

Preventing domestic abuse for children and young people (PEACH): a mixed knowledge scoping review

*Nicky Stanley, Jane Ellis, Nicola Farrelly, Sandra Hollinghurst,
Sue Bailey and Soo Downe*



***National Institute for
Health Research***

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Abstract

Preventing domestic abuse for children and young people (PEACH): a mixed knowledge scoping review

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Background: A range of interventions that aim to prevent domestic abuse has been developed for children and young people in the general population. While these have been widely implemented, few have been rigorously evaluated. This study aimed to discover what was known about these interventions for children and what worked for whom in which settings.

Review methods: This mixed knowledge review was informed by realist principles and comprised four overlapping phases: an online mapping survey to identify current provision; a systematic review of the existing literature; a review of the UK 'grey' literature; and consultation with young people and experts. Information from these four sources of evidence informed analysis of costs and benefits.

Results: The evidence for interventions achieving changes in knowledge and attitudes was stronger than that for behavioural change. Shifting social norms in the peer group emerged as a key mechanism of change. Media campaigns act to influence the wider social climate within which more targeted interventions are received, and they are also a source for programme materials. While most interventions are delivered in secondary schools, they are increasingly targeted at younger children. The review emphasised the importance of a school's 'readiness' to introduce preventative interventions which need to be supported across all aspects of school life. Involving young people in the design and delivery of programmes increases authenticity and this emerged as a key ingredient in achieving impact. Longer interventions delivered by appropriately trained staff appeared likely to be more effective. Teachers emerged as well placed to embed interventions in schools but they require training and support from those with specialist knowledge in domestic abuse. There was evidence that small groups of students who were at higher risk might have accounted for some results regarding effectiveness and that programme effectiveness may vary for certain subgroups. Increasingly, boys are being identified as a target for change. The study identified a need for interventions for disabled children and children and young people from black, Asian, minority ethnic and refugee groups and a particular lack of materials designed for lesbian, gay, bisexual and transgender young people.

Limitations: Very little evidence was identified on costs and cost-effectiveness. Few studies showed an effect at the level of significance set for the review. Where it did exist, the effect size was small, except in respect of improved knowledge. The inability to calculate a response rate for the mapping survey, which used a snowballing approach, limits the ability to generalise from it.

Conclusions: While it is appropriate to continue to deliver interventions to whole populations of children and young people, effectiveness appeared to be influenced by high-risk children and young people, who should be directed to additional support. Programmes also need to make provision to manage any resulting disclosures. Interventions appear to be context specific, and so those already being widely delivered in the UK and which are likely to be acceptable should be robustly tested.

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List of abbreviations

| | | | |
|-------|---|-------|---|
| AVA | Against Violence and Abuse | PRU | pupil referral unit |
| BAMER | black, Asian, minority ethnic and refugee | PSHE | personal, social and health education |
| CASP | Critical Appraisal Skills Programme | RCT | randomised controlled trial |
| CI | confidence interval | ROI | return on investment |
| CMO | context–mechanism–outcome | SD | standard deviation |
| DVD | digital versatile disc | SROI | social return on investment |
| FGM | female genital mutilation | UN | United Nations |
| LGBT | lesbian, gay, bisexual and transgender | WAFNI | Women's Aid Federation Northern Ireland |
| PEACH | preventing domestic abuse for children and young people | | |

Plain English summary

This study used a survey, literature reviews and consultation with young people and experts to examine ways of preventing domestic abuse for children and young people. Preventative interventions include programmes delivered in school and media campaigns.

Although a wide range of preventative initiatives are delivered in the UK, provision is patchy and lacks sustainability. This reflects an absence of policy direction and insecure funding, with health service funding being especially low.

Evidence for interventions changing knowledge and attitudes is stronger than that for behavioural change. UK strategy should focus on developing home-grown interventions with features that young people find engaging such as drama/narrative. Such interventions should be closely linked to services to respond to disclosures of abuse.

While most interventions are delivered in secondary schools, they are being increasingly targeted at younger children. This research highlighted the importance of a school's 'readiness' to introduce preventative interventions and 'whole-system' approaches. Authenticity was important and was improved by involving young people at all stages.

Longer interventions delivered by trained staff appear more effective. Teachers are well placed to embed interventions in schools but they require training and support from those with specialist domestic abuse knowledge.

The impact of programmes may vary for different groups. Increasingly, boys are the key target group for change. There is a need for interventions designed for disabled children, for those from black, Asian, minority ethnic and refugee groups and for lesbian, gay, bisexual and transgender young people.

Future UK research should include the rigorous testing of home-grown programmes, and the evaluation of interventions for younger children and of media campaigns.

Scientific summary

Background

A range of interventions aiming to prevent domestic abuse has been developed for children and young people in the general population. While these have been widely implemented in the UK, the USA and Australia, few have been rigorously evaluated and so little is known about their effectiveness. Moreover, most of the evidence is from North America and its transferability to the UK context is questionable. Four systematic reviews have been published in this general area to date. Two were confined to consideration of randomised or quasi-randomised trials and there is no current systematic review of non-randomised evaluations that includes data from studies undertaken over the last 12 years. This mixed knowledge review informed by realist principles extends to include other data that address the question of what works for whom and in what circumstances.

Aims

1. To identify and synthesise the evidence on effectiveness, cost-effectiveness and acceptability of preventative interventions addressing domestic abuse for children and young people under 18 years of age in the general population.
2. To produce advice on what form future research might take in the context of England and Wales.

Objectives

1. To locate and describe the existing body of evidence relating to preventative interventions addressing domestic abuse for children and young people under 18 years of age in the general population.
2. To identify the range of short-, medium- and long-term outcomes achieved by preventative interventions for children and young people under 18 years of age to date.
3. To distinguish between different preventative interventions including educational programmes, media and community campaigns and other initiatives in terms of effectiveness, cost and cost-effectiveness.

These aims and objectives were used to generate a series of specific research questions.

Research questions

1. What is the nature of preventative interventions in domestic abuse for unselected children and young people under 18 years of age, and what theories underpin the chosen intervention strategies?
2. What outcomes are assessed in studies of preventative interventions in domestic abuse for unselected children and young people?
3. Which elements of the described programmes or interventions have proved to be effective, for which groups of children and young people, in which contexts?
4. What is the cost of preventative interventions in domestic abuse for unselected children and young people under 18 years of age, and which elements of programmes or interventions have been the principal cost-drivers?
5. What are the experiences and views of children and young people about interventions aimed at preventing domestic abuse and are these influenced by gender?
6. Which of the successful intervention programmes are most likely to be acceptable to stakeholders, and cost-effective in the context of services and developments to date in the UK?

Methods

This mixed knowledge review was informed by realist principles and comprised four phases conducted simultaneously:

1. *Mapping survey*: this was distributed online using a snowballing approach to relevant professionals and schools in 18 local authorities in the UK selected to represent varying levels of social deprivation and incidence of domestic abuse. Data were analysed using Statistical Product and Service Solutions (SPSS; IBM Corporation, Armonk, NY USA).
2. *Systematic literature review*: searches for the reviews included studies published between 1990 and February 2014. Databases searched comprised Allied and Complementary Medicine Database (AMED); Applied Social Sciences Index and Abstracts (ASSIA); Cumulative Index to Nursing and Allied Health Literature (CINAHL); EMBASE; Education Resources Information Centre; MEDLINE; PsycARTICLES; PsycINFO; Social Policy and Practice; Social Work Abstracts; Sociological Abstracts; Studies on Women and Gender Abstracts; Australian Education Index; British Education Index and the Centre for Reviews and Dissemination NHS Economic Evaluation Database (NHS EED). The systematic literature searches yielded 82 papers for full-text screening; 28 quantitative papers were included in the review covering 20 separate programmes together with six qualitative studies reporting children's views. The characteristics of each study were logged along with their quality scores. The explicit or implicit programme theories underpinning each separate programme or intervention were identified. Quantitative findings were summarised narratively under four headings: measures of knowledge; attitudes; behaviours (such as help-seeking); and incidences of victimisation or abuse related to relationships. Separate analyses were done by gender, grade, age and history of perpetration/victimisation at baseline. Qualitative data were analysed thematically using a modification of the meta-ethnographic approach.
3. *Review of the UK grey literature*: relevant websites were searched – 46 documents published between 1990 and March 2014 were identified and 18 independently conducted evaluations of programmes were reviewed.
4. *Consultation*: nine consultation groups were held with young people, experts and practitioners from education and from organisations involved in developing media campaigns on domestic abuse. In addition, 16 telephone interviews were completed with national and international experts identified with the assistance of study partners and the consultation groups. Data were analysed thematically with the assistance of NVivo (QSR International, Warrington, UK).

The systematic review yielded only one study including information on costs and benefits; we therefore mined all four sources to feed evidence into an analysis of costs and benefits.

Results

Context

Although a wide range of programmes was delivered in the 18 local authorities surveyed, provision appeared patchy: nearly half of those responding to the mapping survey reported no relevant local interventions in their area. The survey data also suggested that interventions lacked sustainability, with over half of the programmes reported running for < 2 years. Most programme funding was short term and unpredictable. There was very limited funding from health services. The expert consultation undertaken attributed this fragmentary picture to a lack of central guidance: framing the delivery of preventative interventions in domestic abuse as a statutory requirement made for wider and more consistent implementation as well as providing a strong message from governments that contributed to shifting social norms.

Most preventative interventions are delivered in secondary schools, although, increasingly, programmes are being developed and delivered for children in primary schools, where the focus is on keeping safe and on issues such as friendship, bullying and respect rather than explicitly addressing interpersonal abuse.

The systematic review identified concerns about the transferability of school programmes, which appear to have a considerable degree of cultural specificity. Media campaigns emerged as increasingly important in shaping the climate within which a specific intervention is received and they also function as a source for materials used in the delivery of preventative programmes.

The readiness of a school for implementing a preventative intervention was identified as important by the experts interviewed. The consultation groups emphasised the need for interventions to be supported across all aspects of a school's work and curriculum, and by parents, the local community and relevant local agencies. There were advantages in involving young people themselves in the design and delivery of programmes, and such approaches assisted in investing programmes with authenticity, a quality that emerged as key to programme impact.

Evidence from both the qualitative literature reviewed and the young people's consultation group argued the case for interventions to be linked to appropriate services for those who disclosed experiences of abuse in their own or their parents' relationships.

Mechanisms and processes

The length and structure of school-based interventions varied considerably from one-off sessions to manualised programmes of 10 or more sessions. Methods included didactic approaches, group discussion, role-play, quizzes and visual stimulus such as DVDs, with fewer using drama/theatre. Both the young people and the experts consulted argued for the value of drama/theatre and narrative, as these approaches had the capacity to deliver an emotional charge which contributed to authenticity as well as having benefits for children with lower levels of literacy.

Authenticity was also achieved through the use of messages and material that were recognisable and meaningful to young people and which made 'it real'. Authenticity was enhanced when interventions were delivered by those with relevant expertise or experience, and these genuine messages were contrasted with those that lacked conviction or plausibility.

The data raised questions about who should deliver these interventions. While external staff from specialist services offer knowledge and expertise on domestic abuse, they are less likely to have an impact on school culture or to provide continuity. Although teachers possess expertise in working with children and have ongoing relationships with them, the grey literature reviewed and the consultation groups described some school staff resisting involvement in teaching about domestic abuse because they lacked the necessary confidence and competence for this.

Audiences

The systematic review found evidence of skewed data in some studies suggesting that small groups of students who were at higher risk at baseline might have exerted strong influence on the outcomes of interventions. The grey literature indicated that students with personal experience of domestic abuse were less likely to engage or continue with taught programmes. This suggests that programmes aimed at children and young people may be more or less effective for certain subgroups.

Boys were increasingly identified as a target for change and all forms of consultation emphasised that messages for boys should be positively framed avoiding a blaming approach that could provoke resistance. Although Wolfe *et al.*'s evaluation of the 'Fourth R' programme was the only controlled study included in the systematic review that found gender to have a direct relationship on outcomes, this evaluation does lend support to this argument (Wolfe DA, Crooks C, Jaffe P, Chiodo D, Hughes R, Ellis W, *et al.* A school-based program to prevent adolescent dating violence: a cluster randomized trial. *Arch Pediatr Adolesc Med* 2009;**163**:692–9).

Otherwise, interventions paid little attention to addressing the complexities of domestic abuse for children and young people marginalised through race/ethnicity, class, sexuality or disability. The lack of materials designed for lesbian, gay, bisexual and transgender (LGBT) young people was repeatedly emphasised.

Outcomes

The systematic review found that where statistically significant findings were reported, the effect sizes were generally low or moderate. Larger effect sizes were seen in measures of knowledge and attitudes, although the differences in these tended to decrease over time. The only relatively large and statistically significant finding in a well-designed study in relation to behaviour was found in perpetration of physical dating violence in the previous year in Wolfe *et al.*'s evaluation of the 'Fourth R' programme, where the effect was only in boys. An increase in help-seeking was evident in some studies.

The reviews of the qualitative and grey literature showed that children and young people who received these interventions generally enjoyed them and found them valuable. Their criticisms were focused on a need for programmes delivered in school to be longer.

Theory

Feminist and social norms theories emerged strongly as causal theories from expert interviews and the literature reviews. Papers in the literature reviews that included explicit theories of change suggested increased knowledge, emotional engagement with the experience of the other and organisational modification as key mechanisms of change.

The potential to use the power of the peer group, with young people taking safe action to influence their peers to collectively challenge domestic abuse and bring about social change, was flagged up by those involved in the consultation groups and interviews. Likewise, the whole-school approach, which is emerging in the UK, utilises an ecological approach to violence prevention, but the evidence base for this model is currently limited.

State of knowledge

Although there is a body of good-quality short-term evaluations reporting participants' and stakeholders' views of programmes, most of the evaluations undertaken in the UK lack control groups and only include pre- and post-programme measures of change. There are few evaluations that examine longer-term outcomes, and very little information about the relationship between costs and benefits was found.

There are shifts towards delivering interventions to younger children and using media campaigns to deliver preventative messages on domestic abuse, but the review found little evidence of effectiveness available on either of these trends, both internationally and in the UK.

The research identified debates concerning appropriate programme goals and outcome measures. New techniques are emerging for costing complex interventions and the use of a societal perspective of costs and benefits has been advocated. Such approaches appear relevant for evaluating these interventions.

Conclusions

- Many of the long-term costs of domestic abuse are borne by the health service; there is, therefore, a strong argument for health services contributing more funding to prevention initiatives for children and young people.
- Evidence about the lack of transferability of programmes suggests that strategic planning and development should focus on developing and testing interventions that are already being widely delivered in the UK.
- Improving the readiness of schools to deliver programmes should include training and information reporting on current evidence for the school's leadership, governors and parents.

- The values and attitudes of the peer group emerged as a crucial mechanism for change and it is therefore appropriate to continue to deliver interventions to whole populations of children and young people. While schools provide a natural choice of setting for programme delivery, young people outside mainstream schools should not be omitted, as this group is likely to include young people at high risk who may require additional services.
- Programme take-up and effectiveness appear to be influenced by those children and young people who are at high risk of experiencing domestic abuse in their own or their parents' relationships. Identifying this group of children so that they can receive further support could happen in the course of delivering interventions to a whole class or school.
- School-based programmes should build close links with relevant support services that can respond to children's and young people's disclosures of domestic abuse and offer additional interventions to those at high risk.
- Interventions need to acknowledge diversity among children and young people, and programmes need to be developed for LGBT and disabled young people as well as for those from minority ethnic groups.
- Teachers require training and support from those with specialist knowledge and skills in domestic abuse. This training could be provided at the level of teachers' qualifying education as well as at post-qualification level.
- A statutory basis for delivering these interventions would enable schools, programme designers and staff to take a longer-term view which could include building ongoing evaluation, including analysis of costs, into programme delivery.

Research recommendations

1. Rigorous testing of home-grown school-based domestic abuse prevention programmes in the setting of the UK is recommended.
2. School-based interventions for younger children delivered in the UK context require independent and longer-term evaluation.
3. Media campaigns that aim to prevent domestic abuse need to be more rigorously and independently evaluated.
4. Careful consideration needs to be given to which outcome measures are appropriate when evaluating these preventative interventions.
5. Future evaluation of the cost-effectiveness of preventative initiatives in domestic abuse should include a rigorous costing methodology.
6. The mixed-methods approach used for this study has proved fruitful, and integrating qualitative research in an evaluation is likely to be more informative than confining programme testing to randomised controlled trials.
7. Public health initiatives are complex and wide reaching. Evaluation should acknowledge this by adopting a broad perspective, taking account of costs and benefits to all sectors of society.

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Chapter 1 Introduction

A range of interventions that aim to prevent domestic abuse have been developed for children and young people in the general population. While these have been widely implemented in the UK, the USA and Australia, few have been rigorously evaluated and so little is known about which interventions work, what settings they do and do not work in, and which specific populations and groups they work for. Most large-scale evidence of effectiveness of such programmes is from North America and there are questions about the transferability of these programmes to other countries. Moreover, we understand little about the mechanisms of change that make programmes effective and which theories can be harnessed to explain how change occurs.

This mixed knowledge scoping review was undertaken to address these questions in the UK context. It aimed to capture the complexity of these interventions by drawing information from a variety of sources and by involving a wide range of stakeholders from practice, policy and research. To this end, the study was developed in partnership with representatives from two organisations that have been closely involved in the development of preventative initiatives in the UK: Women's Aid and the Personal, Social and Health Education (PSHE) Association. They have played a valuable role in assisting with the development of the proposal and the recruitment and co-ordination of the expert consultation groups and they have also commented on drafts of this report. Some aspects of this study have been developed in line with their interest in obtaining 'a broad map of what's going on and . . . to recommend what we need in terms of future research' (education consultation group 1). They also emphasised from an early stage in the research that it would be 'unfair on the intervention to judge its effectiveness without taking the incredibly complex context on board' (education consultation group 1).

Policy background

The prevention of domestic abuse in the four UK nations is integrated into policies to tackle violence against women and girls. In England, prevention work emerged firmly on the national policy agenda in 2009 with the publication of *Together We Can End Violence Against Women and Girls*,¹ and this has remained an important aspect of current strategy.^{2,3} Latterly, there has been a shift in emphasis from children experiencing domestic abuse in their parents' relationships to young people's experiences of abuse in their own intimate relationships, largely in response to Barter *et al.*'s⁴ prevalence study, which exposed the extent of interpersonal abuse among young people in the UK. The Northern Irish government set out its strategy on domestic violence in 2005 in *Tackling Violence at Home: A Strategy for Addressing Domestic Violence and Abuse in Northern Ireland*;⁵ this was refreshed in 2011⁶ and has been merged with the sexual violence strategy.⁷ In Scotland, the prevention of domestic abuse is framed within a joint strategy articulated by the Scottish government and Convention of Scottish Local Authorities in *Safer Lives: Changed Lives – A Shared Approach to Tackling Violence Against Women in Scotland*,⁸ which was due to be updated in 2014. Policy devoted to preventing domestic abuse has a longer history in Scotland; the recent strategy was preceded in 2000 by *The National Strategy to Address Domestic Abuse in Scotland*⁹ and, more specifically, *Preventing Domestic Abuse: A National Strategy* in 2003.¹⁰ Welsh Assembly government policy on domestic abuse was laid out in *The Right to be Safe*,¹¹ a 6-year strategy to tackle all forms of violence against women. More recently, a mandate for all schools in Wales to incorporate domestic abuse prevention into the curriculum was included in the 2012 White Paper;¹² this was due to come into law in 2014.

Background to the review

There have been four systematic reviews published in this general area to date. Two included only randomised or quasi-randomised trials, and reported only on the incidence of victimisation and/or perpetration.^{13,14} This study extends beyond that approach to consider a range of other data that can take us much closer to the issue of what works for who in what circumstances, what theoretical models of effect are held by stakeholders and programme designers (conscious and unconscious), what outcomes matter to stakeholders, and what mechanisms might (need to) be fired to ensure that different programmes effect change in different contexts. A further systematic review encompassed a wider range of studies and outcomes, but included only data published up to 2003.¹⁵ The recent review undertaken for the National Institute for Health and Care Excellence (NICE) covered a broad range of populations, including children who were exposed to domestic abuse, but did not include educational interventions, thus missing most initiatives aimed at prevention in a general population of children and young people.¹⁶ Both of the reviews that focused on incidence outcomes found some evidence of effect, but the authors caution that the included studies were generally of low or moderate quality only, and that the generalisability of the findings beyond the study populations is not yet established.^{13,14} The generalisability from the USA to the UK is even less clear. While some of the non-randomised studies included in Whitaker *et al.*'s 2006 review¹⁵ provide insights into other aspects of the included programmes beyond effectiveness, a review published in 2003 is likely to include data generated somewhat earlier, meaning that there is no current systematic review of non-randomised evaluations that includes data from any studies undertaken over the past 12 years or so.

Aims and objectives

The following aims and objectives were identified for this study at the outset.

Aims

1. To identify and synthesise the evidence on effectiveness, cost-effectiveness and acceptability of preventative interventions addressing domestic abuse for children and young people under 18 years of age in the general population.
2. To produce advice on what form future research might take in the context of England and Wales.

Objectives

1. To locate and describe the existing body of evidence relating to preventative interventions addressing domestic abuse for children and young people under 18 years of age in the general population.
2. To identify the range of short-, medium- and long-term outcomes achieved by preventative interventions for children and young people under 18 years of age to date.
3. To distinguish between different preventative interventions including educational programmes, media and community campaigns and other initiatives in terms of effectiveness, cost and cost-effectiveness.

These aims and objectives were used to generate a series of specific research questions.

Research questions

1. What is the nature of preventative interventions in domestic abuse for unselected children and young people under 18 years of age, and what theories underpin the chosen intervention strategies?
2. What outcomes are assessed in studies of preventative interventions in domestic abuse for unselected children and young people?
3. Which elements of the described programmes or interventions have proved to be effective, for which groups of children and young people, and in which contexts?

4. What is the cost of preventative interventions in domestic abuse for unselected children and young people under 18 years of age, and which elements of programmes or interventions have been the principal cost drivers?
5. What are the experiences and views of children and young people about interventions aimed at preventing domestic abuse, and are these influenced by gender?
6. Which of the successful intervention programmes are most likely to be acceptable to stakeholders, and cost-effective in the context of services and developments to date in the UK?

Some of these questions have proved more likely to yield answers than others and this is primarily due to the uneven nature of the evidence. For instance, the systematic review provided few data in relation to cost-effectiveness. These gaps are identified throughout the report.

Definition of terms

One of the features of the interventions addressed by this study is that they involve practitioners and researchers from a wide range of disciplines and professions, including education, health, social care, community development and the domestic violence sector. It is, therefore, particularly important to define the terms used for this study.

The following definitions were adopted for the purposes of the review.

Children and young people

This term includes all school-age children, that is those aged between 5 years and 18 years.

Preventative interventions

While the original research brief for the study called for a focus on interventions to prevent children and young people becoming victims/perpetrators of domestic abuse in later life, it was evident from an early stage, both from the UK mapping survey and from the literature retrieved, that much activity in this field was aimed at assisting children and young people to manage domestic abuse as they might currently or soon experience it in their own intimate relationships as well as in their parents' relationships. Prevention in this review is, therefore, not confined to the prevention of domestic abuse in adulthood.

Preventative programmes are delivered in schools and other settings (such as young people's centres) to children and young people under 18 years of age in the general population. They aim to prevent domestic abuse through raising awareness and changing attitudes and behaviour. They address domestic abuse in young people's own interpersonal relationships and often also address any experience of domestic abuse in their parents' relationships.

Preventative interventions also include media and community campaigns and initiatives aimed at preventing domestic abuse that address children and young people in the general population.

We have tried to distinguish clearly between different forms of initiatives throughout this report. However, in places, particularly in *Chapter 3* where we report the findings of the mapping study, the term 'programme' is used as a shorthand to indicate a range of initiatives that includes both manualised programmes and one-off lessons or events such as a school assembly.

Domestic abuse

In line with the government definition, this study has adopted a broad definition that includes coercive and controlling behaviour in addition to physical, sexual, threatening, emotional/psychological or financial abuse of those who are or have been an intimate partner, regardless of gender or sexuality.¹⁷ The definition adopted includes 'honour-based' violence and forced marriage but not female genital mutilation (FGM) (in line with definition adopted by NICE's Public Health Guidance¹⁸ on domestic abuse).

Structure of the report

This report begins with an account of the mixed-methods approach underpinned by the principles of realist review¹⁹ employed for the study (see *Chapter 2*). The methods used for the four main elements of the study – the mapping survey, the systematic literature review, the review of the grey literature and the consultation groups and interviews – are described in detail here. The next four chapters report the findings from these key phases of the review (see *Chapters 3–6*), with a fifth chapter reporting the analysis of costs and benefits which drew on data from all four elements of the review (see *Chapter 7*). *Chapter 8* synthesises these findings under the principal themes, while the final chapter details the study's conclusions and recommendations. A number of additional tables and other types of information, as well as research tools, are included as appendices in order to make the body of the report more accessible for the reader.

Chapter 2 Study methods

The study was originally designed as a realist review. In the event, for pragmatic reasons, the primary methodological approach taken was that of a mixed knowledge review.²⁰ This allowed for different sources of evidence to be included and enabled a synthesis of current practice in the UK and of stakeholder views with a systematic review of the published literature. Realist principles informed the study throughout, specifically in terms of the inclusion of stakeholder priorities at three critical time points, identification of the theories that underpinned the programmes under examination, and exploration of the trigger mechanisms that might explain both the intended and the unintended consequences of these programmes for specific groups of young people in particular contexts.^{19,21} The methods described here are an amalgamation of those set out in the initial proposal, and of changes introduced as the project evolved, based on interactions with the consultation groups over time, and emerging data from the four main phases of the study. This emergent approach is a feature of realist synthesis, in which data from each iteration of a review inform the focus and processes of the next one. However, in this time-limited scoping study, each element took place in parallel rather than sequentially, and so feedback to and from consultation groups and the review team was iterative rather than linear.

The study had four main phases, which were undertaken in parallel: a mapping survey; a systematic mixed-methods literature review; a review of the UK grey literature; and consultation with key stakeholders. The analysis of costs and benefits drew on data produced by these four phases. The methods used for each of these are described below.

Mapping survey

The mapping survey aimed to build a picture of current and recent practice across 18 selected local authority areas in the UK. Following discussion with the expert consultation groups, the sample of local authorities was selected using two criteria: police data on rates of domestic violence incidents and the Index of Multiple Deprivation (IMD). The relevant police data were more readily available for some parts of the UK than others. While these data could be accessed from the relevant websites for Scotland, Northern Ireland and London,²²⁻²⁵ there were difficulties encountered in accessing these data for local authorities in England and Wales. The Association of Chief Police Officers (ACPO) provided the required information for all police force areas in England and Wales. Local authority deprivation scores for 2010²⁶ (the most recent year available) were obtained from the relevant government website. These two data sets were used to construct a sample planned to include 12 English local authorities, with another six selected from Wales, Scotland and Northern Ireland (two from each country). For Scotland and Northern Ireland, local authorities were ranked according to their domestic abuse incidence rates. We selected one with high rates of domestic abuse and one with low rates in each country. For England and Wales, the police force area data provided by ACPO were used to identify local authorities with high, medium and low rates of domestic abuse incidents, and within each of these three bands we selected local authorities with high, medium and low IMD ratings. The same approach was adopted to select three London boroughs. The full list of local authorities included in the sample is shown in *Chapter 3* (see *Table 6*).

The online survey used the Survey Monkey software package (www.surveymonkey.com) and was designed with input from the two expert consultation groups. It was piloted with a group of practitioners from outside the sample local authorities and was refined in response to their feedback; the final version is included in *Appendix 1*.

The internet, together with the professional networks of consultation group members and our study partners, Women's Aid and the PSHE Association, was used to compile distribution lists of relevant professionals and community organisations, such as safeguarding leads, police and crime commissioners, community safety and domestic abuse co-ordinators, and domestic abuse organisations in the 18 local authorities. The researchers

distributed the survey by e-mail to 230 professionals in non-school organisations and to the administrator in all primary and secondary schools in the sample of 18 local authorities. Additionally, Women's Aid and the PSHE Association e-mailed the survey link to their members in the sample local authorities. A snowballing approach²⁷ was adopted, with those receiving the e-mail link to the survey asked to forward it to relevant practitioners involved in prevention work in their own or other organisations in the sample areas. Therefore, the total number of those invited to participate in the survey is not available. This means that we are unable to report a response rate for the survey and its generalisability is limited. The initial survey and three subsequent reminders were distributed by e-mail between October 2013 and December 2013. The survey was closed in January 2014. The Statistical Product and Service Solutions (SPSS: IBM Corporation, Armonk, NY, USA) software package was used to analyse the survey findings, and answers to open questions were listed and analysed thematically.

Systematic literature review

Primary research question for the literature review

The research questions (see *Chapter 1*) were reframed into a single overarching question for the purpose of the systematic review of published literature. This was:

What is the nature of, underlying theory for, and evidence of effect of interventions designed to help children and young people avoid and/or deal with domestic abuse, and what interventions work to trigger effective mechanisms for change in specific groups and individuals in which specific contexts?

Search strategy

The search strategy was designed to be broad and to ensure that a wide range of relevant literature was included. Included studies were those published in any language between 1990 and 2012 (updated in February 2014). The year 1990 was chosen as the start date for inclusion of material for review, as prevention programmes emerged in North America in the mid-1980s²⁸ and evaluations and research into such programmes did not appear until the 1990s.

Study types

Each of the detailed research questions in the protocol was mapped against the knowledge matrix of Petticrew and Roberts²⁹ (modified for this specific research topic) to establish the kinds of data that were most likely to answer the question posed (*Table 1*). This indicated that the search strategy should not be limited to studies with randomised designs. The strategy therefore allowed for inclusion of studies using a wide range of methods. Because we were aware that the existing reviews in this area either were narrowly focused on randomised controlled trials (RCTs) or quasi-RCTs,^{13,14} or included data that were at least 12 years old,¹⁵ we did not include systematic reviews, although we did ensure that our search strategy located all of the relevant studies included in these prior reviews.

Databases searched and other means of locating literature

A wide range of databases were searched, as follows: Allied and Complementary Medicine Database (AMED); Applied Social Sciences Index and Abstracts (ASSIA); Cumulative Index to Nursing and Allied Health Literature (CINAHL); EMBASE; Education Resources Information Centre (ERIC); MEDLINE; PsycARTICLES; PsycINFO; Social Policy and Practice; Social Work Abstracts; Sociological Abstracts; Studies on Women and Gender Abstracts; Australian Education Index; British Education Index; and the Centre for Reviews and Dissemination NHS Economic Evaluation Database (NHS EED). Searches were undertaken for the period 1990 to February 2014. The initial date of searching was 3 July 2013 and the searches were updated in February 2014.

The protocol planned for the establishment of a Zetoc Alert list, but in the event two members of the team (Jane Ellis and Nicky Stanley) were in receipt of a wide range of relevant journals regularly. They are also experts in the field, with extensive networks in this area. Along with a search of the Controlled Trials

TABLE 1 Mapping of study types against areas of interest for the review, based on Petticrew and Roberts' framework²⁹

| Research question | Study type | | | | | | Non-experimental evaluation |
|--|---|-------------|--------|--------------|--------|-----|-----------------------------|
| | Type of question | Qualitative | Survey | Case-control | Cohort | RCT | |
| 1. What is the nature of preventative interventions in domestic abuse for unselected children and young people under 18 years old, and what theories underpin the chosen intervention strategies? | Process of service delivery: How might this work? | ++ | + | | | | + |
| 2. What outcomes are assessed in studies of preventative interventions in domestic abuse for unselected children and young people? | Salience: Does it matter? | ++ | ++ | + | + | + | + |
| 3. Which elements of the described programmes or interventions have proved to be effective, for which groups of children and young people, and in which contexts? | Effectiveness: Does this work? | | | + | + | ++ | + |
| 4. What is the cost of preventative interventions in domestic abuse for unselected children and young people under 18 years old, and which elements of programmes or interventions have been the principal cost-drivers? | Cost-effectiveness: Are the benefits worth the costs/resource use required? | | | + | + | ++ | + |
| 5. What are the experiences and views of children and young people about interventions aimed at preventing domestic abuse, and are these influenced by gender? | Acceptability/satisfaction: Will children/young people be willing to take part in the programme? | ++ | ++ | | | | + |

+, good method for the research question; ++, optimal method for the research question.

Register, the National Institute for Health Research portfolio of ongoing studies, and formal contact with leading authors in the field, this was deemed to be adequate to scope the ongoing and new studies in the field. The following journals were, therefore, reviewed regularly across the period of the study: *Journal of School Health*; *Children and Society*; *Journal of Adolescent Health*; *Violence Against Women*; *Violence and Victims*; *Prevention Science*; *Journal of Interpersonal Violence*; *Journal of Primary Prevention*; *Scandinavian Journal of Public Health*; and *Child Abuse Review*.

Search terms

The search terms were chosen to generate a wide range of hits in the first instance. The example terms described in the protocol were amended as the study progressed in the light of the data and insights emerging from the consultation groups and from the initial testing of the search for parsimony and comprehensive inclusiveness. They were structured using a version of the PICO framework (population, intervention, context and outcome, which was divided into general and intermediate outcomes, such as attitudes and knowledge, and specific types of violence and/or perpetration outcomes) relevant for a realist review of studies employing a range of headings. *Table 2* sets out a summary version of the search terms that were used. *Appendix 2* gives an example of the full search in EBSCOhost.

TABLE 2 Search terms used

| Population | Intervention | Context | Outcome (general) | Outcome (specific) |
|-----------------|---------------------|--------------|-------------------------|---|
| Child* OR | Prevent* OR | Media OR | Outcome OR | Domestic AND ((abuse OR violen* OR batter*)) OR |
| Young person OR | Educat* OR | Communit* OR | Cost OR | home AND ((abuse OR violen* OR batter*)) OR |
| Young adult OR | Train*OR | Public* OR | Cost analysis OR | family AND ((abuse OR violen* OR batter*)) OR |
| Young people OR | Teach* OR | School* | Cost effectiveness OR | families AND ((abuse OR violen* OR batter*)) OR |
| Adolescen* OR | Promot*OR | College | Acceptabl* OR | gender AND ((abuse OR violen* OR batter*)) OR |
| Teenager* OR | Instruct*OR | School-based | Effective* OR | spous* AND ((abuse OR violen* OR batter*)) OR |
| Youth* | Campaign* OR | | Experience* OR | partner* AND ((abuse OR violen* OR batter*)) OR |
| | Social Marketing OR | | View* OR | fiancé AND ((abuse OR violen* OR batter*)) OR |
| | | | Attitude* OR | cohabitant*AND ((abuse OR violen* OR batter*)) OR |
| | | | Help seeking OR | intimate AND ((abuse OR violen* OR batter*)) OR |
| | | | Protective Behaviour*OR | interpersonal AND ((abuse OR violen* OR batter*))OR |
| | | | Harm reduction OR | dat*AND ((abuse OR violen* OR batter*)) OR |
| | | | Healthy rel*OR | relationship AND ((abuse OR violen* OR batter*)) OR |
| | | | Respectful rel*OR | marital AND ((abuse OR violen* OR batter*)) OR |
| | | | Resources | conjugal AND ((abuse OR violen* OR batter*)) |
| | | | | Perpat* |
| | | | | Victim* |

The reference lists of all included studies were searched to check for any frequently cited studies not identified by the primary search ('back-chaining').

Inclusion and exclusion criteria

Table 3 details the inclusion and exclusion criteria for included studies.

Quality appraisal

In realist review methods, the quality assessment of the included literature is less important than the information it generates about programme theory and design, the contexts it has been used in and the mechanisms (both intended and unintended) that might have been triggered as a consequence: criteria that have been labelled *relevance* and *rigour*.¹⁹ In the case of the current review, however, we wanted to focus particularly on programmatic and mechanism effects for studies where the programme under review seemed to have had an effect either on the hypothesised mediating variables, or on any component of relationship/dating violence. To establish if any such effect was real and likely to be generalisable beyond the original setting for the study, we needed to undertake a basic assessment of quality.

In the original protocol, it was planned that all studies meeting the inclusion criteria would be subject to quality assessment using a specific tool relevant to the methods used, such as Consolidated Standards of Reporting Trials (CONSORT; for any RCTs that are identified)³⁰, Strengthening the Reporting of Observational Studies in Epidemiology (STROBE; cohort, case-control or cross-sectional designs)³¹ or Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines (PRISMA; systematic reviews).³² As it had been agreed that all identified studies regardless of quality would be included in the literature review, the initial quality screening was undertaken using relevant Critical Appraisal Skills Programme (CASP) tools,³³ as an overall guide to the quality of the included studies. In the event, this process provided a fair guide to the quality of the included studies, and, indeed, the CASP tools include the key elements of all of the specific assessment tools we originally planned to use. We therefore did not

TABLE 3 Inclusion and exclusion criteria

| Include | Exclude |
|---|--|
| Papers and reports published/dated between 1990 and 2012, updated to February 2014 | Papers and reports published/dated before 1990 |
| Published in any language | No language restrictions |
| Peer-reviewed research papers: all countries | Research papers that are not subject to peer review |
| Meta-analyses, research reviews, controlled studies, before-and-after studies, independent case evaluations, qualitative and ethnographic studies | In-house evaluations, internal audits Qualitative studies that do not include the views of children and young people participating in interventions using their direct quotes |
| Children and young people at or below the age of 18 years | Studies with minimal or no data relevant to children/young adults below 18 years Studies focused on prevention programmes for adults who perpetrate abuse |
| Studies including interventions to prevent domestic abuse | Studies focused only on child abuse and neglect or on bullying |
| Studies including children/young people in the general population | Studies only including children and young people who have experienced domestic abuse Studies only including children and young people who have perpetrated domestic abuse |
| Studies of interventions aiming to prevent children and young people becoming either/both victims or perpetrators of domestic abuse | Studies focused only on prevalence or outcomes of domestic abuse |

undertake more detailed quality assessments of the quantitative studies, especially as there were no plans to meta-analyse the findings from the included data set. For the qualitative data, the search produced so few papers that the decision was made not to exclude studies on quality grounds, and that, in these circumstances, the CASP tool provided an adequate assessment of general quality.³⁴ The interpretation of the quality scores for quantitative studies is given in *Table 4*.

Analysis

Six intersecting narrative analyses were planned: a description of study characteristics; an examination of the theoretical basis of the programmes; a summary of the kinds of interventions used; a description of the outcomes assessed; an overview of the effectiveness of the included interventions and programmes, both overall and for specific groups (including analysis by gender, ethnicity and prior risk status) and contexts; and a synthesis of the views and experiences of participants and staff involved in interventions in this area. Costs and cost-effectiveness data derived from the review data are reported separately in *Chapter 7*.

Quantitative findings were reported by study and summarised narratively across the data set. Qualitative data were synthesised using a meta-synthesis approach that included reciprocal and refutational narrative analysis, and the production of a line-of-argument synthesis. The summary of the findings entailed an interpretation of the findings of the review against prior theoretical constructs for what might work, for whom and in what contexts.

Detailed analytic process

The studies were grouped and described in a range of different ways to allow for insights to emerge. The structure of these descriptive processes varied somewhat from those proposed in the protocol in order to reflect the concerns arising from the consultation groups, and the nature of the emerging data from each phase of the study:

1. The characteristics of each study were logged on a pre-designed data extraction form by study type (controlled trials; cohort/caseload studies; qualitative data). This included a description of the intervention components of, participants in, context of and outcomes assessed in each study.
2. The outcomes measured used across the studies were then described to assess the commonality and differences between them and the number of studies that included each specific outcome. Outcomes were summarised under four headings: measures of knowledge, attitudes, behaviours (such as help-seeking), and incidences of victimisation or abuse related to relationships.
3. Studies assessing similar intervention components and/or which described elements of the same programme were then grouped together (regardless of methodology or outcomes examined at this stage) to establish the type of interventions tested in the included studies, how these fitted with the theoretical principles identified and what the range of resource requirements might be for each programme.

TABLE 4 Scores for quantitative study quality

| Score | Interpretation (quantitative studies): is study valid and reliable? ^a |
|-------|--|
| A | Yes, clearly |
| B | Yes, probably |
| C | No, probably not |
| D | No, definitely not |

^a Based on the credibility, transferability, dependability, confirmability of study from Downe *et al.*³⁵

4. Following the first set of consultation meetings, the researchers developed a matrix of theories that might have been used to frame programmes. A wide range of potential theories was identified, ranging from those addressing causation (such as various feminist and social norms theories) to learning and education theories and theories of change and adoption of innovation. The team then assessed the underlying programme theory in each paper included in the search (where this was evident or could be deduced) to determine whether or not any of the theories identified in the initial theory matrix were present in the reviewed programmes and interventions.
5. The findings of each study were assessed. Outcomes noted to be significant at the $p = 0.05$ level (or $p = 0.01$ where it was evident that more than 100 separate analyses were carried out without correction for multiple testing) were logged, by time point (within 1 month of the end of the intervention; between 2 and 5 months; 6 months to under 4 years; and 4 years or more). The same organisational structure was used for the outcomes as in point 2, above.
6. For each included study/programme, data showing post-intervention changes that were statistically significant (using the criteria in point 5 above), and that were identifiably linked to gender, grade, age and history of perpetration/victimisation at baseline, were separately analysed by subgrouping by the relevant data and then summarising them narratively.
7. Where authors provided logic models for their programmes, these were examined for similarities and differences.
8. Given the lack of strong evidence of effect in the included studies, formal context–mechanism–outcome (CMO) models were not constructed.

Review of the grey literature

As this was a scoping review, the included studies were not limited to formal published research papers. Much of the literature on UK interventions is available only as 'grey literature', and so this aspect of the review was fundamental to building a fuller picture of the nature and impact achieved by prevention work in the UK context. This element of the review addressed UK-based grey literature, including local independent evaluations, national reports, technical reports and theses; in-house evaluations were excluded. The time parameters used were the same as those for the systematic review.

The systematic review search yielded three grey literature publications and an online search of relevant websites (listed in *Appendix 3*) yielded a further nine. Back-chaining produced an additional five items and the remainder consisted of publications identified through requests to consultation group members and in response to a request circulated by Women's Aid as well as through the research team's own knowledge of the field.

Forty-six documents were identified by these means and data were extracted and recorded on a pre-designed form using the same categories as were employed for the peer-reviewed papers. A narrative approach was utilised for this aspect of the review, with analysis identifying the main findings and themes in independent programme evaluations undertaken in the UK.

Consultation with stakeholders and experts

The consultation element of the study was designed to capture the views of relevant stakeholders including young people themselves as well as experts from the various sectors involved in designing and delivering preventative interventions in domestic abuse. It offered a means of adding rigour to the study³⁶ both by generating new data describing current policy and practice in the UK and by offering expert reflection on early findings from the review. Three consultation groups were established with each meeting on three occasions in the course of the study. The two expert groups were convened by the two organisations partnering and supporting the work of the research team. Women's Aid recruited and managed the media consultation group and the PSHE Association recruited and managed the education consultation group. Membership of these groups was determined by discussions which drew on the expert knowledge of both the research team and the partner organisations, with the aim of achieving a mix of

policy, practitioner and researcher representation in each group as well as ensuring representation from all four countries of the UK. Research commissioners were also invited to join these groups and some of those invited nominated additional group members. Membership of these groups is shown in *Appendix 4*.

The third group was a young people's group. This group was recruited from an established youth participation group that had experience of being consulted on similar issues. The membership of the group fluctuated between meetings: 18 young people aged 15–19 years attended the first meeting of this group, with seven or eight young people attending subsequent meetings.

The three consultation groups were similarly structured, with participants being provided with feedback from the study that included progress reports and early findings, as well as being asked to discuss key questions chosen to reflect the research questions.

International perspectives were fed into the study through 16 interviews with international experts, all of whom were involved in the design, delivery or commissioning of preventative interventions for children and young people. These experts were selected by drawing on the knowledge and networks of the research team, and of the study's two partner organisations and the expert consultation groups. While most of those interviewed were based in North America, Australia or New Zealand, some UK experts who were unable to attend the expert consultation groups also took part in these interviews. Only one expert approached by the researchers declined to be interviewed; a further four did not respond to e-mail requests. Most interviews were conducted by telephone; one interview was conducted face to face. A topic guide (see *Appendix 5*) which allowed interviewees to reflect on essential themes in depth was employed.

All consultation group members and interviewees were provided with appropriately formatted information about the study, and informed consent procedures were adopted which allowed for all discussions and interviews to be audio-recorded and transcribed. The involvement of the young people's consultation group was approved by the University of Central Lancashire's Psychology and Social Work Ethics Committee (PSYSOC).

Both interview and consultation group transcriptions were analysed thematically using a framework structured using the main headings used for data extraction in the systematic literature review: context, programme theory, mechanism including delivery and content, audience and outcomes. Subthemes and new themes arising from the data were added as appropriate. The software package NVivo (QSR International, Warrington, UK) was used to assist with the sorting and storing of data.

Economic analysis

This element of the study was conceived in the original proposal as an aspect of the systematic review of the literature. However, the paucity of information on costs and cost-effectiveness available in the published literature led to a broadening of the evidence base on which this element of the study drew. Therefore, four main sources were used to obtain information on resources and/or costs required to run different types of preventative programmes in domestic abuse and to identify the stated outcomes of the various programmes. These four sources were mined from the data collected in the four main phases of this study, namely (1) the mapping survey of prevention activity across a sample of 18 local authorities; (2) the systematic review of published literature; (3) the review of grey literature, which was reinforced by personal contact with the programme designers; and (4) the consultation groups with young people and media and education experts.

We describe below how relevant data from the four sources were identified, extracted and analysed to draw conclusions about the costs and benefits of programmes aimed at preventing domestic abuse for children and young people.

Mining the mapping survey data

The mapping survey administered in 18 local authorities (see *Table 6* for the local authorities surveyed) consisted of 46 questions about each programme reported. A subset of the 23 questions listed in *Table 5* was identified as being relevant to assessing the costs and benefits of the programme; responses to questions marked with an asterisk in *Table 5* were deemed necessary to be able to draw useful conclusions. Therefore, those programmes reported in response to the survey, which provided complete data in these 13 areas, were included in this aspect of the study.

For the included programmes, responses to the questions listed in *Table 5* were extracted and tabulated. These data were described narratively and common features were identified. Resource inputs were identified as far as possible using the information reported, with particular attention given to who delivered the programmes, the pattern of delivery and who funded the programmes. Outcomes were identified from the responses provided to the question about achievements (question 44) and evidence of any relationship between resources and outcomes was noted.

TABLE 5 Survey questions included in assessment of costs and benefits

| Question number | Question wording |
|-----------------|--|
| 4 | Please list below the title of all the preventative programmes in your locality that you know of |
| 5 | Please describe the programme if it does not have a formal name and you have not listed it above |
| 6 ^a | Where is the programme delivered? (14 options including 'other') |
| 7 | What does the programme address? (Eight options including 'other') |
| 8 ^a | Who is involved in delivering the programme? (16 options including 'other') |
| 9 | Please specify agency |
| 10 ^a | When did the programme begin? (Month/year) |
| 11 ^a | Is the programme still running? (Yes/no/don't know) |
| 12 ^a | When did the programme end? (Month/year) |
| 13 | Why did it stop running? (Six options including 'don't know') |
| 14 | Was it built on a programme obtained from elsewhere? |
| 16 ^a | Were children and young people involved in designing the programme? (Yes/no/don't know) |
| 22 ^a | Who is/was the main funder of the programme? (14 options including 'other') |
| 23 ^a | What is the approximate total length of the programme in hours? (Free text) |
| 24 ^a | What pattern of delivery does the programme take? e.g. one block of 3 hours, a daily advert, 1 hour a week for a school term (Free text) |
| 32 ^a | Which methods of delivery are used? (14 options including 'other') |
| 33 ^a | Is the programme delivered in conjunction with a programme for parents and carers/other adults in the local community/professionals working with the local community/service managers/don't know/other |
| 34 ^a | Did the facilitators of face-to-face programmes undertake specific training to deliver it? (Yes/no/some but not all/don't know) |
| 35 ^a | Please estimate how many CYP have participated in the programme in the previous 12 months (free text) |
| 40 | Has the programme been evaluated? |
| 41 | Was the evaluation undertaken: in house/independently/don't know |
| 42 | Is there a report available? |
| 44 | In your view, what has the programme achieved? |

CYP, children and young people.

a Questions deemed necessary to be able to draw useful conclusions.

Extracting economic data from the literature review

All papers included in the literature review were scrutinised to identify any data on resources required to run a programme and/or the cost of a programme as described in the paper.

The following data, relevant to cost and cost-effectiveness analysis, were extracted, where present, from all papers included in the literature review:

- resources required to set up the programme, for example training
- resources required to run the programme
- pattern of delivery, for example number and frequency of sessions
- cost information
- funder of programme development and implementation or, if appropriate, the research
- outcomes.

Information about resource use was reviewed and each programme assigned a broad category of high, medium or low resource use. This classification was judged on the information provided in the literature, and was carried out by two members of the team (Soo Downe and Sandra Hollinghurst). The criteria used to assign the categories were the intensity and scale of resources reported.

The resource requirements were described narratively and common features identified. Resource inputs were identified using the information reported, and particular attention was paid to who delivers the programme, the pattern of delivery and the source of funding. Outcomes, as reported in the papers, were noted, as was the reporting of any relationship between resources and outcomes. The general pattern of resources and outcomes was reviewed, and conclusions about any relationship between them were described narratively.

Extracting economic data from the grey literature and personal contact with experts

The UK grey literature identified in the main study was examined for any evidence about resource use and/or cost. In cases where some information was available, we contacted authors of papers and reports directly for clarification or more detail.

During the process of identifying important unpublished reports and conducting the consultation groups with experts, the researchers followed up any mention of resource use and/or cost that was judged to be potentially useful. The research team contacted all experts whose work was brought to our attention with the aim of obtaining precise details of the cost of programmes and understanding how decisions about cost-effectiveness were handled. The information collected was recorded narratively by programme. In respect of analysis, the individual and diverse nature of these data prevented any systematic synthesis and analysis was, therefore, restricted to a descriptive framework.

Extracting economic data from the expert consultation groups

Identification of evidence

During the consultation meetings with young people, educational experts and professionals with expertise in using the media for preventative interventions, contributors were asked about resources, cost, value for money, and budgets and funding. In particular, in the second and third meetings of these groups, members of the education and media groups were specifically asked to consider the following questions.

Second expert consultation meetings

1. Thinking of your last campaign, what resources went into designing, delivering and evaluating it?
 - What resources were involved in developing it: who was involved?
 - Was development carried out in-house or contracted out?
 - How was it delivered and what was involved in that: was it constrained to one medium or several?
2. What criteria of success were established for the campaign? How are these judged: does cost come into it?
3. Would you do something similar again, and if not why not (e.g. budget constraints, evidence of effectiveness)?
4. What represents value for money in designing, delivering and evaluating a campaign?

Third expert consultation meetings

1. To what extent are programmes budget-driven or content-driven?
2. Who sets the budget?
3. How is success measured? . . . What 'deliverables' are expected?

The transcriptions were reviewed for any mention of funding sources, resource use, cost and cost-effectiveness and relevant data were extracted, tabulated and examined for common threads and overlapping views. Of particular interest were responses to the questions posed specifically about resources, cost and the relationship between cost and outcome.

Chapter 3 The mapping survey

The mapping survey undertaken in 2013–14 in 18 local authorities aimed to develop a snapshot picture of preventative initiatives currently being delivered to children and young people in the UK, collecting information on content, audiences, funding and sustainability. A full account of the construction of the survey sample and the approach to data analysis is provided in *Chapter 2* of this report. The survey content and design were influenced by Ellis's 2004³⁷ survey and were developed in collaboration with the three consultation groups. Questions included addressed a range of topics, which asked about programme content, context, facilitators, audience and impact of current or recent work (see *Appendix 1* for a copy of the survey tool).

Survey response

A total of 232 responses were received from schools and other organisations in the 18 sample local authorities, and four responses were received from three 'other' local authority areas not included in the sample, probably as a consequence of respondents being invited to cascade the survey to other relevant practitioners or organisations. These additional responses were excluded from analysis. *Table 6* shows the variation in responses in the sample local authorities; a large number of respondents ($n = 136$) did not report their location, possibly because this question was asked at the end of the survey.

Respondents were asked to specify their job title and the organisation they worked for. A significant number ($n = 135$) of respondents did not answer these questions, but where this information was given, responses were classified as provided by schools or other organisations. The latter group included, for example, domestic violence co-ordinators, police, staff from community safety partnerships, education service staff, youth services and voluntary sector domestic violence services. *Table 7* shows responses by organisational type.

It is not possible to calculate a survey response rate as respondents were asked to cascade the survey to the appropriate person in their organisation. We are not, therefore, able to treat the survey findings as representative or to generalise from them. The number of responses received was likely to have been affected by the fact that in schools, the survey could be addressed only to school administrators, who might have failed to forward the survey to the appropriate person; recent reductions in posts of local authority specialist PSHE advisors and domestic violence co-ordinators, who constituted key groups of respondents to Ellis's³⁷ survey, also reduced the potential pool of respondents. However, the survey responses included a reasonable mix of respondents from schools and from a range of other community organisations with an interest in preventing domestic abuse.

TABLE 6 Responses received by local authority area

| Local authority area | Number of responses |
|----------------------|---------------------|
| England | |
| Bournemouth | 3 |
| Brent | 6 |
| Buckinghamshire | 3 |
| Kent | 16 |
| Lancashire | 13 |
| Liverpool | 13 |
| Newcastle | 6 |
| Newham | 1 |
| North Yorkshire | 8 |
| Nottinghamshire | 8 |
| Richmond | 3 |
| Slough | 5 |
| Northern Ireland | |
| Derry | 1 |
| Down | 1 |
| Scotland | |
| Aberdeen | 2 |
| Glasgow | 5 |
| Wales | |
| Ceredigion | 1 |
| Merthyr Tydfil | 1 |
| Area not specified | 136 |
| Total | 232 |

TABLE 7 Number of responses by type of organisation

| Type of organisation | Number of responses |
|----------------------|---------------------|
| Schools | 46 (19%) |
| Other organisations | 51 (22%) |
| Not known | 135 (59%) |
| Total | 232 |

Distribution of preventative interventions

The survey collected information on current or recent interventions for children and young people in the respondents' localities that aimed to prevent domestic abuse. Of the 186 respondents answering this question, 109 (59%) answered 'yes', they were aware of such programmes, while 77 (41%) did not know of any in their locality. Of the 109 respondents who knew of relevant programmes, only 64 also told us their locality. Where the locality of respondents was known there was considerable variation in the proportion of respondents who knew of programmes in their area. In some local authority areas such as Newcastle and Bournemouth, where a number of responses were received, all of the respondents knew of such programmes. However, no respondents identified in Aberdeen or Newham knew of any relevant programmes. The variations by local authority area are presented in *Figure 1*.

Those who reported interventions were able to name or describe up to five interventions and answer questions on each. Some programmes reported were discovered not to be primary prevention interventions and these responses were omitted from analysis. Each identified intervention was classified as a 'school', 'media' or 'community' intervention. Of the total number of interventions reported across the 18 local authorities, 98 were considered to be primary prevention programmes for children and young people in the general population. In what follows in this chapter, the findings reported are based on these 98 reported programmes rather than on numbers of respondents (see *Appendix 6* for details of all of the reported programmes included).

As *Table 8* shows, the vast majority of these interventions (89%) were school-based programmes; only five interventions (four community-based and one media) did not have a school component. Very little information was reported on these five initiatives beyond their locations. One consisted of informal education in the Liverpool Youth and Play Service; the others were in North Yorkshire (Respect Young People's Service), Lancashire and Nottinghamshire. The media campaign was delivered in Newcastle and led by Northumbria Police.

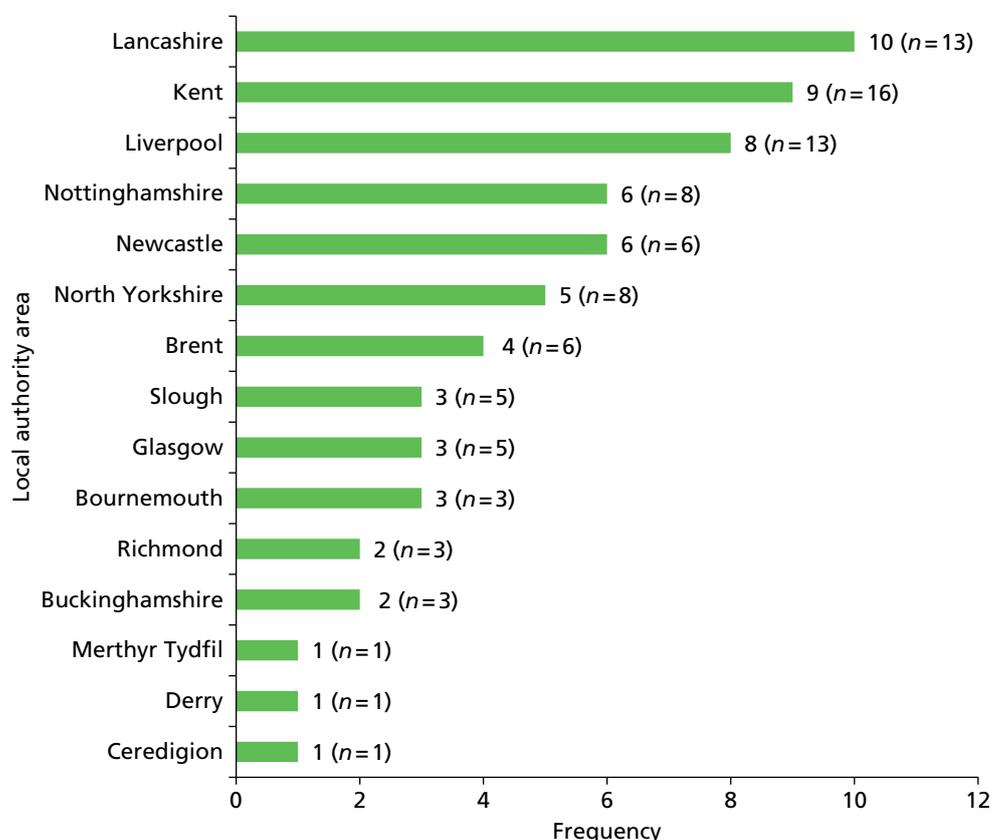


FIGURE 1 Number of respondents reporting current or recent programmes by local authority area.

TABLE 8 Number of reported interventions by type

| Type of intervention | Number of relevant programmes reported | Per cent of relevant programmes reported |
|------------------------|--|--|
| School | 88 | 89 |
| Media | 1 | 1 |
| Community | 4 | 5 |
| School and community | 1 | 15 |
| School/media/community | 4 | 45 |
| Total | 98 | 100 |

Of the 98 programmes reported, 65 were known to be currently or recently delivered in the sample local authority areas and 33 were delivered in areas that could not be identified by respondents but which were assumed to be within the sample local authorities. Preventative programmes were reported to be currently or recently delivered in 14 of the 18 local authorities but no relevant programmes were identified as being delivered in four areas, although this may not reflect an absence of programmes as not all respondents identified their local authority area.

Some programmes were reported more than once, both within the same local authorities and across different authorities. Of the 98 reported programmes, we were able to identify approximately 74 individual programme models, some of which were the same programme being delivered under different names.

The programme most frequently reported ($n = 10$) was the 'Great Project' (also named 'Great'), which was reported by five respondents in Nottinghamshire and five respondents who did not state their locality. 'Miss Dorothy' (also identified as 'Miss Dorothy Watch Over Me' and 'Miss Dot') was the second most commonly cited programme, reported by four respondents: two in North Yorkshire and two respondents who did not state their locality. '16 Days of Action' was reported by three of the four respondents from Richmond. 'Beat Abuse' (also identified as 'Beat Abuse Before It Beats You') was reported by two respondents from two different local authorities. 'Equation' was reported by three respondents, none of whom identified their locality. 'Project Salus' was reported by two respondents from Kent and one from an unidentified local authority. 'Healthy Relationships' workshops were reported by individuals in three different local authorities (Lancashire, North Yorkshire and an unidentified local authority). All other programmes were reported just once or twice, indicating considerable diversity in the programmes currently delivered, although, as discussed below, many have common elements. Respondents were asked to state whether or not they were personally involved in setting up the programme. The majority of those who responded said 'yes' (35%) and 23% said 'no' (see *Appendix 6* for details of all programmes reported).

Programme content

Forms of violence addressed in programmes

Respondents were asked to select from a list of seven options what forms of violence or abuse the 98 programmes reported addressed (here, programme is used to mean any initiative, project, one-off event, media campaign, school assembly, lesson plan, scheme of work or external resource). The majority of programmes (62%) focused on domestic abuse/violence in young people's intimate relationships, with a substantial number of programmes (46%) addressing the broader issues of peer violence/bullying and domestic abuse/violence in adult relationships (*Figure 2*).

Respondents were asked to indicate any 'other' forms of violence or abuse addressed by programmes in an open-text box. Other examples given included raising awareness, healthy relationships, conflict

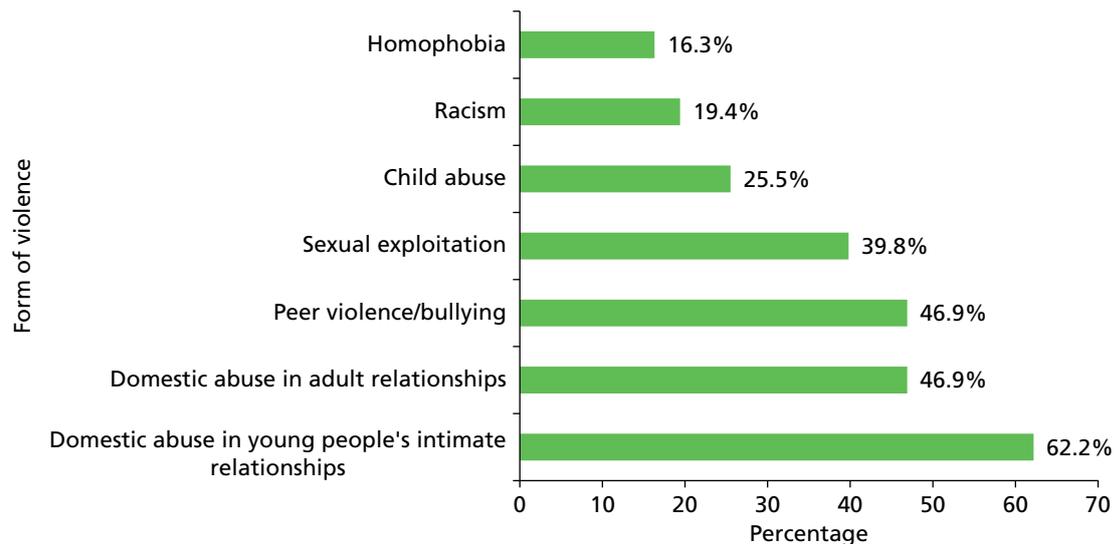


FIGURE 2 Forms of violence and abuse addressed in reported programmes ($n = 98$).

management, FGM and honour-based violence, staying safe, feelings, gender inequality and positive role models. Every programme reported addressed more than one form of violence; the most common combination was domestic abuse in adult relationships with domestic abuse in young people's relationships ($n = 42$), with the latter combined with child abuse being the second most frequently reported combination ($n = 22$) along with child abuse and peer violence (bullying).

Topics covered

The survey collected information on all the topics covered by programmes. Participants were given a list of 23 options and were asked to tick all those that were addressed; they were also given the opportunity to add information on other topics covered in an open-text box. *Figure 3* shows that most common topics included in the 98 programmes reported were types of abuse (51%), recognising domestic abuse when it is happening (49%), personal safety (48%) and definitions of domestic violence (46%). The least common topics covered were domestic violence and issues for children with disabilities and/or learning difficulties (12%) and FGM (10%). Other topics indicated by respondents included aspirations, positive male role models, self-esteem, gender inequality and emotions. While there appeared to be an emphasis on awareness and recognition of violence/abuse, a significant number of programmes, over one-third in all cases, also addressed issues related to keeping safe and help-seeking, including topics on safety strategies (44%), information on support services (40%), disclosure and safeguarding (37%) and help-seeking (37%). Content that aimed to address the needs of minority groups was less frequently reported.

Programme aims

An open question asked respondents to describe the aims of programmes; information was received for 51 programmes. The most frequently mentioned aims were to raise awareness ($n = 21$); to increase knowledge and understanding ($n = 14$); and to increase knowledge and understanding of healthy/unhealthy relationships ($n = 19$). Thirteen sought either to provide support directly to children and young people living with domestic abuse or to provide information on support services. In 10 cases, safety for children was an identified aim; this was mostly in relation to programmes delivered in primary schools. The focus in almost all programmes was the reduction or prevention of victimisation rather than perpetration, and only three reported a specific focus on promoting gender equality. A comprehensive long-term strategic aim was reported in one case:

Develop consistent preventative work on domestic violence and abuse accessed by all young people across their childhood, with recognisable themes from nursery to college. Each element has a different approach and set of aims depending on age and setting of delivery.

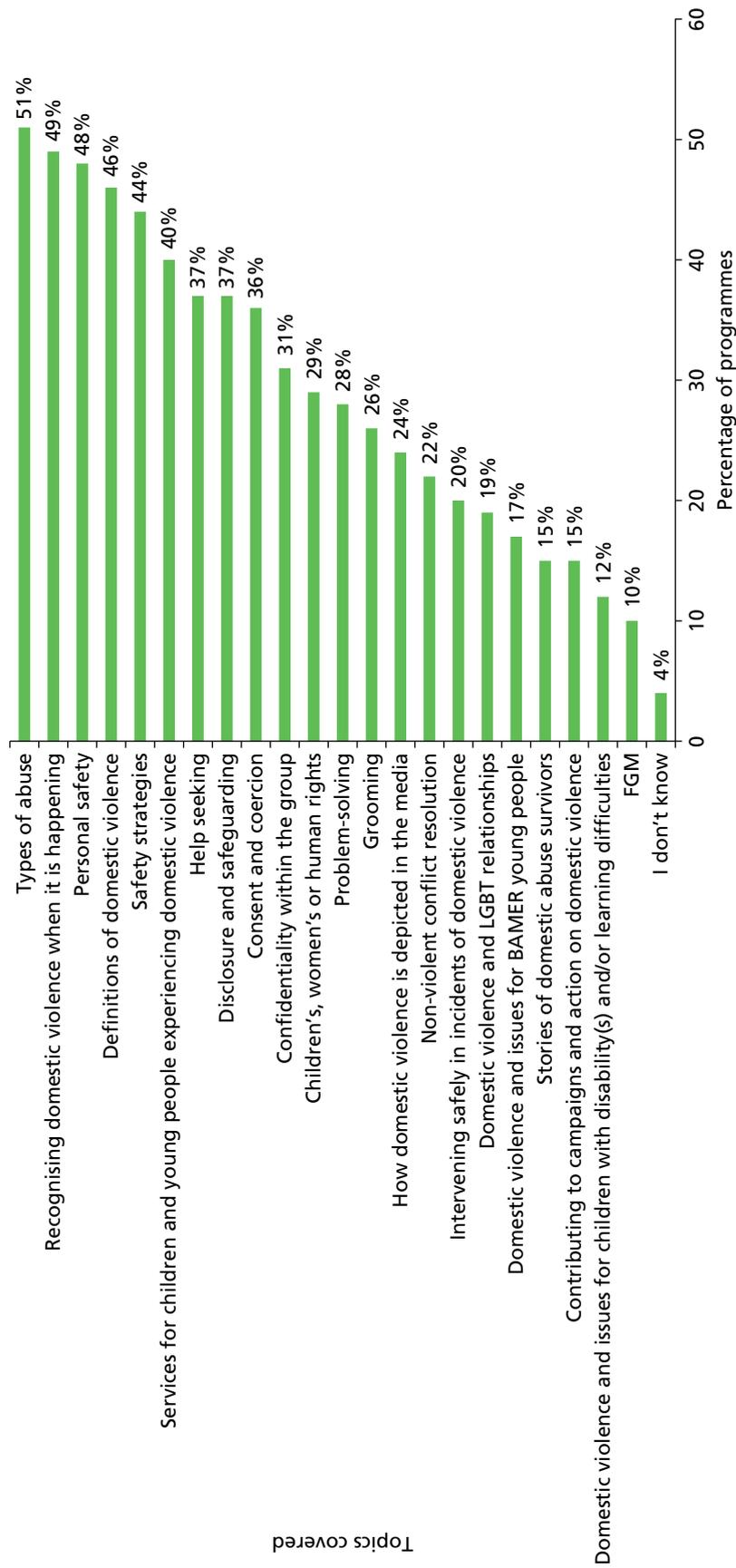


FIGURE 3 Topics covered in reported programmes (n = 98). BAMER, black, Asian, minority ethnic and refugee; LGBT, lesbian, gay, bisexual and transgender.

Programme delivery

Venues

Respondents were asked to indicate all venues where a programme was delivered; these are shown in *Figure 4*. Programmes were mostly delivered in mainstream secondary schools ($n = 49$), with mainstream primary schools ($n = 28$) being the second most frequent setting. Twenty-three programmes were delivered in one venue only; of these, 10 were in secondary mainstream schools only and 11 in primary mainstream schools. Nine school-based programmes were delivered in a range of types of schools. Five programmes were delivered in more than six venues and all included work with young people in colleges, the secure estate and/or young people's centres. Programmes involving a media and/or online aspect ($n = 6$) were delivered alongside work in schools. Of the community-based programmes, one programme was delivered in a health centre; other community venues included domestic violence advice centres and a local conference centre. A peer education project had undertaken street-based work with young people as well as using other venues. Eleven programmes, two schools and four other organisations (five were unknown) reported that they used outreach as an approach to delivering the programme. (Outreach is the delivery of services to people where they spend time or in their homes; it is common practice in youth work.)

Facilitators

There are ongoing debates in the literature regarding which groups of professionals are best equipped and placed to deliver these interventions (e.g. Hale *et al.*³⁸). The survey asked for information on who delivered the programmes. Of those who responded to this question ($n = 65$), the vast majority (89%) reported that external staff were involved in some way in delivering programmes, with only 11% of programmes being delivered solely by teachers. However, teachers were involved in a further 31% of programmes working jointly with one or more other staff, meaning that, overall, teachers were involved in 42% of programmes (*Figure 5*). How co-working between teachers and external staff was organised varied and its adoption could be linked to a number of factors. One domestic abuse organisation reported that teachers were merely present in the classroom while specialist staff from the domestic abuse organisation delivered the programme.

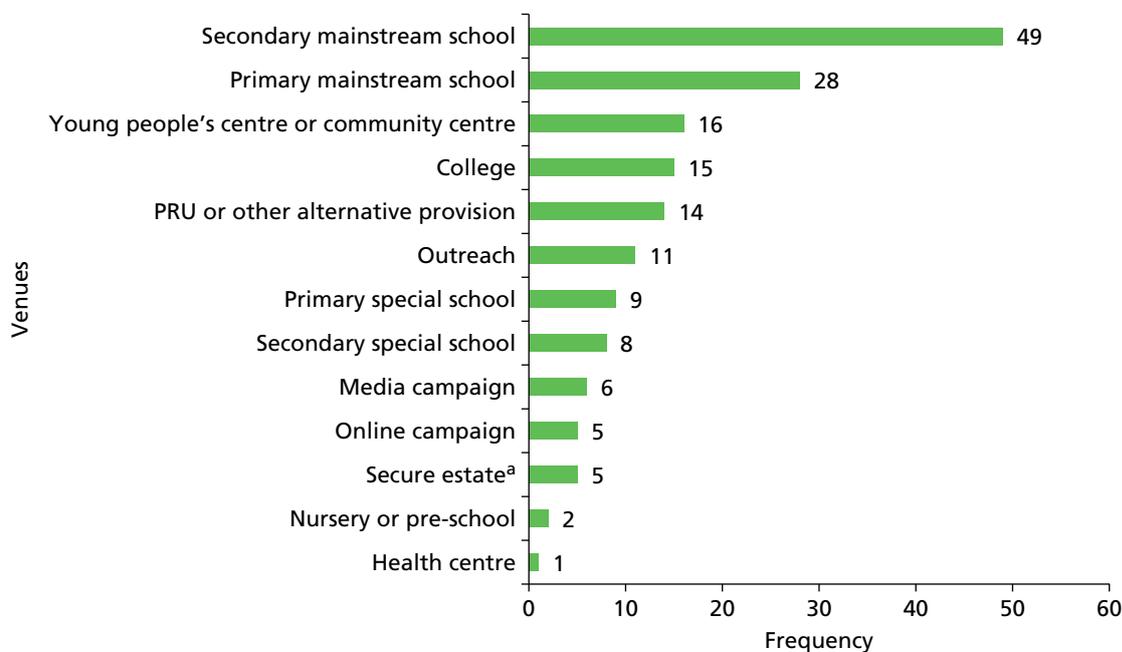


FIGURE 4 Venues where programmes were delivered. a, Secure estate refers to a young offender institution, a secure children's home or a training centre. PRU, pupil referral unit.

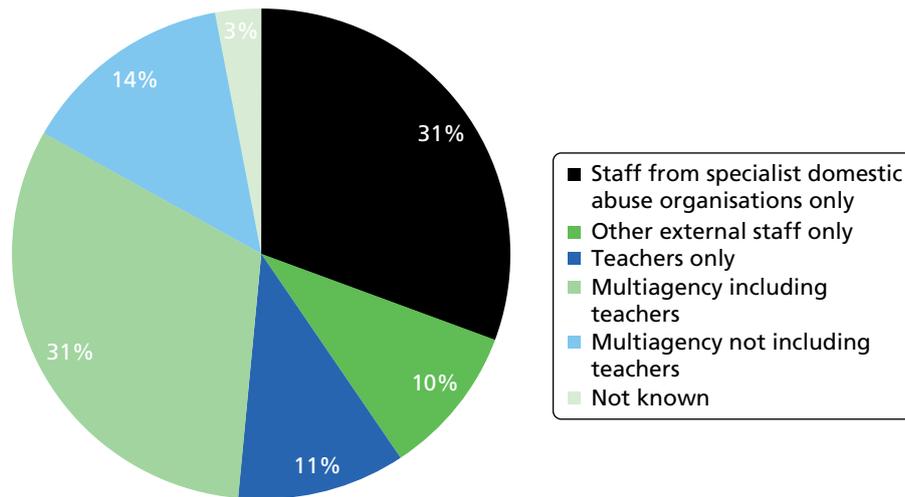


FIGURE 5 Staffing arrangements for programmes.

A range of teachers was involved in programme delivery, including class teachers in primary schools, form teachers in secondary/high schools, specialist PSHE teachers and ‘other’ teachers. As *Figure 6* shows, school counsellors/guidance teachers and school nurses were involved in a small number of programmes ($n = 7$ and $n = 4$, respectively).

The practitioners most widely involved in programme delivery were those from specialist domestic abuse organisations who were involved in 63% ($n = 41$) of the programmes for which staffing data was provided; in almost half of these cases (31%) they were the only practitioners involved. A further 14% of programmes were delivered by other professionals from outside schools; these included sexual health workers, youth workers and staff from voluntary organisations (other than domestic abuse or children’s voluntary organisations).

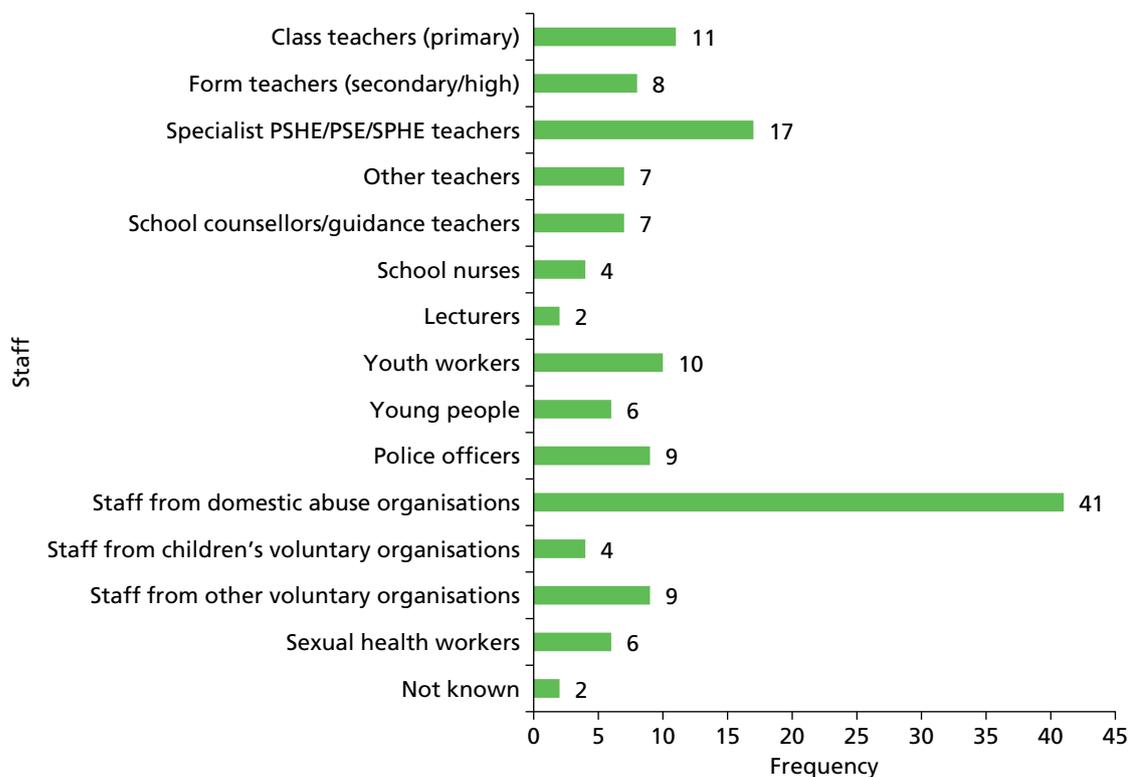


FIGURE 6 Practitioner groups involved in delivering programmes. PSE, personal and social education; SPHE, social, personal and health education.

In addition to the staff listed in *Figure 6*, 12 programmes involved 'other' people delivering the intervention; these included a community safety officer, a safeguarding team, a trainee social worker, theatre company staff, nurses (not school nurses), a domestic violence co-ordinator (local authority) and youth offending service practitioners.

Facilitator training

The survey asked respondents to indicate whether or not those delivering the programme had received specific training to enable them to do so. The question was unanswered for 45% of the programmes reported. *Figure 7* shows that, for those programmes where information was available, almost two-thirds (61%) reported that all of the staff had undertaken specific training to deliver the programme, with only 9% reporting that staff had not had any such training. A small number (15%) reported that 'some but not all' of the staff had undertaken training.

Location of programmes in the curriculum

Where programmes were delivered in schools, respondents were asked to indicate in which lessons programmes were delivered. As expected, school programmes were most likely to be delivered in PSHE classes, with a few programmes being delivered in citizenship or drama lessons. None of the reported programmes were taught in science lessons. Two respondents reported that programmes were delivered in English lessons; one respondent who described 'Equate: A Whole School Approach' programme reported that one aspect of the programme – 'personal space' – was delivered in physical education lessons and another element – 'global gender inequalities' – was taught in geography classes. Five respondents reported that programmes were delivered in separate sessions outside mainstream lessons either to individuals or in small groups; this was likely to occur in cases where young people had disclosed abuse.

Methods of delivery

All respondents who answered a question on methods used to deliver programmes ($n = 56$) reported using multiple methods. *Figure 8* shows that the most commonly used method of delivering programmes/interventions was small-group discussion (71% of those programmes reported), with heavy use also made of whole-group discussions (64%) and digital versatile discs (DVDs) (52%). The DVD material was likely to have been drawn from national and regional campaigns and one respondent explicitly identified the media campaigns as an influence on the genesis and content of their local programme. Theatre in education (7%), community events (7%) and adverts (13%) were less frequently mentioned, and this is likely to reflect the costs attached to such approaches.

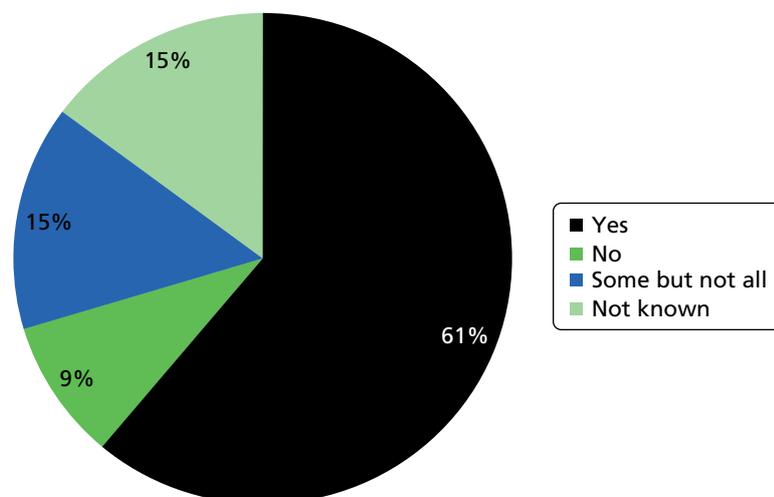


FIGURE 7 Staff who had undertaken specific training to deliver the programme.

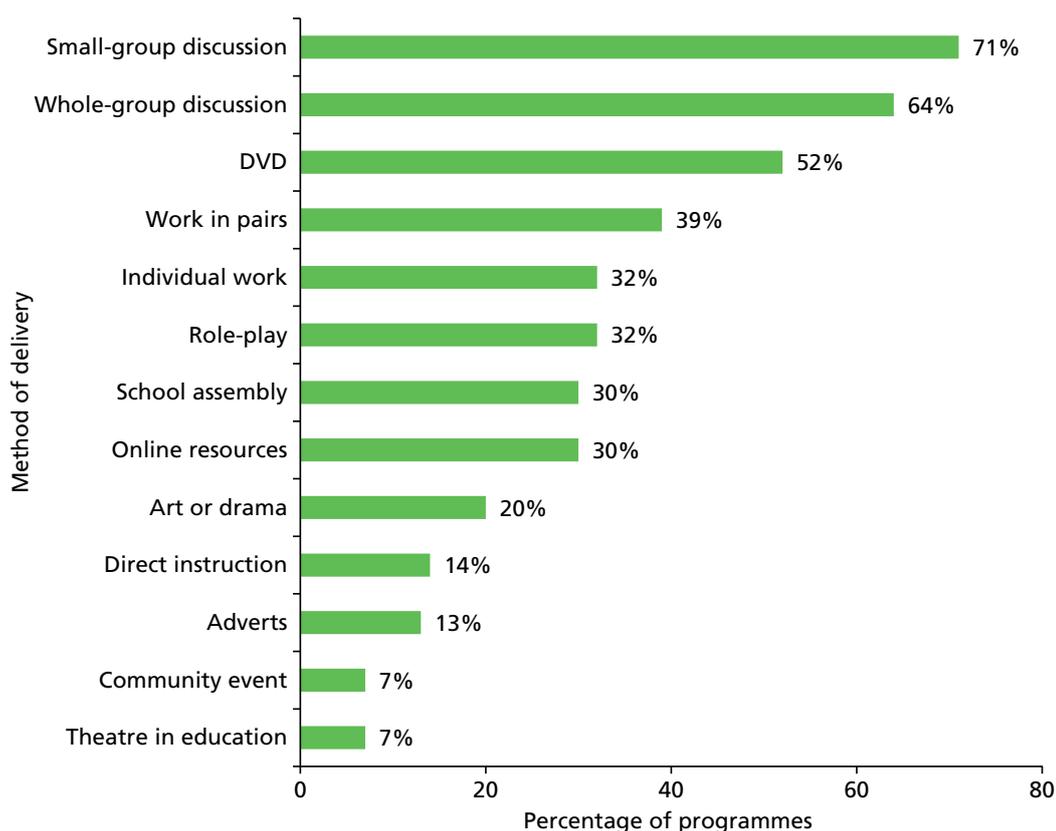


FIGURE 8 Methods of programme delivery.

The survey also asked respondents whether or not reported programmes were delivered in conjunction with programmes for other non-school groups, for example parents or carers. The majority of respondents answering this question did not know whether or not this was the case. Where this question was answered, 11 programmes were described as delivered in conjunction with programmes for professionals working in the local community, six were described as delivered in conjunction with programmes for parents/carers ($n = 6$) and two were delivered alongside programmes for other adults in the community ($n = 2$). One programme was also delivered in conjunction with a programme for teachers as part of in-service training.

Target audiences

Target audiences by age

The survey classified children and young people receiving programmes into four age ranges: 0–4 years (early years), 5–10 years (primary), 11–15 years (secondary) and 16–18 years (further education). As the focus of the study was interventions for children in the general population, programmes targeted at those over 18 years of age or at specific groups, for example pregnant women, were excluded. Where programmes were reported as aimed at a wide range of age groups, for example at children aged 5–16 years, these were described as targeting combined audiences. *Table 9* shows that one-third of the programmes for which this information was received ($n = 49$) were targeted at secondary school-aged children, nearly one-fifth were delivered to primary school age and 14% were aimed at both primary and secondary school ages. Only a small number of programmes were targeted at young people in secondary and further education but the survey was not sent to further education colleges. None of the programmes reported were targeted at children under 5 years of age.

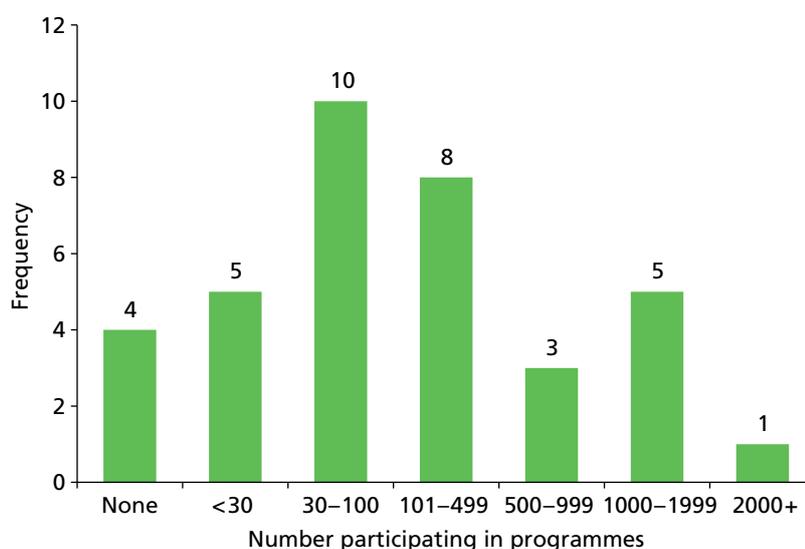
TABLE 9 Target audiences by school age

| School ages | Number of programmes | Per cent of programmes |
|---------------------------------|----------------------|------------------------|
| Primary | 9 | 19 |
| Secondary | 32 | 65 |
| Primary and secondary | 7 | 14 |
| Secondary and further education | 1 | 2 |
| Total | 49 | 100 |

The survey asked respondents whether or not different components of the programme were delivered to more than one age group. Where this information was available ($n = 56$), 54% ($n = 30$) said that programme content was adjusted for different age groups, 29% ($n = 16$) answered 'no' and 18% ($n = 10$) did not know. Respondents described delivering differing content to different age groups in respect of material addressing their children's or young people's own intimate relationships. Topics such as violent crime or drugs were delivered to older children, while younger children were more likely to be offered material addressing friendship or internet safety. Different materials such as books and DVDs were selected for primary- and secondary-aged children, and the depth of the discussion varied according to age, with games and role-play seen as more appropriate for younger children. While most of this adaptation and selection was described as being undertaken in-house by the programme facilitators, one programme, 'Equate: A Whole School Approach', was described as designed to include age-appropriate components, with a built-in 'shift from general domestic abuse awareness to more specific issues such as sexual consent or teenage romantic relationships as children move up through the school'. Three programmes designed specifically for primary school-age children were cited: the 'Helping Hands' programme (this programme is discussed in detail in *Chapter 7*); 'Miss Dorothy' (also known as 'Miss Dot' and 'Miss Dorothy Watch Over Me') and 'Themwifies'.

Programme participants

Thirty-six respondents provided information on the number of children and young people participating in programmes in the previous 12 months (*Figure 9*). Half of the programmes for which this information was provided had between 30 and 499 participants; the largest number reported was 2300 participants. Four newly established programmes had no participants to report as yet.

**FIGURE 9** Number of children and young people participating in programmes in the previous 12 months.

Programmes delivered by gender

Figure 10 shows that most respondents reported that programmes/interventions were delivered to both mixed-sex groups and single-sex groupings. Only a small proportion of those answering this question described programmes that were targeted specifically at girls only and only one reported a programme targeted at boys only. Three of the girls-only programmes were delivered in single-sex schools.

Among the reasons given for programmes being delivered in mixed-sex groups were that it was relevant, suitable and important for both boys and girls; that it 'mirrors society'; that it was 'in line with the agency ethos'; and to 'get balance' and a range of views. Other responses focused on practical arrangements such as 'it reflected class composition' and to 'achieve maximum coverage'. The most commonly stated reasons given by those advocating single-sex groups were that young people talked more freely in this context; it enabled discussion on gender-specific experiences; and that girls could talk 'without offending anyone, i.e. potentially boyfriends can be in the group'. Those employing both mixed- and single-sex groupings reported that flexibility enabled the programmes to be more responsive to the needs of particular groups and brought the advantages of both approaches to learning by affording opportunities to discuss issues in different settings. One respondent described such an approach in more detail:

Most [name of organisation] elements are delivered in class groups that are mixed sex, but certain elements such as Personal Space include issues around sexual consent, rights and responsibilities. This part is delivered to single sex groups as it needs to be targeted specifically to meet the needs of either young men or women.

Programme participants by race and disability

Respondents were asked to identify the proportion of black, Asian, minority ethnic and refugee (BAMER) programme participants and those who had a disability or special needs. Forty-two per cent of respondents ($n = 41$) provided information relating to ethnicity and a similar number did so in relation to disability and special needs.

Respondents' reports of numbers of BAMER participants on programmes ranged from none ($n = 4$) to 90% ($n = 1$), and in 15 cases (37%) this information was not known. As we lack the information required to identify respondents' locations in a number of cases, we are unable to report on the extent to which this represents the make-up of the local population in these areas. However, although the number of respondents answering this question was low, Figure 11 shows that the majority of those responding described programmes that were delivered to audiences of which 10% or more were made up of BAMER children and young people. This can be contrasted with the finding from the analysis of programme content,

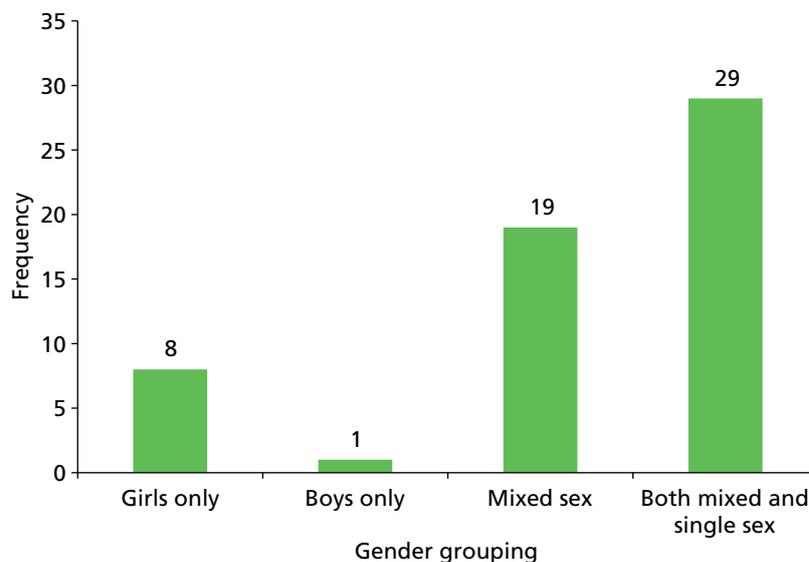


FIGURE 10 Target audiences by gender grouping.

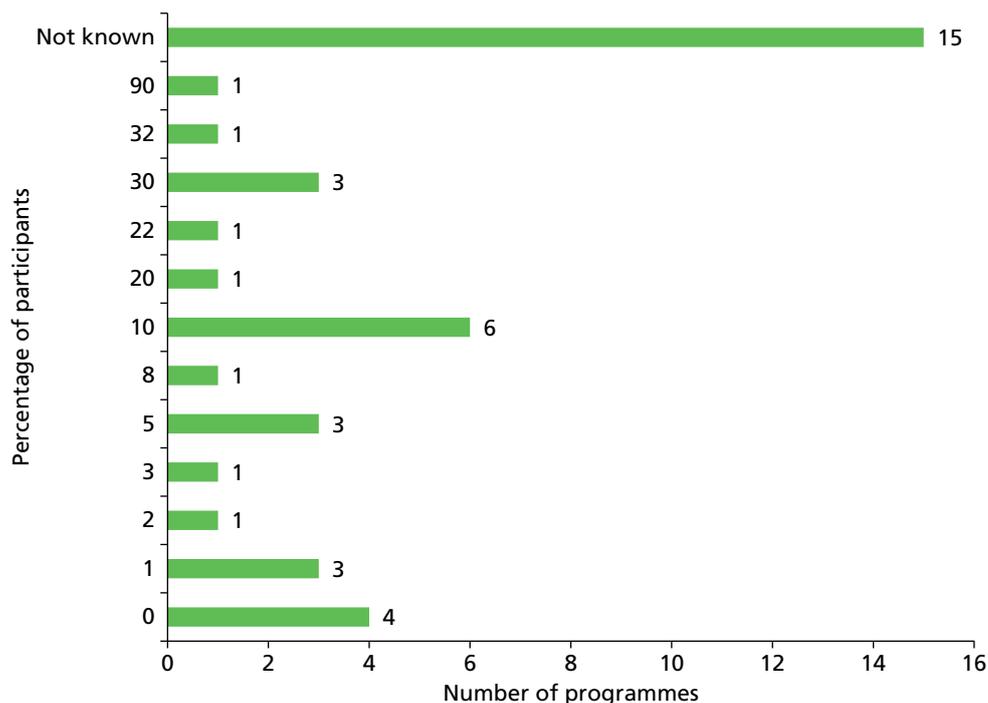


FIGURE 11 Proportions of BAMER participants on programmes in last 12 months.

reported above, that only 17% of programmes were explicitly addressing the issue of domestic abuse in BAMER families.

Thirty-eight per cent of respondents ($n = 42$) did not know the proportion of participants with disabilities or special needs on programmes. Where this information was provided, the numbers of children and young people with disabilities or special needs on programmes in the last year ranged from none to 25% (Figure 12). For comparison purposes, the number of pupils with special educational needs in England, recorded by the Department for Education, in 2012–13 was 18.7%,³⁹ while in Wales it was 22.3%⁴⁰ and in Northern Ireland it was 21.1%.⁴¹ In Scotland, the term 'additional support needs' is used to encompass a wider range of children with support needs (e.g. bereavement is included). The recorded figure in 2013 was 19.5%.⁴²

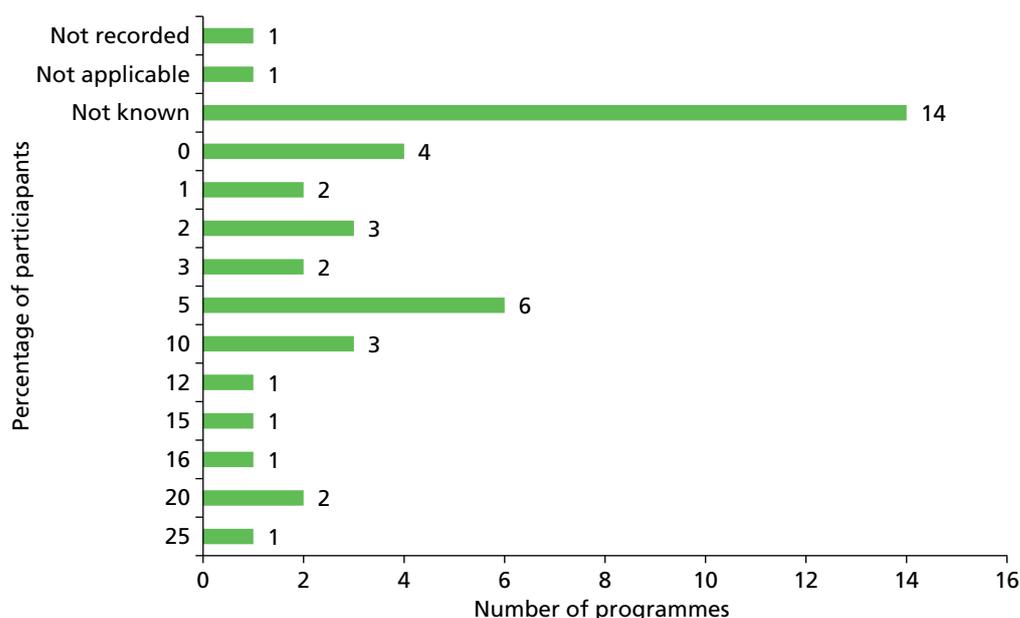


FIGURE 12 Proportions of programme participants with disabilities or special needs in the previous year.

Programme funding and development

Funding

The survey asked respondents to specify the main funders of programmes. Twenty-seven respondents did not answer this question (28%), and of those who did, 10 respondents (14%) did not know who funded programmes. The most common source of funding identified for the 71 reported programmes was community safety partnerships (17%) followed by local domestic violence organisations (10%), with schools being the main funder in 9% of cases. Other funders included trust/foundations, the police, local authority children's education services or social care. The NHS (3%) and local authority youth services (1%) were the least frequently cited sources of funding for these programmes (Figure 13). These patterns were consistent across high and low responding low authorities. Additional information provided in respect of other funding sources identified a wide range of national and local funders such as the Big Lottery, Lancashire Children's Trust, a local solicitor's office, Preston Children's Trust, Comic Relief, Coalfields Regeneration Fund, Scottish Government and Public Health.

Influence on programme design

The survey collected information on whether or not programmes/interventions were built on an existing programme. Sixty-four programme accounts provided information on this issue; the most frequent response (42%) was 'no', that the programme was designed locally, while 39% reported that the programme was modelled on another intervention and in 19% of cases the original was not known. Those who answered 'yes' were asked to describe what influenced or informed the design and content of the programme. Various influences were described including feedback from young people themselves, personal knowledge and research as well as replication of other established programmes. The range of responses is outlined below:

Feedback from the young people

Inventor's own personal involvement with subject and also media campaign

Successful outcomes from similar work in the US. MVP [Mentors in Violence Prevention] Scotland is based on the MVP model developed by Dr. Jackson Katz in the mid 1990s. Content driven by current issues within society around abuse and exploitation.

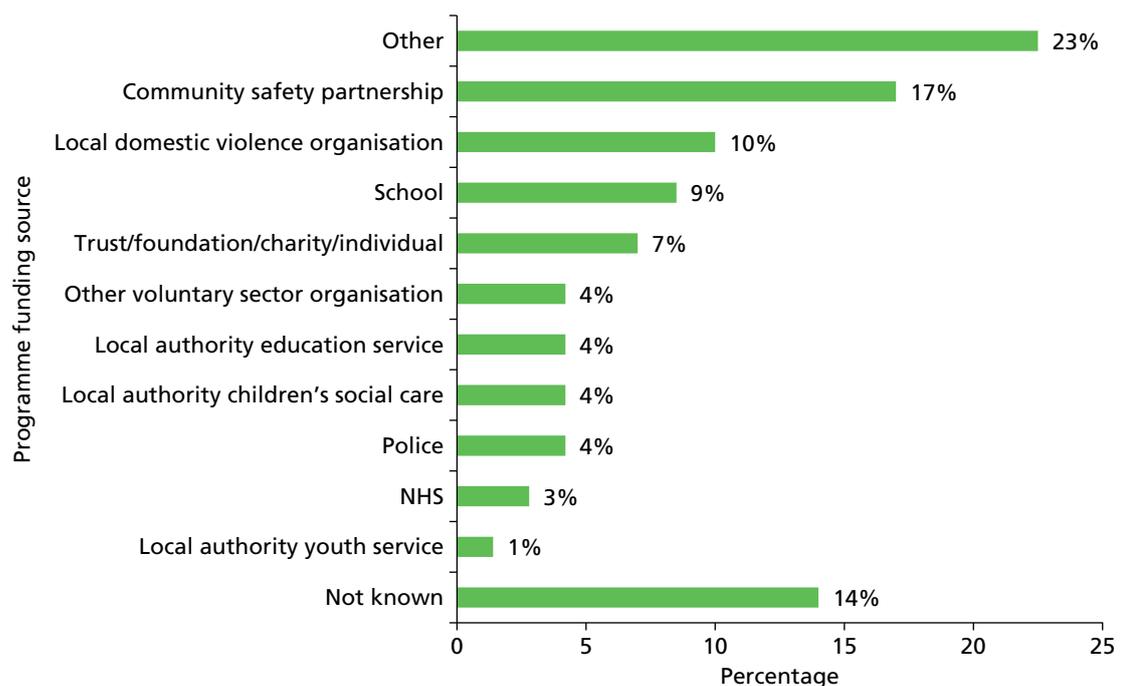


FIGURE 13 Main sources of programme funding.

Respondents were also asked whether or not children and young people had been involved in designing the programme. Where this question was answered, there was a fairly even spread between responses; 37% ($n = 23$) answered 'yes', 27% ($n = 17$) answered 'no' and in 36% ($n = 22$) of cases this was not known.

Programme adjustments

Respondents who had been involved in setting up programmes were asked if they thought that the programme had changed over time. The 39 respondents who answered 'yes' (18 reported no change over time) described programme adaptations which had addressed programme content, methods of delivery and the context in which they were delivered. Five reported having expanded the content to embrace newly emerging topics such as online abuse, sexting and sexual exploitation. One reported that the programme now had 'more focus on homosexuality and BAMER'; another respondent had widened the programme's scope to address issues for lesbian, gay, bisexual and transgender (LGBT) and male victims. Four had introduced new methods including 'more interaction, more role-play', all in response to feedback from young people. Overall, such responses reflected an ambition to keep programmes up to date and flexible and so increase responsiveness to different audiences. Four responses focused on how external changes had impacted on the delivery of programmes. These mainly related to reductions in funding; however, one respondent described how the privatisation of a local authority education service had made it more difficult for schools to access the programme.

Extent to which programmes were sustained

Stanley *et al.*²⁸ have argued that short-term funding, together with the failure to embed these interventions in the national curriculum, has limited the sustainability of these programmes. Respondents were asked when programmes began, whether or not they were still running, and if not, when they ended. The length of individual programmes was then calculated. This information was not given for 37 (35%) of the programmes reported. In 21 cases, this information was 'not known', either because the start or the end date of a programme was not known or because programmes were still currently running but respondents did not know when they began. For programmes ($n = 42$) where start and end dates were known, 22 had been in operation for less than 2 years, 11 had lasted between 2 and 3 years and nine had been running for over 3 years, indicating a lack of sustainability (*Figure 14*). Just over half (54%) of all 98 programmes reported were still operational between October 2013 and January 2014 when the survey was completed.

Reasons for programmes ending were identified in six cases: in three cases this was because funding had been discontinued and in another three cases programmes had been intended to be time limited.

Programme outcomes and impact

Evidence for impact

Respondents were asked whether or not they had discovered if the programme had had any impact on its participants. Nearly two-thirds (62%) of those answering this question ($n = 52$) claimed to have collected this information; 11 (21%) had not done so. Respondents were also asked to describe how this process was carried out. Information for 58 programmes was reported on. Of these, 24 programmes had undertaken this as part of a more formal evaluation process, with eight specifically stating that they had used pre and post questionnaires. Three reported having used specific measures, for example the Strengths and Difficulties Questionnaire. Qualitative measures cited included user satisfaction forms and focus groups; one reported using a 'survey of learning journey' as well as ongoing monitoring from session to session.

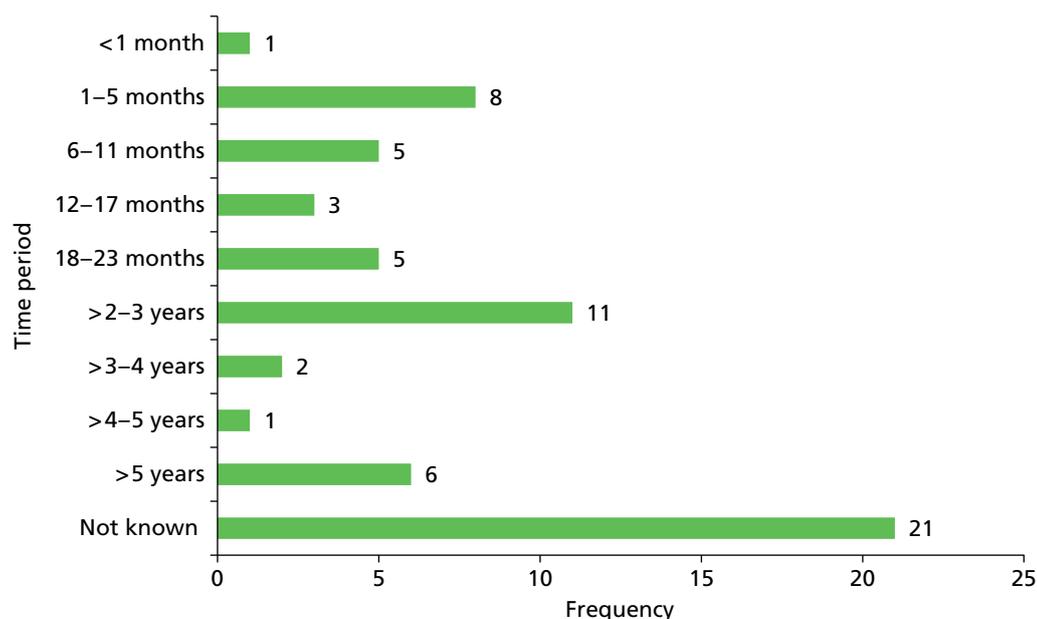


FIGURE 14 Period over which programmes sustained.

Evaluation of programmes

The survey collected information on whether or not the programmes had been evaluated. The majority of those answering this question ($n = 33$; 62%) reported that the programme they were describing had been evaluated; most of these were in-house evaluations. Ten respondents described the evaluation as independent but no reports from these evaluations were provided.

Programme achievements

Respondents were asked for their views on what programmes had achieved and comments were made in relation to half of the programmes reported. The most common achievement reported ($n = 24$) was 'raised awareness' or increased knowledge (of domestic abuse/abusive relationships), and 'raised self confidence or self-esteem' for children and young people was often associated with this:

It has helped young people look at their relationships, gained self confidence.

Raising confidence amongst young people to challenge abuse, raising awareness of issues and support available, based on feedback from schools.

Seven respondents identified changes in behaviour, although some of these were anecdotal:

... changed behaviour in schools, improved relationships, children able to express emotions and has addressed bullying.

Qualitative work has identified many other pluses including positive school climate, knowledge of the issue, ability to intervene and support friends.

Three described disclosures of experiences of abusive relationships as a consequence of delivering programmes:

The project has achieved: changes in knowledge; changes in behaviour; changes in attitude and increased disclosures of domestic abuse.

A small number of respondents described children and young people enjoying or valuing the programme:

The programme is still very new but it has already generated a great deal of interest in the students it has been offered to. The vast majority, in excess of 80%, report no previous education regarding domestic abuse.

Programme challenges

Thirty-nine responses described challenges encountered in developing and delivering programmes. Two-thirds of the comments received related to either accessing or getting buy-in from schools ($n = 13$) or freeing up time in the curriculum ($n = 6$):

Schools have such differing opinions on whether this is a valid or useful topic for their students.

Being able to deliver this – local schools and colleges who are working to the curriculum seem to not have any spare sessions to fit this in!

Similarly, it had been difficult to establish priority for preventative work in one area where:

The low level of reported teenage relationship abuse locally does not put the subject very high on the agenda of children's services. If you can't see the problem then it doesn't exist.

Other problems encountered included difficulties in accessing the funding required for staffing or to deliver the programme to a greater number of children and young people ($n = 7$):

Funding did not materialise from the C&YPT [Children and Young People's Team] so the school underwrote the programme.

Other comments related to tensions in multiagency working:

The various agencies within [local authority area] do amazing work, and although they seem on face value to work side by side and sing from the same hymn sheet . . . there are still a lot of boundaries between organisations and in some instances rivalry. This makes it more difficult, if one agency won't work with you because others will.

One respondent reported that it was difficult to find

. . . appropriate male facilitators to help develop the project content and co-facilitate the sessions.

Summary of Chapter 3 findings

The findings from the mapping survey have shown that while preventative initiatives had taken place in many of the local authority areas in the sample, a significant proportion of the respondents were unaware of any such work. Where reported, the majority of initiatives were school-based and just over half had fewer than 100 participants in the previous year, suggesting that relatively few children and young people had had the opportunity to take part. However, work was taking place with children in primary schools as well as with young people in secondary schools, although the latter was more common.

Most initiatives appeared to be funded only for the short term from a range of sources, with community safety partnerships identified as the most frequently reported source of funding. Health sector funding appeared negligible.

Most practitioners delivering these preventative initiatives were based outside schools: they were mainly working in specialist domestic abuse organisations, although joint delivery with teachers was reported for one-third of programmes. Programmes focused mainly on domestic abuse and violence in young people's intimate relationships; however, a variety of other topics were also covered, although there was little attention to issues of diversity. A range of methods was employed in delivering the content, with small- and whole-group discussion along with use of visual resources such as DVDs emerging as the most common delivery methods. Theatre in Education was included as part of a small number of programmes.

Many of the programmes reported were described as having been evaluated in some way; these were mainly in-house evaluations and no evaluation reports were provided to the research team. Respondents reported a positive impact on children, on young people and on schools themselves, including increased awareness of domestic abuse and disclosures of maltreatment. Nonetheless, a number of issues were noted which suggested that developing and delivering preventative interventions was complex and challenging. Programme developers outside schools described difficulties in engaging with schools as well as in accessing funding.

Chapter 4 Systematic review of the published literature

Introduction

As noted in *Chapter 2*, this review was designed to look beyond simple effectiveness as a contribution to the overall study intention of examining not only what works, but also whom it works for and in what contexts. In line with the realist framing of the study, the analysis of the review findings also explicitly hypothesised about possible plausible mechanisms of effect. The methods adopted were, therefore, a combination of formal systematic review techniques for locating and describing the included studies and more iterative and contingent approaches to analysis and interpretation of the studies once inclusion had been agreed. The former included an a priori search strategy with inclusion and exclusion criteria, search terms, lists of databases to search, the use of specific quality assessment tools, and logging of characteristics tables (see *Chapter 2*). The latter included a consideration of CMO models to interpret the meaning of the findings. The review included both quantitative and qualitative literature. Each paper was assessed for quality, and the quality assessment is reported below, but no studies were excluded on quality grounds. The data were summarised and described narratively.

Included studies

As *Figure 15* shows, 28 quantitative papers and six qualitative papers were included in the review; there was some overlap, with three of these papers containing both quantitative and qualitative data, and so in

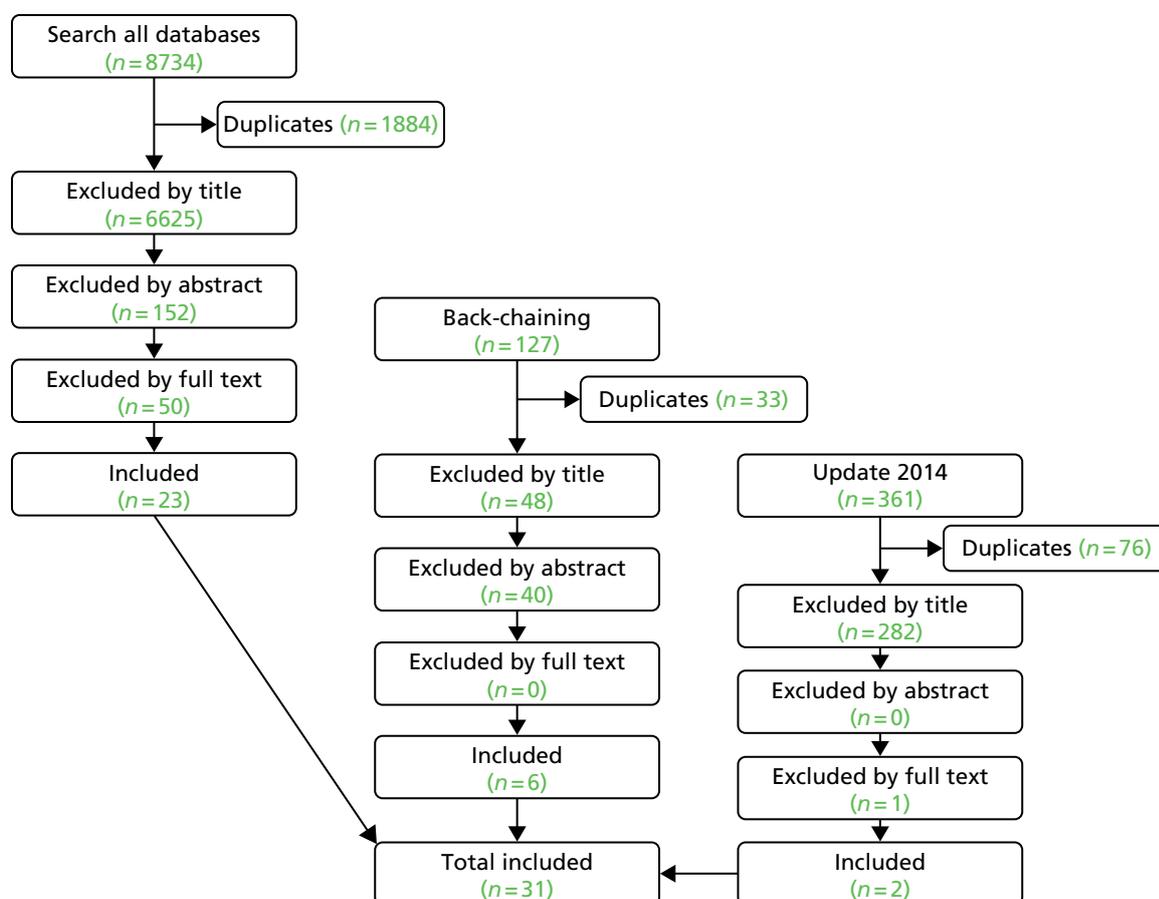


FIGURE 15 Flow chart of included studies.

total there were 31 papers included in the systematic review. These covered 23 separate programmes, as some programmes were described in more than one paper. Details of the characteristics of the 28 quantitative studies are given in *Appendix 7* [see *Table 34* (controlled trials) and *Table 35* (cohort and case-control studies)]. The findings from the review of the six qualitative studies are discussed as a group later in this chapter.

Quantitative studies: results

Thirteen papers reported on controlled trials^{43–55} which involved nine different programmes. Nine distinct trials were reported among the 13 papers; eight of these used some kind of clustering design. Eight were based in the USA (reported in nine papers)^{43–49,53,54} and one in Canada (reported in two papers).^{50,56} The date range was 1997–2013. The range of number of sites was 1 (clustering was by class) to 123 (mode = 18). The range of number of individuals included at the final analysis point was 192 young people to 2655 young people (mode = 1700).

Fifteen papers included various types of cohort or case-control studies.^{50,57–70} Fourteen programmes were reported on (two of which overlapped with the programmes in the trials^{56,66}). Seven of these eight papers were based in the USA,^{59–63,65,68,69} three in Canada,^{64,67,70} two in the UK^{57,58} and one in India⁶⁶ (a test of the transferability of the 'Coaching Boys into Men' programme examined originally in a US context).⁴⁴ The date range for these studies was wider: 1992–2014. The smallest study in this group comprised 30 participants by the final time point,⁶³ and the biggest comprised 629 (mode = 239).⁶⁴ The range in the number of included sites was 1–30 (mode = 2).

Five authors describe their studies as pilots.^{43,44,57–59} Eight papers include multiple testing of data for analyses that were apparently determined post hoc, making at least some of the analyses exploratory rather than confirmatory. Some of these do not report correction for multiple testing or the processes used for this are unclear,^{45–48,60} while others report at least some correction for this.^{49,60,61} Technically, the findings arising from the pilot studies and from the exploratory findings should only be used for generating hypotheses for future studies, as they are not designed to provide definite answers to the questions they pose.

Where the type of testing is stated it is usually reported to be one-tailed, which raises questions about the prior beliefs of the authors and the potential for missing findings in the opposite direction of those expected.

Characteristics and quality of included studies

Controlled trials

In general, on the rating scale given in *Table 4*, the included studies scored A or B for quality. The exception was the study by Avery-Leaf *et al.*⁴³ In the case of this study, randomisation was done some months before the intervention group commenced and before-and-after data were collected from the control group before the intervention group began. This means that it was known locally who would be in the intervention arm and what questions would be asked in the before-and-after assessment prior to the commencement of the intervention. Numbers were very small (102 intervention/92 control). There were imbalances in the demographics that do not seem to be accounted for in the analysis (e.g. 63% girls in the control group and 42% in the intervention group) and extreme outliers were removed from the data before the analysis, which, again, could have caused systematic bias if these differed between groups. This study is clearly not based on an intention-to-treat analysis and the results are, therefore, open to question.

Wolfe *et al.*⁵⁰ also randomised well in advance of running the study (1 year ahead) and, during the time between randomisation and implementation, the systems for running and teaching the programme were put into place. While some delay is inevitable when a trial is being run in the 'real-life' situation of a school year, other studies in this data set did not seem to have such long delays between randomisation and implementation. There is, thus, a risk of systematic bias in this study, too. However, it is a large study (1722 students from 20 schools) and is otherwise reasonably well designed.

The study given the highest quality score (A/B) was that of Miller *et al.*⁴⁴ All of the other studies apart from that of Avery-Leaf *et al.*⁴³ were given a moderate quality score of B.

The main issue across the majority of the controlled studies was a lack of prospective power calculations and/or of statistical control for clustering, multiple testing, baseline confounders and data skew, and control for missing data in longitudinal analyses. This risks either under- or overstatement of statistically significant findings.

Power calculations and correction for clustering and multiple testing

Only Miller *et al.*⁴⁴ report a prospective power calculation, although two authors comment on the power of their study post hoc.^{49,51} Controlling for clustering is mentioned in only three studies.^{44,45,50} As noted above, multiple testing was very prevalent, and some of these analyses were clearly post hoc and exploratory, and so not designed to be generalisable. Control for multiple testing, either informally (by setting the value for statistical significance at $p < 0.01$) or formally (by using techniques such as Bonferroni adjustment) was undertaken in only two studies.^{49,51}

Methods of randomisation

Method of randomisation was generally not given. Where the randomisation technique was stated, this was usually done via computer randomisation.

Blinding

Generally, blinding to the intervention was not possible; however, Wolfe *et al.*⁵⁰ stated that students in their study were not informed which groups they were in, although, as noted above, randomisation a year before implementation would have alerted teachers and possibly pupils to the allocation.

None of the authors stated if those processing and analysing the data were blind to allocation.

Loss to follow-up

In most cases, the majority of those in the programme completed post-intervention measures immediately, and at least 80% of those entered into the study were accounted for in the longitudinal follow-up phases. However, in Jaycox *et al.*⁴⁵ 7 out of 47 'tracks' were excluded after randomisation, resulting in a loss of 31% of pupils randomised into the study, which again risks significant bias. In most cases, more or less sophisticated mathematical modelling methods are used to account for loss of follow-up. However, the two studies that report the use of multiple imputation methods do not undertake the number of data set imputations recommended when this technique is used for modelling variance and generating p -values.^{47,51} In the case of Foshee *et al.*'s study,⁵¹ the 4-year data had 50% missing, for which around 50 imputations are recommended, but only 10 were done. Taylor *et al.*⁴⁷ did five imputations for 18% missing at 6 months' follow-up, for which around 18 imputations are recommended.⁷¹

Comparability of groups at baseline

Baseline characteristics were not always reported. Among the four studies with obvious differences at baseline,^{43,45-47} only two controlled for these.^{45,47} The imbalances included important demographic variables (such as gender or school grade/age). In one study,⁶¹ no information was reported on baseline variables.

For five of the studies where standard deviations (SDs) are reported for the outcomes, the data appear to be skewed, as suggested by wide and overlapping SDs.^{44,45,50} Two of the Foshee *et al.*^{51,52} studies also report what appear to be overlapping SDs, but, on inspection, are actually standard errors. SDs that are bigger than the mean might be a consequence of a disproportionately large effect on the data of a small number of individuals entering the study at baseline with characteristics (such as risk factors for certain attitudes, behaviours and/or perpetration/victimisation events) that resulted in extreme scores for the relevant outcomes. These would then have influenced the means for those outcomes for the whole population group. The implications of this are explored further in the discussion section of this chapter.

Assessment of treatment fidelity

Four of the nine programmes reported on their processes for assessing compliance and/or programme fidelity.^{44,45,51–55} Where this was reported, it was generally moderate (around 60%) to good (over 90%).

Cohort and case–control studies

There was a bigger range in the quality scores for these studies than for the randomised trials. Wolfe *et al.*⁵⁶ and Katz *et al.*⁶² were both given the highest quality score of A/B. Weisz and Black⁶³ were allocated the lowest score of D, meaning that the results of the study are very unlikely to be reliable and generalisable. Gardner and Boellaard⁶⁰ and Jaffe *et al.*⁶⁴ were both graded C/D, meaning that the utility of their findings for other settings should be treated with great caution. In general, the quality of the cohort and case–control studies was noticeably lower than that of the controlled trials.

As for the controlled trial studies, a key quality issue across the majority of the cohort and case–control studies was a lack of prospective power calculations and/or of statistical control for clustering, multiple testing, baseline confounders and data skew, and control for missing data in longitudinal analyses. This risks either under- or overstatement of statistically significant findings. Only Macgowan⁶⁵ reported formally controlling for multiple analyses.

There were also issues in terms of the comparability of the intervention and comparison/control groups, high levels of dropout, lack of control for confounders, and lack of use of precise measures of effect [such as SDs or confidence intervals (CIs)].

Power calculations and correction for clustering and multiple testing

None of the cohort or case–control studies reported power calculations. As for the controlled trials, multiple testing was very prevalent, and some of these analyses were clearly post hoc and exploratory, and so not designed to be generalisable. Control for multiple testing was not undertaken in any of the cohort or case–control studies. Outcomes data reported below (see *Table 16*) have taken this into account, and, where multiple testing occurred, only results that were statistically significant at the level of $p < 0.01$ are reported.

Methods of allocation to groups

Method of allocation was generally based on wait-list criteria, meaning that the intention was for all schools/classes/groups in the study to receive the intervention eventually. Some were randomised to be active (the intervention group) and the rest were allocated to wait to receive the intervention until the study was completed (the control group). Most authors reported attempts to match cohorts, and gave details of baseline characteristics. As for the randomised trials, in five studies where baseline measures were reported, there was clear imbalance, which was reported as corrected in all aspects for two studies^{66,67} but not in the other three.^{46,59,61}

Blinding

In common with the randomised trials, generally blinding to the intervention was not possible, and the authors do not report if those processing and analysing the data were blind to allocation.

Loss to follow-up

In most of the studies in this group, the loss to follow-up was high, or very high. Only three studies reported dropout rates of less than 35% at the final data collection point.^{61,62,68} In the case of Gardner and Boellaard's study,⁶⁰ fewer than 10% of the original participants were included in the final analysis (72 out of 743, including case and control participants). In one case, only summary statistics are given for the post-test data, and so the number who completed the post-test instruments cannot be determined.⁶⁴ Krajewski *et al.*⁶⁹ did not provide any data about how many of the 239 students who completed baseline measures went on to complete post-test surveys, and in five studies^{57,59,63,64,67} the number completing baseline instruments and/or attending the intervention was not stated.

Comparability of groups at baseline

Baseline data were not given for all studies in this group, as noted above. Where they were reported, as for the randomised trials, group imbalances were clear for important demographic variables (such as gender or grade) in five papers.^{59,61,63,66,70} Among these, only Miller *et al.*⁶⁶ corrected for all obvious biases. Black *et al.*⁶¹ corrected for grade mix, but not for other imbalances that appeared to be present.

For five of the studies that reported SDs, the outcomes data are skewed for at least some of the variables assessed.^{61,65,66,68,70} As for the randomised trials data set, this suggests that a small number of individuals with specific baseline characteristics may be disproportionately affecting the outcomes of some of the non-randomised studies. The nature and implications of this finding are discussed further below (see *Analysis*).

Assessment of treatment fidelity

Five of the 15 included papers (covering four programmes/interventions) gave at least some information on compliance and/or programme fidelity.^{61,65,66,68,70} Hilton *et al.*⁷⁰ reported a 'normal' baseline absentee rate of 10–20% for the school assembly at which their intervention was administered. The two papers reporting on the Dating Violence Prevention Project reported relatively good compliance, with a participation rate of 75–80% of those eligible.^{61,68} This team also held biweekly meetings with facilitators to increase programme fidelity, although the papers do not report the effectiveness of this strategy. Miller *et al.*⁶⁶ noted that 80% of the coaches who delivered their programme in India completed all 12 prompt cards they were given to use to set up dialogues with the boys they were coaching in cricket. However, only 45% of the boys reported dialogue relating to 8–12 cards.⁶⁶ Macgowan⁶⁵ gave the teachers who delivered their intervention a daily checklist to remind them of what to include. They report that 'the bulk of the curriculum was covered in all classes'.

Analysis

Where multiple testing was undertaken, it was unclear if this was corrected for in the analysis in 11 papers,^{56,58–61,63–66,69,70} although there were exceptions.^{62,67} In two cases, some or all data are only given as summary or inferential statistics.^{61,67} This makes assessment of the socially useful effect of statistically significant data (such as the calculation of numbers needed to treat) very difficult, meaning that the real-life meaning and utility of even statistically significant findings are hard to determine.

Precise estimates of effect were not always given. Where these are given,^{56,59,60,62,65,66,68,70} half of the included papers report skew in at least some variables.^{60,65,66,69,70} As noted above, this suggests that a small sample of the included pupils was affecting the results disproportionately.

Context of included studies

Two studies were undertaken in the UK,^{57,58} and one in India.⁶⁶ None of these were randomised trials. The remaining 25 studies (17 programmes) were undertaken in the USA ($n = 18$ papers^{44-49,51-55,59,61-63,65,68,69}) or Canada ($n = 7$ papers^{43,50,56,60,64,67,70}). The Indian study was an extension of the USA study that assessed the 'Coaching Boys into Men' programme.⁶⁶

Sociodemographics

Where the geographical setting of the study was noted, the majority were undertaken in inner-city/urban contexts, with only three programmes (identified in six publications)^{46,51,52,54,55,70} clearly identified as being delivered in rural, mixed or suburban locations. Most of the urban programmes included relatively or extremely deprived sociodemographic populations.

The two UK papers were published within 1 year of each other (2006 and 2007)^{57,58} and both report roughly similar demographics, including inner-city populations with a mixture of (predominantly) white and BAMER populations and relative deprivation.

The Canadian studies were all undertaken in urban or mixed urban/rural settings. Three of the four Canadian programmes (included in four publications) were undertaken in Ontario.^{50,56,64,70} Few demographics are given for the participants in these studies, but where information was available, it suggested that they were less likely to be in deprived groups than for the UK or US studies. In the case of Jaffe *et al.*'s study,⁶⁴ the population was relatively affluent, with relatively high levels of employment. Participants in the 'Fourth R' came from families where 83% were married and more than 70% had more than a high school education.⁵⁰ The participants in Lavoie *et al.*'s study of parents were all French speaking.⁶⁷

The American studies generally included high rates of ethnic minority groups. Two studies focused on Latino/a populations^{45,59} and three programmes (cited in four publications) included over 50% African American youth.^{61,63,65,68} Some others were undertaken in locations with extremely deprived populations, including one where over 46% of the grade 8 pupils included had already experienced violence in personal relationships at baseline.⁵⁹ The 'Dating Violence Prevention Programme'^{61,68} was run in a very marginalised area with high absenteeism, low attainment and daily episodes of fighting in the included schools. Similarly, the 'Shifting Boundaries' programme⁴⁷ was delivered in a location where more than half of the participants did not attain the national minimum standard for literacy and numeracy, and there was an average of 108 suspensions per year. Of the US studies that presented detailed demographics, only two appeared to include populations that were not relatively deprived.^{43,60}

The US team involved in the 'Shifting Boundaries' programme and in a separate gender violence and harassment prevention programme noted that a percentage of the participants included in their studies had already been involved in prior relationship violence programmes (23%;⁵⁹ 40%^{47,48}). However, these previous programmes appeared to have addressed other forms of violence and abuse and were not confined to dating violence. Only one team specifically noted that the UK schools included in their programmes had not run relationship violence programmes before.⁵⁸

The study undertaken in India involved mainly Hindu and Muslim neighbourhoods.⁶⁶ The boys who participated all attended regular cricket coaching, and they appear to come from relatively affluent backgrounds, with two-thirds living in higher-quality housing. One-third of their mothers worked.

Age

Across the programmes/studies, 10 (11 publications) included students aged 11, 12 and/or 13 years old;^{47-49,57,59,61,63-65,68,69} eight (14 publications) included 14-, 15-, 16- and/or 17-year-olds;^{43,45,46,50,54,56,58,60-62,64,67,68,70} 'Coaching Boys into Men' in the USA included grades 9-12 (ages 14-17 years⁴⁴), and in India, ages 10-16 years;⁶⁶ and one included families with teenagers and so the paper did not report on the age of the young people involved separately ('Families for Safe Dates').⁵³ The UK and Canadian studies did not include young people under the age of 12 years, and so all of the data on younger children come from

US programmes. The youngest children included in US studies are those in grade 6, the last year of elementary school (primary school), included in six studies.^{47–49,61,65,68} We did not locate any published studies that tested interventions for children under the age of 10 years. *Appendix 8* provides a table showing school years and grades by country.

Participants who do not engage, dropout or are lost to follow-up

Where authors assessed the characteristics of participants who do not engage in the programme in the first place, who dropout before the end and/or who are lost to follow-up, they tended to report them as belonging to specific ethnic groups (non-Hispanic black,⁴⁴ non-white⁵⁴) less likely to be prosocial at baseline^{44,46,50,53,54,63,70} or more likely to report serious physical violence victimisation.⁵² The only two exceptions to this general tendency for those with more negative attributes to be non-completers were found in the study undertaken by Miller *et al.* in India,⁶⁶ where those who were lost to follow-up were more likely to disapprove of abusive behaviours, and in the treatment group in the 'Families For Safe Dates' programme, where those lost to follow-up were more likely to believe in the importance of carers being involved in teen relationships. Some studies also found differences in general demographics for non-responders: they were more likely to be male,^{50,52} older⁴⁶ or of extreme age (much younger and much older than those continuing),⁶⁶ or to have lower levels of education⁵³ (*Table 10*).

Nature, validity and reliability, and comparability of outcome measures in all studies

Tables 11 and *12* give the outcome measures reported on in the randomised trials and cohort/case-control studies, respectively. The only tool used in more than one study was the Conflict Tactics Scale.^{43–45,60,61,70} A range of other existing, modified and new (developed for the specific project) data collection tools were reported across all of the studies. This made comparison of effectiveness between studies extremely difficult. However, the data arising from most of the studies could be categorised into four distinct groups. These were knowledge, attitudes, behaviours (such as help-seeking) and incidence of perpetration/victimisation.

In most of the randomised trials, as a minimum, the internal consistency of the measures was cited for the study population (usually based on Cronbach's alpha). Reliability (test-retest or split-half analysis type data) was not usually reported. The only exception was Wolfe *et al.*,⁵⁰ who did not report any validity or reliability data for any of the tools used, though these may be available in associated study reports.

In terms of the cohort and case-control studies, testing was less often cited, and five studies did not mention any internal consistency/validity/reliability checks on the tools they used.^{44,57,63,64,68} One of these five, Miller *et al.*,⁶⁶ used the same tools as reported in Miller *et al.*,⁴⁴ and these were subject to testing.

TABLE 10 Sociodemographic characteristics of participants in included studies

| Programme name | Authors, date and place | Urban/rural | Sociodemographics of population | Sociodemographics of sample | Gender of sample | Age/grade |
|----------------------------|--|-------------|--|---|---|-----------------------------|
| UK programmes | | | | | | |
| Healthy Relationships | Bell and Stanley 2006, ⁵⁷ Hull, North East England | Urban | School in area of high social exclusion and serves large council housing estate – high unemployment, poverty, high rate of DV, low levels of achievement – 6% achieving GCSEs at A–C in 2002 | | Male and female (% not given) | Year 8 (aged 12–13 years) |
| No title | Wai Wan and Bateman 2007, ⁵⁸ Salford, North West England | Inner city | No prior DV programme | Intervention: 80% WB Control: 90% WB About 40% one-parent families in both groups | Male and female [58%/91% female (intervention/control)] | Year 10 (aged 14–15 years) |
| Canadian programmes | | | | | | |
| No title | Jaffe <i>et al.</i> 1992, ⁶⁴ London, ON | Urban | Low unemployment; relative affluence; mixed employment types; 90% + white ethnicity | | Male and female (approximately 57% female) | G: 9–13 |
| No title | Lavoie <i>et al.</i> 1995, ⁶⁷ Quebec City, QC | Inner city | French speaking | | Male and female | G: 10 |
| Antiviolence Education | Hilton <i>et al.</i> 1998, ⁷⁰ central Ontario | Urban/rural | | | Male and female (54% female) | G: 11 (mean age 16.5 years) |
| Fourth R | Wolfe <i>et al.</i> 2009, ⁵⁰ Wolfe <i>et al.</i> 2012, ⁵⁶ south-west Ontario | Urban/rural | | Parents' demographics: 83% married; 28% high school or less; 85% employed | Male and female (53.6% vs. 45.3% female) | G: 9 |

| Programme name | Authors, date and place | Urban/rural | Sociodemographics of population | Sociodemographics of sample | Gender of sample | Age/grade |
|--|---|-------------|---|--|---|-------------------------------|
| US programmes | | | | | | |
| Skills for Violence-Free Relationships | Krajewski <i>et al.</i> 1996, ⁶⁹ mid-western city | Urban | City with population 50,000; 79% European American | | Male and female (% not stated) | G: 7 |
| Dating Violence Prevention | Avery-Leaf 1997 ⁴³ (see also Black <i>et al.</i> , ⁶¹ Elias-Lambert <i>et al.</i> , ⁶⁸ Long Island, NY | | 'Lower middle class' | 80% European American | Male and female [42% vs. 63% female (intervention/control)] | G: 9–12 (mean age 16.5 years) |
| Safe Dates | Foshee <i>et al.</i> 1998, ⁵⁴ north-east North Carolina | Rural | Over-representation of minority groups Public schools | 77.1% European American 34.9% of girls and 38% of boys were the victim of dating violence at least once prior to entering programme | Male and female (51% female) | G: 8, 9 |
| Dating Violence | Macgowan 1997 ⁶⁵ (ran in 1994), Ope-Loke, south-east Florida | Urban | | 73% black non-Hispanic; 8.3% white 57% 'regular level'; 43% 'advanced level' | Male and female (56.1% female) | G: 6–8 |
| Reaching and Teaching Teens to Stop Violence | Weisz and Black 2001 ⁶³ | Urban | 99% African American; very low income; many who had failed at other schools | 100% African American | Male and female (% not stated) | G: 7 |
| Dating and Sexual Responsibility | Pacifici <i>et al.</i> 2001, ⁴⁶ Pacific north-west | Suburbs | | | Male and female (52% female) | G: 10 (mean age 15.8 years) |
| Ending Violence: Break the Cycle | Jaycox <i>et al.</i> 2006, ⁴⁵ Los Angeles, CA | Urban | Communities where 80% are Latino/a | 92% Latino/a 75% US-born | Male and female (52% female) | G: 9 |

continued

TABLE 10 Sociodemographic characteristics of participants in included studies (*continued*)

| Programme name | Authors, date and place | Urban/rural | Sociodemographics of population | Sociodemographics of sample | Gender of sample | Age/grade |
|---|--|-------------------------------|--|---|---|-----------|
| Connections: Relationships and Marriage | Gardner and Boellaard 2007, ⁶⁰ California and South Dakota | Two previous studies combined | | Ethnically diverse sample in study Median family income \$40,000–60,000 9% below poverty line | Male (20%) and female (80%) | G: 11–12 |
| Shifting Boundaries | Taylor <i>et al.</i> 2013, ⁴⁷ New York, NY | Urban | Most ethnically, linguistically and racially diverse population in USA (15% European American; 85% wide range of BAMER) 108 suspensions per year More than half of students do not attain minimum in literacy and numeracy | 40% had been in prior violence prevention programmes 34% Hispanic 31% African American | Male and female (53% female) | G: 6, 7 |
| Law versus Interpersonal Curriculum | Taylor <i>et al.</i> 2010, ⁴⁸ 2010, ⁴⁹ Cleveland, OH | Urban | Ethnic diversity | 52% white 28% report prior victimisation 21% prior perpetration | Male and female (52% female) | G: 6, 7 |
| Mentors in Violence Prevention | Katz <i>et al.</i> 2011, ⁶² started in 1993, mid-western state in USA | | Ethnically diverse | 23% Hispanic; 36% African American | Male and female (53% vs. 55% female) | G: 9–12 |
| Dating Violence Prevention Curriculum | Black 2012, ⁶¹ Elias-Lambert 2010, ⁶⁸ mid-western state | | Very marginalised area, high absenteeism, low attainment, 99% African American. Low income. Regular fighting in school. More than 50% in single-parent families | Demographics more adverse in same gender groups | Male and female (intervention 62% female; control 40.5% female) | G: 6–9 |

| Programme name | Authors, date and place | Urban/rural | Sociodemographics of population | Sociodemographics of sample | Gender of sample | Age/grade |
|---|--|-------------|---|--|------------------------------|----------------------------|
| Coaching Boys into Men (USA) | Miller <i>et al.</i> 2012 ⁴⁴ | | | | Only data from boys reported | Grade not given |
| Families for Safe Dates (USA) | Foshee <i>et al.</i> 2012 ⁵³ | | | Families with teenagers | Gender not given | Grade not given |
| No title (USA) | Belknap <i>et al.</i> 2013 ⁵⁹ | | High levels of poverty. 56% Latino/a Two parochial middle schools and a coed public charter school | 100% Latino/a Despite objective poverty, 63% reported that their family was 'living comfortably'. Most felt moderately unsafe locally 46% had prior experience of violence (no gender differences) | Male and female (61% female) | G: 8 (mean age 13.4 years) |
| Indian programmes | | | | | | |
| Coaching Boys into Men (India) | Miller <i>et al.</i> 2014, ⁶⁶ Mumbai, India | Mixed | Hindu and Muslim neighbourhoods | All active cricket players. Two-thirds in better-off housing. Approximately one-third of mothers working. At baseline, over 80% of the boys reported that they had perpetrated violence | Boys only | Aged 10–16 years |
| DV, domestic violence; G, grade; GCSE, General Certificate of Secondary Education; WB, white British. | | | | | | |

TABLE 11 Outcomes measures used in controlled studies

| Study details | | Measures | | | |
|---|-------------------------|---|---|---|---|
| Author/date | Programme | Knowledge | Attitude/belief | Reported behaviour | Incidence |
| Miller <i>et al.</i> 2012 ⁴⁴ | Coaching Boys into Men | Recognition of Abusive Behavior Scale (existing measure) (Ca 0.93) | Barker's Gender Equitable Norms Scale (existing measure, modified); internal (Ca 0.80) | Intention to Intervene Score (developed for survey good internal reliability (Ca 0.87) | Abuse perpetration (modified Conflict Tactics Scale) (NTR) |
| Jaycox <i>et al.</i> 2006 ⁴⁵ | Break the Cycle | Researcher-constructed instrument (NTR) | New scale developed from existing Prescribed Norms Scale and Approval of Retaliation Scale | Reported intervention: developed for survey (NTR) Revised Conflict Tactics Scale (NTR) | Women's Experience of Battering Scale (modified) (Ca 0.93) |
| Wolfe <i>et al.</i> 2009 ⁵⁰ | Fourth R | | Proxy for acculturation (Ca 0.81) | | Conflict in Adolescent Dating Relationships Inventory; National Longitudinal Survey of Children and Youth Delinquent Behavior (NTR) |
| Macgowan 1997 ⁶⁵ | No specific title | Researcher designed tool: internal consistency reported and OK – no other measures reported | | | |
| Pacifici <i>et al.</i> 2001 ⁴⁶ | No specific title | | The Sexual Attitude Survey: an existing tool, adapted extensively. Subject to psychometric testing during the study | | |
| Foshee <i>et al.</i> 2012 ⁵³ | Families for Safe Dates | Scales constructed and tested for the study | | | |

| Study details | Measures | | |
|---|--|-----------------------|---|
| | Programme | Knowledge | Attitude/belief |
| Author/date | | | Reported behaviour |
| Avery-Leaf <i>et al.</i> 1997 ⁴³ | No specific title | | The Modified Conflict Tactics Scale (Ca 0.83, 0.79 for subscales; test/retest 0.59, 0.57) |
| Foshee <i>et al.</i> 1998 ⁵⁴ | Safe Dates: all scales developed for project | Awareness of services | Help-seeking: two questions Psychological abuse victimisation (Ca 0.91) |
| Foshee <i>et al.</i> 2000 ⁵⁵ | Safe Dates: 1-year follow-up | | Conflict management Non-sexual violence victimisation Communication skills Sexual violence victimisation |
| | | | Response to anger Psychological abuse perpetration (Ca 0.88) |
| | | | All Ca over 0.69 Non-sexual and sexual violence perpetration |
| Foshee <i>et al.</i> 2004 ⁵² | Safe Dates + booster; 4 years | | Psychological abuse perpetration (Ca 0.88) |
| Foshee <i>et al.</i> 2005 ⁵¹ | Safe Dates: 4 years' individual analysis | | Non-sexual and sexual violence perpetration Psychological abuse victimisation (Ca 0.91) |
| | | | Non-sexual violence victimisation Sexual violence victimisation |

continued

TABLE 11 Outcomes measures used in controlled studies (continued)

| Study details | | Measures | | | |
|---|--|---------------------------------------|----------------------|---|---|
| Author/date | Programme | Knowledge | Attitude/belief | Reported behaviour | Incidence |
| Taylor <i>et al.</i> 2013 ⁴⁷ | Shifting Boundaries All adapted for this study from other measures developed by the team previously | DV knowledge (Ca 0.66, 0.77, 0.80) | | Behavioural intentions (all Ca 0.75) | Sexual harassment victimisation and perpetration (all Ca over 0.80) |
| Taylor <i>et al.</i> 2010 ⁴⁸ | No specific programme title All adapted for this study from other measures developed by the team previously | | Attitudes towards DV | | Sexual and physical violence victimisation and perpetration (all except one over Ca 0.70) |
| Taylor <i>et al.</i> 2010 ⁴⁹ | Gender differences in Taylor 2010 ⁴⁸ | | | | CDC's Youth Risk Behavior Survey (victimisation and perpetration) |

Ca, Cronbach's alpha; CDC, Centre for Disease Control; DV, domestic violence; NTR, no test data reported.

TABLE 12 Measures used by study: cohort and case-control studies

| Measures | | | | Incidence |
|--|--|--|--|--|
| Author/date | Programme | Knowledge | Attitude/belief | |
| Bell and Stanley 2006 ⁵⁷ | Healthy Relationships | Project-specific survey at baseline, post intervention and follow-up (no details of validity/reliability checks) | Project-specific survey post intervention: again at 1 year (but only views of the programme reported) | |
| Weisz and Black 2001 ⁶³ | Reaching and Teaching Teens to Stop Violence | Researcher adapted tool, from Knowledge of Sexual Assault tool at baseline, post intervention, 6 months | Researcher adapted tool, from Rape Attitude Scale, Youth Dating Survey, Teen Life Relationship Questionnaire at baseline, post intervention, 6 months | Student victimisation and perpetration during the previous 6 months (not reported in this paper) |
| Hilton <i>et al.</i> 1998 ⁷⁰ | Antiviolence Education in High Schools | Researcher designed tool: no evidence of testing | Tool adapted from Goodchilds <i>et al.</i> ⁷² 1988: Ca 0.84 | Tool developed from a range of instruments including Conflict Tactics Scale, Koss and Oros 1982 ⁷³ and others: testing for this population not noted |
| Gardner and Boellaard 2007 ⁶⁰ | Connections: Relationship and Marriage | Not measured | Rosenberg Self-Esteem Scale. Reliability and validity reported | Simple yes/no questions |
| Belknap <i>et al.</i> 2013 ⁵⁹ | Theatre Intervention to prevent teen dating violence | Not measured | Ethnic Identity/Teen Acceptance of Couple survey; Self-Efficacy/Teen Conflict survey; Violent Intentions/Teen Conflict survey. Internal consistency reported | (Scales relevant to topic of this review) Conflict Tactics Scale; Communication with Parents; Resisting Sexual Pressure; Family Adaptability and Cohesion Evaluation Scales. Reliability scores reported for all |
| Black <i>et al.</i> 2012 ⁶¹ | Dating Violence Prevention Project | | Reflective essay 2 weeks after session | Researcher developed yes/no survey – no testing reported |
| Elias-Lambert <i>et al.</i> 2010 ⁶⁸ | | | Attitudes about Aggression in Dating Situations (short version): reliability assessed | Personal Safety Survey. Internal consistency reported |
| | | | Satisfaction scale devised by authors – no evidence of testing | Conflict Tactics Scale: 'widely used' |

continued

TABLE 12 Measures used by study: cohort and case-control studies (continued)

| Author/date | Programme | Measures | | |
|--|--|--|--|---|
| | | Knowledge | Attitude/belief | Reported behaviour |
| Jaffe <i>et al.</i> 1992 ⁶⁴ | No specific title | | | London Family Court Clinic Questionnaire on Violence in Intimate Relationships. Designed by authors. Not subject to any testing |
| Wai Wan and Bateman 2007 ⁵⁸ | No specific title | Relationship Behaviour Questionnaire. Developed specifically to measure the components of the study. Tested for face validity only | | |
| Wolfe <i>et al.</i> 2012 ³⁶ | Fourth R | | | Specific and global peer-resistance responses in a role-play coded by observers blind to group allocation |
| Lavoie <i>et al.</i> 1995 ⁶⁷ | Prevention programme for Violence in Teen Dating Relationships | Researcher-developed tool. Internal consistency of the 17 attitude questions assessed for internal consistency but not for validity/reliability. Nine knowledge questions | | |
| Krajewski <i>et al.</i> 1996 ⁶⁹ | Skills for Violence-Free Relationships | Skills for Violence-Free Relationships Inventory. Content validity, reliability and validity tested | | |
| Miller <i>et al.</i> 2014 ⁶⁶ | Coaching Boys into Men (CBIM) | <ul style="list-style-type: none"> Internal consistency measured for all and good: Attitudes disapproving of violence against females: existing survey Composite of Gender-Equitable Norms Scale, Gender-Equitable Men Scale and United States CBIM Program Intentions to intervene when witnessing abusive behaviours: from original Miller study | Positive and Negative Bystander Intervention Behaviors: from original Miller study ⁴⁴ | Sexual violence perpetration Overall abuse perpetration |
| Katz <i>et al.</i> 2011 ⁶² | Mentors in Violence Prevention | The Student Perceptions of Wrongfulness Scale. Developed for programme. Approximately 50% of variance explained: two subscales used with good internal consistency | | Student Self-Report of Taking Action. Developed for programme. Approximately 50% of variance explained: two subscales used with good internal consistency |

Ca, Cronbach's alpha.

Nature of the interventions for all studies/programmes

Tables 13 and 14 list the interventions used in the studies by study type, and programme.

All included programmes, except Families for Safe Dates,⁵³ were school based. The programme components varied widely. The minimum contact time was three 35-minute sessions⁵⁸ and the maximum was 21 classroom sessions, totalling 28 hours (Fourth R⁵⁶). In the latter case, the programme also included material on substance abuse and sexual health. Most used a mixture of techniques, ranging from taught sessions and/or discussion groups to role-play. A number explicitly stated that they used audio-visual aids as part of their programme (see Table 14), but others did not specify the detailed components of their programme. In two, theatre was the main vehicle for the programme delivery.^{57,59} In the case of the Healthy Relationships programme evaluated by Bell and Stanley,⁵⁷ the theatre performance was developed and delivered by a professional theatre company, after extensive engagement with teaching and health staff from the school and local youth and health services. The programme evaluated by Belknap *et al.*⁵⁹ was explicitly based on the theory and underpinning philosophy of the Theatre of the Oppressed, and the play was informed by extensive local engagement with young people living in the local Latino/a community in prior qualitative research. The play was developed with and performed by undergraduate students and a professional theatre director. Foshee *et al.*⁵⁴ noted that their programme included a theatre production performed by peers, but did not provide any further details of this.

Three programmes made explicit reference to bystander theory.^{44,62,66} In the case of the 'Coaching Boys into Men' programme,^{44,66} this was translated as sessions delivered by coaches to the athletes they were training which aimed to provide examples of respected authority figures advocating positive behaviours, including bystander interventions. 'Mentors in Violence Prevention'⁶² was delivered through trained peer mentors. In the only non-school intervention, 'Families for Safe Dates',⁵³ the programme was delivered by regular mailings of information and activities to families, along with reinforcement telephone calls. Details of the diversity and nature of the programme interventions, where these were supplied, are given in Tables 13 and 14.

Of the programmes where the professional delivering the programme was mentioned, seven were delivered by teachers. The 'Coaching Boys into Men' programme involved school sports coaches in the USA⁴⁴ and India.⁶⁶ Three programmes explicitly involved young people in designing and/or delivering the programme.^{45,54,62} A range of external volunteers and professionals, including counsellors, lawyers and police officers, were involved in delivering other programmes (see Tables 13 and 14).

Training for staff involved ranged from 60 minutes⁴⁴ to 12 days over 4 months.⁶⁶ These extremes were both associated with the same programme, 'Coaching Boys into Men'. In the former case, the programme was developed in the USA. However, the authors found that when they tried to translate the programme to India, they first had to deal with the negative attitudes of the coaches they wanted to use as role models. The 9-day training and education sessions held over 4 months to train the coaches in implementing the programme followed an initial 3-day workshop that was designed to address gender norms and attitudes. This illustrates the problems of assuming that those teaching or running programmes to reduce interpersonal violence hold the same views as those designing and implementing the programme.

Black *et al.* noted that those running their programme met regularly with the programme designers to discuss progress and possible blocks and barriers to fidelity.^{61,63,68}

Nine of the 20 included programmes identified various kinds of school- or community-level activities aimed at supporting the core programme.^{45,50-52,54-58,62,64,65,69} These ranged from providing a counselling service for those affected by the programme to a wide range of school and community activities.

TABLE 13 Components of interventions and associated activities: controlled trials

| Lead author | Programme | Main intervention | Direct associated interventions | Indirect associated interventions |
|--|---|---|--|--|
| Miller <i>et al.</i> 2012 ⁴⁴ | Coaching Boys into Men | Coaches discuss 11 key messages in 10–15-minute sessions over about 12 weeks in sports training sessions | 60-minute training for coaches, biweekly contact with advocates plus completion of tracking sheets | |
| Jaycox <i>et al.</i> 2006 ⁴⁵ | Break the Cycle | 3 hours over 3 days of programme, run by lawyers who were activists in the area of DV | Young people help to develop the programme | Broader 'Break the Cycle' programme that includes legal support, advocacy, peer leadership and so on |
| Wolfe <i>et al.</i> 2009 ⁵⁰ (see also Wolfe <i>et al.</i> 2012 ⁵⁶) | Fourth R | 21-lesson curriculum: 28 hours. Detailed lesson plans, videos | Teachers with 6 hours additional training | Parent information and four newsletters to parents |
| Pacifici <i>et al.</i> 2001 ⁴⁶ | No specific title | Three 80-minute sessions plus time to view a video | School manual with advice on extended activities | |
| Foshee <i>et al.</i> 2012 ⁵³ | Families for Safe Dates | Leaflets sent out to parents x 6 ('full treatment' group) | Six teachers over two schools. All teachers given 2-hour orientation | |
| Avery-Leaf <i>et al.</i> 1997 ⁴³ | No specific title | Five-session curriculum | Follow-up telephone calls x 6 ('full treatment' group) | |
| Foshee <i>et al.</i> 1998 ⁵⁴ | Safe Dates | 10 sessions of 45 minutes | 8 hours' training for health teachers | Alongside multilevel community intervention, including 20 workshops to community service providers, and weekly support group for victims of partner violence |
| Foshee <i>et al.</i> 2000 ⁵⁵ | Safe Dates: 1-year follow-up | | | |
| Foshee <i>et al.</i> 2004 ⁵² | Safe Dates + booster; 4 years | | | |
| Foshee <i>et al.</i> 2005 ⁵¹ | 'Safe Dates': 4 years' individual analysis | | | |
| Taylor <i>et al.</i> 2013 ⁴⁷ | Shifting Boundaries | Classroom: six sessions over 6–10 weeks. Building: creating building restraining orders, poster, hotspot mapping by students | Training for school personnel (no details regarding the training) | |
| Taylor <i>et al.</i> 2010 ⁴⁸ | No title | Five classroom periods of 40 minutes each | Training for those delivering the programme | |
| Taylor <i>et al.</i> 2010 ⁴⁹ | Gender differences in Taylor <i>et al.</i> 2010 ⁴⁸ | | | |

DV, domestic violence.

TABLE 14 Components of interventions and associated activities: cohort and case-control studies

| Lead author | Programme | Main intervention | Direct associated interventions | Indirect associated interventions |
|--|--|---|---|---|
| Bell and Stanley 2006 ⁵⁷ | Healthy Relationships | School-based theatre play plus six workshops | | Community support services for women and perpetrator services for men |
| Weisz and Black 2001 ⁶³ | Reaching and Teaching Teens to Stop Violence | 12 1.5-hour sessions. Two cotrainers per course (from rape counselling centre) | Weekly meetings of cotrainers | |
| Hilton <i>et al.</i> 1998 ⁷⁰ | Antiviolence Education | 1-hour fact-giving assembly with sessions from two counsellors with relevant expertise, the study lead author and a police officer. Then two 1-hour workshops selected from six available. Content of workshops up to presenters, but they were told the focus was explicitly on knowledge and not on attitudes | Annotated list of sources of help and counsellors/referrals available for individuals if needed | |
| Macgowan 1997 ⁶⁵ | No specific title | Five 1-hour sessions over 5 days. Developed by domestic violence team. Presented by five teachers | Five teachers. Daily checklist for them. 3-hour training for the teachers. Volunteer worked closely with teachers. Follow-up counselling to students by external family and victim services | Parent orientation 1 week prior to implementation |
| Gardner and Boellard 2007 ⁶⁰ | Connections: Relationships and Family | 15 1-hour sessions plus a student workbook. Four units: personality (three lessons), relationships (three lessons), communication (two lessons), marriage (seven lessons) | | |
| Belknap <i>et al.</i> 2013 ⁵⁹ | Theatre intervention to prevent teen dating violence | School based: two plays (four actors and the director) and a talkback session | Intervention developed through prior qualitative work, iterative process of development | |
| Black <i>et al.</i> 2012 ⁶¹ | Dating Violence and Sexual Assault | 10–12 50-minute weekly sessions. Mix of same-gender and mixed-gender programmes (same gender all in one school; mixed gender all in the other school) | All facilitators had 8 hours' training | |
| Elias-Lambert <i>et al.</i> 2010 ⁶⁸ | | | Facilitators met every 2 weeks with project director | |
| Jaffe <i>et al.</i> 1992 ⁶⁴ | No specific title | Range of different audio visual and external experts used (different content in different schools). Two schools half day, two schools full day | School-based committee in each school planned auditorium presentation and classroom discussion | Wider programme targeted administrative people, teachers and parents |

continued

TABLE 14 Components of interventions and associated activities: cohort and case-control studies (continued)

| Lead author | Programme | Main intervention | Direct associated interventions | Indirect associated interventions |
|---|--|--|---|---|
| Wai Wan and Bateman 2007 ³⁸ | No specific title | Three 35-minute sessions (constrained by national curriculum requirements). Mix of information giving, video, general and case-based discussion and small-group work | Domestic violence and intimate personal violence training for teachers. Material selected with teachers | Support network offering counselling, helpline numbers, internet support services |
| Wolfe <i>et al.</i> 2012, ⁵⁶ Canada (see also Wolfe <i>et al.</i> 2009 ⁵⁰) | Fourth R | 21-lesson curriculum: 28 hours | Teachers had 6 hours' additional training | Parent information and four newsletters to parents, detailed lesson plans, videos, school manual with advice on extended activities |
| Levoie <i>et al.</i> 1995 ⁶⁷ | Prevention programme for violence in teen dating relationships | Short: two classroom sessions (total 2–2.5 hours). Long: two more sessions (added 2–2.5 hours). Provided by one volunteer and one paid staff member from a community organisation | Detailed written programme guide | |
| Krajewski <i>et al.</i> 1996 ⁶⁹ | Skills for Violence-Free Relationships | Team teaching by teacher and battered women's counsellor of 10 consecutive health education class meetings (2 weeks) | Day-long training session by director of shelter | Counsellor available to provide support for children who identified a need for this |
| Miller <i>et al.</i> 2014 ⁶⁶ | Coaching Boys into Men | Coaches discussed 12 key messages with male students who were cricket players in 45–60-minute sessions over 4 months in sports training sessions | Extensive pre-study work with coaches to address their negative attitudes. Biweekly workshops with them over 4 months (9 additional days) | |
| Katz <i>et al.</i> 2011 ⁶² | MVP | Ongoing iterative programme. MVP peer mentors/leaders chosen to closely mirror the ethnic and racial composition of the entire student body Number of mentoring sessions or other related activities not stated | Participation in leadership training that consists of a variety of topics, such as group facilitation skills; dating violence prevention, bullying and harassment awareness; awareness of harassment and targeting of gay, lesbian and transgendered students; role-play activities; and a review of the MVP playbook's structure and content. Around 16–20 hours of training and instruction in MVP prior to facilitating mentoring sessions with groups of younger students | Associated activities mentioned, but no details given. No details of contents of 'MVP playbook' |

MVP, Mentors in Violence Prevention.

Theories underpinning the included studies

Table 15 sets out the explicit/implicit theory(ies) underpinning the reported intervention/programme design, based on the reports of the intervention/programme that was delivered. We were unable to obtain permission to reproduce the logic models developed for various interventions in this report, with the exception of that of Foshee *et al.*,⁵⁴ which is included in Appendix 9. This section discusses the nature of the logic models of the three programmes that included such models in their papers.^{44,49,51,54,66}

TABLE 15 Programme theories implicit or explicit in the included programmes (all programme types)

| Lead author and year | Ontological theory (= implicit) | Hypothesised mechanism of change (= implicit) |
|--|---|--|
| Controlled studies | | |
| Miller <i>et al.</i> 2012 ⁴⁴ | Social norms (gender norms) | Behavioural change theory |
| Jaycox <i>et al.</i> 2006 ⁴⁵ | Social norms theory | Social learning theory/(social justice theory) |
| Wolfe <i>et al.</i> 2009 ⁵⁰ | (Social norms) gender theory | Social cognitive theory |
| Pacifici <i>et al.</i> 2001 ⁴⁶ | (Social norms theory) | Social interaction theory |
| Foshee <i>et al.</i> 2012 ⁵³ | Social norms (gender norms) | Social ecological theory; protection/motivation |
| Avery-Leaf <i>et al.</i> 1997 ⁴³ | (Social norms) feminist theory, gender norms, power and equity issues | Not apparent |
| Foshee <i>et al.</i> 1998 ⁵⁴ | Social norms, gender theory | Social learning theory |
| Foshee <i>et al.</i> 2000 ⁵⁵ | Not apparent | Not apparent |
| Foshee <i>et al.</i> 2004 ⁵² | Not apparent | Not apparent |
| Foshee <i>et al.</i> 2005 ⁵¹ | Not apparent | Not apparent |
| Taylor <i>et al.</i> 2013 ⁴⁷ | Not apparent | Theory of reasoned action/(social ecological theory) |
| Taylor <i>et al.</i> 2010 ⁴⁸ | Not apparent | Theory of reasoned action |
| Taylor <i>et al.</i> 2010 ⁴⁹ | Not apparent | Theory of reasoned action |
| Cohort and case-control studies | | |
| Bell and Stanley 2006 ⁵⁷ | Relationship/gender theory | Not apparent |
| Weisz and Black 2001 ⁶³ | Relationship/gender theory | (Behavioural change theory) |
| Hilton <i>et al.</i> 1998 ⁷⁰ | Not apparent | (Resources-based theory of change) |
| Macgowan 1997 ⁶⁵ | Not apparent | (Behavioural change theory) |
| Gardner and Boellaard 2007 ⁶⁰ | Relationship theory/self-esteem | (Emancipatory theory of change) |
| Belknap <i>et al.</i> 2013 ⁵⁹ | (Social norms/power and oppression?) | (Emancipatory theory of change) |
| Black <i>et al.</i> 2012 ⁶¹ | Gender theory (social norms) | Not apparent |
| Elias-Lambert <i>et al.</i> 2010 ⁶⁸ | Not apparent | Not apparent |
| Jaffe <i>et al.</i> 1992 ⁶⁴ | Not apparent | Behavioural change theory |
| Wai Wan and Bateman 2007 ⁵⁸ | Not apparent | (Behavioural change theory?) |
| Wolfe <i>et al.</i> 2012 ⁵⁶ | (Gender theory; social norms) | Social cognitive theory |
| Lavoie <i>et al.</i> 1995 ⁶⁷ | Not apparent | (Behavioural change theory) |
| Krajewski <i>et al.</i> 1996 ⁶⁹ | Gender theory (social norms) | Behavioural change theory |
| Miller <i>et al.</i> 2014 ⁶⁶ | Gender theory (social norms) | Behavioural change theory |
| Katz <i>et al.</i> 2011 ⁶² | (Social/gender) (peer) norms theory | Social justice theory |

Generally, programme theories included some version of behavioural change, with the intention being to change knowledge and/or attitudes towards specific social norms (usually, but not always, gender norms) with the assumption that this would change behavioural intention, and, eventually, actual behaviour, with a resulting effect on the incidence of perpetration and/or victimisation. As noted above, many of the programmes used a mix of methods, including didactic teaching, theatre, videos and discussion groups. The programmes that used more explicitly affective techniques, such as role-play and theatre, seemed to regard the mechanism of retained knowledge, improved attitude and consequent behavioural change as being more likely to be enacted through an increase in young people's emotional and empathic engagement with the material and/or through increasing self-esteem and relationships skill building than through the simple transfer of knowledge.

The authors of three programmes (four papers) provided logic models to explain the hypothesised causal relationships in their programme design.^{44,48,51,54} Both Foshee *et al.*'s and Miller *et al.*'s models altered between their earlier and later papers. In the case of Foshee *et al.*'s model, two hypothesised mechanisms that might underpin the intended outcome of reduced perpetration and/or victimisation appear in both models: belief in the need for help, and awareness of services. Interestingly, however, the arguably more direct potential mechanism of active help-seeking found in the 1998 version (see *Appendix 9*) was removed in the 2005 paper. The other element that disappeared was additional community activities (a form of whole-system approach to solving the wider problem of the local environment in which abuse occurs). In both cases, the fundamental mechanisms of change hypothesised are changes in gender norms and in stereotyping attitudes and increases in conflict management skills.

The models in the two Miller *et al.* papers^{44,66} are fundamentally the same, and both suggest that the mechanism that might improve outcomes is male athletes' responses to role modelling by respected coaches. This mechanism of change is hypothesised to influence uptake of knowledge and changes in awareness and gender norms, and to alter bystander behaviour. The nature of the assumptions about triggers that create the mechanisms of change embodied in the coaches is made more transparent by the additional elements added to the logic models for the extension of the 'Coaching Boys into Men' programme from the USA to India.⁶⁶ This required an additional component to explain how the coaches needed to be trained/reorientated towards gender-positive approaches, and how this also necessitated environmental and organisational support. The recognition of the need for a wider community-level intervention contrasts with the removal of this component from Foshee *et al.*'s logic model over time. The new precursor component in the later Miller *et al.* model⁶⁶ is framed around a notion of 'positive deviancy' as an explanatory framework for what was required from the coaches if they were to become agents of change. This provides a useful insight into the epistemological and ontological basis of the Miller model that is not so apparent in the other logic models or programme theories in this review.

Taylor *et al.*, in 2010⁴⁸ and 2013,⁴⁷ hypothesised (and tested) the effectiveness of programmes based on two different logic models. One was an approach based on affective change, through interactive encounters and the building of interpersonal skills. It was theorised that this would trigger mechanisms in students that would change beliefs and attitudes (presumably making students less likely to stereotype and belittle those who they have come to understand and empathise with through the programme) and, thus, decrease the will to abusive behaviour for these students. The other arm of the logic model hypothesised that exposure to facts about the law and justice would increase knowledge (both about those who might be subject to violence, and about the legal consequences of perpetrating such violence) and, therefore, create intellectual disincentives to perpetration.

Outcomes in the included studies

The findings in this chapter demonstrate that a wide range of programmes and interventions to reduce relationship violence have been developed and tested for young people over the age of 10 years in the general population. We did not locate any formal research examining programmes for children under the age of 10 years.

The quality of the studies using randomised designs was generally higher than those using other designs. The conclusions drawn from these studies were also more conservative. However, even the randomised studies demonstrated a range of design and analysis issues that served to limit the generalisability of their results. These limitations led to authors making claims for findings that were statistically significant in a formal sense, but, in many cases, these findings were based on very small effect sizes, and/or resulted from multiple testing with a lack of control for the risk of type 1 errors arising from this.

Study findings that do not reach a chosen level of statistical significance may be interesting if there are sufficiently large differences between intervention and control groups in important variables to justify investment in larger studies to test the finding more definitively. In this situation, the findings become hypotheses generating for future research, rather than guides for roll-out to practice. Equally, findings of statistical significance do not necessarily mean that the outcomes are large enough or relevant enough to be meaningful in everyday practice. For this review we wanted to identify findings that might justify investment in roll-out of one or more of the programmes that had been tested. Owing to very large resource implications of such a roll-out, and the large number of analyses carried out in most papers (totalling many hundreds across the whole set of included studies), only findings that reach $p \leq 0.01$ have been reported in this review.

As can be seen in *Table 16*, only a handful of analyses reached this level: 27 of those assessed immediately after the intervention, 15 that were assessed between 1 and 6 months, and around 18 at 4 years or more after the intervention. Most effect sizes were small or very small and, as noted in discussions above about the baseline characteristics of the participants included in the reviewed studies, five papers reported large SDs around the means or large CIs, suggesting that a small proportion of the whole population was skewing the findings.

This finding is important, as it could be interpreted as suggesting that programmes targeted at whole populations might not be the most effective use of resources. Targeted programmes might achieve more change at lower cost. However, balanced against this is the need to identify individuals at highest risk and to ensure that they take part in interventions and are not stigmatised for doing so. The evidence from the included studies that those who drop out of general population programmes are, in general, those who are likely to be less prosocial suggests that these programmes might be good at screening for such at-risk individuals, but may not be the most appropriate approach for those who are most in need of effective interventions.

Most effects in the included studies were in elements hypothesised by the behavioural change model as being intervening variables between the programme interventions and the adverse outcome of victimisation and perpetration. The biggest effect sizes were found in levels of knowledge. In most cases, the knowledge differences between intervention and control groups, or between baseline and follow-up, were most evident immediately after the intervention and up to 6 months later. Knowledge is important in itself, as long as it is sustained over time, but the general lack of strong association between knowledge, attitudes, behaviour and incidence of perpetration/victimisation in the included studies raises a question about the efficacy of the behavioural change model that underpins the programme philosophies in many of the programmes and interventions. The only study that specifically looked for causative process variables⁵¹ found that conflict management skills and belief in a need for help were associated with at least some of the perpetration and victimisation variables assessed. However, the associations did not always reach significance, and there are problems with the data analysis approach in this paper (and particularly with how the large number of missing data were handled), as noted above. Indeed, in the original analysis of the Safe Dates data,⁵⁴ knowledge of services and help-seeking showed large increases immediately post intervention, but while knowledge about services persisted up to 6 months, help-seeking did not.⁵⁵

TABLE 16 Statistically significant effects on outcomes for the whole sample

| Author, date and country | Title | Study quality score | Up to 1 month | Over 1 month to 5 months | 6 months to 1 year | Over 1 year | Comment |
|---|-------------------------|---------------------|--|--------------------------|----------------------------------|-------------|---|
| Miller <i>et al.</i> 2012, USA ⁴⁴ | Coaching Boys into Men | A/B | | | | | Boys only: see Table 17 for gender analysis |
| Jaycox <i>et al.</i> 2006, USA ⁴⁵ | Break the Cycle | B | K ^a A ^a B ^a | K ^a | K ^a B ^a | | Only one effect persists across all groups: <i>knowledge about and seeking help from a lawyer</i> In terms of subgroup analysis, proficiency with English and help-seeking was associated with help-seeking from doctors and nurses, but only nurse help-seeking showed a greater than one unit change |
| Wolfe <i>et al.</i> 2009, Canada ⁵⁰ | Fourth R | B | | | (I) 2.5 years ^a | | Overall difference in self-reported PDV 2.4 but the 95% CI was 1.00 to 6.02. For students who dated in last 12 months no significant difference overall |
| Pacifici <i>et al.</i> 2000, USA ⁴⁶ | None | B | | | | | No effects for overall sample |
| Foshee <i>et al.</i> 2012, USA ⁵³ | Families for Safe Dates | B | | K A B I | | | All ES except one Cohen's <i>d</i> < 0.5. One large effect [for (lack of) caregiver acceptance of dating violence – OR 4.95 (95% CI 2.53 to 9.68)] |
| Avery-Leaf <i>et al.</i> 1997, Canada ⁴³ | None | C/D (pilot) | A | | | | Mean change 0.56/715 and 1.05/?15 for male–female and female–male aggression, respectively |
| Foshee <i>et al.</i> 1998, USA ⁵⁴ | Safe Dates | B | K A I | | | | The mean differences on A and I are small (e.g. on psychological abuse = 0.17/3). Knowledge of services and help-seeking behaviour much higher (difference of around 50% absolute increase) |

| Author, date and country | Title | Study quality score | Up to 1 month | Over 1 month to 5 months | 6 months to 1 year | Over 1 year | Comment |
|--|---------------------|---------------------|---------------|--------------------------|---|---|--|
| Foshee <i>et al.</i> 2000, USA ⁵⁵ | | | | | K 6 months A 12 months | | Apart from knowledge about services, no other differences over 0.32/3. The two biggest differences are owing to worsening scores in the control group from baseline |
| Foshee <i>et al.</i> 2004, USA (booster) ⁵² | | | | | | | Group without booster compared with baseline: perpetration physical (-1.11; SE 0.49 acts); serious physical (-0.42; SE 0.46 acts), sexual violence (-0.10; SD 0.05 acts). Victimization for serious physical violence -0.45 (0.20); for victim sexual violence -0.28 (0.08) = any acts ever perpetrated/experienced |
| Foshee <i>et al.</i> 2005, USA ⁵¹ | | | | | | K 4 years' knowledge of services A 4 years B 4 years I 4 years | Reanalysis of previous data so hard to assess the size of effect. Main reductions ($p < 0.01$ used here owing to multiple testing) psychological perpetration: -0.95 (-1.48, -0.41 intercept 0.80) and moderate physical victimisation: -0.49 (-0.86, -0.11 intercept -0.69). All five attitude/knowledge mediators together do not affect the outcomes. When added in separately, conflict management skills and belief in need for help seem to have the clearest (but not always statistically significant) effect on most of the perpetration and victimisation variables |
| Taylor <i>et al.</i> 2013, USA ⁴⁷ | Shifting Boundaries | B | | | I 6 months -I for prevalence of general sexual harassment (that got worse) | | Building-only intervention: prevalence of dating violence victimisation down (OR 0.498, SE 0.12) and frequency of dating violence victimisation (OR 0.474, SE 0.13) Meaning of 50% reduction in OR impossible to calculate without raw frequency data |

continued

TABLE 16 Statistically significant effects on outcomes for the whole sample (continued)

| Author, date and country | Title | Study quality score | Up to 1 month | Over 1 month to 5 months | 6 months to 1 year | Over 1 year | Comment |
|---|--|---------------------|----------------|--------------------------|--------------------------|-------------|--|
| Taylor <i>et al.</i> 2010, USA ⁴⁸ | None | B | K ^a | | K 6 months A 6 months | | Increase in perpetrating all types of violence (intervention groups combined): 0.068 (0.025) |
| Taylor <i>et al.</i> 2010, USA ⁴⁹ | | | - ^b | | | | Gender differences in code 71 examined – see Table 17 for gender analysis |
| Bell and Stanley 2006, UK ⁵⁷ | Healthy Relationships | C (pilot) | K | | | | |
| Weisz and Black 2001, USA ⁶³ | Reaching and Teaching Teens | D | | | K 6 months | | Increase in knowledge less than 1.3/17 difference |
| Hilton <i>et al.</i> 1998, Canada ⁷⁰ | Antiviolence education | C | K | K 6 weeks | | | All mean changes less than 0.3/3 |
| Macgowan 1997, USA ⁶⁵ | None | C | K ^a | | | | All significant mean differences after intervention less than 11% of total measure. Some much smaller |
| Gardner and Boelland 2007, Canada ⁶⁰ | Connections: Relationship and Marriage | C/D | A ^a | | | I 4 years | Reported episodes of violence in last two months but difference very small (just less than 0.5/36 units vs. just more than 0.5/36 units) and only at $p = 0.03$ and multiple testing |
| Belknap <i>et al.</i> 2013, USA ⁵⁹ | None | B/C | A | | | | Change in attitudes in terms of accepting couple violence (6.8 vs. 6.4/24); in self-efficacy (18.1 vs. 19.6/25); in violent intentions (19.9 vs. 21.5/32) |
| Black <i>et al.</i> 2012, USA ⁶¹ | Dating Violence Prevention | C | B | | | | See analysis of gender effect in Table 17 |

| Author, date and country | Title | Study quality score | Up to 1 month | Over 1 month to 5 months | 6 months to 1 year | Over 1 year | Comment |
|---|-----------------------------------|---------------------|---------------|--------------------------|--------------------|-------------|--|
| Elias-Lambert <i>et al.</i> 2010, USA ⁶⁸ | | B for survey | | | | | See analysis of gender effect in <i>Table 17</i> |
| Jaffe <i>et al.</i> 1992, Canada ⁶⁴ | None | C/D | A | -A | | | Immediately post intervention: positive change in 11 out of 48 attitude scores: SE not given Six weeks' post intervention, negative change in 6 out of 48 attitude items. See <i>Table 17</i> for gender analysis |
| Wai Wan and Bateman 2007, UK ⁵⁸ | None | C | K | | | | Control group improved on one out of eight knowledge items post test. Intervention group improved on three out of eight knowledge items (biggest difference 35%, from 36% to 71% correct). See <i>Table 17</i> for gender analysis |
| Wolfe <i>et al.</i> 2012, Canada ⁵⁶ | Fourth R | A/B | | B 3 months | | | At 3 months: behaviour on role-play – intervention group as a whole more likely to use delay tactics (34% more used these). This was not associated with changes in perpetration in the 2 years after the main study |
| Lavoie <i>et al.</i> 1995, Canada ⁶⁷ | Prevention Programme for Violence | B/C | K | | | | See <i>Table 17</i> for gender analysis |
| | | | A | | | | A at 1 month. Differences very small (total available not given) 0.01 girls/boys in short; 0.10 girls/boys in long: biggest absolute difference girls pre–post in long = 0.39). Short-course students improved attitudes more than long-course students. Knowledge improved on 4 out of 25 items for both genders in both short and long courses (four same items, two different) |
| | | | | | | | See <i>Table 17</i> for gender analysis |

continued

TABLE 16 Statistically significant effects on outcomes for the whole sample (continued)

| Author, date and country | Title | Study quality score | Up to 1 month | Over 1 month to 5 months | 6 months to 1 year | Over 1 year | Comment |
|---|---------------------------------------|---------------------|---------------|--------------------------|--------------------|-------------|---|
| Krajewski <i>et al.</i> 1996, USA ⁶⁹ | Skills for Violence-Free Relationship | B | K | | | | ES not clear |
| Miller 2014, India ⁶⁶ | Coaching Boys into Men | B | A | | | | See Table 17 for gender analysis Single-gender intervention |
| Katz <i>et al.</i> 2011, USA ⁶² | Mentors in Violence Prevention | A/B | | A | | | See Table 17 for gender analysis 3 months after final session (9 years after programme inception): difference in attitude for all respondents on 2 of 2 measures, (difference in means of 0.45/5 and 1.1/5 for whole school including mentors: 0.42/5 and 1.08/5 for non-mentors. Difference in means for intended behaviour (intention to intervene) on 1/2 measures (most severe witnessed aggression) 0.39/5 whole school: 0.26/5 non-mentors |

A, attitudes or beliefs; B, behaviour; ES, effect size; I, incidence (perpetration and/or victimisation); K, knowledge; PDV, physical dating violence; SE, standard error.
 a Large SDs, suggesting skew in data.
 Minus sign means that the intervention was associated with worse outcomes on that specific measure.
Note on the use of colours
 Light blue, very small (< 10% of the total instrument score mean change for most variables, or Cohen's $d \leq 0.20$); dark blue, small (< 20%/Cohen's $d \leq 0.50$); light green, moderate (< 30%); and dark green, large (> 30%).

Help-seeking was also a measured outcome for the programme run by lawyers.⁴⁵ Perhaps unsurprisingly, perceived helpfulness of lawyers and help-seeking from them were both increased up to the final point of analysis (1 year). For the subgroup of those with lower levels of English proficiency in this study, help-seeking from doctors and nurses was also increased, although the size of the increase was only moderate.

For some programmes, increases in adverse outcomes are reported, suggesting that the use of one-tailed tests in some of the other included studies may have missed the opportunity to identify unintended consequences secondary to other programmes. In Taylor *et al.*'s later evaluation,⁴⁷ although the building-only intervention improved some outcomes, the prevalence of general sexual harassment increased at the 6-month post-intervention point. In the earlier Taylor *et al.* study,⁴⁸ there was an increase in reported perpetration of all violence at the 1-month point. Jaffe *et al.*⁶⁴ showed negative changes in attitude scores in 6 of 48 attitude items by 6 months post intervention.

Studies showing a moderate or greater positive influence on perpetration and/or victimisation

Three programmes reported an impact of their intervention on incidence measures. Foshee *et al.*⁵² found that, overall, those in the intervention group did better than the controls. However, the intervention subgroup who also got the booster did worse than the intervention subgroup who did not get the booster. The differences were evident in reductions in physical perpetration, serious physical perpetration, sexual violence, victimisation for serious physical violence, victim sexual violence and any acts ever perpetrated/experienced. The reanalysis of the data from their programme⁵¹ found moderate reductions in a range of perpetration and victimisation variables but, as noted above, the treatment of missing data and the use of multiple analyses might mean that these findings are confounded.

As well as finding increases in general sexual harassment, Taylor *et al.*⁴⁷ also found decreases in the prevalence of dating violence victimisation for the building-only intervention in their programme. This conflicting finding is difficult to explain, and the meaning of the finding of a 50% difference is hard to interpret, as the basic descriptive data were not given.

The only study to find a moderate difference in the incidence of perpetration of violence based on apparently robust analysis beyond the initial few months after the intervention was Wolfe *et al.*'s evaluation of the 'Fourth R' programme⁵⁰ at 2.5 years. The difference was, however, small (2.4%), and the 95% CI ranged from 1.00 to 6.02, which includes the possibility of no effect. Subanalysis by those who had dated in the last 12 months did not reveal a difference. The effects were higher for boys (see *Gender*, below) but the sample was unusual, as the incidence of reported perpetration of violence by girls was much higher than that of boys, a finding that ran completely counter to those of all of the other studies included in this review.

Do programmes work for specific groups?

Twenty-two papers examined gender effects. Subanalyses were also carried out in six papers (four programmes) for groups that were at increased risk of victimisation or perpetration at baseline.^{46,52,54,55,67,70} Only one looked for age differences by junior or senior students⁶⁴ and one subanalysed by 'advanced' level.⁶⁵ Two looked for differences in ethnicity^{52,62} and one in levels of English proficiency.⁴⁵ The results of these subanalyses are given below.

Gender

Most of the included studies found gender effects at baseline, generally (but not always) with girls having higher levels of knowledge and prosocial behaviour than boys. *Table 17* below shows the 21 studies that explicitly assessed gender effects as a result of the tested intervention and describes the differences where they are found. In two cases, no data from girls were reported: one programme was for boys only, and data for girls were not reported in the other.^{44,66}

TABLE 17 Outcomes of gender analysis

| Author, date and country | Is there a difference? | If yes, which variable(s)? | Comments/size of difference |
|--|--|---|--|
| Miller <i>et al.</i> 2012, USA ⁴⁴ | Boys only: higher vs. lower intensity sessions | Immediately post intervention: benefit for higher intensity programme – K ^a A ^a I ^a | Reported intention to intervene 0.12/5 (95% CI 0.003 to 0.24) with higher intensity 0.16/5 (95% CI 0.04 to 0.27). Recognition of abuse, with higher intensity only, 0.13/5 (95% CI 0.003 to 0.25). Reported positive bystander behaviour 0.25/9 (95% CI 0.13 to 0.38), higher intensity 0.28 (95% CI 0.14 to 0.41) |
| Jaycox <i>et al.</i> 2006, USA ⁴⁵ | N | | |
| Wolfe <i>et al.</i> 2009, Canada ⁵⁰ | Y | 2.5 years: B | 4.4% fewer boys in the intervention group reported perpetration of physical dating violence in the previous year than control group boys (7.1% vs. 2.7%) vs. 0.2% fewer girls (12.1% vs. 11.9%) – but note that the much higher rate in girls than boys in both groups is highly unusual |
| Pacifici <i>et al.</i> 2001, USA ⁴⁶ | N | | |
| Foshee <i>et al.</i> 2012, USA ⁵³ | (Y) | Immediately after six postal communications and six follow-up telephone calls A | Belief in importance of involvement in teen dating (caregivers of boys only) ($t=2.97$, $p=0.004$, Cohen's $d=0.35$) |
| Avery-Leaf <i>et al.</i> 1997, Canada ⁴³ | N | | |
| Foshee <i>et al.</i> 1998, USA ⁵⁴ | N | | |
| Foshee <i>et al.</i> 2004, USA (booster) ⁵² | N | | |
| Foshee <i>et al.</i> 2005, USA ⁵¹ | N | | |
| Bell and Stanley 2006, UK ⁵⁷ | Y | Post intervention and at 1 year A | Girls more likely to support autonomy for women than boys. Girls were more likely to have positive attitudes to violent responses when women are threatened. Other detailed analyses tend to show more prosocial attitudes for girls (SEs not always clear) |
| Weisz and Black 2001, USA ⁶³ | N | | |
| Hilton <i>et al.</i> 1998, Canada ⁷⁰ | Y | Post test and 6 weeks A ^a | Both genders very low endorsement of pro-date-rape, but worse scores at post test: back to baseline by follow-up. Boys very marginally higher (0.26/9 more endorsement) but data highly skewed |
| Maccgowan 1997, USA ⁶⁵ | Y | Post intervention K ^a A ^a | Within treatment group: knowledge change in two out of seven items (both genders and all on one: all on the other). Maximum 0.44/4. Attitudes to non-physical violence: changes in five out of seven: two for both genders and all: three for various combinations physical/sexual violence: 1/7 only boys, change of 0.20/4 |

TABLE 17 Outcomes of gender analysis (continued)

| Author, date and country | Is there a difference? | If yes, which variable(s)? | Comments/size of difference |
|---|------------------------|--|---|
| Belknap <i>et al.</i> 2013, USA ⁵⁹ | Y | Post intervention A | Males had a higher acceptance of dating violence than females, but this was only marginal: difference of 0.6/0.4 pre/post test on 12-point scale for male/female violence. Bigger difference for female/male: difference 1.7 pre, 1.0 post (/12) |
| Black <i>et al.</i> 2012, USA ⁶¹ | Y | Post intervention A | Boys in same gender group and girls in mixed groups had higher mean attitude scores post test more than their comparison group (mean difference: 5.26/40 units boys; 4/40 units girls. No other gender comparisons significant) |
| Elias-Lambert <i>et al.</i> 2012, USA ⁶⁸ | Y | Post intervention A | No difference in satisfaction by gender/gender mixed groups (this complicates the findings of Black <i>et al.</i> for the same programme, as noted above). Girls more satisfied with the programme than boys regardless of group composition (mean difference of 4/60) |
| Jaffe <i>et al.</i> 1992, Canada ⁶⁴ | Y | Post intervention and 6 weeks A -A | Size of effect not given: positive direction for 11 out of 48 items for girls and overall and 8 out of 48 items for boys. Change in negative direction for a different 8 out of 48 items for boys. Authors refer to a 'small group of male students' with 'negative attitude changes' 6 weeks post intervention, 6 out of 48 attitude items changed in negative direction from immediately post intervention: mixed effect by gender |
| Wai Wan and Bateman 2007, UK ⁵⁸ | Y | Immediately post intervention A | One out of 21 attitude items changed (25% fewer boys agreed that it was OK for a woman to hit an unfaithful man [47–22% – no significant change in girls' views (44–38%)]) |
| Wolfe <i>et al.</i> 2012, Canada ⁵⁶ | Y | 3 months after intervention: B ^a | Behaviour on role-play: intervention group more likely to use delay tactics (34% more used these) and particularly in girls (94% vs. 48%); $p < 0.01$. Girls' lower use of refusal in the intervention group (data skewed in this measure) |
| Lavoie <i>et al.</i> 1995, Canada ⁶⁷ | Y | 1 month post intervention: A | Girls scored higher than boys at all points Attitudes: the only gender difference between pre and post test: girls improved proportionally more than boys in long sessions. Differences very small (total available not given) 0.01 girls/boys in short; 0.10 girls/boys in long: biggest absolute difference girls pre–post in long = 0.39). Short course students improved attitudes more than long course students – no gender effect |
| Krajewski <i>et al.</i> 1996, USA ⁶⁹ | Y | 5 months post intervention A | Change in one of the 12 gender comparisons: girls changed more than boys in attitude between 1 week and 5 months: (SE not clear) |
| Miller <i>et al.</i> 2014, India ⁶⁸ | All-boys intervention | 1 year after intervention A | Boys' gender attitudes: mean change of 0.28 on a 5-point scale (95% CI 0.12 to 0.43). No other changes |

A, attitudes or beliefs; B, behaviour; ES, effect size; I, incidence (perpetration and/or victimisation); K, knowledge; N, no; SE, standard error; Y, yes.

a Large SDs, suggesting skew in data.

Minus sign means that the intervention was associated with worse outcomes on that specific measure.

Note on use of colours

Light blue, very small (< 10% of the total instrument score mean change for most variables, or Cohen's $d \leq 0.20$);

dark blue, small (< 20%/Cohen's $d \leq 0.50$); light green, moderate (< 30%); dark green, large (> 30%).

In 8 of the 21 studies that assessed the relative effectiveness of the intervention by gender, no such effects were found. It is of interest that, of the eight (generally moderate to high quality) controlled studies that examined gender differences, only one found a direct effect⁵⁰ and one found an indirect difference. The latter case was Families for Safe Dates, where the only gender effect was on caregivers of boys, who were more likely to see it as important to be involved in teenage relationships after the intervention.

The only controlled study that found a direct effect was that of Wolfe *et al.*⁵⁰ At 2.5 years after their trial of the 'Fourth R' programme, 4.4% fewer boys in the intervention group reported perpetration of physical dating violence in the last year than control group boys (7.1% vs. 2.7%). This was contrasted with 0.2% fewer girls (12.1% in the intervention arm vs. 11.9% in the control group). However, it is worth noting that the much higher rate of reported perpetration of physical dating violence by girls than by boys in both intervention and control groups at both time points is highly unusual, and may limit the generalisability of this finding.

In stark contrast, 11 of the 12 case-control and cohort studies that looked for them found gender differences. In most cases, multiple tests for gender were run, and very few were significant. Even when they were significant, the effect sizes were generally small, as summarised in *Table 17*. Most of the differences were in favour of girls. Some data suggested underlying complexity – for example, in two studies examining the same programme, Black *et al.*⁶¹ found that boys had better mean attitude scores than their control group peers when they were taught in same-gender groups, whereas girls had better post-test attitudes than their controls when they were taught in mixed-gender groups.

The contrast between the apparent infrequency of gender effects in the randomised studies and the almost universal findings of some kind of gender effects in the cohort and case-control data set suggests that at least some of the findings in the non-RCT group of studies could be artefacts. At the most, they suggest future possible hypotheses for testing in studies in the future.

Ethnicity

Two studies examine the effect of ethnicity on outcome.^{52,62} Neither found any differences.

Those with a history of perpetration or victimisation at baseline

As noted above, four programmes (reported in six publications) claimed either increased or decreased effects for those with/without a history of perpetration at baseline, or with otherwise antisocial/pro-relationship violence attitudes.^{46,52,54,55,67,70} Hilton *et al.*⁷⁰ examined those who reported themselves to be either victims or perpetrators and found no differences in either group in terms of pre-post-intervention changes on the variables measured for the study 6 weeks after the intervention. Pacifici *et al.*⁴⁶ analysed their data using regression techniques, and so the influence of initial status was visible in the difference in the pitch of the regressed data slopes. This was notable specifically in relation to coercive sexual attitudes for the students who scored at least two SDs above the mean at baseline. They were the only group in whom positive post-test change in this measure was deemed by the authors to be 'very large'. There was no record of how many of the 451 participants with baseline data were in this subgroup or of the actual scores before and after the intervention.

Lavoie *et al.*⁶⁷ reported their post-hoc examination of changes in their results among students with the highest and lowest scores pre test. They categorised students scoring more than one SD or more above the mean for their specific school cohort as 'high scoring', and those one SD or more below the mean as 'low scoring'. Low scorers were reported to have improved in 16 out of 17 items, with sexual violence discriminating best between the groups. However, although modelling data are given for this claim, the authors did not provide means and SDs for these items, and so it is not possible to judge the size of effect for this group.

Four papers from the 'Safe Dates' programme^{51,52,54,55} report on three subsamples: a primary prevention group (dating adolescents reporting no victimisation or perpetration of dating violence at baseline) ($n = 862$); the victim secondary prevention group who reported victimisation at baseline ($n = 438$); and the perpetrator secondary prevention subsample who reported perpetration at baseline ($n = 247$). Some in both victim and perpetrator groups reported both victimisation and perpetration. This was the only evaluation of those in this section where subanalysis of baseline scores seemed to have been planned from the outset. In the 1-month post-intervention analysis, the only finding that reached the significance level set for this review was an increase in psychological perpetration for the intervention group who had no prior history of abuse or perpetration: a negative effect of the programme. In the 24 analyses reported with either the perpetrator or the victim subset, five reached the authors' significant level of $p < 0.05$, but the effect size was small, except for awareness of services in which the absolute percentage change from baseline to post intervention for the victim group with the intervention was 55.2%, compared with the control group change of 9.8%, and for the perpetrators it was 49.6%, compared with the control group change of 0.6%.

In the Safe Dates 1-year follow-up, the authors reported no significantly different outcomes for the primary prevention group, but improvements on many of the outcomes assessed for both secondary prevention groups. Again, none of the findings reached the level of $p < 0.01$, and all except for awareness of services were very small effect sizes.

At the 'Safe Dates' 4-year follow-up point, there were statistically significant differences in physical abuse victimisation for those with moderate and high exposure at baseline, at the $p < 0.01$ level. The difference in predicted mean between those with no and average exposure was only -0.41 , but it was -1.62 for those with high baseline exposure. The difference was also at the $p < 0.01$ level for serious physical abuse for those with moderate exposure at baseline, but this difference was a very small mean of -0.05 difference from those with no exposure. The booster that was introduced at 2 years post intervention showed no benefits and some adverse effects at this point, and so is not recommended by the authors for any group.

In the reanalysis (by individual rather than by cluster) across all time points that Foshee *et al.*⁵¹ reported in 2005, there was no difference in the perpetration of psychological, physical or sexual violence by the reported rate of these prior to the intervention, by control or intervention group. However, the authors reported a strongly significant effect ($p < 0.005$) for those who, before the intervention, reported either no or average amounts of severe physical intervention. Those in these two groups who were randomised to the intervention were less likely to report severe physical violence perpetration at each time point. The size of this effect is not given for each of these subgroups, but when they are combined, the p -value given is $p < 0.04$, and the 95% CI for beta is 0.01 to 0.24, which suggests the possibility of no effect. As noted before, the means and SDs given in this paper suggest a large degree of skew in the data. The effect was not seen for those who reported the highest levels of severe physical violence prior to the intervention. The authors report no such effect for any group with specific baseline characteristics when victimisation was examined.

Given the lack of strong evidence of effect in most of the studies that examined this, the small absolute differences even in the measures that reached the most convincing level of statistical significance and the fact that most were planned as post-hoc analyses, these findings should be treated with caution as a guide to implementation. However, they offer good grounds for prospective hypothesis testing in future studies.

Age

One study, Jaffe *et al.*, addressed junior (grades 9 and 10, ages 14–15 years) versus senior students (grades 11–13, ages 16–18 years).⁶⁴ At baseline, they found only one significant difference out of 19 knowledge and attitude variables assessed: that senior level students were more likely to agree that poverty causes family violence. No other data or findings were reported for the grade-/age-differentiated groups.

Macgowan⁶⁵ also analysed his data by grade in three groups (grades 6, 7 and 8) and did not find an interaction between school grade and treatment on the outcome.

Level of achievement

As noted above, Macgowan⁶⁵ undertook analysis of students who, prior to the study, were grouped into 'regular level' and 'advanced level' according to their classroom. He did not find an effect by level between control and treatment groups but, within the treatment group, the advanced level students did better than the regular level students ($p < 0.001$), although the mean difference was small (mean of 3.16 vs. mean of 3.02; mean difference 0.14). The difference was greatest for male advanced students, leading to the author's conclusions that 'male students with high academic ability made the highest and most significant gains'.⁶⁵

Level of English was the only distinguishing factor (of many examined) in Jaycox *et al.*'s evaluation.⁴⁵ Those with low English proficiency in the treatment group were more likely to perceive that a nurse or doctor would be helpful than similar participants in the control group (a difference of 0.89/5 for doctors and 1.06/5 for nurses).

Variations in length/intensity of the same programme

Two studies compared different programme lengths/components. Foshee *et al.*⁵² found no benefits and some adverse effects of adding a booster to their Safe Dates programme and so did not recommend this additional component. Taylor *et al.*⁴⁷ found that the combination of building and classroom was no better than the building-only intervention for dating violence.

Lavoie *et al.*⁶⁷ tested a short version of their programme (2–2.5 hours) in one school versus a long version in the comparison school (total 4–5 hours). They concluded that 'both schools improved to a similar degree on the attitude score . . . the school receiving the short version improved more on knowledge items'.⁶⁷ However, the schools were different at baseline, which led the authors to hypothesise that 'the effect of a shorter version on a more aware group was greater than the effect of a longer programme on a less aware group'.⁶⁷

Context effects

One programme was run in two different contexts: the USA and India.^{44,66} The programme delivery mode was essentially the same, but modified somewhat for the different cultural settings it was delivered in. The general social milieu was in accordance with the programme theory (sports coaches acted as role models for male athletes) but in the case of the USA, the context was athletics, and in the case of India, it was cricket. The programme lead-in phase was, however, very different in each context. The original US 'Coaching Boys into Men' programme included girls and boys, although only the data from the boys were reported.⁴⁴ The programme set-up period in the US context included a 60-minute training session for the coaches. Once the programme was running, the coaches were offered biweekly contact with programme advocates, and the completion of tracking sheets to log how much of the programme was actually delivered. As noted above, the evaluation of this version of the programme found small effects that suggested improvements in reported intention to intervene, recognition of abuse and reported positive bystander behaviour in the subgroup of athletes who were exposed to more of the intervention, when compared with controls.

Given that the amount of information given depended on the coaches completing as many of the session cards as possible, this finding may be confounded by coach engagement. Indeed, the attempt to translate the programme to a very different context reported by Miller *et al.*⁶⁶ raises the hypothesis that the mechanism of effect, if any, was about personal engagement of the coaches. Translating the theory and principles of the programme from the USA to India required extensive groundwork to bring the coaches who were to be role models for the boys to the level of gender equity awareness required for the programme to run. In the event, even 12 days of work with the coaches over 4 months, including biweekly workshops pre intervention, resulted in only a small change in gender attitudes [0.28 on a

5-point scale (95% CI 0.12 to 0.43)]. This needs to be understood in the context of the fact that 80% of the boys in the Indian study reported having perpetrated violence prior to the programme being implemented. It is also not clear from the report in Miller *et al.*⁶⁶ if the coaches in India also had access to biweekly support sessions and the reinforcement of tracking sheets that were part of the US programme. Aside from these considerations, it is likely that programme implementation needs to pay attention to the wider social context, to assess local readiness for the programme to be put into place.

Possible mechanisms of effect

Few studies showed effect at the level of significance set for the review. Where it did exist, the effect size was small, except for knowledge, which showed big differences in the short term in most studies that assessed it, and some sustained effects over time. The notion that giving people information results in greater levels of knowledge is maybe not surprising.

Most of the reported attitude, behavioural and incidence of perpetration or victimisation effects were short term (although some were not measured into the longer term). There was very little strong and consistent evidence of effects for specific subgroups in specific contexts, and so a definitive analysis of mechanism of effect is not possible. However, the one programme that was run in two different contexts does raise some interesting hypotheses about mechanism of effect, as noted above.

Paradoxically, where length and/or intensity of programme were formally tested, shorter/less resource-intensive programmes were generally equally or more likely to show benefits. Where less or more uptake was assessed within a programme, however,⁴⁴ those with greater exposure did better. These diverse findings might suggest that the important issue is to tailor the programme to the situation, rather than it being a simple matter of length/intensity overall as suggested by Lavoie *et al.*⁶⁷ in the quote cited above.

Qualitative studies

Results

Included studies

The search strategy described earlier in this chapter produced six papers with qualitative data for inclusion in this review. Each addressed a separate programme. Three papers in the quantitative review contained qualitative data^{57,59,68} and three were wholly qualitative studies.⁷⁴⁻⁷⁶ All of the studies reported the views of children and young people participating in programmes using their direct quotes, which was a key criterion for their inclusion in this part of the systematic review. Three programmes were delivered in the UK, two in the USA and one in Switzerland. All six papers were published between 2005 and 2012. Focus groups were used to gather data in three studies and three used written formats of various types. The number of participants ranged from 13 to 267 with an age range of 10–17 years, although the majority were young people aged 12–15 years. The programmes and study samples all included boys and girls. Only one segregated participants by gender in the data collection process.⁵⁷

Quality assessment of studies

The quality of the studies was assessed using CASP (*Table 18*). It was originally intended that a more rigorous tool would be used, including a grading system that could be used to exclude studies that did not meet an adequate threshold for quality.⁵⁷ However, the search produced so few papers that the decision was made not to exclude studies on quality grounds and that, in these circumstances, the CASP tool provided an adequate assessment of general quality. All of the included studies fully met at least 5 of the 10 CASP quality criteria from the information provided in the published papers; in all cases there were insufficient reported data to make a judgement in at least 1 of the 10 criteria.

TABLE 18 Quality appraisal of qualitative studies

| Study and year | |
|---|--|
| CASP screening question | Alexander et al. 2005 ⁷² Belknap et al. 2013 ⁵⁹ Bell and Stanley 2006 ⁵⁷ Elias-Lambert et al. 2010 ⁶⁸ Fox et al. 2014 ⁷³ Hamby et al. 2012 ⁷⁴ |
| 1. Was there a clear statement of the aims of the research? | Yes Yes Yes Yes Yes Yes |
| 2. Is a qualitative methodology appropriate? | Yes – eliciting views on a sensitive topic Insufficient data available to judge quality Yes Yes |
| 3. Was the research design appropriate to address the aims of the research? | Yes – but acknowledge testing out methods Insufficient data available to judge quality Insufficient data available to judge quality Insufficient data available to judge quality |
| 4. Was the recruitment strategy appropriate to the aims of the research? | Yes – discussion of process but no explanation of why some chose not to participate Yes Yes – discussion of process but no explanation of why some chose not to participate Yes |
| 5. Were the data collected in a way that addressed the research issue? | Yes Yes Yes Yes Yes Yes |
| 6. Has the relationship between researcher and participants been adequately considered? | Insufficient data available to judge quality Insufficient data available to judge quality |
| 7. Have ethical issues been taken into consideration? | Limited discussion presented Limited discussion presented Insufficient data available to judge quality Insufficient data available to judge quality Yes Yes |
| 8. Was the data analysis sufficiently rigorous? | Cannot tell – only brief description provided Yes Insufficient data available to judge quality Yes Yes Insufficient data available to judge quality |
| 9. Is there a clear statement of findings? | Yes Yes Yes Yes Yes Yes |
| 10. How valuable is the research? | Yes Yes Yes Yes Yes Yes |

Summary of study aims and findings

The study aims varied considerably across the data set. Alexander *et al.*⁷⁴ tested an approach to working with young people in schools on the issue of domestic abuse in adult relationships and the programme focused on providing a safe and private space for young people to learn what domestic abuse is. The study was in part preliminary work to develop a primary prevention initiative. Four of the other studies were programme evaluations, three reported the views of young people on the programme in general^{57,59,75} and one examined the impact of gender grouping on user satisfaction.⁶⁸ The Hamby *et al.* study⁷⁶ aimed to examine the transferability of a North American programme into a 'western' but different social and cultural context. The differing intentions of the studies produced a wide range of findings (Table 19), presenting challenges for data synthesis.

TABLE 19 Aims and findings of the six studies included in the review

| Study and year | Aims | Findings |
|--|--|---|
| Alexander <i>et al.</i> 2005 ⁷⁴ | Test a method of working with young people to raise awareness of domestic abuse in a school setting | Those students experiencing domestic abuse were more likely to attribute responsibility for abuse to the perpetrator than to external events, had less sense of control over domestic abuse situation, were more likely to think a young people would have suicidal feelings and had greater understanding of negative impact of domestic abuse It proved possible to provide a safe opportunity for young people to express individual views or personal experience that can help reduced the feared consequences of disclosure |
| Belknap <i>et al.</i> 2012 ⁵⁹ | Change attitudes to teen dating violence and increase confidence and intention to resolve conflicts non-violently among Mexican American early adolescents | Change in attitudes – 'It made me think' Change in confidence – 'I would stand up for myself' Change in intention – 'Tell someone' Theatre effective and engaging vehicle particularly when culturally specific, but ethnic matching of actors and audience may not need to be prime consideration Preference for same-sex person from whom to seek help |
| Bell and Stanley 2006 ⁵⁷ | Raise and promote awareness of domestic abuse and associated concepts, e.g. self-esteem, gender roles | Increased knowledge and understanding of domestic abuse A more realistic approach to help-seeking: more likely to turn to family than professionals for help (although quantitative data suggest not sustained at 1 year follow-up). Some ambiguity about talking with teachers, confidentiality important in disclosure Some participants expressed sense of agency and control and critical of sense of helplessness portrayed in play Positive ideas on what a 'healthy relationship' was had developed emphasising equality, non-violence and negotiation Girls reported learning more from the workshops and boys more from the play. Boys enjoyed active elements such as drama and role-play and did not like discussion. Girls liked role-play and discussion Programme co-ordinator reported gender of facilitator was important to young people's response to workshops. Boys responded more positively to male facilitator – importance of modelling alternative masculinities Drama and theatre were effective vehicles |

continued

TABLE 19 Aims and findings of the six studies included in the review (*continued*)

| Study and year | Aims | Findings |
|--|---|--|
| Elias-Lambert <i>et al.</i> 2010 ⁶⁸ | Understand how satisfaction levels differ between gender composition of groupings | <p>Boys and girls more satisfied with mixed-gender groups than same-sex but varied with age, overall satisfaction higher for girls but positive responses from most. Gender grouping needs consideration</p> <p>Most participants liked interactive and participative activities such as video, role-plays. One-third liked class discussion but enjoyed this less than activities</p> <p>Girls in same gender groups preferred discussion more than did those in mixed gender, and vice versa for boys. Teacher involvement and openness – those who can relate well to students needed</p> <p>Participants did not like class work (homework and tests)</p> <p>A small proportion disliked class discussion (15%) and activities – felt uncomfortable sharing feelings or acting in front of others</p> <p>Changes proposed: increase active learning methods</p> |
| Fox <i>et al.</i> 2014 ⁷⁵ | Exploration of young people's views of domestic abuse intervention in schools | <p>Need for varied and participative activities</p> <p>Programme needed to be more tailored to needs of different groups (e.g. younger children not keen on role-play but older children liked it)</p> <p>Difficulties in managing student opinions and student discomfort with topics (these issues could be linked to real-life experience of participants)</p> <p>Some boys criticised programme as 'sexist' and saw it as men-blaming or neglecting male victims of abuse</p> <p>Raised awareness did not always include raised understanding – some misinterpretations regarding psychological abuse, power and control</p> <p>Teachers are best positioned to deliver programmes but need training from specialist domestic abuse staff</p> |
| Hamby <i>et al.</i> 2012 ⁷⁶ | Transferability of 'Safe Dates' (Foshee and Langwick 1994 ⁷⁷) into sociocultural context of Francophone Switzerland | <p>Young people reported:</p> <ul style="list-style-type: none"> ● Translation issues in the terms used for dating relationships – American dating too formal a concept for Swiss context ● Terminology for violence and related concepts very overlapping and no neat translation into French ● Open discussion preferred to structured activities, which were 'too much like school' ● Too much focus on identifying problems in relationships, more focus on skills and solutions required <p>Local professionals reported:</p> <ul style="list-style-type: none"> ● Programme too Americanised – in approach, i.e. cognitive-behavioural and psycho-educational with a focus on heterosexual relationships and gender neutral. More psychodynamic and systemic approach could strengthen programmes ● Broad programmes focusing on commonalities in forms of violence vs. specific dating violence programmes researchers identify pros and cons ● Need to evaluate different elements of a programme rather than just focusing on programme as a whole |

Findings

The synthesis of concepts from the findings of the six studies yielded four themes based on analysing the similarities (reciprocal analysis) and differences (refutational analysis) between them and building a general interpretation grounded in the findings of each (*Table 20*).

Student response and engagement

All of the studies included in this aspect of the review reported that the majority of students experienced programmes as positive and worthwhile; however, particular groups of children and young people did have negative responses. Alexander *et al.*⁷⁴ and Fox *et al.*⁷⁵ both reported that programmes could evoke discomfort and disengagement in young people who had real-life experiences of domestic abuse. A level of resistance to a gendered analysis of domestic abuse was reported by some boys in two studies.^{57,75} Fox *et al.* reported that this approach, described as 'sexist' by boys, incorporated two main critiques: '(a) the programme was viewed as blaming men, and (b) it was considered to fail to address male victims' (p. 8).⁷⁵ Similar findings are reported in the review of the grey literature in *Chapter 5*.

The methods used to deliver programmes were commonly identified as crucial to student engagement. Active approaches were preferred by children and young people in all the studies where this was discussed. Hamby *et al.*, for example, reported that: '[young people] . . . preferred more open discussion and less structured exercises and wanted an intervention that was "less like school" ' (p. 38).⁷⁶ Similarly, Elias-Lambert *et al.*⁶⁸ reported that young people valued:

More role playing and dramatizations so we can keep getting better at solving and trying to make relationship better or get through our head what we should do. (Female)

p. 148⁶⁸

TABLE 20 Synthesis of findings and concepts in qualitative studies

| Theme | Subtheme | Log of studies contributing | Line of argument synthesis |
|--|-----------------------------------|-----------------------------|---|
| Student response and engagement | Positive and worthwhile | Q1, Q2, Q3, Q4, Q5, Q6 | Programmes are generally experienced as positive and worthwhile. However, to ensure that they have the best chance of working for the most students in the most contexts, they need to be non-accusatory, confidential, respectful, participative, active, tailored for specific sociocultural contexts, and flexible and dynamic enough to cater for those with real-life experience of domestic abuse, and to respond to the different learning needs and approaches of specific groups, such as boys and girls |
| | Life experience of domestic abuse | Q1, Q4, Q5 | |
| | Gender differences | Q2, Q3, Q4, Q5 | |
| | Interactive approaches | Q2, Q3, Q4, Q5, Q6 | |
| | Theatre/drama | Q2, Q3 | |
| Programme sensitivity to characteristics of audience | Gender | Q2, Q3, Q5, Q6 | |
| | Ethnic/cultural | Q2, Q6 | |
| Facilitator characteristics | Gender | Q2 | |
| | Skills and attitudes | Q4, Q5 | |
| Student learning | Knowledge and understanding | Q1, Q2, Q3, Q4, Q5, Q6 | |
| | Help-seeking | Q1, Q2, Q3, Q4, Q5, Q6 | |
| | Change in attitude | Q2, Q3 | |

Live theatre, followed by workshops, was used in two programmes, which young people responded to positively.^{57,59} Despite this general preference for interactive methods, three studies^{57,68,75} reported gender differences in the appeal of different methods. Generally, boys were more likely to report enjoying active (kinetic) approaches, while girls liked discussion-based activities. A variety of approaches emerged as necessary⁷⁵ to meet a range of learning styles.

Programme sensitivity to characteristics of audience

Three studies, all either delivered in North America or an adaptation of a North American programme, had developed approaches to examine how programmes could address gender, ethnic and cultural differences.^{59,68,76}

Belknap *et al.* suggested that the cultural specificity of the programme aimed at Mexican American students 'makes the transferability of the method and the findings to others with the same background more likely' (p. 66).⁵⁹ Although the ethnicity of the actors delivering the theatre performance did not match that of the young people, the culturally specific content was considered as significant. Those involved in adapting the US 'Safe Dates' programme to the Franco-Swiss sociocultural context⁷⁶ found issues with the transferability of language and the terminology used to convey the concepts of violence and abuse. The programme was critiqued by young people and local professionals as having too formal a structure and format, and as premised on US culture, making it unacceptable to the Swiss young people participating in the study. These criticisms identified fundamental issues relating to the underpinning cognitive-behavioural theories, which conflicted with the more systemic and humanistic approaches to partner violence in Switzerland. These findings appear relevant to consideration of the transferability of US programmes to the UK.

Facilitator characteristics

The importance of facilitator characteristics emerged as a major theme^{57,68,75,76} from this aspect of the review. This related to characteristics such as gender but also to facilitators' skills and attitudes. The gender of facilitators was not reported in most studies; however, Bell and Stanley⁵⁷ noted that boys responded well to male facilitators who contributed to the delivery of workshops. Students liked staff who were open and engaged with the programme:

Students mentioned how they enjoyed the group interaction with the teachers and how the teachers taught the information at a level the students could understand:

The teachers made easy connections with the students. (Female)

The teachers showed much respect for us. (Female)

How the teachers were outspoken, confident, and respectful. (Female)

The way the teachers helped me understand when I had a question. (Male)

p. 146⁶⁸

This also related to the role of adults supporting the delivery of programmes. Fox *et al.*,⁷⁵ whose findings generally supported teachers' roles in delivering programmes, described a teacher in an observer/support role intervening in a student discussion in a manner that closed down student participation. Domestic abuse is an emotive and controversial topic, and managing student discussion requires skilled staff who can manage group dynamics positively.

Student learning

Self-reports of student learning of knowledge of domestic/dating abuse and help-seeking and changes in attitude were found across the studies. Participants reported that they had discovered the importance of

telling someone about domestic abuse and had also learnt whom they could tell. This could simply be someone who was trustworthy:

If you are afraid you should tell a friend or a teacher. When you tell someone that you trust, they will help you out. They will talk to that person or they will talk to your parents if you don't want to. That's why it is important.

p. 66⁵⁹

However, confidentiality regarding disclosure was a major concern for children and young people, so although, for example, teachers could be seen as trustworthy, some children expressed ambivalence about talking with them because confidentiality might not be maintained. In addition, a more realistic approach to help-seeking was identified by Bell and Stanley,⁵⁷ who found that young people were more likely to describe turning to family members than professionals for help after participating in the programmes (however, quantitative data suggested this was not sustained at 1-year follow-up).

Learning more about domestic abuse was a shared theme, although students did not always report specific things they had learned (this could be a consequence of the research methods):

I learned and this program will be useful in my life. (Female)

p. 149⁶⁸

You learn about what can happen.

Stephen, 13, FG4, p. 9⁷⁵

The learning did not always result in increased understanding. Bell and Stanley⁵⁷ reported that some 'girls were more likely to approve assertive models of female behaviour that could encompass violence' (p. 246) and Fox *et al.*⁷³ found some misinterpretations regarding psychological abuse and power and control.

Changes in views or opinions were also expressed by young people:

Before, I thought being in a relationship made you cool. I changed my thoughts after watching the plays. They made me believe relationships are a serious thing. I guess it's a way to prepare for marriage. Also, if you want to be in a relationship, do it for love, not for your satisfaction.

p. 65⁵⁹

Summary of Chapter 4 findings

This review was based on realist principles; it included papers that used a range of methods including qualitative data, so broadening the knowledge base arising from the three reviews that have previously been reported in this area. The included RCTs were better quality and less likely to report statistically significant results than the case-control and cohort studies and so, in general, the results reinforce those of the prior reviews in terms of a lack of evidence of significant programme efficacy. The other methods, however, provide evidence on the other process and outcome measures listed in the Petticrew and Roberts chart in *Chapter 2* (see *Table 1*). They illustrate the diversity of programmes that have been tested in this area in terms of programme components, timings, staffing and underlying philosophies. Most of these programmes appear to be operating on the basis of an interpretation of behavioural change theory, although the application of this theory tends to be context specific. In general, programme outcomes are framed as one or more of knowledge, attitudes, behaviours, and incidence of victimisation or perpetration. Even where statistically significant findings are reported, the effect sizes are generally very low or, at best, moderate. Larger effect sizes are seen in measures of knowledge, though the differences in these tend to decrease over time. The only relatively large and statistically significant finding in a well-designed study in terms of incidence of perpetration or victimisation is in perpetration of physical dating violence in the

previous year by Wolfe *et al.*'s⁵⁰ evaluation of the 'Fourth R' programme. However, the main effect was only in boys and there were counterintuitive findings for girls that suggest that the population in which this study was undertaken was atypical.

It has been argued for some time that increasing knowledge and awareness is important as it is key to recognising domestic abuse in one's own or others' relationships and to help-seeking specifically. Aligned with behavioural change theory, it is generally argued for all domestic abuse interventions that knowledge or awareness is essential for changing behaviour and that behaviour only changes over time. This review does show that interventions based on information can increase knowledge in the short term. However, the retention of this knowledge in the longer term is less evident. An increase in help-seeking was found in some studies by both the quantitative and qualitative reviews. The only study to demonstrate associations between intervening variables and perpetration and victimisation⁵¹ suggested that improved conflict management skills and belief in a need for help were most likely to correlate with these outcomes. However, as noted above, the analysis process used in this paper had limitations and the data were highly skewed, which might limit the generalisability of the findings.

The lack of strong evidence for effects on perpetration and victimisation across the included programmes might be because follow-up needs to be longer than even the longest study reported here (4 years post intervention⁵²), as knowledge and awareness may become important to young people only as they mature and as they engage in relationships over time. This remains to be demonstrated in (very) long-term formal controlled studies.

Examination of what works for whom and in what circumstances can only be very limited, therefore, based on these data. Although, as we report, there is some evidence of gender effect for some programmes, the difference tends to be small and short term. There is no strong evidence of effect across programmes and outcomes for ethnicity, age/grade, level of English or academic achievement. Indeed, in the programme that was carefully designed specially for Latino/a groups, the authors concluded by stating that the factor of importance was not ethnic identity and culture, but local youth culture.⁵⁹

These observations raise questions about the importance (or not) of fidelity, not only with programme materials and content, but also with alignment of those delivering the programme with the philosophical assumptions and norms that underpin it. Indeed, even if these elements can be controlled in a research study, and if the staff can be selected to meet with the programme norms and philosophies, roll-out is very likely to lead to increasing misalignment between these elements. Future studies might consider using some kind of maturity matrix to assess organisational readiness to implement and be aligned to a future programme in this area and develop tools to bring organisations to an agreed state of philosophical readiness before a programme is actually implemented.

However, excessive fidelity to a programme can also be a limitation when the context that the programme was originally designed for is very different from that to which it is being rolled out, as is evidenced in the two studies undertaken by Miller *et al.*^{44,66} and by Hamby *et al.*'s⁷⁶ study. Indeed, these studies suggest that dynamic sensitivity to local context is much more likely to trigger mechanisms of change based on that specific context than strict allegiance to the original programme design, despite evidence of contextual non-alignment. The evidence from these studies suggests that philosophical misalignment is much more problematic.

There are indications in a number of the included studies of a strong influence from small groups of students who were at higher risk at baseline. This is evident in the distinct skew in the data in a number of the studies as explored above. This might suggest that a whole-population approach can function as a screening tool to identify those young people who are at greater risk of either perpetrating or becoming victims of interpersonal abuse, and who might then benefit from more in-depth support. This is the kind of approach that underpins programmes at the whole-population level for a range of situations, including domestic violence in pregnancy and postnatal depression. Instituting such a scheme depends heavily on

there being an easy referral process to available and effective services once individuals at risk have been identified, and on the identification process being non-stigmatising.

Comparison between programmes in terms of specific outcome measures/tools used was not attempted in this review owing to the heterogeneity of tools and instruments across the programmes. Even the Conflict Tactics Scale, which was the only one used in more than one study, was adapted for use in different contexts, making comparison less than ideal. The development of an agreed tool or set of tools for analysis of process and outcomes in this field would be a valuable research area for the future.

Most of the studies focused on young people in the age range 10–16 years. We were unable to find any controlled studies relating to children below the age of 10 years and those that included 10-year-olds reported their data alongside those from older children in their studies. Given the lack of even a moderate effect on most outcomes except short-term knowledge achieved by most of the programmes included in this review, it might be assumed that values, attitudes and behaviours are firmly established via family and community and early socialisation by the time children are 10 years old or older. Interventions undertaken with younger children might yield better results. There is available evidence for such interventions in the grey literature and this is discussed in the following chapter.

Chapter 5 UK grey literature

Introduction

The intention in reviewing UK grey literature on prevention work, in the absence of quantitative peer-reviewed UK studies, was to attempt to capture the 'state of play' in respect of knowledge in the UK context on preventative interventions. Forty-six documents were included in the review of grey literature; all have been published since 2002 and cover work across the four UK nations (note that not all documents are referenced individually since some grey literature reports on more than one study). As shown in *Appendix 10*, 21 were derived from or related solely to work in England,^{38,78-85} four related to Northern Ireland,^{86,87} six related to Scotland^{88,89} and three related to Wales;⁹⁰ of the remainder, seven were relevant to the whole of the UK, four were relevant to England and Wales⁹¹⁻⁹⁴ and one was relevant to England, Wales and Northern Ireland.³⁷

A range of documents was analysed; these are shown in *Table 21*, with a summary of each document provided in *Appendix 10*. Over one-third of the documents reviewed^{79-86,88,90-93} reported programme evaluations including a thesis. Scoping or literature reviews of prevention work represented just over 15%,^{37,89} one reported a feasibility study⁸⁷ and five documents related to practice guidance or standards for school-based work; the latter were directed at those who might facilitate work, including teachers (these are listed in *Appendix 10*).

TABLE 21 Types and numbers of documents included in the review of grey literature

| Type of document | Number |
|-------------------------------|--------|
| Briefing paper | 3 |
| Campaign material | 1 |
| Consultation and/or response | 2 |
| Factsheet | 2 |
| Feasibility study | 1 |
| Government paper | 2 |
| Internal service report | 2 |
| Policy analysis | 1 |
| Practice guidance/standards | 5 |
| Professional journal article | 1 |
| Programme evaluation | 17 |
| Review: literature or scoping | 7 |
| Thesis | 1 |
| Training evaluation | 1 |
| Total | 46 |

This chapter focuses on the 18 evaluations reviewed, as the majority of other documents were based on these or other research. The quality and scope of the evaluations varied considerably. All but one reported on educational work, the exceptions being unpublished data produced by the Home Office on the 'This is Abuse' media campaign and a small component in the evaluation of the 'Zero Tolerance Respect' programme addressing a media campaign. Most of this chapter, therefore, discusses educational work in schools and young people's centres, with media campaigns considered separately at the end. Three evaluation documents reported on more than one programme and data on two programmes were found in at least two documents, resulting in total of 28 programmes included in the review; details of the studies are shown in *Table 22*. The majority of the evaluations reviewed were commissioned by voluntary sector organisations and/or community safety partnerships ($n = 12^{78-80,82,85,91-93}$); one was funded through the European Union Daphne Project,³⁸ one was funded by the now-abolished Children's Fund⁹² and four were funded by central government [the Home Office ($n = 2^{84,94}$), the Scottish Executive,⁹⁰ the Northern Ireland Executive⁸⁶ and the Welsh Assembly government⁹⁰].

Fourteen studies reported on outcomes for children and young people^{38,78-84,88,94} and nine reported programme participants' satisfaction with data gathered predominantly through pre and post questionnaires and focus groups.^{38,78-83,85,88} Three were specifically process evaluations.^{85,91,92} School and programme staff were asked for their views on the impact programmes had had on students and, in 10 cases where they had undertaken training, on benefits for themselves.^{78,81,82,84-86,88,91,92,94}

Educational programmes

Programme aims and theoretical basis

The majority of programmes targeting young people in secondary schools or in young people's services ($n = 15^{79-85,88,94}$) broadly aimed to raise awareness, increase knowledge and change attitudes to domestic abuse in order to equip participants to learn how to conduct non-abusive intimate relationships. In addition, information on help-seeking and services was provided so that those experiencing domestic abuse either in their own or in their parents' relationships could seek appropriate support. UK interventions differ from the predominantly North American programmes included in the systematic literature review which focused on 'dating' violence and therefore tended not to address children and young people's experience of domestic abuse in their parents' relationships. Programmes for primary school children in the UK had broader aims focusing on children's safety and friendship, although raising awareness of domestic abuse was introduced to older primary school children (see *Programme content*). All but one of the four programmes aimed solely at primary aged children were based on 'Protective Behaviours', a personal safety programme which in essence is ungendered.^{95,96} No reference was made to domestic abuse in the evaluation of 'Miss Dorothy',⁷⁸ a programme specifically designed for children of primary school age that focuses on personal safety through encouraging self-empowerment and raising self-esteem and which aims to prevent experiences of victimisation. However, it was retained in the review as it was the second most commonly reported programme in the mapping survey (see *Chapter 3*).

The programmes 'Challenging Violence, Changing Lives',^{91,92} 'Practical Prevention',⁹³ and 'Tender',⁷⁹ while having similar aims to those secondary school programmes discussed above, were also aiming to implement prevention through a 'whole-school approach'. Along with curriculum work, a whole-school approach involves action at institutional and policy levels, the engagement of all members of the school community, awareness raising and training for staff and work outside the classroom with students. A whole-school approach has been widely adopted in the UK to help children and young people learn about many issues including health,⁹⁷ bullying⁹⁸ and, more broadly, values and affective education. Some developers of prevention programme stress the importance of a whole-school approach in order to change school culture and to create an ethos where violence and abuse, including gender-based violence, is not tolerated.^{99,100} In three cases, theories explaining domestic abuse which informed programmes were made explicit. In some cases, the theoretical basis of the programme was implicit rather explicit. For instance, it was evident that in 11 programmes a feminist understanding of domestic abuse either explicitly or

TABLE 22 Overview of evaluation studies of educational programmes

| Programme title | Authors | Date | Type of document | Location | Venues and number of organisations in evaluation | Number of participants in programme | Outcomes for children and young people |
|---|--|------|---|---------------|---|---|---|
| Practical Prevention <ul style="list-style-type: none"> ● Nottingham Domestic Violence Project ● Off the Record ● Respond ● Southall Black Sisters ● Tender ● Victim Support Cornwall (the SAFE Project) | AVA and Institute of Education ⁸³ | 2013 | Draft summary report of the evaluation of six 'Beacon Projects' | England | Primary and secondary schools; young people's centres | Data not available for individual projects with the exception of Tender (DMSS 2012) | Data not available for individual projects with exception of Tender |
| TRUST Education Project (Tender) | CRG Research Ltd ⁸³ | 2007 | Evaluation report | London | 39 secondary schools including three PRUs | Not stated | Self- and staff-reported knowledge and attitudes; user satisfaction |
| Tender's Healthy Relationship Education | DMSS ⁷⁹ | 2012 | Evaluation report | London | Eight secondary schools | Not stated | Self- and staff-reported knowledge and attitudes; user satisfaction |
| Miss Dorothy | Datta <i>et al.</i> ⁷⁸ | 2005 | Summary of evaluation report | England | Eight primary schools | 537 children | LAWSEQ scale; self- and staff-reported knowledge and attitudes; user satisfaction |
| Domestic Abuse Awareness Raising Programme | Ellis ⁸¹ | 2006 | Evaluation (thesis) | Midlands | Five primary and four secondary schools including one special; two young people's centres (no data) | 602 | Self- and staff-reported knowledge and attitudes; user satisfaction |
| Relationships without Fear | Hale <i>et al.</i> ³⁸ | 2012 | Evaluation report | Staffordshire | 14 primary and five secondary schools | Not stated | Self- and staff-reported knowledge and attitudes; user satisfaction Normative Beliefs about Aggression Scale and Attitudes towards Domestic Violence Questionnaire |

continued

TABLE 22 Overview of evaluation studies of educational programmes (continued)

| Programme title | Authors | Date | Type of document | Location | Venues and number of organisations in evaluation | Number of participants in programme | Outcomes for children and young people |
|---|--------------------------------------|------|--------------------------------------|---|---|---|---|
| Home Office Crime Reduction Programme | Hester and Westmarland ⁸⁴ | 2005 | Summaries of evaluations | England and Wales | Cheshire: 80 primary and secondary schools Bridgend: five secondary schools | Cheshire: 7500 pupils Bridgend: not reported | Self- and staff-reported knowledge and attitudes; user satisfaction |
| <ul style="list-style-type: none"> ● Thurrock Respect project ● Bridgend Violence ● Against Women project ● Cheshire Schools project | | | | Thurrock: one primary and two secondary schools | Thurrock: not reported | | |
| Challenging Violence, Changing Lives | Mahony and Shaughnessy ⁹¹ | 2007 | Summary report of phase 1 evaluation | England and Wales | Secondary | Not reported | Limited student and staff narrative of impact; implementation |
| Domestic Abuse Programmes for Adolescents in Kent and Medway | Maxwell et al. ⁹² | 2010 | Evaluation of phase 2 | England and Wales | Five secondary schools | Not reported | Limited student and staff narrative; implementation |
| <ul style="list-style-type: none"> ● Domestic Violence Awareness (Dover) ● Domestic Abuse Volunteer Support Services (Tonbridge) ● Healthy Relationship Programme (Dartford) ● Domestic Abuse Awareness (Folkestone) ● Salus Educational Domestic Abuse Project (Thanet) ● Love Should not Hurt (Canterbury and East Kent) ● Healthy Relationships (Sittingbourne) | Manship and Perry ⁸² | 2012 | Evaluation | Kent and Medway | 32 primary and 46 secondary schools, two colleges, three young people's centres. Plus one project reported 'all' secondary schools in one district council area | Ranged between 'a number' in one college to between 7500 and 8000 | Very limited data |

| Programme title | Authors | Date | Type of document | Location | Venues and number of organisations in evaluation | Number of participants in programme | Outcomes for children and young people |
|---|--|------|--|-----------------------|--|--|---|
| Promoting Respect | Not known | 2007 | Very brief evaluation report | Scotland | Primary schools in one high school cluster | Not stated | No data |
| Zero Tolerance Respect Programme | Reid Howie Associates ⁸⁸ | 2001 | Evaluation of pilot | Glasgow and Edinburgh | Two primary and two secondary schools, four young people's groups | 377 | Self-reported knowledge and attitudes; user satisfaction |
| Respect Project | South Essex Rape and Incest Crisis Centre ⁸⁴ | 2004 | Evaluation of pilot | Thurrock | Eight secondary schools | 153 in project (305 young people, parents, teacher and school governors in audience) | Self-reported knowledge and attitudes |
| AWSLCP | Stead <i>et al.</i> ⁹⁰ | 2011 | Evaluation of Crime and Disorder Reduction programme | Wales | Four primary, five secondary and one special school | 98% of schools in Wales | Limited data on domestic abuse |
| Westminster London-wide Schools Domestic Abuse Prevention Project | Thiara and Ellis ⁸⁵ | 2005 | Evaluation of roll-out of programme | London | 48 schools across 10 boroughs | Ranged between 20 and 1 183 across 10 boroughs | Limited self-reported qualitative data: knowledge and user satisfaction |
| Domestic Abuse Prevention: Peer Educator Project | Walton ⁸⁰ | 2007 | Evaluation of pilot | London | Three secondary schools (including one PRU) and one young people's group | 102 | Self-reported knowledge and attitudes; user satisfaction |
| Helping Hands | WAFNI and Department of Education Northern Ireland ⁸⁶ | 2011 | Evaluation of pilot | Northern Ireland | 43 primary schools | Not reported | Very limited and indirect |

AVA, Against Violence and Abuse; AWSLCP, All Wales Schools Liaison Core Programme; LAWSEQ, Lawrence's Self-Esteem Questionnaire; PRU, pupil referral unit; WAFNI, Women's Aid Federation Northern Ireland.

implicitly informed the rationale given for the work or had shaped the programme content. Three programmes – ‘Helping Hands’,⁸⁶ ‘Practical Prevention’⁹³ and ‘Tender’s Healthy Relationships’⁷⁹ – incorporated a theory of change, or logic model, in which the goals, indicators of success and the actions to achieve goals were articulated. Other programmes did not articulate how raising awareness about domestic abuse or healthy relationships, a main aim in many programmes, linked with changes in behaviour or social action.

Programme content

A complex set of topics and themes ran through the reported programmes and these varied with the age of the audience. None of the reports included extensive detail of lesson content although most ($n = 19$) provided a list of topics. *Table 23* provides a summary of the most common topics across programmes. As noted above, for those young people in secondary schools and young people’s services the topic of domestic abuse was directly addressed, although over time there appears to have been a move to shift the focus to abuse in young people’s own relationships^{90,92,93} rather than domestic abuse in their parents’ relationships.^{81,88,94} This shift may reflect the impact of Barter *et al.*’s study,⁴ which provided evidence on the prevalence of domestic abuse in young people’s relationships in the UK. Work in primary schools was focused less on domestic abuse and more on wider relationship issues such as friendship, respect and children’s safety. Where domestic abuse was tackled, it was with children aged 8 years and over.

TABLE 23 Common content reported in evaluations of programmes

| Children aged under 8 years | Children aged 8–11 years | Young people aged 11–25 years |
|-----------------------------|--|---|
| Emotional literacy | What is meant by relationship? | What is domestic abuse? |
| Self-esteem | Healthy/unhealthy relationships | Myths and stereotypes about abuse |
| Confidence building | Friendship | Different forms of abuse |
| Life skills | What is domestic abuse? | Warning signs of abusive relationships |
| Social skills | Different forms of abuse | Leaving abusive relationships |
| Learning to assess risk | Anger management | Meaning of respect |
| Who to tell (about abuse) | Support networks | Conflict management |
| | What is respect? | Listening skills |
| | Co-operation | Power and its misuse in relationships |
| | Prejudice and discrimination | Difference and discrimination |
| | Power and bullying | Gender stereotypes |
| | Gender stereotypes | Gender equality |
| | Sexism | Support networks |
| | Identifying feelings | Marriage and other relationships |
| | Self-esteem | Girls’ and women’s rights |
| | Children’s rights | Coercion and consent |
| | Acceptable and unacceptable ways to treat people | Global forms of domestic abuse |
| | | Risk to girls in intimate relationships |
| | | Legal rights |

In those cases where programmes were designed for both primary and secondary schools, two complimentary programmes were created,^{38,81,88} which notionally offered opportunities for progression and continuity for learners.

Many of the programmes ($n = 18$)^{38,79,81-84,87,92-94} dealing with domestic abuse addressed topics relating to gender such as gender stereotypes and roles, gender (in)equality and discussions of power in relationships. However, it was unclear whether other programmes, where coverage of such topics was not identified, used gender-neutral definitions or explained abuse as an outcome of interpersonal conflict rather than locating it in the broader social context of gendered power relations. Changing attitudes to gender violence was expressly stated as an aim in a small number of programmes ($n = 3$)^{79,83,88} with aspects of values education, including topics such as equality, acceptance of difference, respect for self and others and responsibility included in 19 programmes.^{38,79-85,88,91-94} The inclusion of work on children's, girls' and/or women's rights was explicitly reported in three programmes,^{81,91,92} although this does not mean, necessarily, that these topics were not included in others.

Affective education, in the form of learning to identify, name and express emotions in non-violent ways, was included, and this was particularly evident in programmes for primary school children. Lang *et al.* define affective education as that part of 'the educational process which is concerned with the, feelings, beliefs, attitudes and emotions of students, with their interpersonal relationships and social skills' (p. 4).¹⁰¹ In the 'Protective Behaviours' programme where 'keeping safe' was the central tenet, the focus was on children learning to identify, trust and act on their feelings about being (un)safe. Often linked with this were attempts to raise children's self-esteem with an underlying assumption that this would help to avoid victimisation. The teaching of prosocial skills to equip children and young people to conduct non-abusive relationships was evident in 10 programmes;^{38,79-85,88,94} this variously included conflict resolution/management, anger management, communication, problem-solving and assertiveness.

Topics aimed at supporting children/young people who had lived with, or who were living with, domestic abuse were evident. Coverage of help-seeking and information on support services was reported in 11 programmes.^{38,78,79,81-84,88,93,94} In one case, specific mention was made of an initial activity about respecting boundaries within groups.⁸¹ This was undertaken to establish a safe and respectful environment but was also linked to confidentiality and safeguarding in the presumption that the work might elicit disclosures of maltreatment from some children and young people. Although a single example, this does not preclude the possibility that other programmes addressed such topics. The grey literature reviewed yielded one other example of work on boundaries³⁸ comparable with Taylor *et al.*'s⁴⁷ New York programme, discussed in the previous chapter. The importance of creating a safe environment for these interventions was noted by Manship and Perry, who concluded that:

A safe and confidential environment in which participants can reflect on their own experiences, their hopes and aspirations for the future and talk openly was felt to enable programmes to run more effectively and to encourage high levels of engagement.

p. 31⁸²

Responding to disclosures

An argument for undertaking prevention work is the number of children and young people who have experienced domestic abuse either in their families or in their own relationships so that one broad aim of such programmes is to support those currently living with domestic abuse.³⁷ Despite this, very few evaluations explicitly reported on provision for those who disclosed maltreatment as a result of taking part in programmes. In general, those programmes delivered by specialist domestic abuse organisations would have had direct links to support services within their own organisations and the assumption is likely to have been made that schools would deal with disclosures through existing safeguarding protocols. The 'Zero Tolerance' programme had a helpline available, although no report of its use was provided. Forty-four per cent of the staff interviewed for this evaluation reported being aware of children/young people who had required support during the project and 'issues had arisen in all but two of the settings'⁸⁸

(support for staff had also been made available and two who had experienced domestic abuse had sought help). At least three of the seven projects reported on by Manship and Perry had integrated one-to-one or group therapeutic work and this was 'felt to be a vitally important part of the programmes' (p. 32).⁸² The 'Domestic Violence Awareness Raising' programme provided open surgeries each week in all but one school where the programme was delivered in which participants could talk about issues that had arisen from the programme. These were popular with children in primary schools, especially girls, but there was no take-up in secondary schools.⁸¹ This was the only evaluation where the number of disclosures that occurred during the period of the programme was reported even though anxieties about prevention work in schools eliciting disclosures which then have to be managed are often reported^{81,102} (see *Chapter 6*). In this case, '11 children/young people disclosed child abuse or domestic violence from a cohort of 532 (a ratio of approximately 1 : 48) (p. 181).⁸¹

Diversity

Very few programmes appeared to take account of or to address the specific issues faced by BAMER, LGBT or children and young people with learning difficulties or disabilities so that little attention was paid to addressing the complexities and issues for marginalised groups of girls and women. However, two programmes, one developed and delivered by Southall Black Sisters and the other by Respond, were specifically designed to work with and address, respectively, issues faced by BAMER young people and young people with learning difficulties who attended special schools.⁹³ Manship and Perry⁸² reported that the content of the seven programmes they evaluated in Kent and Medway did not address LGBT or male victims and lacked cultural sensitivity for BAMER students:

It is through running prevention programmes that further needs could be identified . . . Gaps in the content of programmes could . . . be established, including support for Lesbian, Gay, Bisexual and Transgender young people and the need to provide appropriate information around male victims of domestic abuse (since many of the programmes discussed in the Findings are aimed at women and young females). Finally, the issue of cultural awareness is an important factor for consideration.

pp. 35–6⁸²

Recognition of equality and diversity had been built into the Northern Irish 'Helping Hands' programme in the 'design and resources at all levels' (p. 20),⁸⁶ including making the materials accessible to Irish speakers. However, some teachers suggested amendments be made to some aspects of the resources 'for pupils with complex learning needs . . . to enhance accessibility, diversity and equality best practice' (p. 21).⁸⁶

Staffing and training

The majority of programmes reported in the evaluations reviewed were delivered by external staff ($n = 16$),^{38,79–83,88,90,94} of these, 12 were staff from specialist domestic abuse or violence against women and girls organisations.^{38,79,81–83,94} The remaining four were delivered by police officers,⁹⁰ police community safety officers,⁸² arts professionals^{79,83} and professional actors from the National Youth Theatre who worked as peer educators.⁸⁰ Despite the increasing use of peer educators in the USA,⁶³ only one other example of this approach was reported in the evaluations reviewed. In the 2-year intervention by Tender,⁷⁹ much of year 1 had been focused on developing a peer education model. The intention, as part of a whole-school approach, was that the young people who had previously trained in peer support would act as ambassadors or advocates for healthy relationships and influence the peer culture within a school. There was also an intention that they would be trained to deliver sessions in addition to those led by teachers.

Little information was reported about the qualifications or training of the staff from specialist domestic abuse organisations involved in programme delivery, although three programmes were delivered by staff identified as children or young people's workers. Hale *et al.*³⁸ reported that the 'Relationships without Fear' programme was 'delivered in schools by specialist practitioners who work for Arch' (p. 92); however, 'specialist' in what respect was not made clear. Manship and Perry reported that the staff who delivered programmes in Kent and Medway had 'Relevant postgraduate and undergraduate degrees (including teaching and youth work)' (p. 26).⁸² Staff external to schools who are involved in programme delivery had

also undertaken, among other things, 'specific training courses including working with young people affected by domestic abuse and working effectively with schools (provided by Respect, AVA [Against Violence and Abuse] and Tender)' (p. 26).¹⁰³

Where practitioners from external organisations delivered the programmes, school staff were often offered training. This focused on increasing school staff's knowledge of domestic abuse and information on the programme content. There was often an expectation or insistence that teachers would 'sit in' on the lessons. This was usually to help manage children and young people's behaviour, to deal with any disclosures or to support children if they became upset and needed to leave the session (see for example Ellis,⁸¹ Manship and Perry⁸² and South Essex Rape and Incest Crisis Centre⁸⁴). Again, there was little information about the content of the training staff had been offered, although data on the take-up of the training were given in two of the evaluations. Five of the eight schools involved in the 'Respect' programme⁸⁴ had sent 'the key member of the staff' to the in-service training session. Uptake of such training was inconsistent in the nine participating schools in the 'Domestic Violence Awareness Raising' programme; in three schools no staff took part in the training and yet in one primary school all most of all of the staff ($n = 35$) had undertaken it.⁸¹

Ten programmes were delivered by teachers in partnership with staff from a specialist domestic abuse organisation and two in partnership with staff from children's organisations; the latter were aimed at primary school children.^{78,87} In all of these instances, the teachers received training prior to the intervention from the staff in the partner organisation or from colleagues who had undertaken training in order to train others to deliver the programme.^{79,85} In all of the evaluations reviewed, staff who received training mostly reported finding it positive and helpful, but in almost all cases there were suggestions for changes. For example, Reid Howie Associates⁸⁸ reported that 97% of staff thought the training was 'OK' or 'better than OK', although about half said that their understanding of the issues had not improved and some thought that the teaching material needed better explanation. For most staff, the training was crucial to their being able to deliver or support a programme. However, ongoing support was also important, as 'Teachers who did not feel supported were likely to feel under-confident in using the materials and dealing with the issues' (p. 25).⁹⁴ However, in the case of the 10 programmes delivered by teachers themselves, ongoing support throughout the intervention was usually provided (see for example Reid Howie Associates⁸⁸).

The gender of staff delivering programmes was explicitly reported and discussed in two evaluations. Manship and Perry noted that five of the Kent and Medway initiatives were facilitated by women, one by a man and two by a mixed team. One of the male facilitators regarded his gender as advantageous as it 'gave a different perspective, especially for the young male participants' (p. 25).⁸² Good practice guidance developed in the UK for adult perpetrator programmes suggests that men's groups should be facilitated by at least two staff, one woman and one man,¹⁰³ and one mixed pair endorsed this approach and saw it as 'providing role models' to the young people (p. 25).⁸² The significance of the gender of facilitators (both women in their twenties) was highlighted by a male teacher in Ellis's evaluation. In reporting on the negative responses of some of the boys, the teacher noted that:

It almost got their backs up a little bit – to have two women coming in to say to them, you know, men are bad or men are the ones who do domestic violence. So they were sort of being defensive of their sex then, their gender.

p. 157⁸¹

No references were made in any of the evaluations reviewed regarding the ethnicity of facilitators or the impact this might have had on group dynamics and learning.

Delivery methods

A wide variety of methods was employed to deliver the work, including whole- and small-group discussion, direct instruction, role-play, creative and performing arts, quizzes, worksheets, real-life stories, identifying true/false statements, DVDs and clips, writing exercises, graffiti walls and art. In primary schools,

circle-time was used along with jigsaws, poetry, music, stories and movement activities⁸⁶ [Women's Aid Federation Northern Ireland (WAFNI) and Department of Education Northern Ireland] with less use of role-play and whole-group discussion.³⁷ Circle-time aims to raise children's self-esteem and is based on a belief that the most effective way of promoting positive behaviour and respectful relationships is through working on moral development. It is used widely in PSHE in primary schools to explore a range of issues. In practice, it involves all participants sitting in a circle with everyone taking equal responsibility for solving the problems and issues that are brought to the circle. The group agree ground rules but principally participants must take turns to raise their issues or ideas, speak and listen.

A considerable number of programmes had been designed to include a breadth of methods that might engage children/young people. Six evaluations reported the use of drama or theatre, which are widely thought to be an effective way to deliver PSHE because they are interactive and participatory.^{104,105} Some specifically employed drama that was created and performed to peers by young people themselves,^{79,84,89} and in one case the performance was delivered by students from a local college.⁹⁴ 'Cheshire Schools Project' employed a professional theatre company to perform a play to present information and act as a stimulus for discussion. In the 'Westminster Programme',⁸⁵ 'forum drama' was used: this involved a theatre group performing with young people invited to guide the characters to act differently, and aimed to explore power and control in gender relations.⁸⁵ Forum theatre is derived from Boal's¹⁰⁶ 'Theatre of the Oppressed', which aims to use theatre to achieve social change (see discussion of Belknap *et al.*'s study⁵⁹ in *Chapter 4*). Drama and theatre are less dependent on literacy skills than many other methods and may be more inclusive, especially with children/young people for whom English is an additional language or for those with learning difficulties.

Maxwell *et al.*'s⁹² account of the development of a whole-school approach reported the use of peer research as a way of raising gender abuse as an issue in school and determining the content of taught programmes. This approach was deployed alongside the use of peer mentors, the establishment of a subgroup of a school council and campaigns by young people within school.

Audience

The majority of programmes selected for this review ($n = 25$, 86%) were targeted at young people in secondary schools, usually those aged 11–14 years, although some were aimed at older students too (*Figure 16*). Six programmes worked with both primary and secondary students, with only three working with young people outside schools in non-formal settings. Targeting young people was explained as a particularly important period for intervention because it was conceptualised as a key transition point and a time when gender abuse manifested itself. As Mahony and Shaugnessy state, the programme 'is situated

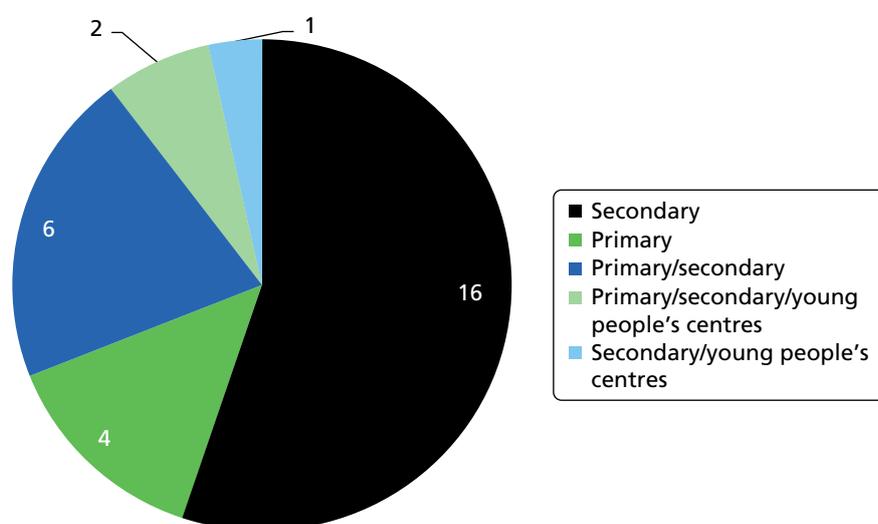


FIGURE 16 Programme venues.

in secondary schools because we recognise that this is a crucial time when young women and men are developing their sexual and social identities' (p. 1).⁹¹

All of the programmes worked with both boys and girls in mixed-gender groupings, with three examples of single-gender delivery which resulted because the schools or groups involved with the programme were already single-sex organisations or groups; for example, this approach was adopted in a girls' school, a boys' school and a girls' group in a young people's centre. Maxwell *et al.*'s⁹² report was the only evaluation describing an intervention focused on gender equality that was intentionally delivered to a girls' group. This does not necessarily mean that this was not done elsewhere.

The numbers of children and young people involved in programmes ranged from 20 to 8000 (see *Figure 17* and *Table 22*). Of the 20 reports of participant numbers, the majority ($n = 15$) had had fewer than 1000 taking part, with eight programmes having between 101 and 500. While these figures show differing levels of provision, they can be misleading in that the time period over which they had been delivered varied greatly, as did the overall length of time programmes had been operating and levels of programme funding.

Only two evaluations provided description of the geographic area where the programme was delivered, locating the work in a social and economic context.^{38,92} Two other studies reported the characteristics of those included in the study, including age, ethnicity and self-reported special needs.^{81,83} Worthy of note, however, is Maxwell *et al.*'s finding that 'Despite the five schools being quite different demographically, similar issues of gender inequality and experiences of sexual bullying and abuse were found in all of them' (p. 17).⁹²

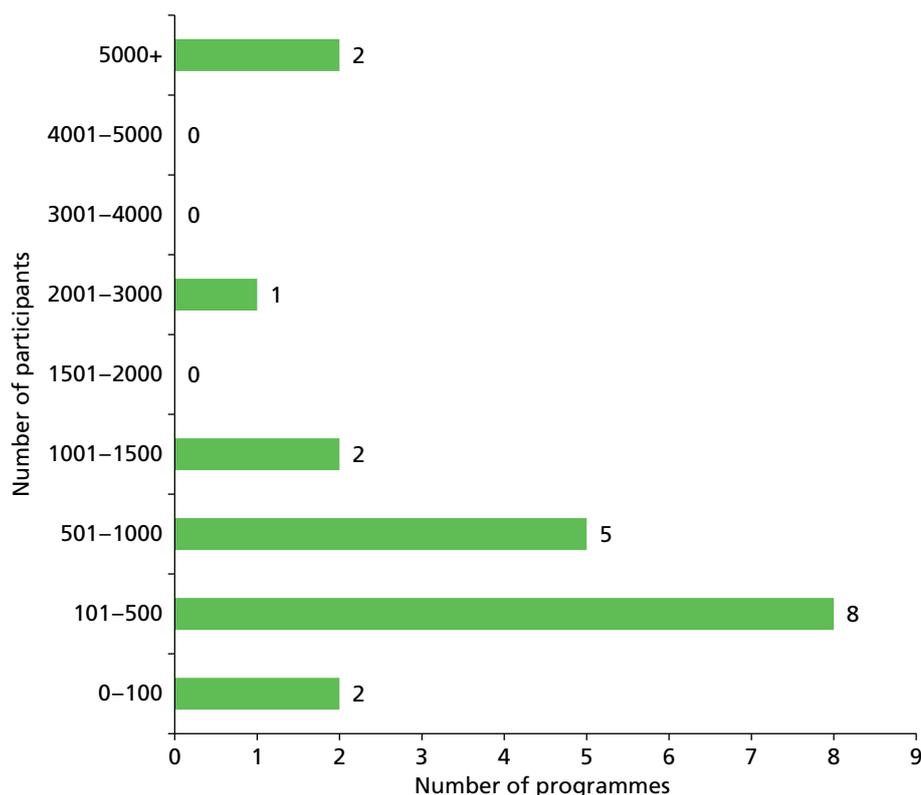


FIGURE 17 Numbers of participants in programmes (note: data are available for only 20 programmes).

Children's and young people's views of programmes

Children's and young people's responses to a programme are an important measure of the degree to which they engage with it, which in turn impacts on their learning.¹⁰⁷ Ten of the evaluations reviewed reported qualitative data about a range of topics on aspects children and young people liked, did not like or would change about programmes. The comments can be grouped around overall views, programme content and methods of delivery. Children's and young people's views of their learning are reported in *Outcomes of school-based programmes*, below.

The evaluations reported that, overall, the vast majority of children and young people were interested in programme topics, took it seriously, and saw it as worthwhile and positive; as Hester and Westmarland noted, 'Children and young people across the projects indicated they wanted and valued lessons on relationships and on abuse' (p. 21).⁹⁴ Similar comments were reported by, for example, Reid Howie Associates,⁸⁸ Ellis,⁸¹ Maxwell *et al.*⁹² and Hale *et al.*³⁸ As one primary school girl said, 'We should have had [the programme] from the start of the year until the end of the year, and that would actually be more fun (Focus group 1, girl 3)' (p. 4).³⁸ Hester and Westmarland⁹⁴ reported that pupils in one project (Thurrock), who had fewer sessions, had been less positive. DMSS noted that 'the size of the groups, age and gender balance also made a difference to how they [young people] engaged' (p. 49).⁷⁹

In many cases, the ways in which the programme was delivered emerged as an important factor in student engagement and enjoyment. Participative and interactive methods were valued by children and young people, including creative and visual activities such as drama and role-play.

I thought they were excellent . . . because like science and stuff you have to actually write quite a lot of stuff out. But like the citizenship lessons that we actually did the domestic violence on, they were kind of like hands on and we could actually do things ourselves and like act out things and choose like how we would actually deal with the situation. Instead of just writing things down on a piece of paper or whatever.

Boy, p. 24⁸⁵

Games that involved activities such as '[True/false card sorting . . .] were quite good because you got involved in them (Focus group 5, girl 3, secondary)' (p. 45).³⁸ DVDs, discussion and group work were all reported as enjoyable by children and young people: 'Young people preferred teaching methods such as group discussions, role-plays, student-led tasks and using visual material to deliver the lessons' (p. 69).⁹² However, some children and young people found interactive approaches challenging; these approaches required a level of group work skills and group management skills on the part of facilitators that some did not possess, often leading to confused and noisy lessons/sessions. This was a common theme in many of the evaluation reports reviewed and was identified as a key aspect that children and young people would like to change:

. . . 'everyone talking at once' or 'couldn't hear cos too much talking'

p. 21⁸⁰

I didn't like when everyone was shouting and then you didn't get attention

Girl, 10, p. 173⁸¹

The sessions could be more structured and the Workshop Leaders needed more control over the class.

p. 27⁷⁹

Overall, the evaluations reported that most children and young people thought that the content was relevant and interesting, although the gendered approach to domestic violence adopted by most programmes was sometimes resisted by some boys who described the work as 'anti-men' or 'sexist' (as did some adults). A defensive approach from some boys was explicitly reported in five evaluations. As one participant stated, 'That's not fair when it's always men beating women – it's sexist against men

(Focus group 2, Boy 1)' (p. 46).³⁸ Little detail was given as way of explanation in the evaluations; however, in some cases this might be a consequence of programme delivery being overcondensed and rushed,⁸¹ and there may be a need to consider who these 'resistant' boys are and to work with these responses.

Where children and young people were specifically asked what they would change about programmes, two themes were commonly reported (in addition to improved group dynamics noted above): 'nothing' and the length of the programme. Several evaluations (see e.g. Reid Howie Associates⁸⁸ and Ellis⁸¹) reported that a proportion of children and young people said they would change nothing – this could be viewed as either a level of satisfaction or a reluctance or lack of interest in critically commenting. The length of the intervention was commented on in at least five cases. DMSS reported that:

Several young people wanted more time – either because they were enjoying it so much: Make the project longer – it was so much fun! Or because they thought the final product would have been better with more time: It would have been better if we spent longer on the final performance so it was slicker. Then we could have put on more nights and invited bigger audiences.

p. 27⁷⁹

Similarly, Walton reported young people stating 'there was not enough time' (p. 21);⁸⁰ this was noted particularly where there was a single session which limited the extent to which young people could fully engage with the complexity of the issues. However, some young people who had received multiple sessions also reported wanting more: 'I would have liked more time and longer lessons because they were interesting and it brought the subject to your attention (Girl, 13)' (p. 187).⁸¹

Adults' views of programmes

The evaluations of 12 programmes reported, to differing extents, the views of adults;^{78-83,85,86,88,91,92,94} these were either facilitators or teachers who supported external staff who had delivered programmes. Overall, it appeared that adults thought programmes were 'successful', although the criteria against which this was judged were rarely made explicit. Certainly, most adults thought programmes were on the whole well received by children and young people; this may have formed part of adults' assessment of 'success'. There was also general agreement that programmes raised awareness of domestic violence where this was the aim and that this enabled young people to think in a more informed way about forming non-abusive relationships:

It makes the students look at relationships in different ways. They were totally engaging and the students were interested.

A teacher discussing the Swale Action To End Domestic Violence Healthy Relationships Project (SATEDA), p. 30⁸²

In a small number of evaluations, some teachers, both those delivering material themselves and those supporting external staff, were uncomfortable with the topics. Ellis⁸¹ found that a small number of teachers thought the topic inappropriate for primary school children and secondary school staff expressed anxiety over how parents might respond to the topics, particularly where sexual assault was discussed. Hester and Westmarland reported that 'a small percentage of teachers were uncomfortable with the focus on gender' (p. 21);⁹⁴ perhaps this was more clearly articulated by Mahony and Shaughnessy, who stated that:

Whilst teachers' perceptions of the programme was generally positive, they often lacked confidence and felt ill-equipped to handle the perceived 'political nature' of the content.

p. 4⁹¹

A level of adult resistance to a gendered approach was noted in five evaluations, which led in some cases, where the work was delivered by teachers, to 'some [teachers] subverted the content and instead approached the topic in ways they considered more sensitive and less confrontational' (p. 21).⁹⁴ This raises the ongoing debate about advantages and disadvantages of external versus internal staff delivering programmes (see *Chapter 6* and Fox *et al.*⁷⁵). On the whole, support for programmes was positive from

teachers; however, comments from both young people and staff identified ways in which teachers could undermine programme messages through inappropriate remarks. Walton reported that 'One observer noted that in the workshop she saw, staff members said things which were either unhelpful or factually incorrect' (p. 22).⁸⁰

Outcomes of school-based programmes

Evaluations of 13 programmes reported findings that suggested that children and young people gained increased knowledge and understanding of the nature and extent of domestic abuse after participating in programmes. In addition, where addressed, learning was reported about help-seeking, rights in relationships and gender equality. Some attitude change was reported in five studies. In only one programme was behavioural change reported as an outcome – the 'Educational Domestic Abuse Project' ('Project Salus') – although no detail was presented in the report.⁸² The main outcomes for each programme are shown in *Table 24*. In all cases, however, it is difficult to know if such change was sustained as only one study included a follow-up period, of 3 months for the intervention group.³⁸ The lack of evidence for longer-term outcomes and for behavioural outcomes is partly owing to limitations of many of the evaluations which were small and local. It is also worth noting that many of the programmes aimed to increase knowledge and understanding and change attitudes rather than behaviour.

In a number of the evaluations, children, young people and adults were asked about the impact on participants and their learning. It was reported that most teachers regarded the impact and outcomes as positive for children and young people. In the 'Cheshire Schools Project', teachers thought that primary school pupils had understood the messages (97%), gained knowledge (81%) and gained in empathy and understanding of responsibilities in relationships (86%).⁹⁴ Similarly, Thiara and Ellis⁸⁵ noted that teachers delivering the work:

thought [it] was an enriching experience for children and young people, allowing them to build skills (speaking and listening) which had also enabled them as teachers to relate differently to young people (listening to them and getting to know them).

p. 27⁸⁵

Positive changes in the behaviour or attitudes of young people were reported in response to the Tender programme, with teachers stating:

A couple of girls were getting detentions for poor behaviour and this has reduced dramatically if not completely ceased. I have seen a real boost in their self-esteem through being attached to the project.

One boy has been having many issues around the school, but he has attended every lesson and has been really active.

p. 33⁷⁹

Short interventions, usually referring to a one-off session, were regarded by teachers and external facilitators as having short-term impacts⁹⁴ and as even counter-productive.⁸¹ DMSS reported that young people who received a 'high dosage' input were more able to recall the content of sessions and were more reflective than those who were exposed to the programme for less time and that they 'tended to comment on their personal development as well as their learning' (p. 31);⁷⁹ for instance:

I learnt a lot of skills as well, leadership skills, because it was hard going up there in front of people. It was good to learn those skills, because I am a lot more confident now.

p. 31⁷⁹

TABLE 24 Main outcomes for children and young people reported in the evaluation studies reviewed

| Programme, author, date of publication, country | Evaluation methods | Positive outcomes | Negative outcomes | Gender differences | Other |
|---|---|--|--|---|--|
| Relationships without Fear, Hale <i>et al.</i> , 2012, England ³⁸ | 1133 pre- and post-intervention questionnaires with 3-month follow-up of intervention group and control group; five focus groups with children and young people | The programme generally reduces the acceptance of domestic abuse and with younger children of beliefs about retaliatory aggression | Some misinterpretations of psychological abuse, power and control Some younger children learned some unintended messages about stranger danger and the culpability of victims | Both boys and girls had improved attitudes although girls were less accepting of retaliation and domestic abuse from the outset | Not successful in promoting help-seeking from adults in relation to domestic abuse |
| Zero Tolerance Respect, Reid Howie Associates, 2002, Scotland ⁸⁸ | 236 pre and post questionnaires; 74 young people in focus groups; 37 interviews adults; content analysis | Increases in knowledge and skills were reported by staff and students 80% of young people reported learning more about respecting others and violence and abuse; over 70% better communication skills, over 75% understood gender equality more | | | Still undesirable attitudes to gender stereotyping and some forms of harassment |
| Seven Domestic Abuse Programmes for Adolescents in Kent and Medway (see Table 22) | Not reported | Project Salus: reduction in the number of young people engaging in violent abusive relationships; increased awareness of domestic abuse and its impact; increased number of children and young people reporting positive attitudes and behaviours in relationships and improved conflict resolution skills | | | |

continued

TABLE 24 Main outcomes for children and young people reported in the evaluation studies reviewed (continued)

| Programme, author, date of publication, country | Evaluation methods | Positive outcomes | Negative outcomes | Gender differences | Other |
|--|---|---|-------------------|---|---|
| Manship and Perry, 2012 ⁸² England | Pre and post questionnaire: 103 year 7 pupils, 399 year 9–11 pupils | North Kent Women's Aid: 68% of year 7 pupils would change the way they act towards other people, 95% of year 9–11s reported that it had helped their understanding of a healthy relationship; 85% would know what to do if someone they knew was experiencing domestic abuse; 97% reported increased understanding how domestic abuse affects relationships | | | |
| Tender Healthy Relationships, CRG Ltd, 2005, England ⁸³ | Focus groups; 1403 pre and post questionnaires | Statistically significant changes in the respondents' attitudes to domestic abuse Better understanding of domestic abuse and greater sensitivity to the issues 90% felt that they had learnt something from the project | | Boys more likely to underestimate the scale of the problem, be more accepting of violent relationships, and have beliefs that were more resistant to change Boys generally demonstrated a smaller change in attitudes but these were still invariably positive | |
| Home Office Crime Reduction Programme (see Table 22) | Cheshire: 608 students in seven secondary schools | Some impact on knowledge about domestic abuse against women and some positive changes in attitudes | | | Cheshire: the impact may be only short term |

| Programme, author, date of publication, country | Evaluation methods | Positive outcomes | Negative outcomes | Gender differences | Other |
|---|--|---|--|---|--|
| Hester and Westmarland, 2005 ⁹⁴ | Bridgend: 653 pre and 422 post questionnaires; two focus groups; seven student narratives in one school; interviews with five head teachers or PSHCE leads | Less positive results in Thurrock secondary school with fewer sessions | | | Bridgend: inconsistency among pupils as to what was domestic abuse was |
| England and Wales | Thurrock: questionnaires with 68 primary school children; 400 pre and 250 post questionnaires in two secondary schools and follow up at 9 months in one school (n = 250) | | | Thurrock: Primary schools: overall, 60% of boys and 40% of girls thought that their views or behaviour had changed Secondary schools: positive impacts were more evident for girls | |
| Domestic Abuse Awareness Raising Programme, Ellis, 2006, England ⁸¹ | 227 pre and post questionnaires analysed using paired t-test; seven focus groups (37 children and young people); semistructured interviews (17 adults); non-participant observation (31 lessons) | Primary school children had increased understanding of impact of domestic abuse on children, gender equality and help-seeking Statistically significant changes in some knowledge, understanding and attitudes to domestic violence, gender equality and help-seeking among young people | Primary school children found the concept of domestic violence difficult to grasp, particularly non-physical abuse Some boys in secondary schools reinforced stereotype of perpetrator ethnicity and domestic abuse | Girls in an independent secondary school showed greatest changes in knowledge and understanding, while some boys who received one session only smallest change in desired direction | Disclosure rate of about 1:48 in participants at time of programme |
| Domestic Abuse Prevention: Peer Educator Project, Walton, England ⁸⁰ | Pre and post questionnaire with young people (n = 61); evaluation forms with peer educators (n = 10); interviews with two teachers, three peer educators and four external stakeholders | More than half of all pupils said the most important thing they learned was about rape and consent No dramatic attitudinal change | | Particularly encouraging responses from boys in relation to sexual consent and communication, safer relationships and gender equality | |

continued

TABLE 24 Main outcomes for children and young people reported in the evaluation studies reviewed (*continued*)

| Programme, author, date of publication, country | Evaluation methods | Positive outcomes | Negative outcomes | Gender differences | Other |
|---|--|---|--|--|---|
| Tender Healthy Relationships, DMSS, 2012, England ⁷⁹ | Interviews and focus groups with young people in six schools; non-participant observation in seven schools, pre and post questionnaires with young people (n = 163) and teachers | Increase in young people's knowledge and awareness of domestic abuse Large majority had more understanding of healthy/unhealthy relationships (91%), felt more confident in dealing with sexual bullying (73%) and had more knowledge about sources of support (86%) | | | |
| Miss Dorothy, Datta <i>et al.</i> , 2005, England ⁷⁸ | Pre and post questionnaire with comparison; focus groups with children, interviews with teachers | No significant impact on students' levels of self-esteem However, students were statistically more likely to respond positively to statements about perceptions of self 72% of children reported that they felt safer after programme | | Girls were significantly more likely than boys to report feeling safer | |
| Respect, SERICC, 2004, England ⁸⁴ | Not reported | Increase in understanding of self-protective behaviour on particular situations Increased understanding and awareness of domestic abuse | 8% of girls and 23% of boys do not recognise physical violence as domestic abuse 17% girls and 34% boys still think that rape and sexual assault is more likely to be committed by a stranger | Gender analysis in all findings, with differences reported throughout | Understanding of the nature of sexual abuse is less clear |

PSHCE, Personal, Social, Health and Citizenship Education; SERICC, South Essex Rape and Incest Crisis Centre.

Children and young people themselves reported on things they had learned:

It was a subject I had never discussed before and I found out things I never knew.

p. 6⁸⁴

I have learnt what the early warning signs are and that people are willing to help me.

p. 25⁷⁹

I [went] home after learning about abusive relationships and it made me feel like encouraged that I have got a nice home to go to and I am a bit more like . . . my attitude has lifted . . . I didn't stomp up the stairs when asked to clear my bedroom – I just got on with it.

p. 47⁹²

I have learnt being horrible to others is not nice.

p. 193⁸¹

It is also noteworthy that, irrespective of the length of a programme, unanticipated outcomes were often reported, suggesting that it is not possible to precisely predict learning as children and young people interpret and make sense of the content through their existing knowledge and experience; such outcomes could be both positive and negative. One girl, aged 13 years, stated that the programme had reinforced her view that it was possible for women to 'live your own independent life' (p. 202)⁸¹ and yet women's rights had not been explicitly mentioned or discussed. Hale *et al.*, however, reported that 'some children negative unintended messages away from the programme – especially in relation to stranger danger and the culpability of victims' (p. 15).³⁸

Media campaigns

The Home Office led and funded the 'This is Abuse' campaign, which began in February 2010 and was delivered in six waves up to April 2014. *Table 25* shows details of the campaign waves, their focus and the dates delivered. Unpublished reports produced for the Home Office and shared with the researchers are the basis for information included in this section. The reports provided data on the six waves of the campaign listed in *Table 25*.

TABLE 25 'This is Abuse' campaign waves

| Wave | Focus | Dates |
|--------|--|--------------------------------|
| Wave 1 | Teenage Relationship Abuse | February and March 2010 |
| Wave 2 | Teenage Relationship Abuse | September to December 2011 |
| Wave 3 | Teenage Rape Prevention | March and April 2012 |
| Wave 4 | Teenage Rape Prevention | December 2012 to February 2013 |
| Wave 5 | Teenage Relationship Abuse | February to April 2013 |
| Wave 6 | This is Abuse (bringing together Teenage Relationship Abuse and Teenage Rape Prevention) | December 2013 to April 2014 |

A considerable amount of formative research was undertaken in the planning of the initial campaign, which was targeted at 13- to 18-year-old boys and girls, with a slight bias towards those in social classes/grades C2, D and E, parents and carers and a range of agencies working in partnership with the Home Office on the campaign. The principal aims of each wave of the campaign were to challenge attitudes, mobilise communities and provide information on relevant services. The campaigns were multiplatform and included a dedicated website, television, advertisements in a range of locations including online and on mobile devices, the production of materials for partner agencies to distribute and use, and material for parents/carers. The campaign had developed iteratively, with data from each wave being used to inform the development of subsequent ones. Latterly, the focus had shifted towards the conduct of boys as potential instigators of abuse rather than on girls as victims.

The findings reported here are based on material supplied in January 2014 and do not take account of information that may have become available subsequently. The evaluation of waves 2 and 3 of the campaign showed that partner agencies experienced increased levels of help-seeking and the use of 'Need Help' section on the dedicated website also provided evidence of the response to these waves of the campaign. There were over 540,000 visits to the website during 2011–12, with 2500 comments being made on the discussion forums. A high proportion of comments (48% on the rape prevention campaign) were from victims of abuse. Longer-term outcomes from the campaign have not been captured; however, such measures are difficult to obtain.^{108,109} The comments left by some young people on the campaign website's discussion forums show that the adverts helped them to understand what abusive behaviours were and that they had been raped:

I used to convince myself that what happened to me wasn't rape and that it was my fault, but after seeing this advertised made realise that what happened to me wasn't my fault and I feel so much better about myself that he was an animal and I was just the victim. Thank you for this video as I was only 15 and am now 16, has helped a lot.:)

this website is so good and helpful! I never spoke to anyone about my experience because i was worried no one would understand but on here people who actually know what you have been through can reply to you, it's helped me so much and now i am seeking the right help to get my life back to normal and to deal with my feelings. I'm so relieved i found this website, I'm now having counselling but i could have never done it without getting advice from this website, i hope everyone else on this website who has been hurt can now feel more confident and now feel as though they aren't alone :) xxx

Summary of Chapter 5 findings

The evaluations reviewed here reflect the distribution of programmes between settings reported by the mapping survey (see *Chapter 3*) with the majority of interventions delivered in secondary schools. However, a substantial proportion were delivered in primary schools where content was focused less on domestic abuse and more on friendship and personal safety. Early intervention through work with younger children to lay a foundation in relationship education is in line with current policy emphasis on early intervention¹¹⁰ and might prove valuable in preparing children for programmes in secondary school that take a more explicit focus on domestic abuse. Very few programmes addressed the diversity of audiences with little focus on the experiences of BAMER young people, sexuality or disability. Despite a recent shift towards addressing violence in young people's relationships, many UK programmes, unlike the North American programmes reviewed in the previous chapter, also focused on domestic abuse in adult relationships with children as witnesses. The programmes evaluated were mostly undertheorised or at least the theoretical approaches were not made explicit; however, the gendered nature of domestic abuse was evident in many of these programmes.

Most of the programmes were delivered by professionals from outside education, although, increasingly, a partnership approach with teachers was emerging. A number of programmes had adopted a 'whole-school' approach with the intention of embedding the issues into school culture and curriculum with teachers delivering the work and schools taking greater ownership of the initiative. The question of who should deliver programmes is complex, with advantages and disadvantages to both approaches. External staff brought knowledge and expertise on domestic abuse but some lacked skills in managing group dynamics; however, teachers were often described as expressing anxiety about the topic and about dealing with disclosures.

The review suggests a complex and challenging picture of interventions in the UK. However, most children and young people responded positively when programmes were well designed and delivered. The issue of some resistant boys poses the problem of how best to engage them while retaining a gendered understanding of domestic abuse. The evaluations show that children and young people's knowledge and understanding can be increased and that some change in attitude is achievable, although these evaluations do not offer evidence of behaviour change. Nevertheless, many schools and teachers regarded the programmes as positive and relevant to their students.

The evaluations themselves were mostly small and local, and funded by the voluntary sector or local community safety partnerships rather than the Departments for Education or Health, although the Home Office had funded a small number of evaluations as part of crime reduction initiatives. Methodologically, these evaluations were mostly qualitative; this also distinguishes them from North American programme evaluations, which are predominantly quantitative. Consequently, they are generating different forms of evidence regarding the effectiveness of initiatives.

Chapter 6 Consultation with young people and experts

Introduction

This chapter reports the findings from the two forms of consultation utilised for this study. These were, first, the study's three consultation groups – the young people's group, the media group and the education group – which each met on three occasions. This iterative approach to consultation made it possible to feed the findings of these groups into the design of research tools and into analysis and interpretation of the results. These consultations were also valuable in contributing to an up-to-date picture of preventative initiatives in the UK, teasing out new directions and challenges in developing these interventions and exploring both the broader aims and implementation of preventative programmes for children and young people. Obtaining the perspectives of young people themselves was felt to be particularly important in establishing the key elements of what makes for effective and acceptable approaches to prevention in domestic abuse for this audience.

The second form of consultation involved individual interviews with 16 international experts involved in the design, delivery and evaluation of preventative interventions in the USA, Canada, Australia, New Zealand and the UK.

A full account of the approach to establishing the groups and selecting individuals for interview is provided in *Chapter 2* and details of those participating in the consultation groups are provided in *Appendix 4*. Each of the groups met on three occasions: spring 2013, autumn 2013 and towards the end of the study in summer 2014. A schedule identifying the main questions to be addressed was provided for all consultation group meetings and a topic guide was used to structure the individual interviews (see *Appendix 5*). A range of materials designed to stimulate discussion was employed for the group discussions and group members were also provided with updates on the progress of the research. We were also able to create a dialogue between the three different groups by using material produced by one group to stimulate thought and discussion in another.

The young people's group was an established group whose members were familiar with the process of providing their views on a range of social and health issues (see *Chapter 2*). This group had a large fluctuating membership so the size and membership of this group varied from one meeting to the next; however, a few young people were present for all three meetings and this provided some continuity and consistency.

Findings from the young people's consultation group

Aims of preventative interventions

Group members identified raising awareness of domestic abuse so that young people could recognise it in their own relationships as a legitimate and important aim of any preventative intervention. They argued that young people often see domestic abuse as something that happens between adults and that successful interventions were those that would make young people recognise that this something that was happening in their own lives. This point was made in more than one group, but one group member summed up the message that needed to be delivered to young people as: 'Even if you don't realise it,

it's abuse; it is abuse, sometimes you don't know what abuse is' (young people's consultation group 1). Another participant pointed out that developing young people's consciousness of the prevalence of domestic abuse could facilitate disclosure of personal experience:

... if you're being abused and ... you might not realise it's abuse and you might not think it's that important, but if you see all these statistics on the TV and anywhere else where it's being advertised ... you might feel more comfortable with it, thinking that it's something which you can have a say in because it's something that matters and it's not something which is just happening to you ... but is something you can speak about openly ...

Young people's consultation group 1

However, some young people made the point that awareness was necessary for change but was insufficient on its own. They argued that young people needed to know that, once they acknowledged that they were in an abusive relationship, services would be available to help them: 'it makes people aware but then they need the help afterwards' (young people's consultation group 1). Group members commented that young people also needed to know the consequences of seeking help:

I think that they should bring to light what actually happens after you call the people ...

Young people's consultation group 1

It was noted that there was a fear that disclosure of domestic abuse in their parents' relationship might lead to children being taken into care.

A particularly sophisticated critique of the Home Office's 'This Is Abuse' 2012–13 media campaign (see *Methods of delivery* for further views on this campaign, which was generally positively rated) was delivered by one group participant, who argued that the campaign focused too heavily on individual responsibility for changing behaviour and that more emphasis should be placed on the role of wider social support:

It [abuse] kind of seems to be something you take upon yourself to stop doing ... it's only the two people in the relationship's problem and not anybody else's ... it's kind of just reminding them of the situation they're in, rather than what to do.

Young people's consultation group 1

Methods of delivery

Most of the young people participating in the consultation meetings had encountered the Home Office's 'This Is Abuse' campaign (discussed in *Chapter 5*) through the television. In the main, they considered this an effective, hard-hitting campaign and they noted that television campaigns had a wide reach, did not require the audience to make an active decision to view them and could be watched without incurring stigma (young people's consultation group 1). It was also noted that television or film had the capacity to reach those who were less able or ready to use written material:

... having moving images, videos, is more effective than text. (Male)

Yeah, you've got to read text and if there's a lot of text then a lot of people don't want to read it. (Female)

Young people's consultation group 2

Group members were less enthusiastic about the use of advertising or pop-ups on social media to communicate preventative campaigns. There was a sense that such messages were intruding on their space and attempting to distract them from their own activities:

... people will always put adverts on Facebook and on Twitter and on YouTube thinking that young people are going to watch them but I don't think they ever work really, because when you're on Facebook and YouTube and Twitter ... I don't think you want to be coming across these kind of things. ... (Female)

... it's a bit like cold calling really... (Male)

Young people's consultation group 2

However, it was noted that when such information was communicated via social media by someone who was well known, its credibility and authority were higher and it was more likely to be viewed.

Active participation in prevention initiatives was considered to enhance learning – 'people learn better by doing' – (young people's consultation group 1) and group members were positive about their involvement in school peer mentoring schemes which had been established with the aim of older students supporting younger students with a wide range of problems and queries. Raising awareness through participation in creative arts was described by one group member who had been part of a 'flashmob' dance performed globally on the International Day for the Elimination of Violence against Women. Other group members reported reading about it in the local newspaper or watching the performance in school. The participative element together with the public recognition that the event achieved at the levels of the school, the community and nationally were felt to be important for achieving momentum towards change:

... doing it on a regional level but I think when you do something and it's on more of a national level ... you like feel like you're a part of something, like obviously the dancing, there are people doing it all over the world, so you felt like it's a worldwide movement.

Young people's consultation group 1

However, it was noted that not all young people had the confidence to participate in drama or dance. Non-participative theatre could also be an effective medium for engaging an audience:

... it's quite eye-opening and people are sat there watching it ... you've not really got much of a choice but to watch it.

Young people's consultation group 1

Gender and sexuality

It was argued that some preventative programmes were 'biased' in their focus on women as victims of domestic abuse and that this perception could provoke resistance. One young person noted in response to reading materials designed for discussion in PSHE classes:

... it all seems so biased ... it just seems like it's only men that do it. I think that it would cause a lot of tensions and arguments ... if I was a teacher ... it'd be a lot of effort to plan something that would probably end up causing people to just start moaning or arguing ...

Young people's consultation group 1

Both young women and young men participating in the consultation groups felt that it was important that interventions also identified boys as vulnerable to abuse in their relationships, and they cited a storyline in *Coronation Street* (a popular soap drama) which depicted a man as the victim of domestic abuse:

I don't know if anyone watched Coronation Street, but Tyrone, the storyline of Tyrone getting abused by his wife, rather girlfriend, and he never fessed up about it ... and it's just situations like that actually do happen in real life and it's because there's no awareness about it.

Young people's consultation group 1

At the second meeting of the consultation group, group members reported that they had been inspired, in part by the experience of participating in the preventing domestic abuse for children and young people (PEACH) study, to write three short drama pieces on the theme of domestic abuse. By the end of the

study, these had been performed and produced on DVD by a local theatre group and distributed to schools for use in PSHE classes. The three scenarios involved:

A male being violent to a female, female being violent to a male and then a same-sex couple . . . we wanted kind of the same thing to happen in each one, but it was more to see the reactions to . . . the changing of who kind of carried out the violence to see if that made an effect on people . . .

Young people's consultation group 2

An emphasis on approaches that emphasised equality between men and women was reiterated across the groups in different ways. This young woman argued for programmes that identified commonalities rather than gender difference:

I think to an extent, what they need to get out of these classes, is they're [boys and girls] not that different. If maybe you're a guy or a girl, you can exude, I don't know if that's the right word, but the same kind of violence in a relationship. And I think the one thing that needs to be emphasised is equality because there is a lot of double standards I think.

Young people's consultation group 3

Young people also identified the potential for gender bias in the delivery of programmes. Young women in the consultation groups argued that teachers often focused their teaching on boys in the classroom and they suggested that a perception of boys as abusive might feed into this tendency to focus on boys' needs and could contribute to reports of behavioural changes following exposure to the 'Fourth R' programme in boys but not in girls:

More people think guys are more angrier . . . which is why when these lessons or things like that are being delivered, I think sometimes there is a possibility that the concentration goes on guys more than girls.

Young people's consultation group 3

There was uncertainty whether programmes should be delivered to single-sex or mixed groups, with those who went to single-sex schools saying that it had felt 'more comfortable and natural' (young people's consultation group 1) to address such issues in single-sex groups. Mixed-sex groups were felt to contain potential for gender-based conflict:

Because if you have a mixed class . . . if you showed the advert that's on [This Is Abuse], some girls will probably say: 'Oh, I bet he's like that or whatever' . . . And then the guy would be like: . . . 'that girl's probably frigid' . . .

Young people's consultation group 3

In the third consultation group, where the young people discussed the possibility of programmes having differential effects on boys and girls, it was suggested that programmes could be delivered in part to single-sex groups and, after some initial sessions, to mixed groups.

Delivering interventions in schools

Although those participating in the consultation meetings had patchy and limited experience of school programmes that had addressed domestic abuse prior to entering the sixth form, young people were clear that schools had a role to play in delivering preventative interventions:

The point of school is to educate so . . . it is really good to do it at school as in terms of raising awareness.

Young people's consultation group 1

Group participants thought that programmes should be delivered in schools to small groups if possible and on a regular basis:

... if they're coming once a year, that's not going to make an impact ... if it's more regular, that makes more of an impact.

Young people's consultation group 1

However, there were concerns expressed about whether or not schools could manage the confidentiality required for disclosure and this reflects young people's insistence, discussed above, that interventions need to take account of the process of disclosure and its possible consequences for young people.

Moreover, some schools were described as lacking the confidence to address the issue:

F4: I think with like some schools ... they are a bit nervous about bringing in ...

F1: Touchy subjects.

F5: Because some schools are scared that if they bring it up ... people in the class are going to tell other people outside the classroom and then it's just going to get spread ...

Young people's consultation group 1

This theme of schools' concern about protecting their reputations was reiterated by the expert education consultation group.

Another point expressed by both the expert education consultation group and by the young people's group was the way in which the demands of the curriculum could make it difficult to allocate space to teaching on issues such as domestic abuse. Participants in the young people's group thought that this was particularly the case for the over-16s, who were preoccupied with exams.

Young people described teachers as often lacking the necessary expertise to deliver programmes on domestic abuse:

... you can tell when someone's like bluffing it ... especially like teachers, especially when they've been given briefs that they don't know anything about and they've just been asked to do a presentation, you can tell they're practically just reading the slides on their notes, so that's really bad, so obviously whoever's doing it got to have the knowledge ...

Young people's consultation group 1

Knowledge needed to be reinforced by experience or expertise, and teachers often failed to convey this:

If it's like just a teacher delivering it and they've got no experience and it's almost like, well why are you telling me? You don't know anything about it.

Young people's consultation group 1

Similarly, participants in the third consultation group who discussed the 'whole-school approach' (see *Chapter 5*), were dubious that staff across the school would have the confidence or skills to deliver preventative messages on domestic abuse:

Those kind of teachers where they're so stuck in the past, where they wouldn't want to do areas like this. Where they're just focused clearly on educating their subject and don't want to let anything else get in the way ... they might be scared of bringing it up ...

Young people's consultation group 3

However, another group member described an English teacher who had succeeded in delivering preventative messages about domestic abuse in the context of studying *Of Mice and Men*.

Target audiences

In response to hearing that some programmes seemed to benefit some groups of young people more than others, one young person suggested that programmes should be targeted to those who are vulnerable:

M: . . . those people who are, I'm going to use that word, vulnerable, from either being victims of it and the perpetrators . . . I think people with low, what is it, self-confidence in themselves.

However, this point provoked disagreement:

F: . . . I just feel very strongly that it should be for everybody because I don't think you can pick out the vulnerable from the non-vulnerable . . . You also isolate people if you take them out and say, well you're most vulnerable and you're the most likely to perpetrate.

Young people's consultation group 3

The second consultation group noted that school populations could differ considerably but it was thought that all schools should deliver preventative teaching as those from more protected backgrounds should know that domestic abuse 'actually happens' (young people's consultation group 2). Young people thought that it was important that schools addressed domestic abuse at an early stage but they were uncertain if programmes that explicitly addressed domestic abuse could be delivered before the age of 13 or 14 as 'any younger . . . it wouldn't be appropriate to bring it up' (young people's consultation group 1).

Authenticity: making it real

A key theme running through all the consultation groups with young people was the importance of authenticity or making 'it real' in investing a message with potency and achieving impact.

Authenticity as described by the young people seemed to have different components. In the first instance, it involved material that was recognisable and meaningful to young people such as the Home Office's 'This is Abuse' campaign, which featured young people close in age to the members of the consultation group:

. . . because of our like age group, we could relate to it a bit more, it seems more real.

Young people's consultation group 2

It also entailed expertise and/or relevant knowledge and experience in those delivering the message. As noted above, teachers were often felt to lack this authentic expertise and were described as just delivering material on healthy relationships so they 'can tick it off the list . . . once a year' (young people's consultation group 2). Similarly, young people distinguished between celebrities such as Jahméne Douglas, who promoted Women's Aid through his appearance on television talent show *The X Factor*, who, because they had relevant experience of the issue, were judged to be 'genuine', and those who were perceived to be using a campaign to promote their career.

Authenticity also involved a message with an emotional charge:

We had a firefighter come in school once and talk to us about fire safety . . . and he was talking and suddenly . . . he's seen so many horrific things that he started like properly crying and everything in front of us and he was very embarrassed about it . . . and, yeah, that changed my opinion . . . seeing real emotion.

Young people's consultation group 2

This emotional charge could derive from the use of real life accounts, narrative or drama. Drama was described as making 'it real' (young people's consultation group 3) and as ensuring that preventative messages were relevant to young people's own experience:

It's like in front of you and then you realise, actually, it doesn't happen miles away, you know, it happens here. And it's so close to home and it happens to people that you might know and, you know, it can easily happen to anyone. And so I think drama kind of conveys that a bit more.

Young people's consultation group 3

Young people in the third consultation group discussed the merits of drama that they themselves developed and performed versus a professional performance. They thought that both could be valuable and described a piece of theatre performed at school by a theatre in education company that had involved questions and after-the-show discussion with students as well as a professional performance:

They kept addressing us like, so say if there was a problem or something, they'd turn to us, like the actual audience and then . . . you would feel involved in the problem. So it felt like it more applies to you . . . So that's why it was a lot more hard hitting because it wasn't just watching, it was you're involved in it, you're watching, you grow attached to the characters . . .

Young people's consultation group 3

Findings from the media consultation group

Campaign aims

Group members identified a range of aims for campaigns for children and young people. In common with discussions in the young people's consultation group, raising awareness in the individual was considered to be a primary goal:

[E]ffectiveness would be . . . they've now thought of what's going on in their relationship.

Media consultation group 2

There was also an expectation that campaigns would provide a 'step on to action' or help-seeking (media consultation group 1) and it was argued that once 'you raise awareness you've actually started an intervention' (media consultation group 1). In common with the young people's consultation group, group members thought that there was a responsibility to ensure that services were available to follow up the consequences of campaigns:

. . . what we don't want is a really cohesive prevention programme, whereby young people, perhaps internalise the message, actually I've been or I'm being abused or actually, I'm worried about my behaviour towards other people. And thinking, 'great, I now know that this has happened, now where do I go?'

Media consultation group 3

However, at the broader societal level, it was argued that campaigns had a role in facilitating conversations about topics that were previously taboo so that:

Domestic violence is something that can actually just be something you talk about without . . . being worried about who's in the room or who's listening or are you offending anyone in particular.

Media consultation group 1

Group members also reiterated the point made by the young people's group who had argued that interventions needed to be 'real' and suggested that campaigns had a role in making the content of taught programmes more relevant to the 'real' world outside school:

A big role is reinforcing those taught programmes because a lot of the time it can feel like . . . something in school is what applies in school and then school is not necessarily applicable to real life . . . the point of campaigns . . . is to reinforce that some of the stuff you learn in school applies and seems relevant.

Media consultation group 1

Mechanisms of change

A number of mechanisms of change were identified by this group. The first of these drew on behavioural theories and addressed changing social norms:

. . . reinforcement is key to changing social norms. And that's what we want to do, is we want to change the social norm. And by making it, by putting that pressure, basically, in a lot of different places, that's how you change the norm.

Media consultation group 3

Destigmatising the topic of domestic abuse and making it an issue that could be discussed openly 'around the water cooler' (media consultation group 3) was seen as part of this process.

The other type of theory employed to explain change was psychodynamic theory, which was implicitly invoked in that campaigns were seen to evoke empathy for the victim's perspective with behaviour change envisaged as resulting from this position of increased empathy. However, group members argued that this form of change was more likely to be found where abusive behaviour was not deeply embedded in a young person's family and social environment and where it was not premeditated: 'raising awareness can help that group because it brings the empathy' (media consultation group 1).

Emotional identification was also seen as the mechanism that made for the effectiveness of drama or narrative:

It works because of the emotional engagement, it's not the fact that it's a story, it's the fact that it engages in emotion . . . Whatever engages people with the heart as well as the head is probably going to be effective.

Media consultation group 1

In this sense, emotion was seen as an aid to learning: impact was achieved through the visceral charge that accompanied a message.

Audiences

There was discussion about the need to 'granulate' campaign material to target different subgroups within the general population of children and young people. Group members felt that, in the first instance, campaigns should emphasise commonalities and target whole populations – 'find the things they have in common first before the differences' (media consultation group 1) – with subsequent campaign elements, such as a particular page on a website, targeted at particular subgroups. The need to target subgroups was felt to vary according to the particular subgroup. It was stressed that disabled children and young people could resent messages that singled them out.

It was argued that preventative interventions were too often focused solely on female victims and that campaigns often failed to reach boys, who were the main perpetrators of abuse:

All the awareness campaigns that I've really had anything to do with have . . . been focused on raising awareness for victims, but not about raising awareness for young people who might be using [that] behaviour . . .

Media consultation group 1

Similarly, it was highlighted that preventative campaigns and programmes 'tend to be very heterosexual focused' and that interventions should recognise and speak to LGBT young people and promote talking 'about the different relationships that we can have' (media consultation group 1).

However, group members noted that it could be a struggle to identify ways of addressing diversity in a short media advertisement lasting less than a minute without risking associating domestic abuse with a particular subgroup. It was felt to be easier to reach subgroups through developing associated materials that targeted particular subgroups or could be used in particular settings such as youth groups, disabled groups, sports groups or young people in uniform such as the Girl Guides, Scouts or Army Cadets. Gadd *et al.*'s¹¹¹ research was cited as evidence that many young men with high levels of abusive behaviour could be reached through the criminal justice system, particularly the youth offending service.

It was argued that appropriately designed and formatted materials were required for younger children who needed to be alerted to the issue of abusive relationships early and that age-appropriate material was already available and was being delivered to the 7–11 age group in schools.

Some immigrant and refugee groups were considered to have brought their own experiences and patterns of interpersonal violence with them to the UK. Group members suggested that those designing preventative interventions in the UK should work with professionals in countries in Eastern Europe and elsewhere to understand how best to work with culturally specific dynamics and attitudes.

Delivery

Group members involved in commissioning and designing media campaigns cited the wide range of media that could be used for delivering campaign material. Mainstream television was only rarely used for advertising because of the costs involved but campaigning organisations had had considerable success with delivering preventative messages through long-standing television programmes which attracted large and faithful audiences. The BBC programme *Newsround* was seen as a useful means of directing messages towards younger children, and group members described how the Home Office's 'This Is Abuse' campaign had moved to using the channels that young people viewed as well as popular soaps to deliver messages on domestic abuse:

. . . now there's a lot more different media channels being used than there were three years ago . . . using Hollyoaks for instance this time round and MTV, and I think they're trying to move to a place . . . where young people are already rather than dragging young people to where they want them to be.

Media consultation group 2

Delivering messages through the narrative medium of a soap drama was considered to be a highly effective way of raising awareness, especially when:

You already know the character, if it's someone that's in their house every day that they recognise . . . that has . . . the integrity of a celebrity that [you] genuinely believe, believe more, the character that you sort of know and love.

Media consultation group 1

Where on-screen advertising was used, it was more likely to be through YouTube™ (www.youtube.com) 'so your film's coming up before Beyoncé's new video' or 'on-demand channels which reach boys quite well on mobile Xbox, PS3 [PlayStation 3™]' (media consultation group 1). It was also noted that boys were more likely to view material through YouTube. However, this approach conflicted with the views of the young people's consultation group, who described such advertisements as intrusive. It was noted that where local campaigning groups were posting material on YouTube, the quality needed to be high in order to compete with other material.

The groups discussed the use of online games to deliver interactive preventative messages to young people noting that 'that's where the kids are socialising these days' (media consultation group 2) and cited examples of such games from both the USA and the UK. Group members argued that apps could offer those playing the opportunity to engage at a number of different levels and that they needed to be 'multiple branched and strongly narrative' (media consultation group 2). There were concerns that the quality of such games was not always sufficiently high to compete with commercial products and that, while a gaming format might be a 'pull factor' for children and young people, the message might become lost in the game format. It was noted that the effectiveness of such approaches had not been robustly evaluated.

While social media were considered to be particularly accessible to young people, more traditional media, including magazines, radio, billboards, and posters on buses and toilet doors, were still felt to have impact. It was noted that free newspapers had retained large readerships and posters and that leaflets could be effective if they had 'a coherent visual identity' (media consultation group 1). Memorability and repetition were identified as essential features of campaigns that had impact.

Group members argued that increasingly, a successful campaign was one that was multiplatform and could be delivered at the local as well as the national level by diverse organisations:

... it has to permeate different areas, so a media campaign, then [a] teacher talks about what's happening about it in school ... And then youth centres are doing the same thing ... so it's more cohesive.

Media consultation group 1

Such an approach would offer a child experiencing domestic abuse 'a whole range of ways ... to be able to buy in to the solution' (media consultation group 2). National and international organisations, such as the Girl Guides, were seen to provide structured networks which could be used to disseminate material and messages to a large audience. However, it was pointed out that competitive tendering processes risked generating competition rather than collaboration between organisations.

It was also suggested that different types of campaigns for children and young people, such as those that targeted bullying and those addressing domestic abuse, could be delivering congruent messages that overlapped so that 'one campaign knocks on to another' (media consultation group 1).

There was considerable interest in identifying ways in which football could be used to deliver preventative messages to young people, both young men and young women. It was noted that UK premier ship football clubs had large educational programmes and sizeable budgets for community work. Football clubs also had the benefit of good reach into their local communities. One representative of a domestic violence organisation described plans for a 'Kick Domestic Violence out of Football' campaign to be delivered during the 2014 World Cup and it was agreed that football clubs could exert 'massive influence' (media consultation group 2). However, group participants also noted that football clubs sometimes failed to distance themselves from the behaviour of players who were convicted for abusive behaviour and that

clubs needed to take on campaign messages in a way that was genuine so that partnerships between campaigning groups and clubs were real; football needed to:

... understand the messages that we want to put through ... there's a massive space we have to get through.

Media consultation group 2

There was discussion about the use of celebrities to spearhead campaigns, and some concern was expressed about the potential for celebrities to deliver conflicting messages. In common with the young people's consultation group, participants stressed the need for celebrities to have authenticity and cited the example of Jahméne Douglas who had grown up with domestic abuse and, on his own initiative, had used his appearance on *The X Factor* to campaign and raise awareness about domestic abuse:

He tweeted about Women's Aid, he asked everyone who, who voted for him to give money to Women's Aid, he did an incredible amount, but none of it was prompted by us ... he's like ... I'm going to use music to raise money for ... abused children and women ... people have connected with him because they connected with his story ... he's interested and genuine, he's always available because he actually genuinely cares about it ...

Media consultation group 1

It was argued that young survivors of domestic abuse who were known and recognisable to young people provided powerful role models and had credence for young people. Male survivors such as Jahméne Douglas were particularly valuable in that they were able to address young men's perspectives.

Campaign content

Group members argued that campaigns that employed positive messages and images and avoided 'hitting someone over the head' with their message were more likely to be successful, particularly with young men:

F1: ... because then it's saying, this is positive images of how to be masculine in society ...

F2: It's that solution focused bit, isn't it?

Media consultation group 1

This is consistent with Stanley *et al.*'s study,¹¹² which found that men in the general public would resist messages that they perceived as too negative towards or blaming of men. At the same time, however, successful messages would need to have 'shock value' (media consultation group 1) if they were to change thinking and raise awareness.

As noted above in relation to television soaps and apps, a strong narrative was identified as a central feature of a successful campaign. A story could personalise an advertisement and evoke emotional engagement from the audience, which was felt to be key to a campaign achieving an impact. Successful advertisements were solution focused and worked by:

... telling the story, saying, you know, this is a problem you might encounter, this is how you solve it.

Media consultation group 2

The group discussed successful commercial advertisements that used a story to convey the message that 'you may be a loser like this kid, but look how you can transform yourself into a winner' (media consultation group 2) and argued that such narratives held particular appeal for boys. It was suggested that boys were especially interested in messages that promised to increase their ability to attract a girlfriend; one representative of a domestic violence organisation reported:

We just did a big piece of research on that and that just seems to be what boys want. They want to know how to be successful with girls, how to be a good boyfriend.

Media consultation group 3

Group members also highlighted that multiple messages would be required in order to successfully target different groups of young people. While raising awareness might be a sufficient outcome in some groups of young people, with other groups the task was to change abusive behaviour that was established and reinforced in their families and local communities:

There is no one type of instigator . . . raising the empathy is enough for some young people . . . for others, particularly with the more disadvantaged, it's so ingrained, their lives are so much more complex, they haven't got that ability just to change their lives like that.

Media consultation group 2

Group members argued that campaigns had 'to really target what we think is behind the behaviour' (media consultation group 2).

One of the main challenges identified for campaigns was competing with conflicting messages aimed at young people:

M: The competing . . . messages that are . . . contradictory. But actually, that comes from family and neighbourhoods as well as . . .

F: Well it also comes from exactly the same environment that we've just been discussing. What you can get on a music video or what you can get on extreme pornography . . .

Media consultation group 3

Group members suggested that, in addition to encouraging young people to approach the media in a discriminating manner, such conflicting messages could be countered by showing positive images of people changing their behaviour and achieving positive relationships:

F3: I did a lot of work with Oxfam, in terms of poverty. And . . . they were saying, people get desensitised . . . And . . . their take on it is to show the after-effect and really innovative work that's being done to kind of tackle this. And I think that's definitely a way that could be, you know, going forward, in terms of showing people actually what support is available . . .

F4: Yes, actually we need to see some stuff about . . . what a healthy relationship looks like.

Media consultation group 3

Involving young people in campaigns

Involving young people in developing and delivering campaigns was identified as a means of 'making it relevant', and group members stressed the value of interactive approaches. Young people were keen to be involved with initiatives involving social and other media – 'because we're using media, it resonates with young people, it chimes with them' (media consultation group 2) – and delivering messages that young people helped to devise or voice made it more likely that the language was appropriate and that the

message was closely targeted. Involving young people in the production of campaigns had benefits that extended beyond the life of the campaign:

There's some really good examples of co-design work that's youth led and that, that has really good impact, because you effectively create evangelists, you create disciples for your issue . . .

Media consultation group 2

Involving young people in a proactive way also served to 'give them a voice' and recognise their expertise, and was considered to invoke a children's rights perspective:

. . . co-creation across the whole cycle, we're not just using them as research subjects they're there to actually create the campaign, so . . . they're no longer passive recipients . . . they become sort of active agents.

Media consultation group 2

. . . they have a right to have a say in what's being delivered, how it's being delivered and to participate in that.

Media consultation group 1

Delivering messages to young people through their peers was argued to be an effective means of communicating, as it replicated their natural tendency to look to their peer group for support. Some campaigning organisations reported using youth ambassadors to reach children and young people more effectively:

We have theme ambassadors for our seven themes . . . and then we have a nationwide network of young people's groups and we consult them on all of our marketing campaigns . . . the theme ambassador might speak at an event specifically but we would consult everybody on what the event topic would be . . .

Media consultation group 1

Group members also described a recent initiative funded by the Department of Health where young people who gave regular advice to their subscribers through online video blogs on YouTube produced a series of videos called 'Awkward Conversations' that addressed issues such as talking to parents about sex. This involved ceding control of the initiative to young people themselves, which could be challenging, but it was noted that new technology made a shift towards the cocreation of such campaigns more likely:

Technologies democratise communications to the extent that young people . . . instead of just consuming content themselves, they are now architects of that, they are making it, and we have to accept reality that we can't retain all control, we have to allow conversations to happen . . .

Media consultation group 2

Group members pointed out that a high proportion of young people did have positive attitudes towards relationships and that those positive attitudes should be harnessed through peer pressure to achieve change. Bystander approaches (see *Chapter 4*), which aimed to empower young people to challenge abuse in their peer group, were mentioned in respect of such an approach (media consultation group 1). In the same vein, it was argued that creating a positive climate in which young people could express their own views was more likely to achieve change than delivering prescriptive messages:

. . . creating those conversations as opposed to just giving what those answers are . . . I think sometimes when young people are able to defend and, and have a dialogue with each other about that, it's better than us saying this is the answer.

Media consultation group 2

Peer mentoring was seen to be another means by which young people could deliver prevention messages to other, usually younger, children and young people. The importance of providing peer mentors with appropriate training and support was emphasised, and it was suggested that this provision could be built into further and higher education programmes.

It was agreed that, in order to work with young people in a participatory way, organisations developing campaigns needed to evoke the trust of children and young people. For example, it was noted that young people might resist messages delivered by the criminal justice system or social services, although group members noted that the probation service or police sometimes partnered up with other organisations to deliver services or messages to specific groups of young people. The importance of trust between young people and the information source was identified in a number of meetings of this expert group, and it was noted that the format in which a message was delivered could impact on that trust. For example, young people were often sceptical about advertising, which could affect how a campaign was viewed:

... we can't be seen to be advertising ... That's the problem. We're using, a lot of the time, the same mechanisms, but if we're seen as advertising you immediately lose trust and genuineness.

Media consultation group 3

Measuring effectiveness

Participants in the media consultation group agreed that there was a need for more evidence on what made campaigns effective. They expressed concern that current campaigns aimed at preventing domestic abuse were being developed from a slim evidence base consisting mainly of the previous experience of those designing campaigns, and that there was a considerable amount of reinventing the wheel with local organisations developing their own campaigns 'from scratch' (media consultation group 1). Underfunding and short-term funding were identified as basic problems resulting in a lack of robust evaluations and pilot projects which were not sustained: 'just as it takes off, the money disappears' (media consultation group 1).

Measures of campaign impact identified by the group included increased help-seeking or service use, an increased readiness to discuss domestic abuse openly at a social level and increased empathy for others from perpetrators. It was suggested that evaluations of preventative interventions should include evidence concerning subsequent disclosures. Health outcomes were also mentioned and it was anticipated that a successful campaign would result in an increase in reported incidents of domestic abuse, followed in the longer term by a reduction in reporting.

There was also interest expressed in commissioning research that examined the targeting of preventative interventions, especially the degree to which media campaigns should be gender specific:

That's, for me, one of the stand out [pieces of] information that would be extremely useful to organisations who will say, 'am I going to do a gender specific programme? Am I going to make sure that I, when I do evaluate my programme, if I'm delivering it to both girls and boys, am I going to look at boys and girls differently in a way, and how's that going to affect anything later on that I do?'

Media consultation group 3

Findings from the education consultation group

The membership of this group included professionals, advisers and researchers from within education and representatives of domestic violence and other voluntary sector organisations involved in developing programmes for delivery in schools. It was notable that the views of these two stakeholder groups tended to diverge on some issues. As with the other consultation groups, a range of questions and materials including progress reports from the PEACH team was used to stimulate discussion. While the term 'programme' is used below, it was evident from these group discussions that much of the material aimed at preventing domestic abuse was delivered in one-off or in a series of lessons and, in this context, the term 'programme' would be stretched very broadly to include taught interventions that were not

manualised, although they might draw on material produced by external organisations. Moreover, as discussed below (see *Programme aims*), for some group participants, particularly those based in schools, these interventions were less likely to be conceptualised as domestic abuse prevention but were rather considered to address 'healthy relationships' or 'care guidance'.

Programme aims

There was some resistance within this group to conceptualising material on domestic abuse delivered in school as a preventative intervention that aimed to change behaviour:

F1: Are you trying to change behaviour or are you trying to change expectations of what behaviour is acceptable and what is not, which is a different thing I think.

F2: Yes, I think we're talking about attitudes.

Education consultation group 1

This was in part because changing behaviour was considered too ambitious an aim for an intervention delivered in school:

... you're expecting an awful lot of a PSHE class, if you get one, to actually change behaviour ... if you take the teenage pregnancy thing ... SRE [sex and relationships education] was one aspect of eight different things to reduce the pregnancy rate ...

Education consultation group 1

Group members, particularly those located within education, emphasised that children were exposed to a wide range of competing influences outside school; these group members were more likely to identify the aims of such programmes as contributing to well-being or as an aspect of care guidance which was considered a more congruent task for education:

Schools now are definitely showing an interest about how they carry out their duty of care to children who they know are identified as suffering domestic violence, so ... it's within the education system.

Education consultation group 1

It was highlighted that care guidance or pastoral work was now recognised as making an important contribution to the goal of academic achievement and group members argued that, from a child's perspective, the two aims were integrated:

You're never going to raise standards if your relationships aren't working ... schools would say 'well there's a pastoral curriculum but then there's the academic curriculum', no there's not, there's the experience that children have in school, they don't separate it like that.

Education consultation group 1

Group members also noted that schools had a statutory responsibility 'to prepare children and young people for the roles and responsibilities for adult life' (education consultation group 1).

However, those group members involved in designing and developing programmes for domestic abuse organisations to deliver in schools were more likely to conceptualise programmes as aiming to reduce domestic abuse, and wanted to make that objective explicit:

It's helping teachers, whole school communities and pupils recognise that there is a link between bullying behaviour generally, poor relationships generally and the potential to become a future perpetrator or victim survivor ... And if you don't use that language then it's almost like the domestic violence does, does become invisible.

Education consultation group 1

Theories and mechanisms of change

Unsurprisingly for a group consisting of those working in or close to education, much of the discussion around mechanisms of change drew on cognitive theories:

You want young people to be more knowledgeable . . . to have a chance to reflect on their values and clarify them.

Education consultation group 2

You have the choice to behave like this . . . you have a choice to behave like that, and the consequences of that and that or this and this . . .

Education consultation group 2

In common with the arguments made by the media consultation group (see above), group members argued that preventative interventions needed to promote understanding of what constituted positive behaviour as well as assist children to identify abusive behaviour:

. . . you need to understand what a healthy relationship is in order to be able to understand an unhealthy one.

Education consultation group 2

However, group members also argued that children learnt behaviours through modelling the behaviour that was observed around them:

If we're looking at this type of learning so much of it is absorbed unconsciously through that day-to-day interaction, how we do things here.

Education consultation group 1

What happens in the corridors and the playgrounds . . . is actually more important . . . than what's delivered in 40 minutes or an hour and 10 minutes, once a week.

Education consultation group 1

As in the other consultation groups, there were also references to the affective component of a programme, and group members argued that the relationship formed with whoever delivered the programme was crucial:

. . . it's actually the relationship . . . It's about a young person saying I met somebody from the outreach service, they were really nice . . . That's the critical learning, not what they talked to you about, so when you have a problem in your own life, you'll think I'll phone them, they were nice, and that can be more powerful than actually the content.

Education consultation group 1

There were identifiable differences between group members regarding their understandings of the nature of the change that might be achieved. Group members representing domestic violence organisations were likely to consider that programmes were raising awareness about gender equality, while those from within the education system were more likely to focus on imbuing positive caring values or developing understanding of healthy relationships. Some group members from the domestic violence sector who were involved in producing programmes for schools to use noted that the language and concepts used in schools differed according to the school they were working with:

I know the schools where I can say 'hey there's another resource for violence against women and girls' . . . And at another school I'd have to say 'ooh, I've got some more staying safe stuff'.

Education consultation group 3

Distinguishing audiences

Age

Distinguishing programme audiences by age group was a recurrent theme in this group and the need to vary both content and language according to developmental stage was emphasised: 'the concerns of year 7s are very, very different from concerns of year 10s' (education consultation group 1). Group members noted that they were now delivering programmes to younger age groups than had been the case in the past:

We're having to go younger and younger all the time, schools are saying to us that these issues are creeping in younger and younger.

Education consultation group 1

One group member commented that if schools were to address FGM, they would need to target children as young as 7 or 8 years, who were one of the main groups vulnerable to this form of harm.

Finding the right language and concepts to present material was particularly important if preventative interventions were going to be acceptable to pre-school organisations, primary schools and the parents of younger children:

No children's centre or infant nursery school is going to have a problem with the concept around taking turns, being a good friend, you know, speaking to each other nicely, that's fine; it's putting it within the framework of domestic violence prevention that makes some schools get a bit, you know, worried and anxious.

Education consultation group 1

At the other end of the age spectrum, the legal age of consent for sexual intercourse was also felt to exert influence on what could be taught, with concerns expressed that some teachers might feel unable to discuss material that might be interpreted as condoning sexual intercourse before the age of 16 years.

A number of group members identified the need for layered or 'spiral' approaches to delivering preventative programmes so that appropriately adjusted material on domestic abuse or healthy relationships was encountered across a child's school career as well as through the curriculum:

We go through from children's centres to infant, nursery, to junior, primary, secondary, and obviously it's a dramatic change from children's centres to year 13 in secondary school but . . . it's all cumulative.

Education consultation group 1

Introducing younger children to the idea of positive or caring relationships with family and friends could prepare them for later input addressing intimate relationships:

So the logical location for this would be nearby relationships, which would be a common theme within primary schools . . . it might be things like learning to take turns and share, which is building that mutual respect, if you've got that in place and you work up by the time you do an intervention with 14-year-olds, they're already coming to that learning with a set of values, set of beliefs, ready to take that on.

Education consultation group 1

Interventions might be delivered to over 16-year-olds in the setting of further education, where the general studies class usually provided the context for such work. Further education colleges usually had student welfare services, which could take responsibility for delivering material on domestic abuse.

Gendered groups

Arguments were made for delivering programmes to both single-gender and mixed groups:

... they feel a bit freer sometimes in a single-gender group to express opinions.

... we live in a mixed-gendered world don't we really? And I actually think that it's an opportunity, in a group, for them to express the male, female opinion as a group to each other.

Education consultation group 1

Group members also reiterated the point raised by the young people's consultation group that gender inequality could impact on delivery of the programme:

F1: A lot of teachers ... can be gender blind, you know, the faceless bunch will be some of the girls who have got lots of feelings and ideas they want to express but what is noticed is the acting-out boy.

F2: I think teachers do though, can reinforce those gender roles.

Disabled/special needs children

While arguing that interventions aimed at raising awareness regarding domestic abuse should be available for all children and that they should receive the same messages, group members also suggested that children with autism, those identified as having special education needs or those in special schools might need material particularly tailored to them. It was noted that disabled children had increased vulnerability to all forms of abuse and that this might apply to domestic abuse as well.

Children and young people at risk

Some of those group members working for voluntary sector organisations that developed and delivered programmes described delivering programmes in youth centres, pupil referral units (PRUs) and youth offending centres. Group members argued that while teaching within the traditional curriculum often failed to engage these groups of young people, teaching on domestic abuse could prove more relevant for them:

Because it mattered to them because it was about their lives and what affected them.

Education consultation group 3

Lesbian, gay, bisexual and transgender young people

The importance of addressing abuse in same-sex relationships was emphasised, and while some group members considered that their local programme specifically addressed LGBT young people, others felt that this group was neglected:

We actually worked very closely with an LGBT organisation in Manchester. And they actually come in and deliver a workshop with our year 9s, purely on homophobic bullying.

Education consultation group 2

... young people we spoke to definitely didn't think they were addressed at all. They just felt pushed aside and isolated by discussion of relationship abuse or sex education.

Education consultation group 1

While there was some useful material available for teachers to use, it was noted that preparedness to engage with the perspective of LGBT groups varied considerably between schools and between teachers.

Personal, social and health education

It was generally agreed that schools were an appropriate venue to deliver preventative programmes addressing domestic abuse, as a school:

... is a community where children are for a large number of hours and therefore in that sense alone it's a very good place to site any work that you're going to do because you're touching most children.

Education consultation group 1

Personal, social and health education was a suitable place to locate these programmes, although it was noted that academy schools might not include PSHE in the curriculum. In these schools, material on healthy relationships or domestic abuse might be delivered via form periods and form tutors. There were concerns that academy schools were prioritising academic learning and that PSHE lacked a statutory place in the curriculum and was, consequently, low in status and under-resourced:

It's probably the most patchy theory or subject on the curriculum, in fact in some schools it's not even a subject ... we've got non-statutory PSHE ... we've got no training for PSHE, worth mentioning in initial teacher training ... well-intentioned teachers being transferred into PSHE.

Education consultation group 1

An Ofsted report¹¹³ that identified that only 39% of secondary schools were teaching PSHE was cited. The low status of the subject and the lack of PSHE training at the qualifying level meant that although some teachers had accessed specialist PSHE training post qualification, some of those teachers delivering material on healthy relationships were not trained PSHE teachers and lacked the relevant skills and confidence:

... we're being asked to evaluate Concorde. But we'll not take into account the fact that some of the people flying it will be trained pilots and some people won't know what, how to pull the wheels up.

Education consultation group 1

Whole-school approaches

There was general support across the three meetings of this group for whole-school approaches, which were seen to increase children's exposure to the key messages:

... the intervention is being reinforced from lots of different sources, so it's a sort of multimodal approach ... you've got the actual curriculum; you've got teaching; changing teacher attitudes and so changing teacher behaviour; you've got the young people ... with buy-in. So ... basically doubling, tripling, quadrupling the amount of influence the intervention's got because it's coming from so many different sources.

Education consultation group 1

However, while material addressing domestic abuse could be delivered in a range of lessons including drama, physical education, information communication technology (ICT), English and history, it was argued that PSHE was the place where these messages were drawn together:

You still need somewhere to say to young people, remember we did that work on assertiveness in drama? Do you remember we did that work on, on communication in English? . . . let's bring that together . . . let's really get into it now, and draw on that learning.

Education consultation group 2

The National Healthy Schools Programme¹¹⁴ was cited as an example of an integrated approach 'with a planned PSHE programme . . . supportive curriculum wrapped round good pastoral care' (education consultation group 3) but there was concern expressed that 'after 10 years of Healthy Schools and all that work, suddenly it's all collapsing' (education consultation group 3).

Involving children and young people in planning and delivery

As in the media consultation group, there was considerable support for involving children and young people in the design and delivery of programmes. Group members from organisations external to schools were particularly keen for young people to 'have ownership of the issue being explored' (education consultation group 1). It was argued that:

All the . . . emotional health and well-being programmes, the ones that were more likely to show impact were those where the young people were involved from the very beginning.

Education consultation group 1

However, it could be challenging to ensure that 'you really do get sort of a representative group of young people rather than the more skilful ones, the more articulate ones, the ones who are always volunteering for things' (education consultation group 1), and year heads could assist in identifying those young people who would benefit from involvement. In common with the media consultation group, members of this group identified the potential for creating lifetime ambassadors among young people.

School councils were also identified as a useful mechanism for securing young people's involvement in the design and delivery of programmes but it was noted that this was not consistently implemented. There was also enthusiasm for peer mentoring and it was noted that peer mentors 'hear the problems' (education consultation group 1). However, group members emphasised the need for peer mentors to be appropriately trained and supported to respond to queries about domestic abuse at home or abuse in young people's relationships, as young people did not necessarily give one another positive advice.

Parental and community involvement

Parental involvement was conceptualised as an additional feature of the whole-school approach:

You've got to have that whole school approach but then take it even further and the parents have got to be informed, the parents have got to be supporting the aims . . .

Education consultation group 2

However, this could be hard to achieve and it was pointed out that young people 'don't necessarily want parents involved with that, do they?' (education consultation group 1). Moreover, it was questioned whether or not parents always 'have the skills and force to be able to then support their children . . . Because there are lots of parents who are absolutely freaked out to talk about [it]' (education consultation group 3).

It was also argued that parents from faith communities could be resistant to the early introduction of healthy relationships material:

In faith schools, that would equally be the barrier with the parents, and what parents think is acceptable to be taught in schools and what's not. I think it's in the teacher's head a lot of the time.

Education consultation group 1

However, a group member described his organisation's success in working with parents in faith groups outside schools:

Work we're doing in youth centres and out in the community, inviting them to performances and events . . . we had 250 black parents in this church . . . led by young mums . . .

Education consultation group 1

There was less discussion about how schools worked with other community organisations on this issue, but it was felt that schools were now better linked with other community agencies, such as the police and health and safeguarding services, than they had been in the past.

Programme content

It was noted that national media campaigns had facilitated the delivery of teaching or programmes in schools. Programme material needed to be interactive, fun and engaging. Interestingly, given that some of the trialled programmes such as 'Fourth R' (reviewed in *Chapter 4*) delivered material on dating violence alongside material on sexual health and substance abuse, there was a case made for creating links between teaching material aimed at preventing domestic abuse and other PSHE issues:

One boy said to me, 'my PSHE is like Buffy the Vampire Slayer, every week a different monster. Last week we did gonorrhoea . . . week before that we did HIV [human immunodeficiency virus] . . .' And I think there's a real danger at the moment that we're compartmentalising all of these issues and . . . that there may be a core set of values and principles that we need to be exploring to underpin all of those.

Education consultation group 3

Gender equity was a strong theme in the young people's consultation group and members of this group noted the need for programme material to acknowledge that boys and men could be victims of interpersonal abuse. Group members commented on the potential for evoking resistance from boys if they were consistently depicted as perpetrators of abuse:

. . . the boys will say: 'oh . . . we're always labelled the abusers'. And young people are very sensitive to that so I think you have to be very careful . . .

Education consultation group 3

It was felt to be important that young people 'perceive you to be fair in your analysis' and it was noted that relevant statistics could be deployed to convey the point that domestic abuse was a 'gendered crime' (education consultation group 3).

Group members also advocated taking a positive approach in work with boys and focusing on how a positive approach to relationships could help them to acquire a girlfriend:

There's a lot of sex educators are saying that boys want to be good at sex . . . they want to know what good behaviour is . . .

Education consultation group 3

Drama and theatre

In common with the media consultation group, group members noted that drama could be a valuable interactive programme component which offered children and young people a creative means of engaging with the material. Moreover, drama could be effective for children who 'in their own individual personal and social and emotional development won't actually be ready to pick up the stuff that they need at a cognitive level' (education consultation group 1).

However, the use of externally provided theatre in education could be expensive, and group members also suggested that theatre productions could present domestic abuse in its more extreme and dramatic manifestations rather than identifying 'that very low-level aggressive behaviour that young people are more likely to experience in the early stages' (education consultation group 1).

Externally delivered theatre could also be an excuse for the teacher to sit back and let the professionals take over, and it could bring to the surface difficult emotions and attitudes which would need to be dealt with safely.

Who delivers programmes?

There were differences of opinion in this group regarding who should deliver these initiatives in schools. Some group members argued forcefully that this was a task for teachers, who had an ongoing relationship with their class:

M1: I believe really strongly, that teachers manage the learning in their classroom . . . a class belongs to that teacher, they are the professional, it doesn't mean they can't be supported by outside providers who bring in a different set of skills, different set of knowledge, but I do feel really strongly that the class is managed by their teacher, and I think it's always dangerous where teachers somehow step away from that responsibility.

F2: And I think you're right about the teacher and the trust and when you ship people in from outside . . . they don't build that trust necessarily with those people.

Education consultation group 1

However, some group members argued that, while specialist PSHE teachers might be equipped to deliver these programmes, class teachers often lacked the skills and confidence to do so:

. . . certainly not with domestic abuse, they're not skilled . . . this is out of their comfort zone.

Education consultation group 1

There were also concerns that some teachers did not present as positive models for handling conflict:

There are teachers who would use very . . . abusive behaviours . . . In terms of behaviour management.

Education consultation group 1

'Upskilling the teaching force' (education consultation group 1) was considered to be essential if teachers were to take sole responsibility for delivering these programmes.

One of the arguments for using external facilitators based in a service that provided support for those experiencing domestic abuse was that the contact made through the programme could encourage young people to access that service in the future:

If people go in and are genuine and authentic with young people, they carry the brand of their organisation and it may encourage young people to recognise that when they're in crisis that is an organisation that I know about and I feel good about them, I'm OK to ring them up.

Education consultation group 3

However, a reliance on external facilitators could contribute to a lack of sustainability:

Programmes don't survive because . . . part of their short-termism is that there's somebody who will go in and do it and will negotiate all those pitfalls . . . and then if their funding goes or whatever and it's just left to the schools to deliver it then that . . . understanding, the more subtle understanding goes.

Education consultation group 1

The strength of the relationship between the school and the external provider of a programme was considered to be essential for its successful implementation. Similarly, the use of external facilitators could be effective 'providing they work closely with the school and they're part of the community' (education consultation group 1).

Disclosure

There was a considerable amount of discussion about disclosure in the three meetings of this group and the potential for teaching on domestic abuse 'to open the floodgates to disclosure' (education consultation group 1) was identified as a disincentive for some schools to deliver these interventions. However, there was substantial variation in the extent to which group members had found that delivering these interventions in schools prompted disclosures of domestic abuse:

When we did domestic abuse awareness in schools, I mean one lesson for an hour, we got nine disclosures from pupils from that.

Education consultation group 2

One of the things that's been quite remarkable about the programme over the years is that there's been very little disclosure . . .

Education consultation group 2

It was acknowledged that disclosures of domestic abuse could be difficult for schools to handle appropriately and that staff needed support to do so. Group members described using learning mentors both to offer confidential opportunities for children to disclose and to liaise with other agencies that might need to be involved in responding to a disclosure. While children valued teachers as a trusted source of information, they might struggle to disclose to a teacher, as they would fear losing control of what happened to the information they supplied. Learning mentors were seen to be accessible and non-threatening repositories for disclosures and it was noted that sometimes it was easier for children to disclose to school staff other than the form teacher, including playground assistants and art teachers.

Other group members described disclosures being handled by the school's safeguarding team or officer but difficulties in passing safeguarding referrals onto children's social services were identified and attributed to 'the huge barrier between education and social care [and] misunderstanding of what each sector does' (education consultation group 1).

It was agreed that school staff could be prepared for disclosures by being equipped with information about helplines that children could call and contact details for relevant local agencies. Group members argued that the teacher's role was primarily to signpost young people to appropriate sources of support rather than to act as a counsellor.

It was pointed out that domestic abuse could be an issue for school staff as well as for pupils, and that this should be addressed as part of any intervention:

I mean all the stuff on well-being, you know, there's a big movement now to say we cannot do anything on the well-being unless you're addressing the well-being of staff and, you know, sort of simply how can you look at one half of a community without looking at the other half?

Education consultation group 1

Support and funding for programmes

A common theme reiterated across these groups was the need for senior management commitment and leadership to underpin programmes in schools. Involvement from the governing body was also felt to be crucial to the success of a programme and the need to inform governors about domestic abuse programmes was emphasised:

Governors . . . they're very powerful in this . . . if you did governor training, or it was part of governor training to be aware of these kind of programmes, that would be really useful.

Education consultation group 3

Outside schools, some of the support and resources required for these initiatives were missing and this was attributed in part to the loss of the support and monitoring role formerly undertaken by local authorities. There were also concerns expressed about the reduction in funding for the independent domestic violence sector where children's support workers were the posts most likely to be affected by restrictions on local authority spending. Group members stressed the need for central government to support preventative initiatives and several group members suggested that Ofsted could also play a role in promoting and monitoring programmes:

F2: It's about the government's initiative that drives things and if they're not driving this . . .

F3: It's going to drop off the end.

Education consultation group 1

Group members felt that the relationship between school and external provider was key to a programme's sustainability. However, it was also argued that, given the ephemeral nature of funding for the domestic violence sector, programmes needed to be embedded in schools if they were to be sustained:

Schools have got to have something that they can roll out year after year and not be dependent on external providers all the time.

Education consultation group 1

It was suggested that a directory of available programmes would be useful; this would allow schools to know what was available and exercise choice as to which programme they delivered. Currently, schools selected programmes in an opportunistic manner when funding became available:

Somebody bowled up and said they'd do it . . . The communication comes at the right time and there's a bit of money in the kitty or the budget and we'll go for it . . . Somebody strong is leading it and then they feel passionate about it . . . there are exceptions where it's actually part of a planned school priority or a target . . . But, on the whole, it tends to be like that. And also, it tends to be, you know, the cheaper, the freer . . .

Education consultation group 3

Presenting the mapping survey findings (see *Chapter 3*) on sources of programme funding to the group generated considerable discussion on this topic. Group members from the independent domestic abuse sector thought that, in future, they would be increasingly likely to charge schools for programmes. There was disagreement over whether or not this would be a major disincentive for schools or whether schools were increasingly able or willing to find the funding for these initiatives. There was a suggestion that, in some areas of the country, Behaviour and Attendance Partnerships could provide such funding.

Measuring outcomes

It was noted that, if schools themselves were to fund programmes, they would need to be able to justify the expenditure in the face of competing priorities:

Schools do have budgets that they can draw on for these sorts of interventions, but they need to be able to justify their expenditure. And increasingly, they're asked to justify everything, in terms of outcomes.

Education consultation group 3

In common with the media consultation group, group members acknowledged that many local programme evaluations 'just skim the surface really' (education consultation group 1).

The group discussed what outcomes could be used to measure the impact of school programmes. Group members reported anecdotal evidence of programmes boosting students' GCSE (General Certificate of Secondary Education) drama grades or acting to improve attendance for children whose attendance had previously been poor (education consultation group 2). It was suggested that schools could use the data they already collected to measure outcomes:

... the sort of data they already collect and they might look to see an intervention of this sort reflected in that data, are teenage pregnancies, academic retention, pupil achievement, the progress and achievement of particularly vulnerable groups and health related behaviours.

Education consultation group 3

However, there was also concern expressed that setting up attainment as an outcome was 'a red herring' (education consultation group 2) and that those types of impact likely to result from domestic abuse prevention programmes were not formally recorded. Outcome measures related to help-seeking were felt to be more relevant; these included disclosures of domestic abuse, the use of a school helpline or an increase in referrals. It was suggested that students' 'actual knowledge of where to go' (education consultation group 1) for help would be a meaningful outcome measure.

It was pointed out that defining the goals of a programme tightly made it more likely that demonstrable outcomes would be produced:

... the more targeted the programme, the more likely you are to get an impact, the broader the goals of the programme, the more difficult it is to demonstrate a measurable outcome...

Education consultation group 1

This could make it particularly difficult to demonstrate impact from some of the broad outcomes such as 'changing attitudes, well-being' (education consultation group 1) or 'more mature behaviour' (education consultation group 3) that might be anticipated from preventative programmes on domestic abuse.

Findings from the expert interviews

Sixteen experts from six countries were interviewed; all but one of these interviews were conducted by telephone. The selection of these experts is discussed more fully in *Chapter 2*; those interviewed included individuals working at the policy level, individuals involved in designing and rolling out programmes or campaigns, and researchers contributing to evaluating and commenting on programmes. In some cases, interviewees encompassed more than one of these roles. *Table 26* shows the experts interviewed by country, and codes are used to attribute quotations throughout this section. The semistructured telephone interview format allowed interviewees to answer questions at length and expound their thinking in some depth, and the interviews' content was wide-ranging. Key themes identified in relation to context, delivery and evaluation are discussed below.

TABLE 26 Location of experts interviewed

| Country | Number of interviewees |
|----------------------------|------------------------|
| Australia | 4 |
| Canada | 3 |
| New Zealand | 1 |
| USA | 5 |
| UK | 3 |
| Total number of interviews | 16 |

Context

Underpinning theories

Feminist theories that emphasised the role of structural gender inequality as a fundamental cause of violence against women were widely referenced by this group of interviewees and were seen to inform many of the interventions cited:

Our framework . . . established that the key underlying determinants of violence against women were unequal power distribution between women and men at the individual, family, community, organisational and structural or societal level.

Australia 1

However, challenges to this predominant theoretical model were identified. It was noted that there had been a 'degendering' of domestic abuse, which was 'starting to shape the ways in which violence prevention plays itself out' (Australia 3).

An ecological public health model was also seen as influential in this field, but it was not without its critics:

Some advocates and academics in Australia argue that public health models lessen our attention to men's violence against women as an issue of human rights or as a political issue and . . . focus too much on health impacts of that violence . . . but . . . it's been useful in terms of alerting community organisations . . . to the range of factors at different levels of the social order that shape men's violence against women.

Australia 3

Some programme designers reported drawing on particular theories such as bystander theory (see Chapter 4), concepts of boundaries or ethics to inform programme content:

. . . we base our research, our interventions on the notion of boundaries and personal space . . . if you have to be a certain age to drink or drive or to have consensual sex, what age operates as a threshold? In other words there's a boundary, so the stop sign's for raising your hand in school before you speak, or [for] getting too close.

USA 4

We focused on the ethical construction of how you promoted ethical behaviour rather than focusing on the unethical.

Australia 2

Linking domestic abuse prevention to other issues

The interviews generated a number of examples and discussion as to how preventative work on domestic abuse could be linked with other initiatives in schools. Bullying was seen as a potentially overlapping area and as means of starting a conversation about abusive behaviour with younger children; one expert suggested that, for younger children, the bullying agenda was 'the only way that intimate partner violence prevention gets into schools these days' (Canada 1).

However, it was also noted that the interventions addressing bullying tended to be 'gender blind' and this had resulted in 'relatively little dialogue between that and the work addressing domestic violence and sexual violence among children and young people' (Australia 3).

In Australia and the UK, there was interest in creating links between programmes that addressed the influence of pornography on young people and domestic abuse prevention:

The Education Department said can you . . . be inclusive of issues around pornography and sexualisation, and that's what happened. And then there has been so much publicity here at the moment around sort of pornography . . . you know, addressing pornography and sexualisation and sex and all those sorts of issues that the Department's very keen to get it out.

Australia 4

Healthy relationships could also be addressed alongside mental health issues, sexual health and substance misuse:

If you're going to talk about alcohol and drugs and, you know, and even talking about sex, it's like let's talk about, let's expand the conversation too and talk about healthy relationships, and what those, what those look like and feel like.

USA 5

Legal and policy frameworks

Some of the experts interviewed were designing or delivering preventative programmes in regions where these interventions were a legal requirement and this was considered to have been valuable in ensuring that schools took up available programmes:

They [schools] won't do it if it's not required, but they will do it if they are required . . .

Canada 2

However, interviewees from the USA and Canada noted that regional political agendas could be powerful in shaping programme content so that there were restrictions on programme content in 'abstinence only' states and resistance to exploring issues of sexual diversity had been encountered:

Expectations are reviewed every few years by our Ministry of Education . . . they wanted to shift it to have more on sexual diversity, sexual orientation issues and there was too much push back on that from the province and from certain right-wing groups and so they didn't make those changes. So, we don't teach that . . .

Canada 2

In Australia, the National Plan to Reduce Violence against Women and their Children¹¹¹ included a commitment to introduce respectful relationship education and considerable funding for preventative initiatives:

In Australia . . . we have a national plan in place to reduce . . . violence against women and their children . . . all seven states and territories in Australia have signed up to that. They are all obliged to have local implementation plans as well . . . Primary prevention is one of the sets of outcome that

states and territories need to report against and so for that reason there's actually quite a lot of investment that's been made over the last three to four years . . . to target young people with primary prevention initiatives.

Australia 1

This had resulted in 'a plethora of programmes' (Australia 1), and national standards which would have drawn on the evidence base to provide guidance about effective programmes were commissioned but never implemented.

It was argued that government's position on the prevention of domestic abuse and its expression in law and government information and services was in itself a powerful lever for changing attitudes and behaviour. One expert noted that 'kids are very interested . . . is it against the law, what does the law say about this?' (USA 4). Another argued that government messages contributed to shifting social norms by making the issue visible:

In my province an important part of prevention was social marketing from the government, television ads, free programmes on the internet targeted to the adolescents . . . The importance that the province say it's not okay to be violent.

Canada 3

In the UK and New Zealand, the lack of a legal mandate was identified as a barrier to change:

. . . great number of barriers to change . . . there is no legislation, no law and a hidden issue.

UK 1

We have very, very sporadic delivery because, two reasons, the community sector hasn't been strategically funded . . . so really it's been down to individual specialist groups and their relationships with the communities, their school . . . and that varies considerably and we have no mandate from the Ministry of Education that it's required.

New Zealand 1

However, in Northern Ireland, Personal Development and Mutual Understanding was now a statutory requirement in the core curriculum for Key Stage 2 and this had become the vehicle for delivering preventative interventions in primary education. This was singled out as 'an example of good practice' (UK 3) from government.

A clear policy supported by funding from central government was seen as a means of embedding and sustaining prevention initiatives, although this had to be reflected in similar processes at the local level:

. . . sustainability seems to be absolutely driven by the extent to which government and the policy machinery is able to embed primary prevention principles into the way that programmes are initiated and funded . . . and that's what we've seen in Victoria where there have been state governments that have those sorts of approaches and principles written into their funding guidelines, into their policy goals and outcomes. Then we see that translated into the way that policy is . . . delivered and it's much more likely to be sustained. And then at the school or organisation or kind of youth agency level, what seems to be key to sustainability is the extent to which there is an understanding of prevention principles and an ability to apply those in day-to-day work . . .

Australia 1

It was also argued that policy needed to be closely linked with implementation:

... I don't want to separate provision and prevention out, I think that's a mistake separating those two out.

UK 2

Conditions for implementation

It was generally agreed that programmes needed to be 'tailored to the [local] culture' (Canada 3) and that consideration needed to be given to a community's or a school's readiness for an intervention:

What I've been trying to do is to push people to think about community readiness and thinking about that where people are at in the community and then targeting programmes and evaluation to the level that they're at...

Australia 2

This had implications for the transferability of programmes and it was noted that, as interventions were scaled up, it was increasingly important to consider 'the extent to which... an effective intervention in one context will be effective in another' (Australia 3).

As in the education consultation group, there was considerable emphasis on partnership between those designing programmes and schools, and the need to get education 'on board' and win commitment from schools was noted:

Unless teachers are willing and see this as important and they have the skills and understanding then no amount of policy and programmes are going to work.

Australia 4

Similarly, the need for partnerships between schools and parents as well as local communities more broadly was highlighted.

Delivery

Settings and audiences

The experts highlighted the potentially wide range of settings these interventions could be delivered in. While most described programmes for delivery in secondary schools, some were developing or knew of programmes aimed at primary school children. Interviewees also reported delivering programmes for youth groups, youth health services, community groups, sports groups or clubs, social services groups, units for children outside mainstream education and university groups. In New Zealand, the army was another setting in which preventative programmes had been delivered to young people (New Zealand 1).

The programmes described addressed a range of age groups. However, in common with the views expressed by the education consultation group, starting young and repeating the intervention across a child's school career was seen as a positive strategy. Programme content needed to be adjusted for different developmental stages:

I think it needs to start very young. I do think the message needs to change slightly on how you present it. I'm a firm believer that it should start with elementary school kids, but you don't have the same conversation, you talk about how you treat each other and then gradually as they get older in middle school then you talk about, more about relationships and being together and then probably in high school then you bring in more of the sexual violence... so I think that whole conversation needs to be integrated all along, it's just the language around it and the focus needs to slightly change as they get older.

USA 2

Some interviewees were interested in targeting programmes or campaigns at parents. However, one programme designer who had developed a programme for this audience noted that there had been difficulties in achieving attendance from busy parents.

While interviewees identified a couple of campaigns or programmes that included components designed for LGBT young people, it was suggested that much more thought needed to be given to how programmes targeted different subgroups:

I think there's been very little attention so far to the ways in which we need to craft domestic abuse prevention in ways that address children or young people at a different risk of perpetration or being victimised . . . also little attention to the ways in which we need to craft curricula or other interventions for individuals at different stages of change and even less attention to the ways in which we need to . . . modify interventions or curricula for different contexts, for different class contexts, for different ethnic contexts

Australia 3

An example was provided from New Zealand of how cultural influences might be addressed:

One of the things that lots of groups try and do well is talk about there being different cultural rules about being male in different culture groups in New Zealand, and pulling that out explicitly in the room to allow an interrogation of that.

New Zealand 1

In Australia, a focus on the needs of particular minority groups had been spearheaded by federal government:

What the federal government has tried to do, sometimes successfully and sometimes not, is target a range of . . . subpopulation groups amongst young people, so the funding has . . . included funding for newly arrived young people and for indigenous young people and for young mothers . . .

Australia 1

Children with disabilities, including those with autism, were identified as another group who required interventions that took their needs into account.

Who delivers?

Using teachers to deliver programmes was identified as a means of embedding programmes in schools and building sustainability. However, concerns were expressed by some interviewees about teachers' skill levels and confidence, and it was argued that training was essential to achieve programme fidelity. Getting sufficient time freed up to train teachers was described as a major challenge (Canada 2). One interviewee described integrating relevant training into teacher education at the qualifying level:

The university that I'm in have finally has introduced that teachers must do a teaching unit in sexuality education and this is the only university in Australian where . . . this is a compulsory unit.

Australia 4

Where external facilitators were used to deliver programmes, it was important that they worked in partnership with education staff:

The idea would be a partnership between them . . . somebody who had, who's completely comfortable around talking about issues to do with sexuality and violence . . . and somebody who is used to the school environment that was open to . . . doing their practice probably fairly differently.

Australia 2

However, the use of external facilitators was considered to reduce sustainability; one expert who had taken this approach had been 'disappointed . . . that I've been unable to keep those people doing the work' (Australia 2).

Experts also stressed the value of using facilitators who were young and of using male facilitators who could work alongside female facilitators and function as role models for boys:

One of the things that was built into that process was the ability for the female facilitators to, to basically ask the male facilitators . . . to model gender equity.

Australia 4

In common with the views of those in the expert consultation groups, there was considerable enthusiasm expressed for using peer educators who could convey authenticity:

. . . programmes that are able to use peers, students as part of the programme . . . I'm using role models for the students versus 'here's an adult coming in and telling me about this stuff and what do they know, they don't know my life'. So I think for programmes that can do that I think that can have a huge impact.

Canada 1

Mechanisms of change

The individual interviews with experts offered the opportunity for the question of mechanisms of change to be pursued in more depth. The mechanism of change most frequently identified was that of changing social norms:

. . . a notion of kind of influencing social norms as opposed to influencing outcomes for specific groups

USA 4

. . . trying to change or transform social norms or lift up more pro social norms and discourage antisocial social norms around these issues

USA 3

This was described by some as 'starting a conversation' (USA 5) and was seen as a process that took place at a number of levels: within the peer group, in a school, in a community and in the wider society.

The 'whole-school approach' represented the fullest expression of social norm theory where 'organisational change in the environments where young people live and work and learn and play' (Australia 1) was conceived as a means of changing values and attitudes. This approach, in common with the bystander approach, drew on the peer group as a mechanism of change:

. . . bring about a healthier school so that the school climate is improving . . . in any classroom of 25 kids, five of those kids might be at risk, five or even 10 of them might be at risk of an abusive relationship. The other 15 are there to keep that from happening . . . the other kids know what to say, the other kids they now have the language, so that peer component is critical.

Canada 2

In contrast, other approaches focused on providing young people with the confidence or skills to negotiate healthy relationships:

I see it as the route to a kind of empowerment, to say well get out of my face or get your hands off of me, or, you know, to initiate, you know, to be mutual, consensual, so it's this notion of boundaries.

USA 4

... aiming to enable young people to use ethical frameworks ... it's trying to give people the ways of thinking I suppose to make decisions in complex situations where there's social pressures, gender pressures and sometimes alcohol and other things involved.

Australia 1

Some experts identified a shift from an earlier focus on victimhood to addressing perpetrators. Rather than equip girls to be more assertive, the aim was now to change boys' behaviour:

If you are aiming these programmes that are trying to somehow help girls be victimised less then it's tough because really it's totally up to whoever might victimise them to change their behaviour ... Primarily, you want to target potential perpetrators ...

USA 1

One interviewee involved in developing campaigns argued that the focus had switched to providing boys with knowledge about what girls wanted in a relationship, as what motivated boys was the possibility of being successful in attracting a girlfriend.

Deconstructing gender norms could be part of this approach:

You're actually pulling some of those gender norms out kicking and screaming into the centre of the room and you're talking about whether or not they're helpful for people, ... it gives young men the space to talk about ... how pressuring it feels to be the one who's always expected to know what to do and the way he's always expected to lead it, and if they get it wrong in front of their friends then everybody knows.

New Zealand 1

Similarly, interventions for younger children that enabled them to recognise and distinguish safe relationships were described as drawing on the same mechanisms that underpinned work with adult victims of domestic abuse:

The purpose is to increase children's understanding of feelings, feeling safe and explore and promote behaviours which will contribute to a safe environment ... it's what we would have been doing with women for years about how do you keep yourself safe, how do you recognise your fear, even that level of what risk you are at ... it's the same message.

UK 3

Evaluation

It was generally agreed that, currently, there was limited robust evidence of programme effectiveness and it was noted that 'there have only been a few programmes that have really been able to do these kind of thorough evaluations that are really, really convincing' (USA 1). In common with the views expressed by the expert consultation groups, interviewees considered that a lack of strong evidence meant that untested interventions were being selected for implementation in a manner that was often opportunistic rather than evidence-informed.

Interviewees argued that there was a need for more longitudinal studies and for studies that measured behavioural as well as attitudinal change:

... a big challenge is behaviour, to be able to measure behaviour rather than to measure attitudes or knowledge. It seems like many, many programmes look at attitude change because it's more accessible, kind of, you know, the whole idea of sort of measuring something not happening is a little bit of a challenge.

USA 1

Researchers interviewed commented on the difficulties of getting access to schools to evaluate programmes, challenges in securing comparison sites, the potential for losing participants to follow-up and the difficulty in controlling for other intervening factors:

... it's hard to figure out if it's really just your game that's making a difference or if it's other things that are being done in the school or in the home ... we are trying to measure them pre test, post test and follow-up. To find kids, get them actually to do the evaluation is not easy.

USA 2

The problem of confounding influences or 'noise' was a particular challenge for those seeking to evaluate media campaigns:

You can't necessarily say with 100% confidence all the time that it's your campaign that is moving the needle either way, right? Because there's a lot of other noises out there.

USA 5

It was also suggested that the scale of change envisaged required a longer time frame than most evaluations afforded:

We can't possibly just be evaluating our programmes on the basis of the absence of violence, we're not necessarily able to achieve that because of the time frame we have to deliver programmes and also we know that the genuine absence of violence can take years if not generations to achieve because of the level of cultural change required.

Australia 1

Some minimal criteria for evaluation were proposed:

Measures of attitudinal and behavioural change, long-term follow-up at least 6 months after, control of comparison groups ... randomisation if possible or at least, you know, control.

Australia 3

It was noted that the reliance on self-report was a limitation of many studies in this field. While some experts considered that existing measures of change were valid and useful, others were seeking new approaches:

We need to start developing ways of thinking about behaviour change that are shown by indicators relevant to the changes we'd like to see. So if we want young men to understand sexual consent and also be able to negotiate it and communicate it without applying pressure or power in their personal relationships, particularly with young women, then we would need to look at well what are the indicators of that behaviour happening?

Australia 1

There were also differences found between those who were seeking more specific indicators of change and those who wanted to adopt broader indicators:

If it's about well-being then there's a whole suite of measures around well-being really. I think having little specialist indicators is probably death for this really, it has to be integrated into what are the big things ...

UK 2

Those who were involved in evaluating media campaigns were more likely to use proxy measures such as calls to helplines to evaluate impact. In general, while researchers from the USA and Canada expressed confidence in existing outcome measures, those from Australia, New Zealand and the UK were more interested in developing new approaches to measuring change:

We haven't really developed comprehensive ways of measuring changes in behavioural intent . . . or actual behaviour.

New Zealand 1

Summary of Chapter 6 findings

This chapter has identified a number of common themes that thread through the various consultation processes utilised for this study. It has also highlighted differences between the sphere of education and that of domestic abuse organisations in how preventative interventions are conceptualised and defined. These differences concern the aims of interventions, their underpinning theories and the identified mechanisms of change, and such differences are reflected in the language used to describe interventions. Within education, there were distinct differences found in how interventions for younger and older children were understood, with programmes for younger children described as addressing respectful relationships and safety rather than intimate relationships and abuse.

However, most of those consulted agreed that raising awareness of abuse was the primary aim for preventative interventions with the aim of destigmatising the issue and 'starting conversations' that would contribute to shifts in social norms. Changing behaviour was generally seen as a longer-term goal, but there was considerable interest in the young people's group and the two expert groups in how disclosures elicited as a consequence of this awareness raising should be managed and responded to.

In thinking about audiences for interventions, there was a widespread view that in the first instance, programmes should address the general population of children and young people but that subgroups should be targeted subsequently. Currently, most programmes were felt to lack recognition of diversity and this was seen as a particular problem for LGBT young people. However, participants in both the expert group and the interviews discerned a trend towards programmes and campaigns that specifically targeted boys, and emphasised the need to use positive strategies and messages in such an approach.

There were suggestions that compartmentalisation between different initiatives for young people could be overcome by forging links between interventions on domestic abuse and those on bullying, pornography, substance misuse, mental health and sexual health. It was also emphasised that media campaigns overlapped with programmes delivered in schools as they often supplied material that was incorporated into these programmes as well as providing 'real-world' reinforcement for messages delivered in school.

The young people's group emphasised that the most powerful messages were those that were experienced as authentic and it was agreed that this could be achieved through the use of drama, narrative, young people's involvement in the design and delivery of interventions and the use of role models who were perceived as genuine. Authenticity also required those delivering programmes to be skilled and confident.

While there were concerns expressed about the capacity of teachers to consistently embody the skills and values required to deliver programmes, it was noted that the use of external facilitators mitigated programme sustainability. Sustainability was most likely to be achieved when interventions were promoted and supported both at the level of national policy and at the local level of the school. A whole-school approach was identified as a means of achieving buy-in to an intervention at this local level, and such an approach would ideally involve partnerships with parents and with other community agencies including specialist domestic abuse organisations.

Chapter 7 Costs and benefits of preventative interventions in domestic abuse

As noted in *Chapter 2*, information on costs and benefits was drawn from a range of sources. As there was very limited material addressing this issue in the published material reviewed, the study benefited in this respect from the mixed-methods approach, which also allowed data to be mined from the survey and consultation elements of the review.

Survey

The survey was not fully or consistently completed but eight respondents provided information identified as necessary for drawing useful conclusions about costs and benefits (see *Chapter 2*). These programmes are listed in *Box 1*, with the information that was provided about funding, the pattern of delivery of the programme, and the achievements as perceived by the respondent.

Analysis

Narrative description of resources and outcomes

All of the programmes discussed here were delivered in schools, with most also being taken out to the community or to other settings such as youth offender institutions. In the main, these programmes were reported as being delivered by teachers specialising in PSHE or by practitioners outside schools with expertise in domestic abuse provided by practitioners such as the police, staff from domestic violence agencies or by other voluntary organisations. The length and pattern of delivery of the programmes varied but three broad patterns were identified: a one-off session; a one-off session with follow-up; and ongoing sessions over a period of time. 'Respect Yourself', delivered by the police, appeared to be a one-off intervention; 'Let's Talk About Us', 'SWACA Relationships' (Sefton Women's and Children's Aid) and '16 Days of Action' were described as having one or more group sessions with individual follow-up; 'STAR YP' and 'It Ends Here' ran sessionally for 6–8 weeks; and 'Tender' and 'Equate' were flexible programmes offering blocks of input, sessions spread over time or a combination of the two.

The principal direct cost of running programmes such as these includes the time of the person or groups of people delivering the sessions, any materials required, and possibly venue hire. The cost of any training for the facilitators also needs to be considered: time and travel costs of the trainer, training material, and travel for trainees and the cost of covering their absence. In the case of all of the programmes identified here, facilitator training was mentioned as being a necessity, although no detailed information on training was collected.

Implicit or indirect costs are also important. Any time spent delivering programmes in a school or any other setting would mean that other activities are displaced. The cost of this displacement should be weighed up against the relative benefits of the programme under consideration and those of the displaced activity. However, no information on any such indirect costs was obtained from the survey.

Six of the eight programmes were funded through the public sector: three from local authorities, two from community safety partnerships (collaboration between police, local authorities, fire and rescue authorities, probation service and health) and one by the police. Third-sector funding came from a local domestic violence agency and the Big Lottery.

All the programmes listed here are treated as beneficial for the purpose of this analysis. This assessment is derived from the response to the question 'In your view, what has the programme achieved?' and from the fact that these programmes were all described as ongoing (except '16 Days of Action', which was

BOX 1 Programmes for which survey responses provided information about resources and/or costs, pattern of delivery, funder and achievements

STAR YP

- Funded and delivered by West Wales Women's Aid.
- Small discussion groups 3 hours per week for 8 weeks.
- Reported achievements: increased awareness of domestic abuse among young people, effective one-on-one support for children and young people affected by domestic abuse.

Sefton Women's and Children's Aid (SWACA) Relationships programme

- Funded by local authority education service and delivered by staff from domestic violence services.
- Two 1-hour school assembly and small-group sessions followed by individual input as needed.
- Reported achievements: children and young people reported a greater awareness of issues relating to domestic violence.

Respect Yourself

- Funded by the police and delivered by teachers, police, and staff from domestic violence services.
- A 2-hour school assembly followed by small groups lasting 1 hour.
- Reported achievements: increased awareness of domestic abuse and the behaviours that can constitute an abusive relationship. Encouragement of people to seek support and to offer support to friends.

Let's Talk About Us programme

- Funded by Preston Children's Trust (Lancashire County Council) and delivered by staff from domestic violence services.
- Four group lessons of 30 minutes followed by targeted group work (40 minutes) and one-to-one support (40 minutes) to children who have been exposed to domestic violence. Number of sessions is based on need.
- Reported achievements: provided children with an awareness of principles that constituted healthy relationships.

It Ends Here

- Funded by the local authority education service and delivered by teachers and youth workers.
- School assembly and small groups; 3 hours weekly for 6 weeks.
- Reported achievements: a number of outcomes have been identified through both case management analysis and evaluations.

Tender Healthy Relationships: Acting to End Abuse

- Funded by the Big Lottery and delivered by trained workshop leaders.
- Either one block of 2 days or 1 hour a week for 8–10 weeks: school assembly and small groups.
- Reported achievements: raising confidence among young people to challenge abuse, raising awareness of issues and support available.

16 Days of Action to Eradicate Violence against Women

- Funded by Community Safety Partnership and delivered by teachers, school nurse, police, and staff from domestic violence services.
- One upper-school assembly, 2 hours with individual classes and 2 hours of lunchtime surgeries.
- Reported achievements: awareness has been raised with students, particularly about teenage relationship abuse.

BOX 1 Programmes for which survey responses provided information about resources and/or costs, pattern of delivery, funder and achievements (*continued*)

EQUATE – A Whole School Approach

- Funded by Community Safety Partnership and delivered by teachers, school counsellors, staff from domestic violence and other voluntary organisations.
- One-off sessions plus ongoing projects of 5–8 weeks. School assembly, group discussions, individual work.
- Reported achievements: increased knowledge and attitude shifts about violence, increased awareness and identification of support services. Pupils, teachers and external visitors are aware of the zero tolerance attitude.

always intended to be time limited). The achievements described by respondents in free text included: 'increased awareness' (reported in six of the eight cases) and 'support' – either seeking support or offering support to friends (mentioned by three respondents).

Indirect benefits may also occur. Two programmes were described as involving parents/carers (though the style and extent of this was unclear) and this involvement might result in reinforcement at home and/or cascading of attitude change within the family. Furthermore, four programmes involved children and young people in the designing of the programme and these participants may have benefited from this process (see *Chapters 5 and 6* for fuller discussion of the benefits of active involvement of children and young people in programmes).

Relationship between resources and outcomes

No firm conclusions can be drawn about the relationship between resources and outcomes for any of the programmes reported in the survey. This question was not addressed directly and no respondents mentioned it. The relative scale of the programmes can be implied from the description of resources required for delivery and the numbers of participants but the benefits have not been objectively evaluated in most cases.

Literature review

The 28 papers describing 20 programmes included in the systematic review of the quantitative literature (see *Chapter 4*) were reviewed and data relevant to assessing the cost-effectiveness from these are presented in *Table 27*. Where possible we have identified separately resources required to set up the programme and those required to implement or run it. We also show the broad categorisation of high, medium or low level of resources needed, based on the intensity and scale of the resources reported.

Analysis

Narrative description of resources and outcomes

The level of detail provided about resources and outcomes varied considerably by programme and by paper. Lack of information is a hindrance to evaluation of the research but does not necessarily imply a poor programme or indeed poor outcomes. Here, we attempt to focus on the programmes themselves rather than make judgements about the quality of the evaluation, which was addressed in *Chapter 4*.

In all cases the literature provides some information about the direct resources required to run the programme. However, the level of detail is poor in some cases, for example 'five session curriculum', which does not allow a realistic assessment of the cost of implementation. In others, though, there is a comprehensive description, for example '21-lesson manualized curriculum delivered by teachers with specialization in health and physical education' (p. 693).⁵⁰

TABLE 27 Data from the systematic review relevant to assessing cost-effectiveness

| Author and date | Programme and funder (if stated) with origin of programme | Resources required to set up the programme | Resources required to run the programme | Pattern of delivery | Information about cost | Resource needs (H, M, L) | Outcome/conclusion |
|--|---|--|--|---|------------------------|----------------------------------|--|
| Jaffe <i>et al.</i> 1992 ⁶⁴ | | Training for facilitators: half-day workshop | Whole-school presentation Facilitated classroom discussion (community professionals and teachers) | 1.5 hours (presentation) plus 1 hour (classroom) | | M | Encouraging positive changes in knowledge, attitude and behavioural intention, with maintenance at 6-week follow-up |
| Lavoie <i>et al.</i> 1995 ⁶⁷ | | | Speakers, videos, student plays, theatre company Animation team: permanent member and a trained volunteer Long-form additional activities: viewing a film and writing a letter | Short form: two classroom sessions (2–2.5 hours) Long form: additional 2–2.5 hours | | L (short form); M (long form) | Both schools improved to a similar degree on the attitude scale: the school receiving the short version improved by more on the knowledge items than the school receiving the long version |
| Krajewski <i>et al.</i> 1996 ⁶⁸ | Skills for Violence-Free Relationships Developed by Southern Californian Coalition on Battered Women | One-day training for (i) teacher and (ii) counsellor from the local battered women's shelter | Classroom education | 10 consecutive health education classes over 2 weeks | | M | Significant change in knowledge and attitude at 1-week follow-up. No sustained difference at 5 months |
| Macgowan 1997 ⁶⁵ | Dating Violence: Intervention and Prevention for Teenagers Developed by Domestic Violence Intervention Services of Tulsa, Oklahoma | 3-hour training programme for each of the five teachers Parent meeting | Structured facilitated classroom discussion | Five 1-hour sessions over 5 days | | M | Significant differences in knowledge and attitude between those receiving the programme and those who did not and also before/after. No difference detected between boys and girls |

| Author and date | Programme and funder (if stated) with origin of programme | Resources required to set up the programme | Resources required to run the programme | Pattern of delivery | Information about cost | Resource needs (H, M, L) | Outcome/conclusion |
|--|--|--|---|--|------------------------|--------------------------|---|
| Avery-Leaf <i>et al.</i> 1997 ⁴³ | | | Five sessions within the health education curriculum | | | M | Reduction in overall attitudes justifying dating aggression and less acceptance of dating violence during an argument |
| Elias-Lambert <i>et al.</i> 2010 ⁶⁸ | Dating Violence Prevention Project Curriculum | Training of teachers: 8-hour session | 10–12 50-minute sessions within the health education curriculum | | | | Process only (satisfaction) |
| Black <i>et al.</i> 2012 ⁶¹ | Developed by Avery-Leaf <i>et al.</i> | | | | | | Positive influence on attitude but group composition is important for boys and girls |
| | Research supported by National Institute of Mental Health Training Grant | | | | | | |
| Hilton <i>et al.</i> 1998 ⁷⁰ | | Team-building day (no detail about who was involved) | Assembly with speakers (counsellors, police) | 1 hour (assembly) Two 1-hour workshops – choice of six | | L | Students learned from the self-selected small workshops but not the large assembly |
| Foshee <i>et al.</i> 1998 ⁵⁴ | Safe Dates Project Developed by Foshee <i>et al.</i> | Training for 16 teachers across seven schools: 20 hours each | Theatre production by peers, interactive curriculum sessions, poster competition, community activities, e.g. crisis line, support groups, materials for parents | 10 x 45 minutes 20 workshops offered to community service providers, e.g. social service, ER, health department, school counsellors | | H | 1-month follow-up. Less psychological abuse, sexual violence, and violence perpetrated against the current dating partner |
| Foshee <i>et al.</i> 2000 ⁵⁵ | Funded by the Centres for Disease Control and Prevention | | | | | | By 1 year behavioural effects had faded but cognitive risk factor effects were maintained |

continued

TABLE 27 Data from the systematic review relevant to assessing cost-effectiveness (continued)

| Author and date | Programme and funder (if stated) with origin of programme | Resources required to set up the programme | Resources required to run the programme | Pattern of delivery | Information about cost | Resource needs (H, M, L) | Outcome/conclusion |
|---|--|---|--|--|------------------------|--------------------------|--|
| Foshee <i>et al.</i> 2004 ⁵² | | | As above with a booster: an 11-page newsletter with worksheets and personal contact from an educator | | | | Less dating violence victimisation and perpetration at four years but the booster did not improve effectiveness of the programme |
| Foshee <i>et al.</i> 2005 ⁵¹ | | | | | | | Prevention and reduction of dating violence, effects evidenced up to 3 years post intervention |
| Pacifici <i>et al.</i> 2001 ⁴⁶ | Dating and Sexual Responsibility Developed by Pacifici <i>et al.</i> Supported by a grant from the National Institute on Drug Abuse at the National Institutes of Health | Six teachers One 2-hour orientation beforehand | Interactive curriculum sessions Interactive video | Three x 80 minutes plus one x 80 minutes | | L | Effective in reducing acceptance of sexual coercion |
| Weisz and Black 2001 ⁶³ | Reaching and Teaching Teens to Stop Violence Collaboration with the local Rape Counselling Center | Four trainers involved. No specific training mentioned | 'Reaching and Teaching Teens to Stop Violence': structured curriculum sessions | 12 x 1.5 hours First programme: 6 weeks Second programme: 12 weeks | | M | Programme was effective in increasing knowledge and improving attitudes, and effects were maintained for 6 months |

| Author and date | Programme and funder (if stated) with origin of programme | Resources required to set up the programme | Resources required to run the programme | Pattern of delivery | Information about cost | Resource needs (H, M, L) | Outcome/conclusion |
|--|---|--|--|---------------------|------------------------|--------------------------|--|
| Bell and Stanley 2006 ⁵⁷ | Healthy Relationships | | Drama production, interactive drama workshop Five follow-up workshops Members of the theatre company, school nurse, youth worker, DV project worker. Teacher in attendance | Weekly | | M | Increased awareness and understanding of domestic violence, development of positive ideas about healthy relationships, equality, negotiation and respect. Identification of realistic and accessible sources of help |
| Jaycox <i>et al.</i> 2006 ⁴⁵ | Ending Violence, developed by Break the Cycle | | Classroom education: interactive programme using visual aids, games and role-playing activities | 3 days | | M | Modest effect on knowledge and attitudes |
| Gardner and Boellaard 2007 ⁶⁰ | Developed by Break the Cycle (non-profit organisation) Connections: Relationships and Marriage Research supported by the Agriculture Experiment Station, South Dakota | | Classroom education using a workbook | 15 x 1 hour lessons | | H | Most of the outcome measures did not show an impact over 4 years |

continued

TABLE 27 Data from the systematic review relevant to assessing cost-effectiveness (continued)

| Author and date | Programme and funder (if stated) with origin of programme | Resources required to set up the programme | Resources required to run the programme | Pattern of delivery | Information about cost | Resource needs (H, M, L) | Outcome/conclusion |
|--|---|---|---|---|--|--------------------------|---|
| Wai Wan and Bateman 2007 ⁵⁸ | | Training delivered by trained researcher | Classroom education within weekly PHSE curriculum session 1; video sessions 2 and 3; small group work | Three x 35 minutes | | M | Better understanding of the definition of IPV and of some effects of IPV on women. Attitudinal change was limited |
| Wolfe <i>et al.</i> 2009 ⁵⁰ | Fourth R: Skills for Youth Relationships | Additional teacher training: 6-hour workshop taught by an educator and a psychologist | Interactive classroom education | 21 x 75 minutes | Cost of the intervention estimated by calculating the cost of teacher release time for 1 day of training and the cost of the curriculum and video resources | H | Reduction in physical dating violence and increased condom use at a low per-student cost |
| Wolfe <i>et al.</i> 2012 ⁵⁶ | Developed by Wolfe <i>et al.</i> Funding from Canadian Institutes of Health Research | | School manual Information for parents | Four newsletters Optional guest speakers | Costs for programme delivery included teacher release time for training (CA\$200 x 40 teachers = CA\$8000) and reusable curriculum materials (mean, CA\$700 per school or CA\$175 per teacher). These one-time costs translate to CA\$16 per student in the initial year | | |

| Author and date | Programme and funder (if stated) with origin of programme | Resources required to set up the programme | Resources required to run the programme | Pattern of delivery | Information about cost | Resource needs (H, M, L) | Outcome/conclusion |
|---|--|---|--|---|------------------------|--------------------------|--|
| Taylor <i>et al.</i> 2010 ⁴⁸ | Developed by Taylor <i>et al.</i> in conjunction with schools and rape crisis centre | Teachers received one session of orientation | (1) Interaction-based curriculum; (2) law and justice curriculum | Five lessons of 40 minutes each | | M | Some effect on knowledge and attitudes |
| Taylor <i>et al.</i> 2010 ⁴⁹ | Funded by National Institute of Justice | | | | | | |
| Katz <i>et al.</i> 2011 ⁶² | MVP programme Developed with funding from US Department of Education's Fund for the Improvement of Post-Secondary Education | | Facilitated Group Mentoring sessions | Training of mentors: 16–20 hours Mentoring sessions not specified | | M | Behaviour change identified but no difference between the groups in the likelihood of intervening. Some indication of a longer-term effect |
| Miller <i>et al.</i> 2012 ⁴⁴ | Coaching Boys into Men Programme developed by Futures without Violence Research funded by Centers for Disease Control and prevention | 60-minute training for coaches | Group discussions led by sports coach | 11 x 10–15 minutes | | M | Results support the effectiveness of the programme and may help reduce DV perpetration among male adolescents |
| Miller <i>et al.</i> 2014 ⁶⁶ | Parivartan (adapted from Coaching Boys into Men) | Initial training for coaches: 3-day workshop led by a male instructor | Group discussion led by sports (cricket) coach | 45–60 minutes per week for 4 months Follow-up biweekly workshops: 9 days over 4 months | | H | Some promising changes in gender attitudes and behaviours. Negative intervention behaviours increased but not statistically significant |

continued

TABLE 27 Data from the systematic review relevant to assessing cost-effectiveness (continued)

| Author and date | Programme and funder (if stated) with origin of programme | Resources required to set up the programme | Resources required to run the programme | Pattern of delivery | Information about cost | Resource needs (H, M, L) | Outcome/conclusion |
|--|---|--|---|--|------------------------|--------------------------|---|
| Foshee <i>et al.</i> 2012 ⁵³ | Families for Safe Dates Developed by Foshee <i>et al.</i> | | Six booklets with telephone support | Interactive activities involving caregivers and teenagers completed in the home at times convenient for the family | | M | Families for Safe Dates was effective in promoting changes in the family context conducive to continued discussion about teen dating abuse |
| Belknap <i>et al.</i> 2013 ⁵⁹ | Research funded by Centers for Disease Control and Prevention Theatre of the Oppressed Developed by Boal Research funded by American Nurses Foundation | | Two plays Four undergraduates and a professional theatre director wrote, directed, and performed the plays | Three performances, one per school | | M | Less acceptance of teen dating violence, increased confidence to resolve conflicts non-violently, and higher intentions to use non-violent behaviours |
| Taylor <i>et al.</i> 2013 ⁴⁷ | Shifting Boundaries Developed from previous work, modified in collaboration with New York City Department of Education Research funded by National Institute of Justice and Department of Education | | (1) Classroom based: activity-based lessons (2) Building-based interventions: restraining orders, posters and identification of unsafe areas | Six sessions over a period of 6–10 weeks | | M | Generally effective at reducing violence and sexual victimisation and sexual violence perpetration |

DV, domestic violence; ER, emergency room; H, high; IPV, Intimate Partner Violence; L, low; M, medium; MVP, Mentors in Violence Prevention.

A description of the resources required to set up the programme was available for 11 of the 20 programmes – this was generally training of some form for the facilitators. Again, a range of detail was provided from ‘team building day’ (p. 7333)⁷¹ to ‘six-hour workshop for teachers taught by an educator psychologist’ (p. 693).⁵⁰

Three programmes were classed as being ‘low’ resource use: those evaluated by Lavoie *et al.*⁶⁷ and by Hilton *et al.*⁷⁰ and ‘Dating and Sexual Responsibility’,⁴⁶ the first two of these being among the oldest in the study. The majority of programmes ($n = 14$) were classed as being ‘medium’ resource use. Most of these involved classroom activities and were delivered as part of the health education curriculum; some involved additional whole-school assembly or outside speakers; two – ‘Healthy Relationships’⁵⁷ and ‘Theatre of the Oppressed’⁵⁹ – were drama based. ‘Coaching Boys into Men’ was designed for use in a sports setting and was delivered by trained coaches. Four programmes were classed as ‘high’ resource use: ‘Safe Dates’,⁵⁴ ‘Connections: Relationships and Marriage’,⁶⁰ ‘Fourth R’⁵⁰ and ‘Parivartan’.⁶⁶ ‘Safe Dates’ involved a range of activities including theatre, interactive curriculum sessions, a poster competition and various community activities, which would indicate it would be at the high end of the cost spectrum in terms of implementation. ‘Connections’ and ‘Fourth R’ were classroom based, and designed to be delivered in 15 and 21 sessions, respectively, with ‘Fourth R’ covering a range of social issues including substance misuse and sexual health as well as safe dating. The Parivartan programme⁶⁶ was an adaptation of ‘Coaching Boys into Men’, delivered in an Indian setting, but it was longer and more intensive than its parent programme.

Although resource use was described in most papers to some extent, this was not taken forward and valued in terms of monetary cost in the majority of evaluations. In fact, only one paper gave any detail about the cost of the programme – ‘Fourth R’ designed and developed by Wolfe *et al.*⁵⁰ This Canadian programme involved group teacher training for 1 day, curriculum materials and 21 lessons of 75 minutes covering a range of topics. The costing presented was partial, as shown in *Table 28*, and only represented the cost of teachers’ release time; no account was taken of the cost of the trainers and sundries such as travel and subsistence. Curriculum and video resources were quoted as costing CA\$7000 per school, although it is not clear how comprehensive this was and whether or not the cost of the newsletters and parent information material, which are integral components of the programme, were included. Optional extras such as guest speakers

TABLE 28 Resources and costs identified by Wolfe *et al.*⁵⁶ associated with running the ‘Fourth R’ programme

| Resource | Cost given for 10 schools (40 teachers, 968 students) |
|---|--|
| Training | |
| Trainer time (educator) | Not specified |
| Trainer time (psychologist) | Not specified |
| Venue hire and refreshments | Not specified |
| Travel and possibly accommodation | Not specified |
| Teacher time | CA\$8000 |
| Materials | |
| School manual | CA\$7000 |
| Videos | Not clear which elements are included |
| Newsletters | |
| Information for parents | |
| Optional | |
| Guest speakers, fields trips, community resources, volunteering | Not specified |
| Curriculum lesson time | |
| 21 lessons of 75 minutes | Not specified |

and field trips, which were encouraged in the manual, were not included in the costing. The indirect cost of delivering this programme was ignored. Twenty-one lessons of 75 minutes is a considerable proportion of the school curriculum time, more than would generally be spent on health education or PSHE, even allowing for the fact that issues other than domestic abuse are covered, and so some activities would need to be displaced in order to run 'Fourth R'. The opportunity cost of this should be considered.

The quoted amount per student was given as CA\$16 (CA\$15,000/968 students) but it is clear from the above that this was likely to be an underestimate of the true cost of the training and implementation of the programme.

Outcomes are summarised in *Table 27* but are described in more detail in *Chapter 4*. Most programmes aimed at addressing some combination of knowledge, attitude and behaviour, and they were assessed using various measures of these. The time scale varied considerably, with some programmes assessed immediately after delivery while other evaluations investigated the longer-term impact of programmes – up to 4 years in two instances.^{52,60}

Relationship between resources and outcomes

The lack of evidence about cost and the limited quality of the studies in terms of evaluating outcomes, as noted by the quality assessment reported in *Chapter 4*, prevent serious conclusions about any relationship between cost and outcomes. In general, it does seem that the programmes requiring most resources were most likely to report effective outcomes; however, the effect size in most cases was very small. Using the classification of high, medium or low resource use shown in *Table 27*, two of the three programmes classified as high ('Safe Dates' and 'Fourth R') reported behavioural change in addition to changes in knowledge and attitudes which were widely reported by the medium resource programmes. The third high-resource programme ('Connections: Relationship and Marriage') measured outcomes over the long term and found no impact at 4 years, and so comparing this with programmes evaluated within a year of delivery is not informative. Two programmes were classified as low resource use. The 1-day team-building programme described by Hilton *et al.*⁷⁰ reported increased knowledge from the workshops which students chose to attend, and the brief intervention described by Pacifici *et al.*⁴⁶ made some progress in changing attitudes. Lavoie *et al.*⁶⁷ described a programme that was delivered on two different scales – a short version and a long version – and found that although attitude was improved in both cases, knowledge improved more in the school receiving the short version of the intervention.

Grey literature and personal contact with experts

We report here on five programmes that provided the research team with unpublished information about resources and/or cost. We drew on unpublished documents for two programmes and on personal contact by telephone or e-mail for the other three.

'This is Abuse': the Home Office

The government of England and Wales has been running a series of media campaigns since March 2010, directed at preventing relationship abuse and helping teenagers to understand what 'consent' means within their relationships. The umbrella name of the campaign is 'This is Abuse', and the constituent parts are 'Teenage Relationship Abuse', which ran on three separate occasions (February to March 2010, September to December 2011 and February to April 2013); 'Teenage Rape Prevention', which ran twice (March to April 2012 and December 2012 to February 2013); and 'This is Abuse', which combines the key messages from both previous campaigns and which ran most recently (December 2013 to April 2014).

The campaigns were directed at girls and boys aged 13–18 years and the stated aim was to prevent teenagers from becoming perpetrators and victims of abusive relationships. The original campaign utilised television, cinema, radio, press and poster advertising which directed teenagers to the campaign website

for further advice and support (<http://thisisabuse.direct.gov.uk>). Further developments for the later waves included the use of social media, collaboration with makers of television and radio programmes aimed at a teenage audience, and widespread dissemination of support material.

The findings reported here are based on limited data on two waves of the campaign following a meeting with the Home Office in January 2014 and this does not take account of information that may have subsequently become available.

Wave 2 of the Teenage Relationship Abuse campaign, which ran for 4 months, cost £1.5M in total and wave 1 of the Teenage Rape Prevention programme, which ran for 2 months, cost £1.1M. In both cases, the major cost elements were expenditure on television and cinema advertisements, outdoor publicity such as sheets in shopping malls and panels in changing rooms and college washrooms, and online display and search. Website costs were relatively modest.

The average cost of a case of domestic violence to the taxpayer was estimated to be £10,000 (derived from Walby¹¹⁶). This implies that for the monetary benefits of wave 2 of the Teenage Relationship Abuse campaign to equal the cost, 150 cases of domestic abuse need to be prevented. Over the period of the campaign there were over 9000 visits to the 'need help' section on the website, implying that if 1.7% of these visits led to a case of domestic violence being prevented, the programme would be cost neutral. There is, however, no means of confirming who the website hits were from and whether or not any have led to a change in behaviour.

The cost of a rape victim to the UK taxpayer was estimated to be £96,000 (derived from Walby¹¹²). This implies that for the monetary benefits of wave 1 of the Teenage Rape Prevention campaign to equal the cost, 12 cases of rape would need to be prevented. During the campaign 8394 people accessed the 'need help' section of the website, implying that if 0.14% of the visits resulted in a prevented case of rape, the programme would be cost neutral. However, there is again no indication as to who the website hits were from and whether or not any have led to a change in behaviour. However, comments left on the discussion forum on the 'This is Abuse' website show that the adverts are helping people to understand what abusive behaviours are, seek help and, in some instances, leave the relationship.

Just finished with my boyfriend of two years after seeing these videos and I can relate to each one, the word 'your pathetic' 'little tart' and 'you don't do anything without my say so' just shock me back to reality I know I deserve better than what I was getting put through

This is a great campaign and really needed. If I had seen this advert a year ago I would have realised what I was going through much sooner and left. Thanks x

I've just broken up with my boyfriend of nearly 6 months. After watching this video, the exact words of 'you're pathetic, are you gonna go cry to your friends?' echoed in my mind.

He had said those exact words to me on many occasions. He put me down, stopped me from talking to my friends who were boys, checked my inbox, my texts, physically pushed me around . . . I don't see why I didn't see this before!

Helping Hands: Women's Aid Federation Northern Ireland and Department of Education Northern Ireland

As discussed in *Chapter 5*, 'Helping Hands' is an activity-based programme used in primary schools in Northern Ireland, which aims to portray keeping-safe messages for children and young people using games, stories and activity booklets. The programme is delivered by teachers who receive 2 days' training, which is delivered by peers who have been trained to train. Information about the cost and benefits of the programme was obtained from an internal evaluation document and an interview with the training manager of WAFNI.

The costs of the programme fall into two main components: training the teachers and providing the materials. Teachers are trained in clusters of about 16 and the reported cost of training and equipping one cluster and their classes was given as £6068. The breakdown of these costs is given in *Table 29*.

This programme was supported by an annual grant of £60,000 from the Department of Education Northern Ireland; 10 training sessions were carried out per cohort, which produced 160 newly trained teachers each year. The cost of providing substitute teachers during training was covered by a child protection training budget provided by the Department of Education and/or the Area Library Boards.

Ongoing development of the programme included amending and updating the training materials and running marketing days to support local groups with enrolling schools. This, together with the training of local group staff to deliver the training to teachers, was met by WAFNI.

The evaluation document (see *Chapter 5* for a fuller discussion of this report) was largely positive in its assessment of outcomes. It identified:

Increased understanding of the context and impact of domestic abuse, particularly on a child in a school setting and an increased level of 'comfort' expressed by teachers if domestic abuse is raised in a classroom setting.

p. 55⁸⁶

It also noted:

... increasing ... confidence and competence of teachers to address sensitive and sometimes challenging issues

pp. 56–7⁸⁶

The evaluation document made no reference to cost or value for money; however, the training manager reported that she 'does not see this as an expensive process which once in place enables the school to continue to deliver the Helping Hands year after year' (Regional Finance and Training Manager of WAFNI, 4 March 2014, e-mail to the authors).

TABLE 29 Cost of training and equipping 16 primary school teachers to use the 'Helping Hands' programme

| Item | Cost (£) |
|--|----------|
| Two days' training: facilitators (£500 per day) | 1000 |
| Venue hire and catering (£500 per day) | 1000 |
| Three days, ongoing support (£233 per day) | 700 |
| Regional co-ordination, ILM accreditation and management | 1288 |
| Teachers, training packs (£30 per teacher) | 480 |
| School box for 30 pupils (£100 per box) | 1600 |
| Total | 6068 |

ILM, Institute of Leadership & Management.

Drama workshops

One UK-based charity, which uses drama and arts to work with young people informally, shared information about the cost of their programme. This organisation worked in schools, youth centres, PRUs, offices and health-care settings 'creating tailored projects which offer support and meet specific needs'. The workshops were delivered by trained facilitators to a small group, typically a class of 30, and the programme culminated in a production presented to a larger group comprising the students' peers. Two models were available for schools to purchase: a 10-week programme of 1 hour per week, which at the time cost £4500, and a model where the same material was condensed into 2 full days and cost £2000. In each case, the ratio of direct costs of delivering the workshops to the indirect costs such as management, overheads, training, and monitoring and evaluation was roughly 50 : 50. The organisation pointed out that the cost per student was £150 for the 10-week programme and £67 for the 2-day programme, although if all students who benefited were taken into account, including those watching the productions, these costs were £21.40 and £9.50, respectively.

When the charity was asked about the advantages and disadvantages associated with each model, the response was that the organisation promoted the 10-week programme as their ideal because this allowed time for the students to absorb learning between sessions, but our informant acknowledged that the swiftness and lower expense of the 2-day programme suited some schools better. To the researchers' knowledge there has been no formal comparative evaluation of the two models. However, informal internal evaluation suggested that the two models had a similar impact on the students participating but the performance/presentation that was created and then shared with a wider peer audience had less of an impact in the 2-day model. An explanation offered for this was that the condensed model allowed less time to delve into the issues and unpick them to a point where the group was ready to share essential learning with their peers. The purpose of the presentation was described as:

To share learning with a wider group of young people but it is also about consolidating learning and having a tangible end point for the process so we currently keep that element in [the 2-day model], even though it might have less impact.

Chief executive, 2 September 2014, personal communication

Voices Against Violence

This programme was developed jointly by the World Association of Girl Guides and Girl Scouts (WAGGGS) and United Nations (UN) Women. It is a non-formal coeducational initiative designed to be delivered by peer educators and youth workers, and is intended to be non-location specific and international so that members of the Guiding Association can utilise it across the world.

No information on costs was obtainable but conversation with individuals involved in the development and dissemination of the programme provided a description of resources.

The training programme was intense, typically lasting a week, with 25–50 trainers being trained by six experts, and the model was designed so that the training was cascaded out within the community: those trained then trained another group in the same way down to level of individual Guide leader. The handbook for leaders is downloadable from the website (www.unwomen.org/ru/digital-library/publications/2013/10/voices-against-violence-curriculum).

Four age-related booklets were available for use with groups of children and young people for ages 5–7 years, 8–11 years, 12–16 years and 17–25 years, and were available to organisations once they had signed an agreement to adhere to the principles of the curriculum and deliver it safely.

Development of the material took 2 years of partnership between the two organisations and involved several drafts and iterations. It was piloted in 20 countries during the process to ensure that it was acceptable internationally and covered all relevant topics.

To our knowledge no formal evaluation of the programme has been carried out.

Sortir Ensemble et Se Respecter: Swiss (French) adaptation of 'Safe Dates'

The 'Safe Dates' programme developed by Foshee *et al.*⁵⁴ in the USA was adapted for a Swiss (French) population.⁷⁶ Conversation with those involved in the adaptation revealed some relevant information about resources and costs.

Programme facilitators received 2 full days' training, which cost CHF520 (£340), including the provision of the programme handbook. Ideally, the programme would be delivered by two facilitators.

The rights to 'Safe Dates' have been bought by Hazelden Publishing (Foundation),¹¹⁷ and a manual and compact disc are available for purchase. Any translation/adaptation of 'Safe Dates' requires a licensing agreement and payment of licensing fees to Hazelden.

Consultation groups

Relevant comments made during the four consultation group sessions that addressed cost, cost-effectiveness and budgets were identified from close reading of the transcripts.

Costs and benefits

These extracts show that representatives from the education and media organisations generally found it difficult to talk about cost and cost-effectiveness. Even when asked directly, they frequently sidestepped the question because they did not have the information, did not want to disclose it or had not previously considered it, and a lack of formal evaluations was reported. For example:

I don't think there's been enough evaluation . . . there's no formal evaluation that goes into the cost of the campaigns that we're working on . . .

Media consultation group 2

Benefits were easier to talk about and 'effectiveness' was seen as important, appearing to drive decisions about funding or implementation decisions, but there was little consensus as to what constituted 'effectiveness', which was not clearly defined even for similar programmes. A tension between desirable outcomes and measurable benefits emerged, indicating that greater importance was sometimes placed on a process or an outcome just because it could be measured rather than because these were identified as the outcomes that mattered but which were difficult to quantify (see *Chapter 6*). This tension is conveyed by these quotes:

Cost per whatever is the way we do everything, cost per click on Facebook adverts, cost per view on YouTube videos . . .

Media consultation group 1

. . . the benefits are the process and the outcome . . . and the engagement . . . of young people.

Media consultation group 2

I think it's a real problem to measure the effectiveness of a campaign with prevention.

Media consultation group 1

Media representatives were enthusiastic about involving young people in the development of programmes:

And because our commitment is co-creation across the whole cycle, we're not just using them as research subjects they're there to actually create the campaign, so . . . they're no longer passive recipients of care, they become sort of active agents for themselves, they become . . . the movement.

Media consultation group 2

They were also specific about the time required to create, for example, a short film. This involvement was seen as being cost-effective in the sense that young people were often paid expenses only, or a minimal amount, and there were process benefits to be gained from cocreation. It was accepted that young people benefited from the involvement in the development phase as well as the implementation.

Relationship between resources and outcomes

The concept of a relationship between cost and outcomes was unfamiliar to many group members and treated with some scepticism by others because of the difficulty in measuring (and valuing) benefits and the context-specific nature of most evaluations:

Well there's a feeling that people use the resources they've got to do the best they can with it, and then you look at the results . . . but do you then learn anything about cost-effectiveness? I'm not sure because people are using different ways of doing things, aren't they?

And the results you get are slightly different because you're working in a different context and again you might have these different ways of seeing the issue, so it's really difficult.

Education consultation group 2

There was an admission that the relative scale of costs and benefits was not often considered – explicitly or even implicitly. An expensive programme was not necessarily expected to reap large returns and yet a small-scale project might benefit many:

There may be a kind of implicit relationship about . . . a big budget, hopefully it'll have a big impact and a small budget, small impact . . . but it's not even as far as that . . .

No, I don't think it . . . it doesn't work like that.

No.

You can spend so much on advertising and unless you've got the proper objectives behind it, the messaging, you've got the right audience, it won't work.

Media consultation group 2

This view was particularly true for the media group, who viewed websites and social media as being potentially far-reaching methods of communicating a message for low cost:

[Video games] are fairly low budget and there's places online . . . who have millions of hits to their content every day. Young People's YouTube trenders, young people who have their own channels, who get millions and millions of hits.

Media consultation group 2

On the other hand, television advertising, although far-reaching, was considered to be 'expensive' by several contributors to the media group, and there was an indication that, increasingly, there was some doubt about its reach:

How many people watch TV live now? Or how many watch it . . . later . . . and fast-forward the ads?

Media consultation group 1

We don't advertise on television any more.

Media consultation group 2

However, in contrast to this, members of the young people's group argued that television advertising was effective because it targets 'everyone . . . who watches the programme' (young people's consultation group 1), adding that television is a safe environment compared with the internet, where:

your partner might see [you] . . . or family members . . . typing 'domestic abuse'.

Young people consultation group 1

After prompting, some members of the education group agreed that more resources might lead to greater benefits, expressing the view that a long-term programme carried out in schools was more likely to be effective in the long term (although no evidence was offered to support this view). There was a feeling that a programme lasting at least a term would have a better chance of changing attitudes, deepening relationships and creating a cultural shift than a short, albeit intense, programme:

There was time to develop relationships with senior management and head teacher and to, to open up channels of communication in a way that there hadn't been time to do previously.

Education consultation group 2

A positive point was made about the use of existing networks. These were seen as an efficient way of cascading a message out, and the Guiding and Scouting movements were cited as examples of this process by members of the group. Within these networks, a large number of local leaders could be trained to deliver, at modest cost, a programme that could have the potential to reach many young people.

And then you've got something like the Girl Guides . . . you've got all these leaders and I trained only 20 leaders who were then supposed to roll it out to their regions . . . there's something in there about the networking and how you're distributing it. It's very efficient.

Media consultation group 2

Budgets and funding

For most organisations, budgets were an important limiting factor in what they were able to achieve; thus, affordability appeared to take precedence over cost-effectiveness:

If we have no budget then . . . there's things you can't do. That's a top, that's the first thing. In a lot of cases that's the only thing. If we have no budget then . . . there's things you can't do.

Media consultation group 3

Several comments were made about the limitation of budgets, their inflexibility and, in some cases, their unpredictability. Frustration was evident in that sustained programmes of work could not be planned because of uncertainty around long-term funding:

They come up with a resource, and it gets . . . sent out to schools . . . But it's . . . a drop in the ocean. There's no join up with any other things. And then . . . suddenly the budget goes . . . it's gone. There's no kind of sustainability.

Education consultation group 3

Although the consultation groups were asked about the source of funding for preventative projects, very little information was provided, and it was unclear in many cases from where funding was derived. The limited discussion centred on the police as a potential source, as they were identified as having funded a particular project, and mention was made of a 'pot of money'. Media consultation group 3 suggested that the police might be the most likely source of future funding.

Discussion

Scoping the evidence around the economics of interventions aimed at preventing domestic abuse in children and young people in the general population has yielded some useful findings about resource implications, although information about cost and cost-effectiveness was much less available and there was no obvious consensus about outcomes with which to judge cost-effectiveness.

Resources and cost

The majority of educational programmes identified by the literature review and the survey were described in sufficient detail to be able to understand what resources were required to deliver the programmes. However, these descriptions were largely provided in order to understand the different components of the programmes and their purpose rather than the resources themselves and are therefore not reliable for comparative cost purposes. Indeed, as these reports mostly focused on the delivery of the material and, in some cases, pre-delivery training, there were likely to be important resources that were not included. These might be, for example, resources invested in developing the programme, the cost of teachers' time to attend training and wider implications (positive or negative) on other sectors such as health and criminal justice.

Information about some aspect of cost was obtained for five programmes: 'Fourth R', 'This is Abuse', 'Helping Hands', the drama workshops, and the Swiss version of 'Safe Dates'. The last of these provided only limited information about the overall cost, while 'Fourth R', 'Helping Hands' and the drama workshops expressed cost in terms of cost per child/student involved. Only in the case of the Home Office's 'This is Abuse' campaign was any attempt made to evaluate the programme by comparing cost with a benefit. In this case, a relationship was made between the cost of the campaign and potential benefits in terms of money saved through preventing cases of abuse or rape. This technique of return on investment (ROI), where benefits are valued in monetary terms and compared with the investment required to produce these benefits, is a form of cost-benefit analysis. A positive ROI indicates that the intervention is cost saving. In the case of 'This is Abuse', the number of website hits was used as a proxy for prevention.

Benefits

Benefits recorded in the published evaluations of school-based interventions tended to be some combination of knowledge, attitude and, in a few cases, behaviour. These were measured in a variety of ways using questionnaires and scales and so it could be argued that an evaluation of cost per student benefiting (e.g. improving their knowledge, attitude or behaviour by a specified amount) could have been carried out. However, none of the studies included in the review did this. Benefits of media programmes emerged as less well defined and harder to quantify. Members of the consultation groups talked in terms of 'reach' and 'number of hits', but translating this into tangible benefits was fraught with difficulty. Indeed, the professionals in the media consultation group regarded television advertising as 'expensive' (implying that it was not cost-effective or good value for money), but the young people's consultation group favoured the anonymity of this method, and the fact that it could be accessed without intention and without the fear of incurring stigma. These benefits, beyond those that are immediately obvious, may be reflected in the large proportion of the total expenditure on 'This is Abuse' taken up by television advertising.

The difficulty in identifying, measuring and valuing the benefits of a preventative programme was discussed by members of the consultation groups in the context of considering cost-effectiveness or value for money of the programmes they knew about. In a world driven by short-term and unreliable budgets,

rigorous examination of wider societal benefits, including those impacting on other sectors or likely to take place in the future, was not a priority. This is not surprising. The interventions we have reviewed are complex and multisectoral and an evaluation taking account of all societal benefits would be a considerable challenge.

Guidance on costing

Some guidance exists about methods of costing programmes such as those identified in this report, which could be a useful step forward. A detailed microcosting exercise was carried out by Edwards *et al.* in evaluating a parenting programme,¹¹⁸ and one output of this exercise was a step-by-step guide to the microcosting of a complex intervention aimed at the general population.¹¹⁹ A standardised approach to such an intervention may not always be possible and there may be numerous drawbacks and pitfalls, but the general principles advocated are worth consideration. The guidance advocates a multiagency perspective, taking account of all costs to all stakeholders and separating out non-recurring set-up costs, such as training, from the recurring costs associated with delivery of the intervention. The authors recommend that diaries are used by all those involved in the intervention in which they can record all resources used on a daily or weekly basis, as they suggest that by using this method the number and scope of data are more likely to be complete, and a reasonably accurate cost will be arrived at. Transparency is all-important and although suitable estimates can be used when microcosts are not available, these need to be well documented. It does not seem that any of the evaluations considered in this review used such rigorous data collection methods. A further consideration is the cost of adapting a programme to changing circumstances either over time or in a different context. This factor was not considered in any of the literature or discussions included here. The 'Voices Against Violence' programme developed by the Guiding Association and UN Women was introduced with the aim of using it across 20 countries and, although extensive revising and editing formed part of the development of the material, no mention was made of adapting the content as conditions and environments changed.

Combining cost and benefits

Combining costs and benefits to draw conclusions about the cost-effectiveness of a preventative intervention is a challenge that was not comprehensively tackled by any of the evaluations in the literature reviewed and it is a concept that was not considered explicitly by experts we contacted or members of our consultation groups. The technique of ROI can be useful, although from a public sector or societal perspective the wider social ROI (SROI) is preferred. This technique has gained credence as a method of evaluating complex interventions implemented in the public and third sectors since the publication of the Cabinet Office's 'Guide to Social Return on Investment'¹²⁰ and it has been critiqued by Arvidson *et al.*¹²¹ SROI is akin to cost-benefit analysis conducted from a broad societal perspective, though Arvidson *et al.*¹²¹ suggest that, with SROI, the process of carrying out the analysis creates its own benefits, and these need to be taken into account in addition to the benefits of the programme itself. It also appears to be a labour intensive and expensive method of analysis.

Despite the increasing attention being paid to different ways of evaluating public health interventions, no standardised method exists. In practice, a range of types of outcomes is used depending on the research question and the rigour of the evaluation depends on its purpose. There appears to be a genuine tension between directing funds at preventative programmes themselves and conducting an evaluation that will provide evidence to inform future development.

Scale

The question of whether more resources result in more or better outcomes was something we attempted to discern from the literature and our consultations. Broadly, evidence from Wolfe *et al.*'s evaluation of 'Fourth R' programme⁵⁰ and the drama workshops suggests that longer-term education-based interventions might be more successful; this was backed up by others in the consultation groups who suggested that longer, more intense programmes were more likely to result in a permanent shift in attitudes, which could lead to behavioural change in the future. However, the evidence is scant. In contrast to these views, the systematic literature review (see *Chapter 4*) suggested that length on its own did not

predict impact and those involved in developing media campaigns felt that there was very little relationship between scale and outcomes and that 'getting it right' was more important.

Funding

The UK-based education programmes and media campaigns identified in this study were funded from a range of sources including local authorities, the police service, education, the probation service, the health service and third-sector organisations. There was no clear sense that this was 'joined up' (as one member of the consultation group put it) and this resulted in uncertainty and lack of sustainability. At the same time, the potential benefits of a programme or campaign that successfully reduces domestic violence are widespread. Walby¹¹⁶ estimates that within the public sector, 45% of the cost of domestic violence is borne by health care and 33% by the criminal justice system, with the remaining 22% falling on social services, housing and refuges, and civil legal services. However, public services are themselves only one-quarter of the wider societal cost, as lost economic output represents a further 12% and human and emotional costs account for the majority 63%. This finding indicates the importance of a societal response and a need for a co-ordinated effort to develop and implement multisectoral initiatives.

Summary of Chapter 7 findings

In this chapter we have explored the evidence around the costs and benefits of the interventions identified through the mapping survey, the published and grey literature and the consultations with experts and young people.

Where information on resources was available, it was generally well reported, although this was largely confined to the resources directly required to run a programme. In some cases, information was available about development and training but very little consideration was given to indirect resources or the concept of opportunity cost. Benefits were varied and largely interim or process in nature with no hard evidence of an effect on the level of abuse. Wider societal benefits were not mentioned in any of the literature and only briefly alluded to in the consultation groups, usually after prompting. Most evaluations were carried out over a short time scale, and substantial benefits of such preventative initiatives are likely to be seen only in the long term, when cultural shifts are fully established. In the evaluations considered, combining costs and benefits to reach conclusions about cost-effectiveness was rare despite a number of contributors expressing informal views about efficiency and value for money. There was a perception and a limited amount of evidence that for some programmes a more intense programme resulted in more positive benefits. In contrast to the concept of cost-effectiveness, budgets were discussed enthusiastically: the short-term nature and unsustainability of funding were seen to be major limitations to activity. No clear source of funding emerged for either school-based or media interventions.

Chapter 8 Synthesis of study findings

This mixed-knowledge review has drawn on data from a wide range of sources; in this chapter we integrate our findings to develop some key messages that can be used to inform practice, policy and future research in the UK. Our approach has illuminated the degree to which preventative interventions in domestic abuse for children and young people cut across different spheres of knowledge and service sectors: evidence from the fields of education, media and theatre, health, domestic abuse, criminal justice and social care has contributed to the review. This range of stakeholders and evidence means that language is often contested and understandings can vary between sectors; so, for instance, the expert consultation groups revealed that education professionals tended to conceptualise these interventions rather differently from the way in which they were understood by those working in the independent domestic abuse sector (see *Chapter 6*). Moreover, this is a field in which practice is developing rapidly, so that the review of the grey literature (see *Chapter 5*) identified a shift within the UK from interventions focusing on children's experiences of domestic abuse in their parents' relationships to those that addressed the issue of interpersonal abuse in children's own intimate relationships. Similarly, the consultation interviews found that boys are increasingly seen as the primary target for preventative interventions. There is growing interest in harnessing new media, particularly the internet, to deliver campaign material in this field, and new approaches such as bystander interventions (see *Chapter 4*) and 'whole-school' approaches (see *Chapter 5*) have emerged and are being implemented.

This chapter synthesises the main findings using the headings of *Context, Mechanisms and processes*, including delivery and content, *Audiences* and *Outcomes*, with a final section summarising what we have learnt about the current state of the evidence base in this field.

Context

The data provided by the mapping survey and the consultation groups can be combined to produce a picture of current practice in the UK. Although a wide range of programmes was delivered in the 18 local authorities surveyed, provision appeared patchy: nearly half of those responding to the survey reported no relevant local interventions in their area. The survey also suggested that interventions lacked sustainability, with over half of the programmes for which we had relevant information described as running for less than 2 years (see *Chapter 3*). This picture of limited sustainability was confirmed by the expert consultation groups (see *Chapter 6*). The survey also indicated that funding for programmes was unreliable, with the bulk of funding coming from local community safety partnerships, domestic violence organisations or other charities whose funding was likely to be short term and constrained by restrictions on local authority spending. There was very limited funding from health, and schools themselves did not as yet seem able or prepared to provide much financial support, although they might have been providing existing resources such as teacher time to support the delivery of programmes. Again, this picture was confirmed by the consultation groups.

The other side of this picture of provision was that 74 different programmes or interventions were detected within our 18 sample areas and this diversity of existing provision has implications for the acceptability of any one particular model that might emerge from this or future research. Rather than seeking to identify and promote one model for which there is evidence of effectiveness, this study has focused on distinguishing those features of interventions that appear to contribute to change, and which are acceptable and valued by a range of stakeholders that includes young people themselves as well as practitioners, policy-makers and those involved in developing and evaluating interventions.

The expert interviews were of assistance in distinguishing three different levels – macro, meso and micro – at which context can impact on both the implementation and impact of interventions. These levels are used to structure the discussion below.

At the *macro* level of national policy, the experts involved in the consultation groups and interviews noted that framing the delivery of preventative interventions in domestic abuse as a statutory requirement made for wider and more consistent implementation as well as providing a strong message from government that contributed to shifting social norms. In Australia, national policy was accompanied by central government funding for the implementation of preventative programmes, and this was considered to have been effective in embedding programmes both in schools and in some community-based groups outside schools.

In the UK, the backdrop to public sector provision of preventative programmes is budgetary constraint. At the macro level, competition for funding exists between different sectors and even between the sectors identified here as potential providers such as education and the independent domestic abuse sector. Similar choices are repeated at all levels down to the micro level where decisions about how to prioritise expenditure have to be made within, for example, an individual school budget. There is currently a lack of robust evidence about cost-effectiveness and appropriate outcomes to guide these decisions resulting in likely inefficiencies. In addition, the current mismatch between which sector pays and which sectors benefit – financially and more broadly – is likely to hamper the development of good-quality interventions.

At the *meso* level of implementation in the region or wider community, the systematic review found that many of those programmes that have been more rigorously tested and reported have been developed in particular regions of the USA with some, for example ‘Safe Dates’^{51,52,54,55} or ‘Shifting Boundaries’,⁴⁷ having been trialled in predominantly rural or urban settings. The ‘Fourth R’ programme,^{50,56} however, has been implemented in a wider range of settings. Both the quantitative and the qualitative literature included in the systematic review evidenced the difficulties of attempting to transfer programmes across cultures and populations. Delivering the ‘Coaching Boys into Men’ programme in India entailed a substantial amount of additional training for the facilitators⁶⁶ and translating the ‘Safe Dates’ programme to Switzerland⁷⁶ required considerable attention to be paid to language and cultural constructions of abuse. Such modifications have resource implications and make programme fidelity an increasingly remote and inappropriate goal. They also raise questions about whether or not it is generally feasible and appropriate for preventative programmes addressing domestic abuse to be translated across cultures or whether or not programmes should rather be home-grown, culturally specific and developed with input from those who will deliver and receive them.

We can also locate the role of national media campaigns at this meso level, as their influence reaches beyond the individual community or school. They emerged as increasingly important in shaping the climate within which a specific intervention is received and they also function as a source for materials used in the delivery of preventative programmes.

Both the consultation groups and the interviews (see *Chapter 6*) produced suggestions that interventions to prevent domestic abuse should be linked to other health and well-being initiatives for children and young people, such as bullying, sexual health, substance misuse or mental health, so that these could reinforce one another. At present, these different agendas and messages may compete for space within PSHE or the broader school curriculum, and some of the experts participating in this study argued for them to be linked conceptually around a common theme of well-being or safety. However, it was also noted that in making these links a focus on the gendered nature of domestic abuse could be lost.

At the *micro* level of the local setting (usually the school) where programmes are delivered, the readiness of a school for implementing a preventative intervention was identified as important by those experts interviewed. The consultation groups emphasised the need for interventions to be supported across all aspects of a school’s work and curriculum, by the governors and senior management as well as through links with parents, the local community and relevant local agencies. Both the young people’s and the expert consultation groups identified advantages in involving young people themselves in the design and delivery of programmes. This could be achieved through consultation within and outside schools, through young people’s roles as bloggers or through the use of peer educators. The young people’s group argued

that such approaches assisted in investing programmes with authenticity, which they considered to be essential to programme impact.

The review of the UK grey literature (see *Chapter 5*) identified a small number of examples of the 'whole-school approach' delivered in the UK. This approach is based on an ecological model where learning in the classroom is reinforced across the curriculum and in other aspects of school life. The model evaluated by Maxwell *et al.*⁹² involved young people as researchers, as programme designers and in programme delivery. However, the evidence base to support such approaches is still developing.

The consultation with both young people and expert groups flagged up the issue of disclosures which might be evoked by interventions. Evidence both from the qualitative literature reviewed and the young people's consultation group argued the case for interventions to be linked to appropriate services for those who disclosed experiences of abuse in their own or their parents' relationships:

It makes people aware but then they need the help afterwards.

Young people's consultation group 1

Managing such disclosures was also identified as a potential source of concern for schools. The consultation found differing views as to who should provide support following a disclosure in school of domestic abuse either in a young person's own intimate relationship or in their family. While some of those contributing to the consultation groups considered school staff to be the appropriate people to receive and respond to such disclosures, others emphasised the need for more specialist forms of support which were located outside schools. Young people themselves emphasised the need for such support to be confidential and for young people to be informed about its availability at an early stage in a preventative intervention.

Mechanisms and processes

Programme content

The systematic review showed that the focus of the work in North America was dating violence rather than young people's experience of domestic abuse in their parents' relationships and, as noted earlier in this chapter, a shift in this direction has occurred in the UK. Nonetheless, all programmes included in this review addressed a number of themes and topics that related to their aims and varied depending on target audiences. All interventions aimed at young people of secondary school age incorporated raising awareness of domestic abuse, usually through imparting knowledge about it: what it is, its prevalence, and how it impacts on victims and, in the case of adult victims, their children. The literature reviews and mapping survey also revealed that information on the services available to help survivors was commonly included with the intention of enabling children and young people to seek help and support safely. Where young children were the target audience, the grey literature and mapping survey showed that domestic abuse was never addressed directly but that the focus was on keeping safe and issues such as friendship, bullying and respect. Some programmes also incorporated teaching of skills such as conflict resolution and communication. Similarly, aspects of values education were frequently incorporated into programmes where values such as equality, acceptance of difference and respect were promoted with the aim of developing prosocial attitudes. Affective education, in the form of learning to identify and express emotions through non-violent means, was included in the content of some programmes, and with younger children this was focused on raising self-esteem so that children would be confident in protecting themselves.

The inclusion of topics on gender equality and gender stereotyping (masculinities and femininities) was common in programmes for older children and young people. Evidence from the literature reviews and consultation suggested that the ways in which these topics and the gendered nature of domestic abuse were approached were vital as some boys resisted what was sometimes described as the 'sexist' approach

of such messages. The consultation emphasised the need for messages, particularly those targeting boys, to be positive to counter any such resistance. Wolfe *et al.*'s evaluation of the 'Fourth R' programme⁵⁰ showed that resistance from boys is not inevitable. Crooks *et al.*¹²² argue that, in the absence of a gendered understanding of interpersonal violence, young people require a 'gender-strategic' approach, and they describe how the Fourth R programme builds gender awareness through a range of activities and by including opportunities for single-sex group discussions:

... both boys and girls will be hypersensitive to messages that they hear as 'boy bashing' (Tutty et al., 2002). The challenge is to understand this reality, yet increase awareness of adolescents' understanding of gender and societal constructs of gender.¹²²

Programme structure

The findings showed that the length and structure of school-based interventions varied considerably from one-off sessions to manualised programmes of up to 10 or more sessions, such as, the 'Fourth R' programme in North America. In the UK, where a whole-school approach was adopted, interventions were of indeterminate length as they had often been developed or adjusted in response to particular groups and settings.⁹² The survey and review of grey literature found that the most common structure for most school-based programmes in the UK was six 1-hour sessions delivered over 6 weeks, although no clear rationale for this arrangement was reported; however, it is roughly equivalent to one half-term period in schools. Much of the work was then relatively short-term and, therefore, less likely to be embedded into schools. Although the systematic review did not provide conclusive evidence of this, some evidence from the analysis of costs and benefits and the review of the grey literature suggested that, in the case of taught interventions, longer programmes that used more resources had most impact, but this would need to be tested further. Most interventions were targeted at specific age groups and did not form part of a comprehensive programme which linked together opportunities for children and young people to develop their learning on this issue throughout childhood and the teen years. Educationalists in the consultation group identified the need for a 'spiral curriculum' whereby basic ideas are repeatedly revisited, building children and young people's learning across their school career.

Methods of delivery

The literature reviews and mapping survey data revealed that in the main a range of methods were used to deliver the content of interventions. Most commonly this included didactic approaches, group discussion, role-play, quizzes and visual stimulus such as DVDs, with fewer using creative arts such as drama/theatre. Both the young people and the experts who were consulted argued for the use of drama/theatre and narrative, as these approaches had the capacity to deliver an emotional charge which contributed to authenticity as well as having benefits for children with lower levels of literacy. While the cost of professional theatre productions could be prohibitive, both the systematic review and the grey literature showed that performances developed with young people themselves could be used to engage young people in delivery and infuse messages with authenticity. However, the extent to which drama and theatre are effective in changing behaviour requires further research.

Authenticity was also achieved through the use of messages and material that were recognisable and meaningful to young people and which made 'it real'. Young people consulted for this study considered that authenticity was enhanced when interventions were delivered by those with relevant expertise or experience, and these genuine messages were contrasted with those that lacked conviction or plausibility. Media campaigns that used narrative and were developed with assistance from young people and/or which featured young people, such as the Home Office's recent 'This is Abuse' campaign, were also perceived as authentic by the young people's consultation group. As noted above, media campaign materials are used within school-based programmes and are increasingly likely to influence their content. The key message from the qualitative data reviewed was that children and young people find participative and interactive methods most engaging.

Who delivers?

Data from all elements of the study showed that interventions were delivered by a range of professionals, including teachers and other school staff such as school nurses, with external staff from specialist domestic abuse services, young people functioning as peer educators and other educationalists such as youth workers extensively involved in facilitating programmes both in the UK and elsewhere. There was considerable discussion in the consultation groups and expert interviews about who should deliver these interventions and the reviews of the literature revealed no consensus on this matter. External staff from specialist services have knowledge and expertise on domestic abuse and yet, their capacity to reach all children and young people, and thus to make provision universal and comprehensive, is limited. Programmes are then highly dependent on external funding, much of which has been shown to be short term, which limits the sustainability of interventions. In addition, while staff from outside schools are able to flag up the presence of community services for young people, they are less likely to have an impact on school culture or to provide continuity and progression for learners, making long-term change more difficult. On the other hand, teachers possess expertise in working with, and have ongoing relationships with, children and young people, which allows them to recognise and work with students' responses to these interventions. The grey literature described some school staff resisting teaching on domestic abuse as they lacked confidence and competence, particularly in respect to dealing with any disclosures that the work might elicit. Examples of training for teachers to equip them to deliver programmes which had been provided by domestic abuse specialists were found across the data included in this study. The mapping survey found that nearly half of the interventions identified were delivered by multiagency teams consisting of teachers working in partnership with specialist services, and partnership models were advocated by those participating in the consultation groups and interviews.

The UK grey literature suggests that the majority of staff delivering taught programmes are women; however, there is evidence from the reviews of both the qualitative and the grey literature of an emerging debate concerning the gender of facilitators. Although there was no consensus about the importance of the gender of facilitators, some boys appeared to value a man facilitating the work.^{57,82} Where work was cofacilitated by a woman and a man, there were opportunities for staff to embody the message of gender equity. This approach mirrors recommendations for good practice in work with perpetrators of domestic abuse.¹⁰³

Audiences

Both the mapping survey and the consultation groups indicated that interventions to prevent domestic abuse are increasingly targeting younger children. In the context of primary schools, such interventions are often presented as focusing on positive or safe relationships. Some examples of such programmes that have been widely adopted in the UK include the 'Helping Hands' programme in Northern Ireland (see *Chapters 5 and 7*) and 'Miss Dorothy' in England (see *Chapter 3*). However, there appears to be little in the way of robust evidence of effectiveness regarding interventions for this group.

The systematic review found evidence of skewed data in a number of studies that suggested that small groups of students who were at higher risk at baseline might have exerted strong influence on the outcomes of interventions. This suggests that programmes aimed at children and young people may be more or less effective for certain subgroups, depending on how far these influences are identified and taken into account. It is likely that these subgroups include children and young people who are already experiencing abuse in their own intimate relationships or who experience it in their families. One function of interventions delivered in schools might be to identify these young people and to offer them further interventions that provide more intensive support, that appeal to them and that are not stigmatising. This reiterates the arguments reported above concerning the need for programmes delivered in schools to be linked to services for responding to disclosures of abuse. These arguments are supported by the view expressed across the consultation groups and interviews that interventions should in the first instance be delivered to whole populations but then might need to be tailored to particular groups.

The expert consultation groups and interviews revealed that boys were increasingly identified as a primary target for change and it was argued that this was a more effective strategy than encouraging girls to recognise and avoid victimhood. As noted above, it was generally agreed across all forms of consultation that messages for boys should be positively framed and should avoid a blaming approach that could provoke resistance. Although Wolfe *et al.*'s⁵⁰ evaluation of the 'Fourth R' programme was the only controlled study included in the systematic review that found gender to have a direct relationship on outcomes, this evaluation does lend support to this argument. Boys participating in the 'Fourth R' programme reported less perpetration of physical dating violence than control group boys in the final year of the evaluation.

However, with the exception of interventions for boys, it was a consistent finding across all elements of this study that interventions rarely took account of diversity within the population of children and young people. While data from the systematic review and expert interviews showed that in North America, Australia and New Zealand a small number of programmes paid attention to addressing the complexities of domestic abuse for children and young people marginalised through race/ethnicity, class, sexuality or disability, there was little evidence of such interventions being widely developed in the UK context. The consultation groups identified a need for programmes that were tailored to the needs of disabled children, including children with autism and children from BAMER groups. The lack of materials designed for LGBT young people was repeatedly emphasised:

... young people we spoke to definitely didn't think they were addressed at all. They just felt pushed aside and isolated by discussion of relationship abuse or sex education.

Education consultation group 1

While the consultation groups and interviews provided some examples of interventions being delivered to community groups outside mainstream schools, it was evident that children in mainstream schools were the primary target for preventative programmes. With the exception of the 'Families for Safe Dates' programme⁵³ (see *Chapter 4*), the review found no evidence of programmes being delivered directly to parents. However, the young people participating in the consultation arm of the study pointed out that media campaigns that use television are often viewed in the setting of the family home and, in this context, they may act to 'start the conversations' that were identified as key to shifting social norms and values.

Outcomes

In general, in the evaluation of efficacy studies included in the systematic review, programme outcomes were framed as one or more of knowledge, attitudes, behaviours and incidence of victimisation or perpetration. Comparison between programmes in terms of specific outcome measures was not attempted in this review, owing to the heterogeneity of tools and instruments across the programmes.

Where statistically significant findings were reported, the effect sizes were generally low, or, at best, moderate. Larger effect sizes were found in measures of knowledge and attitudes, although the differences in these tended to decrease over time. The only relatively large and statistically significant finding in a well-designed study, in terms of incidence of perpetration or victimisation, was found in perpetration of physical dating violence in the previous year in Wolfe *et al.*'s⁵⁰ evaluation of the 'Fourth R' programme. However, the main effect was only in boys and there were counterintuitive findings for girls that suggest that the population in which this study was undertaken is atypical.

All of the consultation groups argued that increased knowledge and awareness of domestic abuse was an essential first step in the process of changing behaviour, and this understanding of knowledge and awareness as the precursor of change in abusive behaviour has informed interventions with adult victims and perpetrators of domestic abuse¹²³ as well as being a driving principle in public health education campaigns.

An increase in help-seeking was evident in some studies (see discussion of outcomes in *Chapter 4*). The only study to demonstrate associations between intervening variables, and perpetration and victimisation⁵¹ suggested that improved conflict management skills and belief in a need for help were most likely to correlate with these outcomes. However, as noted in *Chapter 4*, the analysis process used in this study had limitations which might limit the generalisability of the findings. It may be that evidence of behavioural change takes longer than even the longest follow-up reported in this data set, 4 years post intervention,⁵² as knowledge and awareness may only become important to young people as they mature and as they engage in relationships over time. This remains to be demonstrated in long-term formal controlled studies.

Based on these data, examination of what works for whom and in what circumstances can only be very limited. Apart from the effect on boys in the 'Fourth R' programme, noted above, the systematic review found no strong evidence of effect across programmes and outcomes for ethnicity, age/grade, level of English or academic achievement.

Given the lack of a moderate effect for most outcomes except short-term knowledge and attitudes achieved by most of the programmes included in this review, it might be argued that values, attitudes and behaviours are firmly established via family, community and early socialisation by the time children are 10 years old or older. This suggests that the need for interventions for younger children to be developed and tested, and media campaigns that can target children, young people and their parents in the home, also warrant further examination.

The reviews of the qualitative and grey literature showed that children and young people who received these interventions generally enjoyed them and found them valuable. Where they had criticisms, these tended to cluster around a view that programmes delivered in school should be longer:

I would have liked more time and longer lessons because they were interesting and it brought the subject to your attention.

Girl, 13, p. 187⁸¹

Likewise, the consultation groups, including the young people's consultation group, argued for repeating interventions across a child's school career and across the curriculum.

Theory

Identifying programme theories is a central aspect of undertaking realist reviews.¹⁹ Indeed, Pawson has stated that 'programmes are theory incarnate'.¹²⁴ In respect of preventative interventions, it is suggested that two types of theory are important:¹²⁵ one related to explaining why domestic abuse happens (causal) and a second addressing the means by which change is brought about (theory of change). A number of theories expressed both implicitly and explicitly were found to underpin programmes. Feminist and social norms theories emerged strongly as causal theories from expert interviews and the literature reviews. Eight papers in the literature reviews included explicit theories of change which suggested increased knowledge, emotional engagement with the experience of the other and organisational modification as key mechanisms of change.

A rationale for prevention frequently used in the UK is provided by evidence from surveys of young people's attitudes towards violence and abuse (see e.g. Burman and Cartmel¹²⁶). While such studies show that some young people have undesirable attitudes condoning domestic abuse, most young people have positive ones. The potential to use the power of the peer group, with young people taking safe action to

influence their peers to collectively challenge domestic abuse and bring about social change, holds some promise and was flagged up by those involved in the consultation groups and interviews:

... in any classroom of 25 kids, five of those kids might be at risk, five or even 10 of them might be at risk of an abusive relationship. The other 15 are there to keep that from happening ... the other kids know what to say, the other kids they now have the language, so that peer component is critical.

Canada 2

The grey literature review and consultation groups revealed the emergence of participatory approaches in the UK with young people involved in the coproduction of resources and working as peer educators. The whole-school approach which was also found to be developing in the UK (see *Chapter 5*) utilises the widely adopted ecological approach to violence prevention¹²⁷ within the boundaries of a school system. The wider implementation of this multilevel systemic approach within schools might prove fruitful but the evidence base for this model is currently limited.

Possible mechanisms of change

Given the lack of formal evidence of effect in terms of behavioural change in the formal research data included in this review, it is not possible to determine mechanisms of effect, or to construct CMO models for subgroups, as was initially intended. However, across the whole data set, it is possible to hypothesise on possible mechanisms of effect that could be tested in future studies. The following triggers seem to have some a priori plausibility as mechanisms of effect:

- coherence and consistency across the system or school
- readiness to change in respect of the school or organisation
- perceived authenticity in the content and delivery of an intervention
- access to professional support for children and young people who disclose domestic abuse, or are identified as at high risk.

State of knowledge

Despite the proliferation of programmes in the UK, the literature reviews, the mapping survey and the consultations undertaken for this study testify to the absence of any rigorous UK evaluations of long-term outcomes. While there is a body of good-quality short-term evaluations reporting participants' and stakeholders' views of programmes, most of the evaluations undertaken in the UK lack control groups and include only pre- and post-programme measures of change. There is generally a lack of evaluations that examine longer-term outcomes and very little information about the relationship between costs and benefits was found. This lack of good-quality evidence reflects the funding patterns for these initiatives and the analysis of evidence on costs and benefits identified a tension between directing funds to implementing preventative programmes and directing them to evaluation. In the absence of such evidence, it is difficult to establish priorities for both policy and practice.

Practice is, nevertheless, developing rapidly in new directions: we found an increasing emphasis on delivering preventative interventions with primary school-aged children and a growing use of media campaigns which are exerting a considerable influence on the content of and thinking about interventions in this field. There is very limited evidence available on either of these trends both internationally and in the UK.

In a field where change is measured largely by self-report, we identified some interesting differences in views concerning the validity of various measures of change. The expert interviews revealed divergences in perspectives between researchers in North America and those in the UK, Australia and New Zealand

concerning the appropriateness of existing measures of change such as the Conflict Tactics Scale. The analysis of costs and benefits found that outcomes were sometimes selected because they were measurable rather than because they captured genuine change. There were also arguments expressed in the consultation groups regarding whether or not behavioural change was an appropriate goal for preventative interventions delivered in educational settings and whether or not broader measures such as well-being would be more appropriate. Researchers have begun to question the process by which evaluation outcomes are selected, and Howarth *et al.*¹²⁸ argue that those who deliver and receive interventions should be given opportunities to contribute their views on what constitutes positive outcomes to developing these measures.

The results of the literature reviews and the consultation groups highlighted the lack of evidence around cost-effectiveness of preventative programmes, a challenge faced in many areas of public health. Conventional techniques used in the economic evaluation of a clinical intervention are limiting and likely to underestimate the true benefits of a public health programme, and so are not necessarily the most appropriate to use in this context. This is a fertile area of research, where some progress is being made, with guidelines for costing emerging¹¹⁹ and the use of outcomes that encompass a broader societal view such as the capability approach is being explored.¹²⁹ This study also identified a marked difference in approach between those evaluating a single programme, as found in the systematic literature review, and the views of those participating in the expert consultation groups who described being faced with limited budgets and the need to prioritise activities. The implication is that affordability needs to be considered alongside cost-effectiveness when evaluating a programme and this should be taken into account when making recommendations about implementation.

Chapter 9 Conclusions and recommendations

The UK picture painted by this scoping study is one of a considerable amount of diverse activity, but provision overall emerges as patchy and lacking a solid evidence base and sustainability. This reflects the current lack of national guidance and policy direction as well as a reliance on funding that is often short term and insecure. The findings of the mapping survey indicated that the health service's contribution to funding these programmes could be increased, and as many of the long-term costs of domestic abuse are borne by the health service, there is a strong argument for health services, in particular public health services, contributing to prevention in this field.

While the systematic review identified some examples of effective programmes developed in North America, our study also surfaced concerns and evidence about the lack of transferability of programmes developed in other cultures and settings. This suggests that strategic planning and development should focus on developing and testing interventions that are already being widely delivered in the UK and for which there is some local evidence of effectiveness.

The number and diversity of existing interventions together with the range of organisations and stakeholders involved in prevention initiatives indicate that any one model of intervention is likely to encounter issues of acceptability. However, this research also found evidence that currently, in the UK, programmes are often selected for implementation in an opportunistic manner. Strengthening the evidence base in respect of the key features of successful programmes and providing schools with accessible information about the current knowledge base would make for more informed programme selection. The consultation element of this study suggested that more attention should be given to the readiness of schools to deliver programmes: this would include the availability of training for and of support from the school's leadership, governors and parents, as well as considering issues such as school values and the wider curriculum. Information about the current state of the evidence base could be included in such training, and the research team have produced a short briefing paper summarising the study findings, which is aimed at senior management teams in schools.¹³⁰

The values and attitudes of the peer group emerged from this study as a crucial mechanism for change and it therefore seems appropriate to continue to deliver interventions to whole populations of children and young people. While this suggests that schools are the natural choice of setting for programme delivery, young people outside mainstream schools in PRUs, special schools and youth offending centres should not be omitted from such an approach, and these groups of young people are likely to include those high-risk groups who may require additional services. Moreover, some existing networks, including community-based organisations such as the World Association of Girl Guides and Girl Scouts as well as online groups, may provide efficient means of delivering interventions.

A key finding across all elements of this study was the lack of acknowledgement of the diversity of the population of children and young people; currently, programmes are failing to address the needs of specific groups. The study identified the value of targeting interventions more directly at boys, who can be resistant to programme messages, and it was suggested that framing messages positively for this group would contribute to increased effectiveness. The systematic review of both the quantitative and qualitative literature found indications that programme effectiveness may be influenced by those children and young people who are particularly vulnerable to or are at high risk of experiencing domestic abuse in their own or their parents' relationships. Identifying this group of children so that they can receive further support might be a task undertaken in the course of delivering interventions to the whole class or school. However, if this group is to be identified there will need to be support services provided for them (see below).

Another consistent finding reinforced by different sources of evidence was the lack of tailored provision for LGBT young people, who at present are insufficiently acknowledged in programmes and campaigns. Interventions also need to address the needs of BAMER young people, who may have grown up in

communities with particular conceptions of intimate relationships that need to be addressed in programmes and campaigns, and there was limited evidence that interventions were achieving this. Likewise, we found little evidence of specific provision for disabled children and young people, including those with autism and learning difficulties.

This study found indications that longer interventions delivered by appropriately trained and confident staff are more effective. The research showed that teachers are well placed to deliver interventions in schools but that they required training and support from those with specialist knowledge and skills in working with domestic abuse. This training could be provided at the level of teachers' qualifying education as well as at post-qualification level.

The evidence reviewed consistently suggested the value of school-based programmes building close links with relevant support services or ensuring that they have in-house capacity to respond to children's and young people's disclosures of domestic abuse in their own or their parents' relationships. Such a service would also be required if those high-risk children and young people referred to above are to be identified by those delivering programmes. The expertise to respond directly to disclosures might be found in the specialist domestic abuse sector or in a service already engaged in providing relationship support to young people such as schools counselling services or sexual health services. This study found that such services would need to offer the confidentiality that young people consider important while retaining the option of referral to safeguarding services and the police in instances where risks are high.

The lack of committed funding for interventions has contributed to short-termism both in schools and in the domestic abuse sector where many programmes are developed. A statutory basis for delivering these interventions alongside more predictable funding would enable schools, programme designers and staff to take a longer-term view, which could include building ongoing evaluation, including analysis of costs, into programme delivery.

Research recommendations (in order of priority)

1. Development of a home-grown, multifaceted, domestic abuse prevention programme, for delivery in secondary schools in the UK, with the following features which have been informed by this study:
 - i. developed in collaboration with young people
 - ii. acknowledging and addressing the needs of minority groups
 - iii. specialist training for teachers delivering the programme
 - iv. delivery by teachers in partnership with staff from specialist agencies and organisations
 - v. inclusion of a drama/theatre component
 - vi. programme to run for at least one term with reinforcement throughout the curriculum and in subsequent years
 - vii. sensitive management of disclosure and clear routes to professional support.
2. In collaboration with a range of stakeholders, including children and young people themselves, identification of suitable outcomes to evaluate a domestic abuse prevention programme. This would involve identifying different ways of measuring knowledge, attitudes and behaviour, and exploring the nature of the relationships between them over the short, medium and longer term. Disclosure and help-seeking should be considered for inclusion as outcomes. This work could provide the basis for the development of a tool agreed by both stakeholders and researchers to evaluate outcomes and process in these interventions.

3. Mixed-methods evaluation of the school-based programme. The evaluation should:
 - i. include a cluster RCT
 - ii. include an integrated qualitative study
 - iii. include an economic evaluation
 - iv. identify individual-level factors affecting outcomes such as exposure to domestic abuse in the home, gender, sexuality, disability and ethnicity
 - v. identify school-level factors affecting outcomes such as organisational type, size, levels of achievement, socioeconomic level and 'readiness'.

4. The integrated qualitative study should include:
 - i. observational research, documentary review and interviews with staff and children designed to capture process and to explore and describe what mechanisms are triggered by the intervention, and how these work differently in different contexts and/or with different programme theories and components
 - ii. individual and/or group interviews with stakeholders and children and young people to elicit beliefs, assumptions, views and experiences that might explain more or less successful implementation of the programme. Marginalised groups should be explicitly included in this process.

5. The economic evaluation should adopt a societal perspective: the design should allow for identification of cost and benefit to different potential funders within the public sector. Rigorous costing methodology should be adopted, providing transparent information about resource use and direct and indirect costs. Cost should be compared with a range of outcomes.

6. School-based interventions for younger, primary school-age children delivered in the UK context require independent and long-term evaluation. Exploratory work is needed to identify suitable process and outcome measures specific to this group. Evaluation should address the question of whether or not an intervention for younger children promoting broad values such as caring, safety, and respect translates into positive attitudes in respect of interpersonal abuse when they reach secondary school age.

7. The effectiveness of public media campaigns aiming to prevent domestic abuse should be independently evaluated. Rigorous evaluation of such campaigns has proved challenging, and methodological development in this field would be valuable. There is a need to understand how different components of a campaign that provides information, offers routes to support and raises awareness can lead to a reduction in abuse.

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Contributions of authors

Professor Nicky Stanley (Professor of Social Work) managed the study, contributed to data collection and analysis for the consultation phase of the study and led on interpretation and synthesis of the study findings. She co-ordinated the production of this report.

Dr Jane Ellis (Research Fellow, Social Work) undertook much of the work for the systematic review and review of grey literature as well as contributing to the mapping survey and the consultation phases of the study. She was responsible for writing up the findings of the qualitative literature review and the review of the grey literature.

Nicola Farrelly (Research Fellow, Social Work) was responsible for undertaking the mapping survey and writing up the findings. She contributed to work on the literature reviews and the consultation phase of the study.

Dr Sandra Hollinghurst (Senior Lecturer, Health Economics) was responsible for the analysis of costs and benefits and for writing up the findings.

Professor Sue Bailey (Child and Adolescent Psychiatrist) contributed to the consultation phase of the study and to the preparation of this report.

Professor Soo Downe (Professor in Midwifery Studies) led the systematic review of the literature and wrote up the findings.

Data sharing statement

All available data are included as appendices to this report.

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Appendix 1 The mapping survey



Dear Colleague

We are inviting you to take part in this survey for professionals involved in managing or delivering programmes or initiatives aimed at the general population of children and young people to prevent domestic violence/abuse.

The survey is part of a wider review of prevention work, funded by the National Institute for Health Research, for more information visit the website www.nihr.ac.uk.

We would be grateful if you or someone involved in managing or delivering programmes in your locality could complete the survey within one week of receiving it. It should take no more than 30 minutes to complete it for one programme. You don't have to complete it all in one go - if you want you can leave it and return to it at another time - your answers will be automatically saved.

If you know of more than one programme please complete a separate section for each one, there is space to tell us of up to five. Please answer as many questions as possible. Click on the Next box at the bottom of the page to move to the next question.

If you do not know of any programmes, or if you have limited knowledge, please still complete questions 1-5 since part of the research is to map what is and is not happening in your area. Where we ask for copies of programmes to be sent to us, please send to Nicola Farrelly at NJFarrelly@uclan.ac.uk.

The information you provide will be held in compliance with the Data Protection Act. A summary of the research findings will be provided electronically to those organisations participating in the study. Please do not hesitate to contact us if you have any questions or require further information; Jane Ellis JEllis2@uclan.ac.uk 01772 895462 or Nicola Farrelly NJFarrelly@uclan.ac.uk 01772 894362

Many thanks for your help, your answers will help shape services to prevent domestic violence or abuse throughout the UK.

1. Please tick to proceed

- I have read this page

DEFINITIONS AND ABBREVIATIONS

DOMESTIC ABUSE OR DOMESTIC VIOLENCE is used to mean:

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse:

- psychological
- physical
- sexual
- financial
- emotional

This definition includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage

PROGRAMME is used to mean any initiative, project, one of event, media campaign, school assembly, lesson plan, scheme of work or external resource.

CHILDREN AND YOUNG PEOPLE (CYP) is used to mean those up to 18 years of age

PREVENTION is used to mean interventions or activities with the general population of CYP which aim to stop domestic violence before it begins. This is usually referred to as primary prevention.

BAMER Black, Asian, minority ethnic and refugee

PSHE Personal Social and Health Education PSE Personal and Social Education

SPHE Social, Personal and Health Education

2. Please tick to proceed

- I have read this page

3. Do you know of any current or recent (last 2 years) programmes for CYP in your locality that aim to prevent domestic abuse e.g. educational, media or other campaigns? Please ignore any national campaigns that have not been implemented locally.

- Yes
- No

4. Please list below the title of all the prevention programmes in your locality that you know of:

IF IT IS DELIVERED AS PART OF THE SCHOOL CURRICULUM AND DOES NOT HAVE A FORMAL NAME PLEASE DESCRIBE IT IN THE QUESTION 5 BELOW

| | |
|---|--|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |

5. Please describe the programme if it does not have a formal name and you have not listed it above

Programme 1

PLEASE ANSWER AS MANY OF THE FOLLOWING QUESTIONS AS POSSIBLE FOR 'PROGRAMME 1'

IF YOU HAVE MORE THAN ONE PROGRAMME TO REPORT, YOU WILL BE ASKED SEPARATE QUESTIONS FOR THOSE PROGRAMMES AT THE END OF THE SURVEY

6. Where is the programme delivered? (Please tick all that apply)
- a. Nursery or pre-school
 - b. Primary mainstream school
 - c. Primary special school
 - d. Secondary mainstream school
 - e. Secondary special school
 - f. Pupil referral unit or other alternative provision
 - g. College
 - h. Young people's centre or community centre
 - i. Young offender institution, secure children's home or training centre
 - j. Outreach (from a school/centre but in the local community)
 - k. Health centre
 - l. Media campaign
 - m. Online campaign or activities
 - n. Other (please specify)

7. What does the programme address? (Please tick all that apply)

- a. Domestic abuse/violence in adult relationships
- b. Domestic abuse/violence in young people's intimate relationships
- c. Sexual exploitation
- d. Child abuse
- e. Peer violence/bullying
- f. Homophobia
- g. Racism
- h. Other (please specify)

8. Who is involved in delivering the programme? (Please tick all that apply)

- a. Class teachers (primary/middle)
- b. Form teachers (secondary/high)
- c. Specialist PSHE/PSE/SPHE teachers
- d. Other teachers
- e. Lecturers
- f. Youth workers
- g. Young people (please specify ages in next question)
- h. Police officers
- i. School counsellors/guidance teachers
- j. Staff from domestic violence organisations (please specify agency in next question)
- k. School nurses
- l. Staff from voluntary children's organisations (please specify agency in next question)
- m. Staff from other voluntary organisations (please specify agency in next question)
- n. Sexual health workers
- o. I don't know
- p. Other (please specify job title/role and organisation)

9. Please specify age/agency

If you are able to provide more detailed information about any of these programmes, please continue with the following questions.

Programme Development

10. When did the programme begin? (Month/Year)

11. Is the programme still running?

- Yes
- No
- I don't know

12. When did the programme end?

Month/Year

Not known (Please write 'NK')

13. Why did it stop running? (Please tick all that apply)

- a. Funding ended
- b. No longer a local or organisation priority
- c. Person leading the programme left
- d. Always intended to be time limited
- e. I don't know
- f. Other (please specify)

14. Was it built on a programme obtained from elsewhere?

- Yes
- No (designed locally)
- I don't know

15. What has influenced or informed the design and content of this programme? (Please write 'NK' if Not Known)

16. Were CYP involved in designing the programme?

- Yes
- No
- I don't know

17. Which topics does/did the programme cover? (Please tick all that apply)

- a. Definitions of domestic violence
- b. Types of abuse
- c. Recognising domestic violence when it is happening
- d. Consent and coercion
- e. Grooming
- f. Female genital mutilation
- g. Domestic violence and issues for BAMER children
- h. Domestic violence and issues for children with disability(S) and/or learning difficulty(s)
- i. Domestic violence and LGBT relationships
- j. Services for CYP experiencing domestic violence
- k. Stories of survivors
- l. Help seeking
- m. Safety strategies
- n. Personal safety
- o. Intervening safely in incidents of domestic violence
- p. Non-violent conflict resolution
- q. Problem solving
- r. Group confidentiality
- s. Disclosure and Safeguarding
- t. Contributing to campaigns and action on domestic violence
- u. How domestic violence is depicted in the media
- v. Rights
- w. I don't know
- x. Other (please specify)

18. Please tell us what the programme is/was trying to achieve?**19. Were you involved in setting up the programme?**

- Yes
- No

20. Do you think it has changed over time?

- Yes
- No

21. How has it changed?

PROGRAMME DELIVERY**22. Who is/was the main funder of the programme? (Please tick one box only)**

- a. School
- b. Local authority education service
- c. Local authority youth service
- d. Local authority children's social care
- e. National Health Service
- f. Police
- g. Home office
- h. Community safety partnership
- i. National domestic violence organisation
- j. Local domestic violence organisation
- k. Other voluntary sector organisation (please specify)
- l. Trust/foundation/charity/individual (please specify)
- m. I don't know
- n. Other (please specify)

23. What is the approximate total length of the programme in hours?

- Length in Hours
- I don't know (please write 'DK')

24. What pattern of delivery does the programme take? e.g. one block of three hours, a daily advert, one hour a week for a school term

- Pattern of delivery
- I don't know (please write 'DK')

25. What is the reason for this pattern?

- Reason
- I don't know (please write 'DK')

26. What ages is the programme targeted at (in years)?

- Ages
- I don't know (please write 'DK')

27. Are different components of the programme delivered or targeted to different age groups?

- Yes
- No
- I don't know

28. Please specify in what way different components of the programme are delivered/targeted to different age groups

29. Is the programme delivered or targeted at groups that are? (Please tick all that apply):

- Girls only
- Boys only
- Mixed sex
- Both mixed and single sex

30. What is the reason for this grouping?

31. Where the programme is delivered in school, in which subject area(s) is it delivered?

- PSHE/PSE/SPHE
- Citizenship
- Drama
- Science
- Other (please specify)

32. Which methods of delivery are used? (Please tick all that apply)

- a. School assembly
- b. Whole group discussion
- c. Small group discussion
- d. Work in pairs
- e. Individual work
- f. Role play
- g. DVD
- h. Direct instruction
- i. Online resources
- j. Adverts
- k. Community event
- l. Art or drama
- m. Theatre in education
- n. Other (please specify)

33. Is the programme delivered in conjunction with a programme for: (Please tick all that apply)

- a. Parents/carers
- b. Other adults in the local community
- c. Professionals working with the local community
- d. Service managers
- e. I don't know
- f. Other (please specify)

34. Did the facilitators of face to face programmes undertake specific training to deliver it?

- Yes
- No
- Some but not all
- I don't know

35. Please estimate how many CYP have participated in the programme in the previous 12 months?

- Number of CYP
- I don't know (please write 'DK')

36. **Approximately what percentage of these CYP are Black, Asian, minority ethnic or refugee? (please estimate if necessary)**

37. **Approximately what percentage of these CYP has a disability or special need? (please estimate if necessary)**

38. **Do you find out what impact this programme has on individual CYP's?**

- Yes
- No
- I don't know

39. **Please state how**

40. **Has the programme been evaluated?**

- Yes
- No
- I don't know

41. **Was the evaluation undertaken:**

- In house
- Independently
- I don't know

42. **Is there a report available?**

- Yes (please send this to njfarrelly@uclan.ac.uk or provide details of where it can be accessed in question below)
- Currently being evaluated but report not yet available
- No
- I don't know

43. **Please let us know where we can access the report**

44. In your view, what has the programme achieved? Please tell us what has contributed to the achievements and on what your view is based.

45. In your view what have been the difficulties in developing and delivering the programme?

46. Do you know of any other programmes that you would also like to tell us about?

- Yes
- No

213. What is your job title?

214. What organisation do you work for?

215. Please tell us the first part of your organisations postcode i.e W1 or CV2

216. If necessary may we contact you for more information?

217. Please provide your email address and telephone number:

218. If you would like to add any further comments please use the space below



Thank you for your help in completing this survey. Your answers will help shape services to prevent domestic violence or abuse throughout the UK.

Appendix 2 Databases searched and parameters used for systematic review (example)

Search string used on all searches: 'domestic abuse' or 'domestic violence' or 'marital abuse' or 'marital violence' or 'intimate partner abuse' or 'intimate partner violence' or 'spous* abuse' or 'spouse* violence' combined with interven* or prevent* or educ*

TABLE 30 EBSCOhost multidatabase search

| Database | Limiters |
|----------------------------|--|
| PsycARTICLES | Published date from: 1 January 1990 to 31 July 2013; year of publication from: 1990–2013; Age groups: childhood (birth–12 years), adolescence (13–17 years), young adulthood (18–29 years); population group: human |
| AMED | Published date from: 1 January 1990 to 31 July 2013 |
| CINAHL Plus with Full Text | Published date from: 1 January 1990 to 31 July 2013; English language; human; language: English; age groups: infant: 1–23 months, child, preschool: 2–5 years, child: 6–12 years, adolescent: 13–18 years |
| ERIC | Published date from: 1 January 1990 to 31 July 2013 |
| MEDLINE with Full Text | Published date from: 1 January 1990 to 31 July 2013; human; age related: all infant: birth–23 months, child, preschool: 2–5 years, child: 6–12 years, adolescent: 13–18 years; language: English |
| PsycINFO | Published date from: 1 January 1990 to 31 July 2013; English; language: English; age groups: childhood (birth–12 years), preschool age (2–5 years), school age (6–12 years), adolescence (13–17 years), young adulthood (18–29 years); population group: human |

AMED, Allied and Complementary Medicine Database; ERIC, Education Resources Information Center.

Ovid multidatabase search

Databases

EMBASE: searched 1974 to 15 July 2013.

ERIC: searched 1965 to June 2013.

Ovid MEDLINE(R) In-Process & Other Non-Indexed Citations and Ovid MEDLINE(R): searched 1946 to present.

Social Work Abstracts: searched 1968 to June 2013.

Social Policy and Practice: April 2013.

Limiters are universally applied across all databases by Ovid but, as is evident from the information in Box 2, not all limiters were available on all databases, so in these cases they were not applied.

BOX 2 Limiters

((('domestic abuse' or 'domestic violence' or 'marital abuse' or 'marital violence' or 'intimate partner abuse' or 'intimate partner violence' or 'spous* abuse' or 'spouse* violence') and (interven* or prevent* or educ*)).ab.

limit 1 to (human and english language and yr = '2000 -Current') [Limit not valid in ERIC,SWAB,Social Policy and Practice; records were retained]

limit 2 to (child <unspecified age> or preschool child < 1 to 6 years> or

school child < 7 to 12 years> or adolescent < 13 to 17 years>) [Limit not valid in ERIC,Ovid MEDLINE(R),Ovid MEDLINE(R) In-Process,SWAB,Social Policy and Practice; records were retained]

limit 1 to 'all child (0 to 18 years)' [Limit not valid in EMBASE,ERIC,SWAB,Social Policy and Practice; records were retained]

limit 6 to english language [Limit not valid in SWAB,Social Policy and Practice; records were retained]

limit 7 to human [Limit not valid in ERIC,SWAB,Social Policy and Practice; records were retained]

limit 8 to (child <unspecified age> or preschool child < 1 to 6 years> or school child < 7 to 12 years> or adolescent < 13 to 17 years>) [Limit not valid in ERIC,Ovid MEDLINE(R),Ovid MEDLINE(R) In-Process,SWAB, Social Policy and Practice; records were retained]

limit 9 to yr = '1990 -Current'

limit 2 to 'all child (0 to 18 years)' [Limit not valid in EMBASE,ERIC,SWAB,Social Policy and Practice; records were retained]

limit 12 to human [Limit not valid in ERIC,SWAB,Social Policy and Practice; records were retained]

limit 13 to (child <unspecified age> or preschool child < 1 to 6 years> or school child < 7 to 12 years> or adolescent < 13 to 17 years>) [Limit not valid in ERIC,Ovid MEDLINE(R),Ovid MEDLINE(R) In-Process,SWAB, Social Policy and Practice; records were retained]

limit 14 to yr = '1990 -Current'

remove duplicates

TABLE 31 Education databases: limiters

| | |
|---|------|
| ((‘domestic abuse’ or ‘domestic violence’ or ‘marital abuse’ or ‘marital violence’ or ‘intimate partner abuse’ or ‘intimate partner violence’ or ‘spous* abuse’ or ‘spouse* violence’) and (interven* or prevent* or educ*)).ab. | 7567 |
| limit 1 to (human and english language and yr = ‘2000 -Current’) [Limit not valid in ERIC,SWAB,Social Policy and Practice; records were retained] | 5899 |
| limit 2 to (child <unspecified age> or preschool child < 1 to 6 years> or school child < 7 to 12 years> or adolescent < 13 to 17 years>) [Limit not valid in ERIC,Ovid MEDLINE(R),Ovid MEDLINE(R) In-Process,SWAB,Social Policy and Practice; records were retained] | 4274 |
| limit 1 to ‘all child (0 to 18 years)’ [Limit not valid in EMBASE,ERIC,SWAB,Social Policy and Practice; records were retained] | 5952 |
| limit 6 to english language [Limit not valid in SWAB,Social Policy and Practice; records were retained] | 5760 |
| limit 7 to human [Limit not valid in ERIC,SWAB,Social Policy and Practice; records were retained] | 5623 |
| limit 8 to (child <unspecified age> or preschool child < 1 to 6 years> or school child < 7 to 12 years> or adolescent < 13 to 17 years>) [Limit not valid in ERIC,Ovid MEDLINE(R),Ovid MEDLINE(R) In-Process,SWAB,Social Policy and Practice; records were retained] | 3759 |
| limit 9 to yr = ‘1990 -Current’ | 3646 |
| limit 2 to ‘all child (0 to 18 years)’ [Limit not valid in EMBASE,ERIC,SWAB,Social Policy and Practice; records were retained] | 4820 |
| limit 12 to human [Limit not valid in ERIC,SWAB,Social Policy and Practice; records were retained] | 4820 |
| limit 13 to (child <unspecified age> or preschool child < 1 to 6 years> or school child < 7 to 12 years> or adolescent < 13 to 17 years>) [Limit not valid in ERIC,Ovid MEDLINE(R),Ovid MEDLINE(R) In-Process,SWAB,Social Policy and Practice; records were retained] | 3195 |
| limit 14 to yr = ‘1990 -Current’ | 3195 |
| remove duplicates | 2489 |

Date: from January 1990 to July 2013. Language: English. Across Australian Education Index and British Education Index [and Educational Resources Information Center (ERIC)] – so will be duplication with ERIC.

Appendix 3 Websites searched for grey literature

TABLE 32 Websites for manual search for UK grey literature

| Organisation | Website |
|---|--------------------------------|
| A Call to Men UK | acalltomenuk.co.uk |
| Advance Advocacy Project | advanceadvocacyproject.org.uk |
| AVA | avaproject.org.uk |
| Amina Muslim Women's Resource Centre | mwrc.org.uk |
| Arch | archnorthstaffs.org.uk |
| Ashiana Network | ashiana.org.uk |
| Asian Women's Centre | asianwomenscentre.org.uk |
| Australian Domestic & Family Violence Clearinghouse | www.adfvc.unsw.edu.au |
| Barnardo's | barnados.org.uk |
| Barnet Asian Women's Association | bawaonline.org |
| Birmingham and Solihull Women's Aid | bswaid.org.uk |
| Black Women's Health and Family Support | bwhafs.com |
| Bristol AVA | bava.org.uk |
| Broken Rainbow | broken-rainbow.org.uk |
| Child and Woman Abuse Studies Unit | cwasu.org |
| Comic Relief | comicrelief.com |
| Convention of Preventing and Combating Violence Against Women and Domestic Violence | hub.coe.int |
| Co-ordinated Action Against Domestic Abuse | caada.org.uk |
| Coordinated Community Response Model Online Toolkit | ccrm.org.uk |
| Daphne Programme | ec.europa.eu/justice |
| Direct GOV.UK | direct.gov.uk |
| Domestic Violence Training Ltd | dvtltd.com |
| Domestic Violence UK | domesticviolenceuk.org |
| Eaves | eavesforwomen.org.uk |
| Economic and Social Research Council | esrc.ac.uk |
| End the Fear | endthefear.co.uk |
| End Violence Against Women | endviolenceagainstwomen.org.uk |
| Equality and Human Rights Commission | equalityhumanrights.com |
| ETHOS | ethos.bl.uk |
| Faculty of Public Health UK | fph.org.uk |
| Forward | forwarduk.org.uk |
| Family Planning Association | fpa.org.uk |
| FTM London | ftmlondon.org.uk |
| Girlguiding UK | girlguiding.org.uk |
| Health Scotland | healthscotland.com |

continued

TABLE 32 Websites for manual search for UK grey literature (continued)

| Organisation | Website |
|--|--|
| Hidden Hurt | hiddenhurt.co.uk |
| Imkaan | imkaan.org.uk |
| Jewish Women's Aid | jwa.org.uk |
| Kalayaan | kalayaan.org.uk |
| London Borough of Barnet | barnet.gov.uk |
| ManKind Initiative | mankind.org.uk |
| National Centre for Domestic Violence | ncdv.org.uk |
| National Children's Bureau | ncb.org.uk |
| National Federation of Women's Institutes | thewi.org.uk |
| National LGBT&T Partnership | lgf.org.uk |
| Newham Asian Women's Project | nawp.org |
| NIA Ending Violence | niaendingviolence.org.uk |
| Northern Rock Foundation | nr-foundation.org.uk |
| NSPCC | nspcc.org.uk |
| Oasis Centre | oasiscentre.org |
| Relationship Education and Domestic Abuse Prevention Tuition | keele.ac.uk/readapt |
| Refuge | refuge.org.uk |
| Respect | respect.uk.net |
| Respond | respond.org.uk |
| Restored – Ending Violence Against Women | restoredrelationships.org |
| Rosa | rosauk.org |
| Safer Wales | saferwales.com |
| Scottish Women's Aid | scottishwomensaid.org.uk |
| Shakti Women's Aid | shaktiedinburgh.co.uk |
| Solace Women's Aid | solacewomensaid.org |
| Southall Black Sisters | southallblacksisters.org.uk |
| Southampton Rape Crisis | southamptonrapecrisis.com |
| Standing Together Against Domestic Violence | standingtogether.org.uk |
| Stonewall | stonewall.org.uk |
| UN End Violence Against Women | endvawnow.org |
| VIP (Violence Is Preventable) | violenceispreventable.org.uk |
| Welsh Women's Aid | welshwomensaid.org.uk |
| White Ribbon Campaign UK | whiteribboncampaign.co.uk |
| Womankind Worldwide | womankind.org.uk |
| Women's Aid | womensaid.org.uk |
| Women's Aid Northern Ireland | womensaidni.org |
| Women's Resource Centre | wrc.org.uk |
| Women's Support Project | womenssupportproject.co.uk |

All searches were undertaken on 7, 8, 20 and 27 August 2013.

Appendix 4 Consultation group members

Young people's consultation group

The young people participating in this group were all members of Coventry Youth Council.

Media consultation group

Liz Armitti, Welsh Women's Aid
Maggie Atkinson, Office of the Children's Commissioner
Christine Barter, University of Bristol
Joanne Creighton, Respect
Liz Dempsey, NSPCC
Eustace DeSousa, Public Health England
Hannah Flynn, NSPCC
Franki Hackett, Women's Aid
Shannon Harvey, AVA
Matt Hay, Latimer Creative Media
Lesley Irving, Scottish Government
Laura Jones, Home Office
Sylvi King, Women's Aid
Meg Kissack, Welsh Women's Aid
Thienhuong Nguyen, Women's Aid
Jo Sharpen, AVA
Jenny Tudor, Women's Aid

NSPCC, National Society for the Prevention of Cruelty to Children.

Education consultation group

Nick Boddington, PSHE Association

Gill Frances, PSHE Association

Pattie Friend, Hounslow Learning to Respect Programme

Joe Hayman, PSHE Association

Kate Iwi, Respect

Sandra Johnson, Essex County Council

Kay Joel, NSPCC

Clare Maxwell, Institute of Education

Susie McDonald, Tender

Thienhuong Nguyen, Women's Aid

Debbie Ollis, Deakin University, Australia

Oliver Proctor, Tender

Lynn Sardinha, University of Bristol

Karen Summels, PSHE Association

Laura Thomson, Zero Tolerance

Debbie Walmsley, Comic Relief

Julia Worms, Respect

Marilyn Worthington, PSHE Association and Whitby High School,
Cheshire

NSPCC, National Society for the Prevention of Cruelty
to Children.

Appendix 5 Topic guide for interviews with experts

Preamble

Introduce self and study.

Thank them for agreeing to talk with us.

Quick outline of purpose of interview – primary prevention of DV/DA – need to clarify with North Americans that we are talking about intimate partner violence.

Verbal consent

Recording.

May use some of what you tell us in a published study but would not identify you by name.

Personal data securely stored for the requisite period.

All electronic data will be password protected, all printed materials stored in a lockable filing cabinet.

Their involvement

Please tell us about the main ways in which you are or have been involved in prevention work?

What specifically is/has their role been?

Design/implement/strategy/policy/evaluation.

Main focus.

Local/regional (state)/national (federal).

How long have they been involved?

Current/latest developments

What would you say are the latest developments you have been directly involved in?

Other things they know about?

Thinking of the most significant programmes of work you know:

What is the focus of this work?

What is it aiming to achieve?

What mechanisms is it using to achieve these aims?

If any how were these decided?

How is the programme built on these mechanisms?

Has the focus changed over time? In what ways?

Probe design/implementation/target groups/evaluation.

In your view what has brought this change about?

Recognition of problem/use of evidence/legislation/policy/funding.

Are there/have there been any barriers to implementing this work? What?

How have they been overcome, if they have?

What factors have contributed to the sustainability of these programmes/campaigns?

What are the challenges in evaluating this work?

Programme effectiveness

In your view what makes a programme effective?

Probe factors, e.g. length/facilitators/content/method of delivery/location of delivery/readiness of cyp, community, school/targeted at particular groups/use of underlying theory.

What changes do you think programmes bring about?

Do different groups of children and young people benefit more than others?

What factors do you think influence these differences?

What evidence is there that programmes bring about attitude change?

What measures of attitude change are used?

Is there any evidence at this stage that programmes bring about behaviour change?

Probe – help-seeking for particular groups.

What measures of behaviour change are used?

Are there any particular programmes that you know of that look like they are more effective than others? Why do you think that?

Any other comments they would like to add.

Is there anyone else you think it is worth us talking with?

Appendix 6 The programmes by area and type of provision

TABLE 33 Reported programmes/interventions by area and type of provision

| Name of programme | Area | Type of provision |
|--|-----------------|------------------------|
| Respect Yourself | Bournemouth | School |
| Spiralling | Bournemouth | School |
| Domestic Violence Prevention Education Initiatives, Advance, Brent | Brent | School |
| Safe Date | Buckinghamshire | School |
| STAR YP | Ceredigion | School |
| No Fear – Heading for Healthy Relationships | Derry | School |
| Mentors in Violence Prevention (Scotland) Programme | Glasgow | School |
| ChildLine | Glasgow | School |
| Women’s Aid deliver a series of lessons | Glasgow | School |
| Children First deliver two lessons | Glasgow | School |
| Loves Me Loves Me Not | Kent | School |
| Project Salus | Kent | School |
| Women’s Aid programme – Expect Respect | Kent | School |
| DAY programme | Kent | School |
| Project Salus Domestic Abuse Service | Kent | School |
| Positive Relationships | Kent | School |
| The Rising Sun Programme North/South Kent | Kent | School |
| Healthy Relationships | Lancashire | School |
| Let’s Talk About Us Programme | Lancashire | School |
| Helping Hands | Lancashire | School |
| It Ends Here | Lancashire | School |
| Wise Up | Lancashire | School |
| Schools Peer Mentoring Scheme | Lancashire | School |
| School sessions | Lancashire | School |
| HARV | Lancashire | School |
| Escape The Trap | Lancashire | School |
| SWACA Relationships Programme | Liverpool | School |
| NSPCC – ChildLine Schools Services | Liverpool | School |
| Young Persons Domestic Abuse Awareness Session | Liverpool | School |
| In A Happy Healthy Relationship | Liverpool | School |
| NSPCC workshop | Liverpool | School |
| Tender Healthy Relationships – Acting to End Abuse | Liverpool | School |
| Beat Abuse – peer education programme | Liverpool | School/media/community |

continued

TABLE 33 Reported programmes/interventions by area and type of provision (continued)

| Name of programme | Area | Type of provision |
|--|-----------------|------------------------|
| Distributed Ariel Trust Resources re domestic abuse and Young People | Liverpool | School |
| Informal Education in Youth and Play Units | Liverpool | Community |
| Use of Plays, e.g. Terriers | Liverpool | School |
| Highlighted in local anti-bullying week | Liverpool | School |
| DARE | Newcastle | School/media/community |
| Themwifies | Newcastle | School |
| Northumbria Police Domestic Violence Media Campaign | Newcastle | Media |
| Promotion of expect respect in secondary schools | North Yorkshire | School |
| Miss Dorothy Watch Over Me | North Yorkshire | School |
| Miss Dorothy | North Yorkshire | School |
| Healthy Relationships workshops (not part of Curriculum) | North Yorkshire | School |
| Respect Toolkit | North Yorkshire | School |
| Respect Young People's Service (Not in Schools) | North Yorkshire | Community |
| IDAS work with schools | North Yorkshire | School |
| Choices – Targeted project for young men | Nottinghamshire | School |
| GREAT Project | Nottinghamshire | School |
| GREAT PROJECT | Nottinghamshire | School |
| The GREAT Project | Nottinghamshire | School |
| The GREAT Project | Nottinghamshire | School |
| The GREAT Project | Nottinghamshire | School |
| Equate – A Whole School Approach | Nottinghamshire | School |
| SAFE (Stay Abuse Free Education) | Nottinghamshire | School |
| 16 Days of Action White Ribbon Awareness Raising Event | Richmond | School/media/community |
| 16 Days of Action to Eradicate Violence against Women | Richmond | School |
| Teenage relationship abuse awareness sessions with young people | Richmond | School |
| 16 days of action workshops at local all-girls school for year 11 students | Richmond | School |
| See it Clearly – Healthy Relationship workshops | Slough | School |
| Safe Date workshops in schools | Unknown area | School |
| Expect Respect | Unknown area | School |
| Rising Sun: Positive Relationships | Unknown area | School |
| CYP programme KDAC | Unknown area | Community |
| GREAT Project | Unknown area | School |
| Miss Dot | Unknown area | School |
| Changing Places Programme | Unknown area | School |
| K-DASH | Unknown area | School |
| Behind Closed Doors | Unknown area | School |
| GREAT | Unknown area | School |
| London Councils Domestic Violence Prevention Strand | Unknown area | School |

TABLE 33 Reported programmes/interventions by area and type of provision (*continued*)

| Name of programme | Area | Type of provision |
|---|--------------|------------------------|
| Love Shouldn't Hurt | Unknown area | School |
| GREAT | Unknown area | School |
| Healthy Relationships workshop | Unknown area | School |
| TRUE Project | Unknown area | School |
| Project Salus | Unknown area | School |
| SRE & PSHE curriculum | Unknown area | School |
| GREAT | Unknown area | School |
| Positive Relationships | Unknown area | School |
| Childline, NSPCC to years 6 and 7 | Unknown area | School |
| Miss Dorothy | Unknown area | School |
| Equation – Equate Project (secondary Schools) | Unknown area | School |
| Expect Respect Girl's Group | Unknown area | School |
| WKS | Unknown area | School |
| The Great Project | Unknown area | School |
| Equation – Choices for Boys (YOTs and in schools) | Unknown area | School and community |
| SHINE group | Unknown area | School |
| Beat Abuse | Unknown area | School/media/community |
| Equation – Know More (girls affected by gangs and vulnerable young women) | Unknown area | Community |
| College workshops | Unknown area | School |
| School project assemblies and PSHE workshops | Unknown area | School |

CYP, Children and Young People; GREAT, Good Relationships Are Equal and Trusting; HARV, Hyndburn and Ribble Valley Domestic Violence Team; KDAC, Kent Domestic Abuse Consortium; NSPCC, National Society for the Prevention of Cruelty to Children; SRE, Sex and Relationship Education; SWACA, Sefton Women's and Children's Aid.

Note

Some programmes appear more than once as they were reported by more than one respondent.

Appendix 7 Summary characteristics tables for included studies

TABLE 34 Summary characteristics, controlled trials

| Author and date | Programme | Study quality | Coherent theoretical framework | Programme content reflects framework | Youth input? | Delivered with high compliance and fidelity | Changes in variables (all small unless noted) ^{a,b} | Changes in outcomes at 1 year+ | Resource needs (H, M, L) | n youth included in final sample (intervention; control) | n sites | Context |
|---|-------------------------|---------------|--------------------------------|--------------------------------------|---|---|--|---|--|--|---------|--|
| Miller <i>et al.</i> 2012 ⁴⁴ | Coaching Boys into Men | A/B | Y | Y | N | 60% full compliance by coaches | K, B, I | | M | 847/1008; 951/998 | 8:8 | US athletic culture. All ages |
| Jaycox <i>et al.</i> 2006 ⁴⁵ | Break the Cycle | B | Y | Y | Y | On average, 69% of curriculum covered | K, A, B K, B | | M (basic: only 3 hours but with lawyers) M (additional activities) | 1384/1941; 1156/1859 | 55:55 | Latino/a population: US culture where legal solutions are the norm. All ages |
| Wolfe <i>et al.</i> 2009 ⁵⁰ | Fourth R | B | Y | Y | Y (peer support as part of the programme) | Not reported | I | I: at 2.5 years reported DV 2.4% less but Cis for adjusted OR including 1 | M (training for teachers) H (taught in 28 pre-existing sessions to both groups) | 754/916; 968/927 | 10:10 | Grade 9 students |
| Pacifici <i>et al.</i> 2001 ⁴⁶ | No specific title | B | Y | Y | Y 'videos to create credible communication through peers' | Not reported | A but only for those more than 2 SDs above the mean at baseline and only after extensive post-hoc data modelling | | L | Total: 458/547 | 2 | Mainly 10th grade students |
| Foshee <i>et al.</i> 2012 ⁵³ | Families for Safe Dates | B | Y | Y | N | Y: 88% of the treatment families began the programme and 69% completed all six booklets | K, A, B, I Changes in 9/20 measures, but all ESs small or moderately small except for caregiver acceptance of DA. All except two significant changes are from caregiver perspective | Not reported | M | 1237 eligible households; 514 responses (37.1%) 140/230 in 'full treatment' arm completed follow-up (61%) 184/234 control completed follow-up (79%) 62% girls in treatment group vs. 55% in control group | N/A | Families with teenagers |

| Author and date | Programme | Study quality | Coherent theoretical framework | Programme content reflects framework | Youth input? | Delivered with high compliance and fidelity | Changes in variables (all small unless noted) ¹⁶ | Changes in outcomes at 1 year+ | Resource needs (H, M, L) | n youth included in final sample (intervention; control) | n sites | Context |
|---|-------------------|---------------|--------------------------------|--------------------------------------|--------------|---|--|--------------------------------|--------------------------|--|-------------------------------|--|
| Avery-Leaf <i>et al.</i> 1997 ⁴³ | No specific title | C/D (pilot) | Y | Y | N | Not reported | A change in acceptance of both male-to-female and female-to-male aggression: mean change 0.56715/1.05715. Other findings only about baseline differences | | M | 102 treatment/90 control 55% female overall: 63% of control group | 1 (health classes randomised) | One school year. Grades 9–12. Almost 80% white. Lower-middle class |
| | | | | | | | Subsequent analysis involved removing outliers and $p < 0.09$ so not reported here | | | 86% caregivers with high school education in treatment vs. 80% in control. Other baseline demographics that are reported are similar | | |

continued

TABLE 34 Summary characteristics, controlled trials (continued)

| Author and date | Programme | Study quality | Coherent and justified theoretical framework | Programme content reflects framework | Delivered with youth input (authentically) | Delivered with high compliance and fidelity | Meaningful changes in modifying or outcome variables (all small unless noted) ^{a,b} | Changes in outcomes at 1 year+ | Resource requirements (high, medium, low) | n youth included in final sample (intervention: control) | n schools included in sample | Context |
|---|--|---------------|--|--------------------------------------|--|---|--|--------------------------------------|---|--|--------------------------------------|--|
| Foshee <i>et al.</i> 1998 ⁴⁴ | Safe Dates | B | Y | ? | N | Y | A, K, I Large changes in knowledge | A, K 12 months | H | Total n 1700/ 1886 (n by group not given as analysis by school) | 7:7 | Eighth and ninth grade (13–15 years). High levels of dating violence at baseline (1:3) See reference 54 |
| Foshee <i>et al.</i> 2000 ⁵⁵ | Safe Dates: 1-year follow-up | | Logic model | | | 90.7% of curriculum delivered | | | | 1603 left in at 1 year | 7:7 | See reference 54 |
| Foshee <i>et al.</i> 2004 ³² | Safe Dates + booster; 4 years | | | | | | I (but NB mostly very small, skewed) | I (but NB mostly very small, skewed) | | 460 | 5:5 | Eighth grade only: subrandomised to booster or not |
| Foshee <i>et al.</i> 2005 ⁵¹ | 'Safe Dates': 4 years' individual analysis | | | | | | K, A (moderate effects) I (small effects, wide CIs) | | | 1566 left in analysis (636 treatment/930 control: those who received the booster excluded: analysis by individual) | 7:7 | See reference 52 |
| Taylor <i>et al.</i> 2013 ⁴⁷ | Shifting Boundaries | B | Y | Y | Y | Not reported | I (at 6 months: building only – but it also increased some non-DV risk behaviours | | M | 2655 in total: allocation between groups not specified | 30 Group allocation not specified | Sixth and seventh grade 40% of participants had been in prior violence prevention programmes. Very deprived communities. 85% non-white. More than half under national expected academic achievement |

| Author and date | Programme | Study quality | Coherent and justified theoretical framework | Programme content reflects framework | Delivered with youth input (authentically) | Delivered with high compliance and fidelity | Meaningful changes in modifying or outcome variables (all small unless noted) ^{a,b} | Meaningful changes in outcomes at 1 year+ | Resource requirements (high, medium, low) | <i>n</i> youth included in final sample (intervention: control) | <i>n</i> schools included in sample | Context |
|---|---|---------------|---|--------------------------------------|--|---|--|---|---|---|--|--|
| Taylor <i>et al.</i> 2010 ⁴⁸ | No specific programme title | B | Y Logic model (only presented in Taylor <i>et al.</i> 2010 ⁵²) | Y | N | Not reported | K, A, I (increase in perpetration) K, A (6 months) | | M | 1639 in total: allocation between groups not specified | 123 classrooms: group allocation not specified | Sixth and seventh grade. Wide ethnic mix |
| Taylor <i>et al.</i> 2010 ⁴⁹ | Gender differences in Taylor <i>et al.</i> 2010 ⁵² | | | | | | None | | | | | |

ES, effect size.
a A, attitudes or beliefs; B, behaviour; DA, domestic abuse; DV, domestic violence; H, high; I, incidence (perpetration and/or victimisation); K, knowledge; L, low; M, medium; N, no; N/A, not applicable; Y, yes.
b All based on at least $p < 0.05$, unless there are very large numbers of multiple tests in which case it is set at $p < 0.01$.
Note on the use of colours
Light green font indicates immediately after the intervention and up to 1 month; dark green font indicates 6 months to under 4 years; and blue font indicates 4 or more years.

TABLE 35 Summary characteristics, cohort studies

| Lead author, date and country | Programme | Study quality | Coherent theoretical framework | Programme content reflects framework | Youth input? | Delivered with high compliance and fidelity |
|---|--|---|--|---|--|---|
| Bell and Stanley 2006, UK ⁵⁷ | Healthy Relationships programme | C for quantitative data B for qualitative data | Y | ? (programme had to fit in to UK national curriculum) | N | Not stated |
| Weisz and Black 2001, USA ⁶³ | Reaching and Teaching Teens to Stop Violence | D | Y | Y | ? role-play based on local groups' experience | Not stated |
| Hilton <i>et al.</i> ⁷⁰ 1998, Canada | Antiviolence education | C | ?Y | ?Y | N (but built on extensive testing of programme elements) | 'Normal absentee rate of 10–20%' for assembly. No other information |
| Macgowan 1997, USA ⁶⁵ | No specific title | C | Y | Y | Not evident | Y/N Fidelity assessed: compliance not noted |
| Gardner and Boellaard 2007 Canada ⁶⁰ | 'Connections: Relationship and Marriage' | C/D | Y Knowledge self-esteem changes attitudes and then behaviour. Relationship theory/ self-esteem | Y to an extent: more focused on self-esteem and behaviour than knowledge? | Not reported | Not reported |

| Changes in variables (all small unless noted) ^{ab} | Changes in outcomes at 1 year+ | Resource needs (high, medium, low) | <i>n</i> youth included in final sample (intervention: control) | <i>n</i> sites | Context | Comment |
|--|---|------------------------------------|--|-----------------|--|--|
| K, A, B | Only reported outcome re programme evaluation and only 55/85 completed it | M | Cohort before-and-after (no control) – 55/85 completed final assessment | 1 (1 class) | Year 8, one school; one class: high rates social exclusion, very low rates of academic success; marginalised community. Local DV services in place | <i>n</i> not always given – where % changes cited they are generally moderate, but transferability not clear |
| K at 6 months | Not collected | M | 46/27/21 intervention; 20/0/9: comparison, by time point | 1 (two classes) | 99% African American, very low income, many who had failed at other schools | |
| K at post test K at 6 weeks ESs small/moderate | Not collected | L | 325/370/489 Based on 123/489 who did all three tests | 4 | Grade 11. Mixed urban/rural | |
| Post test: <i>sum all data items</i> : treatment 0.10/4 control 0.01/4 <i>Within treatment group</i> : K: 2/7 items (each gender and both on 1/7: all on the other). Maximum 0.44/4 A: <i>non-physical violence</i> : changes in 5/7: 2/7 for each gender and both: 3 for various combinations; <i>physical/sexual violence</i> : 1/7 only boys change 0.20/4 | Not collected | M | 247 girls (56%), 193 boys (43.9% total 440/802: 241 treatment/199 control) More advanced level and older students in treatment group Systematic exclusions applied | 1 | Grades 6–8. 72.3% black non-Hispanic. 8.3% white. No other data | SDs indicate a non-normal sample |
| N | ?1 victimisation from just under 0.5 to just over 0.5/36: significant difference only from 1 year to 4 years post ($p=0.03$:? multiple testing) | H | 4 years post: 72/743 who did pre and post survey?/n completing course): except if further marriage course, and if could not be matched to a control | 30 schools | Grades 11–12 | No discussion of gender differences |

TABLE 35 Summary characteristics, cohort studies (continued)

| Lead author, date and country | Programme | Study quality | Coherent theoretical framework | Programme content reflects framework | Youth input? | Delivered with high compliance and fidelity |
|--|--|--|---|---|---|---|
| Belknap <i>et al.</i> 2013 USA ⁵⁹ | Theatre intervention to prevent teen dating violence | B/C | Y Emancipatory theory (theatre of the oppressed) | Y Plays are about power and response to power | ?Y Development of the plays highly iterative and based on prior qualitative work | Not reported |
| Black <i>et al.</i> 2012 USA ⁶¹ | Dating Violence Prevention Project | C | ? Group composition (especially gender) influences attitudes | ?Y Single- vs. mixed-gender groups; facilitation gender specific: but mixed groups arose by chance | Not noted | ? Not noted, though biweekly meetings with facilitators intended to increase fidelity. 75–80% of those eligible participated |
| Elias-Lambert <i>et al.</i> 2010 USA ⁶⁸ | | B for satisfaction survey C/D for transfer of qualitative data to % | | | | |
| Jaffe <i>et al.</i> ⁶⁴ 1992, Canada | No specific programme | C/D (lower score owing to incomplete reporting of data) | Y Behavioural change model | Y | ? Possible – need to check programme design papers | ? No data in this paper |
| Wai Wan and Bateman 2007, UK ⁵⁸ | No specific programme | C | ? Not clearly articulated | ? Not clearly articulated | Not evident from description of design | ? No data in this paper |

| Changes in variables (all small unless noted) ^{ab} | Changes in outcomes at 1 year+ | Resource needs (high, medium, low) | n youth included in final sample (intervention: control) | n sites | Context | Comment |
|---|--------------------------------|------------------------------------|---|-----------------------------------|---|---|
| A: within 2 weeks (difference 0.4/20 accept couple violence; difference 1.5/25 self-efficacy) B: (1.2/32 violent intentions) | Not assessed | M to develop L to deliver | 66 | Three schools? one class in each? | Eighth grade. High levels of poverty, 56% local community Latina/o. Most felt moderately unsafe locally | Qualitative data showed changes of views, but only 19 sent essays: no demographics given – no details on how/if disconfirming data were handled or gender information |
| A: boys in same-gender group, girls in mixed-groups (mean difference 5.26/40 boys, 4/40 girls. No other gender comparisons significant) | Not measured | M | 377/396 (intervention), 122/129 (control) | 2 | Very marginalised area; high absenteeism; low attainment; 99% African Americans | Comparison groups either health or art classes Demographics different across all groups. Corrections only for grade mix |
| A: (to programme). Girls more satisfied with the programme than boys regardless of group composition (mean difference of 4/60) | Not measured | | | | | No difference by gender mixed group. Girls' increased satisfaction minimal. Both genders liked same elements with very minimal differences in degree |
| A: all participants, and girls (both 11/48 items) and boys (8/48 items) (-A) 8/48 (boys) (-A) 6 weeks after: 6/8 variables (varied by gender) | Not measured | L/M | 627–629/737 | 4 | Low unemployment, relative affluence, mixed employment types, 90% + white | ? authors hypothesise that male defensiveness might have caused negative effect No actual data given for some claims |
| K: immediately post intervention 1 out of 8 items for control group, 3 out of 8 for intervention group A: 1 out of 21 items for boys in intervention group | Not measured | L/M | 100/107 intervention (58% female) 59/97 (47% female) | Two (one case one control) | No data given (though inner-city schools in North West England) | |

TABLE 35 Summary characteristics, cohort studies (continued)

| Lead author, date and country | Programme | Study quality | Coherent theoretical framework | Programme content reflects framework | Youth input? | Delivered with high compliance and fidelity |
|--|---|---------------|--------------------------------|--------------------------------------|---|---|
| Wolfe <i>et al.</i> 2012, Canada ⁵⁶ | Fourth R | A/B | Y | Y | Y In designing the scenarios and as lead actors in the role-play | ? No data given |
| Levoie <i>et al.</i> 1995 Canada ⁶⁷ | Prevention programme for violence in teen dating relationship | B/C | ? Behavioural change? | ? | Not evident | No data |

| Changes in variables (all small unless noted) ^{ab} | Changes in outcomes at 1 year+ | Resource needs (high, medium, low) | n youth included in final sample (intervention: control) | n sites | Context | Comment |
|---|---|--|---|--|---|--|
| <p>At 3 months after the programme</p> <p>B Intervention group as a whole <i>more likely to use delay tactics</i> (34% more used these) and particularly <i>in girls</i> (94% vs. 48%) $p < 0.01$</p> <p>Differences at $p < 0.05$ but NB multiple analyses: use of <i>negotiation and yielding tactics</i> over all, but <i>girls lower use of refusal in the intervention group</i> (data skewed in this measure)</p> | At two years, no difference in perpetration of DV by any use of technique | Not relevant for this element (see code 52 for information regarding the Fourth R programme) | <p>96 intervention</p> <p>100 controls</p> <p>56% female</p> <p>Intervention and control group participants similar</p> <p>98 randomly sampled video tapes for detailed teacher ratings (intervention: 19 girls, 28 boys, total 47; control: 32 girls, 19 boys, total 51)</p> | 6 of 20 in RCT three per arm: chosen for convenience | Grade 9. Location demographics similar to all 20 schools in Wolfe RCT ⁵⁰ | Details of types of skills in teacher ratings of the role-play behaviours suggest improvements in thinking/enquiry; application; communication and in perceived efficacy for the intervention group (all four mean differences around 3/44) and for intervention group girls in terms of application (mean difference 0.89/44) |
| <p>A: 1 month</p> <p>Girls improve more than boys in long sessions. 0.10 girls/boys in long: biggest absolute difference girls pre-post in long = 0.39). Approximately 15% 'low scorers' in each group improved on 16/17 items better on short: no gender effect</p> <p>K: 5/25 items in both short and long (four same items, two different). No gender effect on change in knowledge</p> | Not measured | <p>L (short form)</p> <p>M (long form)</p> | <p>Short: 279</p> <p>Long: 238</p> <p>(57%/53% girls)</p> <p>Only those attending sessions and completing pre and post measures: not clear how they compare to population</p> <p>Baseline scores better in short-course school. May be systematic bias</p> | 2: one long form one short form | Inner city. French speaking. 10th grade. No other information | <p>? not clear that there is a length of programme effect. Change in knowledge scores seem large (though absolute data not given) so giving information = increased knowledge. Changes in attitude very small</p> <p>No ES for some data</p> |

TABLE 35 Summary characteristics, cohort studies (continued)

| Lead author, date and country | Programme | Study quality | Coherent theoretical framework | Programme content reflects framework | Youth input? | Delivered with high compliance and fidelity |
|--|--|--|--|--|---|---|
| Krajewski <i>et al.</i> 1996 USA ⁶⁹ | Skills for Violence-free Relationships | B | Y Behaviour change/gender theory/power dynamics | Y | Not apparent | Not stated |
| Miller <i>et al.</i> 2014 India ⁶⁶ | Coaching Boys into Men | B | Y Behavioural change built on Positive deviancy; gender (social norms) theory (transformation of social norms of negative male attitudes to positive ones); change in a safe supportive | Y In theory: though extent to which coaches were persuaded to be role models is not clear | Y In prior qualitative work to develop the original programme for the Indian context | Y to an extent 80% of coaches completed all cards. 45% of participants reported exposure to 8–12 cards |
| Katz <i>et al.</i> 2011 ⁶² USA | Mentors in Violence Prevention | A/B Well designed but no baseline data (only post-intervention comparison) so findings may be an artefact | Y Social justice theory [social (gender) (peer) norms theory] | Y | Y | ? not stated |

a A, attitudes or beliefs; B, behaviour; DV, domestic violence; ES, effect size; H, high; I, incidence (perpetration and/or victimisation); K, knowledge; L, low; M, medium; N, No; Y, Yes.

b All based on at least $p < 0.05$, unless there are very large numbers of multiple tests in which case it is set at $p < 0.01$.

Note on the use of colours

Light green font indicates immediately after the intervention and up to 1 month; dark green font indicates up to 5 months; black font indicates 6 months to under 4 years; and blue font indicates 4 or more years.

| Changes in variables (all small unless noted) ^{ab} | Changes in outcomes at 1 year+ | Resource needs (high, medium, low) | <i>n</i> youth included in final sample (intervention: control) | <i>n</i> sites | Context | Comment |
|--|--|------------------------------------|--|--|---|---|
| 1 week after intervention: K A | 5 months: only difference 1/12 gender comparison A: girls improved more than boys in attitude 1 week to 5 months | M | 239 total – not clear how this divides between case and control | 2 | Seventh grade students 78.8% European American | Size of effects not obvious |
| Not measured | At 1 year: A: change in gender attitudes: 0.28/5 (95% CI 0.12 to 0.43) No difference in any other variables measured | H | 663/741 completed baseline questionnaire 309/663 completed follow up at 1 year (47%) – results only based on these 168/141 intervention/ comparison | 27/46 eligible: not clear why these and not the others | Age 10–16 years Hindu and Muslim neighbourhoods. Two-thirds in better-off housing, approximately one-third of mothers working Over 80% perpetrated violence at baseline | |
| Three months after last session, 9 years after programme inception A B NB changes relatively large: biggest mean difference 1.1/5 | Not measured | Not clear from text | 894 (89%) intervention school 850 (91%) control school | 2 | Grade 9–12. Approximately 50% white in both schools, but more Hispanic (23%) in intervention school: 36% African American in control school | Size and generalisability of effect not clear as snapshot only (not before-and-after study) |

Appendix 8 School classes and grades by country

TABLE 36 School classes and grades by country

| Age (years) | England and Wales ^a | | | USA | Canada | USA and Canada | | Scotland | | | | |
|-------------|--------------------------------|------------------------|---------------------------------|-------------------------|--------------|----------------|--------|----------|--------|---------------------|-------|-----------|
| | Year | Key stage | School | | | Grade | School | Grade | School | Age (years) | Year | |
| 3–4 | Nursery | Foundation/early years | | | | | | | | Nursery | 3–5 | Primary |
| 4–5 | Reception | | Infant or primary | | | | | | | Primary one | 4–6 | Primary |
| 5–6 | Year 1 | 1 | | Kindergarten | Kindergarten | Elementary | | | | Primary two | 5–7 | Primary |
| 6–7 | Year 2 | | | First grade | Grade 1 | | | | | Primary three | 6–8 | Primary |
| 7–8 | Year 3 | 2 | Junior or primary | Second grade | Grade 2 | | | | | Primary four | 7–9 | Primary |
| 8–9 | Year 4 | | | Third grade | Grade 3 | | | | | Primary five | 8–10 | Primary |
| 9–10 | Year 5 | | | Fourth grade | Grade 4 | | | | | Primary six | 9–11 | Primary |
| 10–11 | Year 6 | | | Fifth grade | Grade 5 | | | | | Primary seven | 10–12 | Primary |
| 11–12 | Year 7 | 3 | Secondary | Sixth grade | Grade 6 | Middle school | | | | First year (or S1) | 11–13 | Secondary |
| 12–13 | Year 8 | | | Seven grade | Grade 7 | | | | | Second year (or S2) | 12–14 | Secondary |
| 13–14 | Year 9 | | | Eighth grade | Grade 8 | | | | | Third year (or S3) | 13–15 | Secondary |
| 14–15 | Year 10 | 4 | | Ninth grade (freshman) | Grade 9 | High school | | | | Fourth year (or S4) | 14–16 | Secondary |
| 15–16 | Year 11 | | | Tenth grade (sophomore) | Grade 10 | | | | | Fifth year (or S5) | 15–17 | Secondary |
| 16–17 | Year 12 | 5 | Secondary or sixth form college | Eleventh grade (junior) | Grade 11 | | | | | Sixth year (or S6) | 16–18 | Secondary |
| 17–18 | Year 13 | | | Twelfth grade (senior) | Grade 12 | | | | | | | |

^a Schools in Northern Ireland are very similar to those in England and Wales and are therefore not included in the table.

Appendix 9 Theoretical model for Foshee *et al.*'s Safe Dates Prevention Programme

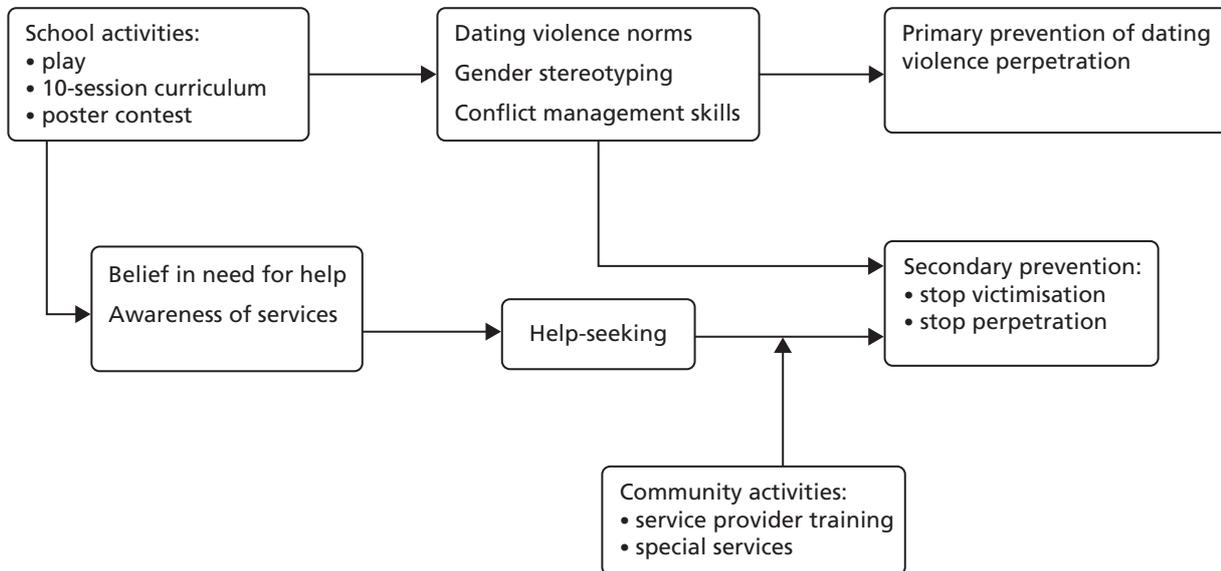


FIGURE 18 Foshee *et al.* (1998) Safe Dates theoretical model.⁵⁴ Reproduced with permission from: Foshee *et al.* An Evaluation of Safe Dates, An Adolescent Dating Violence Prevention Program. *American Journal of Public Health*, January 1998;88:45–50. Figure 1 – page 46. Publisher: The Sheridan Press.

Appendix 10 Summary of grey literature

TABLE 37 Summary of UK grey literature included in review

| Citation | Location of work | Summary |
|---|-------------------|---|
| Anonymous. <i>Prevention is Better than Cure . . . Safe: The Domestic Abuse Quarterly</i> . Bristol: Women's Aid; 2002–3 | England | Brief article discussing the rationale for prevention work in schools, with highlights of practice examples across the UK |
| Anonymous. <i>Promoting Respect for Self and Others: An Evaluation of Primary School Discussion/Art Projects within the Kirkintilloch High School Cluster</i> . 2007 | Scotland | Very brief report of the implementation and responses of children on a pilot project in a group of primary schools in Scotland |
| AVA. <i>Change the Story</i> . London: The Guide Association; 2013 | UK | Leaders guidance for the Girls in Action project for all sections of Girlguiding. Provides the opportunity for girls to learn about issues that affect girls and young women in the UK and around the world, including gender inequality and violence |
| Bristol Ideal. <i>The Bristol Ideal Standards & Related Resources Preventing Domestic and Sexual Violence. Promoting Healthy Relationships</i> . Bristol: Bristol City Council; 2014 | Bristol | Guidance and resources for schools to help them attain the Bristol Ideal in preventing violence against women and girls. Background to the multiagency project and other resources available at www.bristolideal.org.uk |
| Brunner R. <i>A Baseline Study of Domestic Abuse Prevention Activities in Seven Local Authorities in Scotland</i> . Glasgow: University of Strathclyde; 2010 | Scotland | A report of a baseline study of domestic abuse primary prevention work in a sample of seven Scottish local authorities. It provides examples of the different ways in which prevention work is being approached in the local authorities, including strategies, networks and 'next steps' |
| AVA and Institute of Education. <i>Practical Prevention, Notes on Delivering Violence Against Women & Girls Prevention Work within Education Settings, Unpublished</i> . London: Comic Relief; 2013 | England and Wales | Summary report of the lessons learned from the implementation of a whole school approach in six 'Beacon projects' in England and Wales funded by Comic Relief |
| Boddington N, King A. <i>Real Health for Real Lives, 15–16</i> . Cheltenham: Nelson Thornes; 2010 | UK | Section on teaching young people about abuse in relationships in the context of PSHE |
| CRG Research Ltd. <i>An Independent Evaluation of the TRUST Education Project</i> . Cardiff: CRG Research; 2009 | London | Report of the evaluation of the TRUST Education Project in secondary schools in London aimed mainly at young people between the ages of 13 and 18 years. Provides outcomes and recommendations for programme development |
| Datta J, Haddon A, Shaw C. <i>An Evaluation of the Miss Dorothy Programme in Primary Schools. Executive Summary</i> . London: NCB; 2005 | England | Summary of findings from an evaluation of the Miss Dorothy Programme in five primary schools |
| Debonnaire T, Sharpen J. <i>Domestic Violence Prevention Work. Guidelines for Minimum Standards</i> . London: GLDVP; 2008 | UK | Guidance for teachers, youth workers and other practitioners delivering prevention work in schools. Provides rationale, aims and guidance including information on evaluation and resources |
| Department for Education (DfE). <i>Guidance Personal, Social, Health and Economic (PSHE) Education</i> . London, DfE; 2013 | England | Departmental advice on the teaching of PSHE in England |

continued

TABLE 37 Summary of UK grey literature included in review (continued)

| Citation | Location of work | Summary |
|---|-------------------------------------|--|
| DMSS. <i>Tender's Healthy Relationship Education in Schools Funded by Comic Relief</i> . 2012 | London | Report of a process evaluation of the implementation of a whole-school approach in eight schools in London |
| Ellis J. <i>Preventing Violence against Women and Girls: A Study of Educational Programmes for Children and Young People</i> . London: Womankind Worldwide; 2004 | England, Wales and Northern Ireland | Report of a national mapping and audit of primary prevention work in educational settings in England, Wales and Northern Ireland. Provides detail of the location, content and reported impact and outcomes of work with children and young people in schools and other educational establishments |
| Ellis J. <i>Children and the Prevention of Domestic Violence through School-Based Work</i> . Warwick: University of Warwick; 2006 | England | Unpublished PhD thesis reporting a mapping study of domestic violence prevention work in England and a case evaluation of a domestic abuse prevention programme in the English Midlands |
| Ellis J. Primary Prevention of Domestic Abuse through Education'. In Humphreys C, Houghton C, Ellis J. <i>Literature Review: Better Outcomes for Children and Young People affected by Domestic Abuse – Directions for Good Practice</i> . Edinburgh: Scottish Government; 2008 | Scotland | Literature review with recommendations for policy and practice of educational work to prevent domestic abuse in Scotland |
| End Violence Against Women Campaign (EVAW). <i>Safe4Girls Campaign</i> . 2010 | UK | Campaign materials designed for use in and by schools on creating an ethos and environment in schools where girls are free from violence, abuse and harassment |
| End Violence Against Women Campaign (EVAW). <i>Response to the DfE consultation on PSHE</i> . London: EVAW; 2012 | England | Organisational response to the government consultation on PSHE |
| End Violence Against Women Campaign (EVAW). <i>A Different World is Possible: Promising Practices to Prevent VAWG</i> . London: EVAW; 2011 | UK | Highlights examples of promising practices to prevent violence against women and girls with important insights from frontline practitioners and organisational managers. Recommendations for further development of prevention initiatives |
| End Violence Against Women Campaign (EVAW). <i>Deeds or Words? Analysis of Westminster Government Action to Prevent Violence against Women and Girls</i> . London: EVAW; 2013 | England | A critical review of prevention initiatives against the 10 areas set out in EVAW (2011), national and international strategy |
| The Family Planning Association. <i>Northern Ireland Relationship and Sexuality Education in Schools</i> . Belfast: The Family Planning Association; 2012 | Northern Ireland | Factsheet outlines the current law and policy on the teaching of relationships and sexuality education in Northern Ireland's schools |
| Hale B, Fox C, Gadd D. <i>Evaluation of 3 European Schools-Based Domestic Violence Prevention Education Programmes and Follow Up Data Analysis</i> . Keele: Keele University; 2012 | English Midlands | Report of an evaluation of the UK Relationships without Fear UK programme (along with partner programmes in Europe). Presents quantitative and qualitative findings with recommendations |
| Hester M, Westmarland N. <i>Tackling Domestic Violence: Effective Interventions and Approaches</i> . London: Home Office; 2005 | England and Wales | One chapter reports on the findings from primary prevention projects funded by the Home Office as part of the Violence Reduction Programme. Limited reporting of one project with more details on three others |
| House of Commons Home Affairs Select Committee. <i>Domestic Violence, Forced Marriage and 'Honour'-Based Violence: Sixth Report of Session 2007–08, Volume I Report, Together with Formal Minutes</i> . London: The Stationery Office; 2008 | England | Select committee report on the expenditure, administration and policy of the Home Office and its associated public bodies in relation to some forms of violence against women with sections on prevention through media campaigns and education |

TABLE 37 Summary of UK grey literature included in review (continued)

| Citation | Location of work | Summary |
|---|--------------------------|--|
| Home Office. <i>'This is Abuse' Internal Reports</i> . Various | UK | Papers made available by the Home Office |
| Mackay F. <i>Home Safe Domestic Violence Prevention and Support Projects for Schools. Annual Report</i> . London: CEA@Islington; 2005 | Islington, London | Internal report to Islington Council on the local prevention initiative in schools |
| Mahony P, Shaughnessy J. <i>Challenging Violence, Changing Lives. Gender on the UK Education Agenda. Findings and Recommendations 2004–2007</i> . London: Womankind Worldwide; 2007 | England and Wales | Summary report of the qualitative evaluation of the implementation of phase one of Womankind's Challenging Violence, Changing Lives schools programme, which adopts a whole-school approach to tackling gender inequality and gender violence in schools |
| Manship S, Perry R. <i>An Evaluation of Domestic Abuse Programmes for Adolescents in Kent and Medway</i> . Kent: Canterbury Christchurch University; 2012 | Kent and Medway, England | Qualitative study undertaken with facilitators and managers of prevention programmes in Kent and Medway schools |
| Maxwell C, Chase E, Warwick I, Aggleton P, with Wharf H. <i>Freedom to Achieve. Preventing Violence, Promoting Equality: A Whole School Approach</i> . London: Womankind Worldwide; 2010 | England and Wales | Report of the qualitative evaluation of the implementation of phase two of Womankind's Challenging Violence, Changing Lives schools programme |
| McElearney A, Stephenson P, Adamson G. <i>Keeping Safe: The Development of Effective Preventative Education in Primary Schools in Northern Ireland: Exploring Practice, Policy and Research Implications</i> . Belfast: NSPCC; 2011 | Northern Ireland | A series of reports of a feasibility study to implement keeping safe messages into the primary school curriculum in Northern Ireland |
| National Foundation for Educational Research. <i>A Review of Preventative Work in Schools and Other Education Establishments in Wales to Address DV</i> . Cardiff: Welsh Assembly Government; 2011 | Wales | Report of a mapping and review of preventative work in schools and other educational settings to address domestic abuse with recommendations identifying the components of a successful programme to address domestic abuse |
| National Union of Teachers (NUT). <i>Silence is Not Always Golden: Tackling Domestic Violence</i> . London: NUT; 2005 | England | Guidance for teachers on the importance of schools tackling domestic violence in the curriculum, through child protection and as a workplace issue for female teachers. Provides information on resources |
| Potter D. <i>'Makes me Happy and Feel Safe'. Nottinghamshire Children's Fund DV Children's Outreach Services Evaluation Report</i> . Nottingham: Nottinghamshire Children's Fund; 2005 | Nottinghamshire, England | Internal report of small local projects of prevention work funded by Children's Fund in Nottinghamshire |
| Reid Howie Associates. <i>Evaluation of the Zero Tolerance 'Respect' Pilot Project</i> . Edinburgh: Scottish Executive; 2002 | Scotland | Report of an independent evaluation of the piloting of Zero Tolerance's Respect programme in Scottish schools and educational establishments |
| Scottish Executive. <i>With All Due Respect: The Role of Schools in Promoting and Caring for Self and Others</i> . Edinburgh, Scottish Executive; 2002 | Scotland | Guidance on the rationale, concepts and practices for schools on addressing domestic abuse within the parameters of respect |
| Sex Education. <i>Sex Education Forum Briefing for Parliamentarians</i> . London: National Children's Bureau; 2013 | England | Briefing on the role of sex and relationship education in the prevention of violence against women and girls |
| Sex Education Forum (SEF). <i>Addressing Healthy Relationships and Sexual Exploitation within PSHE in Schools</i> . London: SEF; 2006 | England | Briefing paper for staff working with young people on relationships in the context of PSHE in schools |

continued

TABLE 37 Summary of UK grey literature included in review (continued)

| Citation | Location of work | Summary |
|--|------------------|--|
| South Essex Rape and Incest Crisis Centre (SERICC). <i>SERICC Respect Project Report</i> . Essex: SERICC; 2004 | Essex, England | Summary report of the SERICC Respect Project delivered in secondary schools in Essex |
| Thiara RK, Ellis J. <i>Westminster Domestic Violence Forum London-Wide Schools DV Prevention Project</i> . London: City of Westminster; 2005 | London | Independent evaluation report of the rolling out of the Westminster Domestic Violence Schools Project across all London boroughs, funded by London Councils |
| Berry V, Stanley N, Radford L, McCarry M, Larkins C. <i>Building Effective Responses: An Independent Review of Violence against Women, Domestic Abuse and Sexual Violence Services in Wales</i> . Cardiff: Welsh Assembly Government; 2014 | Wales | Report of research into violence against women, domestic abuse and sexual violence services in Wales, including prevention work with children and young people. Aimed to inform the Ending Violence Against Women and Domestic Abuse (Wales) Bill, implementation of the legislation and future policy more generally, as well as informing future funding decisions |
| Violence Against Women Prevention Scotland. <i>Preventing VAW: Primary Prevention Briefing</i> . Edinburgh: VAW Prevention Scotland; undated | Scotland | A briefing paper highlighting the key aims and approaches to the primary prevention of violence against women and girls |
| WAFNI. <i>Delivering Domestic Violence Preventative Education in Schools and External Settings: Good Practice Guidelines</i> . Belfast: WAFNI; 2005 | Northern Ireland | Good practice guidance for practitioners delivering prevention work on domestic abuse in schools |
| Walton K. <i>Domestic Violence Prevention in London Schools. Peer Educator Pilot Project Evaluation Report</i> . London: Domestic Violence Responses; 2007 | London | Independent evaluation report of the development and implementation of a peer educator project delivered in partnership by The National Youth Theatre and Domestic Violence Responses in a small number of schools in London |
| Stead J, Lloyd G, Baird A, Brown J, Riddell S, Weedon E, et al. <i>All Wales Schools Liaison Core Programme Evaluation Report</i> . Cardiff: Welsh Assembly Government; 2011 | Wales | Evaluation report for an initiative aimed to prevent antisocial behaviour, substance misuse and problems associated with personal safety through work delivered in schools by School Community Police Officers (SCPOs) |
| WAFNI and Department of Education Northern Ireland (DENI). <i>Evaluation Report of Helping Hands Pilot</i> . Belfast: WAFNI and DENI; 2011 | Northern Ireland | Report of the evaluation of a pilot of a 2-day training programme for teachers to deliver the Helping Hands programme to primary school children |
| Wood S, Bellis MA, Watts C. <i>Intimate Partner Violence: A Review of the Evidence for Prevention</i> . Liverpool: Centre for Public Health John Moores University; 2010 | UK | Includes a section on evidence for school-based interventions to prevent intimate partner violence in the context of a national focal point for WHO violence and injury prevention practice and policy |
| Zero Tolerance and YWCA Scotland. <i>Under Pressure: Preventing Teen Abuse and Exploitation</i> . Edinburgh: Zero Tolerance and YWCA Scotland; 2013 | Scotland | A report on pilot training for youth workers on preventing teen abuse and exploitation |
| NSPCC, National Society for the Prevention of Cruelty to Children. | | |

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