found on the Police website at

<http://www.police.govt.nz/sites/default/files/resources/guide-to-statistics-produced-by-nzpolice.pdf>.

Please also note that these statistics are based on data drawn from a dynamic operational database. They are subject to change as new information is continually recorded.

Furthermore, these statistics are for Family Violence Investigations, which are jobs that Police deal with as family violence. They differ from statistics previously provided in relation to family violence.

Note: Police no longer publish statistics on offences flagged as family violence by the attending officer.

Changes over time in family violence recording practices mean that comparisons of family violence flagged offences do not reliably reflect changes in volumes of family violence offences being dealt with by Police."

**11.2.1.2 Table 3: North Canterbury Family Violence Investigations by Selected Police Stations for the Year Ended 31 March 2013**

		Year Ending 31 March			
		2009/10	2010/11	2011/12	2012/13
<b>AMBERLEY</b>	<b>Offence(s)</b>	16	21	24	27
	<b>No Offences</b>	21	22	26	13
	<b>Total</b>	37	43	50	40
<b>CHEVIOT</b>	<b>Offence(s)</b>	6	4	3	9
	<b>No Offences</b>	7	8	4	5
	<b>Total</b>	13	12	7	14
<b>CULVERDEN</b>	<b>Offence(s)</b>	1	4	9	10
	<b>No Offences</b>	4	7	8	7
	<b>Total</b>	5	11	17	17
<b>HANMER SPRINGS</b>	<b>Offence(s)</b>	5	4	5	5
	<b>No Offences</b>	11	3	4	4
	<b>Total</b>	16	7	9	9
<b>KAIAPOI</b>	<b>Offence(s)</b>	65	66	95	145
	<b>No Offences</b>	93	117	108	60
	<b>Total</b>	158	183	203	205
<b>OXFORD</b>	<b>Offence(s)</b>	13	17	19	23
	<b>No Offences</b>	28	17	34	14
	<b>Total</b>	41	34	53	37
<b>RANGIORA</b>	<b>Offence(s)</b>	79	80	129	173
	<b>No Offences</b>	148	146	167	72
	<b>Total</b>	227	226	296	245
<b>WAIKARI</b>	<b>Offence(s)</b>	2	6	7	8
	<b>No Offences</b>	3	8	4	3
	<b>Total</b>	5	14	11	11
<b>Total</b>	<b>Investigation has</b>	187	202	291	400

	Offence(s)				
	Investigation has No Offences	315	328	355	178
	Total	502	530	646	578

Source: New Zealand Police

### 11.2.2 North Canterbury Police Family Violence Investigations: ReachOut Intake for Year Ending 31 March 2013

Of the 578 Family Violence Investigations undertaken by the North Canterbury Police for the year ending 31 March 2013, 306 were classified as fitting the eligibility criteria for ReachOut’s target client group.<sup>67</sup> This means that of all the POL 1310 Reports prepared by the North Canterbury Police during this period, 52.9% (306) of the men named are eligible for contact by ReachOut and 32.4% (187) of the named men were identified as perpetrators. One professional interviewed explained the different ways in which the New Zealand Police classify the men who are present at family violence incidents.

*“The POL 1310 reports list every man who is a party to the domestic violence incident. These men are classified in various ways: victim, perpetrator or subject. Men, who are listed on the POLs as a ‘subject’, could be cases where the Police have attended a domestic incident as a result of a neighbour’s call to the Police because they were concerned about raised voices. When the Police attend they speak to all parties and decide no offence has been committed and there is no arrest. Men listed on the POL 1310 reports as a perpetrator would be contacted by ReachOut. The service (ReachOut), will also contact men as ‘subjects’ on the POL 1310 reports. The POL 1310 reports also include additional information about previous criminal offending or other risk factors.”*

The Police statistics indicate that of the 187 men listed on the POL 1310 reports as offenders (perpetrator) during the twelve-month period to year ending 31 March 2013, 25 were named on POL 1310 reports more than once. Therefore, during this twelve-month period 162 individual men were named as offenders on the North

<sup>67</sup> Informants also noted that there may be occasions where the ReachOut service does not contact the males named on the POL 1310 reports. For example, in some cases it may be more appropriate for another service to provide support for the male. Such cases include situations where the male is named as the victim (referred to Victim Support); cases where the male named is elderly (referred to Elder Person’s Health); and, cases where the male named is better served by a service that specialises in working with children and young people.

Canterbury Police's POL 1310 reports. Table 4 provides information about the number of men (classified as offenders) who were named on the POL 1310 reports on more than one occasion and the number of incidences when this occurred.<sup>68</sup>

**11.2.2.1 Table 4: Men Named as Offenders on North Canterbury POL 1310 Reports on More Than One Occasion during the Year Ended 31 March 2013**

<b>Men Listed on POL 1310 reports as Offenders by Number of Occasions During the Year Ended 2013</b>	<b>Number</b>	<b>Percentage</b>
Number of men listed as offenders on POL 1310 report 1 time	162	86.6%
Number of men listed as offenders on POL 1310 report 2 times	18	9.6%
Number of men listed as offenders on POL 1310 report 3 times	04	2.1%
Number of men listed as offenders on POL 1310 report 4 times	01	0.5%
Number of men listed as offenders on POL 1310 report 5 times	02	1.1%
Total number of men listed as offenders on POL 1310 reports	187	100%

Source: New Zealand Police

These Family Violence Investigations in which the men were named as offenders in the POL 1310 reports were undertaken by the North Canterbury Police working from a range of Police stations throughout the district. Table 5 shows the numbers of these investigations carried out by the various Police stations located across the district. Notably, the majority of these investigations were undertaken by front-line Police located in the Kaiapoi and Rangiora Police stations. However, this information demonstrates that the potential reach of the ReachOut service covers the various geographical locations across the North Canterbury district.

<sup>68</sup> Note, the information contained in Tables 4, 5 and 6 and supplied by the New Zealand Police only relate to a portion of the men named on the POL 1310 Reports that are received by the ReachOut service. Specifically, the information in these three Tables relates to the men who were classified as offenders/perpetrators on the POL 1310 Reports.

**11.2.2.2 Table 5: Responses to Family Violence Incidents Where Men Were Named as Offenders on the POL 1310 Reports by Location within North Canterbury**

Location of Police Station	Number	Percentage
Amberley	29	15.5%
Cheviot	04	2.1%
Culverden	02	1.1%
Hamner Springs	01	0.5%
Kaiapoi	65	34.8%
Oxford	06	3.2%
Rangiora	74	39.6%
Wairaki	06	3.2%
Total	187	100%

Source: New Zealand Police

Table 6 shows the demographic characteristics associated with the men listed on the POL 1310 Reports as offenders, and provided by the New Zealand Police, during the twelve month period to year ended 31 March 2013.

Of the ethnic makeup of this portion of ReachOut's target client group, the majority of men identified themselves as European/Caucasian (80.7%), with those identifying as Maori being 17.6%. While the data on ethnicity reflects the majority ethnic group for North Canterbury as described in the 2006 Census data, that for Maori is almost three times as large as that recorded in that year's census. By age, the men comprising the ReachOut service's target client group were mainly aged between twenty and fifty years.<sup>69</sup>

**11.2.2.3 Table 6: Demographic Variables of the Men Listed on the North Canterbury POL 1310 Reports as Offenders during the Year Ended 31 March 2013**

Demographic Variable	Number	Percentage
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<sup>69</sup> The 2006 Census data showed that of the ethnic makeup of the North Canterbury district, 83.9% identified as European; 6.1% identified as Maori; 0.4% identified as Pacific Peoples; 1.4% identified as Asian; 0.2% identified as Middle Eastern/Latin/African; and, 13.7% identified as other ethnicity. Of the age composition of the North Canterbury district, 20.8% of people were 65 years and over; and, 21.2% were under 15 years. (<http://www.stats.govt.nz/Census/2006> )

<b>Ethnicity</b>		
European/Caucasian <sup>70</sup>	151	80.7%
Maori	33	17.6%
Pacific Peoples	01	0.5%
Indian	01	0.5%
Asian	01	0.5%
<b>Age (years)</b>		
Under 15	05	2.7%
15-19 years	23	12.3%
20-29 years	57	30.5%
30-39 years	41	21.9%
40-49 years	48	25.7%
50-59 years	10	5.3%
60-64 years	02	1.1%
65 years and over	01	0.5%

Source: New Zealand Police

### **11.2.3 ReachOut Contacts and Agreements to Engage for Year Ending 31 March 2013**

Between 01 April 2012 and 31 March 2013, ReachOut received a total of 306 Police Family Violence Incident reports from the North Canterbury Police in which the men named on such reports were identified as the offender or a subject. ReachOut endeavoured to contact all of these men named on the POL 1310 reports. This initial attempt to make telephone contact between ReachOut's Men's Family Support Worker and the men was made as soon as possible following the family violence incident. Of the initial attempts to make telephone contact with the men who were named as an offender or a subject on the 306 Police Family Violence Incident Reports received by ReachOut from the North Canterbury Police, 164 (53.59%) men answered the telephone and 142 (46.41%) men were not able to be contacted. <sup>71</sup>

<sup>70</sup> Note the New Zealand Police include New Zealand European, European, Pakeha and Caucasian within the European/Caucasian ethnicity category.

<sup>71</sup> Source: Aviva database for the ReachOut service

The ReachOut service experienced considerable difficulties contacting men – difficulties associated with incorrect telephone details being given to the Police and recorded on the POL 1310 reports; difficulties associated with the men not answering their phones; difficulties associated with the men having either lost or damaged their phones; difficulties associated with inadequate financial resources on their pre-paid phone that precluded their receiving outside calls; difficulties associated with circumstances where the men had absconded from the area and as a result their location was unknown; and, difficulties associated with men's circumstances following the family violence incident, for example, men may be arrested by the Police and remanded in custody. One of the stakeholders interviewed explained these challenges associated with making telephone contact with the men.

*"At times the men are difficult to contact. Some men know they are going to be contacted by (ReachOut) and chose not to answer their phones. At times considerable effort is required to get in contact with the men."*

In order to enhance the accessibility of the ReachOut service to all the men named on the POL 1310 reports, and in circumstances where the service was unable to make telephone contact with the men despite many attempts, the service implemented an additional communication vehicle to ensure all men received the opportunity to engage with the service. This additional mechanism implemented to enhance the accessibility of the service for men, involved sending each man a letter inviting them to contact the service for support.

In addition, to the challenges experienced by ReachOut in contacting the men, a number who were contacted declined to take up the opportunity to engage with the service. For example, of the 164 men with who answered the initial telephone call from the ReachOut service, 34 (20.73%) declined the offer of service.<sup>72</sup> A stakeholder describes some of the responses from men who were contacted on the telephone, but declined to engage with the service.

*"One of the challenges is men's preparedness to engage with (ReachOut). Some men respond in an aggressive manner and request no further contact. Other men believe there is not problem ... at the pre-contemplation stage."*

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<sup>72</sup> Source: Aviva database for the ReachOut service

Of note, and in relation to the 25 men named as offenders on the North Canterbury POL 1310 reports on more than one occasion during the year ending 31 March 2013, ReachOut reported that 17 could not be contacted or declined support as soon as they were contacted; five agreed to talk to the ReachOut Family Support Worker on the phone, but declined further opportunities for engagement; and three accepted further opportunities to engage although at various levels.<sup>73</sup>

#### **11.2.4 ReachOut Engagements and Intervention Strategies for Year Ending 31 March 2013**

In total 130 (79.27%) of the 164 men, who answered the initial telephone call from the ReachOut service, agreed to variously accept support from the ReachOut Family Support Worker during the year ending 31 March 2013. This shows, that of the group of men with whom ReachOut was able to contact by telephone, nearly 80% agreed to engage in an intervention for change – change interventions that ranged along a continuum from a one-to-one telephone engagement to engagements that involved receipt of between one to six service episodes.

Of these 164 men, 74 (45.12%) had conversations with the ReachOut Family Support Worker that ranged from a few minutes to an hour – conversations during which the ReachOut Family Support Worker provided advice about the ReachOut service and other support services and, in particular, engaged the men in developing safety plans. Whilst this group of men accepted the information and advice offered by ReachOut about services and safety planning, they did not take up the offer of further engagement beyond this initial telephone intervention.

Of the 164 men who answered the initial telephone call from the ReachOut service, 56 (34.15%) men agreed to engage with the ReachOut service on an ongoing basis.<sup>74</sup> Table 7 describes some of the pertinent demographic and social history details about the men who decided to engage with the ReachOut service on an ongoing basis.

Of the relationship between the men and those who were named as victims on the POL 1310 reports, just over a quarter were married; and, over a third were living in

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<sup>73</sup> Refer to the contents of Table 4: Men Named as Offenders on North Canterbury POL 1310 Reports on More than One Occasion During the Year Ended 31 March 2013.

<sup>74</sup> Source: Aviva database for the ReachOut service.

de facto or partnered relationships. Of the others, a small number were divorced; a small number had committed a family violence offence against a member of their extended family; and, a small number of family violence offences involved children committing such offences against one of their parents. In almost two thirds of these cases, children were present at the address when the family violence incident occurred.<sup>75</sup>

Where the employment status of the men was known, 42.9% were employed and 53.8% were unemployed.<sup>76</sup>

In almost two thirds of the cases in which the men engaged with the ReachOut service, substance abuse had been identified as a factor associated with the family violence incident; and, mental health issues were associated with almost a third of the cases.

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<sup>75</sup> The 2006 Census described the marital status of those residing in North Canterbury as 25.7% never married; 51.3% married; 22.9% separated/divorced/widowed; and, 23.5% live with partner.

<sup>76</sup> The 2006 Census recorded an unemployment rate in North Canterbury of 4.1%.

**11.2.4.1 Table 7: Demographic and Social History Variables of Men Who Engaged with ReachOut on an Ongoing Basis**

<b>Demographic and Social History Characteristics</b>	<b>Numbers</b>	<b>Percentages</b>
<b><i>Relationship of Men to Victim at Time of Family Violence Incident</i></b>		
Married	16	28.8%
Defacto/Partnered	22	39.1%
Separated	03	5.4%
Divorced	03	5.4%
Extended Family members	04	7.1%
Child/parent	04	7.1%
Relation status unknown	04	7.1%
<b><i>Children Present at Family Violence Incident</i></b>		
Incidences with children present	36	64.3%
Incidences with no children present	20	35.7%
<b><i>Employment Status</i></b>		
Employed	24	42.9%
Unemployed	30	53.8%
Employment status unknown	02	3.6%
<b><i>Substance Abuse</i></b>		
Substance abuse associated with family violence incident	34	60.7%
Substance abuse not associated with family violence incident	20	35.7%
Substance abuse associated with family violence incident unknown	02	3.6%
<b><i>Mental Health Issues</i></b>		
Mental health issues associated with the family violence incident	18	32.1%
Mental health issues not associated with the family violence incident	38	67.9%

Source: Aviva database for the ReachOut service.

As noted in Table 8, the majority of the men who chose to engage with the ReachOut service on an ongoing basis received more than one episode of service. For example, 84% of these men were involved in more than one face-to-face intervention service facilitated by the ReachOut Family Support Worker.

Nearly 60% of engaged men received four or more face-to-face meetings with the Family Support Worker. In some stakeholders' views "this more extensive contact between the men and the worker is where the real work to bring about change occurs, particularly for (hard-to-reach) groups of people who present with entrenched attitudes, beliefs and behaviours associated with their family violence offending".

**Table 8: Volume of ReachOut Service Received by the Men Who Engaged with the Service on an Ongoing Basis**

<b>Episodes of Service Delivered for Engaged Men</b>	<b>Numbers</b>	<b>Percentage</b>
One service episode received	9	16.1%
Two to three service episodes received	15	26.8%
Four to five service episodes received	15	26.8%
Six or more service episodes received	17	30.4%

Source: Aviva database for the ReachOut service

Within the context of these face-to-face meetings between the Family Support Worker and the men a number of different types of service were offered. The varying types of service intervention utilised by the ReachOut service, included brief assessments, offering information and advice, offering advocacy services, undertaking brief interventions and arranging referrals to other services. Stakeholders reported that each face-to-face intervention with each man was a dynamic process often involving aspects of these different intervention types within each interaction. For example, meetings between the Family Support Worker and the men would almost always involve an "assessment of risk" as well as covering solution-focused and motivational interviewing change strategies and referral to specialised agencies to meet the range of presenting needs of each man.

### **11.3 The Counter Factual: Women’s Perspective and Experiences When Men Do Not Accept an Offer to Engage with ReachOut**

The New Zealand Police data that contributed to clarifying several aspects of the inputs, throughputs and outputs from the ReachOut service, appear to uphold the view that many men who commit family violence offences are a ‘hard to reach’ group and often appear resistant to any change efforts. For example, of the 306 men named on the POL 1310 reports whom ReachOut attempted to contact, 176 (57.52%) were either unable to be contacted or refused to engage with the service when the opportunity was offered.<sup>77</sup>

A focus group of women whose lived experience of family violence was current at the time of interview offered their perspectives and advice about the help seeking behaviours of men who commit family violence offences; effective strategies with which to engage men in the journey of change away from family violence offending; and, processes they would like an outreach service for men to put in place to enhance their safety and that of their families.

Drawing on their own experiences the women in the focus group emphasised that changing men who commit family violence offences is extremely challenging. Some were of the view that “change was not possible for some men.” They reiterated that from their experience many men continue to justify, minimise and denying their family violence offending. Some of their comments emphasise their experiences of men’s resistance to change:

*“They won’t change their behaviour as they don’t see that there is a problem.”*

*“Some of them might seek help to justify their behaviour ... like finding other men who support their views ... helps to justify that he didn’t do anything wrong and that he doesn’t need to change his behaviour.”*

*“They don’t see the need for help ... just deny there is an issue.”*

They advised that many men in the pre-contemplation stage of change would resist any offer of assistance from a service like ReachOut because men in this situation “wanted to keep it (the family violence offending) under wraps and were threatened by the thought that their behaviour might be exposed.” Moreover, the women stated

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<sup>77</sup> This number (176) includes the 142 men who were unable to be contacted by the ReachOut service; and, the 34 men who answered the initial telephone call from the Men’s Family Support Worker, but who declined the offer of support from the ReachOut service.

that in their experience men in these circumstances would “be very upset at other people becoming involved.” One woman’s experiences following her partner’s involvement from others outside the immediate family illustrates this point.

*“After he was contacted, he abused me. The women have to bear the brunt of the consequences after men are contacted. I thought he would kill me on the road to his parents ... all I could do was sit in the car and listen to his abuse. All I could think about was that he was threatening my life and I had to consider the safety of the children who were also in the car.”*

When asked to provide advice about strategies that should be put in place to reduce any risks to their safety when men were called by an outreach service, the women in the focus offered the following suggestions about an outreach service for men within the family violence sector:

- Delivered by men, particularly those “who can relate well to men; have been in the situation themselves, know what it used to be like, and, have changed.”
- Promote the service in a way that provides men with the message that the source of the assistance is independent of their partner’s influence “so that we will not be blamed.”
- Provide the women with advanced notice that the men are going to be contacted by a men’s outreach service
- Make sure the Police give the men advanced warning that they will be contacted and that the service is offered to provide support and assistance
- Ensure that contacts with the men are made outside the family home so that “women are not abused after the worker leaves.”
- Make the initial contact with the men “influential” to ascertain men’s buy-in to further engage
- Provide clear messages that “violence is not OK.”
- Be tenacious and persistent about engaging with men – “go back time and time again, even if you get knocked back.”

Of the benefits of an outreach service for men who commit family violence offences, the women in the focus group believed that if men could be truly engaged in the

journey of change, then “we (women) would be relieved of the responsibility of having to provide support for them and trying to change them”; and, if the service helped men to change, then “that would improve our (women’s) safety and quality of life.”

#### **11.4 Benefits from the Implementation of ReachOut**

In order to surface the observed benefits that have been derived from the ReachOut service during its pilot phase, the professional stakeholders were asked to offer their views about the gains for men who perpetrate violence; for women and children who have lived experience of family violence; for those working within the family violence sector; and, for the wider community.

For the majority of the men who are named on the North Canterbury Police’s Family Violence Incident Reports, the professional stakeholders believed that the ReachOut service offered them an opportunity to access a support service that had hitherto been unavailable to them – a service that was without cost, non-judgemental, offered support and assistance and had the potential to reduce their feelings of isolation. Most importantly, it offered the men an opportunity to “effect their own change” and “break the cycle of family violence.” Many stakeholders also believed that men would welcome an alternative opportunity to change the way in which they relate to the members of their families – an opportunity that was offered before the criminal justice system became involved and that invited their voluntary participation. One professional stakeholder’s views reflected these perceived benefits:

*“With ReachOut, men receive an approach that is more therapeutic that looks at their position in the family and then provides them with the opportunity to be supported to participate in family life in a non-violent way. This is quite different from an approach this is punitive ... you’ve done an offence ... you need to be in jail and we’re going to get you as far away from the women as possible.”*

For those who had observed changes in the men following their engagement with the ReachOut service, they observed that they had “*focused direction, a sense of peace and a sense of confidence.*” Overall, stakeholders believed that the ReachOut service precluded further family violence offending and that this result enhanced the safety for all parties affected and avoided the necessity to impose more expensive sanctions often imposed following repeat incidences of such offending.

*“Increases safety for the men because they stop committing crime ... saved him, saved her and saved money.”*

From the men’s perspective, the professional stakeholders concluded that the ReachOut service must have positive benefits for them because many were taking up the opportunity to use the service. However, some were of the view that the interaction between the men and the men’s Family Support Worker needed to be of sufficient length and/or availability to facilitate lasting positive change.

*“It must be helpful for the men because they are using it. Significant number, so must be useful. Once they make the connection and stay in for a bit, it must be helpful.”*

*“There is the risk that when ReachOut stops seeing the men then the abuse starts again ... sessions might not be long enough, that’s the only down side. But the service can start working with him again.”*

Alternatively, for those men who decided not to take up the opportunity to engage with ReachOut, when contacted, stakeholders observed that the service provided an ongoing opportunity to access support at some future date when they were ready to begin the journey of change.

*“For those who didn’t engage, they have a place to go for support. They can’t use the excuse that nobody cares. Some men say, ‘it’s all about her and nobody cares about me’. ReachOut can say the service cares about your wellbeing and what happens for families ... less places to hide and can’t use that as an excuse anymore.”*

Regardless of whether the men decided to accept the offer of support from ReachOut, the professional stakeholders believed that the implementation of the service had benefits for women and children in both the short and long term. In the short term, the women’s Family Support Workers received information hitherto unavailable to them about the men’s position on the continuum of change. For example, gaining information about the men’s respective positions of the continuum of change enabled those working with the women to adjust the responses planned to enhance their safety according to and aligned with the perceived level of risk. Some of the professional stakeholders describe the way in which this information from the men’s service supports their efforts to enhance women’s safety.

*“Families benefit because the refugees get information from ReachOut to inform their safety plans. Women get a sense of whether the man is likely to*

*change at all. If (the men do) not bother to engage, then this is a clue ... a chance for her to make plans regardless of what he is doing.”*

*“Increases safety because there is some idea about the stage he is at. ReachOut is able to share information that indicates whether the women are at risk or not. If so, put in extra safety measures for the women.”*

In addition to providing additional information to inform safety planning for women, the professional stakeholders stated that ReachOut relieved women of their “sense of responsibility for supporting their male partners, regardless of whether they chose to continue living with them or not. Moreover, they noted that this support was pro-social and may counter to some extent the anti-social influences of some of the men’s ‘natural’ supports.

*“For the women, if the relationship is where they have decided that they don’t want the violence anymore, then they know that someone is there for him ... can’t be in the house, as it’s not safe ... not at a friend’s house which could make it worse. This is reassuring for the women and children.”*

*“Women (with lived experience of family violence) feedback that ReachOut has meant that they don’t have to be responsible for supporting their men; that it was a relief to know that someone else was providing that support ... looking after him; and, that the service provided the space for them to do what they needed to do whether or not they decided to stay with the man or leave.”*

*“For women it’s not their responsibility any more, now that men are stepping up.”*

In the longer term and in circumstances in which the men chose to accept service from ReachOut, the professional stakeholders noted that any positive attitudinal and behavioural changes made by the men mitigated the ongoing risk of repeat offending; ensured that all family members were getting their needs addressed; and, provided assurance for women that their children were safe with their fathers regardless of whether the couple were cohabitating or separated.

*“For women it helps manage the risk. If assist men through their issues, then that benefits women and children. If men embrace the interaction with ReachOut and change their lives, then it benefits families.”*

*“(ReachOut) benefits because the needs of the whole family are being addressed, meets their needs as individuals and this provides the opportunity for the whole family to benefit.”*

*“For women, a lot of them are single mums raising children and it’s important for these children to have fathers that are actively involved in their lives and*

*are safe. This philosophy (of the ReachOut service), even when the woman chooses to be on her own ... provides the opportunity for women to feel safe about her ex-partner sharing and being involved with the children. Children do better with loving relationships with both their parents.”*

In addition, the professional stakeholders argued that ReachOut provided a vehicle for social change – an opportunity to break the inter-generational cycle of violence – because the positive outcomes it achieved with the men currently, would likely have a positive impact for the future generation in terms of the quality of their intimate relationships as adults. This potential for ReachOut to interrupt the inter-generational nature of family violence and have a positive impact on the future adult relationships for the current generation of children is illustrated by the following comments;

*“Children look at relationships and what is modelled. If they see a positive way of modelling relationships, then that works better. Boys model being a man on their fathers or the men around them ... if those men are non violent, then that creates non-violent men. Girls look at relationships that their mother has with dad. We tend to see girls go into violent relationships, if that is what they have experienced. Boys who watch dad beat mum are often violent men. If ReachOut can support men to have a role in their families that is non-violent then the children are more likely to have adult relationships that are non violent. ”*

Of the benefits for those working within the family violence sector, the professional stakeholders stated that the ReachOut service had increased the level and accuracy of information with which to inform evidence-based decision making around risk assessment and risk planning; provided a vehicle for male workers within the sector to contribute to the protection of women and children; and, provided leadership for innovation within the sector – leadership that had influenced others to begin considering other new ways in which to enhance the sector’s effectiveness in addressing the issue of family violence. The professional stakeholders described their opinions about the benefits for the family violence sector.

*“There are benefits with the number of cases that ReachOut was able to engage, because we know where the men are at and do a risk assessment round that and decide where to go with things.”*

*“For the agencies it has been quite hopeful ... see how it works ... another resource and way to intervene. It provoked hope here ... this is interesting and different from the current response.”*

*“For the agencies it provided a way to move forward ... brought in a new process. For us it broadened our horizons ... if they can do this, then we can do that ... new ideas.”*

*“This is a point of difference... unique in family violence sector as doing both bits of work ... not an MOU between agencies. Positions (the sector) well for future developments.”*

*“Now see men get a voice. Previously, refuge colleagues shut them down. They said it is all about us strengthening women. Now they (male family violence workers) are able to show they are passionate about that too, they want to protect women too. Bringing the refuge movement along is a constant challenge.”*

For the wider community, professional stakeholders pointed out that the ReachOut service provided an additional social service resource that community members could access when required. In addition to further enhancing the social service resources available to members of the community, the professional stakeholders also noted the benefits derived from ReachOut’s more preventative activities within the North Canterbury district.

*“The community benefits from knowing the service is there. It adds value to our community. It’s like having a park down the road, even if you don’t use it ... know it’s available if you need it. This adds to the community.”*

*“For the community, (ReachOut) has further encouraged men to challenge each other around violence and that means we get more of the sort of men we want in our community.”*

## 11.5 Outcomes Achieved From Implementing the ReachOut Service

Two of the outcomes sought from the implementation of the ReachOut service were:

- Increased safety experienced by women and children
- Reduction in repeat incidences of family violence in North Canterbury (Ministry of Social Development, Canterbury Social Support (Earthquake) Fund application, August 2011)

Overwhelmingly, the professional stakeholders interviewed observed that during the first twelve months of ReachOut's implementation the safety of women and children had improved. Such improvements, regardless of whether the men decided to take up the offer of support following contact, were said to be the result of the enhanced level and accuracy of information about families' circumstances gleaned by the service – information that “provided the full picture” and which increased the accuracy of the evidence base that informed decisions and actions for mitigating and managing the risk family violence offending poses for women and children. One professional stakeholder's comments reflect the sentiments held by the others interviewed.

*“Improved safety for women and children ... do more if there was a bigger amount of cases (contacted by the ReachOut service). Every case where the women's support worker has worked with the men's support worker, has worked positively for safety. It's good to have the men's perspective when you are working with the women. You know there is a piece of the puzzle missing ... go to the Round Table and ReachOut worker talks about the cases he is working on and within his comments there is the missing piece of the puzzle. Need the full picture. You know she's not quite telling the whole truth ... fits ... she's seeing him on Sunday when she says that she is not.”*

In addition to these observed outcomes reported by those who work with the women with lived experience of family violence, the professional stakeholders had also received feedback about ReachOut from the women with whom they worked. This feedback from the women included:

- No evidence of enhanced risk to women and children as a result of ReachOut contacting the men
- Increased effectiveness of the safety planning for the women and children

- Evidence that the work with the men undertaken by the ReachOut service had improved the quality of the lives of women and children.

Such outcomes for women and children are reflected in the following statements offered by the professional stakeholders:

*“Safety has increased for women and children and (there has been) no reported knowledge or evidence of any increased risk for women and children as a result of the ReachOut service” (ReachOut Steering Group, September 2012)*

*“There is positive feedback about how the ReachOut service is enhancing the effectiveness of the safety planning for the women and children.” (ReachOut Steering Group, November, 2012).*

*“Two high risk women have said to me ... ReachOut changed their lives ... made a huge difference because ReachOut focused on the issues to be dealt with ... the DV, the mental health issues. He (men’s Family Support Worker) knows the DV field well. They think it is wonderful ... he talks straight ... Why did you hit her? Talks straight about that ... got the skills and experience to do that.”*

Of the outcomes for men who engaged with the ReachOut service, the men who were interviewed offered the following observations about their post-service circumstances, including:

- Clear direction about ways in which to positively manage their relationships with others, which resulted in an increased awareness of the antecedents that led up to the family violence offending; increased ownership for their family violence offending; and, increased responsibility for demonstrating pro-social attitudes and carrying out pro-social behaviours.
- These, in turn resulted in healthier and more respectful relationships and no further offending.

Men, who engaged with the ReachOut service and were interviewed for the evaluation, described the outcomes of this service for them.

*“When first contacted by ReachOut I was useless, hopeless, a waste of space ... assaulting and aggression going on in my life. Now I know where I am going, clarified the issues and dealt with them ... (offending) nipped in the bud. If I hadn’t engaged with ReachOut I would be dead now. No further assaults ... save the Police having to arrest me every now and then ... save Police time.”*

*“The techniques that ReachOut gave me means that if I have a stressful day at work I don’t take it out on the family. I now have a way to deal with that ... more conscious of what I do and say ... awareness of situations before they happen. When I see myself before and after, it makes me realise how different I am. I’ve gone from a one to a four on a scale of five. It’s hard work to keep up the good work ... get ups and downs, but a lot better now.”*

*“Really scary for me to learn how terrible I had been ... when the light went on and I realised, it felt stupid on my part. It helped me realise my part in it all. The work with ReachOut made sense. We have a happier family ... no one gets smashed and Mum and Dad are happier. I listen to my partner more ... know now when I am being like I was and I have the tools to deal with it. My partner says she doesn’t worry any more about talking to me ... able to be more open. It was brilliant for me.”*

*“I got more out of it in five weeks than the two or three other anger management courses I have been to. My whole attitude has changed. ReachOut said I had to respond with love and respect and this has stuck with me ... if not respectful then the loving stops.”*

*“When ReachOut contacted me I had never been so low in all my life ... girlfriend just left me, mental health issues and struggling to hold it together. I desperately needed help and someone to talk to and the service was there when I needed it. The service gave me the options for helping myself and connections to other services ... anger management. It’s all good for me know, bought a house and know how to manage my anger. I know that ReachOut continues to be there for me, so I can contact them and talk if things get bad again in the future ... never let myself get that low again.”*

Of their satisfaction with the ReachOut service, the men interviewed on average rated it as 4.8 on a 1 to 5 likert scale, with three of the men rating it at 5 and two

rating it at 4.5.<sup>78</sup> Of the underlying reasons for their level of satisfaction ratings, the men offered the following comments about the elements of the service that contributed to their perceived satisfaction:

- *Right Service at the Right Time*: They noted that the service was “available when they needed it;” and there “immediately” after the (family violence offence)
- *Holistic*: They noted that the service enabled them to “address the multiple issues” in their lives
- *Honesty*: They noted that the service facilitated them being “open and honest” about their family violence offending; and, that the “honest and upfront” feedback that they received about their family violence offending motivated them to make positive changes
- *Made a Difference in the Men’s Lives*: All the men interviewed stated that the ReachOut service “really helped me to overcome the issues and problems” in their lives.

When asked to identify ways in which the ReachOut service could be enhanced, the men offered two main suggestions. First, they thought that it would be useful for the service to extend its preventative function. This suggestion is described by one of the men interviewed.

*“The service should target more young people and first offenders ... need to get hold of them at that stage before they are too far into the cycle (of violent offending) and go down the wrong path. Need to help them with all aspects of their lives before they end up with a lifetime of (family violence) offending ... offer them help with all aspects of their lives and a different avenue.”*

Second, the men believed that more government funds should be “spent to help families in the way the (ReachOut) service has helped me and my family,” rather than funding “men to go to prison.”

While the men who had accessed the ReachOut service, who were interviewed, described the outcomes for them and their families, the professional stakeholders

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<sup>78</sup> At interview the men were invited to rate the ReachOut service on a scale from one to five, where 5 was completely satisfied; 4 was satisfied; 3 was unsure; 2 was unsatisfied; and, 1 was very unsatisfied.

offered comments about the more systemic outcome – reduction in recidivist family violence offending within the North Canterbury district.

Many noted that, apart from accessing official statistics, it was challenging to access information about outcomes. One professional stakeholder described this challenge.

*“You can work with someone for weeks and know they have learned something ... increased their understanding ... understanding about themselves and how they work. If you put them in a world where others don’t have that understanding, they are on their own and that is hard for anybody. So hard to determine whether people take their insights out into their world because they go back to the same world. Only know that someone completed the service not whether they re-offended.”*

Both quantitative and qualitative information was sought to answer the question of whether there had been any repeat incidences of family violence at any time *during* the period that men were attending the ReachOut service and/or at any time *following completion*. Of the quantitative information sourced from the New Zealand Police’s ‘Family Violence Investigation’ statistics on family violence recidivism associated with the men who were eligible to receive the ReachOut service during the 12-month period to 31 March 2013, data was only available for the cohort of men who had agreed to receive episodes of service following the initial telephone contact. Of the 56 men who received episodes of service following the initial telephone contact with the ReachOut Family Support Worker, none of them had recorded repeat family violence incidents during the period that they were receiving the ReachOut service nor during follow-up periods of between one and ten months.<sup>79</sup>

In addition to this quantitative recidivism data, the professional informants offered qualitative perspectives and views about the question of whether there may had been any repeat incidences of family violence at any time *during* the period that men were attending the ReachOut service and/or at any time *following completion*.

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<sup>79</sup> These varying follow-up periods occurred because the men who engaged with the ReachOut service earlier in the pilot period (for example, in May 2012), had longer follow-up periods than those who were receiving services towards the end of the pilot period (for example, in February 2013). For a number of reasons caution needs to be taken when considering this finding. These reasons include: First, examining rates of recidivism would ideally include a control group, before and after service measurement and longer follow-up periods, for example follow up at 12, 24 and 36 months. Second, measuring recidivism using only official data of reported family violence incidents is estimated to be “only 18% of family violence incidents that ever come to the attention of the new Zealand Police” ([www.areyouok.org.nz/statistics.php](http://www.areyouok.org.nz/statistics.php))

Of the overall impressions about the ReachOut service from the North Canterbury Police's front-line officers, this comment was offered.

*"In North Canterbury, it's a small community and the Police know the guys (men who have previously had contact with the Police concerning family violence incidents) and have a weekly talk. There has been positive feedback from several officers (from different parts of the district) about ReachOut's involvement with the men ... been beneficial."*

During the period when men were attending and actively engaged with the ReachOut service, the following views were offered about the question of repeat incidents of family violence.

*"Can only speak anecdotally, the rates of repeat family violence incidents from within families that we (Police) would have expected in the past to offend again has gone down. In specific cases that I believed there would be Police involvement again ... because ReachOut was well engaged with the men to keep them on an even keel, no further Police attendances. For example, there was a case where there was a Protection Order in place and the family house was alarmed. There was potential for the man to react against his partner and breach the Protection Order. Because of ReachOut's engagement there was a level playing field established. In the past, I would have expected further extreme offending. There has been no further offending in this case."*

Following ReachOut service completion, the following views were offered about the question of repeat incidents of family violence

*"There have been reports to the Police after ReachOut has been involved, but not when the service was engaged with the men. Has been two cases where the Police have attended callouts. One of these she was concerned by his behaviour, but no offence was committed. The other case the Police attended about an offence, but it was not DV (domestic violence)."*

Finally, most of the professional stakeholders commented on the way in which the ReachOut service provided a point of linkage with other services within the family violence sector as well as services across other sector, such as health, mental health and income support – linkage creating that was a hallmark and a success factor associated with the service and which, even in complex, high risk cases, resulted in positive outcomes for families.

*"All the agencies cooperate. It's a collaborative and holistic approach. It is multifaceted ... everything combined to make things work for families – all*

*because of the actions of ReachOut. We've not had that before and it speaks volumes about the quality of the work undertaken by this service."*

A case study example illustrates the way in which this more systemic approach resulted in beneficial outcomes, not only for the man who accessed the ReachOut service, but also for the members of his family.

#### Case Study: Outcomes for Men and Their Families

**What was the situation?** Family of a number of children, living in accommodation in a camping park. Following the family violence offence, the man was arrested and charged with multiple offences and re-located away from the family. The man was experiencing mental health issues and employment-related stress. He was unable to work because of his arrest.

**What did ReachOut do?** ReachOut assisted the man to address multiple issues, including "medication to address his mental health issues. That was one factor associated with his offending." Started to change and get on a better track as a result of the engagement with ReachOut. Refuge also working with the partner and so the whole family helped.

**What was the result?** Because of the interaction, all the agencies saw the changes. Wrap around services were put in place for the family, including access to a new home. He is now working. A number of the children are able to return to their family home. Not only was the perpetrator helped, but the family as well. The situation is vastly improved ... gone from strength to strength and that could not have happened without ReachOut.

## 12 Success Factors and Challenges Within and External to the ReachOut Service: Stakeholders' Experiences

### 12.1 Place Within and Contribution to the Family Violence Sector

The various ReachOut stakeholders interviewed stated that the ReachOut service was positioned across multiple layers of the family violence sector in North Canterbury and made a valuable contribution in each of these settings. They noted that ReachOut interacted with members of the North Canterbury Family Violence Network and the Waimakariri Safer Community Council; members of the North Canterbury Family Violence Round Table; representatives from key family violence sector agencies, including the New Zealand Police, Child Youth and Family, Community Probation Service, Relationships Aotearoa, and the women's refuges and associated community services; and, the men who commit family violence offences and who are identified as perpetrators on the Police Family Violence Incident Reports (POL 1310) or Police Safety Orders (PSO).

Within the context of interacting with Waimakariri District Council, stakeholders noted that ReachOut provided information at the bi-monthly North Canterbury Family Violence Network meetings with which to enhance awareness about the service and increase its accessibility to human service agencies' clients. Moreover, this involvement with the Network assisted with building and maintaining relationships with human service colleagues – relationships that were imbued with a sense of confidence and fellowship that enhanced the accessibility to a variety of services for the respective clients of the agencies involved in the Network. In addition to ReachOut's contribution to community networking and connecting, the stakeholders also mentioned that ReachOut contributed to the Council's health promotion and family violence prevention activities. The stakeholders described ReachOut's contributions to the work facilitated by the Waimakariri District Council:

*“They (ReachOut) come along to the meetings chaired by the Council ... networked through that and well known to agencies ... Barnardos, Wellbeing North Canterbury and other social support organisations across the system... great ... brilliant relationships.”*

*“At the Family Violence Network we are kept in the loop ... there are 300 relationships here and everyone is well connected right across the community ... it’s a small community and people know people in agencies.”*

*“(ReachOut) has been involved in a number of safer community projects in the district ... spoke to groups at the Local Health Day at the park ... (and) was involved in the White Ribbon Day activities promoted in the district.”*

Not only did stakeholders note ReachOut’s contribution to these more community and network level elements of the family violence system, but they also mentioned “the vital role that ReachOut plays within the (context of the activities carried out by the members of the) North Canterbury Family Violence Round Table.” This contribution was largely viewed as providing an additional perspective to the members’ evidence-based decision-making concerning risk mitigation and safety planning – decision-making that was preventative in nature and focused on countering the potential for further family violence recidivism.

*“Bringing (ReachOut) to the Round Table was vital ... going forward we have to keep this aspect. Having them there means we get the other side of the story ... their information fills the gaps when we are deciding what to do with families ... assess risk and decide on the best way forward. Looking back I don’t know how we operated without it.”*

*“Focus on reducing the risk of re-offending ... get heads up about risk escalating ... evidence so that we can step in sooner rather than later ... and come up with a plan to manage the risk. Their sharing this information ... get all parts of the puzzle so when fit together to get the full picture.”*

At an agency-to-agency level, stakeholders observed that ReachOut had brought a hitherto absent dimension to their work within the family violence sector – a dimension that provided additional and more accurate information about the risks inherent within each family violence situation and a means with which to support their work with their clients. The way in which ReachOut provides a beneficial and added dimension to the work of individual Government and Non-Government Organisations working within the North Canterbury Family Violence sector is illustrated by the following stakeholder comments:

*“ReachOut knows the people (from the Government agencies) and can communicate with them on cases ... they are excited about this and think the benefits are incredible ... they benefit from the work done with the men in terms of risk assessment and the work he does with the men mitigates the risk. Before we were blind ... just guessing. The men do not give the*

*Government agencies the information that ReachOut gets ... tell them one story ... not the truth. His angle is more likely to get a fair assessment of what the risk actually is. It's more than risk though ... it's the work he does with the men ... challenging their behaviour."*

*"From the agencies' perspective they want to refer lots of men if the service can cope with it ... it bridges a gap for them."*

*"Those who work with the women say they are supported by the work (that ReachOut does) with the men and it's had a positive effect on their work with their clients ... they all know the programme (ReachOut) in the district ... small community and people from the agencies all know each other."*

While the stakeholders interviewed commented on a range of unique contributions that ReachOut made to the work of networks, teams and individual agencies working within the Family Violence sector, they also pointed out a number of unique contributions that this service offers for the men who commit family violence offences. In particular, they stated that ReachOut provides an early intervention service when men are most likely to be open to change efforts – an opportunity for men to “take responsibility,” for their family violence behaviour, break their pattern of recidivist family violence offending and experience a pro-social influence. These unique contributions for the men who access the ReachOut service are further explained by the stakeholders interviewed.

*"What I like about it ... if a man is evicted from his home for safety reasons ... (previously) not supported (except) by people who give them the wrong messages ... 'She's just a bitch mate.' It's strength is that men are quite vulnerable after they have been violent ... where there are Orders, they can't see their children ... miss them and worry about them ... feel huge remorse for what they have done ... guilt. It's significant difference is that men are supported during the early period (after the family violence incident) ... the vulnerability ... the 'poor me' ... can get in the way of them taking responsibility ... what ReachOut does is work with them to take responsibility and this has the potential to produce a different outcome."*

*"(ReachOut) interrupts some body's violent behaviour ... we know when we interrupt, then they stop what they are doing. When perpetrators under the radar ... have been offending for a while ... ReachOut contacts them to challenge or support and point them in the right direction, it interrupts. There is another set of eyes on the person ... enough to let them know someone else knows what I am doing ... interrupts pattern ... cycle of offending."*

*"(ReachOut provides) a good role modelling as well. Recidivist offenders often associate with anti-social people. Give ideas to get out of the hole they*

*are in ... This is where ReachOut is pretty good. (For example), man with a few Police Incident Reports ... arguing and pushing behaviour. ReachOut introduced to the man and this was enough to interrupt ... never had a strong role model... grown up in a gang house ... (ReachOut) offered an alternative view - men do not have to be violent to be a man. This worked... still reconnects with ReachOut when things are shaky ... guy had potential to do serious offending ... this was nipped in the bud as knows where to go.”*

Not only had stakeholders observed ReachOut’s contribution across the multiple layers of the family violence system – networks, cross-disciplinary teams, within and across different human service organisations and through direct service delivery to the target client group, but they also commented on the way in which this new service development had introduced a completely new philosophical and operational approach to the way that the Family Violence sector had operated since the time of the feminist movement.

*“It comes from a different philosophical base ... women’s refuge doing this (providing a service for men) ... hugely different. There are politics in the sector ... division in the sector for a long time and some are concerned about it (ReachOut) as they want to look after their patch.”*

*“Some people say they are not sure about the approach. What we have been doing to date is not working. We are stuck ... needed to look outside the square. It’s courageous to take on the project ... for the first time we are talking about the elephant in the room. It was like cancer a few years ago ... the ‘c’ word. The more it is out there and people are held accountable ... have a worker for the men out there and being public about that. What (ReachOut) has done for the men will help us all move forward in the future ... need to also do the same for youth, children as well ... not do the work in three different services.”*

Stakeholders noted that this approach introduced a number of innovative elements including: a family-centred, strengths based and whole of family approach that involved working with every family member; an integrated approach that involved one agency working with all parties affected by family violence, including women, men and children, compared to the traditional approach where separate agencies worked respectively with different members of families without any interface or communication; and, an earlier intervention approach that had the potential to reduce levels of family violence recidivism, reduce levels of family violence sanctioning within the criminal justice system and increase the safety of all family members.

*“(ReachOut) is another great tool in the box and what we need to get the job done in the Family Violence sector. I feel it can only make things better. We need to move to what works best for all members of the family. (Previously) it’s been about women who are battered ... let’s just work with the women and not focus on anything else. I think we need all people working with all people ... all work together and not put them (different members of the family) in different services. The work (of the Family Violence) sector has been too separated. It’s like circles all interconnected ... all work together to solve the problem ... work with women, work with men, work with youth. You are not going to stop the violence in the house if no one works with every member of the family. It’s no good working with the women alone ... licking her wounds ... because she just goes back to the same problem ... home and get the bash.”*

*“Made a great contribution ... able to engage with a Maori development model ... offering a different approach for families that are involved in the most serious cases of family violence – an approach that sees families more holistically. We’ve come to a point where we see couples not wanting to part... women don’t want to leave the men or keep returning to the men. What ReachOut has done is challenge workers who work with the women to partner with workers working with the men and then do something for the families together.”*

*‘It’s the missing part of the puzzle ... ReachOut holds that part of the family (men) that has been missing. People find the innovation exciting, curious and terrifying. It has the potential to turn the DV sector on its head. If men come in before they are arrested and have a number of sessions with ReachOut and they get most of the tools they need that are required to make changes in their lives, (then) they don’t become a DV statistic, they don’t have to go to a DV mandated programme and there would be no dollars for other programmes. This introduces enhanced safety earlier ... it’s preventative. It’s better for families ... why wait for an assault before men get any services? ... deal with families, not just one part ... adult women and men and children are all involved.’*

## 12.2 Establishing ReachOut: Environmental Factors Impacting on this New Service Development

The stakeholders presented a number of elements in the political and socio-economic environment that provided a facilitating context for the establishment of ReachOut. These elements included building on existing relationships and adopting an approach centred on partnership and collaboration; grasping opportunities for innovation, transformation and adaptability that emerged within the post-earthquake environment for Canterbury businesses; and, ensuring an alignment with the prevailing political priorities and direction.

Within the context of the family violence sector, there was both a “desire and readiness” for a different approach to the issue of family violence because “many in the family violence professional community had been concerned for some time that the model being used was not always useful for families.” Stakeholders mentioned that “there was a huge political appetite” for transformation within the family violence sector, noting the multiple reviews being undertaken by the Family Violence Taskforce; the agreement amongst “top people nationally ... refuge, Child Youth and Family and Police” to approach the issue of family violence in new and innovative ways; and, the messages inherent in many of the current Government’s policies, such as the White Paper for Vulnerable Children – messages such as the drive for the Non-Government sector to take up the challenge to address some of New Zealand’s most entrenched social problems and the need to work collaboratively in a whole-of-family manner.

Some of the stakeholders interviewed observed that Aviva was cognisant of these concerns and trends. Moreover, during the period leading up to the establishment of the ReachOut service they observed that it had been “gently challenged to re-examine the way they were doing things and build the evidence base about ways in which to best work with families.”

*“Aviva has moved with the desire to change things ... partnered up really well with a Maori organisation that wanted to change things ... see families more holistically. (It’s) a good strong partnership.”*

In addition to this partnering arrangement between those delivering services from a kaupapa Maori perspective and the host organisation for the ReachOut service, other existing relationships across the family violence sector were also critical to the successful establishment of this service for men affected by family violence. Within

the North Canterbury district both Government and Non-Government family violence partners had well-developed relationships and aligned views about the required need for and direction for change.

*“In Rangiora, they shared views about the ways in which family violence services should be developed. ReachOut went ahead because the relationship with (members) of the North Canterbury Family Violence Round Table all worked well and so it all came together ... everything (Police Family Violence Incident Reports and Police Safety Orders) goes through ReachOut.”*

In addition to building upon these existing relationships within the North Canterbury Family Violence sector, considerable effort was expended by the key designers of the ReachOut service to ensure key stakeholders were involved in every step of the development of the service – stakeholders that included not only service providers from the family violence and social service sectors, but also the views and opinions of men who might be potential clients of the service were consulted. The way in which these stakeholders were involved in the establishment of the ReachOut service and the results of these collaborative efforts are described by the stakeholders interviewed in the following excerpts from the interview transcripts.

*“Collaboration ... crucial to ensure all interested parties and key players were informed about the project from the outset ... all on the same page. NGOs all compete for the same dollars and relationships around projects can be strained. Having everyone involved assisted in the success of the project. Some competing agencies are still actively involved with the project and embrace it and that’s because there was buy-in from the outset. If they were not involved initially, then they would feel like an afterthought ... destructive.”*

*“Prior to the project ... talked to men (those that might be included in ReachOut’s target client group). They said they couldn’t think of anything better ... ability to communicate to individual men’s worker with no strings attached (non-mandated) ... huge benefit.”*

*“There was unanimous support from the community, Government agencies and social services. They recognised that they needed to do something to stop the cycle of violence that it would translate positively into the next relationship ... there were not nay sayers.”*

*“Got buy-in from all the organisations about its usefulness.”*

### 12.3 Establishing ReachOut: Issues to Consider During the Design Phase

There was unanimous agreement amongst the stakeholders that there was a “*lot to work through to get it operating.*” Stakeholders noted that during ReachOut’s establishment phase meetings amongst key stakeholder agencies occurred at both strategic and operational levels. Stakeholders referred to the establishment of a Steering Group for the ReachOut project – a Steering Group comprised of representatives from the key stakeholder groups. Moreover, they stated that it was through the joint effort and expertise of those involved that many of the business processes, policies and protocols were designed and developed.

*“Originally there was a lot of contact amongst the senior managers. Their meetings had a strategic focus ... lot of talking to iron things out and make sure things went smoothly.”*

*“(Before it was implemented) there were a lot of questions on both sides (men’s service workers and women’s service workers) ... How will we collaborate? How will we share information about clients and how will we manage the safety aspects around that? All these questions were dealt with at meetings (Steering Group meetings) ... no big issues and all dealt with really well.”*

The key issues, policies, protocols and procedures that stakeholders remembered working on during the ReachOut Steering Group meetings and other establishment meetings included:

- **Funding:** In April 2011, the Waimakariri Safer Community Council in collaboration with the North Canterbury Family Violence Network, applied for funding under the Ministry of Social Development’s Family-Centred Services Fund. The funding sought by this application was to provide the financial resources with which to “employ a suitably qualified and experienced practitioner to fill a Men’s Advocate role ... to engage with men identified through the police system via Police Family Violence Incident reports.”

*“The initial funding application was declined ... think it (the application) did not meet the fund’s eligibility criteria<sup>80</sup> ... so the question was where to from here?”*

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<sup>80</sup> The Waimakariri Safer Community Council received a letter from the Family-Centred Service Fund Panel Chair on 20 June 2011. This correspondence noted that this funding application had been unsuccessful. The letter noted that the Panel had “considered applications that most closely met the criteria of the fund in each

Subsequently, Aviva applied for and was successful with its applications for funding to provide the financial resources required to establish and implement a twelve-month pilot of the ReachOut service. This funding was secured from the Ministry of Social Developments Canterbury Social Support (Earthquake) Fund; the Todd Foundation Earthquake Recovery Fund; the Tindall Foundation; and, the Hugh Green Foundation.

- **Service Definition, Men’s Family Support Worker’s Role and Relationship and Interaction with Key Partnering Agencies:** During ReachOut’s design phase stakeholders remembered a number of discussions to clarify the service’s mission, business process and the role of those employed to undertake the service. Questions about the position of the ReachOut service on the continuum of family violence services – prevention, crisis, rehabilitation – were discussed as illustrated by one stakeholder’s comments:

*“Things were blurred at first ... talked about linking it to the It’s Not OK campaign ... Is it for men who have offended or is it for any man who is at risk of domestic violence?”*

Other stakeholders interviewed remembered discussions amongst Steering Group members about the exact nature of the Men’s Family Support Worker role; the timing and exact nature of the way in which the ReachOut service would interact with other family violence service providers. These questions are illustrated by some of the stakeholders’ comments:

*“At first the ReachOut service was not defined enough ... What would be the role of the ReachOut worker? What would the ReachOut worker do? When do we (other agencies) engage with you? We had to work out what the service was ... what the service needed us to do and how we would do that. A lot of agencies sat on the fence at first ... wondered how the service would fit with their roles ... you work with men and how does that fit in with our role working with families? ... How does it fit with our work with victims? How does it fit with our role of working with sentenced men?”*

*“A lot of groups were interested and curious but they didn’t know how this sort of service (ReachOut) would fit with the existing focus of their service ... they didn’t know the scope of what the service was about ... where it fitted into the*

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region” and that the “information provided in the application did not sufficiently demonstrate that the organisation has the capacity to develop and provide specialised family violence services.”

*current range of services. There was a lot of talking to iron this out ... things take a while to get clarity, but I think it evolved reasonably naturally.”*

These design factors were resolved through the development of a ‘business process diagram and associated explanatory document;’ a role description entitled “Family Support Worker, Rural Men’s Services;” and, the publication of numerous communications and media releases during 2011 and early 2012.<sup>81</sup>

- **Access, Confidentiality and Privacy:** Some stakeholders recounted discussions about ways in which to manage the perceptions and potential barriers for both men and women who sought services from an organisation that hosted services for those who perpetrated family violence and those who were the victims of such offending behaviour. In addition, they noted that issues that related to the confidentiality and privacy of those respective client groups were also identified and strategies were developed to counter such issues. Stakeholders describe these issues of access, confidentiality and privacy and the ways in which they were managed.

*“The issue for us was to ensure the men were not seen as the victim ... How would that look to the real victim? Could they (men) blame the victim ... use it against the victim? Would the victims lose faith in an agency set up to protect her, but also set up to protect him ... (the women) could think good on one side and bad on the other and you want to help the bad.”*

*“There were concerns about how men would perceive a service for them coming under the realm of a women’s refuge ... Would this be an obstacle to their contacting and engaging the service? This was handled brilliantly by Aviva ... (ReachOut) had its own brand ... not seen as having a direct relationship to a refuge.”*

*“Concerns were raised about the safety of people (in terms of) confidentiality and privacy ... managed well by ensuring that all conversations were made outside the hearing of others (conversations with women and men respectively undertaken by the Women’s Family Support Workers and the*

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<sup>81</sup> The policies, protocols and procedures associated with the ReachOut service were examined during a document review in support of the evaluation process. Several documents were reviewed including the ‘Men’s Services Initial Contact Form; ReachOut Case Management Form; Men’s Service Contact Sheet; Men’s Service Crisis Call/Telephone Process; Client Complaints Procedure; Disclosure of Information; Client Satisfaction Evaluation Form; and, the POL 400 Contact Letter.

In addition, a range of media releases and publications were sighted including those published in The Advocate – a regular publication released by Aviva (formerly Christchurch Women’s Refuge; The Blue Crusade – the Canterbury Police District Newsletter dated October 2012; and, various other Press releases.

*Men's Family Support Workers were undertaken in sound proof areas of the office) ... and ReachOut now has its own separate office."*

- **Risk Associated with Perverting the Course of Justice:** Stakeholders noted that considerable care was taken during the establishment of the ReachOut service to manage the identified risk associated with the potential for perverting the course of justice. To manage this risk a number of strategies were put in place including a rigorous recruitment process to ensure a candidate was selected who was a senior practitioner with exceptional skills, knowledge and experience; a rigorous training programme, ongoing professional development and professional supervision; and, the development of appropriate policies and protocols. A stakeholder described this issue and the way it is being managed in practice:

*"Considered the issue about whether the men's service might hinder the court service in any way ... for example, question considered whether in cases where a man has been arrested, goes to Court and (ReachOut) has contacted the man ... is there a risk around perverting the course of justice? (Risk) managed ... fully aware of need for confidentiality as related to sources of information about each case. When at Court with the men ... careful about what is shared with others ... what might impinge on his rights in the court process ... ReachOut worker is aware of his boundaries regarding privacy when he is working with clients and also what he learns about the other side of the case ... not relay back to the man. This issue has been considered from all angles and the (ReachOut) service has no effect on the course of justice."*

- **Risks Concerning the Capability and Safety of the Men's Family Support Worker:** Stakeholders also discussed the need to employ a Men's Family Support Worker who had the capabilities, attributes and experience to work with men within the family violence context. Some stakeholder comments illustrate the employee competencies required to work for the ReachOut service:

*"Wondered whether (the Men's Family Support Worker) might struggle to engage with the 'right wing' residents here (North Canterbury) ... could well have been an issue ... has engaged with right-wing people in our community and that is testament to the worker ... it's about employing the right person."*

*"You need a lot of common sense to operate in this environment ... it's the nature of the beast. (The worker) has to have good communication skills and risk management skills ... an ability to assess each situation, talk to the guys and if they are angry, talk them out of that. (The worker) has managed that really well and I know cases where he has had to talk them (men) down."*

Thus, for the designers of the ReachOut service, the establishment phase involved securing the financial resources required to support the twelve-month pilot; conceptualising the elements of the service's core mission – the domain in which it intended to operate along the continuum of family violence services, the clients it intended to serve, the geographical location of the service and the kind of service it intended to deliver; and, considering ways in which to manage key risks concerning the service's compliance with legislative and other regulatory requirements and risks concerning the capabilities and infrastructure required to support those employed to deliver the service.

## **12.4 Stages in the Life Cycle of the ReachOut Pilot: The First Twelve Months**

### **12.4.1 The First Six Months: Challenges Faced and Milestones Achieved**

The shift from the establishment phase of this new service development to the design phase meant that those who conceived ReachOut then had to turn their attention and focus to developing the supporting structures, policies and processes required to deliver the service as well as securing the required human resources.

Early in 2012 Aviva, as the host agency and accountable fund holder for the ReachOut service, convened a steering group to “steer the design, development, implementation and evaluation of the North Canterbury Men’s Service.”<sup>82</sup> The members of the Steering Group included representatives from Aviva (formerly Christchurch Women’s Refuge), He Waka Tapu, New Zealand Police (North Canterbury Police and Police Family Safety Team), Battered Women’s Refuge, Relationships Aotearoa, Child Youth and Family and the Community Probation Service. Throughout the pilot phase of the ReachOut service, the members of the Steering Group met monthly to:

- Provide specialist advice to inform the service model
- Receive and review progress reports and provide advice to inform on-going service delivery
- Identify any possible risks to the safe and effective delivery of the service and provide mitigation advice

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<sup>82</sup> Source: Terms of Reference for the North Canterbury Men’s Service Steering Group. The Terms of Reference were approved by the members of the Steering Group at their meeting on 21 May 2012.

- Inform and participate in the formative evaluation of the service (Terms of Reference, Steering Group, North Canterbury Men's Service).

One stakeholder comment reflected the utility and efficiency offered by this governance arrangement during pilot phase of the ReachOut service:

*“Regular Steering Group meetings have been held throughout to identify problems and gain multilateral agreement about ways to address issues which was much more efficient than extended dialogues with all the individuals separately.”*

In addition to this governance structure, a multi-layered management structure was put in place to support the ReachOut service. This management support was variously provided by a number of roles within the host organisation, including roles of Men's Service Development Manager, Operations Manager and Rural Service Coordinator. For example:

- The Men's Service Development Manager and the Operations Manager provided regular co-gendered professional supervision for the key workers that contributed to the ReachOut service (Women's Family Support Workers and Men's Family Support Worker from Aviva and Battered Women's Trust, and the North Canterbury Police Family Violence Coordinator)

*“Regular joint agency supervision that included the Police, the Women's Family Support Workers from Battered Women's Refuge and Aviva and the ReachOut Family Support Worker ... provided ongoing dialogue and communication about issues and risks ... case consults about what was going right and to identify any problems or gaps ... very beneficial.”*

- The Men's Service Development Manager provided leadership by engaging with others across various communities of interest to not only gain their commitment to the ReachOut service, but also to provide a range of community development and other family violence initiatives within which to nestle and support the service in the broader community context and position it as an outreach crisis response service within the context of other preventative and rehabilitative family violence services. Some examples of these initiatives and connections led by the Men's Service Manager were

noted in the minutes of a number of the North Canterbury Men's Service Steering Group meeting minutes during 2012 including:

*"Men's peer support hui ... on 31 May ... attended by Daryl Gibson from the Crusaders who will talk about the qualities of a great coach as an analogy for being a positive social role model and source of peer support to encourage other men to overcome violence."* (Steering Group meeting minutes, 21 May 2012)

*"Promote the It's Not OK brand ... actively ... (and) bring some E Tu Whanau marketing materials ..."* (Steering Group meeting minutes, 21 May 2012)

*"... currently following up from the Sophie Elliot hui in Rangiora around engaging more local men to become involved so will place a advert in local papers and get some air time with radio station to invite men who are interested in this work to come along for some free training and find out how they can help other men in their community* (Steering Group meeting minutes, 20 August 2012)

*"(Waimakariri Safer Community Council) talking to other community people who might be willing to meet to discuss how they could help in other ways to promote Rangiora / North Canterbury as a leader in healthy non-violent community to live in, these are mainly people in leadership roles in different sectors of the community such as Council, business etc."* (Steering Group meeting minutes, 20 August 2012).

*"... engaging the community on a broader level and is gaining some traction with this amongst the men in North Canterbury who may have influence ... trying to get some community buy-in by engaging people at top of organisations and/or other key people ... also trying to find enthusiastic people who are keen to look at community development projects like peer support or a men's drop in facility ... plans underway to place an advertisement in the local paper to engage men in conversations about family violence with a view to developing a volunteer workforce."* (Steering Group meeting minutes, 17 September, 2012)

*“Relationships Aotearoa ... excited about developing/supporting men along the lines of the kaupapa of the ReachOut Service and intend to develop a unique and localised programme that will be co-facilitated. A ‘physical outlet’ programme that has been developed for men to process and release anger and energy was described. Agreed that RA and CWR will draft an outline programme.” (Steering Group meeting minutes, 17 September, 2012)*

These engagement, community development and linkage activities carried out by the Men’s Service Development Manager were also noted by stakeholders who were interviewed:

*“They were considering ways in which they could relate to the community ... number of ideas ... drop-in centre ... peer support ... ideas stage and examining whether these were good ideas and what was needed ... think to implement peer support have to have a history with the men ... more a thing to look towards rather than something that is feasible at the start ... have to develop a bit before there would be people available to do that.”*

*“Talked about developing the group ... then thought a drop-in centre might work better than a group ... then both ideas fell into a hole.”*

- The Rural Services Coordinator provided day-to-day guidance for the Men’s Family Support Worker – guidance that included aspects of the controlling and organising functions of management, such as resource allocation, practice advice and support with the administrative and service reporting activities.

In addition to these governance and management considerations, the ReachOut service also turned its attention to human resource issues – recruitment, induction and training of the Men’s Family Support Worker. The position was advertised widely in the “Northern Outlook, Trademe ... Seek (and) through the COSS network” throughout March and April 2012. The preferred candidate was appointed and commenced work on 07 May 2012. An induction programme was developed that included introductions to the key stakeholders of the ReachOut service as well as attendance at a number of training events including “Advocates Training, Assertiveness Training and Quality and Innovations training”.

While the person appointed to the position of Family Support Worker for ReachOut began receiving POLs from about the third week of May 2012, an interim arrangement was put in place to receive POLs from 16 April 2012. The responsibility for this interim arrangement was undertaken by the incumbent in the Men's Service Development Manager role, albeit that some prioritisation was applied to the task in order to accommodate the other responsibilities of this management position.

*"... a discussion about prioritisation, it was agreed that (each POL would be assessed to) determine which (men) would be contacted as a matter of priority ... in order to mitigate any potential risk"* (Steering Group Meeting minutes, 02 April 2012).

*"It was agreed that ... men requiring immediate support (would be referred)"* (Steering Group Meeting minutes, 23 April 2012).

In addition to addressing these governance, management and human resource issues, the ReachOut service also developed formalised protocols, such as organisational and service level agreements between key Government and Non-Government organisations with whom it interacted. For example, a Letter of Agreement (LoA) entitled 'Family Violence Incident Reports in North Canterbury' was developed and signed by key signatories on 24 April 2012.<sup>83</sup> Led by the Police, this LoA defined the way in which the partners would work together to reduce family violence, in particular the way in which they would liaise with the Men's Service; sealed an agreement that every Police Family Violence Incident Report identifying a male perpetrator would be forwarded to the Men's Family Support Worker, at Christchurch Women's Refuge (so named at the time) North Canterbury Rural Office; and detailed the way in which the information contained in those Reports would be managed in order to meet the principles and provisions of the Privacy Act, 1993 and other regulatory requirements.

Brand development and marketing of the ReachOut service was also a key topic of discussion during April and May 2012. A "wallet card ... (was) developed for Police to hand to the men when they attended a family violence incident ... (and for)

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<sup>83</sup> The signatories to this letter of agreement included the Canterbury District Commander, New Zealand Police and senior managers from Christchurch Women's Refuge (now Aviva), Victim Support New Zealand and the Battered Women's Trust.

distribution through a range of community services and locations;”<sup>84</sup> an 0800REACHOUT helpline was established;<sup>85</sup> an email address (reachout.org.nz) and website were developed; and, a range of “printed information resources for men ... from agencies including the Family Court, ALAC and others ... were ordered and copied” (Steering Group Meeting minutes, 02 April, 23 April and 21 May 2012).

Operational policies and procedures to support the operation of the ReachOut service were developed during May 2012. Their development was completed during meetings attended by representatives from the two duty refuges operating in North Canterbury and “it was agreed that the procedures were to be the same for both agencies” (Steering Group meeting minutes, 21 May 2012).

*“Systems were put in place quite early on and administration worked out before it started. The first six months was really about learning by doing ... how would we work together ... how did the work with clients go ... it was all a learning curve.”*

During the period from May to July 2012, there was considerable debate about the timing of the ReachOut service’s contact with men. This debate concerned the issue of ensuring the safety of family members associated with the men named on the Police Family Violence Incident Reports as well as ensuring that the men were contacted in a timely manner following Police callouts to family violence incidents. Questions considered by the agencies involved in responding to the Police Family Violence Incident Reports were described by one stakeholder interviewed:

*“(Questions) round time management ... When get the POLs who would ring first ... men’s worker or women’s worker? Would it make a difference for the women if she was contacted first ... how would she feel? ... Would it affect her safety if the men were contacted first? When and how would the men’s worker let us (women’s Family Support Worker) know he had contacted the men ... and how much information could be shared?”*

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<sup>84</sup> This ReachOut wallet card was also referred to as the ‘0800ReachOut card’ and it included the It’s Not OK brand.

<sup>85</sup> The Steering Group agreed that the 0800 help line would only operate during the working week initially until further capacity had been developed to extend its availability. Steering Group members “agreed that the help line must have a clear recorded message advising callers what to do in the event of an emergency or crisis” (Steering Group meeting minutes, 23 April 2012)

At their 21 May 2012 meeting the members of the ReachOut Steering Group decided that the service needed to “receive confirmation from the duty refuge before making any attempt to engage each man named on the POL” (Steering Group meeting minutes, 21 May 2012). This protocol resulted in delays in contacting the men as soon as possible after the Police family violence incident callouts. Stakeholders describe this issue and the manner in which it was resolved:

*“Established a less cumbersome protocol concerning the timing for contacting the men ... decided to use a green light/red light approach ... decision based on (the fact that) it was reasonable to assume that the men would be expecting a call from ReachOut because the Police had given them that advice and the belief by the (Steering Group) that there was no additional risk for the women if the men were contacted first.”*

*“Whether to contact or not contact the men ... concern of the refuges ... green or red light uncertain during earlier period as concerned about the risk to women. We got the green light and have not seen any increase in risk to women yet. This environment is really risk adverse but really there is more risk if the men are not contacted in a timely manner ... do the risk assessment and the way it is done is right so counters the perceived risk. This is working (and) is a major transition for the project.”*

*“A decision was made to respond to all POLs unless a red light is given by Police or Refuge. This will prevent delayed times when contacting. All men are told that they will be contacted by a male Family Support Worker” (Steering Group meeting minutes, 23 July 2012).*

This ‘first contact’ protocol was not the only one discussed during the first six months of the implementation of the ReachOut service. There were also discussions about the eligibility criteria associated with the target group for the service and the potential for increased risk for women if ReachOut met with the men in their homes. Of the policy concerning men’s eligibility for service, members of the Steering Group came to the following decisions:

*“With regard to responding to referrals from men outside North Canterbury, it was agreed that either partner must be living in North Canterbury ... in order to maintain capacity to deliver in North Canterbury these will largely be referred onwards and only very exceptionally result in any direct service provision” (Steering Group meeting minutes, 21 May 2012).*

*“... whether ... seek to engage men who are named on POLs as witnesses to family violence ... project’s purpose is to engage men who have been named on POLs as perpetrating family violence ... agreed that there were exceptions,*

*such as male witness, individual cases would be considered” (Steering Group meeting minutes, 18 June 2012).*

Of the issue concerning the ReachOut service meeting with men in their homes, the members of the Steering Group were somewhat divided in their views as noted in the minutes of the June 2012 Steering Group, however it was decided that the ReachOut service would “liaise with the respective Family Support Workers for women named on the POL before deciding if a home visit might be appropriate.”

*“... meeting some men in their homes ... raised a number of questions and concerns ... some of those working with women expressed concerns about the potential for this approach to increase risk ... (others) expressed support ... for home visits. It was generally agreed that we need to be open to exploring new ways of working ...” (Steering Group meeting minutes, 18 June 2012).*

As well as ironing out the issues associated with the operationalisation of ReachOut’s policies and protocols, from about September 2012 the issue of meeting the demand for service within existing capacity emerged as a significant issue. After considering the various options for managing demand/supply issues, it was agreed to apply a prioritisation system to support decision making. The minutes of the September and November 2012 Steering Group meeting minutes describe the issue and its resolution:

*“In view of the current challenges around managing demand and capacity, the possible need to develop a system of prioritisation was considered ... clarified that the service standard is to attempt contact with the man named on every POL and, that, within this context, there may be value in building a system for identifying which men should be contacted first and the number of attempts made at contact.”*

*“In view of (the) workload, members considered the need to develop a set of criteria for prioritising work with men. Members agreed that priority should be given to engaging men in crisis and those who are not already linked into the system in some way.”*

A number of stakeholders also noted this supply/demand concern and their perspectives on the issue as they described it during the interviews follow:

*“Service was growing and issues concerning capacity and workload were discussed.”*

*“Lot a fear about how men would respond to being contacted ... got over that and then the flood gates opened ... no control ... like playing with extremes ...*

*dribble coming from the demand then all of a sudden the flood gates were open and every man could be contacted ... no preparation for that ... then systems were developed to prioritise that ... challenging time.”*

*“First six months... sensed a lot of fear and concern over the engagement with men ... what will it mean for the women if work with the men ... that’s gone ... the fear is gone and so freedom to do the best for the men ... huge milestone.”*

In addition, it was becoming increasingly evident that contacting many of the men named on the POLs was challenging. Stakeholders believed that such difficulties were exacerbated by several factors, including the men providing inaccurate contact details to the frontline Police attending the family violence incident callouts; men knowing they may be contacted by the ReachOut service and choosing not to answer their phones; and, men only answering their mobile phones if the caller was known to them. In order to provide additional opportunities for men to access the ReachOut service, the service initiated a practice of sending letters to the men whom they were unable to contact by phone – letters that invited men to consider taking up the opportunity to engage with the service.

Two other aspects of the ReachOut service were also addressed during the first six months of its operation. These aspects concerned the need to develop a monthly progress report template and the need to find office space for the ReachOut Family Support worker to meet with the men engaging with the service.

At the 21 May 2012 Steering Group meeting, members were advised that “a written progress report (will be presented at the next) hui (and this and subsequent reports would) assist with managing risk and recording the project’s history.” The first of these progress reports was presented at the June 2012 Steering Group meeting and subsequently the service used a ‘progress report template,’ developed with input from members of the Steering Group, as the basis for such reporting.

Throughout the period from July to November 2012, it was repeatedly noted in the Steering Group meeting minutes that there needed to be a separate and ‘neutral’ office space for the ReachOut Family Support Worker to meet with the men engaged with the service. During the initial months of its operation, such engagements were variously held in a range of public venues, such as cafes or in the men’s homes. Finding a suitable office space was challenging in the post Canterbury earthquake environment with many buildings being demolished and others out of commission due to work on building repairs. While a number of Government agencies offered

interim office space within their buildings, stakeholders were of the view that a more 'neutral' office space would be preferable. At the end of the first six months of the Reachout pilot this issue remained unresolved.<sup>86</sup> One of the stakeholders interviewed explained the possible implications of this office accommodation issue:

*“Meeting the men within their homes and communities ... some indication that some men are suspicious about the need to meet the worker in their homes or in public places ... having to conceal the location of the worker’s office within the women’s refuge. Prefer a men’s space where meetings can take place in a private environment and where men can drop in for support at times that are convenient to them ... (if this space is not provided) the level of engagement with the men may be less than optimal.”*

Stakeholders interviewed were asked to assess where on a service development life cycle continuum they thought the ReachOut service was positioned at the half way mark of the twelve-month pilot. The stages of this continuum ranged from birth to youth to midlife to maturity.<sup>87</sup> While the majority of stakeholders interviewed were of the view that the ReachOut service was in the 'youth' stage of the service life cycle half way through its twelve-month pilot, some had varying opinions with one stating that they thought the service was at the mid-life stage while two other thought that it was at the 'birth' stage.

#### **12.4.2 The Second Six Months: Challenges Faced and Milestones Achieved**

During the second six months of the implementation of the twelve-month pilot of the ReachOut service, stakeholders observed that the focus of attention shifted to enhancing the sustainability of the service in the longer term. This focus on sustainability was required to ensure the service could withstand the pressures that inevitably occur as it shifts from one stage in its life cycle to the next. In particular,

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<sup>86</sup> This accommodation issue was resolved during the second six months of the pilot. Office accommodation was secured from the Waimakariri District Council and is available for the ReachOut service's use for the next three years.

<sup>87</sup> The management literature suggests that there are design implications to be considered as a service moves through its evolution or life cycle over time. Typically services move through various stages through their evolution from birth (in which the designer runs a service that is small in nature with a relatively simple structure) to youth (in which the service begins to grow rapidly and the initial structures and processes show signs of stress due to these rapid changes) to midlife (in which structures and processes become more complex and formalised and there appear more levels in the chain of command) to maturity (in which all aspects of the service become more stabilised both in terms of its financial and performance sustainability) (Schermerhorn, J.R., Campling, J., Poole, D. & Wiesner, R. (2004) *Management: An Asian-Pacific Perspective*. Australia. John Wiley & Sons Australia Ltd.)

the ReachOut service began to give more attention to securing the requisite financial resources; adjusting its structure to support a more formalised approach to service provision; enhancing the rigor of its policies and procedures; and, further securing connections and linkages both within the organisation in which the ReachOut service is hosted and externally with other partnering agencies and communities of interest.

Early in 2013, Aviva secured a further three years of funding from the Ministry of Social Development's Family-Centred Services Fund. This funding is intended to both sustain the current level of service provision within North Canterbury but also extend the service into the Christchurch and Selwyn districts.

Some stakeholders interviewed also noted the focus on the future sustainability of the ReachOut service – economic, systemic and human resource sustainability.

*“Need to look towards sustainability ... funding and systems”*

Many of the stakeholders interviewed alluded to the burgeoning demand for the ReachOut service and the need for more men's Family Support Workers to meet the growing demand for service.

*“Managing the demand has been an ongoing issue ... for the same number of POLs distributed to the refuges and ReachOut there are two and a half times as many Family Support Workers for the women than there are workers for the men. Since the recent changes in management, there have been new approaches put in place to manage the cases within the capacity available.”*

*“Intervening at the crisis stage for men is definitely well supported and used ... more confidence in the service ... there is a lot of work but how can it move forward without more resources?”*

In addition to this need for more financial and human resources to support the ReachOut service into its second year of operation and beyond, stakeholders noted that, while much had been achieved during the first six months of its operation, more was needed in terms of streamlining the structures of management and professional guidance that supported the service. For example, some stated that while ReachOut had been supported by a manager and a professional leader during its first six months, they believed it would be beneficial to simplify the chain of command as the service moved into the second six months of the pilot. In addition, others suggested that more was required to enhance the procedural and infrastructure requirements of

a maturing service. Stakeholder comments describe these management and infrastructure developments:

*“More structure, formal layers, chain of command clear and supports are just there.”*

*“Structures have just started to be put in place. A formal management structure has just been implemented ... reduced the multiple layers that were not very helpful. This change has been huge. Systems only just getting into place and (more needs to be done) to streamline them to make them easier.”*

*“Plans and procedures are in place but need to be constantly refined.”*

*“Just got his own office where he can safely meet the men.”*

*“The specifics are being put in place ... forms, processes and supervision because of the new management introduced ... drawn on experiences with paperwork (in other organisations) and applied this expertise to the service.”*

*“Just got in a director of operations ... just looking at structures and trying to formalise the chain of command. It’s really still a project.”*

*“The energy and commitment to the service and its goals are still there ... passion is still there. Now there are more structures in place but it’s at the very early stages.”*

Within the context of the Steering Group meetings during the first months of 2013, discussions focused on further enhancing a range of infrastructure elements associated with the service. For example, members discussed “streamlining the paperwork;” further work on policies, such as the “safety policy;” and, ensuring that there was the right ratio of hours devoted to the delivery of services to men and the other employee responsibilities associated with attending meetings and completing administrative tasks (Steering Group meeting minutes, May 2013).

Stakeholders also mentioned their increasing understanding about and confidence in the success of the ReachOut service.

*“There is increasing structure ... see that happening now. During the pilot we were all in the dark ... Is it going to get further funding to continue? Is it going to work? It’s definitely on the road now with good outcomes for clients both for the men and women ... got to the point where it is successful. The work has been done and it has worked. If not show that, then difficult to get more funding.”*

The foundation for such confidence was not only associated with the perceived success of the ReachOut service for men who perpetrate violence and members of

their families affected by such violence, but also with whanaungatanga – a sense of connection and relationships both within the host organisation but also with those external to the service. One stakeholder’s comments elaborated on the way in which whanaungatanga was strengthened and as a consequence of this others had confidence in the effectiveness of the service.

*“Whanaungatanga ... the golden thread and how we are united in that now ... got to know (the service). Some of the angst in the sector and the agency ... If we start to work with the men, what will that mean for the women’s services? ... take away dollars from the sector. Instead of saying what a great service for whanau, they say we will lose out on the funding. Now (people) see that ReachOut has enhanced the safety for families and the fear disappears because they see it.”*

According to the stakeholders interviewed, this level of connection has resulted in more intense efforts to engage and collaborate with others to not only share the journey of this outreach, crisis response model of service with others, but also to begin the task of co-developing post-ReachOut services for the men with whom it engages. Stakeholders illustrate these developments:

*“People are really interested in it now ... asked to speak around the South Island as groups are interested in setting it up elsewhere ... They went to Timaru and Blenheim to talk to family violence networks ... people are really interested in what is going on here.”*

*“( Work has begun on) collaborative work between Aviva and Relationships Aotearoa ... funding for North Canterbury area (to) pilot a co-gendered DV group for men.”*

Stakeholders reflected on the overall progress made by ReachOut during its pilot phase. They were somewhat divided about where Reachout was positioned after twelve months of operation. While the majority of stakeholders believed that the service had reached the ‘mid-life’ stage of the service life cycle, others were somewhat polarised in their views with one believing that the service was entering the ‘maturity’ stage, while another believing it had just entered the ‘youth’ stage.

## **12.5 Moving into the Second Year of Operation: Strengths to Nurture and Suggestions for Fine Tuning**

### ***Strengths to Nurture***

Three inter-connected and foundational elements of the ReachOut service were identified by stakeholders as strengths to nurture in the future. The elements that

stakeholders identified were relationships, the family systems capabilities of the men's Family Support Workers and the family-centred model of the service. Regarded by stakeholders as the hall mark of the ReachOut service, these elements are based on the concept of whanaungatanaga – relationships through shared experiences and a shared vision that provided a sense of connection, belonging and a 'one-people' approach that results in the parties accommodating and supporting each other through reciprocity.

For the professionals that work for, contribute to, or are connected to the ReachOut service, one of the success factors associated with this new service development concerned their relationships with one another. Stakeholders noted a range of characteristics associated with the relationships between the representatives from family violence sector agencies in North Canterbury and the ReachOut service, including:

- **Reciprocity** – a sense of mutual responsibility to support and assist each other in their respective roles

*“Having established relationships with colleagues (Police, Community probation Service, Child Youth and Family, Women's refuges, Waimakariri District Council) and responding to their calls, needs, referrals ... (enables) information sharing ... get information would not have otherwise, ... get office supplied, ... help within the court system”*

*“Talk to partners ... How can we continue to strengthen families? What can we do to support each other in the work? Collaborative trainings ... office free of charge ...”*

- **Shared kaupapa** – a shared strategy for enhancing the safety of individuals, families and communities

*“Public safety is the uppermost factor as (a men's Family Support Worker) ... knowing that (means understanding) the needs of (the women's Family Support Workers)... enhancing the safety of the victims ... the women and children. Critical to think of this (safety) as an extension ... whanaungatanga ... as it also links to the needs of the clients ... men's need to be safe for their loved ones. Whether there is a separation process that they are going down or getting back together, the men know safety is of uppermost importance. Safety of the public important to the work of the Police, Child Youth and Family ... whanaungatanga ... same thread going all the way – safety. So, because we know the needs of each other, we are able to strengthen our relationships, comply with each other ... same direction ... same*

*thread/connection throughout. Whanaungatanga makes for seamless approach when working together as we are one-minded about this.”*

*“Same vision for the future ...excited about that and happy to be part of it ... an important development and all the positive experiences ... collaborate and contact each other ... talk to each other.”*

- **Sense of belonging and ownership** – a sense of connectedness to each other and a collective, rather than individual ownership of the ReachOut service

*“In North Canterbury managers know each other and so do the practitioners know each other ... everybody really well connected there ... They have created networks of people.”*

*“Relationships with the other agencies and their communication with each other ... feels like it (ReachOut) belongs to the community, rather than the agency that runs it ... not their programme but our district’s programme ... agencies within the community feel connected to it ... we know the people.”*

*“Relationships out there ... good communication between the women’s and men’s services and the rest of the community.”*

- **Trusting, Open and Honest Communication**

*“(Established) initial rapport, built relationships and understanding amongst each other ... that developed professional relationships (based on) trust ... then ongoing communication assists with what you are trying to do. The success is open and frank discussions round each aspect of the project ... no hidden agendas and same aims – reduce risk and do best by families.”*

- **Shared experiences and concerns** – the parties work together to address the family violence issues

*“Regular meetings provides an opportunity to see each other face-to-face ... share problems and issues in relation to clients ... men had no one to turn to ... has made a huge difference ... this is an essential service.”*

This sense of being connected as a ‘whanau of professionals,’ was also reflected in stakeholders’ comments about the point of difference associated with the capabilities of the ReachOut staff who work with the men and the model of practice at the core of the service. For example, stakeholders alluded to the specialised worker capabilities required to deliver ReachOut’s “whanau/family systems” approach; and, while stakeholders mentioned a number of unique qualities of the ReachOut service, the holistic, family-focused and strengths-based model of service was highlighted. The family/whanau-centred element of the ReachOut service and other characteristics

that stakeholders believed were its point of difference to be nurtured are noted in the following comments:

*“Strengthen families model that is more holistic ... challenges our western view of the family ... (ReachOut) approaches men in a therapeutic way to motivate them to have a role in their families that keeps women and children safe.”*

*“Immediacy, responsiveness (of the service) is its strength.”*

*“A strength is (the service’s) capacity to respond quickly and promptly.”*

*“Engagement with men ... sign up and come on a voluntary basis ... not forced to do it ... the guys who come in the door are the men who are asking for help ... great.”*

This reference to the voluntary nature of the ReachOut service was noted by a number of stakeholders. They emphasised the importance of ensuring that this service was not perceived as part of the range of statutory services offered by various government agencies – a perceived independence that facilitated empowering men to become agents of change, rather than having change imposed upon them by outside forces. Many of those interviewed believed that tapping into men’s internal motivations for change had a better chance of ensuring that they persisted with the effort required to progress along the journey towards a violence-free life.

*“It’s best that men do not see ReachOut as in cahoots with statutory services. They need to be seen as separate. NGOs do better with the men than we do ... they get better buy in than agencies of authority.”*

### **Suggestions for Fine Tuning**

While all the stakeholders interviewed acknowledged the significant achievements made by ReachOut during its first twelve months of operation, they also recognised that more is required to ensure that it achieves its objectives in the longer term.

Of its core practice model and approach, stakeholders were of the view that more is required to deliver a family-centred model within the context of the family violence sector – enhancements that not only relate to the ReachOut service itself, but also the supporting elements of the system of which it is a part. There was some concern expressed about the siloed nature in which different elements of the sector worked with individual members of families – women, men and children – and that in many

cases this work remained separated despite the fact that many families decided to remain together and/or individual family members continued to interact in terms of the access arrangements for the children of the family. While the professional stakeholders acknowledged that measures needed to be put in place to mitigate the inherent risks associated with families with lived experience of family violence, they favoured a family-centred way of working that included all members of the family as well as others in their extended community environment. One professional stakeholder described this family-centred way of working that included all members of the family as well as others in their extended community environment.

*“When I hear talk about developing safety plans for women and children and the men are being worked with somewhere else, he’s not contributing to the safety plan. What needs to be considered is what role does he have in that? It’s better for the children to hear Dad say this is what I am going to do within this safety plan. It’s about the timing of that. Also need to involve all the various people who have their eyes on the family and can in some way contribute to the safety of the family ... sports coach ... How could they be involved? If you have one organisation that is working with the men and the women, then it is in the best place to take that kind of approach.”*

Within the context of the current model of practice, some stakeholders believed that the ReachOut service was more likely to access information about the ‘real’ circumstances of families within their natural environment. They argued that this more accurate picture of each family’s circumstances was assisted by its location in community settings (compared to office-based services), such as the home, as well as its emphasis on inviting, rather than mandating, men to take responsibility for their change efforts – efforts that have the potential to enhance the safety of themselves and their families. While stakeholders commented on the added value that ReachOut had brought to the efforts of the team comprising the Family Violence Round Table, they also alluded to the limitations of the ‘expert’ views on families’ level of risk and safety. Moreover, many stakeholders believed that more could be done to facilitate information sharing amongst those who were respectively working separately with various members of families - women, men and children. The following stakeholder comments further explain these views:

*“Family Violence Round Table ... have a lot of judgements about a family based on incident-based stuff ... not have real feeling about where the family is at ... What do they want? Who are their natural resources? Not come together yet. There are the beginnings of that in ReachOut ... where the*

*man's at and where the woman's at ... information they bring to the Round Table is a lot richer than it used to be."*

*"Currently (ReachOut) is looking at how to support the men ... but need to consider how to support families ... that bit needs to be nurtured. I think they are getting there in terms of strengthening the men ... thinking about family assessments is probably the next step ... if you've got family violence in the family and the (men's Family Support Worker) thinks Dad is (in one position) in terms of risk and got refuge workers thinking that the risk is located somewhere else, how can this (two sources of) information be brought together to develop a picture of the whole family?"*

Other stakeholders interviewed were also keen to further enhance efforts around information sharing across disciplines and agencies and one made a suggestion about the way in which this could be achieved within the current regulatory environment:

*"At the Round Table there is an information sharing agreement for Police, Child Youth and Family, Immigration and the Courts ... this doesn't include the refuges. (We could) get around this by asking (each client) to sign a release of information form and then we can contact anyone whose name is added to that form."*

While many stakeholders interviewed were keen to promote more information sharing about the ReachOut service, they were somewhat divided about the purpose of such communications. For some, there was still confusion about the core purpose of the service and the specifics of its business process model. They argued that more was needed to clarify this, for both professional stakeholders and the men as clients, and that once this was achieved then more effort should be exerted to promote the service more widely. Some stakeholder comments further elaborate these points.

*"What is the purpose ... Can anyone ring at any time? Can you only contact if the Police have been called out? Are there two points of entry? - general referral and POL referral? If it's a general referral, then good to link it with 'It's Not OK'. Could use volunteers as the first response on a ReachOut phone line. From the men's point of view, they need to know if they ring ReachOut wanting help, what would that help look like? What would be suggested to them?"*

*"Need to make people more aware that it is there ... posters, campaign."*

For other stakeholders, the ReachOut model of service and its intent was clear. In these circumstances and from their perspective, more work was required to promote

the model of practice and lessons learnt both to audiences outside of the North Canterbury district as well as to the practitioner audiences working within the family violence sector.

*“There has been so much hard work done to get the model where it’s at now ... successful. Now need to do a lot of hard work to promote it in other areas and get them to agree that the principles underpinning the model need to be nurtured and tout it as the way to do it.”*

*“Good for staff in agencies to hear about the success stories ... what they (ReachOut) see working in terms of engagement with the men and (in terms of engaging with) the agency.”*

As well as further development of the ReachOut family-centred model of service and further clarification, understanding and communication of the various elements of this model, stakeholders were keen to further enhance the evidence-base associated with the service. They argued that this enhanced evidence base and supporting information management system would improve decision-making; improve reflective practice; and, enhance the efficiency of preparing accountability reports. A stakeholder’s comments explain the issues and the rationale for further enhancing ways in which to measure results:

*“Need to develop a culture of measurement so that evidence-based, reflective practice is valued by all. This requires staff to make a commitment to regularly and accurately collect and record data. There is a responsibility to identify if family-centred services are making a difference and so we are currently developing RBA measures for each of the services, including ReachOut.”*

Lastly, stakeholders advised that more needed to be done to manage the demand and supply equation. They recognised that during the last few months of the ReachOut pilot demand for the service had burgeoned and that the capacity to meet such demand was finite. Stakeholder comments describe this concern:

*“Quantity of service capacity in relation to the demand ... need to have the ability to do what needs to be done.”*

*“Workload and which clients to take on ... POLs only? Referrals from other agencies? ... Do they have the capacity to take that on?”*

In part, stakeholders believed that this increasing demand for service had resulted, to some extent, from the growing understanding within the community of men who could potentially be the service's target group and those who interact with them, that ReachOut offered the type of service that would be responsive to their needs. Two professional stakeholders described the link between men's perceived expectations of service and the potential for an increasing demand for the ReachOut service.

*“When men find out they are not beaten up (non-judgemental and voluntary), offered support and interested in their welfare ... are you OK?, then from a clinical point of view, that's got to be attractive to men.”*

*“Men want to know they can re-engage with the ReachOut service at any time during their journey of change ... it means something to the men and they want to know they can reach out and ask for help when they need additional support to carry out their safety plans. Men need to know the service is available at the time they need it.”*

In addition to this 'pull' factor, the men's Family Support Workers also described the intensity of the work – a situation that was not expected when ReachOut was first established. Their experiences of the intensity and demand for the service are outlined in the following comments.

*“Not realise how in-depth the work would be ... how much demand on me as a worker ... there is the work with the men and also the preventative and the promotional work. In kaupapa Maori, you work until the work is done. For example, yesterday, had three home visits, Oxford, town and Ashley ... got to see all the guys, but full on sessions ... could not have fitted anyone else into the timeframe that was appropriate to ensure the effectiveness of this way of working.”*

According to those interviewed, ReachOut's value lay in the service's rapid response to men seeking support, and in order to maintain this point of difference, it was essential to manage capacity in such a way that men continued to receive service in a timely manner. A professional stakeholder's comments described the dilemma that this creates for those managing the service.

*“Currently we have the resources to respond effectively. If we are not careful, then we could become another service with a two to three week waiting list. What's unique and special about this service is someone calls right now and we have space to see them relatively quickly. Our success could be our downfall ... not have the capacity in the future to remain authentic to our (model of) service.”*

All stakeholders interviewed recognised that ReachOut would “need more financial and human resource support to grow.” Many suggested ways in which to enhance the capacity of the service to meet the growing demand, for example one stakeholder suggested investing in the recruitment and training of both a paid and volunteer workforce.

*“They need to look closely at the ability to have more staff or volunteers to assist with the project. Need more men out there to help with the workload.”*

*“They need extra men to respond effectively.”*

In light of the uniqueness of the ReachOut model of service with its focus on “quality” rather than quantity, stakeholders were of the view that care would need to be taken with the approach to funding bodies to seek additional financial resources with which to maintain the integrity and effectiveness of the service. They observed that traditionally family violence agencies “had to wear out their staff and get a waiting list” in order to secure additional funding for existing services. A key question for ReachOut to consider in order to ensure the sustainability of this unique model of service was:

*“How can the service secure additional resources in a bums-on-seats environment that focuses on how often we do it, rather than on the quality of what we do?”*

While the professional stakeholders recognised the criticality of securing adequate resources to sustain the unique model of service offered by ReachOut, they were also cognisant of the fact that this service was but one element of the continuum of services that contributed to addressing the issue of family violence in New Zealand. Within the context of this continuum, they pointed out that one of the challenges faced by ReachOut was how to successfully move men into other services to meet their varying and ongoing needs. A professional stakeholder’s comments outlined this challenge and also provided suggestions for a process with which this identified challenge could be addressed.

*“The question is how to move the guys to other services. ReachOut needs to be careful that it doesn’t take on too much. This shift from (ReachOut) to other services could involve (ReachOut) going with the guy to the first counselling session and then withdrawing. It’s a question of how to do the bridging between engagement and into other services and continue moving men through the change process, rather than trying to solve it all themselves.”*

In addition, to this transfer process suggested by this professional stakeholder, others interviewed believed that if the men experienced an accessible, responsive and useful service whilst engaging with ReachOut, they were more likely to have faith in other service providers suggested for specialist and ongoing support with their change efforts.

*“If they have a good experience with (ReachOut), then we can say ‘I know another good group of people to support you’ ... marae, alcohol and drug ... and because we developed a good way of working with them, then men might think that these other people could be very useful as well.”*

### **13 Extending ReachOut to Other Localities: Fidelity Versus Reinvention**

When asked to identify the key elements of the ReachOut service that need to be retained to ensure its point of difference or value proposition is maintained if it were adopted in other locations, stakeholders were confronted with balancing the concepts of fidelity and reinvention. For these stakeholders fidelity referred to the accuracy, consistency and commitment of those adopting and implementing the service in other locations to faithfully reproducing it as prescribed – an approach that ensured that the service did not ‘dilute’ key components so that it failed to achieve expected benefits. Simultaneously, they acknowledged that adopting a new service development in another location would require some tailoring, modification or customisation to suit local needs.

The elements of the ReachOut service that stakeholders believed should be faithfully reproduced to ensure its value proposition was maintained included:

- Factors associated with its initiation, such the community development and collaborative approach adopted
- Factors that differentiate the model of service and contribute to its effectiveness
- Factors associated with the host organisation that provide the service with a supportive infrastructure

### 13.1 Community Development and Collaborative Approach

All stakeholders emphasised the importance of seeking stakeholder support – support initiated at the initiation phase and continued throughout the implementation phase. They believed that if stakeholders were involved in conceptualising and planning the service, then they would develop a sense of ownership and commitment to its adoption. Moreover, they were of the view that such consensus building amongst stakeholders was critical to successful outcomes. One of the stakeholders described this consensus building process during ReachOut’s initiation phase – a process that involved building on existing networks and relationships; and, using the community of interest’s local knowledge about need, the most appropriate way to address the identified need and risk identification and mitigation. This stakeholder’s comments reflect the views of all other interviewed – views that maintained that if this collaborative approach was adopted it would ensure the service designers would “get it right the first time” and ensure that “everybody in the system is on board ... and has a shared and real understanding.”

*“Start with existing networks and if it goes to an urban area, don’t try (to approach people city wide ... do it on an area by area basis. Why collaboration works here (North Canterbury) is because we started with the people we knew ... already had networks across the district that had been here for a long time. Sometimes when programmes are rolled out nationally, you get direction from those with authority and then the service just has to follow the plan. We established the service in the opposite way to this. We started with what people thought was needed. If you don’t do that, then there is a chance you will get it wrong. It needs to come from the community, with the support of local networks and set up in a collaborative way. You have to start with what the community wants.*

*Start with a collaborative, scoping meeting that is pitched right. Give them information about the situation, a brief about what the service might look like ... then invite them to consider research they know about and apply their local knowledge to consider what this might look like; ask them to identify the risks because they know their community and what’s evolving within it. Needs to be planned with local knowledge from the bottom up ... that’s why it works here. If you start with an agency leading it ... we’ll apply for the funding, then that agency is the lead of it and there might be other agencies that applied for the same funding and automatically you have not got buy-in ... people might not like the agency that got the funding but have a good relationship with the agency that didn’t get the funding. This can be avoided if start with collaborative meeting.”*

### **13.2 Essential Elements of the ReachOut Model of Service that Contribute to its Value Proposition**

Stakeholders identified a number of elements within the ReachOut model of service that they believed underpinned its efficacy. Moreover, they argued that these elements were essential to the quality and evidence-base that provided the foundation for the ReachOut service. The elements of the ReachOut service identified by stakeholders that they believed were its essential hallmarks included:

- ***Immediacy and responsiveness following a point of crisis***

*“Immediacy and responsiveness ... quick turn around ... make contact with the men quickly ... need to maintain that.”*

*“Have a mission statement that says the service is for perpetrators to address domestic violence in real time ... not wait for appointment two weeks later for counselling. With this option men are in the remorseful stage after the violence ... in crisis (and) this is a great opportunity for change.”*

*“At the point of the (family violence) incident ... an opportunity for the men to talk to someone ... point of difference from what has happened in the past.”*

*“What’s different is that it is right there and then at the point of crisis, not months later after the Court process and told to go to a programme. Research shows that this does not work for men. Talk to someone in crisis ... nothing is straight forward ... could be need help for other issues ... this approach can help men in lots of ways ... help them to deal with it right there and then.”*

*“(Family violence incident) really important as a key point of engagement ... crisis is a point when people may move ... at that time there is a whole lot of implications about what may happen because of the incident ... point of change to move a family ... crisis pushes change.”*

- ***Voluntary Participation and Non-Judgemental***

*“Engage (men) voluntarily ... not judge ... challenge behaviour, but not judge him... judging just increases his sense of shame ... whakama about himself ... genuine relationship between the worker and the man.”*

*“Needs to be non-mandated ... research shows when men are forced to attend programmes, it doesn’t work.”*

- ***Family-Centred Service and Whanau Environment for Partnering Agencies***

*“Focus on families is the point of difference ... working with the men to strengthen families.”*

*“Importance of considering support for both men and women ... at each POL the engagement is made with the men and the women ... this is the point of change for a family. ReachOut has brought the beginnings of a family-centred approach ... where the men are at and where the women are at. This information brought to the Round Table is a lot richer than it used to be.”*

*“Relationships are important in this service ... perpetrators have a lot going on in their lives ... lot of good things in their lives. Lot of people think they are bad and that we have to get them away from their families ... easy to put people in boxes. We have to build relationships in families as men will find another relationship at another address (if the current relationship is finished).*

*“There will be people who don’t like the kaupapa. Need to say, this is the waka ... Are you on board? Do you want to grab an oar and join us? People who do, say they support it one hundred percent. I hold the belief that working together is a process of finding the right people to join at the right time in the right way. For the sake of the clients, need to get whanau (of agencies within the family violence system) in sync to take the journey and be connected to each other. Need a family of agencies that believe in the same philosophy ... truth from the heart ... if you don’t have that and instead have divisions the clients will spot it a mile away.”*

*“(Because it is family focused) need to work closely with the women’s workers so we can all cope with the work within existing resources. Need to work together (men’s and women’s services) so that the teams working with the men and the women can grow at the same pace. If the men’s service grew too big then that could lead to power imbalances ... issues with the men having too many good services and not as many for the women.”*

*“Pathway of where to go ... not final destination ... so important to have good collaborative support links for men to access other supports.”*

*“ReachOut can’t solve it all ... have to build relationships with other services and then move the guys into those services ... for example, go with the guy to the first counselling session and then withdraw. The agencies have to work out how to do the bridging between engagement and into services and together continue move men through the change process.”*

- **Men’s Family Support Worker is the Agent of Change**

*“Same background, skills, knowledge and engagement skills as the current worker as this is the change mechanism.”*

*“One of the positives that I am aware of is that there are more qualified and trained people (in this service) than you would expect in the environment at the moment. I hope that that would continue as working with really vulnerable people so make sure you are trained to do that.”*

### **13.3 Supportive Organisational Infrastructure**

While stakeholders recognised the importance of maintaining a separate brand and identity for the ReachOut service, they were also adamant that the host organisation needed to provide a strong infrastructure to ensure the safety of the service's workers. Two stakeholder comments explain these views:

*“Maintain the integrity ... the line between ReachOut and the women's service needs to be really clear ... not mingled with something else ... needs to be stand alone.”*

*“Backup resources from the agency ... need support and supervision ... need organisational support behind you. There are safety issues and people's lives at stake so needs to be properly organised ... not just a walk-in service ... but well supervised.”*

### **13.4 A Final Word about Fidelity Versus Reinvention**

Stakeholders were resolute in their views that any extension or transfer of the ReachOut service needed to include the adoption of the identified elements of the service's initiation process, the various elements that were core to its model of service and various aspects of the host organisation's supporting infrastructure. They warned that if these identified points of difference associated with the Reachout service were not followed with integrity then *“people will do it their own way and not adhere to the principles that are essential.”*

At the same time they were aware that services transferred to other locations are like open systems and as such they are influenced by the environments in which they operate. Cognisant of this fact, stakeholders believed that the new adopters of the ReachOut service would need to engage in a process of some judicious customisation to ensure ReachOut was implemented in a way that suited local needs and the structure of any organisations that may chose to adopt it. The following stakeholder comments describe some of the local factors that may need to be considered within the context of any customisation decisions and a suggested collaborative process for identifying such factors.

*“This model will not fit everywhere. This area (North Canterbury) has its own NGOs and way of operating ... works here because we have two refuges, one Child Youth and Family, one Community Probation Service ... total population of sixty thousand. In a bigger area there is more than one Child Youth and Family office etc. The service (ReachOut) would have to cater for that. Also*

*cater for different percentage of the population in terms of race, creed etc. This also needs to be considered.”*

*“Different parts of New Zealand have different problems. In Canterbury, the earthquake has made it different, so we had to consider how it fitted with that. It will be unique in different parts of the country ... need to adapt to different needs, different cultural needs of the population ...Needs to be flexible to fit with the target group and what their needs are.”*

*“Take a programme from another area, but still have all the groups involved to collaboratively agree how it best fits the need and then work out together how it will work locally. Just because it works in one place, not necessarily work elsewhere ... different ways to do things; different basic values ... have to copy the programme, but adapt it to make it work for other areas.”*

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## 15 Appendix: Data Collection Documents

### 15.1 Appendix A: Sample Letter to Participants

(Date)

(Dear)

#### **ReachOut Community Outreach Service for Men: Evaluation of 12 Month Pilot Project**

I am writing to seek your assistance with an independent evaluation of our ReachOut service, which we have been piloting in North Canterbury since April 2012. The purpose of the evaluation is to identify and assess ReachOut's impact and inform its continuous development and improvement for men, women and children affected by family violence.

Whilst the New Zealand Police respond to all reported incidents of family violence, many of these callouts do not result in an arrest or requirement for an offender to attend a mandated stopping violence programme. Thus, prior to ReachOut, no services were available to identify and manage the potential risk of reoffending at the point of crisis, or encourage and support men who use violence against family members to begin their own journey towards a violence-free life. As a first of its kind in New Zealand, ReachOut was established in partnership with the North Canterbury Police and other key agencies to fill this important service gap within the Canterbury Family Violence sector.

As a critical element of the piloting of this innovative service, Aviva has asked an independent evaluator, Dr Lesley Campbell, to undertake an evaluation of Reachout. As part of this, Lesley will be inviting a number of key stakeholders to contribute to the evaluation by sharing their experiences and opinions of the service.

#### **Collecting Information and Opinion**

The purpose of this letter is to invite you to participate in an interview with Lesley during June 2013. Lesley will make an initial contact with you, as a recommended informant, during the next few weeks to ask if you would be willing to be interviewed and, if so, arrange a suitable time to meet with you. Each interview is expected to take about an hour and, with your consent, will be digitally-taped. The interview questions will focus on your experiences and views about various aspects of ReachOut, including its implementation, operation and impact.

### **Ethical Implications of the Evaluation Project**

We have carefully considered the ethical implications of the evaluation and have put in place the following strategies:

1. The anonymity of those interviewed will be maintained
2. Information collected from individuals will be collated and presented in the evaluation report in a way that protects each person's identity
3. Lesley will be the only person with access to any information that could identify particular individuals and this information will be securely stored to ensure it is only used for the purpose for which it was gathered
4. We will send you a copy of the notes taken at the interview with you on request.

ReachOut was developed as a component part of Aviva's integrated whole of family response to family violence. The service aims to reduce repeat incidents of family violence, enhance the safety of women and children and encourage and support men to lead their own journeys of change towards violence-free lives. Your perspective and experiences will help us to develop a picture of the progress and impact of ReachOut and how we might strengthen and improve the service in partnership with other key stakeholders.

If you would like any more information or have any questions please don't hesitate to call or email me. In the meantime, I really hope that you agree to be interviewed because I believe your contribution will be very helpful, particularly at this time in New Zealand when family violence is such a significant and growing concern.

Yours sincerely,

**Nicola Woodward**

**Chief Executive Officer**

**Aviva**

Cell: 027 245 0255

Email: [nicola@avivafamilies.co.nz](mailto:nicola@avivafamilies.co.nz)

**15.2 Appendix –B: Sample Participants Information Sheet**  
**Aviva Family Violence Services**  
**and**  
**Lebern and Associates**

**PARTICIPANT INFORMATION SHEET**

**Interviews with Stakeholders**

**1) What is the evaluation project about?**

This evaluation project aims to provide information, views and opinions to:

- Identify if ReachOut is achieving its original aims
- Guide the ongoing development of the ReachOut service for men;
- Inform decisions about how ReachOut could be developed and offered in other parts of Canterbury and New Zealand.

**2) Who is carrying out the evaluation project?**

The evaluation is being funded by a number of independent Trusts who supported the development of the 12 month pilot project and is being carried out by an independent evaluator from Lebern and Associates. The evaluator is Dr Lesley Campbell. She can be contacted at [camfam1@slingshot.co.nz](mailto:camfam1@slingshot.co.nz)

**3) What does the evaluation involve?**

The evaluation involves participating in an individual interview. The interview will explore your experiences of and opinions about the ReachOut Men's Community Outreach Service. If you agree, the interview will be digitally-taped. If you wish, a copy of the information you provide that is included in the evaluation report will be provided to you and you may make corrections or changes.

#### **4) How much time will the evaluation take?**

Participating in an interview is expected to take about one hour.

#### **5) Can I withdraw from the evaluation?**

Participating in the evaluation is completely voluntary. You are not under any obligation to participate. If you do decide to participate and change your mind you can withdraw from the evaluation at any time during or after the interview. There will be no negative consequences, whatever your decision about participation.

#### **6) Will anyone else know the results?**

All aspects of the evaluation will be strictly confidential and only the evaluator will have access to information on participants. There may be publications from the evaluation, but individual participants will not be identified without their permission. All information about clients, partners, family/whanau members or associates of anyone who has used the ReachOut service will be entirely anonymous.

#### **7) Will the study benefit me?**

The evaluation will benefit men, women and children living with family violence because it will help us to indentify the impact that the ReachOut service is having and what we might need to do to continually improve it. It will also benefit people working in the family violence sector by helping us understand how ReachOut has and needs to connect with other services in order to enhance its effectiveness for men, women and children. It will increase our knowledge about success factors associated with the implementation of the pilot ReachOut Men's Community Outreach Service and its impact.

#### **8) Can I tell other people about the evaluation?**

You can tell other people about the evaluation and if they wish to obtain further information they could contact Dr Lesley Campbell at [camfam1@slingshot.co.nz](mailto:camfam1@slingshot.co.nz) or Nicola Woodward, Chief Executive Officer, Aviva Family Violence Services on 027 2450255 or [Nicola@avivafamilies.co.nz](mailto:Nicola@avivafamilies.co.nz).

## 9) What if I require further information?

If you require further information about the evaluation please contact Dr Lesley Campbell or Nicola Woodward who will discuss it with you and answer any questions you have. If you would like to know more at any stage, please feel free to contact Dr Lesley Campbell at [camfam1@slingshot.co.nz](mailto:camfam1@slingshot.co.nz) or Nicola Woodward at 027 2450255 or [Nicola@avivafamilies.org.nz](mailto:Nicola@avivafamilies.org.nz).

This information sheet is for you to keep.

### 15.3 Appendix – C: Sample Consent Form

#### Consent Form

#### ReachOut Men’s Community Outreach Service: Pilot Evaluation Project

I have read the information sheet for this evaluation project and have been given the opportunity to discuss the information and my involvement in the evaluation project. I understand that:

- I do not have to take part if I do not want to
- I can withdraw my participation and information provided at any time without affecting my relationship with the evaluator, the service or Aviva now or in the future
- My name will not appear with anything I say for this evaluation project
- This consent form and what I say will be stored safely
- The findings from this evaluation will be used to inform decisions and actions to continuously improve the service and the possible development of similar services across the Canterbury region and New Zealand
- The interviews will be digitally-taped so that the evaluator can accurately record my comments
- A transcript of my interview will be available from the evaluator on request

*I understand this consent form and am happy to take part*

**Name:** \_\_\_\_\_

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## 15.4 Appendix – D: Questionnaire for Professional Informants ReachOut Evaluation

### Questionnaire for Interviews with External Stakeholders

#### Demographics

Name of participant:

Designation:

Agency name:

Interview date and time:

Duration of interview:

#### Introductory questions

Firstly, I'd like to know about your role and relationship with the ReachOut service

1. Can you describe your role in relation to the ReachOut service?
2. How was the relationship between ReachOut and you/your agency established and what are the key ways in which this relationship is maintained?
3. Are there any ways in which you think your relationship with ReachOut could be strengthened?

#### Establishment and Implementation of the Pilot: Understanding the context

##### ***Establishment***

4. When the ReachOut service was first being established, what were some of the capability, infrastructure and environmental factors that were critical to its successful implementation? What challenges did it face and how did it deal with those challenges?

##### ***Place within and contribution to the family violence system***

5. Currently ReachOut operates within an array of family violence services offered for those affected by family violence, cooperative initiatives that seek to integrate family violence responses and networks of those who work in the family violence sector. From your experience how does ReachOut interact with these various initiatives and in your view what contribution does it make?

### ***Level of maturity at 6 and 12 months after establishment***

If you think about the continuum of the lifecycle of a service from 'the idea' stage at one end and the 'mature' stage at the other end ...

6. Where do you think ReachOut was positioned along that continuum at 6 months after its establishment in April 2012? What were some of the key milestones that it had achieved by November 2012?
7. Where do you think ReachOut is currently positioned along that service lifecycle continuum after 12 months of operation? What are some of the key milestones it has achieved between November 2012 and June 2013?
8. Looking forward, what else would you like to see put in place to enhance the ongoing success of the ReachOut service?

## **Understanding of design and implementation**

### ***Identifying members of the total target population***

I am interested in understanding the extent of the total target population for an outreach service for men. With this in mind ...

9. Do you know of any reports that estimate the total number of family violence incidents that occur in North Canterbury including those reported and not reported to the Police?

### ***Engagement***

10. Experiential and empirical reports suggest that men who have committed family violence offences are often resistant to seeking assistance and are challenging to engage in services. Do you have any thoughts or experiences about what ReachOut has done to successfully engage men in these circumstances?

### ***Intervention***

11. From what you know about the ReachOut service, can you identify the key features of that service and the setting in which it operates that might contribute to its achieving its objectives?

## **Benefits and Outcomes**

## **Benefits**

12. In your experience of the ReachOut pilot, what have been the benefits to date for those involved with the ReachOut service?

- Men?
- Women and children?
- Family violence agencies and sector?
- Communities?

## **Outcomes – intended and unintended**

13. Have you observed any ways in which the ReachOut service has contributed to the safety of women and children? If so, can you provide me with some examples?

14. Have you observed any tangible positive or negative outcomes to date for men as a result of the Reachout service?

9. Have you observed any unintended or unexpected consequences from the implementation of the ReachOut service, either positive or negative, for those with a stake in it that you didn't anticipate when it was first designed?

## **Improvement**

16. In your view what are the current strengths of the ReachOut service that need to be nurtured as it moves into its second year of operation?

17. In your experience, what were some of the key challenges during the first year of ReachOut's implementation? Have these matters been addressed and if so how?

18. In your opinion, what else needs to be put in place to fine tune the ReachOut service to make it more efficient and effective in the future for those who have a stake in its operation?

## Transferability

19. If the ReachOut service was to be expanded to other areas in Canterbury and New Zealand wide, in your view what are the key elements of this service that need to be retained to ensure its point of difference or value proposition is maintained?
  
20. Do you have any advice for ReachOut about factors to consider if the service was extended to other areas?

## Conclusion

21. Are there any other aspects of the ReachOut service that we haven't discussed but that you would like to comment on?

Thank you for your participation.

Next steps in the evaluation process explained.

## 15.5 Appendix – E: Questionnaire for Telephone Interviews with the Men

### ReachOut Evaluation

#### Questionnaire for Men's Telephone Interviews

#### Introduction

Thank you for agreeing to meet with me today.

I am interested in hearing about your views and experiences with ReachOut.

- Explain the evaluation by paraphrasing the content of the information sheet
- Provide an opportunity to ask questions
- Obtain consent to participate in the telephone interview

There are no right or wrong answers to this – it's all about your experiences and opinions. However, if you do not want to answer any of the questions I ask you, thanks fine – just let me know. From time to time I will check with you about how you are finding the interview.

#### Clarification/ Implementation Questions

##### ***Access and Awareness***

1. How did you first become aware of the ReachOut Service? At that time, what did you know about the nature of this service?

##### ***Intake / Contact***

2. How was the first contact made between you and the ReachOut service?
3. What was it like for you interacting with the ReachOut service for the first time?
4. As you made this first contact with ReachOut, did you have any particular hopes about what would happen? How did these go?
5. Was this contact with ReachOut the first time you have sought support, or have you contacted another person or service previously to get support? If you have sought support from another source previously, how would you compare the support you got from ReachOut with these other experiences?

## ***Engagement***

6. What were your primary motivations for continuing to engage with the ReachOut service after the first contact?
7. Why do you think some men choose to engage with services, like ReachOut, while others do not?

## ***Intervention***

8. How many times and over what period have you interacted with the ReachOut service?
9. Can you tell me a bit about what happened during your meetings with ReachOut?  
Probe: Describe the content of your discussions/interactions/experiences with ReachOut
10. If I was to ask you to consider the top three things about the ReachOut service that were most helpful for you, what would they be? Why were these things helpful and what resulted from this experience?
11. Can you recall the most challenging experience you had during your contact with ReachOut? Why was this experience challenging and how did you deal with it?
12. Did the ReachOut Service link you with any other people or agencies for other services? How did that work out? Could anything have been done by the service to assist this referral to go more smoothly?

## **Impact / Effectiveness**

13. On a scale from 1 to 5, where 5 is completely satisfied and 1 is very unsatisfied, how satisfied were you with the type of assistance you received from the ReachOut service? What were the most important factors that resulted in this level of satisfaction?

(Scale: completely satisfied, satisfied, unsure, unsatisfied, very unsatisfied)

14. What if anything has changed as a result of the support and advice you received from the ReachOut service? What was it about the ReachOut service that particularly helped you to make such changes?

## **Improvement**

15. Thinking about the things that you have told me about your own experience of the ReachOut service, what, if anything, could have been done better/been more helpful to you during this contact?

## Conclusion

16. After your experience with ReachOut, what key messages would you like to give to other men about seeking support?

17. Are there any other aspects of your experience with the ReachOut service that we haven't discussed but that you would like to comment on?

Thank you for your participation.

How has it been for you today, doing the interview?

Explain the next steps in the evaluation process

## 15.6 Appendix F: Questionnaire for Focus Group with Women ReachOut Evaluation

### Questionnaire for Women's Focus Group

#### Introduction

Thank you for agreeing to meet with me today.

I am interested in hearing about your views and opinions concerning an outreach service for men that is implemented immediately following a family violence incident.

- Explain the evaluation by paraphrasing the content of the information sheet
- Provide an opportunity to ask questions
- Obtain oral consent to participate in the evaluation focus group

There are no right or wrong answers to this – it's all about your experiences and opinions. However, if you do not want to answer any of the questions I ask you, thanks fine – just let me know. From time to time I will check with you about how you are finding the interview.

#### Introductory Question

**I want to begin by asking you about your experiences and views about men's help seeking in general ...**

1 In your view, what sort of supports and services might men who have committed family violence offences access?

Of the services and supports that you mentioned, what worked well and why? What didn't work so well and why?

#### Design and Implementation Questions

2. If you were to design an effective outreach service for men that contacted them immediately following a family violence incident, what would that service look like?

3. Of the aspects of a successful men's outreach service that you have mentioned, what top 3 aspects do you think would be most helpful and why?

4. Some evaluations of men's family violence services report that men resist seeking help. Do you have any ideas about helpful strategies with which to successfully engage men with support services?
5. What do you think would be need to be taken into account before, during and after the delivery of a men's outreach service to ensure that you and your family remained safe and supported?
6. Do you have any other concerns for yourself and others about an outreach service for men? If so, how do you think these could be addressed?

### **Expected Benefits and Outcomes**

7. If men engaged with an outreach service, what would you expect the potential benefits to be?
  - For men?
  - For women?
  - For children?
  - For communities
8. What sort of changes or results would you expect for men as a result of their engaging in an outreach service?

### **Concluding Question**

9. Are there any other aspects of the ReachOut service that we haven't discussed but that you would like to comment on?

Thank you for your participation.

How has it been for you today, doing the interview?

Next steps in the evaluation process explained.