

# An evaluation of the Royal Borough of Greenwich Domestic Abuse Perpetrator Programme

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## List of abbreviations

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DAPG	Domestic Abuse Perpetrator Group
DAIW	Domestic Abuse Intervention Worker
DASH	Domestic Abuse Stalking and Honour-Based Violence assessment
IDVA	Independent Domestic Violence Advocate
IDVSA	Independent Domestic and Sexual Violence Advocate
MAPPA	Multi Agency Public Protection Arrangements
MARAC	Multi Agency Risk Assessment Conference
MASH	Multi Agency Safeguarding Hub
RBG	Royal Borough of Greenwich

# Executive summary

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## Context

Local multi-agency approaches are viewed as the most effective approach to tackling domestic abuse as they support more holistic, streamlined, and effective service delivery. In the Royal Borough of Greenwich (RBG), the Domestic Abuse Perpetrator's Group (DAPG) was established in October 2020 to coordinate agency responses to domestic abuse. It achieves this through the provision of advocacy and support services for perpetrators and multi-agency information sharing and risk management. This report details findings of an evaluation that examined the extent to which the DAPG is achieving its primary aims and objectives.

## Approach

The findings of this report are based on eleven interviews with members of the DAPG. Additionally, to inform this evaluation, researchers attended two MARAC meetings, two DAPG meetings, and analysed a range of policy documents pertaining to the DAPG operating processes and criteria. Using these methods, researchers were able to examine the DAPG's progress in achieving its objectives in relation to three specific goals: motivating and sustaining engagement of perpetrators in support services, improving multi-agency responses to domestic abuse in Greenwich, and reducing risk to victims and children impacted by domestic abuse.

## Key findings

- Members of the DAPG see it as an essential mechanism through which to deliver a coordinated response to domestic abuse.
- Information sharing and shared risk management planning are particularly effective aspects of the DAPG model that enable the engagement and monitoring of perpetrators who would not ordinarily come within the remit of formal agency intervention.
- The persistent efforts to motivate participation and the practical support provided by the Domestic Abuse Intervention Workers not only benefits the perpetrators, but also contributes to reducing risks to victims by addressing factors that may be indirectly contributing to abusive behaviours.
- There was a sense that there needs to be more specific intervention to directly target the use of abusive behaviours in relationships.
- The two strands of the DAPG model – engaging perpetrators with specialist services and multi-agency risk monitoring and management – are approaches that help to reduce the risk to victims and children. Both are required for a holistic response to domestic abuse to be effective.
- punishment, a need to prioritise people over processes, lingering organisational cultures of fear, shame, and blame, a lack of knowledge and genuine buy-in from senior leaders, unmanageable workloads, and the continued dominance of the risk management paradigm.

# 1. Introduction

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Every year, more than two million people experience domestic abuse in England and Wales. Over 100 people are killed each year in domestic homicide incidents (Office of National Statistics 2022a). Domestic abuse is not limited to physical violence and can be experienced as repeated patterns of abusive behaviours to maintain power and control in a relationship. The Domestic Abuse Act 2021 defines domestic abuse as any incident or pattern of incidents between those aged 16 or over who are partners, ex-partners, relatives, or have a parental relationship with the same child. The Act outlines the following behaviours as abuse:

- Physical or sexual abuse
- Violent or threatening behaviour
- Controlling or coercive behaviour
- Economic abuse
- Psychological, emotional, or other abuse

In the year to March 2022, approximately 5.7% of adults aged 16-59 experienced domestic abuse. Approximately 1 in 5 adults report experiencing domestic abuse from the age of 16. Arrest and conviction rates for domestic abuse are low. Just over a third of domestic abuse related crimes resulted in arrest. The number of suspects of domestic abuse-related crimes referred by the police to the Crown Prosecution Service for a charging decision has declined by over 50% since 2015. The vast majority of domestic abuse incidents do not end up in the criminal legal system.

Domestic abuse is a gendered crime. Women are more than twice as likely to experience domestic abuse than men (6.9% and 3.0% respectively) and are more likely to experience domestic abuse related physical and sexual harm. Over 70% of domestic homicide victims are women. 93% of victims of domestic abuse related sexual offences are women. Men are much more likely than women to perpetrate domestic abuse. In 77% of domestic homicides where the victim was female the suspect was male. Men were also suspects in 62% of domestic homicides where the victim was male (Office of National Statistics 2022b).

## 1.2 Domestic abuse in the Royal Borough of Greenwich

Levels of domestic abuse in the Royal Borough of Greenwich (RBG) are consistently high compared with other London boroughs. In the year to February 2023, there were 4050 offences of domestic abuse recorded in the borough. This equates to 14 offences per 1000 population, above the average rate for London as a whole (10.8 offences per 1000 population) (Metropolitan Police Service 2022). There is a high rate of repeat victimisation and perpetration of domestic abuse in Greenwich. Over half of those reporting domestic abuse in RBG have previously reported being a victim. Over a third of those identified as suspects have previously been reported as suspects (Safer Greenwich Partnership, n.d).

## 1.3 The Domestic Abuse Perpetrator Group

The Domestic Abuse Perpetrator Group (DAPG) is the result of work in RBG to improve its responses to, and interventions with, domestic abuse perpetrators in the borough. The DAPG is a multi-agency group established in October 2020 to coordinate an effective response to domestic abuse perpetrators that present a high risk of harm or are of a serious or complex nature. The primary aims of the DAPG are to:

- Share information to increase the safety and well-being of victims and children.
- To determine the risk of harm posed by the perpetrator and the level of intervention they require.
- To jointly construct and implement actions plans that provide support for to the perpetrator, reduce the risk of harm to victims, and support action against the perpetrator.

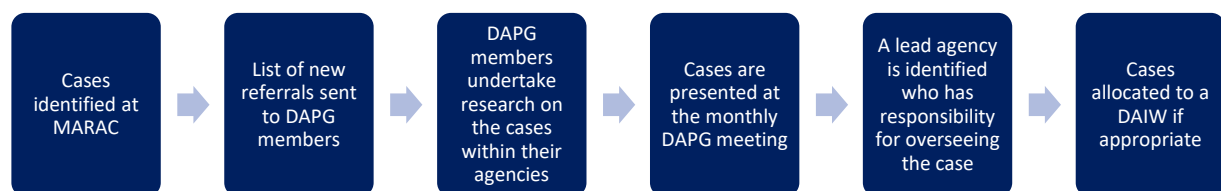
#### 1.4 Membership of the DAPG



The DAPG meets once per month for approximately two hours to share information and develop and implement plans intended to engage perpetrators in specialist services to reduce the risk they pose to victims. The Chair of the DAPG is the Strategic Lead for Violence Against Women and Girls in Greenwich. The DAPG Co-ordinator, Victim Development Project Officer, and two Domestic Abuse Intervention Workers (DAIWs) are also from the RBG Safer Communities Team. Other statutory organisations with representatives on the DAPG are the Metropolitan Police, National Probation Service, and RBG Housing Services. Other organisations represented provide specific services to perpetrators and/or victims. The Mary Dolly Foundation has been commissioned by the DAPG to provide therapeutic intervention to perpetrators. Oxleas NHS Foundation Trust provide mental health care for those with diagnosed mental illness. The Westminster Drug Project offers intervention to people who experience difficulties with substance use. The RBG Pause project works with women who are at risk of losing their children. The Her Centre provide Independent Domestic and Sexual Violence Advocacy (IDSVAs) services in Greenwich.

## 1.5 The DAPG process

### 1.5.1 Referral



Cases are referred to the DAPG via the Multi Agency Risk Assessment Conference (MARAC)<sup>1</sup>. There are three criteria for referral to the DAPG:

1. The perpetrator poses a risk of serious harm to the victim (including children). The serious harm may be to the victim's mental or physical health and well-being, and/or
2. The perpetrator has abused more than one victim, and/or
3. After discussion at the MARAC, the Chair's professional judgement is that the perpetrator presents a level of risk that is high compared to the spectrum of MARAC cases.

No case is accepted without prior referral to the MARAC. This is to ensure that interventions are not offered to perpetrators without there first being support around the victim(s). A list of cases identified at MARAC is sent to DAPG members in order for them to gather information on the cases from within their organisations to present at the DAPG meeting.

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<sup>1</sup> A MARAC is a meeting where information is shared on the highest risk domestic abuse cases between representatives of local police, health, child protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs), probation and other specialists from the statutory and voluntary sectors. The representatives discuss options for increasing the safety of the victim and turn these into a co-ordinated action plan. The primary focus of the MARAC is to safeguard the adult victim.

### *1.5.2 Engagement in services*

Once referred to the DAPG, cases are categorised as follows:

**Monitor:** Perpetrators are considered so high risk that there is the need to monitor intervention and enforcement. These are cases where contact is either unsafe or refused.

**Contact:** Potential positive engagement of the perpetrator due to the identified need for services, practical support, and behaviour change.

**Hold:** An assessment is made to put cases on hold on a case-by-case basis when perpetrators are serving prison sentences. Once released cases can be re-categorised to either monitor or contact.

A lead agency is identified for each case. If the case is already known to member agencies such as Oxleas NHS Foundation Trust or the National Probation Service, they will act as the lead agency. If there is no agency involved in existing intervention, RBG Safer Communities Team becomes the lead agency. Once referred to, and discussed at, the DAPG meeting, if appropriate, a case will be referred to one of the two DAIWs who make contact with the perpetrator to try to engage them in a programme of work which addresses their specific needs. This can take the form of one-to-one work, advocacy, linking the person in with services to address needs such as substance use, and referrals for therapeutic intervention. The DAIWs also liaise with the lead agency and other involved members of the DAPG. Progress is monitored via the monthly DAPG meetings. These meetings facilitate information sharing in relation to engagement and risk management.

### *1.5.3 Termination of DAPG involvement*

Progress is reviewed quarterly by the DAIW and the service user. Cases are held by the DAPG and progress monitored until the panel is satisfied there is no ongoing serious risk to the victims(s). This is measured by there having been no incidents of domestic abuse reported to the police in the preceding 6 months and no re-referral to MARAC in the 12 months after referral to the DAPG. Additionally, cases can be closed if there is no further potential for the panel to mitigate the risk posed (eg: if the perpetrator refuses to engage). At this point, the case will be closed at the panel and further action will be appropriate enforcement. If there is a change in the person's circumstances, they may be re-referred.

## **1.6 Rationale for the DAPG approach**

The impetus for a new approach to working with perpetrators reflects growing concern about the absence of intervention with perpetrators of domestic abuse. Most domestic abuse perpetrators will not be criminally sanctioned. Whilst the MARAC exists to put safety measures around victims, there is no provision to work with perpetrators. The DAPG was developed as a way to provide a coordinated response to working with perpetrators.

In a recent survey of services for those who have experienced domestic abuse, 51% of victim/survivors when asked what services they want named help for the person who had abused them. However, whilst almost half of victims/survivors wanted their perpetrator to have access to support to change their behaviour, only 7% of those who wanted it were able to access it, demonstrating a considerable lack of provision across England and Wales (Domestic Abuse Commissioner 2022). In Greenwich, prior to the introduction of the DAPG, there were no comparable services to support perpetrators to change their behaviour.



### *1.6.1 Effective approaches to domestic abuse*

Historically, intervention with domestic abuse perpetrators relied on enforced attendance at 'Duluth model' programmes. This model adopts a feminist perspective on men's violence against women which conceptualises abusive behaviours as a consequence of patriarchal conditioning. These programmes work to educate and challenge misogyny, sexist expectations, and controlling behaviours but, it was argued, failed to engage with the wider complexities of men's lives (Morran, 2013). Over the past decade, perpetrator programmes have shifted from a gendered understanding of domestic abuse to the use of more generalised aggression models (Phillips et al. 2013). These attempt to take a more individualised approach to understanding individual pathways to abusive behaviours and facilitate responses that address perpetrator needs in relation to, for example, substance misuse, mental health, and experiences of trauma (Davies and Biddle 2018).

This more holistic approach to addressing domestic abuse that couple's perpetrator programmes with the provision of specialist support has provided an impetus for local agencies to work together. Domestic abuse brings victims into contact with multiple agencies including police, social services, healthcare, housing, and advocacy services. Multi agency working is now seen as the most effective way to respond to domestic abuse (Cleaver et al. 2019). Integrated approaches to victims and perpetrators that develop individualised plans to keep victims safe, with key workers supporting and monitoring perpetrators have been found to be particularly effective (Clarke and Wydall 2013).

This shift to more coordinated and collaborative responses has been reflected in the expansion of local level risk management and safety initiatives. These now include Multi-Agency Public Protection Arrangements (MAPPAs), Multi-Agency Safeguarding Hubs (MASH), Multi Agency Risk Assessment Conferences (MARAC), Domestic Abuse Stalking and Honour-Based Violence (DASH) risk assessment and management, and Independent Domestic and Sexual Violence Advocates (IDSVAs).

Research also indicates that early intervention is a key component of successful responses to domestic abuse. Early intervention enables non-criminal justice agencies to identify cases for referral, recognising that most perpetrators never come into the criminal legal system. Early intervention facilitates a focus on prevention and can help circumvent the problem of under-reporting. The opportunity for voluntary participation in early intervention schemes lessens the onus on criminal sanctions as a route to changing abusive behaviours, and reinforces the importance of tackling domestic abuse holistically, and at a societal as well as individual level (Davies and Biddle 2018).

As a result of these new approaches, domestic abuse 'programmes' now refers to much more than standalone interventions. Programmes can include early intervention schemes, multi-agency arrangements, diverse approaches to behaviour change intervention, and services to protect victims. The efficacy of domestic abuse programmes is contested, however current research indicates effective programmes share four key components. Firstly, that programmes integrate support for victims with opportunities for perpetrators to voluntarily engage in work to change their behaviour. Secondly, that they provide support services to perpetrators. Thirdly, that they adopt a multi-agency approach to risk assessment and monitoring, and finally that they focus on early intervention and prevention. The DAPG model has been developed to incorporate these elements to attempt to address multiplicity of factors that contribute to domestic abuse perpetration.

## 1.7 The evaluation of the DAPG

This report evaluates the effectiveness of the DAGP programme and examines how far the it succeeds in meeting its stated aims, objectives, and goals.

The aims of the DAPG are to achieve:

- Engagement with specialist services e.g., mental health, housing, substance misuse, counselling
- A sustained reduction in abusive behaviour
- A reduced risk to victims.
- Increased awareness that support is available for perpetrators.
- Improvements in the support offered.
- Improvements in partnership working around perpetrators.

And:

- To develop and establish an effective response for MARAC High Harm perpetrator cases that require a multi-agency response or are of a serious or complex nature.
- To share information to increase the safety and well-being of victims and children.
- To determine the risk of harm posed by the perpetrator and the level of intervention they require.
- To construct jointly and implement case action plans that provide support to the perpetrator, reduce the risk of harm and support action against the perpetrator whenever possible.

The evaluation involved analysis of DAPG policies and procedures, observations of MARAC and DAPG meetings, and one-to-one interviews with representatives from agencies involved in the DAPG. Interviews were undertaken with eleven of the fourteen DAPG members: the DAPG Chair, the DAPG coordinator, two Domestic Abuse Intervention Workers, two representatives from the police, and representatives from Probation, RBG Pause, the Her Centre, the Mary Dolly Foundation, and RGB Children's Services. Representatives from Oxleas NHS Trust, the Westminster Drug Project and RBG Housing were unavailable for interview. Interviews lasted between 40-90 minutes. Interviewees were asked about their role both within and beyond the DAPG. They were asked about their understanding of the DAPG and how it functions. They were asked about multi-agency working and about the strength and challenges of each of these areas.

Thematic analysis of the interviews was undertaken to examine the extent to which the DAPG is achieving its aims and objectives specifically in relation to three themes: motivating and sustaining perpetrator engagement in support services, improvements in multi-agency responses to domestic abuse, and reducing the risk to victims and children.

## 1.8 Terminology

Throughout this report, *domestic abuse* is used to refer to all types of abuse that can be experienced in relationships. *Perpetrator* is used to denote the abuser and *victim* or *survivor* is used for the person who has been subject to the abuse. The authors of the report recognise this terminology is problematic and has been subject to much debate. It is used in the report as these terms are currently used by the DAPG to differentiate those who perpetrate and those who experience abuse in a given context.

## Findings

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This section summarises some of the key findings from the research study. It will focus on the findings related to three broad themes – motivating and sustaining perpetrator engagement with support services, improving multi agency responses to domestic abuse, and reducing the risk to victims and children.

### 2. Motivating and sustaining engagement in support services.

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The DAPG targets perpetrators who are assessed as posing the highest risk of serious harm. Engagement with services by people in this group is generally low. There is some evidence which attests to the fact that domestic abuse programmes are most effective when they address the individual needs of the perpetrator (Babcock et al. 2004) and encompass wider issues that impact on perpetrator behaviour (Morran 2013). At present, a core element of the work of the DAPG is ensuring persistent efforts are made to engage perpetrators with specialist services that can provide support and intervention in areas that are contributing to their use of abusive behaviour in relationships. This includes drug and alcohol treatment services, mental health treatment, support with financial problems, unstable housing, and counselling for past trauma.

Table One: Perpetrator engagement overview

	2020-21 (incomplete year)	2021-22	2022-23 (incomplete year)
Referrals received	31	65	64
Repeat referrals <sup>2</sup> %	67.7	60	53.1
Cases allocated to DAIW	14	47	44
Cases allocated to MD <sup>3</sup>	4	12	13
Engagement with MD (1 session)	1	6	11

During the course of this evaluation the DAPG closed a number of inactive cases, of the cases still held by DAIW, one holds a caseload of 19 of which six are engaged, 11 are being

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<sup>2</sup> % of perpetrators who had been referred back to DAPG following at least a second referral to MARAC

<sup>3</sup> Mary Dolly – Provider of therapeutic services

monitored, and one is still waiting for the opportunity to engage. The other DAIW holds a caseload of 19, of which nine are engaged, six are being monitored with other lead agencies, and four are on hold due to ongoing prison sentences.

## 2.1 Motivating change

A key principle of any domestic abuse intervention programme will be to effect attitudinal and behavioural change in a perpetrator (Kelly and Westmarland 2015). The DAPG seeks to achieve this through a holistic approach which engages appropriate specialist services to change and disrupt perpetrator behaviour. Once allocated, one of the two DAIWs will make contact with the perpetrator to try to engage them in a programme of work which addresses their specific needs. The DAIWs see motivating perpetrators to engage in specialist services as one of the main functions of the DAPG.

*My main role is to try and engage perpetrators into services in the community to help benefit them. Whether it's like substance misuse, mental health, housing. But also trying to kind of work on their behaviour, their negative behaviour towards partners or family members in regards to domestic abuse aspect. (Interview 5<sup>4</sup>)*

The DAPG is attended by representatives from agencies including housing/tenancy, probation, local mental health services, therapeutic services (Mary Dolly Foundation), the police, child protection services, and victim support services focussing on women, so the DAPG is well-placed to share information about cases. This information equips DAIWs to make targeted and specific interventions with perpetrators, helping them to address their own specific needs in the pursuit of desisting from perpetrating domestic abuse.

*it's about all the liaison with the different agencies that were involved in this person's life and trying to coordinate your support network, this is what DAPG will offer...it's also supporting them and directing them to services that may assist them with court application for child contact via the courts. Or applying for things...those practical things that generally we don't have that much time to do anymore. (Interview 7)*

In addition to helping perpetrators address health issues, the DAPG supports perpetrators by intervening in a responsive manner that acknowledges the specific needs of perpetrators as individuals in a coordinated way. Intervention in this regard can be as simple as supporting perpetrators to attend appointments, as this DAPG member explains.

*The DAPG workers are quite good, to give them that hand-holding service if they have to take them to, you know, the WDP [Westminster Drug Project] appointments, or any mental health appointments. So yeah, it's – I think it works really well with having their input. (Interview 8)*

Acting as a liaison between agencies helps perpetrators to navigate what might otherwise be a complex network of support agencies. Here, an interviewee observes that DA intervention workers will support perpetrators in attending appointments or engaging with tasks they may struggle to manage themselves, and importantly, as in this case, support that statutory agencies are no longer able to provide themselves. As such, the DAPG fills a gap in service provision by providing solutions-based, practical support to perpetrators who are referred to them.

### 2.1.1 Managing modes of engagement.

*I think once we're engaged, engagement can look very different for each perpetrator...I think maybe 25% of the maybe twenty caseload, I would say I have*

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<sup>4</sup> All interview data in this report are anonymised and allocated a reference number.

*face-to-face contact, long conversations and weekly contact with these, and they are fully engaged with the project. Then I have – you know, so active cases might be that I'm liaising with other agencies to see what's going on, so I can feed that back to the DAPG. (Interview 5)*

For perpetrators, engagement with the DAPG is voluntary. Encouraging engagement is usually achieved initially through telephone contact and pursued through text message, calls, and face to face contact. It is acknowledged that it can be difficult for intervention workers to establish authentic engagement with a perpetrator:

*It's the engagement side that is hard. It is hard to get them engaged...because even if they say they'll go and they want the help or the therapeutic support, they then don't turn up or... It's all done virtually, and on the phone and everything...but we never give up, if you know what I mean. (Interview 9)*

Voluntary participation in domestic abuse programmes is desirable as it indicates the perpetrator is ready and willing to address their abusive behaviour. However, voluntary domestic abuse programmes have been found to encounter difficulties with low participation and high attrition rates (Donovan and Griffiths 2015). One of the ways that the DAPG is well placed to respond to the voluntary nature of engagement with their programme is through a commitment to 'never giving up'. That is, once a case is referred to the DAPG, intervention workers will continue to attempt to engage perpetrators even if they are hard to reach, have refused the service, or regularly miss appointments:

*if someone is not really ready or willing to engage with the services, but we know that they should be really, then ... we allocate them to a perpetrator worker. They can try to establish a contact and if they managed to do that, then it would be easier for them to kind of talk about engagement with their services. And then when they're ready, to signpost them and refer them with their consent, obviously. (Interview 1)*

*And I think that's the joy and the difference between what we do, the intensive work, and things like the programmes. Because you can refer someone to the programme, but if they don't turn up it's like, well, actually, that's it. You've missed them. But with us, it's a case of well, if they don't turn up, right, try again next week. Try again, we'll try again. (Interview 9)*

Through consistent and routine attempts to engage perpetrators for as long as they remain on the DAPG's list of cases, intervention workers are able to follow cases, even from a distance, without the obligation to close cases quickly. This, along with the diversity of support that is offered – from the practical to the therapeutic – has the potential to increase the likelihood that a perpetrator will engage with the services offered by the DAPG.

## **2.2 Challenges to motivating and sustaining engagement in services.**

Though, in many ways, the DAPG adopts agile and creative ways to intervene in perpetrator behaviour, like any programme it does encounter operational challenges. Engagement with the DAPG occurs on a voluntary basis. This means that engagement is not mandated by probation or any other element of the criminal justice system. Engagement with the DAPG relies in part on an expressed desire, on the behalf of the perpetrator, to change their behaviour. The challenges, when it comes to effecting change in perpetrator behaviour are; making and keeping contact; the difficulty of measuring success; the difficulty of ensuring authentic change on behalf of the perpetrator.

### 2.2.1 Making and keeping contact.

On a practical note, the need to be able to contact a perpetrator is paramount. As outlined by the example in Section 2.3, how the project is communicated to perpetrators on first contact has an influence on how the programme is received and the likelihood that a perpetrator will engage. For this to happen, access to accurate contact details is paramount, and difficulty with this was highlighted across the DAPG:

*sometimes the contact number will be out of date. It might be wrong, it might be the number for the mum or the victim. It's trying to find that direct engagement, like finding a contact number or an email address, to kind of start engaging that perpetrator. (Interview 6)*

*I know that our perpetrator workers struggle, even sometimes to get like working contact numbers for their clients. Because if they are not known to mental health and substance misuse, or agencies or if there are no children, then there's a chance that they are not really known to any other partners. And police, surprisingly, they don't (routinely take) perpetrators' contact details. They only take victims' contact details, which I find strange (Interview 1)*

*If you come to the meeting, it's just unfortunate but they will discuss a case and they'll say, we're going to refer it, but nobody's got any contact details. And apparently the police don't take the contact details for the perpetrator, they only take it from the victim which I know I found confusing, do you know what I mean? (Interview 4)*

Whilst within the DAPG, information-sharing works well, and colleagues across agencies are responsive to requests for contact details and other relevant details on each case, missing contact information for perpetrators creates a barrier to success from the outset. Missing contact details delay first contact, which can put victims at further risk. Though the model of the DAPG is such that referred cases are not removed from DAPG for reasons of non-contact for six months, and this would mitigate this harm, the delay causes cases to lose momentum and frustrates early attempts to influence abusive behaviour.

### 2.2.2 Measuring success.

A second barrier to effecting change relates to being able to measure success. To get the most out of the programme, it is important that members of the DAPG know what works, what does not, what changes need to be made, and what best practice can be shared. The barriers to measuring success are related to both how the DAPG and MARAC work, and the context in which they operate. The DAPG has only been in operation since October 2020, so longitudinal data about reoffending is not available. Evidence that interventions work come down to anecdotal accounts such as that given here:

*I don't know how many statistics about how many people they have managed to, you know, not to reoffend. Certainly, I can say that I – one of mine has not committed a DV related offence for a number of years now. Now whether that has to do with the fact that he is – his partner has a new relationship, or whether it has to do with the fact that the DAP workers involved with him, I don't know (Interview 7)*

However, as the following quotations demonstrate, even with more data over several years, qualifying and quantifying the success of the DAPG would be difficult to demonstrate through statistical analysis alone:

*I can't say how successful or not successful it is. I guess if these people are not being heard regularly, when I've been doing my research, I guess that's a good sign because it means they're not coming back. But again I'm – I know certain names*

*that are coming back regularly, I'm seeing some names that I haven't seen stuff for months on. And I don't know whether that's 1) because they've not reoffended, or 2) because they've been contacted by the specific people in the meeting, and they have been given a what-for saying sort your life out, this is what you need to do to change your life and stuff like that, by [the intervention worker] and stuff. Or simply a case of they've moved out of the area and we've got nothing to do with them anymore. (Interview 2)*

*Obviously, we know the best outcome is no further offences, but no reported offences doesn't mean they're not happening. And again, we don't know what would happen if they hadn't got it...if they hadn't gone on the programme would they have offended more seriously or more often, or more – you know, it's very hard to quantify isn't it? (Interview 3)*

As these accounts demonstrate, an indicator of success might be no evidence of reoffending, however, no new offences does not mean that offending is not happening. Offences which are not reported to the police, or which take place outside of the RBG would not appear before the MARAC. It is also difficult to determine whether desistance from offending occurs as a result of DAPG direct involvement or because of other changes in a perpetrator's life, including their new or existing relationships, improvements in living and work conditions, or engagement with health, substance abuse, or therapeutic services. Closer, and longer-term analysis of individual cases would be necessary to evaluate this.

### *2.2.3 Effecting real change*

A final barrier to effecting change, and related to measuring success, concerns how project workers know that any intervention has led to authentic, meaningful change in the perpetrators as a result of their engagement with the programme. DAPG offers perpetrators access to a host of potential support systems that can assist them, notably related to drug and alcohol use, mental health services, and housing needs. Therapeutic interventions are also offered by the Mary Dolly Foundation. In the year 2021-22 of the 65 referrals made to DAPG from MARAC, 12 of these were then referred to the therapeutic services of Mary Dolly of which six were counted as successful engagements (see Table One). Therapeutic support is not a substantial component of many of the cases that the DAPG engages with. A few members of the DAPG expressed concern that the therapeutic element of the support that DAPG offered was not more prominent with its programme of work:

*I guess there's also the other side of them working, you know getting support on working on themselves. Because we have the Freedom programme for the women, we have the IDVAs for, you know, for the women. And then we have the IDVAs for the children, but who's doing that work for the perpetrators? So yeah. I think that's where the gap is, and I'm not sure if the group is hitting that. (Interview 10)*

*I think in an ideal world what they – the DAP workers would like to do... Is also to provide one to one work with a perpetrator to actually deliver specific one to one work. I can't think of any that I have that they have been able to do that with. That may well have to do with lack of engagement, or because their practical needs were taking priority over that. (Interview 7)*

The balance between addressing practical needs and effecting authentic change has to be struck. In some instances, there is the perceived need that the potential for the focus on personal transformation, and authentic attitudinal and behavioural change is secondary to addressing the more tangible and everyday needs of the perpetrator. Certainly, therapy will not be necessary in every case, and is no guarantee of authentic change in perpetrators. To determine how authentic and long-lasting any change in perpetrator behaviour and attitude

would be, a closer and longer-term analysis of specific cases and the interventions that they were offered and engaged with.

### **Good practice example: Overcoming resistance.**

Given the voluntary nature of the DAPG, fostering authentic engagement with perpetrators is key to the success of the programme. One way on which practitioners talked about achieving this was through thoughtful positioning of the programme as a support system for perpetrators who would otherwise not be supported. Perpetrators may object to the language of domestic abuse, familial or intimate partner violence, and intervention workers are mindful of this:

*I5: I found the most – my most challenging moment is my job title. You know, you're calling up a high-risk perp and you say, "Hi, I'm Emma<sup>5</sup>. I'm a Domestic Abuse Perpetrator Intervention Worker. Okay?"*

*I6: And the thing is, Emma, I don't mention the perpetrator bit when I say – I don't mention it.*

*I5: Yeah, do you know? I got – I actually had a client come back to me a couple of weeks ago. And he had been speaking to another professional. And they had mentioned the word that I work in domestic violence. And that's acceptable. It's my bad, it's not the other professional's bad. And because I've avoided saying my full job title, I say we're the community team, we talk about domestic disruption. But I don't say, "Hello, I'm Emma, etc., etc." But this client went absolutely [angry with] me, on the phone. And said that I wasn't trustworthy, I had lied, I'd been deceitful. And obviously, I said, "Not really", but in a very professional way. I said, "You know why and how you were referred to me. You know what the problem behaviour is." And for me, everybody else in the unit has support. I said, "And that's who I am. I'm your support, but you are viewed as a perpetrator of domestic abuse." What that then brought about was a conversation of what domestic abuse is, because he's never been – it's familial domestic abuse and he's not been violent. So, he didn't even recognise his behaviour as domestic abuse. So, despite that very awkward moment, it actually turned into what I would call another educative opportunity, you know. So, I've now made a vow to myself either to strive to get our job titles changed, or just spit it out and explain, "It's just a job title, but I'm here for you." You know, so that's – and I found that when they're engaged, they're really engaged. (Interview 5 and 6)*

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<sup>5</sup> Pseudonym



### 3. Improving multi agency responses to domestic abuse

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One of the key strengths of the DAPG is the way that it makes the most of multi-agency working (MAW) to address perpetrator behaviour and to reduce risk to victims. Multi-agency working is viewed as the most effective way to approach domestic abuse at both an operational and strategic level (NICE 2014). The DAPG comprises approximately ten agencies. The DAPG meets monthly. A pre-meeting takes place beforehand to assist in planning and preparation of information about the cases. The purpose of the DAPG meeting is to discuss cases referred from the MARAC, to assess what is known about the needs of a particular case, to share information, to identify any imminent risks, and to assign actions. During the DAPG, updates about the previous meeting's actions will be heard and updates about historical cases will also be heard.

#### 3.1 How MAW works to achieve the DAPG objectives.

A key priority for the DAPG is to reduce the number of child and adult victims and to increase victim safety through using a whole-system case management approach alongside a coordinated multi-agency response. Given the centrality of partnership working and information sharing to the DAPG's aims, objectives, and goals, effective partnership working is essential. This section of the evaluation examines how different agencies work together in partnership to effect change in the behaviour and attitudes of perpetrators, and to reduce risk to victims.

#### 3.2 Working together.

During the conduct of this evaluation, two DAPG meetings were observed, and it is evident that information sharing and collaborative working are a clear strength of the DAPG. This was confirmed by every member of the DAPG who was interviewed:

*Multi-agency working is key, because actually, different people hold different information. They also have different routes of engagement as well. (Interview 9)*

*There's a lot of expertise around the DAPG table that we can definitely draw upon. And we don't usually have to wait too long for answers (Interview 5)*

*I think it's really useful in terms of information sharing ... I think a lot of agencies, I think are – there is potentially a silo approach within some agencies, around dealing with issues. I think the prompt – there are other sources of information out there that's very useful. (Interview 2)*

*Say for instance housing will know that, actually, Dad has his own property somewhere, and the social worker might not be aware of that and so when they can't get hold of Mum, you know, those little bits of information. Also, we know that... the mental health service, health are involved, or the family have got rent arrears, it's just good to know what's, you know, it just gives the social worker that more information, there's more people to tap in, and I guess more people around. They offer more support, and can – nobody's duplicating then, you know? (Interview 10)*

As these different agencies observe, MAW is essential to the success of the DAPG, and within the DAPG, it works exceptionally well when compared other multi agency groups that

the agencies were aware of. Agility, in terms of information sharing, is key here. This information sharing enables a holistic approach to addressing perpetrator needs to emerge. It also helps to plug gaps in knowledge which make interventions or support offered more effective:

*You're kind of almost like crowdsourcing your risk identifiers, so you're not just reliant on your own agencies, your...internal systems for flagging risk, because it allows risk to be flagged up to you from other agencies (Interview 2)*

Approaches to risk differ from agency to agency as will be demonstrated section 3.3.3. What awareness of different risk perceptions does is highlight potential points of weakness or vulnerability in any provision. This awareness, even if it cannot be acted on, also helps to build a holistic understanding of the needs of the DAPG's clients. MAW is also facilitated by inter-agency responsiveness and the establishment of effective interpersonal relationships.

### *3.2.1 Responsiveness*

An observation that builds on the effective ways that MAW operates within the DAPG is that MAW which is agile helps different agencies progress effectively with their own work and their own agency's priorities:

*Half the battle with working with other agencies is finding the right person to talk to, so actually to get somebody to actually take action on something, especially a lot of these organisations are quite large, or very busy, actually just having that route to find the right person to say, "There is an issue with this, somebody needs to do X, can you get it done?... And I think without that you're sending off emails into the void, you know, you're not quite sure whether anyone's reading them, whether you're emailing the right person, whether anyone's going to action it. (Interview 2)*

*I think it's really useful to have everyone coming around the table, and I think it does work really well and it does – it does mean that, you know, to have, um, kind of someone in each of the agencies that you can go directly to and say this is the situation, who should I be speaking? Or this is the situation what can you – can you give me some advice or – so to have everyone at the meeting is really useful, I think it works really well. (Interview 11)*

The direct way in which agencies engage with each other, and the straightforward way in which names, contact details, local information, and agency knowledge is shared within the DAPG meeting itself empowers agencies to complete their actions. This responsiveness breaks down barriers between different agencies and enables them to fulfil their obligations to perpetrators referred to the DAPG.

### **3.2.2 Interpersonal work**

A final way in which MAW works well in the DAPG is thanks to the productive interpersonal dynamics that are fostered within, and beyond the meetings. This capacity and willingness to work co-operatively is an expression of a shared sense of mission:

*The beauty about the DAPG is that actually genuinely it feels that all the agencies are there for unified efforts, for exactly the same aim, and the reason for competition, it is about more this strive to reach the panel with the knowledge that each individual agency has about that person, to set up some sort of plan on how are we going to do this now. (Interview 7)*

*my experience is that those people being in the same meeting, that kind of helps them even working better together outside of the meeting. So, it kind of strengthens*

*the, you know, these links between the – with the partner agencies, even outside of the meeting. (Interview 1)*

*it does feel more of an intimate meeting, the DAPG, than the MARAC. So, relationships develop, more conversation can happen, I think, at the DAPG. And probably a much clearer remit, because we've already got the actions from the MARAC. And we're just building on those actions and making sure those actions are done... And that's what it feels like to me, that there is not just the knowledge of each other because we're at the DAPG meeting, but people have worked across with each other on other projects, in other matters. And they know each other. There's a respect there as well, I believe. (Interview 6)*

Though only active for around two years during which there have also been personnel change, the DAPG meetings are effective because of the spirit of collaboration that exists within them. They are also smaller meetings with consistent attendance from most agencies, which means people are able to build relationships with each other, and through the building of relationships develop a sense of accountability to each other and to the work of the DAPG. This close way of working within the context of a more intimate meeting appears to mitigate, to a certain extent, any disruption caused by change in personnel within the respective agencies. MAW is a key element of how the DAPG is able to conduct its work, and it works well, here.

### **3.3 Challenges to multi agency collaboration.**

Though MAW is effective in the DAPG and enables the group to meet its objectives of disrupting and changing perpetrator behaviour and reducing risk to victims through a whole-system approach, because MAW is so essential to the work, there remain a few areas of vulnerability. These are related to personnel issues, inter-agency expectations, and agencies' perceptions of risk.

#### *3.3.1 Personnel*

Challenges related to the people and agencies who attend the DAPG have emerged:

*The main challenge we have in MARAC and the DAPG is turnover of police officers....*

*I do think we need a better methodology in the way we review cases, because we're getting so many cases now, it's how do we get through it? Because the review – the pre-meet is getting longer and longer, as we go through more and more cases. Who do we need to discuss and everything? And we're – so there's lots of improvements, I think, that we can make in regards to actually consistency of attendance as well.*

*So that we actually ensure we get the same person every time...I think the DAPG's still new, so it's still sort of right, who do we need? For example, at first, we didn't realise how much we needed the IDVA to be there. But now we do, so now they're coming (Interview 9)*

High turnover of police members of the DAPG is identified as a challenge here, but also issues related to consistency of attendance whether there is change in personnel or not. The effectiveness of the MAW within the DAPG relies on the relationships that agencies build with each other, and this is easier to achieve with consistent attendance at the DAPG. Most members of the DAPG contribute to it as part of their wider role, or alongside other responsibilities, and in a context where agencies are under-resourced, some level of disruption from personnel change and over commitment may be inevitable. This is also noted elsewhere:

*I think the main thing for multiagency working is if the various agencies were themselves more effective and more efficient. But obviously that's an issue affecting*

*all public services, so I'm not sure that there's too much we can do about that...normally when things come unstuck it is generally because somewhere isn't resourced, or the resources in there are overwhelmed. (Interview 2)*

Public service underfunding and under-resourcing, which is widely the case across the sector, necessarily frustrates some of the smooth running of MAW-dependent groups such as the DAPG.

### *3.3.2 Inter-agency expectation.*

A further challenge identified by some members of the DAPG can be a competing sense of what the DAPG should do, and how they should do it. As highlighted by a number of respondents, different agencies have different expectations of what work with domestic abuse perpetrators might look like. Agencies have their own priorities and work-related imperatives:

*That's the one challenge as well, is making sure that...the services make sure that the case is still open to them. So, it's not just down to us to kind of do everything. Because I think sometimes when cases come to DAPG, they say, "Okay, what's – it's at DAPG now. We don't really have to do much." But it's not – yeah, it's not just our responsibility, so. (Interview 5)*

Whilst some members of the DAPG thought that it was a positive move that more awareness of the DAPG's work meant that more cases were being allocated to the group (207% increase since 2020), it was also recognised that this could mean that the group became a repository for cases which should be managed by other agencies:

*We have cases where they are allocated to perpetrator workers and there are cases that are not. We usually don't allocate cases to perpetrator workers when there is another agency quite clearly being like a lead agency, if it's children's services or probation. We also started doing that in the meeting itself to make clear that that agency should be the lead agency there. (Interview 1)*

Tasking cases appropriately is a responsibility of the DAPG and establishing agreement about which agency is best placed to manage a case is a key element of MAW, but it also requires that agencies have aims and understanding of the work of the DAPG that are aligned:

*it would be better to have a sense of exactly what their practice model is and what their – I know what their criteria is, but what their expectations of the work is, what their key outcomes would be and whether it is just a kind of practical support or whether they – the practitioners are able to offer any therapeutic relationship, therapeutic support along the way. (Interview 11)*

This quotation from a member of the DAPG who attends as part of their role in victim support demonstrates how when there is lack of clarity about objectives and intended outcomes, agile working might be impeded. Establishing the shared mission and vision with members of the DAPG as they join might be one way in which to address this potential obstacle to MAW.

### *3.3.3 Different perceptions of risk.*

A final challenge to MAW within the DAPG relates to the different attitudes to risk that agencies hold. Different risk perceptions mobilise different agency responses and these can sometimes have implications for how a case is approached within the multi-agency partnership:

*What is high risk to one agency is not necessarily high risk to another agency, we're kind of finding that – that like level, that you know, one agency might say this is the most serious thing we've been dealing with, and take that to another agency that's maybe got a higher volume, and they go actually that's not even in our top fifty. (Interview 2)*

Risk perception is framed here as related to resourcing, which potentially poses problems for dealing with complex cases which are engaged with multiple agencies:

*If there's children in the household, I feel there's a lot of risk around, but children's services doesn't feel that it meets their criteria and they would not open the case. Yeah, so these are the challenges we get sometimes, but I do get it, they work with the – very high caseload, and yeah, I get that. But sometimes the client herself asks us for some kind of support for the children. And I'm thinking if somebody's asking for that, and as a mother or as a parent they can see how it's affected the children, I feel yeah, something needs to be done, yeah. (Interview 1)*

As this quotation shows, different risk perceptions – different criteria for inclusion – can lead to different aspects of a client's life being prioritised by various agencies. One way in which the DAPG mitigates this is in the way that it holds onto cases which have been referred to it, even if the perpetrator is not engaging with the services offered. This enables the DAPG to have oversight of the case, to take updates about it which might change the risk rating, and to intervene at a different time or in a different way further down the line. Other agencies do not necessarily have this capacity to follow cases for long durations of time, and this practice here enables potential needs on the behalf of the perpetrator or the victim to be identified at an earlier stage.

### **Good practice example: Multi-agency collaboration**

There was an array of examples of good practice when it came to effective MAW. One example that was cited a few times by participants is a case that involved the reported false imprisonment of a female victim by a male perpetrator:

*Last year, quite a few times, where a woman was reporting false imprisonment, so she was reporting that she was in an address, and she was locked in by the guy. The guy had like a metal gate outside his house, and again without disclosing any names off the top of my head, I can't remember anyway, but it went through the council and through tenancy and through a few different sort of departments within the council, I believe like the landlord and stuff like that, to have the gate removed. 1), for a fire risk, because obviously [being] locked inside the house that is a fire risk, and 2) because of the numerous allegations and stuff like that. So, I believe as of quite recently... the gate of this person's address has now been removed. So, there's no longer that facility for someone to be locked inside an address, with a big metal gate. A big metal gate is a lot harder for police to get through than a plastic door. You know what I mean?*

*And so that could maybe be deemed as a successful story because it shows that the various agencies that work together, and I think it's his property, not even her property, but she frequently put herself in that situation of going to his property. But at least by getting that door removed from the – gate removed from the property, it's now meant that there's less likelihood of her having the false*

*imprisonment happen, whilst she's in the address. Because she's no longer going to be able to be locked in the address with the metal gate in front of her. (Interview 3)*

This example demonstrates diverse agencies working together to address the victim's needs and to respond to the perpetrator's behaviour by eliminating one of the ways in which he was abusive to his partner. It acts as one example of how the DAPG functions well to meet its objectives, aims, and goals.

## 4. Reducing the risk to victims.

Although the DAPG focuses on providing services for perpetrators, there was consensus from those involved in the programme that the overarching purpose of the DAPG was to protect victims by reducing the risk of recidivism. There are mechanisms through which the DAPG model seeks to reduce the risk to victims. The DAPG targets the highest risk cases, identifying these each month through the MARAC. Information sharing at the DAPG meeting is used specifically to monitor risk and take enforcement action when necessary. The DAPG integrates support for the victim and perpetrator, working with perpetrators who would usually not be offered any intervention. Support is viewed as necessary to effective risk management, especially in cases where the relationship is ongoing.

### 4.1 Targeting the highest risk cases.

The DAPG focuses on high risk, high harm perpetrators. A core criterion for referral to the DAPG is that the perpetrator is considered to pose such a high risk that there is a need to monitor intervention and enforcement. A specific high-risk group are repeat or serial perpetrators. Research has previously shown that 35-40% of domestic abuse perpetrators were responsible for as many as two thirds of referrals to secondary support services (Donovan et al. 2010). Greenwich records above average rates of repeat victimisation (Safer Greenwich Partnership n.d). Repeated victimisation of the same victim by the same perpetrator can indicate a more extreme form of victimisation, with greater risks of harm for these victims (Walby et al 2016). Table Two shows that a significant number of perpetrators identified and referred to the DAPG are repeat perpetrators. This indicates that reducing individual perpetrator recidivism may be particularly effective in reducing repeat or multiple victimisation.

Table Two: Referral rates

	2020-2021 (incomplete year)	2021-2022	2022-2023 (incomplete year)
Number of referrals to DAPG	31	65	64
Number of repeat referrals	21	39	34
Repeat referral rate <sup>6</sup>	67.7%	60%	53.1%

A significant strength of the DAPG approach is that it targets the highest risk perpetrators, identified at MARAC. These are often people who would not otherwise be subject to any ongoing risk management as contact may be unsafe or refused.

<sup>6</sup> % of perpetrators who had been referred back to DAPG following at least a second referral to MARAC

*Obviously, all MARAC cases are high risk. But some cases, you get quite scared. And you think, well actually, if we take it on the DAPG we can actually monitor what's happening with him and whether or not he gets engaged (Interview 9)*

*There are some clients in a year they come four times through MARAC with the same perpetrator. And the fear is, is there something really dreadful going to happen later on down the line. You know, 'cos it's not getting better, it was getting worse, so hopefully with the DAPG...I think hopefully we'll see the reduce in the repeat victims (Interview 8)*

Though the data for the full year is not yet available, to date there has been a 9.1% decrease in repeat referrals to MARAC of DAPG cases. There is also some indication that the DAPG may be impacting on the most serious domestic abuse offences. Compared to neighbouring boroughs of Lewisham and Bexley, Greenwich currently have lower rates of domestic homicide, despite overall higher rates of domestic abuse.

### **4.3 Reducing risk to victims through support services for perpetrators.**

A key component of the DAPG model is to support the engagement of perpetrators in specialist services that can improve their social circumstances. These are often services that provide practical support. Whilst the benefit to the perpetrator of engaging with such services is clear, it is perhaps less obvious how this kind of support contributes to a reduced risk to victims. Indeed, this concern was raised by some members of the DAPG, notably those whose primary role was to protect victims.

*I think it's a good group. I think the ethos of it is good, I just think there's still that gap, like I said earlier, of behaviour modification, or you know, education, that I think the group – that I don't see anybody doing that piece of work, but it may be that that's not the, you know, the aim of the group, it's just to kind of offer that practical support (Interview 10)*

That said, most members of the DAPG did not identify a conflict between providing support services to perpetrators and reducing the risk to victims. Linking perpetrators in with support services was seen as a way to reduce specific risks. For example, helping a perpetrator claim appropriate benefits and manage their finances means they might be less likely to form relationships for financial reasons or engage in economic abuse. Another example given was support with housing.

*Offering additional support, it may well be liaising with a housing department, because of problems with a tenancy that a person has, it's not necessarily linked to the victim. But potentially you would say well it does prevent future victims, because by helping this person maintain their accommodation, their tenancy, that you have then you prevent that situation, where this person is homeless, so would be forging relationships with women for the purpose of accommodation. And therefore creating opportunities for to offend (Interview 7)*

Ultimately, risk management and engagement with support services were viewed not as incompatible approaches that prioritise the needs of the perpetrator over those of the victim, but as complementary approaches that ensured a holistic response. They are 'two sides of the same coin.'

*One is looking at actually monitoring behaviour and enforcement. And the other side is looking at actually what support can we offer? Sometimes they work hand-in-hand and other times, you might be focusing more on one side than the other (Interview 9)*



This approach was identified as more beneficial to risk management than standard perpetrator programmes because it allows for ongoing monitoring, even when the perpetrator has not engaged with specific intervention.

*I don't think that we believe that all of the perpetrators that are on the DAPG are going to – or are even willing to change their behaviour. For some, it's more like monitoring and making sure there are enforcement measures, in place if needs be. And it's just allows us that longer term work with them or around them. Even if it's not with them but around them. (Interview 1)*

There was consensus among DAPG members that despite the apparent perpetrator focus of the DAPG model, the ultimate goal of all the work was to better protect victims.

*Everything we do has the perspective of the risk to the victim right there (Interview 5)*

One way in which the DAPG was perceived to be particularly victim-centred was that it takes the responsibility for risk management away from the victim.

*There's a thing, it was in criminal justice, and they started talking about a 360-degree risk assessment, looking all around...because you know, you might be safe in certain places, but actually, you're really unsafe in other places. So, the 360 on domestic abuse has to include the perpetrator. Otherwise, there's a massive chunk of risk management missing, and an over-reliance on the victim survivor to keep themselves safe. And that is the only type of offence where a victim is meant to take the lead in their safety (Interview 5)*

*It's [the DAPG] something we can do that doesn't require anything from the victim. So, it's quite useful to have something like that. So yes, that's the benefits of it (Interview 2).*

#### **4.4 Assessing and managing risk through multi-agency working.**

Information sharing at the monthly DAPG meetings is a primary way in which the DAPG is able to continually assess and monitor perpetrator risk and ensure enforcement action is taken when required.

*I think the fact that because of the way of the multiagency way of working and the information sharing and being able to work together, does definitely reduce risk because it means that we're kind of – we're coming at it from both sides...we're aware of something that's going ...mostly from the woman's perspective, we're able to have a conversation so that the behaviours and the relationship is better understood. So yeah, I think that definitely is a risk reducer (Interview 11)*

Inter-agency information sharing enables the development of informed risk management plans. This aspect of DAPG work can proceed even if the perpetrator is not actively engaging. The DAPG also supports enforcement action where there is an identified imminent risk of harm, particularly in those relationships where, were it not for the DAPG, the risks would not be being monitored.

*So the one thing I would say is that we are capturing perpetrators, and keeping our eyes on them and working with them. And it would not happen without the DAPG. (Interview 5)*

The importance of developing understanding of the function of different perpetrator behaviours through multi-agency consultation was identified by some members as being particularly important to understanding and reducing the risk to victims. One of the group members explains what this means in relation to different types of offending behaviour.

*Because when we talk about the level of risk, we talk about the victims being at risk. But actually, that usually means the perpetrator's reoffending... There are cases where they might have other criminal matters going on. But for the MARAC, it's actually, my concern is not that they sort of got involved in sort of harbouring stolen goods or things like that. My concern is actually, what impact is that having on the victim? (Interview 9)*

This monitoring aspect of the DAPG is particularly important in reducing the risk to victims who want to stay in their relationships and cannot, or do not want to, take action against the perpetrator through criminal legal system.

*I think it's that extra – it's that option of having something we can do with a perpetrator... there are those who want – despite our best efforts, they genuinely want to, are going to remain in their relationships... there's not much that actually addresses that, in terms of how to make it safer for someone who is remaining in a relationship. (Interview 2)*

*I know I was liaising with an IDVA and she had contact [with the victim] prior to the bail conditions ending, then no more contact. So, we know that perps back in town. We wouldn't know that. So, by talking, professionals can build a picture.... It keeps everybody on the radar. (Interview 5)*

Importantly, the multi-agency approach also ensures that the victim's concerns around risk are heard and responded to.

*I can raise the victim's voice, and say, you know, what's happening. And, you know, I can make them aware that her fears are. So, I think that partnership working, having everybody under one umbrella really works. (Interview 8).*

#### **4.5 Challenges in reducing risk to victims.**

The primary concern raised by members of the DAPG in relation to reducing risk to victims was the challenge of accurately measuring reductions in risk. It has historically been a problem for perpetrator programmes that measuring effectiveness relies on self-reported behaviour change by the perpetrator (Morran 2013). The hidden nature of domestic abuse means most incidents are never reported.

Concerns were also raised by three members of the group that, whilst the focus on providing practical support and engaging perpetrators in specialist interventions is an important factor in reducing risk, other contributors to domestic abuse are insufficiently addressed. These members wanted to see more focus on work that would challenge perpetrators to change their behaviour through addressing values, attitudes and beliefs that sustain abusive behaviours, and through more in-depth understanding of different typologies of abuser and how to best engage with the different typologies to bring about behaviour change. This aspect of work was seen as underdeveloped in comparison to the multi-agency work and practical support elements of the DAPG model.

#### **Good practice example: Responding to imminent risk**

The positive working relationships reported in section 3.2.2 mean that in situations in which there is an imminent risk of harm, the DAPG holds knowledge that can enable intervention that has the potential to be life saving. This is one case reported by the DAIWs.

The DAPG was monitoring the case of Mr X and his family. He was on unconditional bail for domestic abuse offences. The family were linked in with children's services. Fearing for

herself and her children, the victim/survivor had fled to another borough to escape the perpetrator, but having no ties to the new borough was forced to return home. In the process of moving and returning, owing to an administrative error, Children's Services closed the case. On identifying the error, the DAIW completed a Multi Agency Safeguarding Hub (MASH) referral requesting the case be reopened. When the social worker visited the home, the perpetrator was present. The victim was injured and scared and said to the social worker "You came at the right time." The DAIW explains the significance of this intervention.

*I don't know what would have happened to her, because there was no support in place whatsoever, whatsoever. He's now on five charges, with non-fatal strangulation being one of them. You know, and she's now gone to the Her Centre...She accepted him back because of all the promises and the changes in behaviour that he was going to do. So, he nestled back in, and then it [the abuse] started again. But it started in quite a magnificent fashion. She had to cut him down from a noose from her stairwell. And the noose was for him on the threat of suicide at that moment. But that noose equally, because he's a non-fatal strangulator, it could have been for her. (Interview 6)*

## 5. Summary and recommendations.

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The DAPG was established in 2020 with the express aim of reducing domestic abuse perpetration in the RBG. It aims to do this through close multiagency working to assess risk to victims and children. To this end, the DAPG receives cases referred to it from MARAC, and shares information with other agencies who sit on the DAPG to increase the safety and well-being of victims and children. Through effective collaborative working it determines the risk of harm posed by the perpetrator and the level of intervention they require. Action plans are jointly constructed, and implementation plans assigned to the most appropriate agency sitting on the DAPG. Sometimes it will be decided that one of the two DAIW will take a case, and their work will require them to engage a perpetrator, aim to better understand their needs and through multi-agency collaboration, aim to address these needs, be they practical, therapeutic, or both.

Engagement in the DAPG is voluntary and this is highlighted as a strength and a challenge for the group. It is a strength in that voluntary engagement motivates authentic transformation on the part of perpetrators and of participating agencies:

*all those agencies are there, because they believe there is a place for this kind of initiative, you know, they are not there by statutory mandate. (Interview 7)*

As it is unenforceable, it risks not catching reluctant perpetrators. However, the DAPG model, which allows the group to hold on to, and monitor non-engaging cases for at least a 6-month period, mitigates this challenge. The success of the DAPG is difficult to measure at this early stage. Quantitative data about the numbers of referrals, engagements, and re-referrals can only tell part of the picture. To better understand the impact that the DAPG has on DA incidences in the RBG, a qualitative approach which works closely with members of the DAPG, and with service users and victims would illustrate this better. It is worth noting, however, that the RBG currently has lower rates of domestic homicide, than neighbouring boroughs despite overall higher rates of domestic abuse.

This evaluation was designed to examine the extent to which the DAPG is meeting its objectives in three key areas: motivating and sustaining perpetrator engagement with support services, improved partnership working around perpetrators, and reducing the risk to victims and children.

The DAPG has clear processes in place to engage perpetrators with the programme. Perpetrators are offered several opportunities to engage with the DAIWs to develop personalised support plans. It is evident that all members of the DAPG see this as plugging a problematic gap in service provision by offering an important avenue through which to intervene with perpetrators who would not normally come to the attention of any formal agency. The DAPG experiences challenges common to voluntary programmes such as making and maintaining contact with perpetrators. However, there was consensus from the group members that the persistent efforts to motivate participation and the practical support provided by the DAIWs not only benefits the perpetrators, but also contributes to reducing risks to victims by addressing factors that may be indirectly contributing to abusive behaviours.

Testimony from participants in this research attests to the success of the DAPG in improving multi-agency working around perpetrators. There can be numerous challenges to successful multi-agency working including issues around funding and resources, competing priorities, professional and organisational culture, including professional silos and hierarchies, and differences in knowledge and expertise (Cleaver et al. 2019). Whilst some of these

challenges exist in the DAPG, they are mitigated by a shared commitment to the project and agile approaches to joint working. The DAPG provides a structure that links the work being undertaken by the individual agencies together. Importantly, the DAPG is valued by group members as supporting their individual agency's response to domestic abuse.

Reducing the risk to existing and potential victims is undoubtedly the goal around which the DAPG model is constructed. It is evident that members of the DAPG see risk reduction and management as the foundation of all the work they undertake with victims and perpetrators. The group acknowledged challenges in achieving an appropriate balance between providing support services to perpetrators and addressing and challenging abusive behaviours in order to bring about change. There was a sense that there needs to be more specific intervention, perhaps informed by research on typologies of abusers, to directly target their use of abusive behaviours in relationships. What is evident though is that the provision of support services for perpetrators and the multi-agency approach are viewed as having significantly improved responses to domestic abuse in Greenwich.

## **5.1 Recommendations**

In order for the DAPG to continue and develop its important provision in RBG we make the following recommendations:

- Streamline the aims, objectives, and goals of the DAPG to foster greater clarity about the mission of the DAPG
- Implement a consistent approach to removing perpetrators from the DAPG list to focus work on perpetrators who are able and willing to engage and to better be able to measure success rates
- Continue longitudinal observation of workflow of cases to better be able to measure success.
- Incorporate perpetrator and victim self-report data to enhance understanding of behaviour change following participation in the DAPG
- Work towards implementing therapeutic interventions in most cases to try to bring about authentic and long-lasting change in perpetrator behaviour.
- The DAPG is making significant progress against its objectives and is positively impacting on those impacted by domestic abuse. It should be funded long term so it can continue to deliver and build on its work to safeguard victims of domestic abuse in Greenwich.

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