



Women's quality of life as a measure of effectiveness of perpetrator interventions

Key findings and future directions

ANROWS

AUSTRALIA'S NATIONAL RESEARCH
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Acknowledgement of lived experiences of violence

ANROWS acknowledges the lives and experiences of the women and children affected by domestic, family and sexual violence who are represented in this report. We recognise the individual stories of courage, hope and resilience that form the basis of ANROWS research.

Caution: Some people may find parts of this content confronting or distressing.

Recommended support services include: 1800 RESPECT – 1800 737 732 and Lifeline – 13 11 14.

ANROWS Research to policy and practice papers are concise papers that summarise key findings of research on violence against women and their children, including research produced under ANROWS's research program, and provide advice on the implications for policy and practice.

This is an edited summary of key findings from ANROWS research *Defining quality of life indicators for measuring perpetrator intervention effectiveness*. Please consult the ANROWS website for more information on the this project and the full report: McLaren, H., Fischer, J., & Zannettino, L. (2020). *Defining quality of life indicators for measuring perpetrator intervention effectiveness* (Research report, 05/2020). Sydney, NSW: ANROWS

ANROWS acknowledgement

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ANROWS research contributes to the six National Outcomes of the *National Plan to Reduce Violence against Women and their Children 2010-2022*. This research addresses National Plan Outcome 6 – Perpetrators stop their violence and are held to account.

Acknowledgement of Country

ANROWS acknowledges the Traditional Owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander Elders past, present, and future, and we value Aboriginal and Torres Strait Islander histories, cultures, and knowledge. We are committed to standing and working with Aboriginal and Torres Strait Islander peoples, honouring the truths set out in the Warawarni-gu Guma Statement.

IN BRIEF

Women's quality of life as a measure of effectiveness of perpetrator interventions

KEY FINDINGS

- Quality of life for women experiencing intimate partner violence was significantly worse than the Australian average.
- Women experienced a broad range of fears which impacted on their quality of life.
- Women's top priorities for quality of life were autonomy, informal relationships and emotional health.

KEY RECOMMENDATIONS

- Perpetrator interventions should develop program logic models that identify positive outcomes for the partners of participants as a program objective.
- Measures of partners' quality of life should be included in evaluations of perpetrator interventions.
- A proposed additional set of items for assessing quality of life in the context of intimate partner violence should be tested and validated in the World Health Organisation's Quality of Life instrument (short version) (WHOQOL-BREF).

Measuring the effectiveness of perpetrator interventions

Currently across Australia there is much interest in interventions for men who use violence against their female partners. These interventions include counselling, Family Court parenting programs and men's behaviour change programs.

Together with the increased focus on perpetrator interventions has come an increased interest in assessing their effectiveness. Rather than collecting data only on process indicators (such as men's attendance or completion of programs), there is now a shift to collecting data on outcomes, that is, data that can answer the question: have men stopped their violence?

One of the most common outcome measures used is recidivism: did the man re-offend in a given time period since completing the program? However, this measure is an imperfect proxy for whether the man has stopped using violence: he may have re-offended but not come to the attention of the authorities, he may have intimidated his partner not to report, and/or he may have curbed his criminal violence but continued to abuse his partner in non-criminal ways. Recidivism is also not a useful measure for men without a criminal history who voluntarily choose to participate in community-based programs.

Men's self-reports of their own behaviour are sometimes used as an outcome measure. However, the validity for this is questionable, particularly when men's participation in a program was mandated.

Arguably, what truly counts is the perspective of men's partners. Recognising this, some programs have asked female partners to report their observations of men's behavioural change. However, this approach also has its drawbacks. Women may fear that reporting negatively on their partners will have adverse consequences such as further violence, family breakdown and feelings of shame and guilt. Moreover, women's monitoring of men has been critiqued for reinforcing gender stereotypes in which women are held responsible for their intimate partners and their relationships, including any failings that may occur within the latter.

An alternative way of measuring the effectiveness of interventions for men who use violence is to examine changes in the quality of life of the men's partners and ex-partners.

Quality of life measures

Quality of life is an overarching individual assessment of “the goodness of life” (Campbell, Converse, & Rodgers, 1976). It traverses many life domains, which may include physical health, psychological health, social relations and the environment. The World Health Organization (WHO) defines the concept as:

an individual’s perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. (World Health Organization Quality of Life Group [WHOQOL Group], 1998, p. 551).

Over the last 30 years, much international research has focused on assessing quality of life, and many validated measures have been developed. The International Society for Quality of Life Research (ISOQOL) publishes an international journal, *Quality of Life Research*, and in 2013 published minimum standards for the development of quality of life measures (Reeve et al., 2013).

Quality of life measures are based on three principles:

- Quality of life is a *multidimensional construct* comprising complex interactions between individual, social, health and spiritual conditions.
- Quality of life is a *uniquely individual self-assessment*, which means that individuals may subjectively assess their quality of life as satisfactory when objective criteria suggest that it should be low, and vice versa.
- Quality of life assessments are *dynamic* and will change across the life-course according to life events and circumstances.

A widely used measure of quality of life is the WHOQOL-BREF, developed by the World Health Organization (WHOQOL Group, 1998). This tool has been modified and validated for use with specific populations, including older adults, people with disability and people living with HIV.

To date, however, the WHOQOL-BREF has not been specifically validated with populations experiencing intimate partner violence, and it does not capture aspects of quality of life that are specifically relevant to intimate partner violence.

THE ANROWS RESEARCH PROJECT

“Defining quality of life indicators for measuring perpetrator intervention effectiveness” by Helen McLaren, Jane Fischer and Lana Zannettino

The purpose of this study was to inform the development of a specific quality of life measure for women experiencing intimate partner violence. This measure could be applied in evaluations of interventions for men who use violence.

The study involved interviews with 100 women, 71 of whom had a partner who had participated in a male perpetrator intervention. The remaining women believed that their partner had not attended despite being referred, or they were no longer in contact with their former partner and did not know whether he had attended.

Part of the interview process involved administering the WHOQOL-BREF to these 100 women.

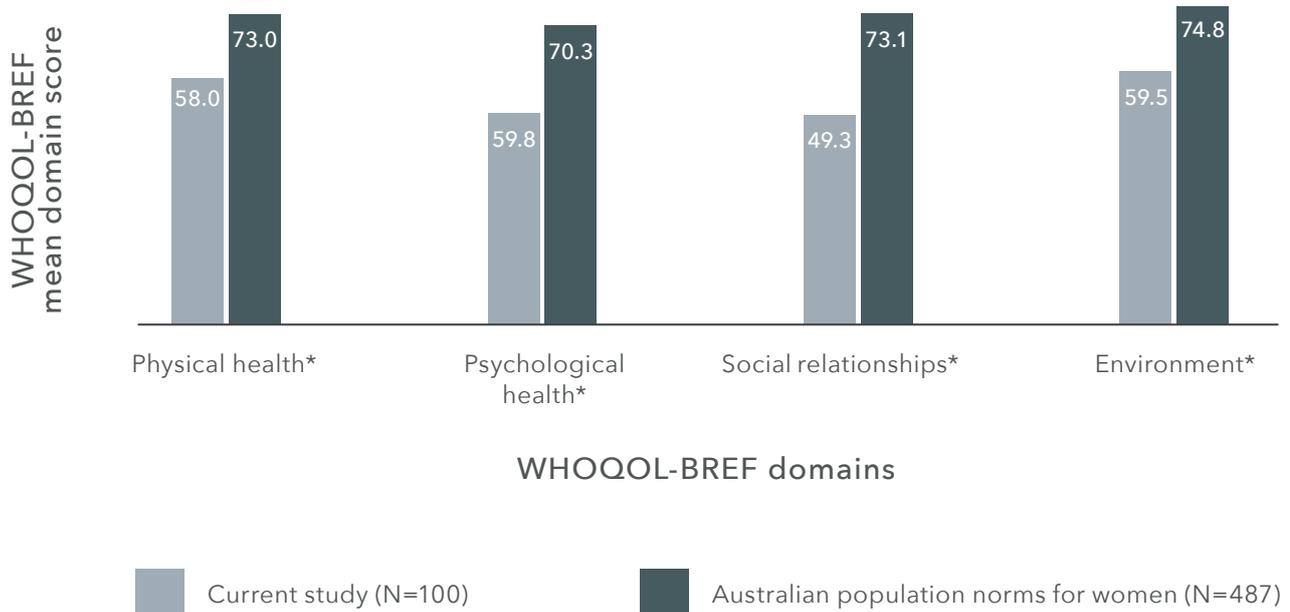
The full report, including methodological details, is available at anrows.org.au.

Key findings

Quality of life for women experiencing intimate partner violence was significantly worse than the Australian average

Women's quality of life, as assessed through the WHOQOL-BREF instrument in this study, was significantly worse than the Australian average. The figure below shows scores on each of the four WHOQOL-BREF domains for the women in this study compared with Australian population norms (Hawthorne, Herrman, & Murphy, 2006).

Figure 1 Quality of life of the women compared with Australian population norms for women



Note: * Statistically significant $p \leq 0.0001$

Women experienced a broad range of fears which impacted on their quality of life

Over half the women in the study expressed fear of their partners, including fear for their physical safety and fear for the wellbeing of others, especially their children. Women who had left their relationships as well as women who were currently living with men using violence described living in fear of their partners.

Women described how fear affected their quality of life, expressing a broad range of fears beyond fear of their partner. Their accounts provide insight into the impact that intimate partner violence has on their lives, and also indicate the changes needed for their quality of life to improve.

Some of the fears they described are listed in Table 1, and in the quotes presented below.



Having no freedom to go and do what I want, having to walk on eggshells. Being scared. Scared to get help. Scared to leave. Being threatened, put down, psychologically abused, and limited in what I can do. I have no money; it is hard to leave. My friends and family and supports have diminished. It is hard to leave. I am scared to leave. I don't know how to. I have tried three times and not been successful.

I went to the women's prison because I get charged with assault, more than once, on my husband. I was basically defending myself, but he always told police I started it and because I split his head open police believed him. I didn't fight the charges. Going to gaol is safer than being out.

Table 1 Fears expressed by women

Fears about physical safety of self or others	<p>fear about the next time he hits me</p> <p>fear of him breaking court orders and coming to get me</p> <p>fear of physical and mental abuse</p> <p>fear that he will hurt my family or friends</p> <p>fear he will kill the dog</p>
Fears related to formal systems and processes	<p>fear of not feeling safe with authorities</p> <p>fear the court system will continue abusing me</p> <p>fear of the child protection system blaming me for his abuse</p> <p>fear of child removal by child safety even though I didn't do it</p>
Fear in response to women's imagined futures	<p>fear of co-parenting</p> <p>fear that my child will be scared</p> <p>fear of the impact of fear on my children</p> <p>fear my child will blame me for not having a positive image of him</p> <p>fear that all this will impact on being able to care for my children</p> <p>fear for my own children's quality of life</p>
Fear associated with discursive power	<p>fear of people judging me</p> <p>fear of being a drain on society</p> <p>fear of leaving and failing at it</p> <p>fear of staying and being blamed for it</p> <p>fear of not coping with life</p>
Socio-emotional fears	<p>fear of loneliness</p> <p>fear of being without good friends</p> <p>fear of not belonging generally</p>
Socio-economic fears	<p>fear of no financial stability and security</p> <p>fear of things getting worse and living in third-world conditions</p> <p>fear of being hungry</p> <p>fear of not having enough money and having to say to my children "I cannot afford it"</p>
Fear and uncertainty	<p>fear of not recovering</p> <p>fear that life won't get better</p> <p>fear of the unknown</p>

Women's top priorities for quality of life were autonomy, informal relationships and emotional health

In the interviews, women were asked what quality of life meant to them, what would make their quality of life good, and what would make it bad. Their responses were collated and then coded and analysed thematically. Women's quality of life priorities are listed, in order, in Table 2 below.

Table 2 Women's quality of life priorities in the context of intimate partner violence

Thematic concepts as QOL priorities	Frequency of codes across the women's interviews ^a
1. Autonomy	177
2. Informal supports (family and friends)	101
3. Emotional health	94
4. Safety (physical and psychological)	86
5. Children and pets	82
6. Mental health	74
7. Employment	58
8. Money	55
9. Meaningful life	49
10. Physical health	43
11. Formal supports	40
12. Fear	35
13. Isolation	34
14. Community engagement	25
15. Food	23
16. Housing	21
17. Education	10
18. Transport	8
19. Clothing	3

Note: ^aThese frequencies do not add up to 100 as it was possible for each woman to mention multiple quality of life priorities.

Project Mirabal

Project Mirabal was a major research project conducted in the United Kingdom between 2009 and 2015, investigating the extent to which perpetrator programs reduce violence and increase safety for women and children. This project looked at what success means to male program participants, female partners/ex-partners, practitioners and funders.

What success means to female partners/ex-partners

In Project Mirabal, six themes emerged from interviews with women (Westmarland, Kelly, & Chalder-Mills, 2010). In order of frequency, these measures of success were:

- respectful/improved relationships
- expanded space for action
- support/decreased isolation
- enhanced parenting
- reduction or cessation of violence and abuse
- man understanding the impact of domestic violence.

Project Mirabal (Kelly & Westmarland, 2015) found that the focus of perpetrator interventions on “stopping violence” does not address the ways in which women live with harms from intimate partner violence or how they move on from those harms.

The measures of success identified in Project Mirabal align well with the findings of this ANROWS study regarding women’s top priorities for quality of life. The results of Project Mirabal also align with this study’s finding that women’s fears are broader than just fear of their partner or of the violence.

Implications for policy-makers and practitioners

Perpetrator interventions should develop program logic models that identify positive outcomes for the partners of participants as a program objective

It is recommended that outcomes for partners be kept front and centre when developing program logic models. Having positive outcomes for women as a program objective can encourage program design that works towards this outcome, and not just towards men's behavioural changes.

Measures of partners' quality of life should be included in evaluations of perpetrator interventions

These measures should be taken as men commence their participation, on completion and longitudinally, to enable measurement of change and of sustainable change.

Since women's quality of life will depend not only on the quality of perpetrator interventions, but also on other factors including broader systemic ones, it is important to ask women whether they attribute any changes in their quality of life to their partners' participation in a program.

The following set of items for assessing quality of life in the context of intimate partner violence should be tested and validated in the WHOQOL-BREF

Good practice in research and evaluation requires that instruments are tested and validated to ensure that they do in fact measure what they are intended to measure. Though the WHOQOL-BREF has been validated with an international sample, it has not been validated for the specific population of women who have experienced intimate partner violence, and it is possible that this population might interpret questions differently from the general population. The proposed additional items (below) have also not yet been validated. Testing and validation is a technically complex research process that requires a sufficiently large and representative sample size to determine whether an instrument is valid for use with a particular population.

Table 3 Proposed additional items for testing and validation^a

We now would like you to think about your intimate partner violence experiences in the past 2 weeks.

To what extent have you felt ...	Not at all	A little	Moderately	Mostly	Completely
Fear?	1	2	3	4	5
Autonomous?	1	2	3	4	5
Isolated?	1	2	3	4	5
Lonely?	1	2	3	4	5
Safe?	1	2	3	4	5

How satisfied are you with ...	Very satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very dissatisfied
The safety of your children, family and animals?	1	2	3	4	5
The wellbeing of your children, family and animals?	1	2	3	4	5
Your capacity to care for children, family and animals?	1	2	3	4	5

Note: ^a Some items will be reverse scored.

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Further reading and resources

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