

METHODOLOGY

In September 2001, the World Health Organization Injuries and Violence Prevention Department developed a survey designed to capture service delivery information from batterer intervention programmes around the world. The survey was created with input from a variety of experts, including those with field experience in batterer intervention and victim advocacy, injury surveillance specialists, intimate partner violence researchers, and representatives of programmes in developing nations. The survey instrument, which included both quantitative (close-ended) and qualitative (open-ended) questions, was pilot-tested, modified, and retested before it was implemented.

Snowball sampling was used to locate and enrol participants in this descriptive study. “Snowball sampling” is a method of recruiting participants into research studies. It involves asking each new recruit to suggest several others who can be approached by the researcher for potential enrolment in the study. Almost every participant in this study was able to direct the researcher to three or more new participants. Towards the end of the data collection phase, it became more difficult for participants to recommend new interventionists who were not already enrolled in the study. As a result, it

became clear that the investigation had almost completely “uncovered” one particular, closed network of providers that spans all six global regions.

Four main sources provided the original cohort of participants:

- ***The Women’s Rights Network:*** The Women’s Rights Network (WRN) is a USA-based non-governmental, non-profit international human rights organization that works to address the root causes of intimate partner abuse in the USA and worldwide through the application of international human rights principles, strategies and laws. Based at the Wellesley Centers for Women, WRN (among other projects) sustains an international network of providers and practitioners who are working to end intimate partner abuse and related human rights violations. The WRN network was heavily utilized during the first phase of respondent recruitment.
- ***Emerge:*** Widely credited as the first batterer intervention programme in the world, this non-governmental organization has served people who batter in Massachusetts, USA since 1977. Emerge has conducted training in nations other than the USA. Emerge’s international contacts provided the basis for

enrolling several of the survey respondents, including Alternatives to Violence (ATV) in Norway, Harmony House in Hong Kong, and Swayam in India.

- **United Nations-INSTRAW:** In 2001, the United Nations agency for International Research and Training Institute for the Advancement of Women (UN-INSTRAW), developed an email list that was used by a diverse, international assemblage of intimate partner violence prevention professionals interested in men's roles and responsibilities in ending gender-based violence. Though it is now defunct, several of the subscribers to this online discussion group are interventionists who participated in this survey.
- **Amnesty International:** Each amnesty international office with an email address was contacted for referrals of potential survey participants. The batterer intervention programme in Iceland was referred to the study by Amnesty International.
- **Other Resources:** Several additional resources were utilized. These include the International Planned Parenthood Federation, the World Health Organization Headquarters and Regional Offices, and the City & Shelter organization in Belgium.

Since articles and books describing the methods of batterer intervention programmes located in the USA, Canada and United Kingdom are widely available (e.g. Pence & Paymer, 1993; Dobash et al., 1999; Minister of Health Canada, 1998), and given that data collection resources were limited,

the scope of the investigation excluded these three territories in order to focus more specifically on interventions and practitioners from less publicized programmes. One Scottish program was included in the analysis, because this program has been particularly influential internationally. One program in the Republic of Ireland was also included in the analysis. In addition, the authors selected to focus the investigation on interventions with perpetrators who had been already identified, rather than on universal programmes designed to *prevent* intimate partner violence. While in many locales prevention and intervention programmes may share the goal of changing the social acceptability of violence against women, previous research on prevention programmes has been conducted and the results are available elsewhere (e.g. Hayward, 2001). Thus, "White Ribbon Campaigns" and similar prevention initiatives aimed at increasing the global awareness of men's role in preventing violence against women were not assessed as part of this study.

For the purposes of this investigation, "batterer intervention" is defined as any action that has as its goal to change the abusive behaviour of a person who physically, sexually, emotionally or verbally controlled his or her intimate partner. Contact was sought with any individual or group – professional or informal – that directly participates in activities aimed at dissuading abusers from continuing that practice. The reason for using this broad definition was that descriptions of unstructured interventions, as well as those that fit the documented "psycho-educational" group model, were sought.

All participants were initially contacted by email or by telephone. Despite initial concerns that utilizing email for recruitment purposes would limit the study to programmes in high income nations, it was found that email coverage was sufficient to establish contact with informants in low- and middle-income countries in all six WHO world regions. A small number of practitioners without access to email were contacted by telephone. An informed consent form was distributed to, and collected from, all participants. This form was available in English, French and Spanish. Those who were unable to receive the form via email or fax were read the contents of the form over the telephone and gave their verbal consent to participate in the survey.

Each respondent was surveyed over the telephone, with the exception of two participants who completed the survey in writing and chose to email their

responses to the researcher. The survey was conducted by native speakers of English, French, Spanish, a non-native speaker of Russian, and a non-native speaker of Spanish. There were no known potential respondents who were unable to participate in the survey due to language barriers. It took approximately one hour to complete the survey over the telephone with each respondent. Two primary researchers conducted 90% of the survey interviews, thereby ensuring that the survey interview was highly standardized.

Data collected through the survey was coded, entered into an Access database, and analyzed using the statistical software program, STATA. The transcript of free responses made by participants was analyzed manually and data was coded, indexed, and linked to quantitative data for illustrative purposes.