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**Examining Intimate Partner Violence from the Male Perspective: An Analysis of the
IMPACT Questionnaire**

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CHAPTER 1: INTRODUCTION

1.1 European and Italian data on Gender-based Violence

The survey of the European Union Agency for Fundamental Rights (*Violence Against Women: An EU-wide Survey. Main Results Report*, 2014) highlighted the statistics of gender-based violence experienced by European citizens: 1 in 3 women has experienced physical and/or sexual violence; 1 in 2 women has experienced sexual harassment; 1 in 20 women has been raped; 1 in 5 women has been stalked; 95% of victims trafficked for sexual exploitation in the EU are women. The European Institute for Gender Equality's analysis (*Costs of Gender-based Violence in the European Union*, 2021) reveals that gender-based violence in the EU amounts to €366 billion annually, with violence against women comprising 79% of this cost (€289 billion). Intimate partner violence, particularly against women, accounts for a significant portion (48%, €174 billion) of this expense. The study examines three cost categories: lost economic output, public services, and physical/emotional impacts on victims. The highest costs are attributed to the latter category (56%), followed by criminal justice services (21%) and lost economic output (14%).

This international data reflects the viewpoint on the national level. According to ISTAT, the Italian National Institute of Statistics (*Istat.it - Violenza Sulle Donne*, 2014), 31.5% of women aged 16 to 70, totaling 6,788,000 individuals, have faced various forms of physical or sexual violence throughout their lives. Among them, 20.2% (4,353,000) experienced physical violence, 21% (4,520,000) faced sexual violence, and 5.4% (1,157,000) endured the most severe forms of sexual violence, including rape (652,000) and attempted rape (746,000). Furthermore, 13.6% of women (2,800,000) encountered physical or sexual

violence from their current or former partners, particularly 5.2% (855,000) from current partners and 18.9% (2,044,000) from ex-partners. A significant majority of women who had violent partners in the past terminated the relationship due to the violence they experienced (68.6%). Specifically, for 41.7%, it was the primary reason for ending the relationship, while for 26.8%, it was a significant factor in the decision.

The most severe forms of violence typically originate from partners, relatives, or friends. For instance, partners commit rape in 62.7% of cases, while relatives and friends are responsible for 3.6% and 9.4% of cases, respectively. Physical violence, such as slapping or kicking, is predominantly perpetrated by partners or ex-partners. Strangers are primarily responsible for sexual harassment (76.8% of all incidents committed by strangers), but this may be due to the incapability to recognise rape within the intimate relationship (McFarlane et al., 2005). Understanding sexual violence within intimate relationships may enhance individuals' capacity to report such abuse (Alsaker et al., 2012).

Overall, rates of GBV tend to be underreported, particularly in police records and comparing the extent of intimate-partner violence across countries has been challenging due to significant differences in methods and definitions (Stewart et al., 2013).

1.2 Definitions and Forms of Gender-based Violence

The Istanbul Convention, also known as the Council of Europe Convention on preventing and combating violence against women and domestic violence, marks the first example in Europe where legally binding standards are established to prevent gender-based violence, safeguard victims, and prosecute offenders. The Convention identifies legislative gaps, and discovers effective strategies, encompassing a wide array of measures. Diverging from other international agreements addressing gender-based violence, the Istanbul Convention mandates the adoption of comprehensive and coordinated policies among

national and governmental entities engaged in prevention, prosecution, and protection efforts (*Convention on preventing and combating violence against women and domestic violence, opened for signature 11 May 2011, Council of Europe, C.E.TS No. 210 [hereinafter Istanbul Convention]*).

According to the European Commission (*What is Gender-based Violence?*, 2024), gender-based violence refers to acts of violence targeting individuals based on their gender or disproportionately affecting individuals of a specific gender. Violence against women, recognized as a violation of human rights and a manifestation of gender discrimination, comprehends various forms of harm, including physical, sexual, psychological, and economic. This includes violence within domestic settings, affecting women, men, or children living in the same household. While women and girls are primarily impacted by GBV, its repercussions extend to families and communities. As specified by the European Institute for Gender Equality (*What is Gender-based Violence?*, 2024), GBV and violence against women are frequently used interchangeably, recognizing that the majority of gender-based violence target women and girls, typically perpetrated by men. Yet, emphasizing the "gender-based" dimension is crucial as it stresses the structural power imbalances between men and women that promote many forms of violence against women. The European Commission (*What is Gender-based Violence?*, 2024) proposes the following typologies of GBV:

- Physical: this form of violence causes injuries, distress, and health issues, and in extreme cases, it can result in death. Examples include beating, strangling, pushing, and the use of weapons. In the EU, 31% of women have encountered one or more incidents of physical violence since reaching the age of 15. As stated by Campbell (2002), women who have experienced abuse often seek treatment within healthcare

systems. However, they typically do not exhibit evident signs of trauma, even when presenting at accident and emergency departments.

- Sexual: this category covers non-consensual sexual acts, attempts to force sexual acts, human trafficking, and other actions aimed at an individual's sexuality without their consent. It includes behaviors like making sexual comments, asking personal questions, or unwanted physical contact. Even if seemingly accepted, it can still cause distress and harm. It is estimated that one in 20 women (5%) has experienced rape in EU countries since turning 15. Current research studies show that sexual violence intensifies the sense of helplessness and powerlessness in the victim, impacting their self-esteem and raising a sense of vulnerability to future violence. The fear of sexual violence is likely to limit women's freedom and career prospects, impacting their long-term psychological health (Kalra & Bhugra, 2013; Burn, 2018; Chan et al., 2008).
- Psychological: it involves abusive behaviors such as manipulation, coercion, economic exploitation, and blackmail. A significant portion, 43%, of women in the EU have endured some form of psychological violence from an intimate partner. Previous literature demonstrates that psychological violence stands as one of the most prevalent types of violence against women, either occurring independently or alongside other forms of intimate partner violence (Martín-Fernández et al., 2019).
- In addition, the European Institute for Gender Equality (*Forms of Violence*, 2024) also includes economic violence as “any act or behavior which causes economic harm to an individual. Economic violence can take the form of, for example, property damage, restricting access to financial resources, education or the labor market, or not complying with economic responsibilities, such as maintenance.” As shown by Alkan et al. (2021), economic abuse is a powerful tool used to manipulate and control

individuals, particularly women, by fostering dependence and exploiting them financially. It severely affects women's well-being, leading to economic insecurity, mental health issues, and trapping them in harmful relationships. Economic abuse also contributes to poverty, social inequality, and increases the risk of sexual exploitation. Women are disproportionately affected by economic violence and are at higher risk of experiencing physical violence as a result.

A large number of studies has investigated the relationship between types of gender-based violence and women's mental health and psychophysical well-being, suggesting that female victims often experience poor overall health, disabilities, and mental health disorders like depression and PTSD. The consequences of GBV will be further discussed in detail. Focus of this thesis is a particular sub-form of GBV, known as Intimate Partner Violence (IPV).

1.3 Intimate Partner Violence (IPV)

As identified by UN Women (*FAQs: Types of Violence against Women and Girls*, 2024), intimate partner violence (IPV) is a form of GBV, occurring within an intimate relationship. IPV is a prevalent form of violence experienced by women worldwide and includes abuse within familial connections like child and elder abuse, alongside with sexual violence, femicide, human trafficking, female genital mutilation (FGM), forced marriage and online violence. IPV is also referred to as family violence, domestic violence, or spouse abuse. However, these terms are less precise, and some include violence against children within family or domestic violence, leading to potential confusion (Stewart et al., 2013).

In their research on delineating prevalence, chronicity, and severity of IPV among adult women in the US, Thompson et al. (2006) found that nearly 80% of their sample reported more than one IPV type. Palmer et al. (2024) found significant links between perpetrating and experiencing emotional IPV and other forms of violence such as physical

IPV, sexual IPV, stalking, and controlling behaviors. This strengthens the evidence for a relationship between emotional IPV and various violent outcomes. From now on in this thesis, I will refer to literature about IPV.

1.4 Antecedents and Risk Factors of IPV

Though IPV is a prevalent global public health issue, research into its characteristics and causes remains limited. Complete comprehension of the antecedents surrounding IPV episodes should lead to better-informed policy interventions. It's important to recognize that IPV is not an isolated phenomenon; it's intricately linked with various biological, psychological, social, environmental, and economic factors (Ahmadabadi et al., 2017).

As specified by the Council of Europe (*What Causes Gender-based Violence? - Gender Matter*. 2024), the primary source of violence is the perpetrator themselves, and it's crucial to understand that individuals affected by IPV - and more generally by GBV - are never accountable for the actions of the perpetrator. GBV in our societies cannot be attributed to a single factor but rather stems from a combination of various factors. Ecological theories, which are rooted in Bronfenbrenner's (1979) early work, view violence as a multifaceted issue influenced by a combination of sociocultural, situational, and personal factors, echoing informal feminist perspectives on IPV causation. The interaction between these factors forms the underlying basis of the issue (İnce-Yenilmez, 2022). Four types of factors can be identified.

- Cultural influences: cross-cultural studies suggest a correlation between beliefs in male dominance and higher rates of IPV. These beliefs influence societal aspects like female autonomy, political participation, and law enforcement responses to violence against women. Additionally, IPV prevalence is higher in societies with common violence in conflict and political disputes. Societal expectations of masculinity and

power contribute to violence against women, often stemming from men's challenges in meeting these expectations, leading to identity crises. Consequently, violence against women serves as a means for men to assert control and address feelings of vulnerability and inadequacy (Jewkes, 2002). Men who link masculinity with controlling and dominating their partners are more likely to engage in abusive behavior. This violence often arises from discrepancies between men's perceived power over their partners and the actual power dynamics in relationships. Those feeling inadequate in power might resort to physical dominance (Russo and Pirlott, 2006).

- Legal considerations: in many societies, being a victim of IPV is stigmatized as shameful and indicative of weakness, with women often unjustly blamed for provoking violence through their behavior. A prevalent societal reaction to IPV is victim blaming, wherein fault and responsibility are assigned to survivors of abuse. Victim blaming carries profound societal implications, often imposing pressure on IPV survivors. For instance, cultural norms may expect women to both prevent the violence and uphold family cohesion. Acts of violence aren't always perceived as such or deemed unacceptable. In some cases, perpetrators justify their actions because they're directed towards individuals whose behavior deviates from social norms. The research of Eigenberg and Policastro (2015) on investigating attitudes toward women and victim blaming found that male respondents were more inclined than females to blame female victims of IPV, and this aligns with previous studies. Females tend to rationalize violence when faced with actual or potential threats to themselves or their loved ones (Council of Europe, 2024; Weingarten, 2016; Toffanin, 2019).
- Economic influences: limited economic resources often make women, as well as LGBT+ individuals, particularly susceptible to violence. This creates cycles of

violence and poverty that are self-perpetuating, making it exceedingly challenging for victims to break free. Additionally, when men experience unemployment and poverty, it can lead them to assert their masculinity through violent behavior (Council of Europe, 2024). Women's financial independence can be protective in some cases, but situations where only the woman is employed may pose additional risk (Jewkes, 2002). Partners who rely on their spouses for financial support, such as individuals with disabilities, homemakers, or the unemployed, often face marital discord due to the fear of increased financial burden if they leave the relationship. According to the resource theory, male partners with high income and social status have access to resources that allow them to control their female partners' behavior, including the use of violence (İnce-Yenilmez, 2022).

- Political considerations: the lack of representation of women and LGBT+ individuals in positions of power prevents their capacity to shape policies addressing GBV and equality. This often leads to inadequate attention and resources allocated to issues like domestic abuse. Advocacy movements have been instrumental in challenging traditional norms and inequality, yet their efforts have sometimes been used to justify violence (Council of Europe, 2024). In nations with insufficient legal provisions for women, legislation can either instill fear or create a sense of security. Political rights, press freedom, equal opportunities, and an impartial judiciary are key factors in reducing violence. Regulatory bodies and law enforcement agencies are crucial in combating domestic violence by implementing protective laws. Weak regulations in many countries perpetuate domestic violence and abuse (İnce-Yenilmez, 2022).

The research from Ince-Yenilmez (2022) sheds light on the psychosocial antecedents concerning IPV, referring to two theories: the feminist theory and family violence theory. Feminist theory views IPV as a tool for male dominance over women, while family violence

theory sees it as a way to resolve conflicts within relationships. The gender symmetry debate arose when research suggested both genders engage in violence equally. Some argue for male dominance in perpetrating IPV, while others advocate for gender equality in perpetration. Recent studies acknowledge male predominance in severe and lethal IPV. Criticism of older measurement scales stresses the need to differentiate between control-driven and conflict-driven aggression. Women may resort to IPV in self-defense or retaliation, with their abuse often differing from that of men. Women tend to endure more severe and prolonged abuse, with fewer ways to escape abusive situations compared to men.

It is important to remember that risk factors are attributes linked to a higher probability of a problematic behavior manifesting. The presence of a risk factor doesn't guarantee the behavior's occurrence; it rather increases the likelihood (Tjaden & Thoennes, 2000). According to the research by Chester & DeWall (2018), perpetrators of IPV often exhibit symptoms of various types of psychopathology. Antisocial and borderline personality disorders are associated with IPV, although for different reasons. Major depressive disorder and post-traumatic stress disorder are also consistently linked to IPV. However, further research is needed to gain a deeper understanding of the relationship between psychopathology and IPV. Furthermore, frequent verbal disagreements and high levels of conflict in relationships are closely linked to physical violence. Violence is sometimes used as a tactic during relationship conflicts and can also stem from frustration or anger. Alcohol consumption is consistently associated with a higher risk of interpersonal violence, including IPV (Jewkes, 2002). Concerning substance abuse, regardless of whether the substance acts as a depressant or a stimulant for the central nervous system, it tends to increase inclinations towards IPV (Chester & DeWall, 2018). Childhood maltreatment can lead to the development of a coping mechanism centered around hostility, fostering a personality characterized by mistrust and a negative view of others. This mindset increases the likelihood of perpetrating

physical and psychological IPV in adulthood. Additionally, the presence of firearms, either accessible within the household or easily obtainable, appears to increase the likelihood of IPV perpetration by males (Clare et al., 2021). Finally, as stated by the UN Women (*Fact and Figures: Ending Violence against Women*, 2024), climate change and gradual environmental deterioration intensify the threats of violence against women and girls by causing displacement, scarcity of resources and food, as well as disruptions to services provided for survivors.

1.5 Consequences of IPV

The literature review by Caldwell et al. (2012) highlights numerous adverse physical health effects associated with IPV victimization in women. Research indicates that female victims of IPV often experience poor overall health, functional impairments, and disabilities, leading to frequent medical interventions. It was found that the average prevalence of depressive symptoms was close to 50% and the mean prevalence of posttraumatic stress was almost 64%. Moreover, among female victims of IPV, the typical occurrence of alcohol abuse was nearly 20%, with higher proportions observed in shelter-based studies compared to those conducted on a national scale or within healthcare settings. Similarly, the combined prevalence of drug abuse among female IPV victims averaged nearly 9% across various study samples. Apart from the adverse impacts on victims' physical and mental well-being, experiencing IPV also undermines the quality of intimate relationships. An essential component of relationship quality is the satisfaction of the partners with the relationship: when women faced either mild or severe victimization, they expressed dissatisfaction with their relationships. Research has shown that post-traumatic stress disorder (PTSD) contributes to heightened negative health symptoms, increased illness rates, and greater use of medical services. Additionally, it represents a negative influence on the progression and

severity of illnesses. Depression and PTSD are particularly prevalent among IPV survivors, with rates significantly higher than in the general population. Feelings of loss, shame, guilt, and lack of control contribute to the development of poor self-esteem and depression. Additionally, IPV survivors may experience increased rates of eating disorders, personality disorders, and nonaffective psychosis (Stewart et al., 2013).

The indirect ramifications of partner violence can extend widely. One significant indirect outcome of IPV involves its impact on children who may either witness or become involved in such abuse. There is a strong correlation between violence against women and violence against children—if one is experiencing abuse, it's likely the other is as well. Even when children themselves aren't subjected to abuse, witnessing partner violence can have profound and lasting effects. For instance, male children who witness their father battering their mother are more likely to perpetrate violence in their own adult lives compared to those from non-abusive households. Furthermore, partner violence within the home is predictive of children's overall psychological distress, as well as factors such as warmth from siblings and parents fail to mitigate the adverse effects of partner violence on children's mental well-being. (Russo and Pirlott, 2006; Stewart et al., 2013)

According to Ruiz-Pérez et al. (2007), there is a link between the severity and duration of abuse and worsened physical health outcomes. Consequently, prolonged and intense abuse seems to have a more pronounced effect on chronic health issues and the amount of time individuals spend impaired. These findings align with previous research highlighting a dose-response relationship between the severity of violence and the extent of physical illnesses experienced by abuse victims. Women who experience physical violence also encounter psychological abuse, and many also suffer sexual abuse from their partners. Studies indicate that women facing multiple forms of abuse are at higher risk of mental health disorders and co-occurring conditions (Oram et al., 2017).

1.6 IPV from the Perspective of Male Perpetrators

One distinguishing feature of men using violent behaviors is their use of cognitive distortions, which are inaccurate ways of interpreting or assigning meaning to experiences. These men often employ distortions such as denial, blame, justification, and minimization to excuse or downplay their actions. Additionally, they typically exhibit a strong perception of control and a low threshold for anger. Anger is a common trait among perpetrators of IPV, but the findings of the research of Whiting et al. (2014) indicate that men can reflect on their anger and its role when discussing incidents once they occurred. In this research, some men mentioned that they might have avoided the violent incident if they had better coping skills for handling their triggers. Despite using these triggers as excuses, they still described their choices and regrets in the process. This is important because it shows that, when given a chance to reflect, many men do not prefer to be violent, even though they sometimes rationalize their behavior. It is essential to hold men accountable for their actions while also understanding the role of interaction and contextual triggers in IPV. Most men in this study acknowledged and admitted to using cognitive distortions when asked. The complexity of their perceptions was further illustrated by the fact that most interviews contained a mix of both blaming and responsible explanations.

In their meta analysis exploring IPV from the perspective of African men, Okeke-Ihejirika et al. (2019) found some interesting keypoint in the perception of this form of violence against women: men's use of violence against their female partners is often seen as a demonstration of both masculinity and femininity, serving to conform to societal expectations of manliness while instructing wives on adhering to traditional feminine roles. Studies indicate that IPV is frequently used by men to punish women who challenge gender norms or intrude upon their personal boundaries, threatening their perceived dominance in the relationship. However, depictions of African men's violent tendencies in these studies

lack direct input from the men themselves. Moreover, several studies depict IPV as a cyclical pattern alternating between love and abuse. This involves two phases: the *honeymoon episode*, where men fulfill their household roles and receive gratification, and the *violent episode*, marked by reactive responses to women resisting their expected roles.

The meta-analysis by Aceves and Tarzia (2024) on the perspectives of adult male perpetrators of sexual violence against women identified several themes related to attitudes and justifications of sexual violence, often reflecting patriarchal masculinity and rape myths. Perpetrators commonly sought to displace blame onto the victim or external factors to avoid being labeled as rapists. Some tried to distance themselves from their actions by emphasizing their good character or mitigating circumstances. The least common but potentially the most hopeful theme among the four identified is labeled the "I'm really sorry" theme. In this theme, perpetrators acknowledge their use of sexual violence, take responsibility for their actions, and express genuine empathy and remorse towards the victim. This theme stands out as it has not been previously recognized in existing literature. Although it is not widely observed, it deserves deeper investigation because it could shed light on the factors that lead to feelings of remorse and acceptance of responsibility, offering insights into how interventions or rehabilitation programs can foster these qualities.

1.7 IPV Measurements

As noted by Bender (2016), despite being extensively researched, there remains a notable lack of consensus among researchers regarding the definition and measurement of the major typologies and constructs of IPV. The Revised Conflict Tactics Scales is the most commonly utilized instrument for assessing intimate partner violence in clinical populations, but has faced criticism on two main fronts. Firstly, it assesses behaviors without considering their effects, meaning, it fails to consider the context of violence (i.e., the impact of violence,

reasons/motives for using violence, and initiation) (Vall et al., 2023). Secondly, although it evaluates physical and psychological violence and aggression, it fails to adequately encompass the full spectrum of non-physical or psychological abusive behaviors, which feminist researchers and advocates argue are predominantly experienced by women from men. In England and Wales, the Crime Survey includes a section on interpersonal violence. To encourage disclosure, a self-completion module was introduced alongside the face-to-face survey. This module uses a modified version of the Conflict Tactics Scale and includes questions on various forms of abuse. However, it lacks specific measures to assess common impacts of coercive control and provides limited space for respondents to detail their experiences.

Myhill (2017) identifies two key challenges in population surveys regarding domestic violence: overreporting and difficulty distinguishing abuse types. Overreporting arises from respondents misinterpreting behavior-specific questions, leading to inflated numbers. Some respondents may also report incidents unrelated to domestic violence, complicating prevalence measurement. Additionally, surveys initially overlooked differentiating abuse types, but recent studies highlight gendered patterns, with women reporting more emotional abuse and threats. The author suggests considering the context of violence to truly understand abuse, emphasizing the importance of non-physical forms like verbal and emotional abuse. Focusing solely on physical violence may obscure the broader picture, and measuring abuse as discrete acts may not capture the continuous nature of coercive control experienced by victims.

Bender (2016) discusses methods and measurements in IPV research, focusing on various types of IPV experienced by women. There's ongoing debate among researchers regarding the classification and severity of violence across these dimensions. Some propose categorizing physical and sexual IPV similar to levels of physical assault to better assess

severity. However, defining and measuring psychological abuse, often seen as the most prevalent form of IPV, presents challenges due to differing views on underlying theories and the subjective nature of harm. Feminist researchers criticize the traditional approach, arguing that focusing only on specific violence types overlooks the systemic control and coercion inherent in IPV dynamics. They stress that psychological violence, intertwined with physical and sexual abuse, can be particularly damaging for victims. Yet, assessing psychological IPV is difficult due to its subjective nature and lack of uniform definition. Despite these challenges, psychological IPV, like controlling behavior and verbal degradation, can occur independently of physical violence. The predominant variable-oriented approaches used in IPV assessment prioritize quantifying data on violence frequency and types, often overlooking the complexity of survivors' experiences. While this approach aids policymakers, it often neglects nuances such as variations in severity and episodic nature. Additionally, national-level data may not capture geographic differences in IPV prevalence, and standardized assessments may overlook regional contexts and broader social factors contributing to violence. The author also stresses the fact that the way researchers frame questions about IPV significantly influences the responses they receive from participants. Studies comparing rates of IPV reported in different surveys, such as the National Violence Against Women Survey (NVAWS) and the National Crime Victimization Survey (NCVS), have revealed substantial discrepancies. These differences stem from variations in survey objectives, design, wording of questions, and underlying ideologies shaping the measurement of IPV.

1.8 Interventions and Perpetrators Programs across Europe

Quoting the national Italian guidelines for perpetrators programs by the network RELIVE (2024), the Italian association that brings together numerous centers for

perpetrators, the aim of the programs is to immediately interrupt the violence in order to ensure the safety of victims. These programs are part of a broader process of cultural and political change to overcome gender stereotypes, the hierarchy between men and women which leads to discrimination and gender violence, thus as with any other form of violence and discrimination. Perpetrator programs focus on changing perpetrators' behavior, holding them accountable, and helping them understand the impact of their actions. These programs use group and individual sessions to increase empathy and challenge gender stereotypes. Some also address issues like substance abuse and intimacy deficits. However, comparing European studies on these programs is challenging due to diverse designs and participant motivations. Longer program engagement may lead to intrinsic motivation for change. Experts recommend offering both voluntary and court-mandated programs to engage diverse perpetrator groups (Hester & Lilley, 2014).

Acknowledgement of the importance of working with perpetrators varies across Europe. In Eastern European countries, intervention programs are underdeveloped and underfunded, facing challenges like insufficient resources and inadequate legislation. Despite these difficulties, interest in domestic violence perpetrator interventions is growing, leading to increased evaluation studies to determine the most effective approaches. Political actors are particularly interested in understanding the best use of public funds for these programs, sparking debates in both Anglo-American and European contexts (Wojnicka et al., 2016).

Two main approaches to intervention for batterers are the Duluth model, emphasizing feminist psychoeducation to challenge controlling beliefs, and cognitive behavioral therapy (CBT), focusing on skill-building and behavior modification. Both are often conducted in group settings, allowing perpetrators to confront their actions and learn from peers. Over time, these approaches have become increasingly similar, blending elements from each other. However, they also share common historical origins and employ similar psychosocial

methodologies, with several programs integrating cognitive-behavioral methods alongside psycho-educational components. Inconsistencies and challenges arise from varying terminology and concepts in domestic violence perpetrator programs (Wojnicka et al., 2016).

As written in the guidelines of RELIVE (2024), interventions draw attention to the most significant dimensions of the different factors involved in this phenomenon, organized in an ecological model of this type: socio-cultural factors encompass the gendered social environment, disparities in power dynamics between men and women, gender socialization, male stereotypes, and the cultural acceptance of violence as a conflict resolution method. This includes cultural definitions of violence, societal and legal consequences for domestic violence, among other aspects; relational factors involve power dynamics influenced by gender expectations and stereotypes within relationships, as well as communication and conflict resolution styles; individual factors can be categorized as follows:

- Cognitive factors: encompass beliefs and attitudes towards gender roles, relational expectations such as romantic ideals, and notions of masculinity.
- Emotional factors: include the management and expression of emotions such as anger, frustration, and jealousy within a gendered framework, influenced by attachment styles and personal identity.
- Behavioral factors: consist of violent or authoritarian behaviors rooted in a sense of entitlement based on gender, contrasted with the ability to foster respectful and equal relationships. This encompasses communication skills, conflict resolution abilities, stress and anger management, and emotional recognition and regulation.

Findings from Campbell et al. (2010) highlight several crucial themes for engaging and assisting abusive men in intimate relationships. It is suggested that most male perpetrators of domestic violence are unlikely to seek help for their violent behavior due to

entrenched male gender role attitudes and a lack of awareness about available resources. Past research on male batterers' help-seeking behaviors corroborates this assertion, indicating a connection between dependence on reference group identity and attitudes toward seeking help. Based on the article by Walker et al. (2016), existing research indicates that the majority of clients in intervention programs are resistant to change, and non-compliance with treatment is linked to a higher risk of recidivism. However, individuals who perpetrate domestic violence may enter these programs with varying motivations and stages of readiness for change. Therefore, when evaluating domestic violence perpetrator programs, it's essential to consider participants' motivation. Additionally, factors such as sociodemographics, mental health, and substance misuse may influence both treatment compliance and the likelihood of change.

In Italy, Centri per Uomini Autori di Violenza (CUAV) are centers for male perpetrators of both GBV and IPV. In particular, the work of this thesis has been carried out at Servizio Uomini Maltrattanti (SUM) of the GruppoR co-operative in Padua, Italy. The co-operative is part of RELIVE, the Italian network which comprehends more than 20 centers working with perpetrators of GBV. As well as on a national level, RELIVE places itself on the international level through Work With Perpetrators - European Network (WWP - EN). Founded in 2014, it reunites 70 members from 35 countries, including perpetrator programs, researchers, as well as victim support services. (Work With Perpetrators, 2024. *Network Members*).

CUAVs are regulated by the State-regions agreement, dated back to 2022 (Dipartimento Per Le Pari Opportunità, 2022. *Requisiti Minimi Dei Centri per Uomini Autori Di Violenza*). The law No. 69/2019, also known as 'Codice Rosso' innovates and amends the criminal and procedural regulation of domestic and gender-based violence, accompanying it with tightening of sanction. To consolidate the support for individuals receiving warnings,

police headquarters have established protocols with local services. These protocols, often referred to as "Zeus" protocols (Polizia di Stato, 2022), are named after the first case of mistreatment in Greek mythology. This approach has yielded positive outcomes, enhancing the effectiveness of the Quaestor's warning system.

SUM has been working with male perpetrators since 2014, after years of educational and project interventions in favor of women carried out by professionals trained on the topic of gender-based violence. Access to the Service may be on a voluntary basis by the men themselves, at the request of the partners, or through sending bodies such as family counseling centers, UEPE, CST, Social Services. SUM provides: individual interviews prior to joining the group; psychological support when needed; psycho-educational group program developed in 48 weekly meetings (1.5 hours per meeting) plus follow-up meetings in the 4 months after the end of the group; contact with the partner at the beginning, middle and end of the man's treatment, to collect feedback and protect her (*Servizio Uomini Maltrattanti - Gruppo Polis*, 2023). SUM uses the IMPACT questionnaire originated from the IMPACT project within the DAPHNE European program.

1.9 The IMPACT project

Between 2013 and 2014, a team of researchers and practitioners from Austria, Denmark, Germany, Spain, and the United Kingdom conducted the "Impact: Evaluation of European Perpetrator programs" project, funded by the Daphne-III-Funding Program of the European Commission. The primary objective of this project was to address the lack of comprehensive evaluations of domestic violence perpetrator programs (DVPPs) in Europe. Additionally, the project aimed to take a step towards standardizing evaluation methodologies in the field of psychosocial work with perpetrators of domestic violence. These programs, ideally situated within a community setting, are part of a coordinated approach involving

various stakeholders such as police, courts, victim protection organizations, and child and youth welfare authorities, known as a "coordinated community response" (CCR). The term "psychosocial work" refers to interventions that engage with perpetrators on a psychological level (e.g., behavioral training groups) while also involving elements of their social environment (e.g., providing feedback to victims or authorities).

The project was driven by the need to improve the fragmented outcome evaluation research in this field. Experts believe that having robust studies available is crucial for practitioners, program staff, and managers to assess and enhance the quality of their work, and for policymakers to make informed strategic decisions. The survey revealed that a prevalent approach to working with domestic violence perpetrators involves cognitive-behavioral or psycho-educational programs, often implemented in collaboration with victim support centers and other institutions. Central to the approach are global networks involved in addressing domestic violence perpetrators and supporting victims. Notably, two prominent networks are highlighted: the Work With Perpetrators—European Network (WWP-EN), which comprises practitioners and researchers in psychosocial work with perpetrators, in addition to victim support organizations; and Women Against Violence in Europe (WAVE), an umbrella organization representing European victim support groups. It is emphasized that evaluating perpetrator programs requires input from victims, which is as crucial, if not more so, than the perspective of the perpetrators (Wojnicka et al., 2016).

One interesting study has been conducted by Vall et al. (2023) on 444 men enrolled in a perpetrator program and their (ex-)partners ($n = 272$), using the Impact Outcome Monitoring Toolkit. Results indicate reductions in various types of violence and its impact, although concerns about lingering coercive control are evident. Children's safety emerges as a significant issue, with ongoing fear reported by (ex-)partners. While survivors report feeling safer over time, (ex-)partners' apprehension persists, suggesting continued coercive

behaviors. Additionally, program participants demonstrate increased awareness of violence dynamics, reflecting potential shifts in their understanding. This study indicates the importance of considering diverse perspectives to comprehensively assess program effectiveness and address ongoing challenges in IPV intervention.

This thesis examined the IMPACT questionnaire delivered to 43 perpetrators from the SUM service of the Gruppo R co-operative in Padua, Italy during the years 2023 and 2024. The following chapter will delineate the structure of the questionnaire.

CHAPTER 2: METHODS

The focus of this thesis is on male perpetrators of IPV, since the vast majority of the literature on IPV concentrates on female victims. Objects of the study are perpetrators who took part in psycho-educational groups for one year plus four months of follow up. They have been administered the IMPACT questionnaire in five different moments: T0—before starting the program, during the preliminary interview; T1—at the beginning of the program, after a couple of months; T2—halfway through the intervention; T3—at the end of the program; T4— the follow up, after four months since the end of the program. The questionnaire has the goal to monitor the progress of the intervention. Due to organizational reasons, it was not possible to gather data of participants across all the steps of the intervention, thus this dissertation took only considered data corresponding to the beginning (T0) and the end of the intervention (T3). What we expect from these men is a general improvement, meaning a cognitive and behavioral change in violent and abusive behavior, and an effective decrease in the display of violent behaviors, which is the object of the intervention itself.

2.1 Material and Procedures

The IMPACT Toolkit enables the measurement of perpetrator program outcomes in a contextualized way and has demonstrated promising results, advocating for the incorporation of survivor-focused outcome measures. It was designed to evaluate potential changes in perpetrator conduct and their consequences, along with potential alterations in the safety of victims. As described in detail by Vall et al. (2023), this tool includes ten versions of the questionnaire, each slightly modified to align with the respective treatment phase and in relation to the respondent (two versions: client and (ex-)partner). Preceded by questions about the person's biography, such as age, working status, income, and questions about the referral route to the program and the reasons to attend the program, five scales are present: violent behavior (emotional, physical, and sexual); impact of the violence on the victim and child(ren); victim's safety; perpetrator's self-responsibility for violence; perpetrator's positive changes. All the items of violent behavior, impacts, police calls, (ex-)partner's fear, and positive change scales were equivalent across the clients' and (ex-)partners' questionnaires. Anxious and depressed feelings were reported by (ex-)partners, and the self-responsibility for violence was reported by clients.

The first scale (violent behaviors) contains 35 items divided into three sub-scales regarding three types of IPV: emotional (13), with items such as "You isolated her from friends and family", "Extreme jealousy and possessiveness"; physical (14), with items such as "You hit her", "You restrained her"; and sexual behavior (8), with items such as "You hurt her during a sexual intercourse", "You refused her requests to use protections to have sexual intercourses". These sub-scales assess the frequency of each violent behavior through a 3-point Likert scale ("Never", "Sometimes", "Often").

The second scale (impact of violence on the victim) comprises 20 items about physical and emotional impacts on the (ex-)partner, measured through a dichotomous scale (“Yes”, “No”). Examples are: “Injuries such as bruises/scratches/minor cuts”, “She lost respect for you”, “Felt angry/shocked”.

The third scale (perpetrator’s self-responsibility for violence) is composed of 11 items about the internal or external attribution (locus of control) of the reasons for the violent behavior, with items such as “To stop her from doing something”, “She was laughing at you”, “Your alcohol/drug use”.

The fourth scale (victim’s safety) includes three frequency sub-scales: police calls (“Not at all”, “Once”, “2–5 times”, “6–10 times”, “More than 10 times”), as well as (ex-)partner’s anxious and depressed feeling (“Never”, “Not often”, “Sometimes”, “Often”, “Always”). The scale also includes questions about the actual status of the relationship and the hopes for the future of the relationship.

Finally, the fifth scale (Perpetrator’s positive changes), only present in T3 and T4, includes 23 items about changes made by the participant, such as stopping using violence or improving their parenting skills.

The questionnaire concludes with two questions: “What do you think you might need to help you stop being violent and not having abusive behavior in your relationships?” for T0, T1 and T2; “What do you think we might need in order to make the program more effective in terms of change?” for T3 and T4. In every questionnaire, they were also asked if there was anything else they would like to say.

2.2 Participants

Forty-three participants took part in the survey in T0 and T3. Since the participants were divided into different groups along the years, it is not possible to describe the average age, but we can say that the majority were between the ages of 31 and 60 (N=37) and were full time employees (N=32). Regarding the income, on a scale going from 1= “fight for basic needs” to 6= “high income”, most of them managed regular treats and savings or holidays (N=12, M=3.2, SD=1.2). Perpetrators were referred to the program through a large variety of routes (each man could cross more than one option): more than half of them (58.2%) attended the perpetrator program through their lawyers (27.9%) and mandatory referral routes such as criminal courts (14%), child protection (11.6%), UEPE (Ufficio Esecuzioni Penali Esterne) (4.7%) and probation (2.3%). Also, there were a proportion of men that were recommended to attend by their partner/ex-partner (11.6%), relationship counseling service (9.3%) and counseling/mental health service (7%). Finally, some clients were directed through publicity (poster or internet advertisements) (4.7%) and, equally (2.3%) from addiction service, friends and family, doctor/hospital, restorative justice and religious place. None of them were referred to by civil courts and helpline.

The reasons for joining the program were also diverse. The majority were internal reasons, such as: wanting their (ex-)partner to feel safe around them (55.8%), to improve their couple relationship (48.8%), to stop using violence (46.5%) and/or abusive behavior (39.5%), being a better father to their children (41.9%), wanting their (ex-)partner (39.5%) and/or child(ren) (20.9%) to not be afraid of them, and the fear of being left by their partner (23.3%). External reasons were also found, such as being referred as part of criminal court (30.2%) or family court (2.3%) sentences or being referred by child protection services (4.7%). Additionally, a minority of men indicated the fear of going back to prison as a motivation for participating in the program (9.3%).

CHAPTER 3: RESULTS

3.1 Violent Behavior

As shown in **Table 1**, the results revealed a decrease in all forms of violence - emotional, physical, and sexual. In particular, for physical violence, we can witness a significant decrease for four variables: “slap” $t(41)=7.7, p<.001$, “kick” $t(42)=3.8, p=.001$, “hit” $t(42)=2.6, p<.05$ and “threaten” $t(41)=5.8, p<.001$. For emotional violence, variables which significantly decreased were five: “emotional isolation” $t(38)=2.02, p=.05$, “scare” $t(36)=6.5, p<.001$, “threaten” $t(40)=4.9, p<.001$, “jealousy” $t(39)=3.2, p<.001$, and “humiliation” $t(40)=2.2, p<.05$. For sexual violence, statistical analyses did not reveal any difference between T0 and T3, all $p's>.16$.

Table 1. Comparison between Mean and Standard Deviation at T0 and T3 for each violence.

Physical violence					
Items	N	T0		T3	
		M	SD	M	SD
you slapped her *	42	0,595	0,37	0,07	0,261
you kicked her *	43	0,209	0,366	0	0
you hit her **	43	0,221	0,367	0,05	0,213
you burnt her	43	.00a	0	.00a	0,000
you bit her	43	0	0	0,02	0,152
you restrained her	43	0,081	0,242	0,02	0,152
you put your hands on her	42	0,131	0,314	0,05	0,216
you threatened her *	42	0,429	0,463	0,02	0,154
you hit her with objects	43	0,02	0,152	0	0
you threatened to hit her	43	0,012	0,076	0	0
you threatened to kill her	43	0,163	0,34	0,02	0,152
you prevented her to ask for help	42	0,071	0,236	0	0
you stalked her	43	0,116	0,306	0	0
you locked her	43	0,047	0,183	0	0
Emotional violence					
Items	N	T0		T3	
		M	SD	M	SD
You isolated her **	39	0,09	0,278	0	0
you told her what to do	40	0,263	0,5062	0,13	0,335
you made her ask for permission	39	0,19	0,453	0,05	0,223
you threatened the children	37	0,030	0,1640	0	0
you scared her *	37	0,87	0,586	0,16	0,026
you prevented her from leaving the house	39	0,05	0,223	0,03	0,16
you control the family money	39	0,55	0,801	0,31	0,655
you threatened her *	41	0,402	0,4770	0,05	0,218
jealousy *	40	0,43	0,583	0,13	0,335
you told her what to wear	41	0,18	0,444	0,1	0,3
you humiliated her **	41	0,29	0,500	0,12	0,331
Sexual violence					
Items	N	T0		T3	
		M	SD	M	SD
You touched her and she got scared	41	0,049	0,197	0,05	0,218
You forced her to have sexual intercourse	41	0,037	0,173	0	0
You hurt her during an intercourse	41	0	0	0	0
You did not respect limits/safe words	40	0	0	0,05	0,221
You refused to wear contraceptives	41	0	0	0,02	0,156
You did not stop when she asked you to	41	0,037	0,173	0,02	0,156
You sexually abused her	40	0	0	0	0
You threatened to sexually abuse her	41	0	0	0	0

* $p < .001$ ** $p < .05$

3.2 Impact of Violence on the Victim and Children and their Safety

According to the data shown in **Table 2**, the impact on the (ex-)partner and child(ren) decreased. In particular, compared to T0 (N=6; M = .14, SD = .35), no participants in T3 reported their children to be angry with their mothers, $t(42) = 2.61, p = .013$. Regarding the

impact on the victim, the variables which decreased the most were seven: “injuries” $t(42)=4.8, p>.001$, “She lost respect” $t(42)=4.7, p>.001$, “She felt sadness” $t(42)=3.4, p=.001$, “She felt anxious” $t(42)=2.02, p<.05$, “She felt angry” $t(42)=4.0, p=.000$, “She feared for her life” $t(42)=2.5, p>.001$, “She got scared” $t(42)=2.2, p>.001$. Finally, two single items were included to assess the safety of the victim: level of fear and police call-outs. According to the participants, the victims show decreased levels of fear, $t(43)=4, p=.016$. Police call-outs also decreased, from T0 being $N=40; M = 1.73, SD = .88$ to T3 being $N=40; M = 1.03, SD = .16$, $t(40)=5.2, p<.001$

Table 2. Comparison between Mean and Standard Deviation at T0 and T3 for impact on the partner, children and their safety.

Impact on partner					
Items	N	T0		T3	
		M	SD	M	SD
Injuries *	43	0,47	0,505	0,07	0,258
Injuries that led to hospital	43	0,19	0,394	0,07	0,258
No impact	43	0,07	0,258	0,12	0,324
She lost respect *	43	0,65	0,482	0,23	0,427
She left you	43	0,16	0,374	0,12	0,324
Depression	43	0,23	0,427	0,14	0,351
She stopped trusting you	43	0,21	0,412	0,14	0,351
She was unable to cope	43	0,12	0,324	0,09	0,294
She felt worthless	43	0,07	0,258	0,07	0,258
She felt sadness *	43	0,44	0,502	0,19	0,394
She felt anxious *	43	0,21	0,412	0,05	0,213
She felt isolated	43	0,02	0,152	0,02	0,152
She felt angry *	43	0,65	0,482	0,3	0,465
She self-harmed	43	0,07	0,258	0,02	0,152
She feared for her life *	43	0,19	0,394	0,02	0,152
She had to be careful of what she said/did	43	0,28	0,454	0,14	0,351
She was worried you could left her	43	0,12	0,324	0,07	0,258
She protected herself/children/animals	43	0,19	0,394	0,12	0,324
She got scared *	43	0,42	0,499	0,23	0,427
Safety of the victim					
Items	N	T0		T3	
		M	SD	M	SD
Level of fear *	43	0,79	0,965	0,23	0,48
Police call-outs	40	1,73	0,877	1,03	0,158
Children					
Items	N	T0		T3	
		M	SD	M	SD
I live with my children	43	0,3	0,465	0,4	0,495
I see my children	43	0,28	0,454	0,3	0,465
My partner doesn't let me see my children	43	0,02	0,152	0	0
Denial of the court to live with my children	43	0,09	0,294	0,07	0,258
Denial of the court to see my children	43	0	0	0,02	0,152
I appealed to court to have contact with my children	43	0,05	0,213	0,02	0,152
My children have been taken away and adopted	43	0,2a	0,152	.02a	0,152
I don't think our children were affected by the abse	43	0,12	0,324	0,12	0,324
My children are angry with me	43	0,14	0,351	0,09	0,294
My children are angry with my partner **	43	0,14	0,351	0	0
One or more of my children is on Children's Services	43	0,09	0,294	0,02	0,152

* $p < .001$ ** $p < .05$

3.3 Perpetrators Self-Responsibility for Violence

The clients' perceptions of their responsibility for the violence they committed remained consistent over time ($p > 0.05$), as shown in **Table 3**. As such, there was no significant change observed in either internal or external locus of control. The only significant variable was “she cheated on me”, $t(43)=2.2, p=.032$.

Table 3. Comparison between Mean and Standard Deviation at T0 and T3 of the reasons for the violent behavior.

Reasons for the violent behavior					
		T0		T3	
	N	M	SD	M	SD
To stop her from doing something	43	0,3	0,465	0,16	0,374
To feel in control	43	0,07	0,258	0,02	0,152
She was laughing at me	43	0,09	0,294	0,02	0,152
She cheated on me *	43	0,19	0,394	0,05	0,213
To make her do something	43	0,16	0,374	0,05	0,213
You did not trust her	43	0,19	0,394	0,21	0,412
For my use of alcohol	43	0,14	0,351	0,07	0,258
You did not want her to leave you	43	0,02	0,152	0,07	0,258
You felt insecure	43	0,28	0,454	0,23	0,427
You were jealous/possessive	43	0,19	0,394	0,23	0,427

* $p < .001$

3.4 Perpetrators Changes

74.4% (N=32) of participants declared to have stopped using violence and 39.5% of them (N=17) have stopped using abusive behavior. 46.5% (N=20) believe their partner/ex-partner is not afraid of them and 37.2% (N=16) think their partner feels safe around them. About the status of the relationship, 20.9% (N=9) of the participants declare that their partner did not end the relationship, as well as 44.2% (N=19) think their relationship is now better. However, 7% (N=3) say they ended the relationship amicably. Moreover, 32.6% (N=14) believe their future relationship will be non-abusive and 11.6%

(N=5) state that their current relationship is non-abusive. Concerning the children, 34.9% (N=15) think they can work well on their upbringing, together with their partner/ex-partner, 14% (N=6) are allowed to have contact with their children and 23.3% (N=10) believe their children are not afraid of them. 58.1% (N=25) also believe to be a better parent to their children. The last part concerned the legal part: 18.6% (N=8) fulfilled their criminal court sentence/bail/parole conditions and 7% (N=3) of the participants who had already gone to prison declared to have not gone back to prison.

Finally, the questionnaire did not investigate the marital status of the participants, but the available data are as follows: 18 of them are living together with their partner, both in T0 and in T3. 8 are living apart in T0 and 6 in T3. None of them were splitting up in T0 but 1 was in T3. For 10 participants the relationship ended in T0 and 12 declared so in T3. 3 perpetrators were not sure about the relationship status in T0 but just 1 was in T3. 6 of them reported in T0 "something else" concerning their relationship, such as "we don't live together but we see each other" and "we work together". 5 of them reported "something else" in T3, for example "never had a real relationship" and "we are working on our future together". Participants were also asked to indicate the hope towards their relationship. The vast majority of them (N=31) hoped to be together with their partner/ex-partner in T0, but it decreased in T3, with 21 of them hoping so. Only 1 of them hoped the relationship ended in T0, but in T3 this number goes up to 3. In T0, 4 people crossed the option "I don't know" and 5 of them did so in T3. 3 people declared to be seeing another person in T0 and 4 did so in T3. 4 participants opted for "something else", for example "it is not my intention to have any relationship with her" and "a healthy behavior for our daughter's education".

3.5 Open questions

For every variable, participants were allowed to give their personal opinion in the section “other” or “something else”. Moreover, the questionnaire ends with two open questions: in T0, they were asked what they think they would need in order to stop violent and abusive behaviors, and if there was anything else they would like to report; in T3, they had the possibility to implement the service by saying what the program would need, and if there was anything else they would like to report. Interestingly, in T0, the answers reflected internal and external locus of control. On one hand, the majority of men reported answers concerning an internal locus of control, meaning answers such as “to be less impulsive”, “to control my emotions”, “psychotherapy support/help from the group”, “to build more self-esteem”, “a better style of communication”, “to understand my emotions”, “to be less jealous”. On the other hand, a small part of participants reported answers referring to an external locus of control, including “not to be attacked”, “to be listened more”, “to be respected”. The answers about the possible change in the program will be further discussed in the “Future Research” section. Finally, in T3, half of the participants felt the need to say that they enjoyed the program, that it was worthy and useful because they had the chance to reflect on their feelings and work on their behaviors, to change as men, partners and fathers. Interesting answers are found in the variable “Other” of the section “Reasons for the violent behavior”: here, all of the answers reflect an external locus of control, focusing on the (ex-)partner (“she recalled an old cheating”, “little attention towards her”, “she lied to me”), external factors, such as “state of tension due to the Syrian war” and “I want my money back”, or answers that reflect coercive behavior, for example “I did not want her to keep on working the streets” and “I told her what to do and where to go just for a matter of organization”.

CHAPTER 4: DISCUSSION

4.1 General Comment

This thesis examined a tool designed to evaluate the outcomes of perpetrator programs for IPV in a contextualized way. By including men in the program, several types of violence, the impact of violence and other contextual aspects, several interesting results were found. Only one paper (Vall et al., 2023) has been found to have conducted an analysis of the IMPACT questionnaires on a sample of 444 men enrolled in a perpetrator program and their (ex-)partners (N=2272). Most of the results gained by this thesis are in line with the aforementioned article.

First, the frequency and presence of all types of violence were significantly reduced. Moreover, it was evident that all types of violence measured in this study were interconnected, rather than occurring in isolation.

Second, the impact of violence was reduced significantly. Furthermore, almost half of the participants reported their partner to not be afraid of them and more than half of the men on the program believe to be a better parent to their children.

Third, safety has been assessed through the level of fear of the victim and police call-outs. Both decreased, especially the level of fear of the (ex-)partner. In addition, feelings of sadness, anxiety and anger of the (ex-)partner decreased, according to the men on the program.

Fourth, the results suggest that participants' perceptions of their responsibility for the violence they committed remained stable over time, indicating no significant change in either internal or external locus of control.

Finally, the open questions revealed different interesting recurring topics. Some of the reasons reported by the participants are also found in the research of Flynn & Graham (2010) on perpetrators' and victims' explanations for IPV: perceived threats to the relationship (cheating, not full commitment to the partner), starting an argument, lying, get partner's attention, certain "hot buttons" as money, and coerce or control behavior such as making the partner stop doing something.

4.2 Limitations

Although this study has several strengths, there are also limitations that must be taken into account when interpreting the results.

First of all, this study has been conducted on male participants' questionnaires only. This was due to organizational issues concerning the availability of (ex-)partners' data. These questionnaires are delivered through the service called "partner contact", which aims to keep track of the violent behavior from the (ex-)partner perspective. In line with the comprehensive definition of success outlined in academic literature, which encompasses enhancing the safety and empowerment of victims, this contact also involves informing the woman about the availability of anti-violence centers on the territory. This aims to guide her towards seeking specialized support and initiating a path to break free from violence (Demurtas & Peroni. 2023).

However, this "partner contact" does not always take place: victims of stalking are not reached, and, in general, the man should give consent for the service to contact the (ex-)partner in order to collect the information through the questionnaire. Several dyadic studies have indicated that although men and women provide similar estimates of women's violence in intimate relationships, men often underestimate their own violent behavior (Dobash, 2004). As reported by Demurtas & Peroni (2023), monitoring change often relies on

the narratives provided by the men themselves, recorded by practitioners during the program. Nevertheless, this information cannot be considered sufficient, so there is the need to supplement it with other sources of information, particularly victim/survivor perspectives and police reports. However, these sources, too, have several critical issues: law enforcement agencies risk underreporting cases of violence (especially when it involves nonphysical violence, which might not be considered a crime) due to a lack of specific training, while (ex-)partners often do not respond to researches for a variety of reasons, including the end of the relationship, fear of retaliation and, in the case of Spain, the programs' explicit legislative prohibition on contacting (ex-)partners.

In this regard, it seems important to bring up the concept of effectiveness of perpetrators' programs. Recent research on these issues has yielded varied outcomes, with some studies highlighting a significant lack of effects while others show more promising results. This variability can be attributed to differences in the comparability of empirical studies, including variations in evaluation designs, reference contexts, and types of programs considered (Demurtas & Peroni, 2023). Evaluating the effectiveness is challenging due to a lack of methodologically sound studies and significant implementation issues, such as judicial overrides of condition assignments and low follow-up data rates on recidivism. Studies on traditional intervention programs for IPV offenders show mixed results. About half of the studies find that intervention programs for perpetrators of GBV are more effective than no treatment in preventing new IPV episodes. However, there is no clear evidence favoring one type of intervention over another (Eckhardt et al., 2013). Additionally, the coercive nature of many interventions, such as court orders, can complicate the change process, especially regarding the initial decision to change and adjustments in living arrangements for those involved. Greater consistency and clarity in referring men to domestic violence programs from the legal system are needed to ensure opportunities for intervention.

Moreover, consistent consequences for non-attendance and re-offending are essential (Day et al., 2009). Hester & Lilley (2014) investigated key goals of domestic violence perpetrator programs, such as: improved relationships between program participants and their partners/ex-partners, marked by respect and effective communication; expanded "space for action" for partners/ex-partners, enabling them to reclaim their voice, make choices, and enhance their well-being; providing children with safer, healthier childhoods where they feel heard and cared for.

The SUM service considered "success" on different levels, such as to be present and actively participate in the group, not returning to prison or violating restraining orders, reduction in actual re-offending or repeated abusive behavior, changes in the type of abusive behavior perpetrated, decrease in the risk of victimization, shifts in attitudes towards women, changes in attitudes towards the use of violence, whether directed towards women or in general.

Another limit concerns the design of the questionnaire, which was firstly created to assess the man and the (ex-)partner still living together, while now most of the perpetrators of the program are not living with their ex-partner. Quoting the research by Gondolf (2002), including in the "partner contact" only initial partners leaves unanswered the question of whether men transfer their abusive behavior to new partners.

Finally, methodological limitations are also present, for instance the sample size and the lack of control groups. Furthermore, the questionnaire did not investigate whether the participants had children or not, and their marital status (even if this information was gained through initial interviews). The questionnaire, being self-report, may present the social desirability bias, meaning a general tendency to give desirable answers. Additionally, the lack of validated scales measuring different constructs, such as victim blaming or endorsement of gender roles, might be limiting: what is being measured are behaviors, whereas it would be

interesting, for example, to research what kind of violence perpetrators of IPV commit most often in accordance to different attitudes, beliefs, and ideologies they may embrace.

4.3 Future Research

Talking with psychologists working in the SUM service, some issues concerning the IMPACT questionnaire emerged. These issues could be taken into account for a future implementation of this tool. Firstly, concerning abusive behaviors, it seems necessary to assess the timing, as it is done in T0, T1 and T2 (each item has both the variable “never/sometimes/often” and “in the last 12 months/before the last 12 months”). In doing so, practitioners could better understand the gained consciousness and responsibility of perpetrators for their abusive behaviors. Moreover, a more detailed understanding of their abusive behavior could be gained through a Likert scale or a continuum, instead of a “yes/no” answer. Finally, the part concerning abusive emotional behavior seems not exhaustive enough, lacking a comprehensive understanding of the victim’s experience. This is in line with a previous research by Hester et. al, (2023): women pointed out that the existing survey questions missed several instances of abusive behaviors, which could deter respondents if they feel their experiences are not represented. They recommended adding a range of abusive behaviors that better reflect the reality of domestic abuse, for example gaslighting (making the victim question themselves, their sanity, their thoughts and decisions), being threatened around immigration status, purposely disturbing the survivor’s sleep / routine. Participants of this research also indicated that several significant impacts were not addressed in the survey, such as “fear that you will not be able to manage on your own, because the perpetrator has undermined you so much (lack of confidence rather than lack of money)” or “perpetrator refusing to leave the family home (e.g. if house is in survivor’s name)”.

Lack of child support is another important matter concerning safety of the victims, but also to assess the effectiveness of these programs. Work with male perpetrators should be connected with agencies focused on child safety. While some programs address parenting, research is limited on their effectiveness in changing violent men's fathering. Nevertheless, research suggests that these programs have the potential to improve children's lives by holding men accountable for the impact of their violence on their children. Programs should also help men communicate with their children about efforts to stop their abusive behavior (Hester & Lilley, 2014).

According to Wojnicka et al., (2016), a proposed framework aims to harmonize the fragmented evaluation of domestic violence perpetrator programs in Europe by using international organizations. These organizations connect practitioners and researchers, improving evaluation conditions despite the limited resources and competencies of many organizations. The proposed framework also emphasizes international projects and studies to compare different domestic violence perpetrator programs across countries. This international perspective aims to enhance understanding of effective treatments and promote learning and development in the field, moving away from a one-size-fits-all approach.

Regarding the data collection required for evaluating the intervention, European standards advocate for ongoing monitoring of men's attitudes and behaviors throughout the treatment process. Additionally, they emphasize internal processes initiated by staff to assess the work done and monitor men's behavior even after the intervention concludes (Demurtas & Peroni, 2023).

Additionally, the nationality of perpetrators could be the object of investigation. Culture and cultural beliefs influence the conceptualization of domestic violence, gender roles and masculinity. By assessing this dimension, more specific interventions could be

done. The study by Murphy & Ting (2010) shows that ethnic minority participants in the United States have lower attendance and completion rates for IPV programs compared to majority group members. This, along with clinical observations and relevant theories, suggests that standard IPV interventions may not adequately address the needs and perspectives of ethnic minorities. To better support these participants, one approach involves incorporating culturally focused intervention content into IPV programs.

Finally, another essential aspect of relapse prevention is ensuring that men remain engaged in treatment. Research shows that completing a program significantly lowers the risk of re-assault. Clinicians can help men stay committed by emphasizing the therapeutic relationship and using a non-adversarial approach in therapy (Whiting et al., 2014)

4.4 Conclusions

Gender-based violence is a worldwide issue, concerning mostly women who experience violence from male (ex-)partners. The European Commission proposes four typologies of GBV: physical, psychological, sexual and economic. This thesis focused on a particular subtype of GBV known as intimate partner violence (IPV), which is intricately linked with various biological, psychological, social, environmental, and economic factors. Research has shown cultural, political, economic influences, which allow the perpetration of IPV, as well as risk factors. Different studies highlight numerous adverse physical and psychological health effects associated with IPV, and a significant indirect outcome of IPV involves its impact on children. Measuring IPV is still now a complex matter, with the presence of not-always exhaustive tools and the ongoing debate among researchers regarding the classification and severity of violence. To tackle this question from the male perspective, everywhere in Europe interventions and perpetrators programs are present, with the primary objective of interrupting the violence to ensure the safety of victims. Perpetrator programs

focus on changing perpetrators' behavior, holding them accountable, and helping them understand the impact of their actions. This research has been carried out in SUM, a Centro per Uomini Autori di Violenza (CUAV) in Padua, Italy. SUM uses the IMPACT questionnaire developed within the Daphne-III-Funding Program of the European Commission. Its goal is to evaluate and keep track of the change in violent behaviors of male perpetrators of IPV during a one-year and four-months psycho-educational group program.

The study focuses on 43 male participants and the data from their IMPACT questionnaire in two moments, at the beginning of the program (T1) and at the end of the program (T3). The hypothesis was to witness a cognitive and behavioral change in violent and abusive behavior, and an effective decrease in the display of violent behaviors. The questionnaire contains in total 92 items divided into 5 scales, plus two open questions.

Despite its limitations, such as relying only on male participants' questionnaires, sample size and not considering a possible link between violence and one's ideologies and attitudes, the research found that all types of violence were significantly reduced and interconnected. The impact of violence decreased, with fewer partners reporting fear and more men considering themselves better parents. Safety improved, with reduced victim fear and police call-outs. Participants' sense of responsibility for their violence remained stable. Open-ended responses revealed common reasons for IPV, such as relationship threats, arguments, and controlling behaviors.

Future research should take into account different aspects, for example assessing abusive behaviors over time, integrating child safety and considering cultural factors. Extending the literature in this direction could help mental health professionals designing comprehensive and more exhaustive tools, and policy makers to better understand the complexity of IPV and to plan more conscious strategies.

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7. Sample: Impact Toolkit Questionnaire T0

The following two questionnaires encompass the questionnaires for first contact (T0) with both perpetrator and (ex-)partner. The questionnaires for timings T1-4 are available upon request from WWP EN.Client T0

Client T0	01/13
START of intervention self-evaluation form	
Organization Name: _____	
Programme Name: _____	
Client #ID: _____	Partner #ID: _____
Date when the questionnaire was answered: _____	
Thanks for completing this questionnaire, which is to help us to make sure we are helping people as well as possible.	
First, there are some questions about you – please tick one box for each question only. After that there are 19 questions about why you have come to this programme and what might change as a result. Most need you to answer by ticking or putting a number in a box. Please ask your support worker to help you if you do not understand and give them the completed form.	
Your age group:	
<input type="checkbox"/> Under 18	
<input type="checkbox"/> 18-21	
<input type="checkbox"/> 22-30	
<input type="checkbox"/> 31-40	
<input type="checkbox"/> 41-50	
<input type="checkbox"/> 51-60	
<input type="checkbox"/> Over 60	

Employment status:

- Full-time employment
- Part-time employment
- Combining part-time employment with caring for children/family
- Unemployed
- Unemployed and caring for children/family
- In education or training
- Retired
- Unable to work because of sickness
- Something else (please describe): _____

Income:

- Struggling to pay for the essentials (home, bills, food, child support, travel to work)
- Managing to pay for essentials but nothing left over
- Managing to buy the occasional treat or save sometimes
- Managing regular treats and saving or holiday
- Comfortably managing - don't have to worry
- High income

Are you:

- Male
- Female
- Other

Is your partner/ex-partner (the one you have been abusing):

- Male
- Female
- Other

Do you have (or parent) any children?

- Yes
- No

How many children do you have (or parent)?

- 1
- 2
- 3
- 4 or more

How old is your child / are your children?

Please, tell us how many of your children are in the following age ranges:

- 0–4 (open question, only numbers accepted)
- 5–9 (open question, only numbers accepted)
- 10–14 (open question, only numbers accepted)
- 15–18 (open question, only numbers accepted)

How many of your children are common – yours and your (ex-) partner's, how many only yours and how many only of your (ex-) partner?

Please, tell us how many of your children fall into the following categories:

- common child / children (open question, only numbers accepted)
- only my child / children (open question, only numbers accepted)
- only my (ex-) partner's child / children (open question, only numbers accepted)
- Other (please, specify): _____

Do you live with the child / children?

Please, tell us how many of your children are in the following situations:

- I currently live with them (open question, only numbers accepted)
- I currently do not live with them (and never have) (open question, only numbers accepted)
- I currently do not live with them, but I have lived with them in the past (open question, only numbers accepted)

How often has any of your children been present in the house (or elsewhere) at least for some time during your violent behavior?

- Never
- Sometimes
- Often

ONE.

04/13

How you came to the programme

How did you come to hear about this programme? Please tick all relevant boxes.

- Poster/internet/other publicity
- Police
- Child protection
- Criminal courts
- Probation
- Civil courts (injunction)
- Civil courts (custody/access)
- Addiction service
- Health - doctor/hospital etc.
- Helpline
- Friends/family/colleagues
- Partner/ex-partner
- Counselling/mental health service
- Relationship counselling service
- Restorative justice
- Religious place (church, mosque, temple etc)
- Somewhere else (please describe): _____

What are your reasons for coming to the programme? Please tick all that apply.

- I have to come as part of my criminal court sentence or bail or parole conditions
- I have to come because the family court told me to
- I have to come because the child protection services told me to
- I don't want to go back to prison again
- I want to be a better parent to my children
- I want to stop using violence
- I want to stop using abusive behaviour
- I don't want my partner to leave me
- I don't want my partner to be afraid of me
- I don't want my children be afraid of me
- I want my partner/ex to feel safe around me
- I want my relationship to be better
- Something else (please describe): _____

TWO.

06/13

Behaviour you have used towards your partner/ex-partner

We would like to know if you have behaved in your current or most recent relationship in ways, which caused upset to your partner. We want to know about all of these incidents, even those you may not have considered very serious.

Emotional Behaviour

**How often have you done the following to partner/ most recent ex?
(The one you have been abusive towards.)**

Please answer in both sections:	BEFORE last 12 months			WITHIN last 12 months		
	Never	Some-times	Often	Never	Some-times	Often
Have you insulted or put her down	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Isolated her from friends or family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Told partner what to do/not do, where to go/not go, who to see/not see	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Made partner feel she had to ask permission to do certain things such as going out, seeing friends, etc. (above and beyond being polite)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threats to hurt the children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Made them feel afraid by things you did/said	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevented partner/ex from leaving home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controlled the family money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threats to hurt partner/ex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme jealousy or possessiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Told partner/ex what to wear or not to wear or how to do hair/makeup	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Humiliated/embarrassed partner/ex in front of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you done any of those behaviours online	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Something else (please describe)	_____			_____		
	_____			_____		

Physical Behaviour

How often have you done the following to your partner/ most recent ex?
(The one you have been abusive towards.)

Please answer in both sections:	BEFORE last 12 months			WITHIN last 12 months		
	Never	Some-times	Often	Never	Some-times	Often
Slapped/pushed/shoved her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kicked/punched her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beaten her up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Burned her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bitten her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restrained her/held her down/tied her up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Put your hands on her throat or face (trying to choke or strangle or suffocate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physically threatened her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hit her with an object or weapon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threatened her with an object or weapon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threatened to kill her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevented her from getting help for injuries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stalked/followed/harassed her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locked her in house or room						
Something else (please describe)	_____			_____		
	_____			_____		

Sexual Behaviour

How often have you done the following to your partner/ most recent ex?
(The one you have been abusive towards.)

Please answer in both sections:	BEFORE last 12 months			WITHIN last 12 months		
	Never	Some-times	Often	Never	Some-times	Often
Touched her in way which caused fear/alarm/distress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forced her into doing something sexual she didn't want to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hurt her during sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disrespected boundaries or safe words	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refused her request to use contraception or protection for safer sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Made her have sex when she didn't want to or didn't stop when she wanted to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexually assaulted or abused her in any way	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threatened to sexually assault/abuse her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Something else (please describe)	_____			_____		
	_____			_____		

Impact of Abusive Behaviour on your Partner

What impact do you think the above behaviour EVER had on your partner/ex-partner at any time? Please tick all those you think have ever applied to her as a result of your behaviour.

- Injuries such as bruises/scratches/minor cuts
- Injuries needing help from doctor/hospital
- Didn't have an impact
- She lost respect for you
- Made her want to leave you
- Depression/sleeping problems
- She stopped trusting you
- She felt unable to cope
- She felt worthless or lost confidence
- She felt sadness
- She felt anxious/panic/lost concentration
- She felt isolated/stopped going out
- She felt angry/shocked
- She self-harmed/felt suicidal
- She feared for her life
- She had to be careful of what she said/did
- Made her worried you might leave
- Made her defend self/children/pets
- Made her feel afraid of you
- Something else (please describe): _____

Why do you think you did any of these things? Please tick all that apply.

- To stop her from doing something
- Because it made you feel in control
- Because she was laughing at you
- Because she betrayed/rejected you
- To make her do something you wanted her to do
- Because you didn't trust her
- Because of your alcohol/drug use
- To stop her from leaving you
- Because you didn't feel good enough/felt insecure
- Because you were jealous/possessive
- Some other reason (please describe):

In the last twelve months, how often have the police been called to your house because of violence/abuse you were using towards your partner/ex?

- Not at all
- Once
- 2-5 times
- 6-10 times
- More than 10 times

THREE.

11/13

Your children

If you have children, please answer which of the following currently applies to your children? Please tick all those, which apply

- I live with my children
- I don't live with my children but I see them regularly
- My ex-partner won't let me see the children
- The courts or state child protection have stopped me from living with my children
- The courts or state child protection have stopped me having contact/access
- I have applied to the court for contact with our children
- My children have been removed and are being looked after by foster parents
- I don't think our children were affected by the abuse
- One or more of my children is angry or upset with me
- One or more of my children is angry/upset with my partner/ex because of what's happened
- One or more of my children is currently registered with the state child protection as in need of protection because of the violence/abuse in our relationship

FOUR.

Your partner/ex-partner (the one you were abusive to) and your relationship

At the moment, how often do you think your partner/ex is afraid of you?

- Never
- Not often
- Sometimes
- Often
- Always/mostly

What is your relationship status with your partner/ex NOW?

- Together and living together
- Together but living apart
- In the process of splitting up
- The relationship has ended and we are living apart
- I am not sure
- Something else (please describe): _____

What are your hopes for your relationship with this person in the FUTURE?

- That we will be together and living together
- That this relationship will end
- I am not sure
- I am in another relationship already
- Something else (please describe): _____

FIVE.
Final thoughts

13/13

What do you think you need to change to be non-abusive in intimate relationships?

Is there anything else you want to tell us?

Thank you for completing this questionnaire. This information will be used to help us help you stop using violence and abuse. We will use it with you to work out how far you change by the time you stop coming to the programme. We will ask you to complete a similar form when you start the programme, half way through the programme and again at the end or when you stop coming if you stop before the end.

(Ex-)partner T0
START of intervention self-evaluation form

01/11

Organization Name: _____

Programme Name: _____

Client #ID: _____ Partner #ID: _____

Date when the questionnaire was answered: _____

Thank you for being willing to help us to measure the impact of our programme on your safety and on your partner/ex-partner's behaviour. We really appreciate your willingness to do this.

This questionnaire is about violent or abusive behaviours you have experienced from your partner or ex-partner since they started attending the programme to stop using domestic violence and abuse. We want to measure any changes and be able to identify if there isn't any change or if things have got worse.

We will ask your partner/ex similar questions on a separate form but your responses are essential for us to get a true picture of what is really happening and to see if your partner/ex-partner is becoming more aware of the impact of his behaviour on you.

We won't show him your responses and we won't tell him anything you have told us. We won't use your name or any identifying details in any reports.

Your safety and well-being are important and you are not to blame for what has happened to you. Please tell the person who gave you this form if you need help or protection or someone to talk to about what is happening or has happened.

Your age group:

- Under 18
- 18-21
- 22-30
- 31-40
- 41-50
- 51-60
- Over 60

Do you have (or parent) any children?

- Yes
- No

How many children do you have (or parent)?

- 1
- 2
- 3
- 4 or more

How old is your child / are your children?

Please, tell us how many of your children are in the following age ranges:

- 0–4 (open question, only numbers accepted)
- 5–9 (open question, only numbers accepted)
- 10–14 (open question, only numbers accepted)
- 15–18 (open question, only numbers accepted)

How many of your children are common – yours and your (ex-) partner's, how many only yours and how many only of your (ex-) partner?

Please, tell us how many of your children fall into the following categories:

- common child / children (open question, only numbers accepted)
- only my child / children (open question, only numbers accepted)
- only my (ex-) partner's child / children (open question, only numbers accepted)
- Other (please, specify): _____

Do you live with the child / children?

Please, tell us how many of your children are in the following situations:

- I currently live with them (open question, only numbers accepted)
- I currently do not live with them (and never have) (open question, only numbers accepted)
- I currently do not live with them, but I have lived with them in the past (open question, only numbers accepted)

How often has any of your children been present in the house (or elsewhere) at least for some time during your violent behavior?

- Never
- Sometimes
- Often

ONE.

03/11

Your hopes for the programme

What are you hoping to gain from your partner/ex-partner being on the programme? Please tick all that apply.

- He will stop using violence
- He will stop using abusive behaviour
- My children won't be afraid of him
- I won't be scared of him
- We can end the relationship amicably
- Our relationship will be better
- He will leave me alone
- I will be able to make my own decisions
- I will feel safe around him
- He will be a better parent
- Somewhere else (please describe): _____

What do you think might stop your partner/ex from changing?

- His drinking or drug taking
- His mental health or emotional state
- Something else (please describe): _____

TWO.

Behaviour your partner/ex-partner has used against you (violence and abuse)

We would like to know if you have experienced any of the following BEHAVIOURS from your partner/ex-partner (the one who is starting the programme) in the last 12 months and any time before the last 12 months. We want to know about all of these experiences, even those you may not have considered very serious.

Emotional Behaviour

How often have you experienced any of the following from partner/ex?

Please answer in both sections:	BEFORE last 12 months			WITHIN last 12 months		
	Never	Some-times	Often	Never	Some-times	Often
Insulted or put you down	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Isolated you from friends or family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Told what to do/not to do, where to go/not to go, whom to see/not to see	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Made you feel you had to ask permission to do certain things such as going out, seeing friends, etc. (above and beyond being polite)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threats to hurt your children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Made your children feel afraid by things he did/say	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevented you from leaving the home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controlled the family money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threats to hurt you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extreme jealousy or possessiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Told you what to wear or not to wear or how to do hair/makeup	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Humiliated/embarrassed you in front of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has any of those behaviours happened to you online	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Something else (please describe)	_____			_____		
	_____			_____		

Physical Behaviour

How often have you experienced any of the following from partner/ex?

Please answer in both sections:	BEFORE last 12 months			WITHIN last 12 months		
	Never	Some-times	Often	Never	Some-times	Often
Slapped/pushed/shoved you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kicked/punched you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beaten you up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Burned you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bitten you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restrained/held down/tied you up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Put his hands on your throat or face (trying to choke or strangle or suffocate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physically threatened you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hit you with an object or weapon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threatened you with a weapon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threatened to kill you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevented you from getting help for injuries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stalked/followed/harassed you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locked you in your house or room						
Something else (please describe)	_____			_____		
	_____			_____		

Sexual Behaviour

How often have you experienced any of the following from partner/ex?

Please answer in both sections:	BEFORE last 12 months			WITHIN last 12 months		
	Never	Some-times	Often	Never	Some-times	Often
Touched you in way which caused fear/alarm/distress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forced you into doing something sexual you didn't want to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hurt you during sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Had boundaries or safe words disrespected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refused my request to use contraception or protection for safer sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Made you have sex when you didn't want to or didn't stop when you wanted to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexually assaulted or abused you in any way	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Threatened to sexually assault/abuse you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Something else (please describe)	_____			_____		
	_____			_____		

Impact of Abusive Behaviour

07/11

Please tick all of the ways his past, recent or current abusive behaviour has affected you.

- Injuries such as bruises/scratches/minor cuts
- Injuries needing help from doctor/hospital
- Didn't have an impact
- Lost respect for your partner
- Made you want to leave partner
- Depression/sleeping problems
- Stopped trusting partner
- Felt unable to cope
- Felt worthless or lost confidence
- Felt sadness
- Felt anxious/panic/lost concentration
- Felt isolated/stopped going out
- Felt angry/shocked
- Self-harmed/felt suicidal
- Feared for life
- Felt had to watch what you say/do
- Worried partner might leave
- Defended self/children/pets
- Felt afraid of partner
- Something else (please describe): _____

In the last twelve months, how often have the police been called to your house because of violence/abuse your partner/ex was using?

- Not at all
- Once
- 2-5 times
- 6-10 times
- More than 10 times

THREE.
Your children

08/11

Which of the following currently applies to your children? Tick all those which apply

- My partner lives with me and our children
- My partner/ex-partner doesn't live with me but has regular contact with our children
- I have refused to allow him contact with our children
- The courts or state child protection have told my partner/ex he can't live with our children
- The courts or state child protection have stopped him having contact/access
- He has applied to the court for contact with our children
- My children have been removed and are being looked after by foster parents
- My partner doesn't think our children were affected by the abuse
- One or more of my children is angry or upset with my partner/ex-partner
- One or more of my children is angry or upset with me because of what's happened
- One or more of my children is currently registered with the state child protection as in need of protection because of the violence/abuse in our relationship

FOUR.

09/11

YOUR well-being (this is about YOU, not your partner)

Please tick the statements which most apply to you now.

I feel anxious

- Never
- Not often
- Sometimes
- Often
- Always/mostly

I feel depressed

- Never
- Not often
- Sometimes
- Often
- Always/mostly

FIVE.

10/11

Your partner/ex-partner and your relationship

At the moment. How often are you fearful of your partner?

- Never
- Not often
- Sometimes
- Often
- Always/mostly

What is your relationship status with your partner/ex-partner NOW?

- Together and living together
- Together but living apart
- In the process of splitting up
- The relationship has ended and we are living apart
- I am not sure
- Something else (please describe): _____

What are your hopes for your relationship with him in the FUTURE?

- That we will be together and living together
- That this relationship will end
- I am not sure
- I am in another relationship already
- Something else (please describe): _____

SIX.
Final thoughts

11/11

Is there anything else you want to tell us?

Four horizontal lines for writing, contained within a light orange rectangular box.

Thank you for taking the time to complete this form – please hand it in to the worker who gave it to you. We will use this information anonymously with researchers but we will not share it with your partner/ex. Please tell the worker who gave you this form if you would like to discuss this or if you need any help or support.

Note: the version of the IMPACT Toolkit Questionnaire used for this thesis could not be uploaded due to copyright issues. An open access version is shown above. It has been freely taken from the Work With Perpetrators website (https://www.work-with-perpetrators.eu/fileadmin/WWP_Network/redakteure/IMPACT/WWP_ImpactToolkit_A5_publication_web.pdf).