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The Lived Experiences of Turkish Perpetrators’ Engagement in Domestic Violence Interventions

A thesis submitted for the degree of

Doctor of Philosophy

by

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2019
DECLARATION

I, Zeynep Turhan, hereby declare that this thesis is solely my own work. When I have referred to the work of others, this is always stated.

Signed: ________________________________________________

Date: ________________________________________________
ACKNOWLEDGEMENTS

I would like to express my appreciation to my supervisors, Professor Claudia Bernard and Dr Perlita Harris, for their guidance, support and patience throughout this research study. Professor Bernard, your constructive comments, questions and critiques have been invaluable. Thank you for your patience, flexibility and understanding of the challenges I faced as an international student during my initial adjustment to living in a new country when I first joined the doctoral programme. Thank you for providing ongoing support.

My family members have played a significant role in my ability to pursue my research. Thank you for your ongoing love, support and encouragement.

I would like to thank all the professionals and Turkish men who contributed to this research through taking part in interviews and responding to my questions. I would also like to thank the individuals who helped me to access my participants as it was the most difficult part of this research.

The men who attended this research made great progress in challenging their masculinity by sharing their sensitive and private experiences with a female researcher. Therefore, I again want to thank all the men who took part in this research and shared their private and sensitive experiences.
ABSTRACT

This thesis aims to interpret the key issues of Turkish perpetrators’ engagement in programmes that work with domestic violence perpetrators in the UK. The main aim of this is to examine how Turkish male perpetrators’ unique circumstances related to their migration status, racial and cultural backgrounds, and other social structures shape their involvement in an intervention process. In focusing on experiences of Turkish men during interventions, it is clear that their interactions and responses play significant roles in understanding the influences of engagement within a broader context.

Through direct testimony from nine Turkish men and eleven professionals given in interviews, this thesis explores their experiences and perspectives of involvement which can improve our understanding of key issues around interventions. Utilising data drawn from semi-structured interviews with Turkish men who had been in interventions, this thesis contributes to understanding how a number of different interactions shaped their responses. Interviews with professionals also provided an understanding of the implications of perpetrators’ engagement in interventions.

The findings highlight that men’s social, cultural and religious backgrounds – as well as opportunities to access a culturally-sensitive service – are core elements in determining whether the perpetrators engage in interventions. This study enhances our understanding of the importance of focusing on men’s constructions of masculinity and gender power relations in their participation in interventions. The results demonstrate the importance of adopting culturally-sensitive strategies which include professionals understanding men’s social,
cultural and religious backgrounds, and being aware of racism and discrimination and migration-related stressors by developing trust and rapport. It is also recommended that implementing community-based practices can initiate collaborative work with Turkish communities. Through these practices, the men can seek to address their violent behaviour.
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<tr>
<td>BAMER</td>
<td>Black, Asian Minority Ethnic and Refugee</td>
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<tr>
<td>BMER</td>
<td>Black and Minority Ethnic and Refugee</td>
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<tr>
<td>CAFCASS</td>
<td>Children and Family Court Advisory Support Service</td>
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<tr>
<td>CAADA</td>
<td>Co-ordinated Action against Domestic Abuse</td>
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<tr>
<td>CCR</td>
<td>Co-coordinated Community Response</td>
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<td>CDVP</td>
<td>Community Domestic Violence Programme</td>
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<tr>
<td>DVIP</td>
<td>Domestic Violence Intervention Project</td>
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<td>DVPPs</td>
<td>Domestic Violence Perpetrator Programmes</td>
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<tr>
<td>HRP</td>
<td>Healthy Relationships Programme</td>
</tr>
<tr>
<td>IDAP</td>
<td>Integrated Domestic Abuse Programme</td>
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<td>IDVAS</td>
<td>Independent Domestic Violence Advocate Service</td>
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<td>IDVA</td>
<td>Independent Domestic Violence Advisor</td>
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<tr>
<td>NHS</td>
<td>National Health Service</td>
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<td>NSPCC</td>
<td>National Society for the Prevention of Cruelty to Children</td>
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Chapter One: Introduction

Domestic violence is well documented in many societies as a human rights issue. The literature on domestic violence should build on this and focus its attention on how to develop new prevention and intervention strategies to protect all members of a family. With this in mind, this research aims to examine the perspectives of programme providers and Turkish perpetrators on Turkish perpetrators’ engagement in programmes that work with domestic violence perpetrators in the United Kingdom (UK). Given the core purpose of the research, this chapter provides an overview of the major components of the thesis, including its aims, the definitions of key terms and the rationale. This contextualization focuses on how this study will contribute to professional knowledge about perpetrators in domestic violence intervention efforts. It considers the definitions of the key terms, including domestic violence, honour-based violence, engagement, culture, ethnicity and race in the context of domestic violence. The final part gives an overview of the social and cultural backgrounds of the Turkish population in the UK, the rationale of study and a summary of the remaining chapters.

The aims of the dissertation

Whereas many researchers have evaluated the effectiveness of programmes for perpetrators of domestic violence (Alderson and Westmarland, 2013; Bullock et al., 2010; Day et al., 2009; Donovan and Griffiths, 2013; Eckhardt et al., 2013; Edleson and Syers, 1990; Haggård et al., 2015; Westmarland and Kelly, 2012), few studies have focused on black and minority ethnic perpetrators’ perspectives on their engagement in these programmes (Gondolf, 1988; Hancock and Siu,
The goal of the thesis is to explore how Turkish perpetrators’ unique perspectives and experiences influence their engagement during domestic violence intervention programmes in the UK.

Many scholars claim that violent men’s engagement might lead them to change and adopt positive behaviour (Adams, 2012; Chovanec, 2012; McMurran and Ward, 2010). However, Bullock et al. (2010) highlight that the studies of men’s engagement in Domestic Violence Perpetrator Programmes (DVPPs) in the UK have limitations in focusing solely on perpetrators who are involved in interventions. Perpetrators’ insufficient engagement could lead to a high rate of recidivism, dropout and attrition during interventions (Gondolf, 2012). The perspective of Turkish perpetrators on their engagement is under-researched in the UK. Thus, this research study focuses on engagement of Turkish perpetrators in domestic violence interventions by examining experiences and perspectives of both professionals and Turkish perpetrators.

As the core goal of the thesis is to explore perpetrators’ “meaning making” in their engagement in interventions, I will identify the ways men construct their engagement in interventions by focusing on their relationship with their partners, family members, professionals and social networks. This investigation of a number of different interactions is vital to determine how men make sense of applying or avoiding implementing some strategies which have been learned in interventions. Likewise, this helps us to understand how their interactions, beliefs and perceptions impact on implementing alternative behaviour in order to reduce and stop their violent behaviour. The key interview questions for Turkish men
are: how do they describe their decision-making process on whether to attend interventions? How do they continue to participate in the sessions? How do they employ tools and approaches in their lives in order to end their abusive acts?

The interviews with professionals focus specifically on their position and relationship with the men in relation to building trust, rapport and getting them to become accountable for their violent behaviour, as well as how the professionals describe the processes of Turkish perpetrators’ engagement in interventions.

Definition of key terminology

The meanings of certain terms including domestic violence, honour-based violence, engagement, race, ethnicity and culture can vary depending on the context of an intervention programme. This section aims to make these terms clear and understandable throughout the thesis.

Definition of domestic violence and honour-based violence

Violence within intimate relationships is a complex issue and this is clear from the different terms used to describe the phenomenon. These terms include violence against women, gender-based violence, intimate partner violence, family violence, domestic violence and domestic abuse. Each one includes different meanings and implications based on the particular contexts. For instance, the term violence against women emphasises gender as the social structure of norms and institutions, and highlights the gender inequality between women and men, whereas gender-based violence indicates how perpetrators attribute their violent behaviour based on their gender within violence against women, children or men (Agtaie and Gangoli, 2015). Intimate partner violence stresses the violence within intimate relationships (Lombard and McMillan,
2013). Family violence describes physical force within nuclear or extended families (Star, 1980). These terms have different emphases and associations in terms of the types of relationships in a violent environment. In this research study, the term domestic violence will be used. The justification for this choice of terminology is outlined.

Domestic violence is a contested term because of the different explanations and perceptions of violence in intimate relationships in social policies and services. While gender specific approaches and theories argue that gender plays a significant role in understanding domestic violence, some researchers focus on other dynamics (Muehlenhard and Kimes, 1999; Mullender, 2002). Given that domestic violence is not necessarily concentrated on gender dynamics, it is important to state that this research examines men’s violence against women.

The Home Office (2013) defines domestic violence as:

any incident or pattern of incidents of controlling, coercive, 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, includes psychological, physical, sexual, financial and emotional violence. (p. 1)

This definition emphasises the key elements of controlling, coercive and threatening behaviour. The Home Office (2013) describes controlling behaviour as the manipulation and isolation of survivors’ support and other resources which results in dependency and dispossession. Coercive behaviour is defined as “a pattern of acts of assault, threats, humiliation and intimidation or other abuse used to harm, punish, or frighten their victim” (Home Office, 2013, p. 1). Controlling and coercive behaviour could occur within psychological, verbal, financial and sexual abuse. The Home Office definition includes a footnote concerning ‘honour’ based violence, female genital mutilation and forced
marriage, and suggests that victims are not confined to one gender or ethnic group (Home Office 2013, p. 1).

Debbonaire (2013) argues that domestic violence intervention services need to consider how to set up intervention programmes or support services for young people who experience domestic violence. Many agencies, such as Respect, Co-ordinated Action Against Domestic Abuse (CAADA) and Women’s Aid offer guidance, new tools and training in order to implement effective strategies for survivors aged 16-17 (Debbonaire, 2013) as the new definition of domestic violence by Home Office (2013) recognises that violence might occur among these young people.

Given the definition of domestic violence in the UK, this thesis chooses to use ‘domestic violence’ because of the location of the study, public perception and the definition in UK policy and legislation. The definition of domestic violence clarifies which terms are appropriate for describing persons who are abusive and those who are affected by violence. I will use the terms perpetrators to mean male abusers and survivors to mean women and children in the context of domestic violence.

Among the victims of domestic violence, many black and minority ethnic survivors experience a range of power and control tactics, namely, ‘honour’ and shame dynamics, female genital mutilation and forced marriage (Chavis and Hill, 2008). These tactics should be recognised in order to provide effective intervention strategies for their safety. For instance, protecting women’s honour is a main duty for men in patriarchal communities (Begikhani, Gill and Hague, 2015). Male perpetrators’ honour killings should not be perceived to be
associated with objectives such as preserving honour, maintaining prestige and protecting family. In my view, they are nothing more than crimes. Gill et al. (2012) describe honour-based violence as:

comprising any form of violence perpetrated against women that is associated with patriarchal family, community or other social structures in which the main justification for the violence is the protection of a social construction of honour: ‘honour’ is defined as a value-system with associated norms and traditions. (p. 75)

The Crown Prosecution Service (n.d.) has highlighted that honour-based violence is “a violation of human rights and may be a form of domestic and/or sexual violence”. Whilst the definition of domestic violence presents key dynamics, intervention programmes need to take into account complicated dynamics of honour and cultural backgrounds of the women.

The concept of engagement in interventions

This section clarifies the term ‘engagement’ in intervention programmes in relation to participants’ motivational dynamics and stages of change. Several researchers (Comfort et al., 2000; Daly et al., 2001; Fiorentine et al., 1999; Prado and Pantin, 2006; Terra et al., 2007) describe engagement as group participants’ attendance in any group-based intervention programme (in Roy et al., 2011). However, Roy et al. (2011) argue that attendance alone in a programme in defining participants’ engagement fails to describe influences on participants and results of engagement processes in a group session. They argue that attendance appears to be a prior condition for engagement but other external factors need to be considered. Drieschner et al. (2004) identified engagement as participating in interventions sessions and activities, taking into consideration strategies and trying to implement facilitators’ suggestions in their lives.
The literature examines the types of assessment of people’s engagement in group-based interventions. For instance, Ward et al. (2004) consider participants’ personal characteristics and programme approaches in assessing their engagement. The socio-ecological model developed by Bronfenbrenner (1979) might help examine these factors. This model presents various interactions between individual and other environmental factors. Similarly, Moran et al. (2004) describe a three-phase process of ‘getting’, ‘keeping’ and ‘engaging’ to explain engagement within the ecological perspective. These three phases comprise practical, relational, cultural, contextual, strategic and structural factors. Such interactions might explain individuals’ motivational circumstances and their engagement behaviours during intervention programmes. For instance, Karoly (1993) and Locke (1996) note that human motivation often stems from perceiving goals and focusing on them (in McMurran, 2002). McMurran (2002) argues that goal attainability might be linked to individuals’ active engagement during intervention efforts. Potential environmental factors of goal attainability are related to perpetrators’ ability to organise themselves, and problem solve and having the confidence to change their behaviour (McMurran, 2002).

Reasons for being motivated to change among perpetrators might stem from wishing to avoid the consequences of behaviour, such as criminal justice penalties including prison sentences (McMurran, 2002). The engagement assessment approaches contribute to understanding which characteristics and stages impact individuals’ engagement. The key terms of ethnicity, race and culture in relation to engagement of Turkish perpetrators are considered in the following section.
Terminology related to black and minority ethnic communities

This section examines the terms ethnicity, race and culture in the context of domestic violence. It explores how these terms are defined and why they have come to be seen as significant concepts for black and minority ethnic groups affected by domestic violence. The literature consistently states that effective domestic violence prevention and intervention efforts need to consider individuals’ cultural backgrounds (Bent-Goodley, 2005; Guru, 2006; Sokoloff and Dupont, 2005), values and circumstances (Fontes and McCloskey, 2011). Miville and Ferguson (2006) highlight that “race-ethnicity and gender are best conceptualised within the larger framework of social justice as it pertains to power” (in Miville and Ferguson 2014, p. 3). For instance, perpetrators’ culture, ethnicity and race might shape their gender roles which may affect their power and control behaviour in their intimate relationships (Lease et al., 2009).

Ethnicity refers to the individuals’ attribution of common social organisation, traditions and construction of culture (Fenton, 2003), and the preference for and sharing of involvement in a group (Cokley, 2007). It also highlights the characteristics of self-identity and differentiation in understanding boundaries of inclusion and exclusion between groups (Chattoo and Atkin, 2012). Whereas ethnicity refers to the relationship between general cultural and historical meanings of people, race is more likely to link to individuals’ descent (Chattoo and Atkin, 2012).

The core characteristics of culture include the groups’ progressive communication of beliefs, values, rituals, behaviours and dynamic movement (Almeida and Dolan-Delvecchio, 1999; Cervantes and Cervantes, 1993; Sullivan
and Rumptz, 1994). These activities and interactions provide their status of power and resources in communities (Hall, 1996), and demonstrate the association between individuals’ cultural attitudes and other realities, including socioeconomic and community dynamics.

The terms race, ethnicity and culture are critical for the thesis because they are often interconnected with how the men perceive their behavioural change process in interventions. For instance, Walling et al (2012) found a relationship between working alliance and race and ethnicity for men’s participation and engagement in interventions. Therefore, the men’s engagement in interventions can be better understood by recognising the influences of their social, cultural and ethnic background.

According to the above definitions, ethnicity, race and culture may shape both perpetrators’ behaviour, and intervention efforts. This research uses race and ethnicity to describe black and minority ethnic individuals’ characteristics in understanding their perceptions, thoughts and behaviour patterns. In the UK, the term ‘black and minority ethnic’ is used as an inclusive term for all minority ethnic groups (Taylor, Nair and Braham, 2013). I use ‘black and minority ethnic’ throughout the thesis as it describes a range of social groups who might come from different socio-historical backgrounds with unique cultures, religions and other traditional practices. In the following section, I will describe the size, cultural and social backgrounds, and religion of Turkish communities in the UK to gain insights into their circumstances and historical backgrounds in the context of domestic violence.
Social and cultural backgrounds of the Turkish population in the UK

According to the 2011 Census, Turkey-born residents living in England and Wales numbered 101,721 (Office for National Statistics, 2015). However, this number does not include second generation, UK-born Turkish-Cypriots, Turks and Turkish Kurds. This research acknowledges the potential invisibility of second and third generation Turks. Based on time of migration, the circumstances that led to their migration and their current circumstances, there are different Turkish communities. Dedeoglu (2014) describes three groups: Turks, Turkish-Cypriots and Kurds, based on their ethnic, cultural, social and political backgrounds. For instance, Turks, Turkish-Cypriots and Kurds originate from Turkey, Cyprus and the Middle East respectively which influence their interactions in the UK (Department for Communities and Local Government, 2009). Due to their histories, each of these three groups speaks in different dialects and with different accents under the general umbrella of the Turkish language because of the history of immigration (Department for Communities and Local Government, 2009). The main similarity between the Turkish communities is that their networks influence their migration plans and choice of destination. Such networks allow them to live in a close community and neighbourhood in London (Dedeoglu, 2014).

Dedeoglu (2014) highlights the different political, religious and ideological perspectives of these Turkish groups. Turkish men who are religious might describe their Sunni Muslim identity as a specific group including Naksibendis or traditional worshippers at a mosque (Robins, 2000). Some men also identify themselves as secular Turks (Robins, 2000). The diversity might impact on the
way I examine the relationship between my religious identity and the participants’ positions and perspectives. Furthermore, religious backgrounds of professionals might impact on their perceptions of working with Turkish men. For instance, a Turkish man might discuss religious issues in relation to his personality, worldview, attitudes and problems during the counselling (Nickles, 2011). Therefore, religious background is linked to Turkish men’s engagement in interventions as they might feel more comfortable sharing their concerns related to their Muslim identity with a Turkish Muslim professional. It is critical to be aware of these complex identities of being religious and secular in interventions as they impact on Turkish men’s relationship with professionals.

In discussing the influences of different identities related to Islam and secularism in therapy settings, it is vital to pinpoint generational differences within the sample. Second and third waves of feminist ideas especially help us to understand women’s position on this. This could impact on the relationship between the man and the professional. For instance, in the UK, second generation Turkish men’s perceptions of gender roles in families may be different to first generation. Thus, this research acknowledges that participants’ diverse immigration histories, and religious and cultural backgrounds, are linked to the understanding of their engagement in interventions.

Cultural and religious background contribute to understanding individuals’ perspectives and experiences of domestic violence in Muslim communities (Abugideiri, 2013; Alkhateeb and Abugideiri, 2007). Men may use Islam to justify their right to be abusive toward their partner (Al-Aman, 2012; Alkhateeb, 2008; Macey, 1999), and to minimise or deny their violent behaviour. Importantly, many
references in the Qur’an and hadiths highlight that all forms of abuse are prohibited including a broad category of oppression (Alwani and Abugideiri, 2003). It follows that Turkish men’s violent behaviour, including honour killings, is connected to culture rather than religion (Dogan, 2011; Dogan, 2014a; Korteweg and Yurdakul, 2009; Sever and Yurdakul, 2001). Douki et al. (2003) also highlight that it is not only religion but also patriarchal norms and cultural practices that play a significant role in men’s justifications of their violent and controlling behaviours in Islamic countries. Likewise, many honour-based killings and controlling behaviour are likely to stem from cultural norms and pressure from the community in many patriarchal societies (Baker et al., 1999; Jafri, 2008; Pope, 2012; Sever and Yurdakul, 2001).

In this thesis, I will use the term Turkish to mean a person with a Turkish background, whilst recognising that this definition does not distinguish between people who were born in Turkey and those who were born in the UK. The term does not describe the complexities of belonging of second and third generation immigrant families. Further, many immigrants from Turkey might have Kurdish and Cyprian backgrounds, not Turkish. While I use the term Turkish for ease of expression, it should be borne in mind that the term glosses over such complexities.

**Rationale of study**

The main motivation behind this study is to address perpetrators’ violent behaviour by examining their perspectives on engagement in intervention processes. An equally important reason for conducting this study is to contribute
towards protecting survivors. The following section presents three main reasons for conducting this research.

The initial motivation for this thesis derived from my first-hand experiences as a school counsellor of working with children who had violent fathers in Turkey. I felt powerless because of the lack of perpetrator intervention programmes in Turkey. This limitation is because it is patriarchal society and so at the time there were insufficient investigation and assessment processes (Jansen et al., 2009; Oral et al., 2010). Most significantly, when men are given justifications to engage in violence by community members, this is most likely related to the gender roles and power dynamics between men and women in families (Almeida and Hudak, 2002; Williams, 1994). The initial motivation concerned how to get Turkish male perpetrators more involved in the processes of interventions.

The second issue that inspired this study is that no research study has concentrated specifically on perpetrators of domestic violence within the Turkish community in the UK. A number of studies have investigated perpetrators’ engagement that is linked to their behavioural change processes (Brownlee and Chlebovec, 2004; Chovanec, 2012; Holdsworth et al., 2014; Pandya and Gingerich, 2002; Roy et al., 2013; Scott and Wolfe, 2000; Silvergleid and Mankowski, 2006). Most other studies have not been able to pinpoint the effects of perpetrators’ immigration, cultural and religious backgrounds but instead have most often asked participants to rate the level of completion of intervention programmes (Burnette et al., 2015; Daly and Pelowski, 2000; Rosenbaum et al., 2001; Saunders and Parker, 1989). The characteristics of participants might be related to their immigration, cultural, religious and other backgrounds, which
might lead to a lack of engagement (Cervantes and Cervantes, 1993; Hancock and Siu, 2009). DVPPs may increase their engagement when these unique issues are taken into account in applying culturally-sensitive approaches (Gondolf, 1988; Hancock and Siu, 2009; Williams, 1992; Williams, 1994; Williams and Becker, 1994). The evidence suggests that many faith communities regard domestic violence as taboo, and there is a reluctance even to acknowledge partner abuse in black and minority ethnic communities (Jayasundara et al., 2014; Razack, 2004). I conclude that the absence of research on the experiences of Turkish men in domestic violence interventions in the UK indicates the need to examine their perspectives and experiences of engagement in interventions.

The third motivation of this study is linked to my educational background, values and beliefs. Throughout my Master’s in Social Work degree, I attended community outreach activities as well as built a network with university students to increase the awareness of domestic violence and inform them about key strategies and social policies around preventing domestic violence and sexual violence in the United States of America (USA). Further, I have focused on domestic violence, particularly studying the father-child interactions in supervised family visitations during the Master’s. Bringing together my educational experiences and voluntary activities enables me to have a strong perspective on the importance of men’s accountability in prevention and intervention efforts. In doing so, I concentrate on the perspectives on male perpetrators and programme providers to promote successful strategies to prevent and end violent behaviour among Turkish perpetrators. With my background in education and community work, I am aware of the complexities around race, gender, class
and socio-economic dynamics, and other social structures. By drawing on powerful feminist ideas on protecting women, I attempt to concentrate on men in a way that supports effective protection whilst making them challenge their unique social structures and understanding about their involvement in interventions.

My values, beliefs and attitudes are likely to shape the research process. I place great value on trying to understand the perspectives of individuals in order to provide effective intervention strategies to promote a high level of engagement. However, this study does not focus on final outcomes of behavioural change process; the key focus is on the process of interventions. The engagement in a process is important to examine the relationships, communications and all interactions to understand Turkish perpetrators’ needs and responses (Austin and Vancouver, 1996). The literature argues that perpetrators’ engagement in interventions needs to be investigated to ensure the safety of survivors (Blacklock, 2001; Burton et al., 1998; Lees and Lloyd, 1994; McConnell and Taylor, 2014; Sullivan, 2006; Westmarland et al., 2010; Westmarland and Kelly, 2013). Kelly and Westmarland (2015) point out that male perpetrators who engage in intervention programmes are more likely to complete these programmes. This evidence suggests the importance of exploring perpetrators’ factors and perspectives on their engagement in intervention programmes. Thus, in the context of domestic violence, perpetrators should be taken into account in interventions, as they are the most important individuals in addressing domestic violence.
Given the main motivations of this thesis, in the context of Turkish perpetrators in interventions I found that there was one main issue that was difficult to dispel. There is an absence of research knowledge on Turkish perpetrators’ unique needs related to their racial, cultural and class backgrounds, and immigration status. Significantly, the interconnectedness of race, gender, socio-economic and immigration status of Turkish perpetrators and the implications of all these factors on their engagement in DVPPs is underexplored in the literature. I was therefore motivated to examine how Turkish perpetrators’ responses, experiences and struggles may influence their engagement in the intervention process. This would contribute towards a deeper understanding of their perspectives and circumstances.

Drawing on Turkish perpetrators’ discourses, the research will explore the ways in which racial, cultural, class and immigration dynamics including various interactions combine in order to understand Turkish perpetrators’ perspectives on their engagement patterns in interventions. In examining this under-researched field, a major goal is to provide evidence to inform the development of practice with Turkish perpetrators. Significantly this research aims to promote increased understanding to inform social policies and domestic violence perpetrators’ intervention approaches for Turkish perpetrators in the UK.

Organization of the dissertation

This section gives a brief explanation of the contents of the remaining chapters of the dissertation. Chapter Two of the study provides background information about domestic violence and outlines the specific issues of safety for Turkish survivors and perpetrators’ accountability during intervention processes. It
highlights the main obstacles to ensuring the safety of Turkish survivors during prevention and intervention efforts. These obstacles are most likely to relate to their immigration status, religious and cultural backgrounds, and the inadequacies of social policies and services. Whilst highlighting the major difficulties in offering protection to survivors, the literature focuses on the importance of the development of effective intervention programmes and services for them. This chapter reviews these intervention efforts and points to the strong connections between the effectiveness of social services and the safety of survivors in the UK. Chapter Two also examines the core findings and themes related to perpetrators’ perspectives of engagement in the process of DVPPs. This examination argues that key themes are associated with perpetrators’ socio-ecological circumstances including individual, family, community, and organisational level. Within Turkish groups’ engagement, the major debates are about culture, religion, masculinity, patriarchy and immigration status as well as the influences of social services and policies as far as racism and discrimination are concerned.

Chapter Three examines the usefulness of choosing a feminist research approach and thematic analysis within a qualitative methodology. It also highlights the potential limitations and ethical considerations that need to be considered throughout the research as the research topic is sensitive and the target groups are difficult to reach. The methodology chapter illuminates the strengths of employing a thematic analysis and how it is possible to avoid the potential obstacles that might influence the conduct of research. It illustrates how the initial literature review contributes to building a conceptual framework. The application of thematic analysis is used to examine Turkish perpetrators’
perspectives on their engagement in interventions by applying codes and themes.

Chapters Four presents the findings of the research. I provide the analysis of the themes that developed from the semi-structured interviews. In Chapter Five contains a discussion and conclusion of the research findings. In it I present the model of the factors influencing the men’s engagement in interventions, implications for practice and policy, future research, and recommendations and limitations of the study.

Summary

I have presented an overview of the study of Turkish perpetrators’ engagement in interventions in this chapter. The aims of the thesis, key terminology and rationale have been provided. The next chapter will explore the potential issues of Turkish perpetrators’ engagement in interventions by reviewing the literature.
Chapter Two: Literature review

In this chapter, I will start by describing how the literature review search was conducted and then move on to emphasise the diversity in domestic violence and key themes in the literature review. The findings of my literature review on how perpetrators engage in domestic violence interventions focused on Turkish communities. The research topic has been under-researched, and I did not expect to locate adequate studies to conduct a quantitative review and meta-analysis. The following databases were primarily searched: Google Scholar, PubMed, PsycINFO, ProQuest, JSTOR, Sage Journals, and Behavioural Sciences Collection. I also searched grey literature such as documents produced by governments, intervention programmes and academic institutions. While grey literature was helpful to cover current issues and key circumstances in local practice contexts, there are questions around its reliability and validity in terms of research evidence and approach (Kiteley and Stogdon, 2014). Therefore, I examined the robustness of the studies through my literature review. By applying many materials about my research topic, I aimed to develop a comprehensive search in order to cover a large amount of relevant literature and have a better understanding of the research phenomenon.

The major search terms were: Turkish perpetrator; offender(s); engagement and/or involvement; Turkish men’s violent behaviour; intervention or treatment or programme; and black and minority ethnic perpetrators. I also searched other terms including honour and shamed based violence and killings because these dynamics are linked to Turkish perpetrators’ experiences of their violent acts. No specific timeframe was set for the search. The search focused on English and Turkish language publications because the findings in both languages are helpful
in understanding men’s engagement in domestic violence intervention processes within Turkish communities.

At the start of this chapter, it is important to highlight the rationale for the relationship between diversity and domestic violence by emphasising that Turkish perpetrators are no more violent than perpetrators of other communities. The experiences of racism or discrimination might be linked to the men’s social, cultural and ethnic background when they try to get involved in interventions. Therefore, it is important to investigate how Turkish men engage in domestic violence interventions in the UK with an awareness of the diversity within groups (Debbonaire, 2015).

This chapter is divided into four key areas: an overview of the prevalence and consequences of domestic violence; the experiences of Turkish families affected by domestic violence; a brief overview of the historical and current situations of intervention programmes in the UK; and core issues of perpetrators’ engagement in interventions. The main focus of this chapter is an overview of key findings on domestic violence among Turkish communities. This can help us to understand how the major concerns of intervention efforts are linked to providing safety to survivors and increasing men’s engagement in interventions in Turkish groups. While the main focus is to examine Turkish perpetrators’ engagement in domestic violence interventions, the thesis acknowledges the diversity in the cases of domestic violence. It would be beneficial to highlight that no more Turkish people experience domestic violence than other racial and ethnic groups. The literature reports incidents of domestic violence across all
cultures and communities (Williams and Becker, 1994; Begikhani, Gill and Hague, 2015).

The prevalence and consequences of domestic violence

In this section, I will stress how the high rates of domestic violence illustrate the need to offer effective preventions and interventions. The Crime Survey for England and Wales stated that 7.0% of women (1.2 million) and 4.4% of men (651,000) reported experiencing domestic abuse in 2015/16 (Strickland and Allen, 2017). While these results are similar, Dobash, Dobash, Wilson and Daly (1992) criticised attempts at sexual symmetry in domestic violence. They argue that studies often implement Conflict Tactics Scales which often misrepresent domestic violence because the amount of violence used between men and women is different. For instance, male perpetrators often fail to report the amount of violence they use. Some researchers claim convincingly that female violence is always defensive and reactive (Dobash et al., 1992). The main reason for the different prevalence statistics is because of the different instruments used to measure domestic violence. For instance, some measurements are more gender-unequal. Therefore, I concentrated on those related to gender-based violence by specifically examining Turkish male perpetrators’ engagement in interventions.

Coleman et al. (2010) found that male perpetrators who were partners or former partners killed an average of two women a week in England and Wales. In terms of the negative circumstances in women survivors’ lives, young women under 24 years are more likely to suffer domestic violence than have a long term illness or disability (Office for National Statistics, 2013b). The Crown Prosecution Service
(2014) reported that during the period 2013-2014, 93% of perpetrators of domestic violence were male. Male perpetrators use more fear and control tactics than actual violence against women (Women’s Aid 2013). The Crown Prosecution Service (2014) reported that the rate of domestic violence increases every year; for instance, an increase from 8.9% domestic violence cases in 2012-13 to 10.7% in 2013-14. This finding may well include not only new perpetrators but also re-offenders.

Given the increase in the number of reported domestic violence incidents, it seems possible that violent men’s engagement in intervention programmes might be part of the solution. For instance, research indicates that men who complete an intervention programme have a lower rate of recidivism (Murphy and Ting, 2010) and achieve positive outcomes by understanding the consequences of their violent behaviour and taking responsibility for it (Kelly and Westmarland, 2015). However, some researchers reported questions and concerns over the effectiveness of DVPPs. For instance, Babcock, Green and Robie (2004) conducted a meta-analysis of multiple studies and reported that domestic violence perpetrator programmes have a small number of positive outcomes.

The Crime Survey for England and Wales reported the prevalence of domestic abuse in 2016/2017 among adults aged 16 to 59 based on their ethnic backgrounds (Office for National Statistics, n.d.). This illustrated the ethnic background and the number of times the women victims suffered. These were: 7% White; 15% mixed/multiple ethnic backgrounds; 3.4% Asian British; 5.9% Black and 8.3% other ethnic background. As we can see from these numbers,
domestic violence exists across ethnic groups and their unique needs should be taken into consideration in interventions.

Regarding the general offending incidence, according to the Ministry of Justice (2011) 49.1% of prisoners are from black and minority ethnic groups in London. This prevalence illustrates the high level of offending which potentially includes black and minority ethnic perpetrators of domestic violence. Further, Batsleer et al. (2002) noted that black and minority ethnic survivors are more likely to experience difficulties in accessing statutory services.

Key issues of domestic violence for children in Turkish households

This section moves on to describe the key issues of domestic violence for children in Turkish households by focusing on the obstacles they face in fleeing from a violent environment. Specifically, I will focus on how social and cultural background influence fleeing from a violent environment. Limited research has examined the effects of race and racism on children affected by domestic violence. However, race and ethnicity may influence children’s coping strategies (Bernard, 2016; Hester, Pearson and Harwin, 2007). Although these coping strategies appear to be similar to women’s strategies in relation to their social circumstances, children experience these challenges differently. It is vital to recognise the impact of domestic violence on children because a language barrier, and cultural and religious expectations might increase their vulnerability (Imam, 1994).

The statistics show the severe consequences of domestic violence on children. For instance, Abrahams (1994) reported that a great number (86%) of children have been exposed to domestic violence (in Humphreys and Stanley, 2006). It is
suggested that there are very high numbers of children living with violence and abuse, and this points to a chronic social problem (Humphreys and Stanley, 2006). Many studies highlight that children who witness domestic violence are likely to be described as having suffered from child abuse themselves (Farmer and Owen, 1995; Underdown, 2007). In their adult life, domestic violence is also a risk factor for behavioural problems, mental health difficulties and emotional trauma (Hester, Pearson and Harwin, 2007; Kolbo, Blakely and Engleman, 1996). Furthermore, the Adoption and Children Act (2002) amends the definition of “significant harm” in the 1989 Children Act to include when a child witnesses or hears domestic violence. This “significant harm” concerns children’s wellbeing (Humphreys and Stanley, 2006). The 1989 Children Act defines “significant harm” as ill-treatment or the impairment of health or development.

The obstacles that Turkish women survivors face to seeking help might be related to a fear of losing their children and their safety. There appears to be a general belief in some Turkish communities that raising children with a violent father is more important than leaving a violent father (Alan et al., 2016; Alper et al., 2005). For instance, Alan et al. (2016) examined women’s awareness of domestic violence preventions and interventions, and the reasons for staying in a violent environment in Central Anatolia, Turkey. Alan et al. (2016) found that the most significant reason why women remained in marriages with domestic violence was the perceived need to raise their children with a father (55.4%). Furthermore, they noted that many of the women failed to flee from a violent relationship due to the fear of losing their children. However, this issue was not reported as unique to Turkish women as women survivors’ fear of losing their
children is present across all ethnic groups (Hester, Pearson and Harwin, 2007; McGee, 2000).

Muderrisoglu et al. (2014) conducted surveys with adults who have been responsible for caring for children aged 0-8 to explore the prevalence and circumstances of domestic violence against children in Turkey. Muderrisoglu et al. (2014) found that children who have witnessed domestic violence have had greater responsibilities for caring for their younger siblings and been involved in household chores. These are likely to impact on their development in negative ways. As a consequence of tolerance of violence in a community, Turkish children might experience stigmatization, feelings of fear and other harmful consequences in their lives (Muderrisoglu et al., 2014).

Domestic violence negatively affects not only the parents’ relationships but also child-father interactions (Fagan and Iglesias, 1999; Featherstone and Peckover, 2007; Fox and Benson, 2004). Children who are exposed to violence are considered a significant child protection concern as children are affected by witnessing or being exposed to abusive behaviour (Humphreys and Stanley, 2006). Many studies have found that having a violent father negatively affects children’s social, emotional and cognitive well-being (Herrenkohl et al., 2008; Holden, 1998; Holt et al., 2008; Johnston and Roseby, 1995; Johnston et al., 2009; Taylor et al., 2009).

Although research demonstrates the significant harm of domestic violence on children, Skinner et al. (2005) reported that many fathers hardly acknowledged that their children observed their violence towards mothers. Skinner et al. (2005) note that perpetrators mostly do not recognise that children could suffer long-
term damage due to their direct violent behaviour. Much evidence illustrates the strong link between perpetrators’ violent behaviour towards their partners and their inadequate positive parenting practices in highlighting how being a father may increase the tendency of men to engage in intervention programmes (Alderson et al., 2013; Stanley et al., 2012).

The literature consistently points to a link between Turkish survivors’ environmental factors and their difficulties in finding help (Alan et al., 2016; Alper et al., 2005). Children’s safety issues are strongly linked to stigmatisations in a community and tolerance of violence. Essentially, the fear of losing children by women survivors illustrates how they struggle with fleeing from a violent relationship. Thus, men’s violent behaviour appears to be tolerated and results in harmful interactions between children and violent fathers in many communities. Turkish perpetrators’ understanding of the severe consequences of domestic violence on children’s well-being should be examined by looking at men’s perspectives on their engagement in interventions. In the following paragraphs, Turkish women’s experiences and challenges during domestic violence interventions will be discussed. I shall also examine the efforts of social services in reducing and ending the harmful consequences of domestic violence. In this way, I will examine perpetrators’ viewpoints on their engagement in interventions and how these might conflict with the needs of child and female survivors.

Turkish families affected by domestic violence

This section is divided into three main topics. The first focuses on the concerns of Turkish women fleeing from a violent environment and the potential obstacles to getting Turkish perpetrators to take part in intervention programmes by
highlighting their patriarchal attitudes, honour dynamics, immigration status and cultural norms in Turkey and other countries. The second part discusses how policymakers, researchers and service providers need to understand and address experiences of domestic violence among Turkish perpetrators by considering racial oppression and discrimination. The third concludes with a discussion on how the UK social and political context considers culturally-sensitive approaches for black and minority ethnic perpetrators in domestic violence interventions.

I will discuss the experiences of Turkish perpetrators in relation to their engagement during intervention processes and the issues that may exist for survivors, family and community members in relation to men’s efforts to change their violent behaviour in Turkey. According to the evidence across communities, Turkish communities are no more backward or barbaric, and Turkish women are no more accepting of violence, than other communities. Therefore, it is significant to highlight that domestic violence is not confined to just one society or just to Turkish groups.

According to the Office for National Statistics (2013a), black and minority ethnic people made up about 19.4% per cent of the population of England and Wales. London was by far their main place of residence with 54.8 per cent of black and minority ethnic people. The Office for National Statistics (2011) found that the black and minority ethnic population increased from 8.8% to 14% between 2001 and 2011 in England and Wales. According to the 2011 Census, Turkey-born residents living in London numbered 71,301 (Office for National Statistics, 2015). The literature consistently points out that many survivors who have black and
minority ethnic backgrounds experience additional challenges during the help-seeking process (Burman and Chantler, 2005; Chronister and Aldarondo, 2012; Guruge and Humphreys, 2009; Lee, 2000; Menjivar and Salcido, 2002; Parmar et al., 2005; Sharma, 2001; Yoshihama and Mills, 2003). As there are no studies that focus on Turkish perpetrators of domestic violence in the UK, I will examine their major findings in Turkey, Germany and other contexts.

**Patriarchy**

In this section, I will give a brief definition of patriarchy and then move on to discuss how patriarchy is associated with the experiences of domestic violence in Turkish families. I will examine how patriarchal dynamics impact on some Turkish families by highlighting male privilege, power and domination in domestic violence. Tolerance of violence in the family setting indicates that many Turkish perpetrators have a greater entitlement to power than women do in families and community settings (İlkkaracan, 1996). Therefore, patriarchal norms may result in men’s violent behaviour and impact on their engagement in interventions.

Patriarchy covers different types of male interactions with women (Hearn, 2015). Patriarchal values are often associated with men’s dominance, power and controlling behaviour (Kandiyoti, 1995). Dobash and Dobash (1979) describe patriarchy as beliefs that lead to justifications of men’s violence, power and control over women. Patriarchy is also described as a way of expressing the process of honour and shame dynamics which are attached to men’s domination and privilege over women (Baker, Gregware and Cassidy, 1999).

Patriarchal structure allocates different activities and hierarchies for men and women in many Turkish groups (Kandiyoti, 1988). For instance, men often have
a dominant and authoritarian position (Golge et al., 2016) and the wife is expected to take care of the family members and to be dependent on her husband in order to protect the family unit (Sakallı, 2001). Also, many women are dependant on their husbands in the decision-making process (Dinç-Kahraman, 2010). Women’s status in terms of education and employment is linked to such gender norms (Dinç-Kahraman, 2010). Furthermore, women are responsible for meeting their husbands’ sexual needs in a traditional Turkish family structure (Alan et al., 2016). Wives must meet husbands’ needs, and failure to do so means that husbands are entitled to use sexual violence. Sexual violence in a marriage is not perceived as a crime or a case to report due to the tolerance of men’s violence within gender role expectations (Alan et al., 2016).

Given the core perceptions and roles of men and women in violence against women, patriarchy is more likely to increase gender inequality between men and women in Turkish families (Gursoy et al., 2016; İlkkaracan, 1996; Karakuş, 2015). Men’s violence against women is often tolerated because of the belief in a man’s right to be abusive which is present in the idea of the Turkish patriarchal family (Golge et al., 2016; Gursoy et al., 2016; İlkkaracan, 1996). These patriarchal norms often increase gender inequality and violence due to acceptance of male violence. In many patriarchal communities, a man’s violent behaviour towards his partner is justified by the fact that his acts are within patriarchal norms (Bui and Morash, 2008; Dogan, 2014b; Thiara and Gill, 2010). For instance, Zakar et al. (2013) examined Pakistani men’s beliefs and experiences of their abusive behaviour towards their partners and found denials and minimisations of their violent acts. Based on interviews and group discussions with married men who were abusive towards their partners, Zakar et
al. (2013) found strong patriarchal dynamics in Pakistani society and women’s subordination within cultural practices.

Efe and Ayaz (2010) found that many women (43%) believe that men’s violence against women is acceptable if women have committed adultery in Turkey. However, the research by Alan et al. (2016) found that fewer women (8.7%) reported that violence is acceptable. Even though there are differences in the findings about the rates of tolerance of violence, much evidence clearly describes many women survivors’ struggles with accessing help due to an acceptance of men’s violent behaviour in communities, police stations and other settings in Turkey (Alan et al., 2016; Golge et al., 2016; Kara, Ekici and Inankul, 2014). The studies reported that women survivors from European communities also faced obstacles to accessing help through police stations and mental health settings (Childress, 2015; Larsen et al., 2012).

Alan et al. (2016) collected data from 1,039 married women at 12 family health centres in Konya, Turkey by using questionnaires in order to examine women survivors’ awareness of intervention services. Alan et al. (2016) gave the factors which led women to staying in a violent relationship as poor levels of income (37.6%) and insufficient refuges (23.6%). Also, the belief that there is stigmatisation of women who are divorced (24.5%) and the importance of raising their children with a father (55.4%) were found to be reasons for staying in a violent relationship. Alan et al. (2016) collected data from women’s self-reports which indicated a reluctance to share domestic violence with others. Therefore, this study was limited to the actual rate of women who experienced domestic violence. The majority of women survivors’ difficulties in fleeing from a violent
relationship stem from socio-economic struggles and stigmatisation in Turkish communities. Likewise, in Asian communities, the connection between male privilege and women's oppression may stem from the cultural expectations of keeping the family together (Parmar, Sampson and Diamond, 2005), and this might result in domestic violence (Hyman et al., 2004). For instance, the UK study by Rai and Thiara (1997) indicates that if an Asian woman’s marriage fails and ends in divorce, it is likely to be considered the woman’s fault and the community will blame the woman.

A focus on discussing the relationship between domestic violence and patriarchal dynamics among Turkish communities does not mean that Turkish communities are more patriarchal than European communities. Perpetrators who minimise their violent behaviour are not restricted to Turkish or black and minority ethnic communities; this occurs across all cultural and ethnic groups. For instance, some studies emphasised the relationship between men’s violent behaviour and their strict ideas around gender power relations among perpetrators in European communities (Blacklock, 2003; Rostock and Berghahn, 2008). Minimisation of abusive actions among perpetrators of domestic violence in Europe and other ethnic groups has also been reported (Gondolf, 2002, 2015; Gadd, 2004; Kelly and Westmarland, 2015).

In summary, the key issues that link patriarchal family structures to domestic violence are male privilege, gender inequality, tolerance of violence and stigmatisation in communities. Due to strong patriarchal norms and social habits of blaming women for men’s violent acts, Turkish survivors are unable to apply to social services in order to flee from violent relationships (Kandiyoti, 1995;
Sakallı, 2001). The issue of “women-blaming” stems from the perceptions of women’s failure to fulfil sexual, familial and domestic duties and a strict distinction between the roles of men and women (Kandiyoti, 1995). Honour and shame dynamics, culture, and masculinity, are important components in patriarchy that will be illuminated in the following paragraphs.

Honour and shame

Turkish women survivors’ experiences of domestic violence and the processes of seeking help in foreign countries are under-researched. This section goes some way towards addressing this by examining available literature on the key issues around honour-based violence and domestic violence in Turkish women survivors and perpetrators in the context of different countries. Honour-based violence is a type of male violence against women which is tolerated and justified in a community due to male privilege, power and control over women (Hossain and Welchman, 2005). Importantly, men are vested with power and control over women’s sexual conduct in the dynamics of honour (Hossain and Welchman, 2005).

In considering the minimisations of women survivors’ experiences in many communities, honour-based violence is an important political issue within different communities and cultures in the UK (Reddy, 2008; Samad, 2010). Research by the Iranian and Kurdish Women’s Rights Organisation reported that 11,000 honour crimes including forced marriage and female genital mutilation were recorded by police forces in the UK over a period of five years (Talwar and Ahmad, 2015). Honour-based violence is mostly described as an invisible issue in the criminal justice system despite many studies on this topic (Eshareturi, Lyle
and Morgan, 2014). Likewise, police officers often ignore honour-based violence due to the cultural sensitivity present in the UK (Eshareturi, Lyle and Morgan, 2014). For instance, the police only responded to 39 instances of honour based violence while 2,823 incidents were reported to them (Iranian and Kurdish Women’s Rights Organisation, 2013). Requests for intervention should be evaluated without considering the issue of culture; it should be a human rights issue in order to end honour based violence (Eshareturi, Lyle and Morgan, 2014).

Much research has been undertaken in Germany and Denmark on the incidence of honour-based violence in Turkish communities. In the case of Germany, the reason for this could be that 1.8% of the population of Germany was born in Turkey based on statistics from 2011 (Federal Statistical Office of Germany, 2012) and the largest amount of immigrants and descendants are Turks in Denmark (Liversage, 2012; Morck et al., 2011). Due to the high Turkish populations, many studies on Turkish survivors and perpetrators have been conducted in Germany and Denmark. Batsleer et al. (2002) highlight that domestic violence occurs in every ethnic group. They also pay particular attention to how the dynamics of culture have been underestimated and the acceptance of cultural or traditional norms with regard to domestic violence. Turkish survivors’ cultural norms and honour dynamics are obstacles to accessing domestic violence interventions.

Many researchers concentrate on the dynamics of honour-based violence among Turkish and other Islamic communities in Western countries (Begikhani, Gill and Hague, 2015; Idriss and Abbas, 2010; Korteweg and Yurdakul, 2009;
Studies of domestic violence among Turkish families in Germany have revealed that women survivors’ coping mechanism is often to tolerate abuse and not to share it outside of family members (Benbow, 2015; İlkkaracan, 1996). For instance, Korteweg and Yurdakul (2009) explored the complex issues of honour killings between Muslim and/or Turkish immigrants and the majority population in the Netherlands and Germany. They focused on intersects in ethnicity, race, culture, religion and gender roles by analysing newspaper discussions, news and op-eds about honour killings. Many newspapers focused on the dynamics of Islamic and racial backgrounds when discussing the issues surrounding honour killings. Korteweg and Yurdakul (2009) point out the ways in which gender norms seem to be integrated with racial, religious and national backgrounds in the understanding of honour-based violence in Turkish communities. Similar findings were made in Rostock and Berghahn's (2008) review of the available literature on the historical development of intervention and prevention efforts of honour-based violence, forced marriage and violence against Turkish Muslim women in Berlin, Germany. Rostock and Berghahn (2008) argue that gender equality plays a significant role in providing safety to migrant women, but social policy-makers have often ignored different types of violence in German-Turkish communities. Rostock and Berghahn (2008) highlight that gender-based violence should be considered a criminal act rather than cultural or private issue.

Even though Korteweg and Yurdakul (2009) and Rostock and Berghahn (2008) do not focus on domestic violence, the major characteristics of survivors’ experiences of honour killings might be similar to the domestic violence incidence within Turkish communities in European countries. Korteweg and
Yurdakul (2009) and Rostock and Berghahn (2008) make a compelling argument about how social structure, cultural backgrounds and gendered relationships are deeply entrenched in Turkish communities in Germany within the incidence of honour killings. They suggest the need for effective social policies and intervention efforts. Even though the studies by Korteweg and Yurdakul (2009) and Rostock and Berghahn (2008) have not examined the core issues of Turkish perpetrators’ experiences in the intervention process, they help to recognise how gendered relationships have shaped honour killings. According to them, honour and shame dynamics might be linked to the perspectives of many perpetrators’ engagement in the intervention processes.

Akpinar (2003) used the life history method to probe the survivor experiences of two second generation Turkish women in Sweden. She lists the key reasons for the domestic violence as the codes of honour and shame; cultural traditions; and immigration status. She points out that traditional and patriarchal gender norms are likely to increase men’s power and control in Turkish marriages. These two life stories illustrate that cultural norms and pressure by family members were significant barriers in preventing a violent relationship in Sweden. In the study by Akpinar (2003), the dynamics of honour and shame were associated with the men’s violent behaviour. Despite the limitations of the small sample size, Akpinar (2003) found a significant link between cultural values, codes of honour and shame in the Turkish community and domestic violence. The main reason for highlighting the codes of honour and shame could be because the sample included forced and arranged marriages.

The importance of maintaining honour and shame are often expressed by many
Turkish families (Dinç-Kahraman, 2010; Korteweg and Yurdakul, 2009). These norms impact on many women survivors’ help-seeking strategies (Önal, 2008). Turkish survivors often do not seek help due to the perception that violence is a family issue and should not be discussed with outsiders (Akpinar, 2003; Marshall and Furr, 2010). This indicates how cultural backgrounds which include the notion of subordination of women are interwoven with honour dynamics in marriage institutions in communities (Önal, 2012). Men’s violence linked to honour in a family prevents many women from leaving a violent relationship due to potential social isolation in a community (Wikan and Paterson, 2008). Thus, perpetrators appear to justify their violent behaviour in relation to honour and shame dynamics.

Doğan (2014c) explored Turkish perpetrators’ relationships with the survivors and the reasons for honour killings by conducting in-depth interviews with 39 men in Turkish prisons and analysing participants’ court rulings and prison files. The reasons given were: jealousy, pride, distrust, socio-economic problems, and conflicts between perpetrators and survivors (Doğan, 2014c). It was highlighted that social and cultural structures and gendered values are likely to increase honour-based violence. Although this study did not focus on perpetrators of domestic violence, it can be used to understand the dynamics of Turkish perpetrators’ experiences of violent behaviour in Turkey. In the context of interventions aimed at Turkish perpetrators, the findings by Doğan could be helpful in highlighting key issues relevant to Turkish perpetrators’ engagement issues in interventions. Therefore, the ethnic, social and cultural structures need to be considered in the UK to explore how Turkish societal and community norms impact on many perpetrators’ engagement in intervention programmes.
Importantly, Pervizat (2011) noted that criminal justice systems, judges and social policies in Turkey support perpetrators’ violent behaviour as many perpetrators are confident that their honour killings will go unchallenged. Perpetrators argue that they have the right to kill the women in order to protect their family honour and many judges support this idea (Pervizat, 2011). However, Turkish perpetrators’ expectations of the criminal justice systems and cultural norms are potentially the same in the UK. It is worth discussing the potential dilemmas and conflicts that may occur in the intervention process for Turkish men in the UK. Pervizat (2011) noted that sisters or mothers-in-law play a significant role in addressing honour killings in the process of executions and commissions. She also highlighted that this issue is controversial as the actions by women and men could be different in each case. These perceptions are important in understanding how social and structural values; patriarchal dynamics; and social policies might shape men’s attempts to change their violent behaviour. However, these perceptions are limited to describing how experiences and perspectives of perpetrators might influence their engagement in intervention efforts. This research focuses on how Turkish men may engage in interventions. The following section provides detailed clarification on how masculinity may affect Turkish men’s commitment during interventions.

**Masculinity**

In this section, I will examine the effects of masculine identity on violence among Turkish perpetrators and the available evidence on the potential relationship between their engagement during interventions and their masculinity in the UK. Lease et al. (2009) highlight that Turkish men’s gender role is linked to their masculine identity and patriarchal norms. A number of researchers found that
Turkish men’s masculinity is likely to be related to their power and controlling behaviour toward their partners (Baier and Pfeiffer, 2009; Bozkurt et al., 2015; Charsley and Liversage, 2015; Scheibelhofer, 2010; Tekkas, 2015). However, there is a paucity of evidence which examines how Turkish perpetrators’ masculine identity affects their engagement in intervention programmes (Jansen et al., 2009; Yuksel-Kaptanoglu, 2015).

Many scholars emphasise the link between masculinity practices and domestic violence (McCarr, 2007; Sayem and Nury, 2013). Likewise, the literature points out that the dynamics of hegemonic masculinity might explain societal power, ideology (Connell, 2005; Hearn, 2012) and domestic violence (Hoang et al., 2013; McCarr, 2007; Sayem and Nury, 2013). Hegemonic masculinity could be one factor in domestic violence but Vandello and Cohen (2008) argue that other characteristics also impact on violent behaviour. For instance, it is suggested that domestic violence services need to consider how individuals manage in a cultural environment consisting of customs, principles, expectations and economic opportunities (Vandello and Cohen, 2008).

Anderson and Umberson (2001) explored specific practices that illustrate how perpetrators construct masculinity in domestic violence. They conducted in-depth interviews with 33 perpetrators in an intervention programme in the USA. These men’s ethnic backgrounds were African American, Latino, European American and Native American. This diversity would have been significant if they had investigated how racial background might influence the relationship between their masculinity and engagement in intervention efforts. However, Anderson and Umberson (2001) focused on describing perpetrators’ practices of masculine
identity as denial, blaming women, minimisations, reduced responsibility and blaming the legal system. They suggest that perpetrators implemented masculinity and “reproduced gender as dominance” (p. 375). Although this finding fails to mention how masculinity may contribute to a lack of engagement in interventions, it is vital to describe key characteristics of masculinity among perpetrators of domestic violence that may be linked to Turkish perpetrators’ views on engagement in interventions.

Tekkas (2015) examined young Turkish men’s conceptualisations of their masculine identity by conducting five focus groups with male university students in Istanbul, Turkey. Tekkas (2015) found several major themes in young men’s perceptions of masculinity, including power, roughness, independence, high attainment and achievements. These themes might provide an understanding of how Turkish men conceptualise being a real man and the general perceptions about masculinity in the Turkish community. The study by Tekkas (2015) suggests that there is a need for interventions for men to promote gender equality in their intimate relationships in Turkey. However, this study did not examine how men’s masculinity might be linked to their violent behaviour. Three major categories emerged on men’s gender roles in family life: male breadwinner identity; female breadwinner identity; and doing or avoiding housework (Tekkas, 2015).

Given the general findings that confirm the link between masculine identity and domestic violence, the evidence demonstrates that men’s masculine identity dynamics influence their violent behaviour. In the report of the Ministry of Family and Social Policy in Turkey, Yuksel-Kaptanoglu (2015) conducted in-depth
interviews with 12 perpetrators who were in prisons in Ankara, Turkey. These perpetrators described key dynamics of their violent behaviour as power and control behaviour patterns; the acceptance of violence in a community; the perceptions of betrayal and honour; survivors’ awareness of their rights and insubordination; men’s role as breadwinner; men’s substance use problems; and the negative effects and reinforcement by the media. In this sample, many men justified their violent behaviour by blaming their partners. Even though Yuksel-Kaptanoglu (2015) ignores how these key issues are potentially associated with their perceptions of their masculinity, it helps us to understand the reasons for Turkish perpetrators’ violent acts. An understanding of the key dynamics of masculinity can provide insight into their engagement in interventions in the UK.

Scheibelhofe (2010) examines the complexity of masculine identities within migration status among Turkish boys and men in Vienna. While many studies highlighted the issues of oppression and discrimination in migrant men’s lives, their masculinity has been seen as “responses to their subordinated position in society” (p. 276). Scheibelhofe (2010) conducted interviews with young Turkish-German boys and found key themes around their constructions of masculine identity in relation to their immigration status. These themes are respectful attitudes towards older people; acceptance of fathers’ final decisions; fathers’ breadwinner roles and caring for family members for the honour of the family. Both Tekkas (2015) and Scheibelhofe (2010) emphasise that the role of being a breadwinner is a significant characteristic among Turkish men. Even though these studies did not examine explicitly the relationship between masculinity and domestic violence, they are helpful in increasing our understanding of the nature of Turkish men’s constructions of masculine identity. This understanding may
allow us to hypothesise about key themes in the construction of Turkish men’s masculine identity and their relationship to the engagement of Turkish men in interventions in the UK.

Much evidence shows how masculinity is strongly linked to domestic violence. Perpetrators’ masculine attitudes might increase their children’s social and behavioural problems. For instance, Baier and Pfeiffer (2009) examined the link between demographic and cultural backgrounds of fourth and ninth grade Turkish school children and their violent behaviour in Germany by conducting surveys between 1998 and 2006. The key aim of this study was to understand the reasons why Turkish young people are more likely to be involved in violent crime. Baier and Pfeiffer (2009) made a compelling argument that this difference might stem from masculinity norms and how they increase violent behaviour in Turkish communities as 23.7% of Turkish youths stated that husbands have a right to hit their wives if they betray them. This statement confirms the role of the “culture of honour” (p. 21). Baier and Pfeiffer (2009) also found a 15% divorce rate in the Turkish community and a higher degree of inter-marital violence compared to Greek ethnic groups in Germany. This study allows us to understand how masculine identity might shape violent behaviour in Turkish communities. Although this study focused on the violent behaviour of Turkish youths, some findings pointed to problems with domestic violence interventions in Turkish families. For instance, it recognises how Turkish men might describe their violent behaviour by highlighting the issues of honour and betrayal dynamics. While describing Turkish men’s perceptions of their responsibility for the consequences of their violent behaviour and their justifications around their partners’ betrayal behaviour, these strong justifications could influence their
engagement in interventions in the UK. As a result, it is vital to examine how men describe honour and betrayal issues in Turkish communities in the UK as this might increase our insights into potential approaches to their behavioural change process.

Ozyegin (2015) examined young Turks’ gender and sexual relations and the influences of historical and cultural backgrounds linked to their feminine and masculine identities. Ozyegin (2015) described Turkish young men’s masculinity as “risk taking in careers, ambition outside the professional realm, male passion and expressiveness, and creating interests geared toward self-actualization” (p. 322). This quote indicates that many men identified their masculinity as being free from a breadwinner role and of a more independent, individualistic character. Similarly, many young women stated two different “desired men” – a powerful and dominant man in the community and one that lacks male privileges and domination over women (p. 322). The finding by Ozyegin (2015) helps us to recognise the complex and changing gender role attitudes among Turkish young people in Turkey and gives a better understanding of men’s masculine identity and women’s position in the intimate relationship. These dual perceptions on Turkish men’s identity impact on many second and third generation violent men’s engagement in interventions in the UK.

Whilst much evidence highlights the relationship between men’s masculinity and abusive behaviour, migrant men might experience additional vulnerabilities and challenges to their masculinity in their transnational marriages. For instance, Charsley and Liversage (2015) examined gendered challenges for Muslim migrant husbands by conducting semi-structured interviews with Pakistanis in
the UK and Turks in Denmark. These men’s masculine identity was problematized and belittled in the context of transnational marriages. In this research, Turkish men emigrated to Denmark for marriage purposes and many of them experienced low socio-economic status and lack of family support. Due to this, their wives’ family had more power over their lives. This power and control behaviour towards these Turkish men can play a significant role in understanding men’s difficulties in making sense of all these expectations and their controlling behaviours in relation to their strong masculine identities. Even though this study does not focus on men who are violent towards their partners, it does outline the unique circumstances of Turkish men who have moved to another country for marriage. In the context of the UK, some men might emigrate to the UK for marriage purposes. Thus, this study by Charsley and Liversage (2015) is key to understanding the gender role expectations of Turkish men and how this potentially influences their attitudes in the intervention process.

The study in the Netherlands by Romkens and Lahlah (2011) highlights that in those Turkish and Moroccan communities male justifications for their violent behaviour stem from their experiences of losing their dominance and control over their partners and the problems of expressing their masculine identity. Although these findings help to identify potential factors that may increase men’s violent behaviour, they fail to determine how these cultural values influence men’s engagement in interventions because this study gathered data from survivors’ experiences. Importantly, the changing gender roles and family structures among second and third generation Muslim families in Western countries might be significant because these issues stem from facing two different cultures and values (Abugideiri, 2013). Furthermore, Abugideiri (2013)
noted that young couples from these communities struggle to find a balance between their responsibilities and power since their parents had different roles and experienced a different family structure. As a result, both studies help to show the potential relationship between changing Muslim men’s gender roles in a family and their experiences in intervention programmes.

Masculine gender role characteristics potentially affect perpetrators’ engagement in intervention programmes. For instance, the USA study by Bui and Morash (2008) found that the immigration status of male perpetrators could impact their lives because of gender role difficulty, losing social status and power, and changes to their financial situation. Bui and Morash (2008) interviewed Vietnamese women survivors and service providers, but not perpetrators. Bui and Morash (2008) suggest that perpetrators’ socio-economic situations and gender relations need to be changed to reduce and end their power and control relationships with their partners. Given this suggestion, perpetrators’ engagement might increase if intervention efforts addressed their gender role norms and masculine identity.

The study in the UK by Guru (2006) finds that it is necessary to explore South Asian perpetrators’ patriarchal values that affect their behavioural change process in intervention programmes. South Asian perpetrators might have difficulties in describing the effects of their masculine identity and power on their violence (Guru 2006). Thus, Guru suggests that South Asian British perpetrators’ gender roles and related issues need to be considered within culturally-sensitive interventions. Guru (2006) focused on cultural prescriptions of perpetrators including their masculinity, values and justifications among black and minority
ethnic groups. This focus might allow intervention programmes to confront the difficulties in understanding cultural perspectives. In doing so, these considerations are likely to encourage men to engage in intervention programmes because black and minority ethnic men might improve their understanding of their “constructs, privileges and attitudes” toward their partner (Guru, 2006, p. 162). Stanley et al. (2012) substantiate the claim that masculine identity might be a barrier to perpetrator engagement in interventions because requesting help is perceived as a shameful act. Stanley et al. (2012) conducted focus groups with men including five black and Asian men in the UK. Although this limited sample might not reflect the key characteristics of Turkish perpetrators, it may indicate the relationship between obstacles to seeking help and masculinity.

Although masculinity and gender roles might provide a framework for analysing the intervention efforts of perpetrators, there are potential limitations. For instance, Snider (1998) noted that the masculine identity of violent behaviour and feminist explanations may not fully explain perpetrators’ violent behaviour because of the complexities of various other factors. Snider (1998) describes these different factors as: “class, ethnicity, orientation, religious identification, occupation and age” (p. 27). Furthermore, these factors might not be specified or prescribed in advance (Snider, 1998). This weakness could stem from each perpetrator’s different experiences and perceived masculinity. Despite this limitation, among black and minority ethnic groups masculine identity is likely to be reported as a factor in perpetrators’ lack of engagement during interventions (McCarry, 2007; Sayem and Nury, 2013). Essentially, much evidence has pointed out that masculinity among Turkish men plays a significant role in
understanding their experiences of domestic violence and potentially their engagement in interventions. In addition to the relationship between masculinity and perpetrators’ engagement in interventions, I will investigate other dynamics that might be involved in understanding their engagement. For instance, immigration status may be associated with domestic violence. This will be considered in the following section.

**Immigration status**

Domestic violence is one of a number of problems that may be connected to immigration status (Burman and Chantler, 2005; Erez et al., 2008; Kasturirangan et al., 2004; Raj and Silverman, 2002; Smee, 2013). For instance, surveys found that one third of Turkish women who had a migration background were at high risk of being survivors of domestic violence in Germany (Schröttle and Khelaifat, 2011). Helfferich and Kavemann (2010) argue that survivors’ lower socio-economic status is likely to increase domestic violence among Turkish communities in Germany. They suggest that there is an important need to promote language support services for Turkish survivors and inform them about their legal rights and the available support, counselling and other services (Helfferich and Kavemann, 2010). Rommelspacher (2007) compared the differences in the reasons and fleeing strategies from domestic violence between Turkish and German survivors. Rommelspacher (2007) found that Turkish women often experienced lower socio-economic status, unemployment, a higher number of children and fewer divorce cases than German and other ethnic European survivors (in Prasad, 2010).
Similarly, Schröttle and Ansorge (2009) found Turkish women survivors to be more vulnerable than the majority because of their poor socio-economic background, lack of financial support, language barriers, cultural norms, gender roles, their dependence on their husbands, and the tolerance of violence in families (in Prasad 2010). The study in Germany by Schröttle and Ansorge (2009) identified women’s dependence on their husbands and a tolerance of men’s violence against women in many Turkish communities. Turkish women survivors faced many interlocking oppressions in their help-seeking. However, the study by Schröttle and Ansorge (2009) focused on the struggles of migrant Turkish women so these factors may not necessarily represent the potential obstacles that non-migrant Turkish women survivors face (Prasad, 2010).

As the acceptance of violence in communities is a barrier to providing safety for survivors, the understanding of the circumstances and consequences of divorce may help to identify potential problems that women survivors deal with in many communities. For instance, Liversage (2012) examined the process and pressures of divorce in Turkish transnational marriages in Denmark by applying life story interviews. Liversage found that the rates of divorce increase when power dynamics start to arise in marriages. For instance, both when marriage migrants are men and women, the lack of support and other immigration related obstacles often empower the person who is a non-immigrant. These power dynamics appear to lead to divorce in many Turkish marriages. In domestic violence cases, divorce is not normally a choice among many Turkish women survivors because of stigmatisation within Turkey (Alan et al., 2016). These different perceptions and experiences appear to stem from power dynamics related to immigration status. Essentially, dependency on the partner and
potential stigmatisation in a community influence women survivors’ decision to divorce in order to end a violent relationship.

In the above paragraphs, I have discussed the core dynamics of domestic violence connected to immigration status in Turkish survivors including dependency on their partners; gender role norms that accept men’s domination; lack of financial and family support and lack of trust and awareness of existing social services. This investigation expands the knowledge on domestic violence among Turkish communities and contributes to a better understanding of key influences on men’s perspectives on their engagement in interventions. This study takes into account all these complex circumstances and considers the way they could be influences in the UK context as the population may hold similar cultural and racial norms, values and difficulties in seeking help.

The UK-based study by Burman and Chantler (2005) examined immigrant survivors’ experiences of fleeing from a violent environment. They made a compelling argument that while immigration status might make perpetrators be less involved in intervention efforts, the social policies might reinforce these issues. For example, they noted that:

Where a woman has entered the country to join her husband and the relationship breaks up within one year, the British Home Office one-year rule gives the husband the right, and power, to have the woman deported to the country of origin. This adds a powerful weapon to the perpetrator’s arsenal of tactics of abuse. (p. 65)

This quotation highlights the ways in which UK social policies on immigration may influence the engagement of perpetrators in an intervention programme. This one-year rule was extended to five years after 9 July 2012 (Home Office, 2012). This five-year rule for women survivors in their transnational marriages means that men are able to keep being abusive without having to account for...
their abusive acts toward their partners because migrant women have to leave the country if the marriage fails within five years. Therefore, this five-year rule can prevent many Turkish women survivors from seeking help due to the fear of deportation.

Black and minority ethnic perpetrators’ engagement in intervention programmes might be associated with their traditions, cultural values and family ties (Hancock and Siu, 2009). For instance, the USA study by Walter (2006) conducted interviews with Latino immigrant men who had been violent toward their family members. Walter (2006) highlighted the level of importance of men’s attachment to their family members. They indicated that cultural values impact on many men’s involvement in an intervention programme (in Hancock and Siu, 2009). Similarly, Hancock and Siu (2009) suggest that Latino immigrant men’s successful engagement in interventions can be best understood by recognising that their personal changes are linked to their strong family ties in the USA. According to this suggestion, they owe their personal transformation to their strong family ties, and this transformation encourages them to engage in a programme and change their violent behaviour. On the other hand, Walter (2006) points out that Latino immigrant men are challenged by attending domestic violence interventions because of their particular culture, traditions, family values, the lack of social support networks and gender role expectations.

Baker et al. (2001) looked at perceived parenting stress and competence among Latino couples in the USA. Baker et al. (2001) show that cultural norms and social expectations influence men’s and women’s parenting stress differently within domestic violence. Therefore, ethnicity and cultural norms need to be
considered to determine how family ties and parenting stress impact on perpetrators’ engagement in intervention programmes. The value systems of Latino families in the USA could be helpful in understanding migrant men’s motivations in interventions generally and in relation to Turkish men in the UK. For instance, Turkish men’s experiences of domestic violence in the UK may include similar dynamics including the level of family ties and similar struggles in keeping their family together. However, their main challenge could be about how they understand their violent behaviour and attempt to change their abusive actions. In the UK context, core issues will now be examined by highlighting unique experiences of Turkish perpetrators whilst taking into account potential similarities with Latino perpetrators in the USA.

Several researchers have been concerned with the additional difficulties related to black and minority ethnic perpetrators’ immigration status by considering their involvement in domestic violence interventions (Cervantes and Cervantes, 1993; Hancock and Siu, 2009). Many Latino men in the USA experience challenges in accessing intervention programmes (Hancock and Siu, 2009). These challenges mostly affect perpetrators who recently arrived in the country and non-English speaking Latino men of working class origin who experience language barriers to attending intervention programmes. It is highlighted that perpetrators may also face additional obstacles such as belonging to two cultures, lack of family support and other issues that are associated with immigration (Williams, 1994). Compared to the literature review by Williams (1994), the study by Hancock and Siu (2009) appears more persuasive in clarifying particular ethnic minority perpetrators’ struggles. This persuasiveness might be because Hancock and Siu conducted an observational study that explored the effects of participants’
completion rates in an intervention programme. However, Williams’ review on the available literature is related to factors that influence African American perpetrators’ engagement in intervention programmes. In drawing on the studies by Hancock and Siu (2009) and Williams (1994), Turkish perpetrators who have recently moved to the UK might experience similar concerns including language barriers and belonging to two cultures. These potential obstacles may have an impact on their engagement in interventions.

Although the USA-based studies have examined core issues of perpetrators including their cultural values, and social and gender norms within particular groups, these issues could also be relevant to groups in the UK. For instance, Tas et al. (2008) made similar findings in the context of mental health issues. They examined the major dynamics of Turkish and Kurdish men’s barriers in accessing and using mental health services offered in London through a charity-based organisation that provides health-related services for Turkish, Turkish-Cypriot and Kurdish communities. They found a number of obstacles that men face in accessing mental health services. These are: language barriers; lack of knowledge about existing services; perceived discrimination in services; fear of isolation in a community and losing the status of breadwinner. Further, Sales (2002) found a high rate of mental health problems related to the unstable legal status of Turkish and Kurdish refugees. Sales’ (2002) study gives an overview of key problematic areas in relation to mental health problems in the Turkish and Kurdish communities in the UK. This overview has enabled me to understand the potential circumstances and obstacles that Turkish perpetrators might face in seeking help and engaging in interventions. The obstacles of immigration status and racism could have the same impact on the help seeking process of Turkish
perpetrators. For instance, they might have language barriers in accessing DVPPs or they might not know about the existing services for domestic violence interventions. Whilst highlighting the potential similarities of help-seeking in relation to mental health problems, this research acknowledges the complex issues of domestic violence interventions including minimisations, denials and consequences of violence.

Racism in interventions

Whilst many survivors experience racism in social services, the literature also shows the negative influences of racialised institutions on black and minority ethnic perpetrators’ engagement in intervention processes. For instance, Guru (2006) stated that British institutional structures should work with South Asian men without racist and sexist practices. Moreover, Guru (2006) mentions that the lack of attention to race and gender issues among South Asian perpetrators in DVPPs might cause negative outcomes. Insufficient skills and tools in the interventions with black and South Asian perpetrators might be barriers to achieving successful outcomes (Guru, 2006). Kromhout et al. (2000) and Moodley (1999) describe the characteristics of ineffective services as racialised institutions where the practitioners foster mistrustful relations, and show a lack of culturally-competent approaches and insufficient understanding of participants’ racial and cultural experiences (in Guru, 2006). Laungani (2004) suggests that intervention programmes need to consider participants’ cultural identities and values. Similarly, many researchers argue that effective interventions should consider and increase programme workers’ understanding of black and minority ethnic perpetrators’ culture and gender roles to achieve positive outcomes (d’Ardenne and Mahtani, 1999; Guru, 2006; Roysircar, 2003).
Within the complexity of cultural norms, social and racial structures and gender related oppressions, Burman et al. (2004) have noted that the stereotypes and beliefs held by domestic violence service workers about the private sphere or being respectful of culture prevent them from intervening in domestic violence against black and minority ethnic women in the UK. Patel (2013) postulates that domestic violence is often masked by the idea of respect for cultural and religious beliefs based on the law of the family. Patel (2013) suggests that social policies should recognise the link between gender role dynamics and religious and political movements as these issues influence domestic violence interventions in Britain.

Moreover, Burman et al. (2004) make the compelling argument that perceiving domestic violence as a private or cultural issue among black and minority ethnic communities is a strong barrier for services that work with domestic violence cases. Patel (2013) and Burman et al. (2004) believe that culture should not be perceived as a private issue in relation to domestic violence. Patel (2013) and Burman et al. (2004) focused on the invisibility and vulnerability of black and minority ethnic survivors. These discussions on cultural privacy illustrate how community leaders and some services perceive domestic violence as a family issue. This limits opportunities for interventions because many violent men might not seek help for their violence as they often perceive domestic violence as a private matter. These perceptions can explain many men’s lack of engagement in domestic violence intervention programmes in the UK.
The role of facilitators in interventions

The section moves on to give an overview of the available literature on the way in which a therapist conceives the cultural backgrounds of participants and how this may impact perpetrators’ engagement. Numerous studies highlight that if programme facilitators are able to understand traditional norms, power and control issues in the context of black and minority ethnic participants’ culture and environment, these participants are more likely to engage in the programme and achieve positive outcomes (Ackerman and Hilsenroth, 2003; Ross et al., 2008; Saunders, 2001; Taft and Murphy, 2007; Williams, 1992; 1994). Saunders (2001) suggests that intervention programmes should respond to cultural issues and the motivational problems of participants. Whilst Saunders (2001) discusses the importance of perpetrators’ cultural and motivational issues, some studies argue that the capacity and success of a therapist play a significant role in increasing participants’ motivation and behaviour change in intervention programmes (Ackerman and Hilsenroth, 2003; Ross et al., 2008). Several researchers emphasise that group practitioners need to understand cultural and racial backgrounds to increase engagement of participants in intervention programmes (Almeida and Dolan-Delvecchio, 1999; Bent-Goodley et al., 2007; Williams and Becker, 1994). Similarly, Carrillo and Tello (1998) noted that both external and internalised oppression among black and minority ethnic men might be barriers to building a trusting relationship with group leaders in interventions (in Hancock and Siu, 2009). In the following discussion, I will consider how group leaders or therapists might affect perpetrators’ commitment during interventions. I also examine the relationship between black and minority ethnic perpetrators’ engagement and the therapist’s role in DVPPs by concentrating on potential
issues that may link to perceptions of Turkish men’s engagement in interventions.

Williams (1994) suggests that practitioners need to receive training about culturally-sensitive approaches for successful outcomes in interventions. It has been suggested that facilitators should recognise that cultural and ethnic differences may affect the therapeutic process in intervention programmes (Almeida and Dolan-Delvecchio, 1999; Bent-Goodley et al., 2007; Gondolf, 1998). The purpose of this recognition is possibly to provide an effective assessment of the therapeutic relationship between a participant and a facilitator (Bent-Goodley, 2005). If program facilitators do not acknowledge the issue of racism, practitioners themselves need to reflect on it and recognise that racial oppression and cultural context including male dominance and sexism might affect men’s engagement (Bent-Goodley et al., 2007; Williams and Becker, 1994). This perspective indicates the required level of commitment and interaction with a client (Bent-Goodley et al., 2007). Almeida and Dolan-Delvecchio (1999) highlight that “practitioners need to distinguish between the oppressive behaviour patterns, which range from actual torture to subtle dehumanising practices and cultural definition of norms” (p. 666). Bent-Goodley et al. (2007) make a similar point that efficient relationships between practitioner and participant in the interventions could require practitioners’ understanding of group members’ racial experiences.

Powis and Walmsley (2002) examined probation work with black and Asian offenders by conducting surveys with workers in the UK. Probation workers suggest that facilitators should be competent enough to address offenders’
needs in a mixed group-based programme because the lack of facilitators’ skills in engaging men leads to high dropout rates. There is a discussion about whether being the same ethnic background as programme participants should be a criterion to be a facilitator for black and minority ethnic groups in a programme. Similarly, the culturally-focused approach often includes racially homogeneous groups with a counsellor of the same race as the participants and a curriculum that identifies issues facing that particular group of participants (Gondolf, 2012, p. 153). From surveys of black and Asian offenders, Calverley et al. (2004) found that a third of participants wanted to be supervised by someone from the same ethnic group. However, this criterion fails to consider the importance of facilitators’ understanding of the impacts of racism on violent behaviour. Powis and Walmsley (2002) suggest that facilitators or tutors should understand the influences of racism on their attitudes and culture in offender programmes.

Although the studies by Powis and Walmsley (2002) and Calverley et al. (2004) do not focus on domestic violence perpetrator programmes, there seems to be a strong emphasis on the association between therapist’s cultural competence skills and black and minority ethnic participants’ engagement level during interventions. Many studies point out the importance of practitioners’ awareness of participants’ racial and cultural background (Almeida and Dolan-Delvecchio, 1999; Bent-Goodley et al., 2007). The understanding of such influences of racism in a community by facilitators plays a significant role in elaborating perspectives of Turkish perpetrators on their commitment in interventions as many studies have pointed out the link between facilitators’ insufficient understanding of racism and men’s lack of involvement in interventions.
There is no study which specifically examines the impact of racism in social services on Turkish communities in Europe, but many black and minority ethnic survivors and perpetrators struggle with engaging in intervention programmes in a Western country due to racism, oppression and discrimination (Beckett and Macey, 2001; Kasturirangan et al., 2004). In considering the socio-political difficulties of survivors in seeking help, it is clear that many perpetrators remain empowered as many of them do not get involved in the intervention process.

By and large, many Turkish men’s cultural dynamics, immigration issues and other social positions influence the process of addressing their abusive behaviour. An effective understanding of black and minority ethnic communities’ values, beliefs and cultural norms could lead to culturally-sensitive approaches being applied (Gondolf, 2012). However, culturalist approaches are limited in their explanation of multiple factors of violent behaviour while focusing on culture as the sole source of patriarchal violence (Razack, 2004). The effectiveness of culturally-sensitive approaches in DVPPs interventions is an on-going discussion and the following section covers the aspects of this current debate.

**Culturally-sensitive approaches**

This section provides an overview of the characteristics and benefits of culturally-sensitive strategies and the obstacles to increasing Turkish perpetrators’ engagement in traditional models. Several studies have found a strong link between participants’ active engagement and the implementation of culturally-sensitive techniques for black and minority ethnic participants (Guru, 2006; Hancock and Siu, 2009; Pfitzner et al., 2015; Williams, 1992). The Home Affairs Sixth Report (2008) pointed out that culturally and linguistically-sensitive
services need to be developed for black and minority ethnic survivors. It also discusses the potential link between culturally-sensitive approaches and involvement of Turkish perpetrators in interventions. A number of studies recognise that black and minority ethnic participants’ lower rate of completion of intervention programmes is related to the lack of culturally-competent strategies (Gondolf, 1988; Hancock and Siu, 2009; Williams, 1992; Williams, 1994; Williams and Becker, 1994).

Given this recognition, Williams (1994) found an inextricable connection between the low-level engagement in intervention programmes and black and minority ethnic men’s immigration status and cultural backgrounds. These findings could help to clarify their perspectives and experiences that might be linked to their engagement in intervention efforts. Also, Guru (2006) highlighted that culturally-sensitive approaches help programme providers to examine perpetrators’ cultural and traditional beliefs. In this way, they can invite men to share their experiences related to their racial and cultural backgrounds. In order to improve culturally-sensitive practices, Guru (2006) stated that accessing individuals’ views and experiences in the community is vital.

A few research studies examined whether the traditional interventions are beneficial for black and minority ethnic offenders in general. For instance, Stephens et al. (2004) describe pathfinder programmes as four group motivational sessions for black and Asian offenders in the UK. Durrance and Williams (2003) examined whether the pathfinder programmes’ materials address offenders’ needs in different social and cultural contexts. They aimed to understand how to build active engagement among black and Asian offenders in
the UK. Durrance and Williams (2003) suggest that ‘holistic empowerment’ strategies should be developed because perpetrators’ social circumstances and ethnicity might explain their justifications for their behaviour (p. 217). Similarly, Powis and Walmsley (2002) also suggest implementing potential new strategies in an intervention programme for black and Asian offenders. Although both studies focused on black and Asian offenders, these findings could be implemented with Turkish perpetrators of domestic violence. Hester et al. (2006) identified the gaps in DVPPs by conducting interviews with 72 agencies including various domestic violence services and 51 survivors in the UK. They suggest that culturally-sensitive practitioners and approaches should be used specifically for young men and members of black and minority ethnic communities because these groups need to have specialist facilitators.

Only a small number of culturally-sensitive approaches has been developed in the UK although the Domestic Violence Intervention Project (DVIP) implements some culturally- and linguistically-competent programmes. For instance, Al-Aman is a project for Arabic speaking perpetrators in London that was established after many outreach efforts with religious leaders (Al-Aman 2012). These efforts recognised the culture of denial present among the Arabic speaking community on the issue of domestic violence. Many community members hardly acknowledge that domestic violence exists in their community because they see it as ‘marital problems’ or a private family issue (Al-Aman, 2012). The recent report by Al-Aman (2012) suggests that researchers and social policy makers should pay attention to providing funding for effective strategies, including cultural and linguistic services for black and minority ethnic communities in the UK (Al-Aman, 2012).
Traditional domestic violence intervention approaches focus on participants’ violent acts, gender role expectations and cognitive dynamics to reduce and end violence (Brekke, 1989; Eisikovits and Edleson, 1989; Williams, 1992). However, in USA-based studies, Williams (1992; 1994) suggests that ethnically-sensitive approaches need to be integrated with the traditional domestic violence intervention approaches. Perilla and Perez (2002) and Hernandez (2002) describe the core principles of the incorporation of a culturally-sensitive approach into traditional treatment in the USA. These principles are determined through the consideration of “male perpetrators’ language, traditions, customs, values and rituals” (in Hancock and Siu, 2009, p. 125). The dynamics of culture, race and ethnicity are often ignored or minimised in traditional domestic violence intervention programmes (Almeida and Dolan-Delvecchio, 1999). Similarly, Hancock and Siu (2009) state that Latino immigrant men in intervention programmes are likely to fail because these programmes may not consider their cultural values in the aspects of gender role transition and environmental stressors on immigrant families.

Hancock and Siu (2009) suggest that the Duluth model fails to consider minority participants’ environmental factors that might impact on their well-being because they might experience obstacles that are related to adjusting to a new culture and country, and lack extended family support (Hancock and Siu, 2009). However, the Power and Control Wheel is the key tool of the Duluth model and integrates the experience of different ethnic groups. For instance, the Power and Control Wheel addresses race and ethnicity by applying strategies including the language sensitive wheel and focusing on cultural and ethical dynamics related to abuse. Furthermore, the Power and Control Wheel encourages men to learn
alternative behaviours including “shared responsibility” and “responsible parenting” (Chavis and Hill, 2008, p. 136). Importantly, this tool considers black and minority ethnic perpetrators’ various tactics such as “using heterosexual privilege”, “spiritual/religious abuse” and “physical abuse” (Chavis and Hill, 2008, p. 137). While Hancock and Siu highlight the cultural and family stressors among Latino perpetrators, Williams (1994) elaborates on group dynamic issues and the difficulties of building trusting communication between African American group members and a leader. This slight difference in findings might stem from two different ethnicities’ unique cultural and traditional norms. The comments about racism by Carrillo and Tello (1998) seem to be applicable to any minority groups because they highlight that black and minority ethnic perpetrators’ experiences of oppression in large society influence their engagement during intervention efforts.

Williams and Becker (1994) have evaluated the willingness and sensitivity of using culturally-competent approaches in traditional perpetrator programmes and, through conducting surveys with perpetrator intervention programmes in the USA, identified the impact of cultural competence strategies. Many programmes appear to be willing to make contact with black and minority ethnic communities and to employ outside consultants who have particular expertise in working with black and minority ethnic groups. However, Williams and Becker (1994) found that perpetrator programmes have rarely applied “outreach services to minority groups” and “specific programs designed to encourage participation by the larger community as much as other efforts” (p. 291). Therefore, existing programmes are taking insufficient steps to engage black and minority ethnic groups in the USA. Williams and Becker (1994) focus on the implementation of culturally-
sensitive approaches in traditional intervention programmes by highlighting unique activities for black and minority ethnic participants. In doing so, they suggest that intervention programmes need to develop effective communication with the black and minority ethnic community to improve their awareness of the existing programmes.

Likewise, Gondolf (2004) has evaluated the conventional perpetrator counselling approaches’ usefulness for men’s cultural differences in a 4-year longitudinal study that focused on three distinct regions and selected four well-established programmes in the USA. Gondolf (2004) highlights that a culturally-sensitive curriculum may vary because it needs “concrete examples, vignettes, and directive questions” to increase black and minority ethnic men’s engagement. Gondolf states that black and minority ethnic perpetrators are likely to have “less education more resistance, and less counselling experience” (p. 891). Gondolf’s study seems to be more convincing in terms of participants’ engagement factors in comparison to the research of Williams and Becker (1994). Its strength lies in the fact that Gondolf conducted 4-monthly periodic interviews and various questionnaires with 618 men and men’s initial and new female partners during intervention programmes. The study by Williams and Becker (1994) is less persuasive as it did not focus on the involvement of participants but on the applications of culturally-sensitive approaches.

Williams (1994) describes the benefits of a culturally-sensitive approach among African Americans, stating that it offers a sense of involvement in discussions of central themes; increasing involvement; a level of trust; re-socialisation and behaviour change. Gondolf’s (2012) study confirms these benefits as the positive
relationship between a culturally-sensitive approach and interaction is consistent with the fact that homogeneous groups support a safe environment and supportive relationships between group members. Gondolf (2012) states the main goal of the culturally focused approach is to address participants’ racial and ethnic differences in black and minority ethnic communities. Gondolf points out that a majority ethnic group might not understand the social reality and experiences of black and minority ethnic perpetrators. For instance, heterogeneous groups might include cultural differences that fail to increase effective outcomes for African American men in traditional interventions (Gondolf, 2012). Although Williams (1994) and Gondolf (2012) investigate the benefits of homogeneous group-based interventions for black and minority ethnic perpetrators, this investigation seems to be insufficient to demonstrate the potential benefits of heterogeneous group-based interventions.

In general, culturally-sensitive approaches recognise black and minority ethnic perpetrators’ language barrier, racial and cultural backgrounds, socio-economic struggles, lack of social support, fewer counselling experiences and greater resistance to attending interventions. The similar findings on culturally-sensitive approaches in the literature review have stemmed from focusing on underrepresented groups of male perpetrators. Although culturally-sensitive practices are often based on individuals’ race, religion, customs and other cultural backgrounds, different settings – DVPPs, mental health agencies, private or charity based counselling or therapy services – apply their own strategies in working with black and minority ethnic perpetrators. In a mental health setting, culturally-sensitive approaches are linked to how perpetrators experience trauma and deal with their mental health struggles linked to their
violent acts. In this setting, socio-ecological factors might be considered to empower clients by focusing on more “individual, socio-environmental, and systemic levels” (Hopper, 2017). In the following section, I will also outline the culturally-sensitive approaches in the USA to black and minority ethnic perpetrators of domestic violence by focusing on how culturally-sensitive approaches may be linked to Turkish perpetrators’ engagement in intervention programmes.

Implementing culturally-sensitive practices

In the above section, I focused mainly on how intervention programmes attempt or are willing to increase culturally-sensitive techniques for black and minority ethnic perpetrators. Their attempts in implementing specific strategies appears to be limited. This might be an explanation for why many black and minority ethnic men drop out of traditional intervention programmes. I will describe culturally-sensitive strategies in order to gain an insight into how particular techniques might be linked to Turkish men’s engagement in interventions. For instance, Almeida and Hudak (2002) noted that perpetrators’ power and privilege in their communities first need to be changed in order to end their abusive acts toward their partners or family members.

In considering men’s privilege and power in the community, the cultural context model in the interventions focuses on promoting safety for family members by decreasing entitlements in relation to men’s power in the communities (Almeida and Hudak, 2002). This approach seems to increase survivors’ empowerment and rights as the cultural context model emphasises that men’s violent behaviour can be stopped by understanding “social institutions that sanction and reinforce
systems of power, privilege and oppression” (Almeida and Hudak, 2002, p. 25). Whilst the status and power that men hold in a community seem to contribute to their violent behaviour towards their families, the social problems of these families also need to be considered to understand the overall picture of domestic violence. Almeida and Hudak (2002) have put forward a compelling argument in this regard. They conclude that:

> the disjoining of domestic violence from other social problems such as corporate abuse of employees, racial profiling, youth violence and addiction maintains the family as a private and isolated system designed to care for its members without legitimate support of larger systems. (p. 26)

The techniques used to understand the systems of privilege and oppression in such settings might be beneficial to apply to black and minority ethnic perpetrators during the interventions (Almeida and Hudak, 2002). Almeida and Hudak (2002) argue that if perpetrators start to think about their experiences of privilege and oppression in their numerous interactions, they are able to examine their privilege and oppression in their intimate relationships, in particular their abusive behaviour toward their partners. Also, perpetrators might experience oppression or be subordinated to others based on their social status including gender, race, class and cultural background (Gottzén, 2013). Likewise, Donnelly et al. (2002) highlighted that the facilitator plays a significant role in helping men to understand the strong link between their experiences of oppression in work or other settings and their abusive acts toward their partners. The acceptance of privilege and oppression in different settings and constructions may allow Turkish men to start to think about their power and privilege status in their intimate relationships. This is a vital point in terms of men’s engagement in the intervention process because it shows their perceptions about privilege and oppression in a larger context.
In summary, obstacles to seeking help among Turkish survivors and getting perpetrators to take part in interventions have been considered in relation to patriarchy, honour/shame dynamics, gender roles, immigration status, cultural and ethnic background, and the lack of knowledge and awareness of cultural and racial issues by social service workers. These difficulties are likely to increase with the time that women stay in a violent home. This illustrates an urgent need to understand these complex factors for social services, policy-makers and other organisations to address these vulnerabilities among black and minority ethnic survivors. Social services and researchers should acknowledge the strong connections between gender, race, ethnicity, culture, socio-economic status and other identities because these intersections might shape women’s experiences of safety from domestic violence (Bernard and Gupta, 2008; Burman and Chantler, 2005; Richie, 2003; Yoshihama, 2000). The problems of seeking help among Turkish survivors are linked to perpetrators’ engagement in interventions in two ways. First, these problems are often connected to the tolerance of violence against women in communities and other institutional settings which have the effect of empowering perpetrators and not challenging them to be part of the solution. Second, when survivors are not able to find help, perpetrators are not held accountable in interventions.

Given the importance of applying culturally-sensitive approaches in DVPPs, this part turns to focus on the potential challenges in examining the factors of Turkish perpetrators’ engagement in traditional DVPPs in the UK. These challenges may include methodological concerns and undocumented violence in relation to immigrant social policies. It is not only the limited employment of culturally-competent programmes that prevents researchers from examining black and
minority ethnic perpetrators’ engagement but also the lack of methodological rigour in exploring their engagement in traditional interventions. Bowen et al. (2002) noted that the common model for intervention is pro-feminist in the UK but due to insufficient methodological rigour, we are unable to evaluate the effectiveness of this approach.

The insufficient number of culturally-sensitive strategies in DVPPs might hamper analysis about whether there is any difference in outcomes between the traditional treatment model and the culturally-sensitive model among black and minority ethnic perpetrators. In addition to this methodological limitation, the potential benefits of a culturally-sensitive approach are not considered. For instance, Heckert and Gondolf (2000) and Jouriles and O’leary (1988) highlight that self-reporting questionnaires for evaluating perpetrators’ success might be problematic because many perpetrators tend to underreport the extent of their violent behaviour. The methodological limitations might ignore how these participants address their problems relating to their immigration status in the UK. Guru (2006) highlights that choosing an appropriate methodology may impact on an examination of the intersections between governmental strategies and the outcomes of the interventions. If we examine how Turkish participants’ unique circumstances influence their success, this approach potentially clarifies the lack of culturally-sensitive strategies in interventions.

Undocumented violence in Turkish communities appears to be an important reason for the lack of evidence on key issues around Turkish men’s engagement in DVPPs. For instance, social policy might underestimate the incidence of undocumented domestic violence among Turkish survivors. As discussed in
previous sections, many women survivors may not report violence because of immigration legislation. In addition, the Immigrant and Refugee Power and Control Wheel considers black and minority ethnic women survivors’ cultural differences to be obstacles because many incidents of domestic violence might be undocumented among black and minority ethnic survivors (Domestic Abuse Project, 2002). Although this was a USA-based study, it could potentially be transferred to the UK context where it is helpful as it draws attention to how this undocumented violence affects perpetrators’ involvement in interventions.

The reasons for the lack of evidence about Turkish perpetrators’ engagement in the UK might stem from this undocumented violence since perpetrators often will not refer themselves to DVPPs when survivors do not report violence. As such, the literature fails to explore key issues regarding Turkish perpetrators’ perspectives on their engagement in interventions. This could be because of insufficient studies and poorly implemented cultural approaches (Gondolf, 2012). The literature review in this section illuminates the urgent need for the examination of Turkish men’s perspectives on their engagement in interventions. In clarifying potential issues that might be related to Turkish men’s engagement in interventions in the UK, I will start to present the historical and current developments of DVPPs in the UK in the following sections.

**Domestic violence perpetrator programmes**

Feminist movements appear to have contributed to developing DVPPs. The claim put forward by them is that abusive behaviour does not stem from men’s anger or psychological difficulties but from patriarchal dynamics and male domination over women (Dutton and Sonkin, 2000). In other words, feminist
activists argue that gender impacts on domestic violence. The pro-feminist approach claims that violent men are responsible for their abusive behaviour. These men need to recognise that they can decide to be non-violent towards their partners and children (Harne and Radford, 2008). This approach might be a bridge between perpetrators’ accountability and developing perpetrator intervention programmes.

Male perpetrators’ counselling groups and services were initially provided outside of the criminal justice sector in the UK. For instance, the Chiswick shelter was the first to provide services to perpetrators in 1976 (Bowen, 2011). Deschner (1984) described this men’s house as a group-based counselling process for separated men and couples but this service was closed after two years because of a lack of funding (in Bowen, 2011). In the mid-1980s, court-mandated men’s programmes for perpetrators of domestic violence partly improved when policies recognised that intervention efforts for perpetrators were a potential way to end incidences of domestic violence (Dobash et al., 2000; Hague and Malos, 1998; Mullender, 2002). In 1985, the Men’s Centre was the first group intervention programme that was established (Bowen, 2011). The Probation Service funded the first men’s group programmes in 1989 (Rees and Rivett, 2005). These programmes worked with the probation services (Phillips, Kelly and Westmarland, 2013) and the voluntary and community sector (Al-Aman, 2012).

CHANGE, established in September 1989, and the Lothian Domestic Violence Probation Project (LDVPP), in 1990, were developed in Scotland (Dobash et al., 1996). These programmes adopted a pro-feminist cognitive behavioural model
influenced by the Duluth model (Bowen, 2011). The Duluth model includes psycho-educational activities in incorporating the features of cognitive behavioural work for men who are arrested for domestic violence (Gondolf, 2007; Pence and Paymar, 1993). The pro-feminist cognitive behavioural model emphasises that violent behaviour reflects the patriarchal social context and applies re-education into the use of non-violent and controlling behaviours (Bates et al., 2017; Bowen, 2011). In the 1990s, the DVIP established Al-Aman, an Arabic language programme for Middle Eastern men (Debbonaire, 2015). Researchers suggest that the number of DVPPs needs to be increased to consistently protect survivors (Dobash et al., 2000; Mullender, 2002).

Current intervention programmes in the UK

The influence of the Duluth Men’s programme (Pence and Paymar, 1993), cognitive behavioural therapy, gestalt and motivational models (Jenkins, 1990) led to the implementation of DVPPs in the UK (Phillips, Kelly and Westmarland, 2013). These influences stem from the earlier work on perpetrators in the USA (Phillips, Kelly and Westmarland, 2013). They make a compelling case that a co-ordinated community response (CCR) system should engage effectively in DVPPs to increase the understanding of domestic violence.

The IDAP uses the Duluth model of intervention curriculum (Pence and Paymar, 1993) and “multi-agency intervention system” (Bowen, 2011, p. 117). The Duluth model curriculum highlights the role of culturally-reinforced attitudes of power and control over women. Furthermore, this model redefines men’s views of how women should be treated and relationships managed (Bullock et al., 2010). Although IDAP is based on the Duluth model, the theory manual adopts the
nested ecological model as its etiological framework for understanding the risks of domestic violence. The IDAP is defined as multi-modal and includes strategies like “motivational enhancement, cognitive behavioural therapy, rational emotive behaviour therapy, stress inoculation, relaxation training, skill training and relapse prevention” (Bowen, 2011, p. 118). This programme is developed based on nine themes, each one taught over a three-week period. It aims to improve perpetrators’ understanding of their controlling behaviour and to explore non-violent behaviours (Bullock et al., 2010). The IDAP is eligible for male perpetrators who are at medium to high risk of re-offending and are harming current or previous female partners (Community Rehabilitation Company, 2014). The main purpose of these programmes is to eliminate violent behaviour towards women and children because these behavioural patterns are all viewed as a conscious means of control by male perpetrators (Bowen, 2011).

The treatment of CDVP primarily employs the principles of a pro-feminist approach which argues that patriarchy is a primary reason for the violent behaviour. Further, the CDVP uses combined techniques including “cognitive behavioural therapy, rational emotive behavioural therapy, feminist based and solution focused therapies, cognitive therapy, and motivational interviewing, along with an appraisal of stages of change within a relapse-prevention framework” (Bowen, 2011, p. 119). The main differences between the CDVP and the HRP are that the prison-based programmes are typically delivered with more sessions per week than those in the community-based programmes (Bowen, 2011). Both the HRP and the CDVP programmes include six modules containing 24 sessions (Bullock et al., 2010). These two programmes are only for perpetrators over the age of 18 and are referred post-conviction following the
use of the Spousal Assault Risk Assessment tool (Home Affairs Sixth Report, 2008). A high-intensity HRP includes often-interrelated modules and takes around six months to complete.

The CDVP and HRP modules include managing thoughts, emotions and social skills as well as relapse prevention (Bullock et al., 2010). All these programmes consist of management risk including risk assessment, proactive abuser management, and stricter victim contact from women safety services (Bullock et al., 2010). CDVP and IDAP are the same in terms of their theoretical bases. However, CDVP is different from IDAP in relation to format. For instance, new participants can attend IDAP but CDVP has a closed format (Weatherstone, n.d.). However, these programmes have weaknesses in their programme manuals because the CDVP does not explain what ‘positive parenting’ refers to. The IDAP manual suggests that the programmes should apply strategies to promote parenting skills of perpetrators by addressing any harmful effects of domestic violence on children and increasing men’s appropriate fathering abilities.

The visibility of violent men is crucial in preventing and ending the incidence of domestic violence (Westmarland and Kelly, 2013). This idea is critical for this research because the main goal is to explore major issues of male perpetrators’ engagement during intervention programmes. The literature argues that this engagement needs to be investigated to ensure the safety of survivors (Blacklock, 2001; Burton et al., 1998; Lees and Lloyd, 1994; McConnell and Taylor, 2014; Sullivan, 2006; Westmarland et al., 2010; Westmarland and Kelly, 2013). Given the current intervention programmes in the UK, I will give an
overview of common circumstances that might be linked to perpetrators’ engagement during interventions.

**Major issues of perpetrators’ engagement in DVPPs**

This section investigates the major circumstances: minimisations of violence, being a father, types of referrals, group cohesion and the consequences of violent behaviour on perpetrators that affect engagement of perpetrators in DVPPs. The aim is to outline how the major issues might be connected to Turkish perpetrators’ engagement in intervention programmes in the UK. This has been achieved by reviewing the literature on the general circumstances of perpetrators’ engagement in interventions in order to understand how such influences may impact on Turkish perpetrators’ engagement in intervention programmes.

**Minimisations of violence**

Male perpetrators apply a number of strategies to their minimisations including not remembering what happened (Harne and Radford, 2008); claiming a lack of control (Stokoe, 2010); using their masculine identity to explain practices of violence (Wood, 2004); and blaming survivors (Blacklock, 2001; Wood, 2004). Moreover, several studies focus on victim-blaming as a risk factor for justification because the most reported minimisation of perpetrator seems to be to blaming their partners’ attitudes (Blacklock, 2001; Bowen, 2011; Wood, 2004). These findings show that minimisation is a cause of violent behaviour, and this minimisation may lead to challenges to any attempt to change violent behaviour processes (Murphy and Baxter, 1997; Scott and Wolfe, 2003). For example, perpetrators who exhibit high levels of denials and minimisation face difficulties
when they are in an intervention programme, and the literature argues that there is an empirical link between denial and treatment failure of offenders (Murphy and Baxter, 1997; Scott and Wolfe, 2003). Perpetrators’ violent behaviour or lack of engagement during interventions may stem from their justifications, including victim blaming, which could decrease the safety of survivors because of perpetrators’ lack of awareness about their violent behaviour (Kelly and Westmarland, 2015).

The Project Mirabal (2015) examined how perpetrators’ awareness of their abusive acts impact on their change behaviour. This project conducted interviews with men and women in contact with DVPPs over a 15-month period. The interviews took place within six weeks of men joining a programme (Time 1) and within six weeks of the end date (Time 2) regardless of whether they had completed the programme (Kelly and Westmarland, 2015). This period of study might not represent the long-term effects of change behaviour but the report does highlight that the DVPPs are effective in ensuring the safety of women and children. Within this project, one of the improvements in the perpetrators was in their recognition of the consequences of their violent acts. The Project Mirabal (2015) described what constituted awareness of self and others by the perpetrator as when the perpetrator had “made a felt apology, [was] aware of ripples out and disruptions of lives and [was] aware that it affects how others see and respond to him” (p. 26). The results showed that abusive men who successfully completed the intervention programme began to think about their violence and to recognise its consequences for themselves and for the women and their children (Dobash et al., 2000; Kelly and Westmarland, 2015). Whilst raising perpetrators’ awareness of the consequences of their violent behaviour
might reduce violent acts, researchers suggest key steps increase successful outcomes in DVPPs. For example, Carpenter (2013) and Harne and Radford (2008) confirmed that an effective risk assessment, a screening process, ongoing monitoring and perpetrator intervention programmes could reduce or stop perpetrators’ denials. Co-ordinators who are in intervention programmes have also applied strategies to get men to recognise the consequences of their violent behaviour and encourage them to take responsibility for their conduct during interventions (Lewis, 2004).

According to the above review, perpetrators’ minimisations and denial of their violent acts result in two main problems. The first result is a reduction in the safety of survivors, and the second, perpetrators’ lack of engagement during intervention programmes. Given this core finding that there is a relationship between men’s minimisations of their violent behaviour and engagement in interventions, it is possible to conclude that many Turkish perpetrators minimise their violent acts. The preceding sections highlighted the dynamics of honour and patriarchy in Turkish communities in relation to the tolerance of abusive behaviour. Within these main circumstances, this research will consider potential minimisations linked to patriarchal dynamics.

**Being a father**

In this section, I will investigate how perpetrators develop insights into the effects of their parenting skills on their children’s lives and how these insights impact perpetrators’ engagement in intervention programmes. The following sections present key issues on perpetrators’ parenting practices and how the fathering identity plays a significant role in perpetrators’ engagement during interventions.
These issues are likely to include perpetrators’ parenting attitudes, and their contact with children’s social services.

Several studies have reported that perpetrators’ poor parenting practices include a lack of calmness and coercive behaviour styles (Fox and Benson, 2004; Jaffe et al., 2008); and an authoritarian parenting approach (Arendell, 1992; Bancroft and Silverman, 2002; Kelly and Westmarland, 2015). The study by Cater and Forssell (2012) highlights that violent fathers are unwilling to involve children’s social services. Many violent fathers use their control and power over their partners and children during supervised visitations or custodial access (Alderson et al., 2013; Harrison, 2008; Hart, 1990; Hester et al., 1996; Humphreys and Thiara, 2003; Pagelow, 1993).

In an evaluation of the Fathering Support Programme in Turkey, Kocak (2004) examined fathers’ behavioural change process by conducting a pre- and post-inventory, and in-depth interviews with fathers who had completed the programme and participants’ wives in the early 2000s (in Mcallister and Burgess, 2012). Kocak (2004) found that when fathers completed a programme, they started to spend more time with their children and applied less authoritarian and more caring practices. The fathers also stated that they developed positive communication skills and a respectful manner towards their partners. In order to prevent patriarchal dynamics and sexism in family settings, this programme strives to improve fathers’ engagement in considering the needs of not only their sons but also their daughters. Further, the programme encourages fathers to share their feelings with their family members. Although the Fathering Support
Programme does not focus on violent fathers, it has illustrated how Turkish fathers might change for the better after completing a programme.

The recent Project Mirabal demonstrates that there is a strong relationship between improving parenting skills and attending perpetrator programmes in the UK. Perpetrators often underestimated the consequences of violence on their children, specifically the impact on their younger aged children. On the other hand, DVPPs aim to enhance participants’ understanding of how violent environments are harmful to their children’s development and this does not differ based on the ages of the children (Kelly and Westmarland, 2015). The study showed perpetrators’ lack of involvement with child protection processes, and this might influence their understanding of the consequences of violence on children. This could be because women were more likely to be involved with children’s social services and childcare than men. Fathers’ insufficient involvement stops them from knowing children’s developmental circumstances including their school problems and other behavioural issues. Likewise, women are more likely to report their worries about their children’s safety issues but men are not willing to take responsibility for their children’s needs in the past (Kelly and Westmarland, 2015). However, few men acknowledged that they had been controlling their children, specifically through unrealistic expectations and authoritarian parenting. This limited awareness of their controlling behaviour over their children potentially prevents them from changing their unacceptable behaviour.

Kelly and Westmarland (2015) suggest that DVPPs are useful in improving participants’ understanding of how children are affected by witnessing violence,
but this improvement is limited. A similar study in Sweden by Cater and Forssell (2012) investigated the perspectives of children on the caring behaviour of their fathers as perpetrators of domestic violence. These children described their fathers’ caring attitudes as indicating a lack of responsibility for their needs; being less caring than mothers, and a “good-enough” fathering within fathers’ non-violent behaviour. These results are inconclusive because they conducted qualitative interviews with only 10 children and did not include the mothers’ perspectives on their partners’ parenting practices. The study by Kelly and Westmarland (2015) seems to be more conclusive as they conducted interviews with both perpetrators and women survivors. They suggest that DVPPs are useful in improving participants’ understandings of how children are affected by witnessing violence but this improvement was limited.

Parenting identity plays a vital role in men’s engagement in intervention programmes (Alderson et al., 2013; Stanley et al., 2012) and their ability to change their violent behaviour (Bent-Goodley et al., 2007; Dobash et al., 2000; Holtrop et al., 2015). Stanley et al. (2012) and Alderson et al. (2013) suggest that the perpetrators’ contact with children’s social services and recognition of their fathering role is likely to increase their motivation in intervention programmes and encourage them to change their abusive behaviour. The next section considers how perpetrators’ contact with children’s social services influence their engagement in intervention processes.

Fathers’ contact with children’s social services

Perpetrators’ contact with their children is a complicated issue because of perpetrators’ potential ongoing abusive tactics of using contact with their children
to target their partner/ex-partner. Furthermore, many researchers found that fathers’ contact with their children is not always successful in protecting children and women survivors from perpetrators’ ongoing abuse or the threat (Buckley et al., 2007; Eriksson and Hester, 2001; Harne, 2003; Parker et al., 2012; Thiara and Gill, 2012). The UK study by Kelly et al. (2014) examines criminal justice and social services responses to women survivors who experience domestic violence post-separation by conducting a three year longitudinal study with 100 women and their children. They found that over half of women survivors reported that their partners displayed abusive attitudes via their children during child contact. Within this problem, Kelly et al. (2014) suggest training on perpetrators’ potential coercive control behaviour during pre and post separation for professionals and police. Despite these potential harmful outcomes, the literature states that child contact is likely to encourage men to change their abusive behaviour. This section attempts to elaborate how perpetrators’ contact with children’s social services might increase their engagement, and how social services might prevent potentially harmful events during these visitations.

Stanley et al. (2012) examined how violent men’s contact with children’s social services and being a father impacted on their willingness to find alternative behaviour during interventions. They suggest that most perpetrators’ contact with children leads to their engagement in interventions. Stanley et al. (2012) compared 15 men who completed five or more sessions in the first 6 months in the programmes and 17 men who dropped out of the sessions within seven months at the beginning of the programmes. They found that:

11 of the 15 men completing more than five sessions were involved with children’s social services, compared to three of the six who left the programme having completed fewer
Eight men involved with children’s social services reported that access related issues to their children and encouragement from the services were key incentives (Stanley et al., 2012).

When violent men completed the intervention programmes, they started to recognise the consequences of violent behaviour on their family members (Dobash et al., 2000). Similarly, Alderson et al. (2013) found that programmes’ ability to increase participants’ awareness of child-centred fathering and develop parenting skills enhance their motivation to change. Further, from their interviews with perpetrators Dobash et al. (2000) suggest that community-based programmes and children’s social services help perpetrators to achieve more success. Daly and Pelowski (2000) suggested that one of the leading reasons for dropout stemmed from being unmarried and childless. Whilst the findings of Daly and Pelowski (2000) appear to differ considerably from those of Alderson et al. (2013) Stanley et al. (2012) and Dobash et al. (2000), this could be because only Daly and Pelowski examined the characteristics of perpetrators’ dropout from intervention programmes. Daly and Pelowski did not note the role that accessing children’s social services had on perpetrators’ engagement. Therefore, supervised visitations may encourage perpetrators to address their lack of parenting skills and engage in interventions.

Hester et al. (2017) evaluated the Drive intervention by applying quantitative and qualitative assessments in order to understand the perpetrators’ change behaviour in interventions. The Drive Project employs co-ordinated multi-agency responses in order to reduce and stop perpetrators’ violent behaviour towards
their partners and children in Essex, South Wales and West Sussex, UK (Hester et al., 2017). According to the pilot study with 198 perpetrators’ cases in the year 1 report, Hester et al. (2017) found that the involvement of children’s social services and the idea of being a good father are important factors for perpetrators’ involvement in interventions. The interviews with case managers demonstrate that the notion of being a ‘good parent’ is motivation to find alternative behaviour during behavioural change process (Hester et al., 2017, p. 39). They also noted that many more men are willing to engage in intervention processes if they are in contact with their children. However, fathers’ contact with their children does not always lead to a positive behavioural change process.

Kelly and Westmarland (2015) interviewed perpetrators to determine the main reasons behind their motivations for attending a DVPP. They stated that contact with their children led to an increase in their motivation. Featherstone and Fraser (2012) examined the engagement issues of perpetrators as fathers in interventions and found how the potential approaches developed fathering skills in a DVPP. Featherstone and Fraser (2012) conducted online surveys and telephone interviews with academics, policy experts and domestic violence practitioners in mostly the UK and other countries and found that perpetrators’ initial engagement is related to ‘being a better father’. However, they discussed the limitations of providing appropriate services in developing their fathering skills as well as non-violent behaviour toward their partner.

There are different perspectives between the UK and the USA studies in terms of teaching fathering skills in an intervention programme. In the UK-based programme, practitioners argued that there were disadvantages in delivering
programmes for just fathers as perpetrators. These disadvantages included perpetrators who were not fathers being alienated and fathering programmes becoming an inappropriate way to reduce and end violence against their partners. On the other hand, these practitioners have substantial respect for the fathering programme because its main goal is to enhance positive father-child interactions. Both Kelly and Westmarland (2015) and Featherstone and Fraser (2012) stated that being a perpetrator as a father influences their engagement in a DVPP. Regarding programme delivery issues, the findings by Featherstone and Fraser (2012) seem to be more conclusive. This could be because Featherstone and Fraser gathered data from programme practitioners and policy-makers not only in the UK but also the USA, Canada and four other countries. Regarding various unique perspectives by perpetrators and survivors, the study by Kelly and Westmarland (2015) is more powerful in showing how family members describe perpetrators’ fathering skills.

The evidence shows that perpetrators might be willing to improve their parenting skills in intervention programmes because of their contact with children’s social services (Alderson et al., 2013; Stanley et al., 2012). However, there is inconclusive evidence on how violent men’s values and perspectives relate to an increase in their children’s wellbeing and their engagement issues in the intervention processes. This could be related to insufficient practice and knowledge on how intervention programmes respond to intervene in fathers’ violent behaviour (Bowen, 2011). For instance, Pence and Paymar (1993) highlight that when the intervention programme uses the Power and Control wheel that includes a “using children” segment, this applies “threatening to take the children away, using contact arrangements” to achieve men’s positive
parenting practices (in Bowen 2011, p. 133). So far, however, this implementation in the intervention programme has been insufficient to develop responsible parenting practices (Bowen, 2011). Despite the limited evaluation, empathy training in the DVPPs could be useful in increasing fathering skills. For instance, when perpetrators put themselves in the position of their children during an intervention programme, many men started to understand the impact of domestic violence on them (Kelly and Westmarland, 2015). Project Mirabal suggested that the CAFCASS needs to encourage men to complete a DVPP before contact with their children. Otherwise, men might not learn how to improve their parenting skills.

The capacity of children’s social services to work with perpetrators as fathers is limited in many countries. Hester et al. (2007) demonstrated that social workers focus on women and children and tend to ignore the perpetrators of domestic violence on the basis that social workers expect women to play a role in preventing domestic violence in the UK. Many researchers argue that social workers often concentrate on working with mothers and children and ignoring fathers' lack of involvement in services (Featherstone, 2004; Scourfield, 2003). Among social workers and professionals in social services, there is limited knowledge of perpetrators in responding to domestic violence (Devaney, 2009; Munro, 2011). A USA-based study (Brown et al., 2009) and another in Canada (Cameron et al., 2014) illustrated that children’s social services and social welfare systems customarily ignore fathers’ involvement and parenting roles. Cameron et al. (2014) suggest that social workers should break their biases and fear about contacting perpetrators because this contact potentially encourages men to get involved in intervention programmes. In addition, Scourfield et al.
(2016) suggest that the improving the skills of professionals around working with fathers involved in child protection processes might assist men to develop positive parenting practices.

This section has focused on perpetrators’ parenting practices in analysing their interactions with their children in their home environment or children’s social services. These interactions might allow men to recognise their lack of positive parenting skills, which can encourage them to adopt appropriate and positive parenting practices. This recognition may lead to improve their engagement in an intervention programme. Although each perpetrator as a father might not develop this cycle of recognition and engagement, many perpetrators describe this cycle of engagement. Exploring Turkish perpetrators’ engagement in DVPPs in the aftermath of domestic violence raises important questions about the understanding of their positive parenting abilities for children’s safety and developmental needs. An important message emerging from this literature review is that when perpetrators as fathers understand the consequences of their violent behaviour on their children, they appear to engage in a programme effectively. Whilst the referral of children’s social services plays a significant role in perpetrators’ engagement, other sources of referral might affect engagement in the intervention programmes.

Types of referrals

The type of referral might have an influence on perpetrators’ engagement in intervention programmes and demonstrates the relationship between participants’ perceptions of the type of referral and their engagement. It is suggested that court-mandated referrals are more successful than self-referrals
regarding participants’ completion rates in intervention programmes (Dobash et al., 2000; Lewis, 2004). However, the literature illustrates the inconsistencies relating to the importance of the source of referrals on perpetrators’ engagement.

Jaffe et al. (1986) made the compelling comment that court-mandated attendance might be a significant motivating factor at the beginning of the programme but the main goal is to increase the internal motivation in the process of the programme. Self-referred perpetrators are more motivated to attend programmes because behavioural change processes need to be without coercion (Scourfield and Dobash, 1999). Burton et al. (1998) found that group interactions between self-referred and court-mandated men may impact positively on court-mandated participants’ engagement. They found that the combination of self-referral and court-mandated men is most likely to be the most productive approach for participants in a group-based intervention programme because of the positive interactions among group members. The following section provides detailed evidence on the impact of effective group cohesion and peer support on participants’ engagement.

**Group cohesion and peer support**

It is frequently reported that group cohesion and peer support appears to play a significant role in providing effective group-based perpetrator programmes (Chang and Saunders, 2002; Lindsay et al., 2006; Rosenberg, 2003; Serran and Marshall, 2010). When participants gain new information and positive skills in a group-based intervention programme, their engagement is more likely to increase (Bullock et al., 2010; Chovanec, 2012; Gray et al., 2014; Lindsay et al., 2006; Schrock and Padavic, 2007).
A growing body of literature has investigated how group cohesion, supportive relationships and interactions among group members might impact on participants’ engagement during intervention programmes. The recent report of Project Mirabal describes the characteristics of perpetrators’ success in DVPPs. The interviews with perpetrators show that group work was more comfortable than a one-to-one session. Furthermore, they highlighted that a group-based intervention is beneficial in improving the behavioural change process (Kelly and Westmarland, 2015). Lindsay et al. (2006) describe cohesion to mean getting along with group members and building good relationships with them. Chang and Saunders (2002) suggest that maintaining clear guidelines about group goals can develop group cohesion and accountability. Group cohesion also offers a safe place for participants to express their feelings. This might lead to a higher completion rate among participants (Chang and Saunders, 2002).

Kelly and Westmarland (2015) highlight that interactions among peers encourage perpetrators to recognise other group members’ descriptions of being men and increase their engagement. This process might be challenging because they might feel vulnerable. However, they recognised that they needed to challenge themselves to share their perspectives and experiences in a group to achieve a successful outcome (Kelly and Westmarland, 2015). Perpetrators described this process as repetitive but they believed that it was necessary for behavioural change. If the work of Kelly and Westmarland (2015) is used to analyse black and minority ethnic participants’ perspectives, this could establish perpetrators’ unique vulnerabilities and links to their engagement.
Moreover, staff attitudes, building a trusting relationship with participants and a programme's delivery style might influence engagement of participants in group-based programmes (Pfitzner et al., 2015). For instance, the studies on parenting programmes by Carbone et al. (2003) describe core characteristics of engagement in group work as “empathetic and non-judgemental attitudes” (in Pfitzner et al., 2015, p. 6). This characteristic may contribute to achieving an effective group-based intervention. The importance of providing a non-judgemental therapeutic environment has also been described within one-to-one interventions. For instance, case managers in the Drive intervention reported that they built rapport and trust as well as challenged men to stop violent and abusive behaviour (Hester et al., 2017). In order to increase men’s engagement, Hester et al. (2017) identified building rapport and trust as an important practice in working with perpetrators of domestic violence.

In summary, this section emphasises that major issues interact in complex ways to bring perpetrators to intervention programmes. These complex ways appear to be linked to each individual’s engagement issues including their unique positions and needs. Although these issues are significant for engagement of perpetrators, there are still many questions that need to be answered to determine how these perspectives and experiences shape their engagement during intervention processes. A significant gap in our understanding of intervention programmes concerns the ways in which Turkish perpetrators engage in intervention processes.
Consequences of violent behaviour on perpetrators

The previous section highlighted that group related experiences including group cohesion, peer support and providing non-judgmental and trustful environments are factors that influence perpetrators’ engagement during intervention processes. This section investigates the available literature on the consequences of violent behaviour that might increase perpetrators’ engagement in intervention programmes. Hence, the consequences of perpetrators’ violent behaviour in their lives might encourage them to get involved in intervention programmes. Many researchers highlight the fact that DVPPs only have a small impact on the reduction of recidivism (Babcock et al., 2004; Sartin et al., 2006; Smedslund et al., 2007). This may stem from a lack of attention on the perspectives and experience of perpetrators’ engagement, and many interventions are more likely to investigate participants’ deficits or risk factors (Langlands et al., 2009). As such, this section focuses on perpetrators’ thoughts, beliefs and values in terms of the consequences of violent behaviour in their lives and the association between these consequences and their engagement during intervention programmes.

The USA-based study by Walker et al. (2010) examined perpetrators’ perceived consequences of abusive behaviour in their lives to indicate whether this influenced their motivation. Walker et al. (2010) suggest that information on the costs of domestic violence on perpetrators may be valuable for developing interventions that encourage perpetrators to change their abusive behaviours. Walker et al. (2010) describe the consequences of domestic violence as being associated with perpetration such as feeling awful about their abusive acts, losing concentration at work, worrying about how violence affects their children
and concern about their partner leaving. Yet, these findings are tenuous in illustrating how perpetrators experience these feelings. Bancroft (2003) states men’s main motivation for seeking counselling was the hope of saving their relationships and feeling guilt or discomfort about their abusive behaviour. However, Bancroft (2003) noted that ambiguity exists over perpetrators’ beliefs about the justifications and feelings of remorse for their abusive acts. Whereas Walker et al. (2010) make a compelling argument that the consequences of violent behaviour are more likely to motivate men to seek help or treatment, the literature is limited to explaining how violent men’s experience encourages them to become involved in intervention processes. Further, Walker et al's (2010) conducted questionnaires for non-treatment-seeking perpetrators of domestic violence but these did not indicate clearly whether these consequences were incentives for perpetrators in programmes or for those out of the programmes to engage in intervention processes.

Similarly, in the UK, Kelly and Westmarland (2015) also reported that few perpetrators perceive the consequences of domestic violence on their arrest. However, they noted that DVPPs play a significant role in increasing men’s awareness of such consequences and responsibility for them. When perpetrators’ feelings of responsibility for their abusive behaviour increases, this responsibility may positively influence their engagement in a programme (Kelly and Westmarland, 2015). Perpetrators’ feelings of responsibility are under-researched because it could be that methodological questions exist in exploring how perpetrators might experience any of the consequences of their violent behaviour.
Whilst perpetrators’ perceptions of the consequences of domestic violence on their lives may positively influence their behavioural change in the USA and UK context, these perceptions appear to be different in Turkey. For instance, perpetrators of honour-based violence in Turkish prisons stated that sending men to prison supports women and “victimises men” (Yuksel-Kaptanoglu, 2015, p. 268). This perception highlights how Turkish perpetrators have strong feelings and social acceptance about their right to be abusive including killing their female partners (Yuksel-Kaptanoglu, 2015). The perceptions of community members and survivors on the potential motivations for perpetrators’ changed behaviour might play a significant role in understanding the ways in which men engage in DVPPs in Turkish communities. For instance, Jansen et al. (2009) applied qualitative and quantitative methods to examine the prevalence and key issues of domestic violence in 12 cities within 5 regions in Turkey. One of the main focuses in this project was to examine the perceptions about the possibilities of perpetrators changing their violent behaviour. Many women survivors believe that perpetrators lack the ability to change, especially if the men are older (Jansen et al., 2009). The main reasons for this are the men’s experiences of generational family violence; criminal behaviour and patriarchal issues in Turkish communities. Although they highlighted key issues that might impede men from stopping their abusive acts, they stated that if the punishment and consequences of their violent behaviour were serious for men’s lives, they could change. Participants postulated that psychological support and treatments could be helpful for their behavioural change processes (Jansen et al., 2009).
Summary

This chapter has tried to address four major concerns. The first concern is that the prevalence and the consequences of domestic violence need to be well documented without survivors experiencing any fear or methodological limitations. Second, many social services and policy makers tend to underestimate the social circumstances of Turkish family members in addressing domestic violence. Third, the experiences of perpetrators’ engagement should be investigated in order to inform effective approaches in DVPPs and positive outcomes to ensure the complete safety of all family members. Fourth, I have discussed socio-ecological factors including personal, interpersonal, community and societal level influences on perpetrators’ engagement in DVPPs.

The literature consistently cites major themes such as perpetrators’ denial of the consequences of their violent behaviour, their fathering role and group dynamics as influences on their engagement in DVPPs. It is not discussed how these themes and other factors contribute to engagement among Turkish perpetrators. Importantly, the intersections among gender, race, class and domestic violence should be examined among Turkish perpetrators as Cole (2009) stated that these dynamics often shape behaviour patterns of individuals. In the following paragraphs, I will briefly describe potential issues of engagement of Turkish perpetrators in interventions and how they guide the overarching research question and conceptual framework.

The literature review on key issues of Turkish perpetrators’ engagement in their intervention efforts has illustrated potential intersections of race, cultural expectations, gendered roles and masculinity (Baier and Pfeiffer, 2009; Bozkurt
et al., 2015; Charsley and Liversage, 2015; Scheibelhofe, 2010; Tekkas, 2015). For instance, the studies in Germany highlighted that racialisation and immigration status are influenced by socio-economic status and gender dynamics in the context of domestic violence among Turkish groups (İlkkaracan, 1996; Rommelspacher, 2007; Schröttle and Ansorge, 2009). Many Turkish women survivors reported that they suffered in a violent relationship and highlighted a number of complexities around the dimensions of ethnicity, race, culture, religion, gender roles (Korteweg and Yurdakul, 2009) and class (Hellferich and Kavemann, 2010). Also, masculine identity and social class may influence men’s gender role and attitudes (Baier and Pfeiffer, 2009; Scheibelhofe, 2010; Tekkas, 2015), and potentially impact on their engagement in domestic violence intervention programmes. In considering these major findings, intersectionality theory would help to better theorise various concepts and how they influence engagement in domestic violence intervention processes (Sokoloff and Dupont, 2005). The main reason for applying the feminist framework stems from the unique characteristics of Turkish perpetrators of domestic violence based on research studies in Turkey. These include honour and shame dynamics; patriarchal norms; masculine identity and hegemonic masculinity (Doğan, 2014c; Yuksel-Kaptanoglu, 2015).

Whilst this chapter has outlined the factors surrounding perpetrators’ engagement in DVPPs, the literature needs to be extended to explore the ways in which Turkish perpetrators engage in DVPPs and any intervention efforts in the UK. The lack of conclusive evidence of the effectiveness of Turkish perpetrators’ engagement and their unique needs in DVPPs might be barriers to understanding the importance of implementing culturally and linguistically-
sensitive strategies in intervention programmes. The salient findings around Turkish perpetrators and survivors of domestic violence include social and cultural structures; gendered roles; patriarchal dynamics and insufficient intervention approaches in Turkey (Jansen et al., 2009; Yuksel-Kaptanoglu, 2015). In studies on Turkish perpetrators in European countries, the literature often discusses patriarchal issues, masculinity, the honour and shame dynamics, forced and arranged marriages (Korteweg and Yurdakul, 2009; Rostock and Berghahn, 2008).

The type of key findings in the literature review indicates that the studies on perpetrators' engagement in interventions mainly conducted qualitative research. In addition, perpetrators of domestic violence in interventions were a hard to reach population. This often resulted in a small number of participants in each study. The studies on black and minority ethnic perpetrators' involvement in interventions found that it was racial, ethnic and cultural backgrounds that mostly impacted on men’s engagement in interventions (Carrillo and Tello, 1998; Hancock and Siu, 2009; Williams and Becker, 1994). However, some studies (e.g. Burnette et al., 2015; Daly and Pelowski, 2000; Kelly and Westmarland, 2015; Saunders and Parker, 1989) did not use race or ethnicity as a category in their analysis of perpetrators’ behavioural change process. The literature needs to be extended to explore how Turkish perpetrators engage in intervention efforts in the UK. It is worth illustrating how the research questions guide the theoretical framework.

This existing evidence helps to frame the overarching research question in this thesis. This question is, how do Turkish perpetrators describe their perceptions
and experiences of their pre-engagement and the process of engagement in UK domestic violence interventions? This research attempts to understand the unique perspectives and experiences of Turkish men’s engagement in interventions and to examine how they describe the complexity of engagement to end their violent behaviour in intervention processes. In order to investigate this overarching research question, Chapter Three starts with a discussion on the appropriate theoretical framework by highlighting potential benefits of intersectionality and feminist research perspectives. I present my conceptual framework in diagrammatic form by describing the major concepts and relationships in Appendix 1.
Chapter Three: Methodology

Introduction

The purpose of this research is to examine the perspectives of Turkish perpetrators on their engagement and the professionals’ experiences and views on Turkish perpetrators’ involvement during the domestic violence intervention process. Three main research questions will be used to investigate this purpose. First, how do Turkish perpetrators describe their experiences and perceptions of their pre-engagement and the process of engagement in domestic violence intervention programmes in the UK? Second, how do Turkish perpetrators describe the connections between their lived experiences and commitment levels in the intervention efforts? Third, what are the perspectives of professionals on Turkish men’s engagement in interventions? These questions focus on the experiences of engagement in the processes of the intervention programmes. They are based on the premise that perpetrators’ perspectives influence their participation, engagement, and completion rate of programmes.

Such a contribution might address Turkish participants’ recidivism, rates of attrition and dropout in interventions. The value of responding to these research questions is not only to understand perpetrators’ viewpoints on their engagement during interventions but also to gain insight into which approaches might increase Turkish perpetrators’ engagement in interventions. Thus, if programme providers of intervention services apply appropriate strategies to address perpetrators’ unique needs, these improvements might enhance their engagement. In doing so, these determinations could help promote positive behaviour among perpetrators and the safety of survivors.
This chapter starts with an overview of the theoretical framework that provides philosophical assumptions and guides the methodological selection and method. Then, the chapter discusses the theoretical basis and strengths of choosing the qualitative research approach and the reasons for choosing feminist research approaches and thematic data analysis. In presenting the overall research approach, I will move on to explain the research design including the research sample; the recruitment strategies and data collection method. Following on from this, the chapter describes methods for data analysis and synthesis; ethical considerations; questions of trust and the limitations of the study.

**Theoretical framework**

This section seeks to document the theoretical framework for this research by examining major theories within feminism. I have built a theoretical framework in order to have a better understanding of research phenomenon (Baker, Wuest and Noerager, 1992); to provide the rationale of the study; to enhance my theoretical sensitivity (Thornberg and Thornberg, 2012) and to make a contribution in the field with new knowledge (McCallin, 2003). As such, for the purpose of this research, I will focus on two theoretical forms that are the basis for a coherent conceptual framework for thinking about men’s constructions of engagement in intervention processes. These theoretical forms are intersectionality theory and feminist-informed gender perspectives which will be described in greater detail in the following paragraphs.

An intersectional approach postulates that individuals’ social locations, oppressions and power are likely to be linked to their race, class, gender and social hierarchy (Bograd, 2006). Whilst the thesis acknowledges the complexities
around Turkish perpetrators’ engagement in interventions in the UK, intersectionality examines the process through which several forms of social marginalization and cultural backgrounds may shape each other, and how domestic violence perpetrator interventions that take into account these intersecting issues can be generated. Also, intersectionality helps to examine how professionals’ race, gender, class, religion and other social structures impact on men’s engagement in interventions in this chapter. Even though there are variables among interventions that impact on the relationship between perpetrator and programme providers and agencies, this chapter concentrates on how professionals engage with Turkish perpetrators by considering their social structures and cultural and religious backgrounds.

Whilst feminist perspectives are all informed by an attention to patriarchal gender roles, masculinity, power and control behaviour in violent men’s intimate relationship, intersectionality suggests various intertwined dimensions of power and oppression on a larger community level. In the UK, many researchers have paid attention to intersectional theory in cases of gender-based violence within black and minority communities (Bernard, 2001; Burman and Chantler, 2007; Gill, 2004). Also, Sokoloff and Dupont (2005) highlight that the investigation of the intersections of social structural issues, race, class and gender indicates the ways in which domestic violence occurs within patriarchal and masculine dynamics in particular communities.

Intersectionality plays a significant role in analysing the interactive relationship between perpetrators’ social categories and power, gender dynamics and violent behaviour in combination. This approach highlights the ways in which individuals’
social categories might influence their engagement in interventions (Cole, 2009). One of the potential benefits of the intersectionality approach is the way it can help to illustrate the importance of race and gender as intertwining cultural constructions. These constructions are likely to shape the lived experiences of Turkish perpetrators of domestic violence. In my view, the term intersectionality refers to a conceptual tool that identifies how race, gender, class and other social structures intersect with each other in the systems of power and oppression within society. Therefore, this intersection has helped me to recognise how social structures and power shape the men’s engagement in interventions.

A main goal of this thesis is to conduct an investigation of the multi-layered interactions between Turkish perpetrators, programme approaches and programme providers in the aftermath of men’s violent behaviour towards their partners by focusing on their engagement in interventions. Another aim of this research is to examine invisible assumptions, attitudes and cultural norms to develop a deeper understanding of perpetrators’ engagement in intervention processes. In order to achieve these goals, the thesis develops a conceptual framework based around paradigms of intersectionality and is guided by the research questions. With regard to the engagement of Turkish perpetrators in the context of domestic violence interventions, intersectionality seems to be a promising theoretical framework. In the section below, I will discuss the strengths of feminist-informed gender theory for the methodology.

Feminist theoretical perspectives appear to be about women’s experiences yet feminist research should not be limited to these experiences (Reinharz, 1992).
Feminist perspectives set out a framework for understanding how individuals interact with each other and shape their meanings of events and lead behaviour. Feminist theorists argue that meanings and actions are socially constructed, and that gender plays a significant role in understanding social relations and interactions (Catlett, Toews and Walilko, 2010). Feminist theory emphasises that gender role shapes behaviour and reproduces social structure (Ferree, 1990; Creswell, 2012). Zinn (1990) and Ferree (1990) noted that feminist framework conceptualizes gender in intimate relationships in the context of a patriarchal social structure. For instance, gender role stress is likely to arise when men do not follow societal gender role expectations for their masculinity as this situation poses a threat to their male competence (Catlett, Toews and Walilko, 2010). Importantly, feminist based gender theory is key in analysing the relationship between individual practices and social structure. Under this perspective, masculine gender role will be discussed to understand how they construct and make meaning of their engagement in the intervention process. I present the theoretical framework by describing the potential concepts of participants’ meanings on their engagement in Appendix 2. The connections between power and resistance could be critical in focusing on perpetrators’ key characteristics in interventions (Ramazanoglu and Holland, 2002).

Thus, in order to have a deeper understanding of gendered power hierarchies and other social structures, including race, socio-economic dynamics and sexual orientation, intersectionality provides the conceptual tools. In examining the research questions, it is important to situate their interpretations within the larger social context. As a result, an interpretive framework will examine men’s
experiences and meanings of engagement surrounding masculinity and other social structures.

This research aims to apply a qualitative methodology that focuses on the unique perspectives of Turkish men and programme providers instead of more tangible outcomes in order to see how their perspectives affect their engagement during intervention processes. The study hopes to contribute to the domestic violence field by indicating how perpetrators’ key perspectives influence their engagement in interventions. To make this contribution, this research needs to gather data from qualitative based information. The following gives an overview of why qualitative methodology is an appropriate approach for this study.

Rationale for qualitative research design

Having described the theoretical framework underpinning intersectionality and feminist-informed gender theory, this section outlines the strengths of the qualitative research approach. Within the framework of qualitative methodology, feminist research and thematic analysis are the most suitable methodological approaches to examine the research goal. Feminist research principles will help this study to analyse participants’ constructed views within their social and cultural context (Hesse-Bibber and Piatelli, 2012). The following gives further information about why a qualitative methodology is useful in studying participants’ views related to the complexities of their social and cultural experiences. The aim of qualitative research is to investigate individuals’ interactions and circumstances by allowing the research to enter the worlds of others and to achieve a holistic understanding of the phenomena (Denzin and Lincoln, 2000; Dickson-Swift and James, 2009; Westmarland, 2001).
The main purpose of applying qualitative methodology is to gain subjective perspectives of perpetrators and programme providers and how they make sense of these perspectives. These subjective perspectives are often analysed in a relational context within different social structures and interactions. These interactions also include the relationship between the researcher and the participants as these relationships influence the research process. This research seeks to examine subjective understandings and interpretations, and in-depth information about complexities and processes of experiences among Turkish perpetrators and programme providers. The qualitative approach enables the study to collect data because it focuses on participants’ lived experiences (Marshall and Rossman, 2014). This type of information needs to be understood by qualitative enquiry, such as by focusing on their meanings, thoughts, feelings and beliefs of actions. A qualitative methodology is an appropriate way to explore the research goal as it provides participants’ with unique meanings and perspectives of their experiences in their own words (Bryman, 2012; Liamputtong, 2007; Liamputtong, 2009; Ormston et al., 2013; Padgett, 2008; Silverman, 1993).

Using a qualitative methodology is a beneficial way for vulnerable participants to share private and sensitive experiences (Lupton, 1998). Qualitative research methods are much more suited to examining how Turkish men’s engagement is shaped by unique events, actions and meanings in the process of intervention (Hesse-Biber and Leavy, 2005; Silverman, 1993). Similarly, a qualitative approach plays a significant role in investigating Turkish perpetrators’ social process, including their racial, cultural and ethical dynamics in their social interactions (Morris, 2007). For instance, a number of researchers found that a
qualitative methodology is appropriate for investigating the socio-ecological issues of abusive men’s engagement in intervention programmes due to it being suitable for gathering their opinions on engagement (Levenson and Macgowan, 2004; Levin, 2005; Roy et al., 2013).

It has been emphasised that qualitative methodologies are more likely to contribute to an understanding of the therapeutic process in intervention programmes (Bowen, 2011; Edleson and Tolman, 2011). Another reason for choosing a qualitative methodology is that perpetrators of domestic violence might be perceived as marginalised people because marginalised populations often experience struggles related to their cultural and racial backgrounds. A qualitative approach allows the participants to tell their stories in their social and cultural context in order to achieve their subjective views and experiences (Liamputtong, 2010).

The research therefore considers their individual, family and community level issues around stigmatizations (Liamputtong, 2007). Sheehan et al. (2012) argue convincingly that the main challenge of collecting data on perpetrators’ behavioural change processes is that there is “no clear definition of successful behavioural change, with data collected at various times during follow-up” (p. 37). Sheehan et al. (2012) suggest that qualitative methods are effective to understand the phenomena of participants’ social, psychological and other experiences. Thus, the most appropriate method for this difficult topic seems to be qualitative research as it can provide an understanding of feelings, invisible experiences and needs of participants and how to address them (Liamputtong, 2007). As a result, the fundamental and key features of applying qualitative
methodology include understanding the perspective of the engagement in the intervention process; developing a contextual understanding; providing face-to-face interactions with participants; embracing an explanatory standpoint; and flexibility. Qualitative research design supports a holistic perspective; the description of the processes, activities and complex issues; and direct personal contact for this exploratory study.

Feminist research

In highlighting the suitability of a qualitative methodology, feminist research and constructivist epistemology are major approaches for this research. Feminist research focuses on social injustice by highlighting collaborative and non-exploitative relationships between the researcher and participants (Creswell, 2012; Reinharz, 1992; Wuest and Merritt-Gray, 1999). This perspective plays a significant role in avoiding objectification. Participants’ subjective experiences are vital in gathering valid data based on feminist research. As the main goal of feminist research is to give voices to marginalised groups, this study aims to give voices to Turkish perpetrators who are invisible in the context of domestic violence intervention processes in the UK. This research applies a feminist approach by developing a relationship between the researcher and participants. It attempts to examine the perspectives and experiences of Turkish perpetrators by understanding the lived experiences of engagement among perpetrators and programme providers in intervention programmes.

My methodology employs a combination of a feminist approach and thematic data analysis. Whilst feminist perspectives highlight the importance of hearing hidden and marginalized voices, thematic analysis allows themes and their
meanings to be identified in the data. I will provide an analytical way of applying my theoretical framework from my literature review and the six phases of thematic analysis (Braun and Clarke, 2006; Reicher and Taylor, 2005). These applications enable patterns to be theorised in order to examine Turkish men’s engagement in interventions from broader perspectives.

Constructivist epistemology

I cannot claim to be using a grounded theory approach for my research methodology due to theoretical sampling limitations in my study. However, a constructivist epistemology informs my research study. This study will employ a constructivist approach to understand participants’ meanings of experiences in an interpretive way. Charmaz (2006) noted that the constructivist approach allows individuals’ invisible situations, perspectives, interactions and the transformation in the social structures and interactions to be understood.

The constructivist approach aims to achieve a step back from the real world and explain the ways in which individuals express their perspectives within their social structure (Holstein and Gubrium, 2013). The constructivist approach focuses on how participants co-construct interview data (Roulston, 2010; Silverman, 1993). This approach investigates how participants describe their feelings, perspectives and experiences based on the consequences of their actions (Charmaz, 1990). Constructivist approach helps to analyse how perpetrators perceive their behaviours in relation to their backgrounds and power relations with others and myself.

In this way, the participants and I co-construct the data (Charmaz, 2008; Mills, Bonner and Francis, 2006). Constructions stemming from the interview process
will provide significant perspectives in the data analysis. Reflexivity is a key tool for maintaining an awareness of my positions in the research. For instance, the potential dynamics of masculinity and traditional gender norms might influence how men report their violent behaviour or engagement in interventions while responding to my questions as a female researcher. Likewise, there is a potential link between participants’ social locations and their constructions and meanings of experiences (Gunaratnam, 2003). For instance, participants’ class, gender, social location and racial backgrounds might influence the meaning that they ascribe to certain experiences. This research considers this intersectionality between various identities and issues and attempts to understand how they respond to these issues in terms of their engagement in the intervention process.

Research design

In this section, I will set out the study design including sampling by describing the sample size, the characteristics of my participants and data collection method. The sample size should be sufficiently big to answer my research questions (Marshall, 1996). It is important to have a reasonable sample size in order to extract meaning from the data and analysis. Suggestions about sample size in qualitative studies have been made by some researchers. For instance, Creswell (1998) suggested that up to 10 participants are a sufficient number for long interviews in a phenomenological study. Kvale (1996) noted that 10-15 participants can be an adequate number for qualitative interviews. I initially aimed to collect data from 15 Turkish male perpetrators and 6 individuals who are working or have worked with Turkish perpetrators in interventions. However, I was able to access 9 Turkish men who have been in interventions and 11
professionals who have worked with Turkish perpetrators. This number of participants is a sufficient sample size for the purpose of this study because I examine individuals’ perspectives, experiences and their meanings.

The composition of the sample followed the strategy of purposive sampling with Turkish men who were or had been in domestic violence interventions. Participants were Turkish men aged 18 or older who attended or had been in domestic violence interventions in the UK. The most important requirement for the sampling characteristic was that the perpetrators’ ethnic and racial background was Turkish. There were no specific recruitment criteria regarding immigration, marriage, employment, fathering and other social status. However, the main inclusion criteria were that they had perpetrated violence toward either spouses or intimate partners – regardless of their marital status or living arrangements. In this way, I explored key issues of their engagement in interventions in broader terms. My aim was to achieve core perspectives of participants’ engagement without introducing any criteria that may have involved any preconceptions.

The literature review chapter has often reported the factors around perpetrators’ engagement in group-based DVPPs because most of the studies focused on the key issues of group-based interventions. Whilst I was planning to access Turkish men in DVPPs, my participants were in fact mainly collected from one-to-one counselling or therapy services. The reasons for being able to access the participants who attended one-to-one counselling services were the limited number or lack of Turkish men in DVPPs and programme providers’ unwillingness to help with my research. However, one professional who worked
with Turkish-speaking communities in a group-based therapy did take part in my research. In addition, some professionals who had worked in individual therapy services were willing to participate in my research as gatekeepers. As a result, my sample was composed of individuals who had mostly attended or facilitated individual therapeutic support.

I recruited eleven professionals who have been either working or worked with Turkish perpetrators of domestic violence in therapy and psychiatric settings in the UK. Professionals have been educated to degree level in the psychological therapy fields or trained in the field of perpetrators of domestic violence. Essentially, professionals have been qualified to work with perpetrators and have experience in this field. Psychotherapists, mental health workers and psychiatrists were determined to be appropriate individuals for this research as they have shown that they can work with perpetrators of domestic violence. Therefore, one participant was a psychiatrist and ten professionals identified themselves as psychotherapists. In the following paragraphs, I will present recruitment strategies; a summary of the biographical details of participants; an overview of the data collection method and the procedures of data analysis.

**Recruitment strategies**

I employed gatekeepers and a snowballing technique for the purposes of recruitment. A gatekeeper is a person who knows the organisations or potential participants for the research and allows the researcher to physically access the study field (Homan, 2001). At the initial stage of recruitment, I attempted to use gatekeepers who work with perpetrators of domestic violence in interventions. I also contacted intervention programmes, counselling and therapy services in the
UK to begin recruitment. While sending individual emails and make phone calls to the research participants, the research goals were described by inviting them to participate in the study and requesting a convenient date and time to conduct semi-structured interviews. This invitation letter is in Appendix 4.

DVPPs were unhelpful for accessing participants because programme providers told me that few or no Turkish men have attended their programmes. Moreover, a few programme providers mentioned that they did not have the time and resources to take part in my research. Due to the obstacles to gathering data in London, I widened the location in which to access participants by searching other areas in England, including Birmingham, Leicester and Gloucestershire. As a result, I have accessed six professionals and three men outside of London. The rest of the participants (five professionals and six men) were recruited in London.

The gatekeeping process involves making contact with programme providers and community centres that work with domestic violence perpetrators in the UK. Accessing Turkish men who are or have been perpetrators of domestic violence in interventions included several obstacles due to the limited time period of my doctoral research, the sensitivity of the topic and the limited numbers of Turkish men in these interventions. The community has been hard to reach population. Importantly, domestic violence is a taboo issue in Turkish community. Therefore, I completed data collection in five months.

Snowball sampling means that initial participants who meet the theoretical criteria recommend acquaintances who are potential participants (King and Horrocks, 2010; Warren, 2001). This sampling is often cited as a good
technique for examining hard to reach populations (Cohen and Arieli, 2011; Klein, 2012; Rubin and Babbie, 2011). Snowballing is considered a useful approach as a participant may know those with the same or similar characteristics because participants often know each other (Klein, 2012). I asked a participant to identify others who fit these research sample criteria. Although some participants knew other individuals who were appropriate for my research, they were unwilling to share this information because of the sensitivity of the issue and power dynamics among them. The main reason for their unwillingness to invite someone to participate in the research was hierarchical relationships and hegemonic masculinity among men, as well as the stigma in the community attached to the acts. This was important information in understanding the hierarchy among Turkish men in the UK.

Applying the snowball technique has been beneficial in increasing the participation of professionals. At the same time, however, many professionals did not respond to my emails or did not wish to be involved due to concerns about confidentiality and having insufficient time for my research. As such, my primary approach was to connect through my Turkish networks and create new connections in Turkish communities. I let people know my research topic and requested help to access my participants. However, Turkish men’s negative experiences and feelings of shame continued to be barriers to taking part in the research.

The recruitment of participants is dependent on how willing men and professionals are to participate in the research. Many perpetrators are reluctant to participate in interventions (Gregory and Erez, 2002; Respect, 2013; Scott and
Wolfe, 2003; Stoops, 2003) so this prevented them from participating in the research. Further, many men are likely to be unwilling to share their perspectives and experiences because of their denials and minimisations of their violent behaviour (Harne and Radford, 2008; Stoops, 2003; Wood, 2004). Similarly, Pierce (1996) highlight that many female researchers have experienced obstacles to recruiting men for research (in Butera 2006) because of gender dynamics (Finch, 1984). These gender dynamics might be related to dress code and physical distance in the context of interviewing conservative men (Finch, 1984). In order to prevent such responses, safe and trusted environments have been provided to secure the confidentiality and privacy of the interview data (Cohen and Arieli, 2011).

I applied several strategies in order to minimise the obstacles to recruiting potential participants. For instance, I tried to recruit my participants by visiting eight social law centres, seven Turkish mosques and four Turkish community centres. In contrast, my personal connections in the Turkish community were important ways of reaching participants as trust had already been built in these networks. My personal connections helped me access one therapist and two Turkish men. I also contacted numerous Turkish speaking therapists in private practices, crises centres and mental health agencies via email and phone calls. In this way, I was able to reach three therapists. Seven professionals were reached by the snowballing technique.

Out of the nine interviewed males, four were invited by the therapist; two from my personal connections; two from my involvement in the community; and one was referred by a participant through the snowball sampling method. There is a
difference between recruiting through personal networks and through my own involvement in the community in terms of the time period that I knew these individuals. For instance, my personal networks were established before I started the recruitment. My involvement in the community began about the time that I started the data collection.

In highlighting the strategies and the challenges of the recruitment process, there are incentives to persuade people to participate in the research. For instance, the types of payment available, including travel costs, compensation, appreciation and any prize, could be potential incentives (Jensen and Laurie, 2016). However, compensation is a controversial way to increase participants’ incentives and participation during the recruiting process. For instance, compensation is inappropriate as it could be considered coercive (Brody, 1998; Crigger et al., 2001; Hollway and Jefferson, 2000). This research rejected the use of payments because of the sensitivity of the topic. Further, participants’ ideas about their potential masculine identity might be challenged if they were to receive a payment request from a female researcher. This could be perceived as creating an unequal relationship. Payments were therefore rejected in order to achieve fully voluntary participation.

A summary of the biographical details of participants

In the following paragraphs, I will present a summary of the characteristics of the men, and professionals, in order to respectively provide a better understanding of their backgrounds in relation to Turkish men’s engagement in the interventions. The sample included nine Turkish men who had been in domestic violence interventions and eleven professionals. The demographic information of
the Turkish men at the time the interviews were conducted is provided in Table 1. The mean age of male participants was 42 and ranged from 35 to 49. All of the participants were born in Turkey. All but one held British citizenship. All had immigrated to the UK to seek work and a better life. All the interviews with the men were conducted in Turkish; only one participant used a mix of Turkish and English during the interview.

Table 1: Characteristics of the participants (Names are pseudonyms)

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Immigration status</th>
<th>Employment status</th>
<th>Civil status</th>
<th>Education</th>
<th># of Child</th>
<th>Time and type of intervention</th>
<th>Type of referral</th>
<th>Interview language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ali</td>
<td>45</td>
<td>British citizenship</td>
<td>Employed</td>
<td>Married and separated</td>
<td>Primary school</td>
<td>4</td>
<td>12 weeks in a parenting programme</td>
<td>Social service</td>
<td>Mix of Turkish and English</td>
</tr>
<tr>
<td>Efe</td>
<td>36</td>
<td>British citizenship</td>
<td>Employed</td>
<td>Divorced and re-married</td>
<td>High school</td>
<td>1</td>
<td>1 week counselling in a hospital</td>
<td>General practitioner</td>
<td>Turkish</td>
</tr>
<tr>
<td>Mert</td>
<td>46</td>
<td>British citizenship</td>
<td>Employed</td>
<td>Married</td>
<td>University</td>
<td>5</td>
<td>Two-year in private psychotherapy</td>
<td>Self-referred</td>
<td>Turkish</td>
</tr>
<tr>
<td>Orkun</td>
<td>41</td>
<td>British citizenship</td>
<td>Employed</td>
<td>Married</td>
<td>Primary school</td>
<td>2</td>
<td>2 weeks in NHS psychotherapy</td>
<td>Social service</td>
<td>Turkish</td>
</tr>
<tr>
<td>Ege</td>
<td>35</td>
<td>British citizenship</td>
<td>Unemployed</td>
<td>Married and separated</td>
<td>University</td>
<td>2</td>
<td>12 weeks NHS and 3-week private psychotherapy</td>
<td>Self-referred</td>
<td>Turkish</td>
</tr>
<tr>
<td>Eren</td>
<td>42</td>
<td>Immigrant</td>
<td>Employed</td>
<td>Married</td>
<td>High school</td>
<td>1</td>
<td>12 weeks in private psychiatric help</td>
<td>Referred by his friends</td>
<td>Turkish</td>
</tr>
<tr>
<td>Cem</td>
<td>49</td>
<td>British citizenship</td>
<td>Employed</td>
<td>Married</td>
<td>Primary school</td>
<td>3</td>
<td>3 weeks in NHS psychiatric help</td>
<td>Self-referred</td>
<td>Turkish</td>
</tr>
<tr>
<td>Kaan</td>
<td>40</td>
<td>British citizenship</td>
<td>Employed</td>
<td>Married</td>
<td>Master's degree</td>
<td>0</td>
<td>10 weeks in private couples counselling, 3-4 week in psychiatric clinic</td>
<td>Referred by his friends</td>
<td>Turkish</td>
</tr>
<tr>
<td>Alp</td>
<td>41</td>
<td>British citizenship</td>
<td>Employed</td>
<td>Married</td>
<td>High school</td>
<td>3</td>
<td>4 weeks in psychiatric help at hospital</td>
<td>Self-referred</td>
<td>Turkish</td>
</tr>
</tbody>
</table>
In terms of their socio-educational status, three men had received primary school education, three had attended high school, two had graduated from university and one had obtained a Master’s degree. The participants’ formal education had taken place in both Turkey and the UK. Eight out of nine men were employed. Two men were shop owners, three were restaurant owners and two worked at restaurants. One man worked at a community centre and one was unemployed. All of the men reported that they had one or more children, except for one participant who had none; all were married. However, two men were living separately from their partners and one participant had divorced and entered into a second marriage. All the men reported their religion as Islam.

With regard to the types of referral to interventions, the majority of men had self-referred or been referred by their friends. Two men had been referred to the interventions by social services, and one by a general practitioner. The forms of the interventions varied. While the majority of the men attended private therapy sessions, two participated in NHS psychotherapy services. One man attended both private and NHS psychotherapy sessions. Three received support from psychiatrists; their abuse was strongly linked to depression. One attended both psychiatric support and private couples counselling. One man reported attending counselling in a hospital setting and another participant attended a parenting programme through a social services referral.

The time period of participating in interventions varied. One man attended a two-year private therapy course. Three others engaged in interventions for between 12 and 20 weeks. Two attended interventions for 4 to 10 weeks. Three men joined interventions for less than four weeks. whilst five out of nine men dropped
out of the sessions, Tan, Mert, Ege and Kaan completed the sessions in interventions.

Table 2: Characteristics of the professionals (Names are pseudonyms)

<table>
<thead>
<tr>
<th>Name</th>
<th>Gender</th>
<th>Nationality</th>
<th>Job title/role</th>
<th>Work placement</th>
<th># of years in role</th>
<th>Intervention approaches</th>
<th>Interview language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Su</td>
<td>Fem</td>
<td>Turkish</td>
<td>Psychotherapist and interpreter</td>
<td>Private therapy service</td>
<td>15</td>
<td>Integrative and culturally-sensitive</td>
<td>Turkish</td>
</tr>
<tr>
<td>Pelin</td>
<td>Fem</td>
<td>Turkish</td>
<td>Psychotherapist</td>
<td>Charity-based therapy centre</td>
<td>15</td>
<td>Psychodynamic and culturally-sensitive</td>
<td>English</td>
</tr>
<tr>
<td>Ziya</td>
<td>Male</td>
<td>Turkish</td>
<td>Psychotherapist</td>
<td>Counselling service at charity-based mental health organization</td>
<td>17</td>
<td>Person centred and humanistic approaches</td>
<td>Turkish</td>
</tr>
<tr>
<td>Sezen</td>
<td>Fem</td>
<td>Turkish</td>
<td>Psychotherapist</td>
<td>Private counselling service</td>
<td>6</td>
<td>Cognitive behavioural therapy</td>
<td>Turkish</td>
</tr>
<tr>
<td>Abdul</td>
<td>Male</td>
<td>Indian</td>
<td>Psychiatrist</td>
<td>Retired from psychiatric clinic at hospital and private practice</td>
<td>30</td>
<td>Integrative and culturally-sensitive</td>
<td>English</td>
</tr>
<tr>
<td>Ayla</td>
<td>Fem</td>
<td>Turkish</td>
<td>Family therapist and counsellor</td>
<td>Private family therapy service</td>
<td>20</td>
<td>Integrative and culturally-sensitive</td>
<td>English</td>
</tr>
<tr>
<td>Cansu</td>
<td>Fem</td>
<td>Turkish</td>
<td>Psychotherapist and clinical supervisor</td>
<td>Private therapy service and crisis centre counselling service</td>
<td>18</td>
<td>Integrative and culturally-sensitive</td>
<td>English</td>
</tr>
<tr>
<td>Ebru</td>
<td>Fem</td>
<td>Turkish</td>
<td>Psychotherapist and group analyst</td>
<td>Private and charity based therapy service</td>
<td>over 25</td>
<td>Integrative and culturally-sensitive</td>
<td>English</td>
</tr>
<tr>
<td>Laura</td>
<td>Fem</td>
<td>British</td>
<td>Psychotherapist</td>
<td>Private therapy service</td>
<td>14</td>
<td>Integrative and culturally-sensitive</td>
<td>English</td>
</tr>
<tr>
<td>Arzu</td>
<td>Fem</td>
<td>British-Cypriot</td>
<td>Psychotherapist and clinical assistant practitioner</td>
<td>NHS therapy centre and private counselling service</td>
<td>17</td>
<td>Integrative and culturally-sensitive</td>
<td>English</td>
</tr>
<tr>
<td>Lale</td>
<td>Fem</td>
<td>Turkish</td>
<td>Psychotherapist</td>
<td>Counselling service at charity based mental health organization</td>
<td>11</td>
<td>Person centred and humanistic approaches</td>
<td>English</td>
</tr>
</tbody>
</table>

As set out in Table 2, the majority of professionals were Turkish except for three.

The professionals were recruited from various private therapy centres and non-profit intercultural therapy centres providing clinical psychotherapy and counselling services for black and minority ethnic groups. The majority of
professionals described themselves as psychotherapists: one was in the NHS as well as a private therapy centre; one was at a charity-based therapy service; three at a private therapy service; and two at a charity-based mental health organization. One participant described himself as a retired psychiatrist with a background in a hospital clinic and private practice. One identified herself as a psychotherapist and group analyst in private and charity-based therapy services. Another participant worked at a crisis centre counselling service as a counsellor and clinical supervisor and she was at a private therapy centre during the time the interview was conducted. One professional described herself as a psychotherapist and interpreter at a private counselling and therapy service.

Most of the professionals had worked with Turkish speaking communities for more than 10 years. The average length of professionals’ work experience with perpetrators of domestic violence was 17 years. These professionals had not worked solely with perpetrators of domestic violence so in fact the number of years’ professional experience was higher. Most professionals had applied integrative and culturally-sensitive approaches in their work with perpetrators. Two had implemented combined person centred and humanistic strategies. One professional applied cognitive behavioural techniques and one implemented psychodynamic and culturally-sensitive approaches.

Data collection method: Semi-structured interviews

This section starts with a discussion on the appropriateness of semi-structured interviews to investigate the research questions and how to build rapport with participants. It then moves on to present the process of conducting semi-structured interviews, and the design of the interview questions. Face-to-face
interactions and observations in natural settings are the best strategies in order to capture my participants’ perspectives (Kvale and Brinkmann, 2009; Marshall and Rossman, 2014).

Within the research goal, interviews are the best method to explore the social processes and the questions of how and why (Liamputtong, 2010; Morris, 2007). Based on the research questions, semi-structured interviews have been chosen as the primary method to gather the required information in the most appropriate and meaningful way. Britten (1995) describes the strengths of semi-structured interviews to be the way that they allow for the reflexivity of the structure of open-ended questions. The main reason for choosing this method is to gather unspoken perspectives and beliefs related to participants’ engagement in the intervention process. Creswell (2012) and Marshall and Rossman (2014) highlight that a key advantage of collecting data through individual semi-structured interviews is that they provide an environment which facilitates the uncovering of perspectives on unique events or experiences. In order to capture their meanings and interpretations, the semi-structured interview is the best data-collection method (Patton, 2014). Whittaker (2012) and Hesse-Biber (2004) noted that the dynamics of semi-structured interviews provide flexibility. For instance, the interviewer can change the order of questions if the participant introduces a topic earlier than anticipated. This type of flexibility may encourage participants’ in-depth responses.

Semi-structured interviews require building rapport with participants to gain their detailed perspectives and experiences. Attention to the process of building rapport can make an important contribution to bringing out participants’ unique
feelings and experiences (Liamputtong, 2007). Building trust and rapport are significant requirements for conducting interviews with Turkish perpetrators since the investigation centres on private issues in their lives (Dickson-Swift, 2005; Goodwin et al., 2003; Hesse-Biber and Leavy, 2005). It is therefore necessary to clarify the key approaches to improving rapport with this sensitive group. Having discussed the strong reasons in favour of choosing semi-structured interviews, the following gives an overview of the design of interviews and the structure of interview questions.

The interview questions follow the interview guide developed by Chovanec (2012) and Charmaz (2006). The study also uses Bryman’s (2012) guidance on question order as this takes into account participants’ sensitive issues in preparing questions for interviews. I facilitated the interview without directing the participants and strived to be a neutral but interested observer. Interview questions were designed based on participants’ perspectives and experiences of the process of interventions to examine their engagement. The interviews focused on four key areas. These included experiences and perceptions of the initial motivation in participating in a programme; their relationship with group members and the facilitator; their descriptions of engagement in the intervention; and their relationship with their partners and family members related to their engagement in interventions. Therefore, I focused on circumstances and interactions with family, community members and programme providers in order to link these men’s engagement in interventions. I present the interview questions written in English and Turkish for perpetrators (see Appendices 10 and 11). Also, demographic information needed from perpetrators included age; household; immigration status; and socio-economic status; characteristics of the
family; the amount of time spent in interventions; types of intervention approaches that they have attended and the type of participation in the interventions. These demographic questions are attached in Appendix 12 and 13 in English and Turkish respectively.

The interviews with professionals concentrated on examining their interactions with Turkish men in the context of engagement with perpetrators in the intervention process. Interview questions written in English and Turkish for programme facilitators or therapists are in Appendix 15. Further, the approach of the interventions, the time period working with Turkish perpetrators, gender and ethnicity of the programme providers have been considered. The demographic questions for programme providers are in Appendix 14.

Individual, semi-structured interviews were conducted with nine Turkish men and eleven professionals. Each interview lasted between 30 and 60 minutes and was recorded in its entirety. I used a recorder to collect data since it enabled me to show consideration to participants by allowing for eye contact and to obtain comprehensive information (Charmaz, 2014). However, only 18 out of 20 participants agreed to the audio-recording of the interview. Notes were taken during these two interviews instead. Before the interview started, I asked the participant to review the research information sheet and sign a consent form. The English and Turkish version of the consent form is in Appendix 8 and 9 respectively. The interviews with the men were conducted in person. One interview with a professional was conducted via Skype and one was on the phone due to the participant’s unavailability and limitations of location and time.
The majority of the interviews with professionals were conducted in English except for three and most of them were conducted in person at their workplaces.

**Data analysis and synthesis**

This section provides a rationale for thematic analysis by highlighting the importance of building a theoretical framework. My methodological perspective benefits the existing theoretical frameworks. For instance, intersectionality and feminist-informed gender theories have emerged from my literature review which contributes to understanding the existing knowledge of potential issues of Turkish men’s engagement in interventions. This research started with a conceptual framework based on the literature review process and it now attempts to apply thematic analysis.

Thematic analysis is the most appropriate way of analysing the data for this research because the topic is an under-researched area and it aims to examine the participants' lived experiences in the intervention process. Whilst the major goal of thematic analysis is to identify central themes and subthemes, a semantic and latent level analysis helps to investigate the meanings of the research phenomenon (Braun and Clarke, 2006). Semantic analysis aims to conceptualise the data by describing participants’ apparent meanings (Braun and Clarke, 2006). However, in the interpretation point of the analysis, I will attempt to theorise the importance of the elements and themes in the data in order to examine their meanings (Braun and Clarke, 2006). An interpretive level of analysis allows me to identify broader meanings of the points that might be raised by the participants. However, the semantic level of analysis is not adequate in analysing this research because it is necessary to examine the
“underlying ideas, assumptions, and conceptualisations” that will be informed by the semantic content of the data (Braun and Clarke, 2006, p. 84). The latent level analysis determines the structures of meanings (Braun and Clarke, 2006). Both semantic and latent levels are vital to achieve an inclusive analysis for my research. Furthermore, I concentrated on particular aspects in my theoretical framework from the literature review.

The thematic analysis helps in the gathering of data and for themes to emerge in order to examine perpetrators’ perspectives and feelings about their engagement in interventions. I utilised the data analysis procedures that are described by Braun and Clarke (2006). The core characteristics of thematic analysis are flexibility, suitability for large data sets, determining dominant themes and subthemes, repeatability for the other study topic, and analytically interpreting the data (Braun and Clarke, 2006). In the next section, I will clarify six steps of thematic analysis including “familiarising yourself with your data; generating initial codes; searching for themes; reviewing themes; defining and naming themes, and producing the report” (Braun and Clarke, 2006, p. 87). I have also presented the six phases of thematic analysis in Appendix 3.

**The six phases of thematic analysis**

The audio-recorded interviews were transcribed verbatim by myself in order to gather the richness of the data at the first stage of thematic analysis. I also translated the Turkish interview transcripts to English. I applied some strategies to reduce the difficulties I encountered in translating some phrases in the interviews. For instance, detailed notes about data collection processes, participants’ body language, assumptions and pauses were helpful to maintain
the meanings of their stories during translation. Additionally, I provided some original phrases in Turkish in the presentation of the data. This was helpful to achieve translated transcripts with original expressions and to illustrate the complexity of translation to the readers. The meanings of “it, they, them, etc.” were also maintained in brackets within the extracts when the meaning was not clear for the readers.

Word-by-word translation is of limited value for providing the meanings of all data because this reduces readability (Temple, 1997; Temple and Young, 2004). For instance, the readers might not able to understand some phrases in word-by-word translation because of the complexity of the language and the sensitivity of the domestic violence context. However, all the extracts were presented with the meanings that the participants ascribed. In order to reduce the readers’ difficulty in understanding the quotes and not lose the original information, I provided the source language in brackets within the extracts and its meaning in English.

I applied a number of techniques while transcribing the interviews. For instance, I typed the words in italics if participants emphasised them. The participants might become silent during interviews, and these quiet moments might give important information in terms of their feelings and struggles (Ryan and Bernard, 2003). I typed five dots if there was more than four seconds of silence. After transcribing the interviews, I read and reread the data as this increased my familiarity and involvement and helped to examine potential meanings and patterns in the data (Braun and Clarke, 2006; Guest et al., 2012). Initial ideas noted while rereading the data process.
In the second phase, I generated initial coding in the data. This phase investigates common concepts and elements in the raw data (Braun and Clarke, 2006). I used NVivo 10 software to describe major codes. Whilst the initial categories of my conceptual framework have been deductively obtained from the literature review, the qualitative computer software NVivo 10 was used for typing interview transcripts for effective coding at the initial stage of the analysis. Likewise, NVivo is useful software for coding as it makes it possible to create diagrams to illustrate the relationship between codes, categories and patterns (Denscombe, 2014). For instance, in the examination of Turkish men’s engagement in interventions, the initial coding has helped this research to identify large concepts that have been listed based on their frequency in the data (Tilley and Brackley, 2005). I also used a few actual words that were used in certain circumstances by participants.

Line-by-line coding has been used because it helps to develop categories in terms of their dimensions and properties (Strauss and Corbin, 1998). It also describes “key words and phrases” that are associated with participants’ engagement in the interventions (Goulding, 2002). I focused on participants’ experiences and attitudes in conditions including locations, timeframes and interactions. I critically compared and contrasted their interactions with men’s partners, programme providers, community members and family members in relation to their engagement in interventions. At the end of this phase, all transcripts have been coded and the extracts of the similar codes have been collated together (Braun and Clarke, 2006).
The third phase examines how codes might combine to create principal themes by sorting the codes into themes (Braun and Clarke, 2006). All coded extracts have been organised within the themes. I employed mind maps on a separate piece of paper in order to organize themes. This phase plays a significant role in connecting subthemes with main themes which have illustrated in thematic map phase one (see Figure 1).

**Figure 1: Thematic map phase one**

In phase four, I examined whether there were enough themes to be supported by the data and reviewed the subthemes by assessing the appropriateness and coherence based on meaningfulness within the main themes (Braun and Clarke, 2006). In the first level of this phase, all collated extracts were read for themes.
by focusing on whether there were coherent patterns in the data. When they were not coherent, I reworked the theme, developed a new theme or discarded it from the analysis. For instance, some subthemes such as “being a man in the family” needed to be collapsed into other subthemes, such as “masculine identity linked to blame women and male domination” in Theme 2. Furthermore, some themes, e.g. “masculine identity”, “blame women” and “male-dominated gender roles”, merged together and became a subtheme. Some subthemes needed to be removed such as “men’s exploration of his personality” in Theme 4. Moreover, I merged Theme 3 “obstacles to adopting British rules as an insufficient engagement” into Theme 2 “patriarchal dynamics” because men’s obstacles to integrating into UK culture and rules are more likely to interconnect with the concepts of patriarchy. I changed the name of Theme 1 from “initial engagement: implicit and explicit participation” to “initial engagement linked to culturally-sensitive approaches” because the overall idea is about the importance of culturally-sensitive approaches to men’s initial engagement processes. If they are coherent, I moved on to the second level which provides a critical review of the themes by describing strong and distinguishable divisions in the entire data set (Braun and Clarke, 2006). The end of this phase produces “a thematic ‘map’ of the analysis” and tells the whole story about the data (Braun and Clarke, 2006, p. 87). Thematic map phase two has been presented in Figure 2.

Figure 2: Thematic map phase two
The fifth phase of thematic analysis provided clear and critical definitions of themes by refining each one with details. In this way, I described what the overall data say about Turkish men’s perspectives on their engagement in interventions. I identified subthemes in the large data set which presents “the hierarchy of meaning within the data” (Braun and Clarke, 2006, p. 92). I examined patterns in terms of their coherence by understanding Turkish men’s engagement in interventions. In doing so, I described such patterns in relation to my theoretical framework for the interpretation of the themes. The interpretation of themes within my theoretical framework contributes to “the development of knowledge” (Boyatzis, 1998, p. 11).

In the sixth phase of thematic analysis, I provided sufficient evidence of the themes within the data by choosing persuasive extract instances (Braun and Clarke, 2006). The sixth phase yielded an academic report of the analysis by presenting each theme and its related subthemes in Chapter Four. I have analysed and structured themes based on the fundamental elements of each participant’s story. The participants’ own words are used in order to indicate the important patterns that are present through a qualitative approach. In order to examine the meanings of the data, I asked myself the following questions as guidance: ‘What does this theme mean?’ ‘What are the assumptions underpinning it?’ ‘What are the implications of this theme?’ ‘What conditions are likely to have given rise to it?’ ‘Why do people talk about this thing in this particular way (as opposed to other ways)?’ and ‘What is the overall story the different themes reveal about the topic?’ (Braun and Clarke, 2006, p. 94).
In summary, building a conceptual framework from the literature review and the application of six phases in thematic analysis fits with this sensitive research topic. In this section, I have presented how I applied six stages in my data analysis in order to understand the meanings of Turkish men’s perspectives on their engagement in interventions. Whilst I have provided beneficial tools and strategies in the data analysis process, ethical issues also need to be clarified for this sensitive topic and hard to reach population. For instance, my identity and positionalities are very likely to influence the research process (Edwards, 1998; Gadd, 2004; Gunaratnam, 2003; Marcus, 1994; Opie, 1992). As I am aware of these influences, ethical considerations will be discussed in order to examine how I can provide safety and empower potential participants and myself.

Ethical considerations

I will illuminate ethical considerations, issues of trust with participants and my positionality in order to examine the research questions in the following sections. This research includes multifaceted ethical questions since this topic is a sensitive one (Allen, 2011). To address ethical questions, Peled and Leichtentritt (2002) suggest four ethical principles to follow: being respectful for participants; enhancing their self-determination; increasing social justice; offering benefits to participants and others. Taking account of these suggestions, this study provides confidentiality and anonymity to protect identities and locations of participants (Denzin and Lincoln, 2000; Mertens and Ginsberg, 2008). Hugman et al. (2011) highlight that the concept of beneficence is not only ‘do no harm’ but also a relational process and it should be meaningful for participants. The six principles of the ESRC Framework for Research Ethics have been a guide for the
research. They are: ensuring integrity, quality and transparency; fully informing participants about the research; confidentiality; anonymity; securing voluntary participation; doing no harm to participants and clarity on the independence of research (ESRC, 2010).

Informed consent

Ethical approval has been granted by the Departmental Research Ethics Sub-Committee at Goldsmiths, University of London (see Appendix 18). Having obtained ethical approval and made contact with agencies to access potential participants, I provided an information sheet and consent form to secure participants' consent. This information sheet includes the aims of the research; information about participants’ involvement in the study; the procedure of research; audio recording; subsequent use of the data; the potential harms and benefits of the research. It highlights the voluntary nature of participation and participants’ right to stop the research at any time.

Participants might face difficulties such as uncomfortable feelings or distress during the interviews. However, informed consent is a useful tool in explaining the research process to participants (Cohen et al., 2013). I have written an information sheet for perpetrators in English and Turkish (see Appendices 5 and 6). Also, an information sheet for programme providers is written in English (see Appendix 7). I emphasise that participants are free to terminate the recording at any time; this provides the ability to converse naturally and encourages the flow of information. Thus, informed consent is an ongoing process due to the potential power relations in the research (Peled and Leichtentritt, 2002).
Confidentiality

Confidentiality, anonymity and privacy are essential requirements to protect participants’ safety for this research (Dickson-Swift, 2005). I ensured that community and family members were unable to identify participants through the results of the research, and guaranteed participants’ anonymity (Dickson-Swift, 2005). Names have been changed and participants were given a pseudonym (Melrose, 2002). All files have been password protected. I have highlighted these issues in the consent form in English and Turkish (see Appendices 8 and 9). The study endeavoured to obtain full disclosure while collecting data from perpetrators and a professional during interviews. I framed my questions with caution so as not to identify participants’ family members and survivors. The names of family members were mentioned during the interview changed in the transcription process. Data will be destroyed after five years.

Confidentiality is a fundamental ethical concern. However, Gregory (2003), Booth (1999) and Melrose (2002) suggest that researchers need to break confidentiality when participants share any intention or experiences of committing crimes. I informed participants about the necessary breach of confidentiality (Booth, 1999; Melrose, 2002) for the situation that they may share intentions of being abusive or violent. Similarly, if participants threaten to hurt themselves or another individual, the confidentiality might be broken. Participants have not been asked to share any illegal activity and they did not share any criminal acts during the time of conducting interview. However, in the context of domestic violence, confidentiality decisions are complex because of the considerations of the needs of both perpetrators and survivors (Iliffe and Steed, 2000).
Risk of harm to participants

In this section, I will describe the potential dangers and risks to participants during the research, and discuss strategies that employed to address them. These include a plan for the order of the questions; debrief sessions and counselling. Gottzén (2013) suggests that a researcher should avoid familiarity with participants, as they are violent men, but there is also a need to understand their reasoning. On the other hand, the circumstances that may increase vulnerability of participants need clarification. For instance, participants may experience feelings of anger, guilt, embarrassment (Renzetti and Lee, 1993), awkwardness, worry, anxiety, eagerness and exhilaration (Gunaratnam, 2003) when they share personal issues. In the context of perpetrators’ decision-making about engaging in or being in an intervention programme, they might feel anxious and fear being judged.

I have used less intrusive questions and gradually led up to the more potentially difficult topics in order to establish a rapport with the participants (Maxwell, 2013; Skinner, Hester and Malos, 2005). I arranged a safe interview location. For instance, participants were free to leave the interview if they wished to (Lee, 1995). In order to reduce and/or end participants’ potential distress and disturbed feelings, I offered debriefing sessions after the interviews, inviting them to share their feelings (Alty and Rodham, 1998). A debriefing sheet highlighted details of a counselling service that can support participants if they were upset or distressed by their participation in this research. I have attached the debrief sheet in English and Turkish (see Appendices 16 and 17).
Risk of harm to researchers

This section aims to identify potential harms to me and clarify the ways in which the strategies prevent dangerous outcomes during the research process. The section concludes with a discussion on gender issues related to my safety whilst interviewing male participants and considers how to prevent potential harmful events. Most studies on criminal activities, including domestic violence, are categorised as sensitive topics and so studying this topic is potentially harmful to the researcher. For instance, I may experience burn out from listening to the distressing stories told by participants as perpetrators of domestic violence (Cavanagh and Lewis, 1996; Liamputtong, 2007). Similarly, I may experience emotional exhaustion including fatigue, blame, nervousness, disconnection from my family and friends and social networks (Dickson-Swift et al., 2009). Based on the literature of vicarious trauma among social workers or therapists who work with sexual offenders, I may experience feelings of anger, anxiety, disgust and other emotional reactions (Way et al., 2004). In this situation, employing counselling or supervision may reduce potential emotional exhaustion (Dickson-Swift et al., 2008).

This study considers that as a female researcher I may need to apply unique approaches in researching male perpetrators. I may receive sexist comments and threats from male participants during interviews (Pini, 2005; Sharp and Kremer, 2006; Wojnicka, 2016). In relation to this, Presser (2005) conducted interviews with violent men by examining the meanings they ascribed to violent behaviour, and examined how gender influences this qualitative study as a female researcher. She argues that gender identity strongly shapes the research data.
To reduce potential threats and dangers, the study chose appropriate locations such as public places (Arendell, 1997; Gailey and Prohaska, 2011); a place in a programme (Gottzén, 2013) and not in participants’ own homes or a private place (Lee 1997). I was conscious of what I was wearing and how I was talking, aiming to prevent potential triggers that could make participants abusive (Charmaz, 2014; Gurney, 1991) and to reduce potential social distance (Bogdan and Taylor, 1975; Fontana and Frey, 1994). Appropriate dress should not distract participants; it should be neither too formal nor too casual.

Issues of trustworthiness

This section clarifies how I have tried to create trust with Turkish men in domestic violence intervention programmes. The main objective is to control potential bias in the process of data collection and analysis. This section gives an overview of credibility, dependability and transferability of the study. Although credibility is a controversial issue in qualitative research, Lincoln and Guba (1985) and Denzin and Lincoln (2000) argue that there are concepts such as “trustworthiness, authenticity, and quality” that are suitable to create validity in qualitative studies (in Maxwell 2013, p. 122). Credibility of qualitative results could be ascertained by exploring the benefits of the findings (Koch and Harrington, 1998). Credibility confirms whether the findings are accurate from the perspectives of researchers, participants and readers (Bloomberg and Volpe, 2014). In the following paragraph, I will clarify certain approaches that may increase the credibility of the research findings. These approaches include triangulation and self-reflection.
I have tried to ensure that my interpretation of the processes and interactions in the setting are valid by highlighting the multiple sources of theoretical data, whilst comparing them through triangulation - in order to corroborate the suggestions and conclusions. This triangulation creates credibility (Bloomberg and Volpe, 2014). Likewise, interview transcripts and initial theoretical framework might offer triangulation (Maxwell, 2013). Eisenhardt (2002) noted that examining existing literature and theoretical frameworks enables generalisability and allows for themes to emerge from research even of small sample sizes.

Within the feminist framework, this study aims to examine knowledge not to confirm a reality, as the subjectivity and locations are likely to produce several truths and diverse perspectives by participants (Hesse-Bibber and Piatelli, 2012). This study takes into account conflicts, inconsistencies, pauses, overlaps and the forms of body language of participants to understand their unspoken feelings, perceptions and concerns (Dunbar et al., 2002; Hollway and Jefferson, 1997). These considerations are likely to increase the reliability of the data analysis and results. My research examines how participants’ knowledge and power are connected, based on feminist perspectives.

I used peer debriefing to confirm the accuracy of my account. This included one of my colleagues examining some field notes, my assumptions and suggesting alternative ways of looking at the data (Bloomberg and Volpe, 2014; Robson, 1993). My plan to present the data at a conference was beneficial, as I received critical comments on my findings, helping to clarify the bias that I brought to the study. As suggested by Bloomberg and Volpe (2014), this self-reflection leads to an open and honest attitude that resonates with readers. I continually monitored...
my own subjective perspectives and biases by recording reflective notes during the research process (Bloomberg and Volpe, 2014).

**Dependability and transferability**

Dependability means that the study may be replicated by other similar studies (Bloomberg and Volpe, 2014). This study may fail to ensure a pure and repeatable process for providing dependability as it applies interpretive approaches (Gasson, 2004). However, certain strategies ensure dependability including detailed procedures of the data collection and analysis, and sufficient information about the process (Gasson, 2004). In order to achieve rigorous qualitative results, I have provided thick description by indicating participants’ emotions, thoughts and attitudes in their complex experiences of engagement in the domestic violence intervention programmes (Ezzy, 2002). Thick description has been provided to describe my personal connections with participants in terms of their cultural backgrounds (Gilgun, 2005).

The main goal of confirmability is to allow someone to follow the recorded procedures of this study (Speziale, Streubert and Carpenter, 2011). I systematically recorded and showed the results and thoughts in the process of concluding the findings. I have clarified the reasons why I have chosen semi-structured interviews. Verbatim transcripts and interview notes were produced. I recorded my reflective journal to make a note of my field experiences, my learning and thoughts related to my observations during the interviews. These records can be used to run an audit trail when necessary.

Whilst this study does not expect the findings to be generalizable to all other settings, the central goal is to transfer some lessons to other intervention
programmes that work with Turkish perpetrators. I discuss the ways in which the study will be an opportunity for readers to decide whether similar processes will be suitable in their settings and groups. In the evaluation of trust, transferability will be assessed by number of criteria including discussions on shared knowledge and experience within the descriptions of data in a holistic way and the amount of detailed information that is collected from participants. Six phases of thematic analysis play a significant role in developing themes and enhancing transferability. To develop effective trust, the following sections on reflexivity will consider power relations and building rapport with participants.

**Reflexivity in the research process**

This section focuses on how my ethnicity, racial background, cultural identity, educational background, gender and religion might have impacted on accessing the sample; data collection, power relations; building rapport and the research process (Charmaz, 2014; Liamputtong, 2007; Russell, Touchard and Porter, 2002). In this section, I will investigate my philosophical perspectives, research questions and applications in order to manage the issues of the interrelations and the interpretation of meanings by providing my positionality (Edwards, 1998; Gadd, 2004; Gunaratnam, 2003; Marcus, 1994; Opie, 1992).

Some strategies help to reduce and end power relations and increase rapport building in interviews (Britten, 1995; Cohen et al., 2013; DeVault and Gross, 2012; Longhurst, 2010). For instance, reflexivity helps reduce my potential bias by making me aware of my relationship with participants during the research (Holloway and Biley, 2011; Kolb, 2012; Pillow, 2003; Woodby et al., 2011).
Whilst sharing a similar racial background was useful in a cultural context, my privileged status sometimes increased participants’ suspicions about my intentions in conducting the study (Liamputtong, 2010). The class difference between myself and most of the participants might also have affected my interpretation of the data (Edwards, 1998). For instance, as a Turkish researcher I identified myself as a member of the Turkish community as I shared the same race and language. However, I was a student who had moved to London from Turkey to study so this showed that I was not an insider in this community as I was a temporary resident in the UK. As Dedeoglu (2014) stated, many Turks moved to London because of financial, political or social obstacles in Turkey. In these complex circumstances, I sometimes felt alienated from their unique migration stories because I held a type of outsider status. Therefore, being an educated female researcher placed me in a different class position.

When I tried to access my participants in Turkish mosques, community centres and societies, it was difficult for me to interact with people in the process of explaining the rationale of the research as domestic violence is taboo and often minimised in the community. Specifically, a few religious leaders in mosques recommended that I study women because they blamed women who sought help for men’s violent behaviour through the criminal justice system. Thus, they were unwilling to help me access male perpetrators of domestic violence in their communities. However, the process of accessing participants in this way gave me many insights into how people perceived and labelled their problems. Importantly, a few individuals were able to describe themselves as appropriate for the study and took part in my research. The environment, language and interactions were key elements in accessing my participants. Despite this
complex insider and outsider position, I attempted to take advantage of my ethnic background and aimed to foster communication and rapport in an effective and clear way.

My position as a Turkish researcher helped me to connect well with the Turkish participants. However, other positionalities shaped the rapport created in the interviews (Johnson-Bailey, 2010; Ramji, 2009; Merriam et al., 2001). I was mindful that some participants might have perceived me as judging their experiences of violence, and this perception might have undermined the trust that arose from the fact of sharing the same race. I was concerned that other potential participants who might have felt uncomfortable about the research topic refused to take part.

In Turkish society, domestic violence is perceived both as a shameful act and as an honourable one. For instance, some participants might have felt ashamed because they were aware of the consequences of their violent behaviour on family members. A few participants justified their violence due to patriarchal beliefs in the community. These perceptions in relation to their feelings of shame or honour did not always impact negatively on participating in the research. Even though the man felt shame or honour about his violent actions, he might have refused to attend the research because of gender differences or feeling no benefit from the research. However, some agreed to take part in the research. Having agreed, they rarely felt embarrassed about being in interventions. Thus, holding the same racial background did not increase men’s feelings of embarrassment in terms of having been involved in interventions because of my educational background. Because I am an educated person, they expected me
to understand their situation. Therefore, they did not feel shame in front of me because of the fact that they had been in therapy. However, they stated that they often felt embarrassed in the community as many community members perceived therapeutic support as a shameful activity.

I see myself as being in both a privileged and a difficult position in this research process. First, I am a person who has an education, the ability to conduct research and contribute to voicing the needs of participants. This educational background strengthens my ability as a researcher and helps me to cope with difficult situations (Bourke, 2014). Yet, even given my insider and educational status, many Turkish men were unwilling to participate in this research because of their concerns about stigmatisation in relation to being perpetrators and subsequently taking part in prevention initiatives.

Cultural identity is generally associated with individuals’ native language and relationships with family members (Song and Parker, 1995); that may influence power and positionality (Merriam et al., 2001). My Turkish identity reduced intersubjective distances between me and many Turkish perpetrators because of the potential similarities of culture and language (Gunaratnam, 2003; Song and Parker, 1995). Many men in this research have immigrated to London for economic reasons. In these instances, the shared Turkish language played a significant role in effective communication with participants who spoke little or no English. However, I was aware that second or third generation Turks were unable to speak Turkish well. In this situation, language was not an automatic benefit of sharing the same racial background. A few participants were well integrated into British culture as they had been born and raised in the UK. This
integration was likely to influence their description of social and cultural thoughts and attitudes (Korteweg and Yurdakul, 2009). I acknowledged these complexities by being aware that not all participants held the cultural and social views that I had.

Even though holding insider status might be beneficial when working with an immigrant community, such closeness may hold dangers for the research process (Bousetta, 1997). For instance, I may know participants’ family members and this closeness may influence their participation or disclosure of their private issues. However, I live outside of the wider Turkish community that lives in North London (Office for National Statistics, 2015). This could give me outsider status because where I live prevents me from interacting with many Turkish people. This outsider position might bolster participants’ positive feelings about becoming involved in the research. The outsider position may be useful in encouraging a researcher to ask questions and avoid making assumptions (Hesse-Biber, 2004). It allows for the objective analysis of information with fewer assumptions (Liamputtong, 2010).

My gender as a female researcher influenced the perceptions of participants (Gailey and Prohaska, 2011; Liamputtong, 2010). For instance, during the recruitment process, some community members did not invite potential participants because they thought they would not talk about their experiences with a female researcher. The key issues of gender and power relations in interviews with Turkish male perpetrators were linked to men's experiences of domestic violence and patriarchal dynamics.
All the participants had been in intervention processes. When they perceived their religion as a peaceful one – that did not accept abuse of women and children, – they felt shame or guilt. All the literature on the link between men’s abusive behaviour, religion, and culture in Muslim communities, contributes to understanding the potential power relations between Muslim male participants and myself in this research (Abugideiri, 2011; Hajjar, 2004; Ryan, Kofman and Aaron, 2011). Abugideiri (2013) has highlighted that an inextricable connection between religion and culture is likely to influence men’s explanations of their violent behaviour in relation to the interpretations of patriarchal cultures. It was a challenge to listen to these justifications as my Muslim identity did not tolerate them. I acknowledged that each participant had their own interpretation and understanding of their abusive acts. Yet, my Muslim identity was problematic when they perceived this identity as an acceptance of their violence. I did not support their justifications. Moreover, these situations were difficult for me in terms of listening to their defences and staying quiet. The main position that I took in this circumstance was not colluded in violence against women by listening to my participants’ words without confronting them.

Some participants justified their violent behaviour based on their religious and cultural backgrounds when they mentioned why they dropped out of the sessions. Moreover, the men’s justifications for their unwillingness or inability to apply time-out or other strategies were linked to male domination and power as husbands in the context of their religious beliefs. When I listened to these justifications of their previous violent behaviour in relation to their Muslim identity, I had to be respectful of their reasoning for their inadequate engagement in interventions. The process of listening to their justifications impacted on me in
negative ways. For example, I felt upset and frustrated that they would discuss their strict beliefs around male violence and gender power relations in the context of religious values. It was challenging for me to be quiet when they related their patriarchal beliefs and masculinity to a religious view. On the other hand, these experiences helped me to analyse my data, giving me an awareness of how the men’s experiences around religion were core factors in their reluctance to take responsibility and attend the therapy sessions regularly.

At an emotional level, I started to examine why some individuals tended to tolerate violence against women by blaming women and the legal system in the UK. They often argued that domestic violence cases were taken into consideration at different levels of the Turkish criminal justice system. For instance, the men illustrated their frustration about government financial support for women or the way men were jailed due to their violent behaviour in the UK. They were also concerned that the legal system did not allow such men to see their children. I experienced frustration at these minimisations of male violence against women and the reduction of women’s rights and freedoms. These observations increased my knowledge around why the men were often unwilling to take responsibility by dropping out of the sessions.

My assumptions about holding insider and outsider status are irrelevant to achieve a successful outcome in the research because the research is a dynamic process (Belur, 2013; Dwyer and Buckle, 2009; Mullings, 1999). Both building rapport and equalising power relations have been negotiated dynamically (Belur, 2013) because holding insider and outsider status is linked to
complex identities and experiences (Song and Parker, 1995; Thapar-Bjorkert and Henry, 2007).

**Methodological limitations**

This section examines the situations that might weaken the qualitative research methodology used, namely in relation to sample size; time; recruitment of participants; data collection method and gendered power relations. Ezzy (2002) noted that qualitative studies cannot be replicated due to the dynamic process of how participants ascribe meanings to their experiences. However, generalisability is not the goal of this research. Time restrictions and obstacles to accessing Turkish men made for a limited number of interviews. This research therefore concentrates on identifying key issues of Turkish men’s engagement in interventions and explores the impact of intervention approaches and the relationship between men and professionals. Further, the data analysis process could be a challenge because of the researcher’s interpretation skills. However, I have provided sufficient information on how to set up the thematic data analysis to examine the engagement of Turkish men in interventions.

Distrust could be the most significant barrier to recruiting black and minority ethnic participants (Jensen and Laurie, 2016; Preloran et al., 2001; Yancey et al., 2006). If men experience discrimination, feelings of vulnerability, and fear of negative repercussions from the intervention programmes, they may be unwilling to participate in the research (Jensen and Laurie, 2016). Importantly, the researcher-participant relationship includes some weaknesses. For instance, participants might feel uncomfortable in the dynamics of power in relation to gender, age and socio-economic status; these issues might lead to a lack of
cooperation, perception and articulation. During the interviews, the participants might feel shame and guilt due to their previous violent acts and these issues might reduce their involvement in talking about how they engage in interventions. For instance, a few participants did not remember the details of their stories because their depression and their masculine identity impacted on their disclosure. In addition, vague or non-specific responses reflected the nature of perpetrators’ denials and the normalizing of their abusive actions.

As discussed in the section on reflexivity, the interview process is the result of interaction between the researcher and participants. Different issues and motivations arise whilst interviewing perpetrators. For instance, resistance and manipulations by participants might be potential obstacles (Cavanagh and Lewis, 1996). According to the suggestions of Cavanagh and Lewis, this research aimed to be aware of participants’ manipulations and resist them. This topic is largely a hidden phenomenon based on the lack of research in this context.

A large number of studies reported that being aware of the representation of others is important so as not to lose meanings or construct new meanings during translation (Claramonte, 2009; Kim, 2012; Fathi, 2013). The researchers interpret and translate the meanings and concepts of the data during the translation (Wolf and Fukari, 2007). Nevertheless, there are limitations and challenges from translating the transcripts from Turkish to English as mistranslations can affect the findings process and the meanings of the participants’ words. Many of the participants’ expressions of their feelings and thoughts can be better understood in their first language as they often used phrases and sayings in Turkish. In this sense, the translation might have lost
original expressions. However, most of the participants’ responses were accurately translated. In addition, my proficiency in Turkish and professionalism played an important role in my objectivity when presenting the participants’ voices.

Birbili (2000) highlighted the importance of the translators’ knowledge of the participants’ social and cultural backgrounds when studying migrant communities. Similarly, Smith (1996) described translation of the data as a cultural construction which is strongly linked to the researchers’ knowledge, not only about participants’ language but also social and cultural backgrounds. My reflexivity was helpful to translate and present the data in more accurate ways as I recognized the influences of gender, race, class, religion, culture and other social structures on the data collection and data analysis process (Temple, 2008). Therefore, reflexivity and having knowledge about participants’ social and cultural backgrounds in the domestic violence context allowed me to avoid misrepresentation and not lose the meanings of the texts.

Studies about the methodological challenges that exist when addressing engagement and experiences of perpetrators in intervention programmes are limited in the context of DVPPs (Holdsworth et al., 2016). This research strives to consider participants’ socio-cultural characteristics in the research questions. However, this consideration might take time in terms of building relationships with participants during the recruitment process. Generalisability, credibility, reliability and building rapport and trust with participants are the key limitations of this research. However, strategies for providing reflexivity have decreased these
potential weaknesses. These strategies include debriefing sessions for participants and triangulation.

Summary

The central concern of this chapter has been to present the main approaches of the methodology and how to apply them in the research design and process to examine –Turkish men’s engagement in domestic violence intervention programmes. Intersectionality and feminist-informed gender theories are core in building a conceptual framework to understand participants’ meanings of their engagement in interventions. Throughout, I have critically reflected on the theoretical and methodological bases of this chapter and emphasised the importance of intersectionality and feminist-informed gender theories as an organising concept for expanding our understandings of engagement among perpetrators of domestic violence in interventions. Importantly, the application of feminist research and thematic analysis highlights the importance of giving voices to Turkish perpetrators while providing analytical writing, building the data and categorising patterns of an interview transcript through a coding process. Thus, an interpretive approach helps to conceptualise the meanings and experiences of participants by developing a report of the data analysis.

I have clarified the ethical considerations in order to provide a safe environment for the researcher and participants. I have been aware of my potential feelings of anger or being judgemental, and I have been respectful of participants’ choice not to respond to some questions. I have reflected upon the ways in which my values, beliefs and experiences shape my research process by illuminating the complex intersections between ethnicity, race, culture, gender, socio-economic
status and religion. This chapter concludes by stressing the importance of providing respectful, safe and open communication, empowerment and a non-exploitative environment to ensure a successful research process. Results and findings of the interviews are presented in the following chapter.
Chapter Four: Findings

Introduction

In this chapter, I present the analysis of the findings from the interviews with Turkish men who have been perpetrators of domestic violence and professionals who have worked with them. I will clarify three major themes, and their subthemes as revealed by the dataset (see Figure 3).

Figure 3: Major themes and their subthemes

While the themes and their subthemes are illustrated in both datasets, the ways of expressing these themes are different. Therefore, under each of the three themes, I will present first the findings from interviews with men, followed by the findings on professionals’ views and experiences on men’s engagement.

The factors of Turkish men’s engagement in interventions

Three core themes emerged: initial engagement linked to culturally-sensitive approaches, patriarchal dynamics, and the process of taking responsibility. I will start by presenting the Turkish men’s feelings, views and actions in the process of their initial attendance in interventions, and examine their interactions with professionals, their wives and children. After presenting key issues of initial engagement, men’s patriarchal values, including masculine identity, the influences of patriarchal community, blaming women, and male dominated
gender roles are clarified. I will show that the concept of patriarchy in the Turkish community is linked to men's gendered power relations and male privilege in families. These are important social and cultural circumstances in understanding men's engagement in interventions. The final part provides an overview of theme three which clarifies how the Turkish men engaged in taking responsibility for their violent actions by focusing on their application of anger management techniques, time-out and empathy skills.

Theme 1: Initial engagement linked to culturally-sensitive approaches

This section provides an overview of how the Turkish men constructed domestic violence interventions at the beginning of their participation. Examining the men’s experiences at the initial stage helped me to understand how their race, class, gender, immigration status and culture interconnected with their initial feelings and thoughts about interventions and how they interacted with professionals. Understanding the initial stage of engagement is vital in determining the reasons for the men’s participation in interventions. While eight out of nine men felt hopeless and were unwilling to attend therapeutic support at the beginning, community members, friends and public stigma affected the men’s regular participation in interventions.

Whilst the men identified how their social and cultural background impacted on their understanding of interventions, the professionals described how they built trust and rapport by considering the men’s unique socialisation process in their home country and the UK. This consideration has been emphasised as a vital step to provide a safe and empathetic environment for the men. Many professionals reported that building a trustful relationship with the men increased
their engagement dramatically. Therefore, understanding the men’s social and cultural backgrounds was identified as an essential factor for increasing their engagement in interventions. However, this process is complicated because of the diversity in the Turkish community. Key dynamics will be discussed in the next sections in order to have a better understanding of the men’s lived experiences at the initial stage of engagement in interventions. Based on the interviews with the participants, three subthemes emerged (see Figure 4).

Figure 4: Theme 1 Initial engagement linked to culturally-sensitive approaches

Perceptions of interventions

Based on the interviews with the Turkish men and professionals, I perceived that men’s insufficient information about interventions impacted on their involvement in interventions. For instance, the majority of men attended interventions in implicit ways. These implicit ways of participation (their friends or social services having referred them to participate in an intervention) meant that the men were not necessarily aware of the meanings and processes of interventions and they did not directly accept their actions as violence. Additionally, such implicit participation meant in many cases that the men had negative feelings and expressed ambiguity about the process of interventions. At the beginning, many
men perceived that they did not need therapeutic support. The quotes from Ali and Kaan on this are given below:

Social services referred me because they thought the parenting programme might help.
When my anger was noticed by the people around me, they suggested I get support. They told me that seeing a professional would probably decrease my anxiety and stress a little bit, and therapeutic support could help to reduce personal problems.

As we can see from the quotes above, social services, friends and relatives impacted on some men’s participation in interventions. Therefore, receiving appropriate information or tools from social services and friends about how to get involved in interventions was a helpful way of the men stopping their abusive actions.

As stated, many men were not aware of the meanings of the intervention at the beginning of their participation. For instance, at the initial stage of the interventions, they described intervention as a conversation. Likewise, a few men described the process of the intervention as one that would be relaxing and where practical suggestions would be given. Insufficient knowledge around therapeutic support was linked to their social class. The following two extracts from Eren and Ege provide some insight into how they perceived the intervention process:

I haven’t seen such improvements. I went to the psychiatric clinic and had a conversation with someone.

The conversations I had made me relaxed and it seems beneficial to share all of your experiences and get some suggestions. I guess the most beneficial thing was making me feel relaxed one day a week. I can say that it was like relaxation therapy.

While some men perceived an intervention as a conversation which means having a regular talk and not a professional therapeutic process, a few men attended interventions in the awareness that this was professional support in order to achieve a non-abusive, intimate relationship. Having private therapy
sessions and making a payment also impacted on their views about the interventions. For instance, Mert experienced this issue:

The goal of couples counselling was to learn different perspectives. If this did not happen, we would not continue to attend the sessions. You do not go to therapy in order to drink a coffee and have a conversation if you are paying a great amount of money.

Given the men’s different views about the meanings of the interventions, their expectations of the interventions also varied. For example, a few men (e.g. Eren, Cem and Alp) were used to attending mental health services and taking medicine for their physical and psychological health so they expected to take medicine to achieve the same sort of quick resolution during domestic violence interventions. However, during the sessions, Eren learned the difference between physical and behavioural treatments by highlighting that:

The doctor told me therapeutic support was not like treating a toothache or headache. It was not like taking some medicine for a couple of days and then getting better. This trouble [violent behaviour] came from experiences over a number of years so he told me that it was going to take some time.

The men often attended interventions after having them recommended by others, only learning about the meanings and benefits of the therapeutic help during the process of interventions. In the extract below, Kaan stated that his awareness about his actions increased in the intervention process:

I attended private couples counselling based on recommendations. I recognise that my awareness about couples counselling increased over a number of sessions.

Many of the men reported that they felt nervous about getting involved in interventions due to stigma in the community. Half of the men shared how public stigma impacted on attending interventions in the Turkish community. For instance, Eren expressed that:

When I say I am seeing a psychologist to people at my level [low paid workers], they ask whether I am mad because people immediately think about being mad when you say psychologist. This is not the case. If you do not solve a problem then bigger problems follow.
We can see from the participant’s words that community members often perceived therapeutic treatment as inappropriate for them. This was often associated with their social class as they lived in a community that stigmatised attending therapeutic support to achieve a healthier intimate relationship. Additionally, perceiving domestic violence as a private matter in the community increased their reluctance to attend interventions. Social stigma and the community members’ lack of knowledge about therapeutic support impacted on his reluctance to attend interventions at the beginning. Similarly, due to inadequate knowledge and negative bias about interventions, six out of nine men felt hopeless and unwilling to participate in interventions at the beginning. The feelings of hopelessness stemmed from their lack of knowledge about the value of interventions. In the extract below, Kaan shared his initial perceptions about the intervention:

My wife and I were planning to attend couples counselling for one session. We were prepared to try, but at the same time there was a feeling of hopelessness. I mean, we already realised the suggestions from a therapist before we attended. We knew that the therapist was neither a magician with a wand to change everything nor a doctor with medicine to heal you. These things are not like that; you think that these things [domestic violence or relationship problems] are solvable by yourself. So, you are not going to the therapist with hope.

According to men’s accounts of their initial perceptions of interventions, seven out of nine men had not known the meanings of the therapeutic treatments. Even though most men felt hopeless and reluctant about attending interventions, in the process of their participation a few men learned the meanings and benefits of interventions. Not perceiving that they had a problem, as well as insufficient knowledge and public stigma about interventions played a significant role in shaping men’s initial participation in interventions. These issues around
insufficient knowledge about interventions in the UK and social stigma were associated with their migration experiences as well as social class.

Given the experiences of men’s initial participation processes, this section moves on to present professionals’ views and experiences about how Turkish men initially engage in interventions. While some men had insufficient knowledge about interventions, many professionals described the importance of psycho-education because they teach key concepts of interventions to men. Professionals pointed out that clarifying their roles and men’s roles in interventions allowed the men to realise the boundaries during the sessions. This initial psycho-education helped men to decide whether they could commit to attending the sessions. The extracts from Pelin and Ebru, two practitioners, on this are given below:

First of all, it [domestic violence intervention] requires a lot of psycho-education in therapy because people do not know the benefits and the processes of therapy. They call therapy a conversation. This means that I need to spend a lot of time explaining what therapy is and what happens in therapy throughout the psycho-education.

They are a little bit scared; they are not sure what they are expected to do. So, what I do is explain my role; I do a bit of psycho-education with them. What I mean is I explain what psychotherapy means, why they come, what it means for them and to me. If they want to work with me, they commit themselves. The initial assessment is about exploring their issues and helping them decide whether it will be beneficial for them or not.

As seen from the quotes above, professionals observed how men felt ambiguity about the interventions and this increased their discomfort about engaging in the process. At the initial stage of the interventions, many professionals challenged the men to make an effort to understand and face up to their violence. They also made it clear that the need to stop their violent behaviour was not for the purpose of the courts, solicitors or other people, but to allow the men to focus on their own feelings in interventions. For instance, Laura, a practitioner, remarked that:
The first session is very much about working with them in a way that I can establish whether or not there is a secondary gain. Or, I ask, ‘are you doing this [attending therapy] purely for the court or are you doing this to motivate yourself to change your behaviour?’

According to the professionals’ accounts, many men felt that getting support showed weakness on their part so they completed few if any of the sessions. According to professionals’ perspectives, men are expected to address their issues by themselves due to their masculinity. This was a factor in men’s reluctance to attend the sessions. In holding these patriarchal concepts, half of the men felt that they should solve their issues without applying to support services. The men’s desire to avoid being seen as weak in the sessions was a key concept that impacted on men’s engagement. Laura, a practitioner, tried to make men aware that attending therapy does not mean that they are weak individuals:

Because you are a man in therapy it doesn’t mean you are weak. It is ok to speak to a therapist and talk about your feelings.

Due to the men’s fear of showing their weaknesses in sharing their struggles with professionals, many of the men tended to define themselves as dominant and knowledgeable individuals. Because of this expression of maleness, they rarely applied for support.

Some professionals stated that the men’s initial feelings about attending therapy are linked to their maleness in the community. In terms of these perceptions and feelings around being a man, professionals reported that many men often avoid regularly attending interventions. Likewise, Sezen and Ayla, two practitioners, stated that men are unwilling to spend more time in interventions because they perceive that they will become dependent or weak over a long period of participation:
Getting support from a counsellor is a last ditch action. They behave in a high-handed way. To be honest, the men don’t think that the therapy will be beneficial for them. It is only when a close friend, someone close to them, advises them to attend therapy that they finally do.

They need to make the effort. When they realise that, they don’t want to change. They sometimes want to drop out of the couples counselling and work on their problems by themselves. I say detective work [should be applied] as they are able to discover things about themselves that they don’t know.

According to the professionals, men’s perceptions on initial participation in interventions were linked to some complicated circumstances, including insufficient knowledge about interventions, masculine identity and influences of social and cultural backgrounds. Reluctance and feelings of hopelessness about interventions were important experiences among the men but a few of them shared how they learned the meanings of interventions and benefited from regular participation. From the professionals’ point of view, psycho-education and putting aside the men’s masculine identity were presented as core work in increasing their engagement. In essence, analysis of the factors in interventions shaping the men’s engagement was related to culturally-competent approaches. In the following subtheme, I will provide a detailed analysis of how culturally-sensitive practices have impacted on the men’s relationship with the professionals.

Relationship with professionals

Given the men’s perceptions and feelings about interventions, their relationship with the professionals played a significant role in understanding how they increased their engagement in interventions. Some of the men felt that the professionals did not take into account their social and cultural backgrounds. In highlighting this frustration, they also clarified that they received inappropriate suggestions. For instance, participating in sports or taking a break and going on holiday are some of the suggestions that did not make sense to some men (e.g.
Cem, Eren, Orkun and Ege). Likewise, their lack of confidence in the benefits of the interventions was shaped by professionals’ inappropriate suggestions to them. The extract below was from a man, Cem, who attended therapeutic support by non-Turkish professionals, in which he described their lack of culturally-sensitive practices:

The advice given is normally along the lines of drinking a couple of glasses of wine and relaxing. They can’t help you if they do not understand religion. They don’t have anything to offer.

We can see here that Cem was frustrated by hearing some suggestions that went against his social and religious background. In addition, Efe shared how he mistrusted the professionals:

The knowledge that they are giving you is not satisfactory. I mean it is not satisfying. You do not even trust what he/she is telling you.

This was linked to Efe’s migration experiences as he felt mistrust for UK public services. Some men shared their satisfaction from building trusting relationships with professionals who were aware of their religious and cultural backgrounds. Many men mentioned how they felt comfortable in having a culturally competent or Turkish professional. When the men felt understood, they did not feel the need to explain the meanings of their actions related to their racial and cultural backgrounds. For instance, Ege, a participant indicated that:

Of course, I think it is so important to take help from a person who is Pakistani if you are from Pakistan as [someone of the same nationality can understand my problems/issues more clearly].

Being a migrant or Turkish born led half of the men to perceive themselves as worthless because they felt alienated from the system in the UK. This alienation caused the men’s unwillingness to seek support in order to end their abusive relationship with their partners. This was about migration experiences. According
insufficient culturally-competent services made them perceive interventions as procedures that did not consider their feelings. Efe stated:

The counselling is a formality. . . . It is clear that [iki kere iki dört] we are not people who are from this country. We are not much valued [compared with people who are originally from England]. . . . Okay, the doctor invites you [to attend counselling sessions], but there is no relationship. They are just following procedure [Kağıt kürek işleri işte]. In other words, you have this problem so take this, and then return this to me etc. . . . It is not very reassuring. It does not make you relax psychologically.

As we can see from the extract, Efe’s feelings of alienation in interventions derived from getting support from a professional who does not share his ethnic and cultural background and a lack of culturally sensitive services. This alienation could be related to the type of service he received because it was counselling in a hospital setting. Moreover, his migration position shaped his perceptions about racist and discriminatory practices in the services because he struggled with completing the sessions.

As the men often attended interventions after friends’ recommendations, the experiences and words of these friends played significant roles in shaping their participation. When some men heard of their friends being satisfied by professionals’ capacity, they participated in interventions with trust and positive feelings. Hearing positive experiences about professionals’ capacity is a vital process in understanding men’s initial participation. As Kaan expressed:

People close to us [Kaan and his wife] told me that it would probably be helpful in reducing our problems and stress. They also gave suggestions on who to approach, such as, there is Miss Zehra, I know her, she is trustworthy, she is not only professional but also friendly. She is not just interested in taking your money. In addition to her professional manner, she is an individual who is willing to help and who is well-intentioned. . . . I have been referred to the couples counselling through my workplace.

As seen from the extract above, making positive comments about the professional played a significant role in the men’s involvement in private couples counselling.
Having a Turkish professional meant that the men could comfortably share their social and cultural views related to their abusive and violent behaviour in their intimate relationship. Sharing the same ethnicity and race sometimes contributed to building a trusting relationship. Receiving support from a Turkish professional was described as the most important advantage in terms of being able to share their views about cultural and religious practices. For instance, there was one participant who attended sessions with both a professional who held the same racial and ethnic background and a professional of a different ethnic and cultural background in private and NHS psychotherapy sessions. In the extract below, Ege compared his experiences and mentioned his positive perceptions in attending a few sessions with a Turkish therapist:

The main difference is that she was from us [our culture]. And as far as I know, the therapist looked like a religious person. I don't know exactly, but I do know she covered her head. Because of this she understands me better. As I said, it was about my position in the religion and culture. She is Turkish and her partner is Turkish and she can immediately understand my issues. In that way, she can see the roots of the problem.

The assumptions made by Ege above pointed to the critical issues around the relationship between being a religious woman and covering the head with a scarf because a headscarf does not necessarily mean that the person is religious. This assumption shows us how his understanding of being a religious person and physical appearance was strongly interconnected. This reflects the strong relationship between female dress code, gender, race and ethnicity. Gendered social dynamics constructed his ideas about a Muslim female therapist’s capacity to recognise his religious views and masculine position in a family setting. It is also significant to recognise the heterogeneity in Turkish communities. For instance, a headscarf has a particular significance in the
communities; secularisation and religious conservatism exist alongside each other in Turkey.

The gender of professionals may impact on the men’s perceptions of professionals’ ability to understand them. For instance, one man shared his initial bias and negative thoughts about a female therapist. In the below extract, Mert mentioned how he held some concerns about taking some sessions with a female therapist because he thought that she might have been emotional and judge him or not understand his experiences. A female therapist taking the wife’s side was identified as a concern. For instance, Mert stated:

It might be about being female. Before the session, I was thinking that meeting with a male therapist might be more beneficial as I thought that a woman may behave emotionally.

Interviewer: Do you think that it affects sharing? For instance, if she was a male facilitator, would you have shared your problems better?

I only thought of that issue [of female emotion]. She is a woman so she might take sides because of that. Otherwise I don’t have any issue with sharing because she is a psychologist. I shared my problems in a relaxed way. If I had not, it would have not worked. . . . I have spoken openly as I thought that she was the person who I was able to tell the most secret things to. As I said, I feared at first that she might take my wife’s side. This was the only thing that made me a little apprehensive. But, she did not cause a problem.

The extracts above show that Mert appeared to be aware of his wrongful acts against his wife and thought that the female professional would take the side of his wife. However, he talked about how he did not receive any judgmental comments from the female professional during the individual therapy. Gender was a key dynamic in understanding his perceptions of the role and position of the female psychotherapist and how he built a positive and trustful relationship. His strong perceptions on femininity and masculinity were important factors in shaping his initial ideas about female professionals’ lack of skills in building trustful therapeutic relationships. However, he emphasised that she was able to build rapport and a trusting relationship.
When the men learned new knowledge and skills, they realised that therapy or psychiatric help had been a beneficial professional support. This realisation increased their positive therapeutic relationship with professionals. Six out of nine men emphasised that having a professional of a different ethnic and cultural background increased their suspicion about professionals’ capacity to understand their religion and culture. In this case, many men were unwilling to share their cultural issues with him or her. Whilst a few men justified their violence based on their religious perspectives during the interview, they did not share these perspectives with a non-Turkish therapist. This was related to their migration experiences in terms of mistrust and perceived discrimination and racism in the services. For instance, Ege identified his religious ideas as the reason for his lack of engagement because he was not comfortable sharing his religious perspectives with the professional:

> The therapist was British so psychotherapy didn’t work out so well. Those sorts of people are not in a position to understand us because it is not possible to talk about religion. Even when we talked about it, it was not perceived as an important thing.

As the extract above shows, he felt that it was pointless to share his religious ideas with professionals who held different social and ethnic background as they could not understand his religious views. Therefore, after taking some sessions with a British psychotherapist, he sought out a Turkish-speaking therapist as he felt this would be a trustful relationship. Even though his religious views were important justifications for his abusive behaviour, his cultural and social background in a patriarchal community was another factor leading his coercive and controlling behaviour over his wife.

Having an interpreter in the sessions impacted on some men’s relationship with the professionals and this shaped the outcomes of the therapeutic support. This
was due to their migration experiences. For instance, one participant talked about how he felt uncomfortable having his son as an interpreter during psychiatric help. He reported how he experienced difficulties sharing his feelings and thoughts about the behavioural change process with the professional. In this story, the language barrier and having a son as an interpreter were obstacles to engaging in the sessions. As Cem stated:

My English is not sufficient for that [explaining religious issues]. We couldn’t explore that, as I said. . . . My son was acting as the interpreter. Of course, this was not satisfactory. Even though there was an interpreter, they were still my words because you add your emotions and feelings to your words when you talk about your experiences. However, by using an interpreter your feelings are not translated along with what you express. It is only about your words, as the interpreter is not able to feel what you are feeling. And sometimes I thought, I said that but that’s not what I meant.

As the quote indicates, he identified unsatisfactory conditions in the psychiatric clinic as he expressed obstacles to translating his sensitive and emotional experiences when his child was the interpreter in the sessions. This resulted in experiencing inadequate trust and rapport with professionals and dropping out of the session at an earlier stage.

Many men assumed that the mere exercise of attending therapy would be a solution in itself. They appeared not to recognise that they needed to make a lot of effort to achieve a successful result. When they did not achieve positive outcomes, they concluded that interventions were unhelpful. Importantly, those in the process of divorce concluded that the intervention was not beneficial. Therefore, they often stopped taking further support and expressed their frustration at not reaching their goals in interventions. For instance, Ali indicated how he was dissatisfied with his attendance at a parenting programme:

Relationship problems and abusive actions are things that I came to through my lived experiences. I have already tried to solve these problems and the facilitator tried to help by teaching me the theory behind it. It hasn’t helped me because I arrived at my situation [abusive relationship and divorce] after a long sequence of steps.
The main reasons for resistance in applying some strategies included a lack of belief in the usefulness of the strategies, perceiving them as inapplicable suggestions and insufficient understanding of the nature of strategies. Not being able to apply some strategies was linked to the men blaming women rather than focusing on the application of the technique in appropriate ways. They had already held some assumptions that the strategies would not work for them. Holding this bias led them to think the strategies were not useful practices for them in interventions. For example, Cem highlighted that:

I have attended that type of thing [therapeutic support] a couple of times. However, as I said, the psychiatrist suggested I should take a break from my job or spend time away which made me unhappy.

In summary, the majority of men highlighted the importance of professionals’ competence in understanding their cultural and religious backgrounds. Holding negative assumptions about professionals increased men’s suspicions about the benefits of interventions and caused men to drop-out at an earlier stage. For instance, Efe, Cem and Orkun dropped out at the initial sessions of the interventions because of their negative perceptions about therapeutic processes. These perceptions were interconnected with their migration experiences such as distrust of public services and facing some discriminatory practices in interventions.

The main reason for seeking help from the private sector was because mainstream services had proved unsatisfactory. However, the men’s financial well-being and availability of Turkish speaking professionals in their area determined whether the men received support. The majority of professionals highlighted the importance of applying culturally-sensitive approaches. For instance, one professional, Su stated that:
I have to emphasise that Turkish men do not talk about it [violent behaviour] and their stories [abusive actions] at the beginning of the therapy sessions because of their prison experiences and feelings of shame. They have already been referred to some programmes [e.g. domestic violence perpetrator programmes] and it is often problematic. The reasons for ineffective outcomes of these referrals are: the long waiting lists, insufficient engagement of mental health workers with them, lack of understanding of the benefits of services by Turkish men, Turkish men’s inadequate motivation to change, and a short time period for the intervention process. In order to increase the effectiveness of these programmes, they prefer to attend private individual therapy sessions.

The extract above highlights the men’s resistance to talking about their violent actions and the consequences on their family members at the beginning of the therapy sessions because of their feelings of shame and guilt. Moreover, Su emphasised the importance of applying long-term interventions because men only start to talk about domestic violence after building trust with a professional. This reluctance stemmed from their negative experiences related to their migration position. When the men were referred to an intervention by the court or social services, they mostly perceived professionals as representing the authorities. According to the professionals, this perception stemmed from their fear of receiving judgmental comments during interventions. However, these assumptions were temporary because many men were able to understand the non-judgmental environment in interventions. Therefore, throughout the intervention process, it is important to project a positive and safe therapeutic environment. Ziya, a practitioner, clarified this issue by emphasising that:

If the person is referred by someone, he comes to the therapy with bias because he thinks that all of them [therapists, facilitators] are figures of authority who will try to change him as he did something wrong. So, he creates an idea that these people [psychotherapists] will try to change him. However, having a positive attitude and being empathic reduces and can even stop their bias.

This resistance was mostly related to the men’s previous experiences around racism and discrimination when accessing services. Professionals highlighted that men’s negative feelings about interventions can be removed by explaining that the service is confidential and by building trust. The majority of professionals
clarified how they could help them and not report or judge them. When perpetrators felt shame due to their violent acts, they had difficulties sharing their experiences with professionals during the interventions. For instance, a few professionals stated that the intervention process might take more time because the men were nervous. As Abdul, a practitioner emphasised:

> Men are often nervous because this [violent action] could be reported to the police as is often the case. So, as a clinician, it is very difficult to build trust with the men . . . and sometimes building a trustful relationship takes more than three or four sessions before perpetrators talk about why they are involved in violent behaviour. . . . Their inability to speak in English is the problem. When the interpreter is a good interpreter, that creates trust and they will open up to me. I have often seen that.

As we can see the extract above, when interpreters were involved in interventions, men became more anxious about information leaking out in the community. In this case, a few professionals stated that the men needed to build trust both with the professional and the interpreter. A few professionals highlighted that a good interpreter plays a significant role in building trust and rapport. One practitioner, Abdul, pointed out that the interpreter’s knowledge about confidentiality was vital to provide a safe place for the men:

> If they do not speak English well, I reassure them. The interpreter is involved in the session, but the presence of an interpreter in sessions can be problematic. They worry about confidentiality which is understandable.

As the extract above shows, confidentiality can be questioned when an interpreter is involved in the session. For example, the participant experienced difficulty in sharing their experiences when an interpreter was present in the session because of the concerns of confidentiality. However, a few professionals in this research stated that the interpreter should be knowledgeable about confidentiality during the therapeutic work. For instance, Su, practitioner observed:
In order to offer more effective services, the therapist should be bilingual or have an interpreter if the client has a language problem.

Not all Turkish men needed to have linguistically-sensitive programmes because many second-generation Turks can speak English well; a few of the professionals pointed out how some of the men spoke in English during the sessions with a Turkish therapist. However, professionals highlighted how others switched to Turkish while explaining their more sensitive and emotional topics. Therefore, linguistically competent interventions appeared to be important. For example, Cansu, a practitioner, stated that:

Because they [three clients] speak English very well, the sessions have been mostly in English. . . . And sometimes if they find something difficult to express because it is sensitive, they go back to Turkish. It is a mixing of languages.

The men’s relationship with professionals was linked to their perceptions which were created by their cultural and social backgrounds. These perceptions of professionals impacted on the men in the way that they called them sisters or teachers. A few therapists noted that the men perceived a hierarchy which was indicated how they addressed them. This acceptance of hierarchy showed their trust in the professional’s capacity and role. Two professionals, Pelin and Laura, shared that:

He is calling me Miss. This is perceived as the formal way. They call me abla [sister]. . . . So, of course, I examine what they mean by that as I work with them so closely. Or we investigate what they meant by calling me sister. How they feel when they say sister.

So, I need to encourage them to recognise the hierarchy that exists in Turkish culture. You know, for instance, they say ogretmen or hoca [teacher or leader] to me.

Social and cultural implications of calling the therapist sister could come from the Turkish culture of being counselled by females, including sisters, mothers and grandmothers. These cultural issues have some implications for the men’s behavioural change process. For instance, the men can perceive a therapist as a person who is accepting of their justifications for their violence rather than
challenging them to change. Calling the therapist ‘sister’ might therefore be problematic for changing violent behaviour. However, professionals reported that they informed the men about the roles of therapists in order to reduce misrepresentations during the sessions.

According to the professionals’ accounts, many men were able to start to share their private experiences and engage in implementing strategies well after building trust. They emphasised their responsibility to provide a safe environment which removes the men’s feelings of shame. It was critical to understand key circumstances around building trust with the men which included providing confidentiality and being aware of their social and cultural backgrounds. For instance, Laura and Su, two practitioners, observed:

Each person is very, very different. Some of them are very ashamed; there are elements of shame attached to coming to see me. There is an element of embarrassment and it is obviously my role to facilitate an environment for them where they can feel safe enough to talk to me about things that may be shameful for them.

Trust and confidentiality are very important. You need to be sensitive in such areas which are so important for them, including trust. Spirituality is important for some of them but not all. It is necessary to respect that and to establish trust.

As seen from the experiences of the two professionals above, providing confidentiality and safe environments were key circumstances in increasing men’s engagement. Furthermore, professionals’ knowledge about Turkish men’s cultural and social backgrounds was identified as an important indicator of the men’s engagement. This was related to the men’s migration experiences. Providing a safe environment was recognised as another promising condition for men’s engagement. As two professionals, Su and Laura, stated:

Of course, bias exists among some clients. Yes, breaking this bias is not easy. An advantage I have in relation to this is my knowledge about Turkish people’s socialisation process in Turkey. I also know their socialisation process here [in the UK]. I can understand their experiences due to this. This helps them to relax during therapy sessions.
I am a professional; I may be British but I understand Turkish culture. So, [these are] the strategies that I use to understand them. I understand Turkey and I understand Turkish problems. I understand diversity within Turkey and the cultural groups that exist, you know, geographically.

A few professionals highlighted that many Turkish men struggled with adapting to the UK because of the different culture, language and system. In the extract below, one professional made an important comment on the ways in which Turkish men’s culture is a more important dynamic than their religion. Even though the professional held the same religion as the man, culture was described as a significant factor in building trust and rapport and understanding their unique views and constructions of the events. The importance of cultural similarities in building trust with the men was related to the men’s class and migration experiences. As Abdul, a practitioner, observed:

They are Islamic people but they don’t have trust in me. . . . We may both be from the same faith but to me the situation is cultural. The cultural paradigm becomes more important than the religious. Language and culture are the big barriers [in building trust with them].

The Turkish men’s culture and professionals’ culture played a significant role in understanding men’s engagement in interventions. According to the participants’ experiences, the greater the cultural distance between the man and the professional, the greater the difficulty in building rapport and trust during interventions. Therefore, a cultural boundary separated the professionals from the Turkish men because intervention approaches often did not take into account the influence that the Turkish men’s social and cultural backgrounds had on engagement in interventions. A lack of trust between the Turkish men and statutory services was important in understanding the rationale for men’s involvement in private counselling services run by Turkish professionals.
Likewise, the men’s experiences as migrants in the UK were important as many men had lost their trust in the system. This negatively impacted on their future involvement in a programme. However, the professionals who held different ethnic and cultural backgrounds from Turkish men in this research highlighted that they were aware of the men’s cultural and religious context. Even though all my participants, bar one, held British citizenship, many had poor English communication skills. Therefore, some men often gave language problems as a reason for not attending services run by non-Turkish speaking professionals. These issues were linked to men’s class and migration status.

Resisting defining their actions as domestic violence

Perpetrators in this study did not define domestic violence in simple terms and often minimised or normalised their violent behaviour while describing how they were unwilling to attend the sessions or dropped out of the interventions. All the men experienced obstacles in naming their actions as domestic violence during interventions. Some men expressed feelings of ambiguity about whether their fathers’ violence was wrong. For instance, even though half of the men expressed how their fathers loved them, they failed to identify the fathers’ abusive behaviour as wrong. Efe shared that:

> We were beaten by our father. He beat us but this is not about his lack of affection for us. . . . Actually, it was wrong to beat us. It [the fathering practice] should be done without beating, but it sometimes happens. Slapping as a warning is not bad if it is restrained, but that is not acceptable in the UK.

In the quote above, Efe rationalised his father’s violent behaviour in his social and cultural context. This participant had difficulty with identifying his father’s abusive behaviour as domestic violence. He was not clear whether his father was a positive example of a fathering role. In addition, he blamed the legal
system in the UK because of the lack of tolerance of the fathers’ violent and abusive behaviour towards their children.

A few men mentioned how they struggled with examining their abusive actions before they attended interventions. The majority of the men perceived domestic violence as only physical violence. They had not been aware of psychological, financial, sexual or emotional violence, or coercive and controlling behaviour. One participant highlighted how he struggled with identifying his actions as emotional abuse until he learned his wife’s feelings and thoughts in interventions. As Kaan expressed:

> Before you start to think that there is a problem, you try to explain why you did not see it as a problem. It [abusive action] not being seen as a problem might be about your characteristics because it is normal based on your personality. It [abusive behaviour] might be perceived as normal, an ordinary thing, but it is not like that for the other side [his wife].

Some men described their positions based on their violent behaviour in two different ways. First, they identified themselves as non-violent men in their current position. Second, they hardly talked about their previous abusive acts, putting some distance between their current and past selves. Therefore, different perceived identities in terms of their past and current experiences were constructed during interviews when they talked about their engagement in interventions. In the extract below, the participant mentioned that communication is the best way of solving problems but he stated that men often avoided opting for healthy communication in a calm way. Efe emphasised how he struggled to remain calm during discussions with his ex-wife:

> I have always been an empathic person. I did choose the wrong partner; I met such a person. I behaved based on that [having the wrong partner]. I did not say such bad words like you are a donkey or others. I never forced her to do anything. I just left her alone. I became aware that it was wrong and that in a healthy intimate relationship things should not have been like that. When I realised that beating or doing such things was not working out, I gave up being in that relationship.
Even though a few men were able to describe their abusive actions during violent events, they would not take responsibility for their violence. They blamed the legal system and did not see their actions as wrong. This was often related to their migration experience as they always compared the UK legal system with the Turkish one. For instance, one man had many complaints about the police officers’ attitudes towards him. Ali refused to accept that his actions constituted domestic violence:

My daughter came to hold me from behind to stop the fighting. Look, how old was she? She was three. At the moment she held the t-shirt it tore. While she held the t-shirt, I spanked her with the anger of that moment; I did two spanks on her bottom. So, she said ‘He beat me’ to the police.

A few men mentioned how they resisted accepting their violence while continuing to attend regular intervention sessions. While they realised their need for support in order to develop a healthier relationship with their wives and children, they could not fully take responsibility for their abusive actions. They claimed that their psychological problems and job or family related factors had been important events in their struggles to build a respectful relationship. For instance, Orkun said that:

We do not accept the need for support. I am saying that I am good [psychologically]. Yet, I also know that I am not good. This means I lie to myself.

In the extract above, Orkun tried to explain why he did not attend the regular intervention sessions by emphasising his lack of acceptance of his wrongful acts.

Half of the men looked for appropriate and effective options in order to stop the abusive relationship by listening to individuals who experienced similar issues. In these efforts, they tried to follow their approaches and experiences in solving their relationship problems. The men felt powerless during these violent events so they sought some help from social networks and relatives. They experienced
confusion in identifying whether their actions were right or wrong. In order to remove this confusion, they tried to understand the best alternative for solving their abusive actions. As Efe shared:

I wondered whether I was wrong or right. As I pointed out, my friend might have the similar faults but that person might have solved his problem with a different strategy.

However, Efe also denied his violent actions by clarifying why he was unwilling to attend the sessions:

My friends and my doctor suggested that I talk to a family therapist and psychologist. I personally did not want that. I did not think that we were in a situation that needed therapy. Our people [Turkish] are often reluctant to attend therapy. I did not go to all the sessions either. However, this did not feel like the wrong thing to do. I really perceived that I did not need it.

Because many men became involved in an intervention at the final stage of a family crisis or violent events, they were not fully aware of the meanings and benefits of interventions. The men also often held feelings of confusion and frustration about their inability to describe their actions as violence. Importantly, the men’s beliefs that they were right about violent events prevented them from seeking professional support to achieve a healthier and more respectful intimate relationship. Based on the men’s accounts, the intergenerational cycle of violence which was responsible for passing on violence from generation to generation was identified as an important concept for normalising violence. In addition, lack of awareness of verbal, sexual, financial, emotional violence and controlling behaviour increased the men’s difficulty in describing their actions as domestic violence.

Many professionals identified the reasons for men’s initial attendance as physical complaints or anger issues. They emphasised that domestic violence was considered a secondary consideration as many men did not accept their actions as domestic violence. For instance, Su, a practitioner, observed that:
I should say that Turkish men mostly seek professional help for their physical complaints as a result of their anger and stress. There are a few different reasons for attending the sessions. For instance, their wives seek help. I also worked for the NHS and some of the clients came to the sessions because they had a physical complaint linked to their anger. They often only attended the sessions when they were in crisis.

As seen from the quote above, some women took the responsibility for seeking appropriate therapy or interventions for their violent husbands. The men’s involvement in interventions in this way illustrated how they were unwilling to attend interventions because of their minimisations or denial of violence. On the other hand, the wife’s encouragement to become involved in interventions motivated men to participate in therapeutic support.

The majority of the professionals emphasised that men minimised their violence and described their abuse and violence as not serious. These minimisations have been identified as important concepts in understanding men’s inadequate engagement in interventions. The extracts below show how Cansu, a practitioner, observed the men’s lack of awareness of their actions as domestic violence:

They think what they said, what they did, is okay. They don’t see they are doing anything bad. They do not comprehend anything [about domestic violence]. So, they disclose something about the domestic abuse, but they actually think that their experiences are just a result of past trauma. . . . They don’t understand that domestic violence is a specific problem.

Many professionals stated that while many men shared their fathers’ violence during interventions, they could not accept that this had been wrong. Likewise, witnessing domestic violence from their parents or relatives during their childhood was mentioned as an important factor of the men’s inability to describe their actions as domestic violence. The professionals identified these experiences as a lack of engagement because violence had been normalised for them. For instance, Ayla, a practitioner, shared how difficult it was for the men to
reframe their views about domestic violence because it involved changing the way they thought about their parents and their parenting roles:

So, I think that the powerful person treats the weak person like that [abusively]. Then when they [weak people] have the power, they do the same. In order to understand that person, you really need to go back a generation and realise their parents' wrongdoings. So, with this guy, I was talking about some problems and his father had treated him badly. I mean he loved him but he also beat him very badly.

Normalising and minimising domestic violence prevented the men from naming their acts as domestic violence. Therefore, the men's own cultural backgrounds impacted greatly on their understanding of what constituted domestic violence. As a result of resisting calling it violence, many men attended sessions presenting other related problems including alcohol abuse, divorce, physical complaints, anxiety and panic attacks. Despite these different representations of their situations, domestic violence was the main issue behind these external factors. Many of the men had obstacles to realising domestic violence not only includes physical but also emotional, financial, verbal and sexual violence. Increasing Turkish men’s understanding of their privilege and power status in their intimate relationships was a vital part of increasing their awareness around how their acts were abusive. Patriarchal dynamics have been strongly linked to men's culture and I will set out how patriarchal concepts have impacted on the men's engagement in the next section.

Theme 2: Patriarchal dynamics

The concept of patriarchy emerged as a core theme in the data from Turkish men and professionals as they mentioned that patriarchal dynamics impacted on men's engagement in interventions. Most men justified their violence by citing the influence of patriarchy which was linked to their insufficient engagement in interventions. Likewise, the majority of professionals stated how many men
struggled to face up to their violence and the consequences of abuse on their family members because of their strong belief in the importance of acting like a man in the family. Two subthemes, including tolerance of violence in the patriarchal community and masculine identity, were linked to the blaming of women and the emergence of male dominated gender roles (see Figure 5).

Figure 5: Theme 2 Patriarchal dynamics

Masculine identity is built upon the breadwinner role, long working hours and tolerance of male violence against women. Blaming women arose frequently in the men’s stories. The men often blamed their women for their lack of engagement in interventions. They perceived the intervention as a poor solution to their partner’s attempt to divorce. Moreover, the men blamed the legal system for their ability to seek help because women survivors can apply for and receive financial support from the UK government. In these cases, women are often unemployed and dependent on their husband in their previous marriage. This financial support increased women’s freedom and ability to flee from a violent environment. The men perceived this act as inappropriate and disrespectful towards their maleness and domination. Many men expected their wives to change and return to a traditional gender role. These expectations were linked to their violence and their struggles to take new actions as they believed that their wives needed to change. In this strong belief system and patriarchal community,
the professionals stressed the need for long term interventions in order to break this gender power relation.

**Tolerance of violence in a patriarchal community**

Many men tolerated violence against women because of their social and cultural backgrounds in a patriarchal community. In this subtheme, I will present issues related to patriarchal concepts, including breadwinner role, normalising violence against women, the influences of the patriarchal community and obstacles to adopting UK rules on violence against women. In relation to these obstacles, I will illustrate how the men often justify their violence in their family groups by focusing on patriarchal concepts, class and migration status. The majority of men perceived that earning money for their family members was an important priority for them. Within this, they mentioned how they worked long hours and so struggled to find enough time for their children and wives. Many men (e.g. Orkun, Efe, Alp, Mert and Kaan) stated that they worked long hours and this was described as a justification for their reluctance of implementing some strategies in their lives. For instance, Orkun stated that:

*I cannot implement appropriate parenting practices when I am here while at work in a restaurant. I mean this is not the way to look after kids well. It is not possible to communicate with my wife or develop a positive relationship with the family because of the long working hours. Thus, what we are doing is not adequate. This applies to all of us.*

The extract above illustrates how Orkun generalised his lack of parenting skills to other Turkish men. In addition, this generalisation made him normalise his abusive and violent behaviour. The men frequently referred to their heavy work schedule and were unable to understand their wives’ stresses or problems. This was a social class issue. They perceived that their wives’ expectations were impossible to meet because of their long work hours. For instance, Cem
perceived his wife’s desires as impossible to meet and he became more abusive because he felt powerless and blamed:

I am okay with the problems at my work but I wish that they were understood by my wife. For instance, a person’s day at work is not the same each day and my wife should be able to understand that. However, she just focuses on her problems. When I talk to my wife, she tells me that I never have enough time for her and I show the kids little affection. However, after I close the restaurant at 11pm, there is still an hour for the cleaning. Who is going to be awake at home at midnight? When she talks I feel like I would prefer to be sentenced to death.

Being a low paid worker in a restaurant impacted his perceptions not only about his wife’s roles but also his own responsibility for his abusive actions. Many of the men described their wife’s position in the marriage as dependent on them. However, they did not perceive gender equality in terms of responsibilities. Many men had far greater expectations of women. Some men were aware of how their wives did all the housework and had taken on many responsibilities in the relationship. However, men often identified social pressures as an excuse for not taking responsibility for the violence in their intimate relationship. The men also stated that it was the community that had created gender role divisions between men and women in the family. They perceived that women needed to take on many of the responsibilities at home. Because of this, if anything went wrong in the family, men automatically blamed women. For example, Efe expressed that:

There are more responsibilities for a woman than a man. It [the division of the responsibilities among spouses] should not be like that. But there is pressure from the community and family to maintain the status quo. They [the community members] say that women are responsible for the house and family. Of course, they never focus on the men’s responsibilities. Therefore, it [the situation] is about being a man. I do not agree with this idea and I do not have such a personality. I perceive that everything is equal with my wife. Everything is equal with her like my income, feelings, food, bed, clothes and everything. Some issues get so difficult for us due to this. . . . Should we [Turkish men] change or integrate into UK culture. . . . I actually do not support that. We are good and it [cultural tradition] should be maintained as it offers good values. However, it has led to this situation [abusive actions and divorce].

As we can see here, the participant experienced some confusion in expressing his Turkish and British identities when describing the roles of wife and husband
in families because he moved to the UK when he was a child. In this cultural conflict, he emphasised the importance and value of maintaining Turkish traditional gender roles and resisting integration into UK culture. These complex feelings and thoughts around his difficulties of completing the sessions were associated with his migration background and gendered social dynamics.

Some men felt that they knew everything about the relationship with their wives because of the time they had spent with their wives. Many men perceived a great number of years of living with their wives as proof that they should be able to solve their problems by themselves. As a result of this perception, getting support from professionals did not make sense to them. As Cem shared:

> We got to know each other over time. We have been married for 14 years. I have thought to myself that this is her character and she won’t change. I start to look for coping strategies so that the relationship can continue.

As illustrated in the extract above, Cem tried to find alternative ways of being non-abusive towards his wife by stopping his coercive and controlling behaviour. However, he blamed her even though he emphasised how he was a non-violent man.

The influences of relatives and extended family members on the men’s intimate relationships were important in understanding their male domination and honour. Many men experienced poor relationships with their friends. In addition, they lived in close proximity to their relatives and Turkish people and had daily interactions with them. Efe pointed out how this network sometimes becomes problematic:

> In general, the stressful events are: financial problems, difficulties of adaptation and homesickness in the UK. When these three come together, everything falls apart. We [Turkish families] always take heed of what our mothers, uncles and other relatives have to say. As you know, we have a feudal structure. We [Efe and his relatives] are strongly
connected to each other as a family. We have at least three uncles and two aunts and when all these people start to criticise my marriage issues, then problems arise.

In the quote above, the participant perceived the challenges of adopting a new culture as a reason for his violent behaviour towards his previous wife. These challenges were inextricably connected to his social class and migration experience. Due to these obstacles, he struggled with accepting his violent actions as wrong and taking responsibility.

A few men shared how their parents’ opinions impacted on their choice of wife. This was a complicated factor in understanding the reasons for abusive relationships because pressures and expectations from parents were linked to their social and cultural backgrounds. Therefore, some men married women because of parental pressure. Other men married their own choice of women but domestic violence arose because of their traditional gender role expectations. For instance, one participant chose the woman he wanted to marry even though his family members were against that marriage. According to Ali’s accounts, his parents did not have a violent relationship but his mother had fulfilled her traditional gender role. Coming from this family structure led him to expect his wife to act in the same way as Ali mentioned:

There was a problem because I made this big decision about marriage. My whole family, all my brothers, even my father, were against my decision. They told me not to go back and that the marriage would not work. They argued that this was not how we behaved, both as a family and as a culture. I ignored them.

In the quote above, the participant justified his violence by explaining that he chose the wrong person to marry. However, in his story, the major issue was about strong gendered power relations and he expected his wife to act within traditional gender role. A few men realised the influences of patriarchal dynamics on their ability to understand their actions and take responsibility for them. For
instance, one participant was not able to understand his wife’s emotional needs and expectations because of his patriarchal beliefs. However, Kaan realised his patriarchal ideas on his intimate relationship during interventions, as it was a process which helped him to understand his actions as emotional abuse. Kaan realised that he perceived the root of the problem differently to his wife because of his patriarchal family background:

The problems with violent behaviour are often described within more patriarchal issues as fighting or drinking, battering and starting arguments at home because of the smallest things. However, we realised that the problem could be about less dramatic things like not understanding the person, failing to meet her expectations, and failing to attend to the relationship. Actually, they [the women] are more emotional. In family counselling sessions, we realised how we perceived the roots of the problem in different ways. Due to having a patriarchal family, we often identified domestic violence with its physical and tangible effects such as injuries to the body. And we questioned what the problem would be during the counselling.

As well as describing how the majority of the men shared their experiences and beliefs on their tolerance of violence, this section will provide an overview of the influences of patriarchal ideas in the community on the men’s engagement. Many men mentioned two reasons for their inability to establish a healthy social network. First, long working hours did not allow men to improve their social networks and lifestyle which was about working-class status. Second, a few men mentioned that they felt there was a hierarchy, and that they experienced disrespect from their social connections in the UK. For instance, Cem shared his feelings and experiences of hierarchy:

I don’t know. It might be about finances. Someone is a boss, someone is a worker. Here [at the workplace], one is the boss, one is the worker. . . . Now if the worker tells the boss to do something, the boss says, ‘Who are you? I am the boss.’ This makes you feel worthless, of no value. Even though the person might have just started work and requested some improvements at work at the beginning of his job experience, it is about developing ideas about his workplace.

As the extract above shows, Cem expressed the degrees of hierarchy in his relationship with his friends and co-workers. His relationship included power dynamics and hierarchy among businessmen, owners of the market or workers.
This showed that how their power dynamics take place in their relationships in work and other social life settings.

To sum up, Turkish men’s normalisation of violence was related to socialisation processes. The tolerance of violence included complex circumstances as all men possessed unique social and psychological backgrounds. However, patriarchal society and gendered power dynamics in a family impacted on the men’s understanding of their violence and engagement in interventions. Community members played significant roles in the men receiving support and taking responsibility for their actions. Importantly, being raised in a male dominated culture often impacted on the men’s willingness to take responsibility for their violence.

Many of the professionals stated that the Turkish perpetrators were not aware of the rules around violence against women in the UK, and that they regularly worked on increasing the men’s awareness of their violence which is based on their beliefs around patriarchy. Obstacles to following the rules were linked to the men’s culture of normalising violence against women because they have acted violently towards their partners without facing serious consequence in their home country. This migration related issue and insufficient awareness about the way violence against women is treated in the UK resulted in violence and lack of engagement in interventions as Abdul, a practitioner, indicated:

> Not many Turkish men were in area where I worked in the past. There are now more Turkish men. . . . They are not aware of this country’s culture which takes violence very seriously, especially domestic violence which is regularly reported, and when a child is involved children services are informed.

Many of the professionals noted the experiences that led to becoming a violent man. For instance, the men’s lack of appropriate parenting role models was
identified as an obstacle for men to develop a healthy and respectful spouse role. Pelin, a practitioner, highlighted how she tried to encourage the men to examine their beliefs and expectations of their intimate relationship:

"When we have no experience [healthy intimate relationship], it is so difficult to build a family, isn't it? There is no role model. . . . When there is no role model, he might understand such things [male spousal role] incorrectly. We [Pelin and her client] examined all of the misunderstandings step by step. So, he learned that his previous relationship should have been conducted in a different way.

As we can see here, Pelin tried to encourage the man to realise the process of becoming a violent man by challenging him to notice his unreasonable expectations. The majority of the professionals stated that generational violence was key in understanding why the men normalise their violence. They discussed how the men normalised their fathers’ violence against them and their mothers. These ideas made it difficult for the men to realise that violence was wrong in families. Hence, professionals believed this generational violence was a core element during interventions and so focus on these generational factors when the men engaged in interventions. For instance, Ayla, a practitioner, expressed her observations:

"So, the main ideas about violent behaviour for me were violence feeds violence. It always returns. But you know, he never told his father he had done something wrong."

According to the professionals, therefore, tolerance of violence was connected to complex circumstances such as a lack of awareness about UK rules linked to social class, generational violence and lack of appropriate role models. The influences of the patriarchal community also emerged as strong concepts in understanding the men’s resistance to engaging in interventions.

The patriarchal community has created an image of a powerful male figure in a family because the main expectation is that a man should be a strong person. Many of the professionals stated that the men mostly resist engaging in
interventions because of cultural norms on maleness in the community. Being a violent man might be an indication of maleness in some communities; therefore, the community sometimes plays a significant role in reinforcing violence against women. As the extracts of Ebru and Ayla, two practitioners, below indicate, the beliefs and assumptions of being a strong man decrease the men’s engagement in interventions as getting support contradicts these beliefs:

But they pretend they are strong, that is another problem. It is society that establishes the norms.

Why are they doing that? And they might be blamed as a man, it might be a sign of being a man; and this is what is expected of them.

As seen by the observations of Ebru and Ayla, the influences of the patriarchal perspectives held by community members impacted on the men’s violent actions. A few professionals stated that some men learned violence against women from their social networks. When the men face the police or courts, they might feel shame temporarily but generally they find it hard to believe that they have done something wrong. Throughout the process of interventions, this shame encouraged them to continue and to learn how to have appropriate and healthy relationships with their partners. As Ziya, a practitioner, observes:

Some men might learn poor attitudes from kahvehane (café) culture. Let’s say a man goes to a kahvehane and his friend says that his wife is speaking with a woman he doesn’t like and he doesn’t want her to meet up with her. And then another friend might suggest banning her from seeing the friend. The man might complain that she doesn’t listen so the friend may suggest beating her to see whether that punishment helps. He might resist this idea if he has never done it before or not witnessed it before. But then after the second time and the third time he may feel that his masculinity is being attacked so he beats her.

According to many of the professionals, the men faced obstacles to integrating in the UK because they came from a male dominated country to one which protects women’s rights. Taking on a male dominated gender role mostly prevents men from perceiving women as individuals who can make their own decisions. For instance, Ebru, a practitioner, concluded that many men had difficulties
accepting the rights of women which made the process of intervention challenging:

He doesn’t see that his wife is another individual and she can have an opinion because the majority of abusers are immigrants and are uneducated. They come from very rural areas, from patriarchal and male-dominated environments. For them, they really feel a loss of power when they come to this country. It is not easy for them.

As seen in the quote above, the class structure was critical in recognising how socioeconomic status was interconnected with the men’s patriarchal values on women’s rights and freedom in families. Culture creates individuals’ social and psychological profiles which is a very significant part in understanding domestic violence. For instance, some men accepted violent behaviour and blamed it on women’s freedom. Therefore, the majority of professionals believed that being aware of the men’s cultural backgrounds and socialisation process was key in engaging with Turkish men during interventions because this process shaped the men’s understanding of violence against women and being a man in a family and community. The men’s social networks and relatives were key as they impact on the men’s actions. Ayla, a practitioner, stated that this affected men’s willingness to take responsibility. For example:

I think their social and cultural context is very important; how other people are socialised. It [the counselling] might be about working with one person but it is not possible to control the people around them, the culture around them and what is considered normal. You really need to address those sorts of aspects.

The Turkish men’s cultural background was also related to where they came from in Turkey. Professionals highlighted that cultural and social backgrounds often shaped the men’s normalisation of their violent behaviour. In addition, coming from some specific places in Turkey was indicated as a significant factor in understanding the men’s patriarchal beliefs. As Laura, a practitioner, expressed:
And now I work with people from different areas of Turkey and that has helped me understand that they have different values. So, for example, [people from] the eastern part of Turkey, their needs will be very different from Turkish people from Istanbul, Izmir etc.

Even though the practitioner’s views about domestic violence can be perceived as regional stereotypes, patriarchal beliefs do appear to be more dominant in some places in Turkey. Forced and arranged marriage usually plays an important role in understanding abuse and the men’s willingness to change. For instance, one therapist described how a gay man became abusive towards his partner in a forced marriage. Within the patriarchal conservative family and community, several complicated circumstances had emerged. These included expectations of having a heterosexual relationship, forcing the man to marry a Turkish woman, pressure to have a baby, and blaming the woman if this proves difficult. The professional in this particular case made clear the man's power over his partner and the parents' power over him. The professionals also emphasised that guilt was a strong feeling that encouraged the perpetrators to continue attending interventions. For instance, Cansu, a practitioner, described how a gay perpetrator became involved in the therapy sessions:

But his wife was living with his family. His family was quite a conservative family. Yet, because he was born in this country and he was very anglicised, there was a clash of cultures between his family relationship and his marriage. His marriage had never been consummated. They were married seven years and they slept in the same room but he slept on the floor. But he had a job. He was responsible for his work; he was experiencing some anxiety panic attacks. It affected his work.

As highlighted by Cansu, the perpetrator became involved in individual therapy sessions due to panic attacks. He became aware of his abusive actions towards his wife after about four sessions. His panic attacks were strongly linked to the social pressures of being gay in the Turkish community. Having conservative parents was also a barrier in sharing his homosexual identity with them. These social, cultural and religious backgrounds resulted in his lack of awareness about
his abuse of his wife. On the other hand, attending psychotherapy far away from
his community helped him to complete the sessions because he was
comfortable that no one in the community was able to learn of his participation in
therapy.

Interventions mostly aim to make men aware of what constitutes domestic
violence; this subtheme has shown that the influences of the patriarchal
community, men’s power gendered relations and tolerance of violence are
barriers to the men taking responsibility. Professionals also shared how lack of
role models and generational violence reinforces violence in the community;
male power over women in families and forced marriage also impacted on the
men’s behavioural change processes. In addition, the men claimed that
patriarchal concepts in the community were obstacles to integrating into a
gender equal environment and breaking traditional gender roles. Social class
and migration experiences were interconnected with the men’s patriarchal beliefs
about adapting to a gender equal environment.

Masculine identity linked to blaming women and male domination
According to the experiences of Turkish men and professionals, it is clear that
the men’s engagement in interventions is associated with masculine identity.
This subtheme argues that blaming women and male dominated gender roles in
families are circumstances that influence men’s engagement in interventions.
The men blaming women and the legal system stemmed from their feelings of
being a victim, women’s provocations and the lack of traditional gender roles.
The men’s expectations that their partners would fulfil traditional gender roles
often prevented them from engaging in interventions. The majority of the men
justified their power and control over women by highlighting that their wives did not act appropriately based on their cultural and religious backgrounds. Although a few participants admitted their insufficient application of techniques, they nevertheless identified their wives as provokers. The extract below illustrates how Ege felt that his personality and desire to blame women were important in his inability to apply strategies learned in an intervention:

If I fully applied some strategies, it would have worked out. However, it was not all about me as she provoked me. Unfortunately, applying strategies was not successful due to my personality and the place where I came from.

As the extract above shows, the participant made a link between his social and cultural backgrounds and the reluctance to apply anger management techniques. This was related to his migration experience because many men made a connection between having UK-born partners and women’s lack of traditional gender roles and cultural backgrounds. This connection came from the men’s struggles with understanding on how women of Turkish descent followed UK culture and lifestyles. Although one participant expressed an understanding of this, he nevertheless expected his wife to follow traditional cultural values in the family. In addition, Efe expressed how he tried to teach this culture to his ex-wife:

Holding onto cultural traditions does not happen among children raised here. Their schools are different [from those in Turkey]. The passing on of Turkish culture does not happen here even though you try to make an effort to teach them their culture because the system alienates children from their family. For instance, they say, ‘Yes, you are my mother and father, but you are not everything to me.’ This is unheard of in Turkish culture. Our fathers and mothers are everything. ‘Paradise lies at the feet of the mother’, as the saying goes [Cennet annelerimizin ayaklarının altındadır: the children need to be very respectful of their mothers]. This is our attitude but people who grow up in the UK become ignorant of their cultural values.

Being scared of social services mostly increased the men’s willingness to end their violence against women and children. For instance, one participant was shocked when his little son called the police because he had yelled at him. From
this experience, the man realised that violence and abuse is a crime and that his child can report him. Because he was worried by his son’s action, he became careful in his interactions with him. The man blamed his wife for this incident because he believed that she had taught the child to do that. Likewise, this participant blamed his partner for his children’s disrespectful attitude towards him. Even though the men often failed to fulfil their fathering role sufficiently, a few men pointed to women’s lack of mothering skills as a reason for children’s disrespectful attitudes to them. The below extract shows the way Cem placed all responsibilities on his spouse:

I have a son who was about five at the time. When I yelled at him in one day, he went and picked up the phone and dialled a number. The next thing I know he is saying: ‘Come and take my daddy away.’ Where did he get this idea from? If children do not respect their fathers, it is because of their mothers. Trouble comes from the mother.

In the extract above, there were issues interconnected with the factors of Cem’s abusive actions including blaming his wife for his son reporting the violence and the long working hours as justifications for the abusive acts. A few men justified their male dominated gender roles based on Islam. For instance, they blamed women’s lack of religious practices for their violence because they claimed that women did not listen to their words properly. Furthermore, Ege made the important point that he tried to change his wife’s actions by informing her that his rights over her were based on religious ideas:

She was born here and has integrated into UK culture. Even though I explain that the things she is doing are forbidden, and the responsibilities she has towards me as her husband are based on Islam, she does not listen.

One of the biggest excuses for the men’s insufficient engagement in interventions was the relationship between their violence and culture. They felt that it was difficult to change a way of acting which was learned from their parents. Therefore, the men struggled to find alternative ways of behaving.
Essentially, if a man meets a woman’s expectations, then he is labelled weak. This was strongly connected to his social class. For instance, Ege shared how he was uncomfortable when his wife made a final decision:

I don’t know, our behaviour is very much a reflection of our fathers’ character and discipline; we adopt this character and discipline and use it in our own lives. So we can’t really help how we are. I mean I feel uncomfortable when things always happen based on a woman’s decision. I don’t want that so much. As I said we are not able to follow women’s expectations. If I was able to do that, I would probably have been henpecked for the children’s sake.

Men blame women for their use of government support when women report their violence to the police. A few men (e.g. Cem, Alp, Mert) perceived that government support is wrong because it emboldens more women to leave their husbands and seek divorce. This was identified by the men as a form of male oppression as the criminal justice system might not allow them to see their children. Being aware of women’s rights in the UK ensured that the men seek support for their abusive actions as this avoids losing their wives and children. As Cem remarked:

Such things [divorce cases] between couples inevitably exist here [in the UK] because there is governmental support for women’s rights. It could be about general attitudes women hold, the legal protection in place, and the women’s trust in the government here. Lack of respect seems to be a large part of the tension experienced by Turkish couples. It is a big problem experienced in the Turkish community in the UK. And this problem also impacts our health. I agreed to get help due to that reason, due to anger. I did things [violent actions] due to that [anger]. The doctor told me to be more restrained and to leave the room when an argument becomes heated.

The extract above illustrates that he was not able to make sense of leaving the environment due to his perception that he was in the right. Some men expected their wives to understand his situations and feelings after violent events and separation processes. As they felt that they were right, they hoped their wives would change. The reasons for blaming the legal system were sometimes related to the men’s feelings about not being heard, discrimination and racism. In
the following extract, Ali made an explicit link between not being heard in the legal system and being frustrated about a police officer’s decision:

The system never protects you here at all. . . . They say that there is no racism in this country. There is professional racism in this country.

Interviewer: How?

Police officers look at your name and your racial background and then act based on that. There is professional discrimination. Have you ever felt that? My wife committed many criminal acts yet the police officer leaves my children with that person. And the police officer is saying that you beat your child, not just spanked the child, you can’t do that, and now you can’t see your children. . . . What you are going to do?

As the extracts above illustrate, the participant perceived the police officer’s actions as racist because he thought that the police officer identified him as an abuser due to his race and Arabic-Turkish name without deeper investigation about the violent event.

The majority of the men perceived their wives as individuals whose role was to make them comfortable and understand their feelings and thoughts without expecting explanations. In order to achieve this type of relationship, the men often wanted their wives to understand their stressful day and make the domestic environment calmer. When the women did not understand the men’s stress and asked questions or complained about something, then their abuse and violence was justified. As Kaan indicated that:

The doctor looks at your face and can make a decision as to whether you are schizophrenic or not with an initial diagnosis. [I was thinking that] I was like a sick person, I go home and my wife should understand my stress, problems. If she does not, then that means she is not a good wife; she was not taking care me and being interested in me.

Perceptions about their male-dominated gender role also played a significant role in their engagement in interventions. For instance, some men felt that they had rights over women’s actions by emphasising their hegemonic masculine positions. The majority of the men had difficulties accepting women’s freedom due to their strong feelings of male domination and extensive rights in the family
as a man. Moreover, many men thought that their wives should not display anger and should always remain calm and make the home environment peaceful. Whilst some men expected these attitudes from their wives, they considered that they had the right to be angry because of their heavy work schedule. For instance, Cem highlighted that:

I always told my wife . . . you always need to be calm even if I am yelling at you. She is not like me; she does not have a job and I don’t understand the reasons for her stress and need for medicine. But I do have a reason [for my stress and anger] – the pressures of my job.

Although some men discussed their expectations and beliefs about male dominated gender roles in relation to their cultural and religious backgrounds, the influences of their patriarchal community were the most significant triggers for their actions. For instance, Ege shared how he struggled to take any new action because of others’ negative reactions to gender equal attitudes:

My wife told me that I should go on the Hajj. She kept telling me that. She said that I should have done it this year. I prepared myself to meet her request but failed. I sometimes think being a henpecked man is the best way to be but many people ridicule these people.

The intergenerational transmission of violence was an important part of understanding the men’s refusal to take responsibility for their violent behaviour as they had normalised violence. They tried to maintain their male domination by normalising violence against women. Importantly, Alp stated that fathers taught male domination to their sons in a family:

For instance, as a Turkish man in Turkey, we feel dominant over women. In addition, during childhood as a male child, we start to dominate our mothers because the father teaches us to do this. The mother raises the child in that way and so she seems to tacitly consent to the father’s behaviour.

We can see here not only how intergenerational violence existed but also how male domination and privilege was widely accepted in families. Almost all men blamed their wives’ refusal to follow a traditional gender role for their insufficient
engagement in interventions. This absence took the form of women’s questioning, rebuffing, making their own decisions, making requests that the man could not meet, and not following the men’s expectations. When women request something from their husbands or make any decisions without the men’s permission, they mostly felt pressured or perceive their wives as dominant or liberated individuals. In these cases, the men justify their violence and their refusal to apply strategies learned in interventions. They also blamed the legal system because they felt that government support for women makes men vulnerable in terms of not seeing their children. They believed that the government should not provide accommodation and money for women because this increases women’s freedom. These ideas were related to migration status as they compared the legal rights for women in the UK with those in Turkey.

The feelings of losing their power and control increased the men’s blaming of women and the legal system which resulted in not enough willingness to take responsibility for their abuse. It is clear that the men often used external factors, including the legal system, the influences of the patriarchal community and women’s refusal to comply with traditional gender roles as excuses for their violent behaviour. In relation to their cultural and racial backgrounds, the men often perceived women’s behaviour as unreasonable. Hence, many men positioned themselves as being completely in the right.

The professionals stated that the men often justified their violent behaviour towards their partners by clarifying the exact cause of the violent events. However, the men perceived themselves as non-violent individuals and sometimes victims when they became violent because of their beliefs in external
triggers of their abuse. Many professionals described the men’s blaming of women as an indication of a reluctance to engage because this showed that they often tried to change their wives rather than focus on their actions. As Ziya, a practitioner, observed:

They [the men] mostly perceive that the woman is the problem. They perceive their violence as a result of women’s actions. . . . These perceptions could be a reason for their failure to complete the sessions.

Many men expected their wives to mediate in situations. If they did not mediate, men often blamed women for the abuse that followed. For instance, Ayla, a practitioner, indicated that:

He expected his wife to mediate in stressful environment. I found that he was attributing a lot of negativity to her. He was saying things like she was opportunistic; that she was doing things just to benefit from his money.

The men sometimes accused their partners of cheating on them when their partners attempted to divorce because of the violence. Their refusal to take responsibility was strongly linked to blaming women and the insufficient knowledge that they had about the interventions. For example, Pelin, a practitioner, emphasised how the men continued to blame women and reject the existence of domestic violence:

There are similar stories [among Turkish clients]. For example, if women leave, men say, ‘there is another man in your life,’ or make a similar accusation. Women say, ‘let’s go to couples counselling for years,’ but the men will say, ‘you are sick’ and so they get out of the situation.

Men often act based on cultural and parental expectations which are unhealthy for their intimate relationship. In relation to the gay perpetrator’s story recounted in the previous section, the professional stated that he was able to share his feelings of guilt and shame by disclosing his private experiences during interventions. Yet, he struggled with accepting that he blamed the woman unnecessarily and avoided taking responsibility. His power in the community was
associated with male privilege in the family. While cultural norms often empower
the man, forcing a man to marry a Turkish woman created an abusive marriage.

In the extract below, Cansu, a practitioner, clarified that:

His family and her family put pressure on them, complaining that there is something
wrong with them because they don’t have any children and advising them to go to the
doctor. He feels quite angry at his parents and her because he blames her entirely. He
imagines that if she was not there he would be free, have a better life. . . . However, it is
important to make him understand that it isn’t about her; it would happen again with
another girl.

Given the sensitive and complicated case outlined in the extract above, the
professional tried to make the person understand how abusive relationships can
take place based on social and cultural concepts by challenging the client to stop
blaming the woman. This illustrates the interconnectedness of patriarchy, class,
genre and migration status.

The professionals mentioned that many men were aware of their wrong actions
but often refused to take responsibility due to strong beliefs in the women’s fault.
After describing how men blame women for their insufficient engagement in
interventions, I will move on to describe how professionals have worked to end
male dominated gender roles in interventions. In the extract below, Ziya, a
practitioner, argued that men’s ideas of their extensive freedom and women’s
dependency on them showed the cultural norm of male domination in families:

They think that there should be absolute togetherness all the time. There is indeed such
a structure culturally. You create the marriage together but there is little understanding
that the women can be independent as well. Yet, there is this [independence] for men.
However, on the side of men’s perceptions, this is not possible for women. Thus, this
cultural norm and expectation is reflected in their marriage.

The majority of professionals mentioned that cultural norms in a family are key in
understanding male gendered roles, which often include controlling behaviour
over family members. Importantly, they paid attention to the men’s experiences
of cultural diversity in the UK because men’s gender roles in families were
conflicted with living in a different cultural environment. For example, Laura, a practitioner, observed that:

> Because of their history, their family history, the families and financial aspects, there are many triggers [for their abusive actions]. And then, a very basic fundamental understanding of the role of a male in a family group arises that impacts on behavioural change. . . . Men as providers for the family feel that they can have rights to control [family members] and they have quite a large family. To be raised in the UK with its cultural diversity can have an impact on males within the family group too.

As described in the extract above, Laura clarified how culture played a significant role in understanding the men’s controlling behaviour over family members and normalised abuse due to male privilege. A few therapists mentioned that even though the men know that all family members’ ideas are important during the process of making a decision, they often make the final decision based on their own desires. Many men tried to keep their traditional gender roles in the family by taking their parents as role models. For instance, they compared their own childhoods in Turkey and their children’s lifestyles in the UK which resulted from their migration experiences. Also, they tried to be authoritarian fathers in order to protect their power in the family. Sezen, a practitioner, shared her observations about that issue:

> He thought that he took into consideration his family members’ perspectives and listened to what they had to say. However, it is not like that. The man always presents his idea and applies his decision. . . . Now they have moved from Turkey to the UK. . . . They want to continue such practices that they saw from their fathers, based on how they experienced things in their childhood. . . . However, the men often felt restricted due to social services as their children can complain about them to social services.

A few professionals highlighted that the men sometimes stop attending couple therapy when they realise that they are wrong. This realisation makes them feel uncomfortable because the men do not want their wives to hear that their actions are wrong in the sessions. Many men tend to drop out of the sessions in order to prevent their partners from becoming aware about domestic violence. The feelings of embarrassment in front of their wives have been an important
The indicator of the men’s failure to complete the sessions. They also stop attending
the sessions in order to stop their wives being able to make complaints about
their abusive behaviour. For instance, Arzu, a practitioner, indicated that:

They [the men start to] see they are wrong to be bossy. However, once the therapy gets
to identifying this [abusive behaviour], they don’t want to know. They resist and the
resistance causes them to say, ‘I can’t do this [attending therapy] anymore.’ So, for
instance, this couple came about four times but they don’t attend anymore. He stopped
his wife attending as well because he got embarrassed; they don’t want to be
embarrassed in front of their partners.

The majority of the professionals stated that the men often control their partners’
behaviour in order to stop women’s freedom because they feel embarrassed or
weak when their partners act as free individuals. This embarrassment is
associated with their male dominated gender roles and desire to have power and
control over their partners all the time. Therefore, women’s freedom is a threat
for men’s domination and controlling behaviour. They do not want to lose their
domination during the couple therapy. The men’s obstacles to sharing their
feelings with their wives appeared to be linked to men’s social emotional
immaturity as Arzu, a practitioner, highlighted:

I get them to talk to each other. But he doesn’t want to put his guard down because he
doesn’t want to give her the freedom to be able to stand up for herself. He wants to
control [her] all the time. . . . Even though they come [to the sessions] with their partners,
ye don’t want their partners to know how they feel.

As illustrated in the extract above, even though some of the men attended the
therapy session, they often tried to present themselves as powerful men.
However, this prevented the issues being discussed with the professional. While
couple therapy might be beneficial in order to end domestic violence, many
therapists observed that men are unable to open up their feelings and
experiences with their partners in comfortable ways. Because of women’s
feelings of oppression about sharing their feelings in front of their partners, many
therapists preferred to listen to the man and woman separately. For instance, the
remarks from the professional, Laura below highlight the importance of individual therapy sessions:

I worked with couples who were Turkish/Kurdish, British/Kurdish and Turkish/European, so a Turkish man and a European or British woman etc. [There is] very often the same thing around violence. So, it depends very much on, again, culture. So again, my response to them depends on who they are and where they are from. . . . Some women are very subservient and will not answer the question other than looking at their husband to see his reaction at the beginning. And that can be very challenging.

A few professionals made the compelling argument that there was a relationship between the men’s desire to earn a lot of money and feelings of being a powerful man. In this case, many men desired to be rich rather than just take care of family members. Therefore, long working hours or working far from family members was often linked to the men’s feelings of gaining power. Class status and masculine identity was interconnected in these cases. However, this created a lack of communication with their family members and abusive relationships. As Su, a practitioner, remarked:

Financial problems: there are many more financial responsibilities for Turkish men. All of these are actually created by the men. I mean it is about their perceptions.

In sum, blaming women for their violence and holding male dominated gender role have been revealed as factors from interviews with men and professionals. The professionals described culture and influences of patriarchal ideas about men’s power over women as key circumstances that impact on men completing the sessions and taking actions to change their behaviour. Feelings of losing their power over women often caused men to drop out of interventions. Gender was mentioned as a significant issue in understanding men’s constructions and justifications of their violence. However, high levels of deprivation and normalization of domestic violence and abuse were important dynamics in understanding men’s insufficient engagement in interventions. Moreover, class position in terms of being a working class person and migration related
experiences in comparing the legal system between Turkey and the UK were also important concepts in the men’s constructions of their engagement in interventions. Challenging men to realise how cultural norms and gendered power dynamics impact on their abusive relationships was emphasised as a core aspect of the work during interventions.

**Theme 3: The process of taking responsibility**

Two core themes including initial participation linked to culturally-sensitive practices and patriarchal concepts were presented in previous sections. The process of taking responsibility was revealed as a core part of Theme 3 in examining Turkish perpetrators’ engagement in interventions. First, the accounts of men of their perceptions and attempts to take responsibility will be clarified. Second, professionals’ views and experiences about how they invited perpetrators to take responsibility for their abusive behaviour will be illustrated under each subtheme.

A few of the men were able during interventions to take responsibility for their violent behaviour by successfully completing the sessions. Seven out of nine men tried to do the homework and implement the suggestions given by the professionals when trust and rapport had been built up between them. In this core theme, many men expressed how they explored their personalities and acknowledged their partners’ freedom while taking new actions. However, some men realised that they were not able to implement alternative ways due to the strong male dominated gender roles and cultural background they espoused. Therefore, they kept expecting their partners to change. In these cases, men often attempted to divorce after interventions.
The main ways in which the men took responsibility for their violent behaviour included questioning themselves about the reasons for their violence, increasing awareness of their assumptions, examining their attributions of violence and developing empathy towards their partners. Time-out was described as the most frequent strategy that men tried to implement. Whilst a few men were able to develop empathy skills, the majority of the men were unable to apply strategies appropriately and found them to be unbeneﬁcial.

Alternative behaviour based on social, cultural and religious backgrounds

In this section, I will present how men constructed their actions based on their social and cultural backgrounds. All the men perceived their cultural and religious practices as key in shaping the way they deﬁned abuse and ﬁnding alternative ways of acting. In highlighting cultural dynamics in taking responsibility, having relatives in the UK was also perceived as an important support system to cope with their problems. For example, Alp claimed that having relatives in the UK played a signiﬁcant role in building a healthier relationship with his wife and children:

We were lucky when we came to the UK fifteen years ago. All of our family members, such as my sister and brother, my wife’s sisters and brothers, and the people from our village in Turkey, were already living here.
This quote clarifies how the idea of a strong family impacted on the man’s perceptions about his ability to solve problems in his own family. He also identified having social networks in a new country as an important tool for reducing migration related problems such as difficulties of adaptation.

In addition, some men highlighted that their religious beliefs were key in supporting their healthier ways of solving problems. Because many men perceived alcohol use, gambling and going to Turkish cafés (kahvehane) as important indicators of domestic violence, they often mentioned that their religious beliefs prevented them from becoming involved in these activities. When men did not get involved in these events, they described themselves as healthy and non-violent men or they identified their experiences as relationship problems. They did not realise the existence of their gendered-power relations which were linked to their emotional, verbal and financial abuse. Furthermore, if their partners did not meet their expectations, conservative men claimed they could calm themselves by thinking some religious ideas. Moreover, one participant stated that he could justify his violence with his religious ideas. However, it also meant they were not taking responsibility for their abuse. For instance, Cem shared:

> Before I went to the doctor, I had thought that I could see how other people have experienced things and fixed their violent behaviour. However, as I said before, we always say that everything is from Allah and will be okay. And the rest is not important [Gerisi çelik çomak oynamak gibi].

While some participants shared how they found the strategies recommended in interventions unhelpful, they claimed that they often tried to implement some techniques based on their religious and cultural backgrounds. A few men described their approach to ending an instance of abuse as taking their partners
to a restaurant for dinner. Although this was a positive action and constituted an alternative action, they felt that they were not enough to solve the issues in their relationship. As Kaan indicated:

I was assuming that when I took my wife to the restaurant for dinner, all the problems could be solved. I was asking myself, ‘what else could she want?’ . . . She is still nervous, why? Because that is not the only problem, there are many other ongoing issues.

As highlighted in the quote above, he could not find alternative behaviour in order to end his emotional abuse. A few men were convinced that their religious practices were the best way of ending a violent relationship or not making the situation worse. The majority of the men mentioned how they created some strategies by themselves in order to build a healthier and more respectful relationship with their wives and children. However, they could not implement these strategies because they faced barriers. These barriers were often related to their long working hours which were the result of their low social status. For instance, one participant mentioned how he tried to make some space to spend time with his family members in order to develop healthier communication. As Cem indicated:

The solution to improve communication that I could take is that for the last ten years I have thought about taking a break [from work] during Ramadan. However, I have not yet achieved this.

Interviewer: Is it about financial problems?

No, no, it is not about finances but about making sure the work is done. If a desirable worker has not been found at that time, you have to work. Such things are out of your control.

Taking medicine is popular among Turkish men to reduce their depression and violent behaviour. Culture is an important concept in understanding why men often prefer to take medicine to end their violence. Many men avoid seeking therapeutic support instead due to public stigma in the community. For instance, Alp shared:
As I said, I experience depression. I am taking medication for depression, stress and anger.

As we can see from the quote above, the participant asked for medicine not only for his depression but also his violent behaviour. In order to have a respectful relationship, some men shared how they learned to think about the issues in broader ways. One exercise before an intervention was for the men to focus on some details which made them angry. They then tried to ignore these details by changing thinking processes and the ways of assessing the issues related to their wives. Cem described how he gave up thinking about such details in relation to his wife’s actions:

I was thinking about everything in greater detail but now I am not thinking at all. I don’t let things get to me; instead I just remove myself from situations [Ne olursa olsun diyorum işin içinden çıkıyorum].

While the majority of the men devised their ways of ending abusive actions based on their social, cultural and religious backgrounds, many external factors were identified as barriers to their taking new actions including migration experience and socio-economic status. Many men shared how they tried to explore their identities and to find alternative ways of developing a healthy relationship. This section moves on to provide an overview of professionals’ perceptions and strategies on the process of challenging the men to take responsibility for their violent behaviour.

In order to challenge men to take new actions, men’s acknowledgment of their abusive behaviour has been described as an essential intervention process. When men recognised their actions were wrong, many professionals reported that they were able to challenge themselves by questioning their feelings and thoughts about the process of violent events. Professionals’ tactic of asking...
open-ended questions is key to promoting men’s active engagement. As Ziya, a practitioner, shared:

This level of resistance among clients only decreases in a long-term relationship. However, when he starts to relax, he can talk about domestic violence. For instance, I ask him, what happened after that; how did it happen; what did you feel; what do you think the other person felt; and what do you need to do when it happens again; what are the other solutions to apply when you are trying to come together again; what do you think the potential triggers are? . . . All of these are anger management techniques.

After increasing men’s awareness about their violent behaviour towards their partners, many professionals encouraged men to share their feelings and thoughts during the violent events. In order to invite men to understand the consequences of their violent behaviour over their spouses, questioning them about why and how it happened is a vital step. The professionals often questioned men to develop alternative behaviours. Similarly, the professionals stated that they aimed to make the men start to take responsibility within some small steps. For instance, Cansu, a practitioner, stated that:

My way of working with them is more like encouraging them to take responsibility . . . and increasing their awareness; making them think a little bit more about their responsibilities.

Professionals often felt it was a challenge to find appropriate strategies to increase men’s understanding of their abuse. Many professionals invited men to concentrate on their actions and identified this invitation as a significant part of their intervention work. Professionals re-energised men to think about the main reasons for their struggles related to abusive behaviour in order to stop men blaming their partners. Professionals often concluded that men were able to take responsibility for their actions when they explored their feelings and thoughts about blaming women or community members. Some professionals, Cansu and Ayla, mentioned how they challenged men to examine their positions without blaming women:
He feels quite angry at his parents and his wife because he blames her entirely. He thinks that if she was not there he would be a free person or have a better life. I tried to make him understand that it wasn’t about her; the same thing would happen with another girl.

Our job as therapists is to create a space for them to reflect on themselves rather than on others. They often say he or she has done something wrong. . . . I try to show them the world they are in and challenge them to reflect on themselves instead of on each other.

As we can see from the extracts above, some professionals highlighted how they tried to challenge the men to focus on their identities and explore key issues around their violent behaviour. Likewise, a few professionals invited men to explore their identities by giving them homework. This homework related to examining men’s identities including questions ‘who am I?’ and ‘what am I?’ These questions are crucial for Turkish men to answer who are influenced by the community or extended family members. When men realise their identities, desires and choices rather than focusing on others’ perspectives, they can stop abiding by male dominant cultural norms. The identity work was connected to the men’s migration experiences because their Turkish identity might have been about male power over women in a family. For example, Cansu, a practitioner, emphasised that:

We [Cansu and her client] are clear that your father is your father. But you are not your father so instead we must examine who you are. So, this is the central issue among these three clients. I have very useful handouts called ‘what am I?’ . . . How they perceive themselves and how others perceive them are quite different.

A few professionals applied the person-centred approach (Rogers, 1978, 1979; O’Leary, 1999) because they stated that this approach helped them to provide an empathetic and safe environment for perpetrators. In this approach, many professionals were able to build trust and rapport. After trust had been built, they moved on to employ humanistic strategies (Williams, 1992). For instance, professionals requested men to explore family members’ feelings during violent events. In this approach, men often started to examine the consequences of
violence on their family members, which led to men feeling shame and guilt and attempting to take new actions. As Ziya, a practitioner, stated:

We try to teach them some strategies to use. So, I started to work on applying person-centred techniques and then implementing more humanistic and community-based approaches.

As seen in the quote above, building rapport and trust helped the professionals to challenge the men to share their feelings of shame and guilt which helped them to adopt alternative behaviour. Some professionals highlighted how some men made an effort not to apply British cultural values in their lives, instead presenting a traditional Turkish identity. For instance, men would like to choose a woman to marry without having to listen to their parents’ opinions or break the gendered power relations in the family. Influences of cultural backgrounds and pressures from the community have therefore been identified as men’s obstacles to taking responsibility for their actions. Hence, men started to explore their identities. This exploration process allowed the men to realise how they put themselves in a position that they did not want to be in. When they were able to describe their wishes without pressure from the community, they built a healthier relationship with their wives. Cansu, a practitioner, highlighted the importance of transactional analysis (Boyd and Boyd 1981; Horewitz and Aronson 1977) when inviting men to explore their identities:

The way I work is by encouraging them to accept themselves by asking who they are. It is like transactional analysis work, which is quite useful.

Social and emotional maturity enables healthy communication skills to be developed that do not include blame being placed on women. In order to bring about this improvement, it was necessary to improve the men’s ability to listen and speak in respectful ways. The process begins by the men exploring their identities in a self-reflective way as Ayla, a practitioner, stated:
Identity work requires a substantial amount of self-reflection. Of course, if people are not ready for self-reflection, they won’t self-reflect. . . During the sessions, I also give them homework. I apply the Virginia Satir approach to develop communication skills; this gives them an opportunity to talk to each other without interruptions and to share their daily news. And then I teach them how to really listen to each other without judging and feeling blamed. Talking without blaming is a skill they can develop but this requires a lot of maturity from them.

Questioning men’s cultural and racial backgrounds helped them to explore their identities because men’s violence is often related to their traditional gender roles. Therefore, professionals encouraged the men to explore the influences of culture in order to realise how this led them to act violently towards their partners. Throughout these intervention processes, a few professionals stated that men were able to realise their inappropriate ideas which were associated with gendered power relations. For example, Arzu, a practitioner, highlighted the importance of challenging the men to talk about their feelings during the sessions:

I think giving them the option to talk about their feelings and giving them examples from Turkish culture is helpful . . . because they are locked up in this little box. And the man doesn’t talk about his feelings. Because of that, he is not relaxed.

Even though only one professional worked with Turkish-speaking men in group-based interventions, she strongly highlighted that group-based interventions have been more helpful than one-to-one therapy for them. As they held common struggles related to family issues in a group, they were able to share them in comfortable ways while hearing others’ similar issues. Therefore, she reported that support from group members and a positive relationship with the group leader and other members were important indicators of their engagement.

Findings from this interview suggested that men’s perceptions about getting support from group members and professionals impacted on men’s engagement in their efforts to take new actions. The below extract illustrates Ebru’s view that group-based interventions have been helpful to Turkish men’s engagement:
I am usually able to get them to commit. Actually, according to my experience, they are much better in group therapy because they don’t have to say much. They can sit like powerful men and listen to others. But, eventually, they open up. But individual therapy for them can be a bit intimidating to be with a female therapist in the same room alone. … Group therapy brings to the fore family matters which my clients always have. Individual therapy brings maternal issues – mother and child relationship [issues]. So Turkish communities are very good in group therapy because their issues are very family-oriented; they are more part of the community.

The above example illuminates the gender played a significant role in recognising the men’s obstacles to engaging in an individual therapy session with a female therapist. Moreover, the professional highlighted the men’s feelings of intimidation due to their struggles with male power and privilege during one-to-one therapy with a female professional.

Many professionals used strategies including identity work, transactional analysis, self-reflection and questioning in order to let men be aware of their positions, feelings and how their violence impacts on family members. In this section, I have illustrated how professionals challenged men to explore their identities by increasing their awareness of consequences of violence on family members. Essentially, many professionals asked men to explore their Turkish and British identities in order to enhance men’s understanding of how religious, cultural and racial backgrounds affected their abusive relationship. When men successfully investigate their identities, they mostly take responsibility for their violent behaviour and find alternative ways of acting. It could be argued that gender and male power over women determine how some men feel more comfortable in attending group-based interventions than individual sessions with a female therapist.

Developing new skills by applying the strategies

All the men shared the suggestions and techniques that they received during interventions. These suggestions mostly included time-out, anger management
techniques and strategies for developing empathy skills. Men’s pre-conceptions about these techniques influenced employing them inappropriately. Whilst some men were against some techniques, many men attempted to implement some strategies in their lives. For instance, they mentioned how they left the environment and put some distance between themselves and their partners in order to stop their violent behaviour. They highlighted that finding space let them calm down. However, leaving the situation often took place after big arguments or violent events. For example, Alp said that:

Removing yourself from a stressful situation is a tough one. I mean I cannot see how this works in practice. You have an argument, and you are yelling at each other, and then you get some space, leave the environment but then return.

A few men received psychiatric help for their depression linked to domestic violence in this research, but they rarely perceived their abusive actions as problems. Many men expressed their lack of understanding of the nature of the application of time-out appropriately. They understood time-out as leaving a stressful environment in order to stop abuse, yet they did not make sense how they can leave the situation in the family. In the extract below, Orkun shared his lack of ability to implement time-out:

Where are you going to go away to? The problem is inside the home. If it happens, the professional suggested to me to leave the stressful environment, but where can I go to outside the home or inside the home?

Even though some men mentioned the usefulness of applying time-out a few times, the feeling of being provoked by women stopped men employing that technique for many incidents. Whilst men believed in the benefits of some strategies in their intimate relationships, their blaming of women often prevented them from leaving the environment. Likewise, they often identified the intervention as an unsuccessful process. Even though they often described the
outcome of the intervention as negative, the majority of the men shared that they did not fully employ the strategies. As Ali shared:

The facilitator encouraged me to think about how me and my wife can solve our problems without making them bigger. The facilitator said ‘Go outside until she has calmed down.’ . . . However, when I came back, the woman became angrier, so much angrier. She was saying like, ‘you are leaving me and you come back whenever you want’ [dingonun ahiri gibi girip cikiyorsun]. Can you imagine? Still, the British facilitator is telling me to avoid confrontation, yet she does not. She wants to work herself up and make herself angrier.

How the men understood the nature of some techniques affected their willingness to take responsibility. The section moves on to present how the men tried to develop empathy for their partners through acceptance of and respect for their partners’ choices and lifestyle. Those men who developed empathy for their partners were mostly able to reduce their abusive actions. Men’s attempts to change women based on their expectations were barriers to improving empathy. Some of the men’s acceptance of women’s personalities allowed them to end the violence by divorcing. Therefore, divorce was identified as the most appropriate and respectful way of ending an abusive relationship without further damaging each other. The influences of relatives and community members impacted on the men’s ability to take action, including divorce. For example, Efe emphasised that:

I was respectful to my wife even though we fought. I thought that it was her nature. I am always empathic. . . . However, when my wife let our relatives and community members know about our fights, I instinctively reacted in an abusive manner. . . . There was no problem about love with my ex-wife; the problem was about respect. I can say that we divorced due to disrespect.

As highlighted by Efe, the participant described how he worked on stopping trying to change his partner without empathy because he believed she could not change at all. When the men shared this feeling of frustration of women’s lack of change, they highlighted that it helped them stop the violence. After the men realised that both sides had expectations, intervention processes allowed men to
build empathy for their partners. A few participants shared how they recognised their need to end the unreasonable expectations they held of their wives. When men perceived their partners as free and independent individuals who can make their own decisions, men were able to stop having unreasonable expectations of them. For instance, some men perceived their wives as doctors or psychologists who should understand all their expectations, feelings and thoughts. This perception was dispelled in interventions and men understood that their wives were not their doctors. As Kaan shared:

Before people [spouses] described their expectations to each other, they assumed that they only had their own expectations. I realised that she is also an important individual and has her own choices. . . . However, she is not a doctor, she is an individual like you. At that time, I was saying that she is not a doctor in my house or a slave.

In this research, many of the men who were violent and abusive towards their partners were also fathers, and their stories concerning the quality of their fathering skills indicated that they were often authoritarian. This recognition was underpinned by not only men’s own accounts but also professionals’ observations. Many men shared how they struggled to find appropriate ways of communicating with their children as well. As illustrated by the quote below, one participant tried to express his difficulties with life in the UK and with integrating into its culture by linking it to the challenges he faced raising a child with positive fathering skills. This issue was interconnected with the men’s migration experiences. For instance, Efe indicated his concerns about his fathering skills:

I see more problems in the relationship between father and children. Personally, I think the relationship between father and children should be friendship, allies and a trustful one. Of course, it is not easy to do this in this country. I ask myself, I have a kid, and how could I be a good father? How could I communicate more with my daughter? As I said before, nothing is stable in the UK. We are living in a changing country. It is so challenging to keep pace with this changing country.

One participant made an important exploration during the family therapy which was about examining the constructions of their meanings of the events. He
emphasised that he learned how he and his wife constructed the meanings of the events differently. The lack of awareness about different constructions of the meanings around the issues led to the abusive relationship. When he learned these different meanings that his wife ascribed, he was able to empathise and respect her. Therefore, he took responsibility for his actions by considering his wife’s feelings and thoughts which were about his abusive behaviour. He realised how he had ignored his wife’s feelings. Therefore, Kaan was able to improve his empathy towards his wife by taking account of her feelings and thoughts:

Men and women construct the meanings of the problem differently. I and my wife realised that our meanings around naming the problem were different. The contrasting views of my wife made me realise that during therapy. . . . This realisation happened mutually. Before this realisation, she was thinking that I was not interested in her, did not love her, that I was leaving her, and that kind of thing. But it was not like that. These were her expectations based on the facts as she understood them.

A few men stated that they apologised to their wives after violent events when they recognised their wrong acts. However, it is interesting that one participant mentioned that one of the purposes of his apology was as an example for his wife as he wanted his wife to apologise to him when she did wrong. Therefore, he tried to encourage his wife to apologise to him when she did not follow his expectations. For example, Ege shared his frustrations about her lack of apology to him:

Even if I get in an argument, my anger only lasts for five minutes. I mean after five minutes I will apologise to her and do anything in order to atone for my mistakes. If I know I am not right, I tell her that a couple times because I want her to know how to behave when I am in the same position.

Improving empathy skills was key in the process of finding alternative way of acting. Labelling and accepting their violence, giving up blaming women and being respectful of women’s choices and freedom were core circumstances of empathy. Importantly, learning some strategies such as time-out helped the men
to reduce and stop their violent behaviour. Although developing empathy skills was not a strong theme in the men’s conceptions of their engagement process, many professionals aimed to challenge them to increase their empathy towards their partners. When the men share their feelings about a violent relationship, professionals facilitate the men to find alternative, healthier ways to communicate. For instance, Ziya, a practitioner, shared how he encouraged the men to share their feelings with their wives rather than keeping their feelings in their head which often increased violence:

If the men get angry with someone, they should not keep it inside but find an appropriate way of expressing it. For instance, I invite them to apply ‘I-you language’. Second, I encourage them to express their feelings to their partners, or go outside and calm down and then return when they feel there is no way to deal with it or they are being provoked or attacked.

This quote highlighted the importance of using “I-you language” which would put a focus on their own feelings rather than blaming women. Many professionals emphasised the importance of teaching about boundaries in intimate relationships during interventions. They highlighted that witnessing domestic violence or experiencing sexual violence during their childhood broke many of the men’s boundaries. Professionals reported that some of the men started to realise the existence of boundaries in their relationship with family members. This realisation helped to develop a more respectful and healthier relationship as Laura, a practitioner, remarked:

We examined the boundaries around his interpersonal relationships. You know that boundaries are very, very important, very important, because you know how the dynamics play out.

The majority of the professionals tried to put in place alternative actions by inviting men to apply anger management techniques. These techniques often included time-out, sport activities, relaxation and breathing techniques. However,
some professionals pointed out that many men could not take up sport activities because of their cultural backgrounds. The men’s reluctance to attend these activities was associated with their social class. Therefore, traditional lifestyles and long working hours were barriers to using sport activities to reduce violence.

For instance, Ziya, a practitioner, emphasised that:

I suggest they go walking, play sports and such things in order to get rid of negative energy. Of course, we suggest sport activities but many people do not do these in our Turkish community. I mean they do not often go to the gym.

Some of the men attempted to follow the strategies that the professional suggested. The men’s obstacles to practising empathy in intimate relationships were described as a barrier to developing respectful relationships. Obstacles such as male domination, patriarchal ideas, socio-economic positions and blaming women were often linked to violent behaviour. Despite these obstacles, professionals challenged the men to think about their partners’ feelings. For instance, Cansu, a practitioner, asked a man to examine how he would feel if his sister experienced what his wife had:

So, working on how he can cope with his anxiety has difficulties because he has no communication with his wife and he is quite distant. So, I encourage him to at least talk to her, whatever happens he needs to talk to her. Although you know it is not relationship counselling, but it is more like putting himself in her shoes and seeing how she feels.

When men started to empathise with women’s feelings and experiences, they often began to respect women’s choices. A few family therapists highlighted that inviting both a man and a woman to attend interventions was critical because some situations were better understood by listening to both sides. Essentially, professionals who have worked with couples underlined the importance of exploring men’s partners’ feelings. In order to understand women’s side and let their voices be heard by men, some professionals invited women to attend the sessions. After both sides shared their opinions, professionals invited them to
think about how they could act differently, especially how the men could change their abusive behaviour. As Laura, a practitioner, stated:

So, we are re-educating, I mean, my role most of the time is encouraging men to bring their wife to the therapy. . . . So, whatever model or you know whatever method you really apply, it is also about educating the man and his wife. Your partner is here, so you are both here, and what would you like to do differently? [I] get them to come up with ideas. . . . And look at it then, okay, how realistic is it to do that, and what can we do together to ensure that happens so it works?

As we can see here, the professional pointed out the importance of the man’s understanding of his wife’s feelings and thoughts during couples’ counselling. Essentially, Laura highlighted that the women needed to be informed about healthy and respectful relationships by increasing their knowledge about their rights. According to the professional’s observations, the women’s knowledge about their rights increased some men’s involvement in interventions. A few professionals shared their feelings of compassion because some of the men experienced brutal childhood events and attended interventions. Importantly, they shared these sensitive experiences with professionals in interventions. The men’s ability to share their vulnerable experiences was described as an important step in engagement because the stories were very sensitive and not easy to share with someone. This issue illustrates the challenges around the men’s behavioural change process because of their abusive childhood experiences. A few professionals pointed out that these men were mostly working class, which was interconnected with their feelings of shame at receiving support. When professionals talked about perpetrators’ traumatic experiences, the men’s perceptions about fathering related to violence were found. Professionals concluded that the men’s traumatic experiences were often linked to their violence against their partners because they learnt and tolerated it earlier in their lives. In the extract below, Ebru, a practitioner, pointed out:
But for them, talking about their emotional issues is shameful because of their upbringing. But they can come to therapy. I help them to open up and even talk about their sexual abuse when they were teenagers; when they were working in, for example, a shop and the shop-owner abused them. With these kinds of things, I feel real compassion for them because they have gone through difficult times and they never had any help.

Working on the men’s trauma histories has been identified as a vital step in the behavioural change process. Significantly, the men’s disclosure of these experiences was an important indication of their engagement in interventions. The constructed meanings around the men’s intimate relationships often shaped their actions. Professionals stated that reframing was a key practice in assessing the men’s circumstances and conceptions. Therefore, professionals helped the men to overcome their constructed meanings and conditional beliefs related to their violent behaviour. Inviting the men to write a diary was described as an effective strategy as it provided a space for them to think about their violent actions by focusing on their feelings and thoughts. This strategy encouraged the men to think about how they actually projected their violent events. As Laura, a practitioner reported:

> It is really about reframing very, very conditioned beliefs they have and giving them different values with which to live their lives. . . . During the therapeutic process, I give them things to do when they go out socially and are with the family or at work. I ask them, some of them, not all of them, but those who are willing and able to apply it. I ask them to keep a diary of their moods. And I work very much that way, through cognitive behavioural therapy.

Many professionals encouraged the men to make a connection between their feelings of victimisation and the victimisation of their wives because of their violent behaviour. Professionals shared how they worked with perpetrators by positioning them as educators because they invited the men to examine their patriarchal beliefs, social and cultural backgrounds linked to blaming women in order to stop their justifications. The main purpose of this examination was to make the men take responsibility. In essence, the men’s empathy with their
partners was often built by removing their blaming of women and focusing on their identity and actions. In this way, some men can remember their traumatic experiences and feelings about violent events in their childhood, which help them to understand the feelings of their partners and children because of their abusive behaviour. As a result, being aware of the consequences of violence was linked to their willingness to attend interventions and implement non-violent behaviour in their relationship.

Summary

The experiences of Turkish men’s engagement in behavioural change process were identified through the extracts from interviews. Three key themes including initial engagement linked to culturally sensitive approaches, patriarchal dynamics and the process of taking responsibility emerged from the semi-structured interviews with the men and the professionals. The extracts provided a powerful source for the themes. The research findings presented how social and cultural backgrounds, migration experiences and gender were core factors influencing Turkish men’s engagement in interventions. The research findings from professionals suggested that the lack of culturally-sensitive interventions was an important barrier to increasing men’s engagement in taking responsibility for their abusive and violent actions. Similar to the findings of my research, the importance of providing culturally sensitive approaches has been found in previous literature that has examined black and minority ethnic perpetrators’ experiences in domestic violence interventions (Guru, 2006; Hancock and Siu, 2009; Pfitzner et al., 2015; Williams, 1992). When men became involved in the culturally insensitive interventions, they found professionals’ suggestions to be
inapplicable. Likewise, a number of studies recognise that black and minority ethnic participants’ lower rates of completion of intervention programmes is related to the lack of culturally competent strategies (Gondolf, 1988; Hancock and Siu, 2009; Williams, 1992; Williams, 1994; Williams and Becker, 1994).

The men’s socialisation in a male dominated culture, influences of a patriarchal community, the roles of financial providers, masculinity, tolerance of violence and blaming women created a barrier to engaging in interventions. This finding is consistent with other studies which highlighted that the men’s hegemonic masculine identity is linked to their violent behaviour (Hoang et al., 2013; McCarry, 2007; Sayem and Nury, 2013). In essence, pressures and expectations of family and community in patriarchal Turkish groups usually impacted on men’s power and women’s oppression. This was confirmed by İlkkaracan (1996) who highlighted that tolerance of violence in the family setting indicates that many Turkish perpetrators have a greater entitlement to power than women do in families and community settings. Identifying how gender, race, class and patriarchy shape Turkish men’s engagement in interventions opened up important insights into their unique circumstances. This helped determine the issues that may undermine the men’s ability to receive appropriate support for their behavioural change processes.

While the men described social and cultural backgrounds as their justifications for their insufficient engagement, professionals illustrated them as challenging circumstances that prevented the men from employing new actions. Perpetrators’ minimisations and justifications have also been found by several studies which highlighted that their minimisations are linked to blaming women
(Blacklock, 2001; Bowen, 2011; Wood, 2004). It appeared that a common concern for professionals working with Turkish perpetrators in culturally-sensitive approaches was about losing the men’s engagement when they were challenged to take new actions. However, they strongly believed that their ability to build trust and rapport was key in securing the men’s regular participation and engagement in interventions. Similarly, several studies found the importance of building trust and rapport for effective therapeutic relationships and positive outcomes (Daniels and Murphy, 1997; Partanen, 2008; Ross et al., 2008; Räsänen, 2013; Murphy and Baxter, 1997). Analysis of my findings clearly reveals that patriarchy, gender, race, class and culturally-sensitive practices are features affecting Turkish men’s engagement.

My research suggests that Turkish perpetrators were not more violent than other perpetrators. Some common characteristics were revealed. They were: blaming women; minimisations of their violence; and holding patriarchal beliefs. However, intervention programmes should take into consideration some important issues: the men’s language barrier, their insufficient knowledge about available services, social stigma in their patriarchal communities, professionals’ competency in understanding the men’s unique social and cultural backgrounds, and building trust and rapport with them. These have been identified as key to increasing the men’s willingness to engage in interventions. I will present the discussion of the findings in the next chapter.
Chapter Five: Discussion and Conclusion

Introduction

This chapter provides a discussion of the findings and synthesises the lived experiences of Turkish men’s engagement in domestic violence interventions by focusing on their constructions of their experiences. An analysis of the stories of the men and professionals is constructed based on patriarchal dynamics, male dominated gender roles and culturally-competent approaches in interventions. In the men’s talk about their engagement in interventions, they often presented their constructions of femininity and masculinity in their traditional gender roles by highlighting the social and cultural contexts influencing them taking new actions. Professionals’ ability to understand the men’s social and cultural context is revealed as a vital factor determining men’s willingness to complete the sessions because this helps the men to build trust, rapport and confidential relationship with a professional. Therefore, the men’s engagement is associated with broader racial, social and cultural backgrounds, and available culturally-competent approaches that constructed their thoughts and feelings on taking new actions in order to end their violent behaviour.

The major goal of this research was to examine the views and experiences of Turkish men engaged in domestic violence interventions from the viewpoints of Turkish perpetrators and professionals. The research findings revealed that Turkish men’s engagement included sensitive and complex circumstances related to their gender, race, class, culture, religion and other social structures. In the following section, I will clarify these circumstances by highlighting how intersectionality played out in my data.
Intersectionality on the behavioural change process

In this section, I will give an overview of how race, gender, class and other social locations were interconnected with the understanding of power, social stigma, discrimination and racism among the participants in this research. Intersectionality focuses on complex and multiple social structures and interconnectedness of social locations and lived experiences in the system of discrimination and power relations (Hankivsky et al., 2010). For instance, my participants’ black and minority ethnic identity often reduced the opportunities of benefiting from interventions. The influences of race, gender, class, ethnicity and migration experiences on my participants’ engagement in interventions will be detailed by concentrating on how power, racism and discrimination impacted on the men’s behavioural change processes.

Some participants shared how Turkish-speaking professionals were more helpful than practitioners of different social and cultural backgrounds during interventions. For instance, Cem experienced a poor therapeutic relationship with the professionals of different ethnic backgrounds due to language barriers and having his son as an interpreter. While the majority of the participants have lived in the UK for several years and have British citizenship, language barrier was a factor in a few of the men’s inadequate engagements in the sessions. Language barrier was linked to living in an environment where individuals mostly spoke in Turkish in their daily lives. This lifestyle was connected to their inability or unwillingness to improve their English skills. However, not all Turkish men experienced language problems as heterogeneity and diversity exist in Turkish groups. Turkish-speaking practitioners (e.g. Ziya, Pelin, Ebru and Sezen)
observed insufficient engagement among some men because of social stigma in the community and mistrust in public services. Therefore, race, ethnicity and migration were important concepts in recognising the obstacles to completing or actively engaging in the sessions. While mistrust was not identified by all the participants, racist and discriminatory practices were critical issues in the men building trust and rapport with a professional. These critical factors need to be considered by the professionals in order to increase the men’s engagement and decrease dropout.

Gender power dynamics was a core theme in understanding how the men blamed women and avoided taking responsibility for their violence. For instance, some participants (e.g. Cem, Efe, Ege and Alp) believed that women should not seek help in order to flee from a violent environment because their position as women who had moved to the UK for the purpose of marriage was one that was dependent on the men. Because the women got financial support after leaving a violent environment, the men felt this was a reward for his violence. Similarly, one participant, Ege, shared how he felt provoked when his wife often tried to make final decisions. He made a compelling argument that these attitudes were against his religious and cultural views. These examples illustrated the interconnectedness of gender power dynamics, patriarchal beliefs, class and migration experiences. Attending interventions and taking responsibility for their violent behaviour was shaped by the men’s perceptions around women’s rights and freedom and gender power relations.

The breadwinner role within a difficult work environment, not adapting to the UK system and experiencing racism and discrimination were justifications given by
the men for insufficient engagement in interventions. These justifications also often encouraged them to resist applying the strategies learned in interventions. For instance, one participant, Orkun, justified dropping out of the sessions by arguing that his wife did not understand his heavy work schedule. In addition, the men’s perceptions and experiences around discrimination caused mistrust in professionals and programmes. The difficulties present in financial, social and psychological environments in their workplaces and living in a different social and cultural environment to Turkey were given as obstacles to becoming involved in therapeutic support. Therefore, social class and migration experiences were important concepts in some men’s difficulties in regularly attending the sessions and building trust in the services.

The research findings revealed that Turkish men’s engagement was affected by sensitive and complex circumstances related to their gender, class, culture, religion and other social structures. From the analysis of data, different factors emerged that influenced men’s experiences in ending their violent behaviour. These factors included: racial, social, cultural and religious backgrounds related to lack of or insufficient engagement; and culturally-competent approaches associated with the men’s willingness to take new actions and display an active engagement in interventions. I will present the dimensions of the findings through a discussion on how the major factors can be better understood by providing an overview of the complexities of the findings.

**Insufficient engagement and resistance in interventions**

The intervention efforts to make men accountable for their abusive actions came across barriers. These barriers were related to the men’s patriarchal beliefs,
masculine identity, migration experiences and insufficient culturally-competent services. These different dimensions of the engagement in domestic violence interventions are clarified by discussing how race, class, gender and patriarchal dynamics interconnected with men’s actions. This section provides a discussion on these different dimensions which emerged from the analysis of core themes in the men’s insufficient engagement in interventions.

**Patriarchy**

Unequal gender issues have been identified as key in determining whether Turkish men seek help and take responsibility for their violence during interventions. For instance, social stigma and cultural norms in their patriarchal community impacted on the men’s engagement in interventions in the UK. The men’s involvement in therapeutic support was linked with their social and cultural backgrounds because it was influenced by their understanding of what constituted violent behaviour (Lago, 2006). Patriarchal dynamics often impact on men’s involvement in interventions in negative ways. The influences of patriarchy are widely discussed and confirmed by many studies which emphasise how male perpetrators minimise their violence against women (Murphy and Baxter, 1997; Scott and Wolfe, 2003). Importantly, this finding is consistent with other studies conducted in Turkey which found that male power and privilege were tolerated in many families (Goksel, 2008; Kardam, 2008; Pervizat, 2011).

In my research, external validation of the men’s gendered power relations in families was described as an important factor in the men’s choice to be violent towards their partners. Community members’ directions or comments on their actions shaped their behavioural changes. The influences of community
members and relatives were important in making men take new actions or become non-violent. Therefore, this study has suggested that the influence of community members had constituted an important factor in engagement in interventions. Several studies on honour-based violence have confirmed the influences of community on the men’s violent behaviour towards women in different contexts (Alinia, 2013; Almeida and Dolan-Delvecchio, 1999; Dogan, 2014a; Dogan, 2014b; Gill et al., 2015; Idriss and Abbas 2010; Korteweg and Yurdakul, 2009; Önal, 2008; Vandello and Cohen, 2003). Although some community members might have motivated the men to act violently towards women in the name of honour, other community members or friends encouraged a few of the men (e.g. Eren and Kaan) to attend a psychiatric clinic and family counselling sessions. Community members impacted on a few of the men’s behavioural change processes in positive ways. In these cases, community members were mostly aware of the benefits of the therapeutic support or psychiatric help without holding social stigma because these individuals often attended these services and had positive experiences.

Honour and shame are important concepts in patriarchal dynamics (Reddy, 2008; Samad, 2010); and honour can be described as a justification for male violence against women (Hossain and Welchman, 2005). A few men in this research mentioned how they perceive that their wives embody their honour and so they feel responsible for protecting their honour in a community. Engagement in domestic violence interventions is also associated with male honour in traditional Turkish communities. For instance, one participant, Efe shared his feelings about honour by stating that he tried to hide domestic violence from family members and outsiders because being labelled a violent man or having
problems with a wife in the community is perceived as a shameful experience. On the other hand, domestic violence is perceived as an honourable act for some people because complicated and diverse perceptions and norms exist among heterogeneous Turkish communities. Similarly, some studies on honour-based violence and killings have concluded that the influences of community members are powerful in shaping their involvement in violent actions (Dogan, 2014a; Dogan, 2014b). In taking into account the powerful influences of community on men’s actions, this research describes “honour” in a community as a key factor for understanding their resistance to interventions that seek to modify their behaviour.

In terms of understanding the feeling of shame and guilt as an engagement factor in attending interventions, this needs to be analysed by considering the men’s social and cultural contexts and their psychological processes. In my research, the men who were aware of their violent behaviour against their partners were ashamed of themselves. This shame often leded them to become involved in interventions. The literature has also called this type of shame “reintegrative shaming” or guilt (Braithwaite, 1989; Tangney et al., 2011, p. 708). However, many men think that domestic violence is a private issue and no third party should become involved with this problem. They believe that the family needs to manage domestic violence by itself but they do not realise that it is necessary to seek professional help. Second, if they have become involved in interventions in order to end the violence, they are more likely to hide this reality from family members, friends and relatives. This situation creates some concern but this increases when they try to hide this issue from community members because of guilt and shame.
Shame, remorse and guilt have been documented as critical emotions for perpetrators in criminal justice systems (Bancroft, 2003; Tangney et al., 2011). Perpetrators’ remorse has been identified as an ambiguous feeling due to their justifications for their violence (Bancroft, 2003). In addition, Partanen (2008) stated that the feelings of guilt and violent behaviour should be critically analysed during group-based interventions in order to increase the men’s responsibility. However, the feelings of shame and guilt in a patriarchal society and public stigma are interconnected with men’s anxiety about becoming involved in domestic violence interventions. Therefore, a positive and safe therapeutic environment should be provided in order to challenge them to talk about their feelings and shameful experiences. This process might help them to build an empathic relationship with their family members. While shame is often described as leading to offending behaviour, some studies noted that guilt is mostly associated with behavioural change and becoming involved in interventions (Loeffler et al., 2010; Tangney and Dearing, 2002; Tangney et al., 2011).

Likewise, several studies found that the feelings of guilt are often helpful for the purpose of developing empathy towards others (Stuewig et al., 2010; Tangney and Dearing, 2002; Tangney et al., 2011).

In the accounts of men, patriarchal beliefs were frequently used to justify their violence. Such justifications are mostly associated with the influences of patriarchal value systems and hegemonic masculinity (Mullaney, 2007). Even though family pressures and perspectives impact on a marriage leading to an abusive relationship, men’s own beliefs and desires about being dominant over their wives were significant factors influencing their abuse. Importantly, holding a rigid understanding of gender role divisions led to unwillingness to participate in
interventions. The findings on the relationship between patriarchal dynamics and gendered power relations were consistent with the studies that have explored perpetrators' experiences in domestic violence interventions (Almeida and Dolan-Delvecchio, 1999; Dutton, 1994; Lawson et al., 2012; Päivinen and Holma, 2017).

Masculinity

Masculine identity emerged from the data as a strong indicator of the men’s construction of their male dominated gender role in families. Many of the Turkish men confirmed the gendered power relations in their intimate relationships by emphasising their cultural and religious backgrounds. The majority of them in their stories confirmed they were financial providers, protective of family members and worked long hours in their jobs. Even though many men were aware of the influences of working long hours on their health and relationship with their wives and children, they rarely took any action to change their lifestyles in order to achieve a healthier and more respectful relationship. This is connected to the working class status. Moreover, they reported an awareness of their insufficient parenting practices due to their work schedule. While many men perceived their long working hours as a justification for their inadequate fathering skills in my research, several studies have pointed out how violent fathers are often motivated to attend interventions due to contact with children’s social services (Alderson et al., 2013; Stanley et al., 2012).

Yuksel-Kaptanoglu (2015) found that the perception of being a financial provider was used to justify violence in Turkey. However, there is no specific study that examines the influence of masculinity on Turkish men’s engagement or
resistance in interventions. Hence, this research is unique and contributes to knowledge about how they construct their masculinity during interventions. The men’s strong perceptions of being right and being in absolute control of their partners and family members have been identified as negative attitudes that decrease the men’s willingness to attend interventions. However, being a strong financial provider for their families was often described as a positive attitude by the men, although not necessarily one that led to ending their reluctance to participate in interventions. This issue has been indicated by some studies which described the man’s justifications of violence as being a financial provider and the leader of the family (Anderson and Umberson, 2001; Mullaney, 2007). Power imbalance was an important issue in masculine identity because it was difficult for the men to take into account their abuse. Cultural backgrounds and belief systems are key in determining men’s willingness to implement alternative behaviour.

The majority of the professionals highlighted the influences of religion, culture and the community on the men’s belief system. In my research, many men were the individuals who were solely responsible for making the final decisions at home. Lack of engagement can be considered a male exercise of power over women because men often refuse to take responsibility for their violence. Male violence against women was rationalised in men’s stories based on the fundamental belief in gender differences. Similarly, other studies including Yuksel-Kaptanoglu (2015) and Tekkas (2015) also found similar perceptions of masculinity among Turkish men.
The perception of being a weak man in interventions has been linked to the ideas of power and maleness in the community. For instance, Courtenay (2000) found the link between masculinity and a lower level of seeking-help among men. Likewise, Stanley et al. (2012) found that requesting help is perceived as a shameful act among black and Asian men in the UK. The men also often made a connection between being weak or fragile and help-seeking behaviour. This results in perpetrators often being “embarrassed, humiliated, and ashamed to seek help for their violent behaviors” (Campbell et al., 2010, p. 217). This finding is similar for the men in my research who expressed their embarrassment in looking for help for their violent behaviour. Importantly, the evidence illustrates that men who hold a masculine identity and do not share their feelings avoid seeking psychological support (Blazina and Watkins, 1996; Good et al., 1989).

In order to develop effective parenting practices, the understanding of the men’s perceptions around parenting identity was vital. For instance, Kelly and Westmarland (2015) found that encouraging the men to recognise the consequences of domestic violence on their children can be an important motivation for men to change their abusive behaviour. Likewise, the fear of losing their children was an important motivational factor for some men in attending interventions. As Alderson et al. (2013) and Stanley et al. (2012) noted, parenting identity and losing their children cause feelings of anxiety and fear which often lead men to attend interventions. However, in my research some men (e.g. Cem and Orkun) blamed the women for their negative relationships with their children. When the men keep blaming women for their negative parenting practices by focusing on their expected rights in families, they struggle to take responsibility.
The men’s masculine identity and gender power dynamics increased victim blaming. For instance, some men (e.g. Alp, Ege and Cem) shared their feelings and concerns about their partners’ less responsive attitudes based on social and cultural backgrounds. These concerns about women’s inadequate traditional gender roles increased their unwillingness to keep attending the intervention. Women blaming is crucial in understanding the men’s constructions of violence and insufficient engagement in interventions. This finding is consistent with other studies which highlighted that many perpetrators blame their partners during individual or group-based interventions as part of refusing to take responsibility for their abusive actions (Blacklock, 2001; Bowen, 2011; Dutton and Sonkin, 2000; Goldner, 1998; Heckert and Gondolf, 2000; Holma et al., 2006; Lawrence, 2012; O’Neal and Beckman, 2016; Zakar et al., 2013). Some distinctive experiences around blaming women have emerged from the data and I will present them in the following paragraphs.

Minimisation of violent behaviour was about blaming women or the legal system which was associated with the men’s ideas of masculinity and patriarchy. When we elaborate the unique aspects around this minimisation, we can recognise the social and cultural context in their stories. For example, some participants (e.g. Efe, Ege and Cem) suggested that a woman who was born in the UK often lost her social and cultural values by highlighting their gender unequal expectations. In this sense, they constructed the rationalisation of their masculinity and patriarchal beliefs by blaming a woman of Turkish descent who was born in the UK. Specifically, one participant, Ege claimed that marrying a woman who was born in Turkey would make it easier to implement controlling behaviour and power over the woman by highlighting the traditional gender roles. However, the
heterogeneity among Turkish groups was also indicated by the way some Turkish men implemented gender equal attitudes. As a result, these arguments around blaming women increased some men’s resistance to breaking gender power relations and regularly attending interventions.

The men’s blaming of the legal system resulted from the women’s choice to flee from a violent environment through government support. The elements of blaming the legal system included the unique issue of minimisation of violent behaviour by comparing the legal system in Turkey to the UK. For instance, there is no financial support for such women survivors in Turkey. In this sense, some men (e.g. Ege, Efe and Cem) claimed that the women reported their husbands’ violent behaviour in the UK more than Turkey because they believed that the legal system was more encouraging in this respect.

The comparison between the poor legal system in their home country and the law in the UK increased their unwillingness to accept their abusive actions as criminal. Moreover, Cem and Efe strongly argued that they were right to drop out of the sessions by blaming the legal system. These ideas around being right about not having any restrictions to their abuse of their partners in Turkey shaped their inadequate engagement in interventions. The comparison of the legal systems was related to their migration status because they experienced difficulties in living in a different legal, social and cultural environment.

Even though some men blamed women and the legal system for their insufficient engagement in interventions, the rules on violence against women in the UK positively impacted on a few participants’ (e.g. Ali, Alp and Mert) involvement in interventions. Some key issues increased their willingness to attend
interventions, such as restrictions on seeing their children; fear around receiving a prison sentence and concerns about losing their partner and children. Therefore, the factor of blaming the legal system can be discussed in two ways. First, some men blamed the legal system in relation to the governmental support for the women survivors’ rights and freedom, thus enabling them to justify dropping out of the sessions. The men who dropped out at an earlier stage were often convinced that the situation in Turkey was better compared to the UK system. Second, the fear of some men of losing their wives and children increased their efforts in finding alternative behaviour and attending therapy and counselling services. Men’s engagement in relation to the fear of losing their children has been confirmed by a number of studies, albeit of other cultures (Stanley, Graham-Kevan and Borthwick, 2012; Hester and Lilley, 2014; Kelly and Westmarland, 2015). Overall, victim blaming and the fear of losing their partners and children impacted on behavioural change processes in different ways.

A few men described their positions as victims because they felt that their wives were more dominant. This feeling of being a victim was also linked to a man’s masculine identity which decreases the willingness to share his feelings and thoughts with his wife. In these circumstances, many of the men felt provoked by their wives. The sample included first generation Turkish men in the UK, many of whom held a strong perception of their masculine identity. This shows that socioeconomic status and acculturation were important dynamics in determining their engagement in interventions because discrimination and racism have been linked to their unwillingness to complete the sessions. The studies also suggest that the perpetrators’ beliefs about their need to change are related to their
perceptions of the benefits of interventions (Cadsky et al., 1996; Prochaska and DiClemente, 1982).

Migration experiences and lack of culturally-sensitive practices

Being in a different social and cultural milieu is key in men’s struggles with identifying their new identities when trying to construct gender equality in families in a new country. Turkish men’s biographies in their racial backgrounds play significant roles in examining how the majority of the men struggled to build new selves in a country that holds gender equality and provides domestic violence perpetrator programmes. My research study is unique to illustrate how the influences of being in a different social and cultural environment impacted Turkish men’s engagement in domestic violence interventions.

The findings of this research indicate that Turkish men hold complex and sensitive social and cultural backgrounds based on where they come from in Turkey to the UK because diversity exists in different regions in Turkey that impacts on their understanding of what constitutes domestic violence. When the men examined their identity construction, they were able to understand their unreasonable expectations of women. Studies on identity constructions have also pointed to a similar conclusion that clients can change their irrational expectations after working on their identity in interventions (Holma and Päivinen, 2016).

According to the participants’ stories, the men’s broader entitlement to power over their partners makes interventions to increase men’s efforts in understanding how power imbalance harms their partners or wives challenging. Turkish men’s masculinities are strongly shaped by their gendered power
relations, class and immigration histories. The table below illustrates the process of identity work by focusing on masculine and new identity during interventions.

**Table 3: The process of identity work during interventions**

<table>
<thead>
<tr>
<th>Masculine and new identity work among Turkish perpetrators in interventions:</th>
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</thead>
<tbody>
<tr>
<td>Male dominated gender roles in families:</td>
<td>Challenging men to stop masculine domination over women by making them aware of the boundaries and consequences of violence on family members.</td>
</tr>
<tr>
<td>Male feelings in a family and therapy:</td>
<td>Informing men that being in therapy is not weakness and inviting them to share their feelings with a therapist as well as the partner.</td>
</tr>
<tr>
<td>Traditional gendered power or gender equal relationship in a new country:</td>
<td>Making men realise the influences of a patriarchal community on their violent behaviour and build new selves in a country that has gender equality. Challenging them to be aware of their choice of actions.</td>
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Given the importance of considering Turkish men’s social contexts and the influences around living in an environment of different social and cultural values for effective interventions, the findings presented how socio-economic status affects men’s attempts to seek help or get support from free or private services. The participants made important comments on how their class status affects the types of interventions they attended. A similar point was made by Ridley (2005) who highlights the high rate of fees in therapy as a barrier to people of a low socio-economic status to get involved in the private therapy sessions. Gray et al. (2014) also stated that the cost of therapy impacted on men’s concerns of money and the benefits of group-based domestic violence interventions. In
addition, the availability Turkish-speaking professionals was an important factor in getting support in culturally-sensitive interventions.

Within male dominant contexts, many professionals emphasised that the difficulties they faced in working with the men were due to the combination of race, gender and class – all of which reinforce male violence against women. Walling et al. (2012) point out that individuals’ “social, economic, and political dynamics of race and ethnicity” are associated with clients’ mistrust of the services. Similarly, many Turkish men cited the influences of their race and ethnicity on their ability to seek help and complete the sessions in interventions. For instance, some participants shared their feelings of distrust and alienation in the process of interventions by emphasising their negative relationship with the professionals. These findings were consistent with other studies that have examined the influences of race and ethnicity in therapeutic interventions (Aldarondo and Malhotra, 2014; Castonguay et al., 2006; Sue and Sue, 2013; Walling et al., 2012). Similarly, Reis and Brown (1999) indicated how socio-economic factors and ethnicity caused client drop-out by highlighting the importance of reducing the different “perspectives on therapeutic enterprise” between therapist and client (p. 123).

Lower socio-economic status was often linked to an insufficient understanding of the meanings and benefits of the therapeutic interventions. Educational background and patriarchal beliefs impacted on their perceptions of domestic violence as a family issue. Because male violence against women was identified as a private matter by some participants, it is possible to conclude that the lower the level of adaptation to a gender equal environment, the greater the resistance
to taking new actions there was. As a result, there was a strong connection between social class, migration experiences and insufficient engagement in interventions. Informing the community about the benefits of therapeutic interventions by breaking the social stigma is key to increasing male perpetrators’ involvement in interventions.

Turkish men’s individual and system-based problems were linked to race and ethnicity. The findings of this research suggest that Turkish men are less likely to receive support from traditional DVPPs, and are more likely to be misdiagnosed, be subjected to psychiatric help and take medicine for their depression and anger problems. Studies on mental health care have also found the professionals’ inadequate abilities to identify domestic violence or provide appropriate tools for perpetrators of domestic violence (Alpert et al., 2007; Gerbert et al., 2002). These negative experiences increased the rates of dropout and attrition in interventions.

Therefore, it can be concluded that involvement in inappropriate services for ending violent behaviour; the lack of culturally-competent professionals and services were important reasons for preventing men from continuing to attend interventions. This concern was reinforced by professionals’ stories. They pointed out that their clients dropped out of mainstream programmes and took up private therapy sessions. A similar finding has been highlighted by the studies on black and minority ethnic men’s involvement in interventions in the USA. This showed how African-American men often drop out of traditional interventions (Gondolf and Williams, 2001; Williams and Becker, 1994). However, having a
Turkish-speaking professional helped to overcome mistrust and racial and cultural differences.

To sum up, the patriarchal social system, masculine identity, class structure, the influences of being in a different social and cultural milieu and insufficient culturally-competent approaches are important themes in understanding men’s behavioural change processes. These themes are also associated with building rapport and trust with professionals in interventions which impacted on men’s willingness to take new actions. Such trust is often created by providing culturally-sensitive practices including linguistically-competent professionals who understand Turkish men’s social, cultural and religious backgrounds. I will argue the importance of culturally-competent services as contributing factors for men’s engagement in the next section.

**Contributing factors to engagement in interventions**

In this section, there will be a discussion on how providing a culturally-competent professional and trained interpreter impacted on the men’s willingness to engage in interventions. The skills among professionals need to be improved. These skills include language abilities, understanding masculine identities and the process of men’s socialisations in the UK, with the men often trusting competent professionals to understand their concerns better. Culturally-competent practices have been helpful in revising and reviewing men’s identity and building a more respectful and healthy, intimate relationship. As a result of effective services, men can rebuild their relationship with their partners and children.

The core contributing factors of the men’s active engagement included effective therapeutic strategies in culturally-sensitive interventions and the men’s
perceptions of the need to change. Likewise, the existing literature illustrates the relationship between providing culturally-sensitive approaches and black and minority ethnic perpetrators' engagement (Guru, 2006; Hancock and Siu, 2009; Pfitzner et al., 2015; Williams, 1992). In addition, Ward et al. (2004) highlighted that perpetrators' perceptions of the need to change are associated with their engagement in interventions. Professionals complemented their therapeutic work by inviting men to write a diary, re-frame their conditional beliefs and ideas, implement anger management techniques, apply time-out, develop empathy and use many other strategies. These strategies were applied based on individuals' needs and their social contexts in order to increase their willingness to take responsibility and end their violent behaviour.

Culturally competent professionals and approaches

In this section, I will give an overview of the importance of culturally-sensitive approaches by clarifying professionals' competence to consider men's social and cultural backgrounds and providing a safe and empathic environment in order to build trust and rapport. The findings of this research revealed that professionals aim to make men accountable for their violent behaviour among Turkish groups by challenging them to realise the existence of their strict gender roles in their patriarchal beliefs and cultural background.

In this sense, multicultural therapy appeared to be key in providing an effective way to understand cultural experiences. For instance, McKenzie-Mavinga (2011) describes multicultural therapy as considering “origins and belief systems that mirror and influence identity, personal experience and the social impact of oppressions, within the therapeutic relationship” (p. 30). Likewise, when
professionals understand perpetrators’ traditional gender roles, cultural norms, power and control issues in their social and cultural context, they often engage in domestic violence interventions that mostly lead to positive behavioural change (Ackerman and Hilsenroth, 2003; Ross et al., 2008; Saunders, 2001; Taft and Murphy, 2007; Williams, 1992; 1994). Thus, many researchers noted that professionals should understand cultural and racial backgrounds to increase engagement of participants in interventions (Almeida and Dolan-Delvecchio, 1999; Bent-Goodley et al., 2007; Williams and Becker, 1994).

Some men shared how they experienced lack of support during interventions by highlighting the professionals’ insufficient understanding of their religious, social and cultural backgrounds. If the professionals made an effort to recognise how Turkish men’s unique experiences and backgrounds impacted on the resolution of their problems, the men often engaged well in the sessions. However, it is critical to note that this therapeutic process does not mean accepting men’s rationalisation for their violence but instead understanding their positions in their culture in order to provide more effective interventions. This finding is consistent with many studies which highlighted that professionals should be aware of the clients’ social and cultural backgrounds in order to provide effective therapeutic sessions (Font, Dolan-Delvecchio and Almedia, 1998; McKenzie-Mavinga, 2011; Mirdal, Ryding and Essendrop Sondej, 2012).

Almost all professionals in this research pointed out the importance of having knowledge of the men’s cultural and social backgrounds, especially for men who held complicated immigration histories in the UK. However, this knowledge should not include stereotypes and generalisations (Diamond and Gillis, 2006).
because diversity exists within class, gender and cultural backgrounds in Turkish communities. Hence, Turkish perpetrators’ race, class and gender has been associated with their socio-cultural circumstances which impact on their engagement in interventions. The men becoming relaxed frequently led them to follow the suggestions given by professionals. This important process created an environment in which professionals could challenge the men to take new actions and engage well in interventions.

There are tensions between socio-culturally relevant therapeutic approaches and cultural relativism in a discussion on domestic violence perpetrator interventions. The men’s beliefs and the way of justifying their violent behaviour based on their culture are not absolute. For instance, the men’s lack of engagement was often about gender power relations rather than solely cultural issues. Moreover, male violence against women may be tolerated in some cultures but this does not mean that all Turkish people tolerate violence against women. It is essential to stress that the majority of men in Turkish groups are not violent or abusive towards their partners and domestic violence exists across all cultures. My research suggests that some participants experienced obstacles to actively engaging in intervention sessions due to their migration experiences, ideas around patriarchy and blaming women and other gender power relations.

Based on professionals’ experiences, examining men’s identity has been essential in increasing men’s understanding of their unrealistic expectations of their wives. In addition, this identity work helped to decrease the obstacles to integrating into the UK system. The men’s identity work examined categories including “race, sexual orientation, gender, class and ability level” (Diamond and
Likewise, race, culture, sexual orientation, class and gender were associated with each other in participants' stories. For instance, a heterosexual relationship, conservative family values and traditional Turkish descent within lower socio-economic status groups in a patriarchal society are related to each other and this connection impacted on their actions. Similarly, the studies on intergenerational transmission of violence among men in violent families have consistently found that these are strongly related to socioeconomic factors (Ravarino, 2008). Some studies noted that generational change in parenting and family values can impact on men's change behaviour in interventions (Williams et al., 2013). Hence, all these structures shape men's willingness to participate in interventions in different ways based on their social and cultural backgrounds and the generational positions in the UK.

In essence, being respectful of and understanding men's religious, cultural and social backgrounds are key ways of creating a positive therapeutic relationship with professionals. Likewise, Pfitzner et al. (2015) stated that building trust with men in group-based interventions can impact on their engagement. While trust and rapport are not very easily established, the findings suggest that professionals' understanding of men's anxiety and stressful events are the major requirement for developing rapport. For instance, the majority of professionals clarified how they facilitate the sessions by aiming to create a more empathic environment in order improve men's trust and rapport and reduce men's fear about receiving judgemental comments in interventions. In order to understand how Turkish men engage in a therapeutic intervention process, professionals' “training and personal development must also take place” (McKenzie-Mavinga, 2009, p. 177). This training is essential because social, cultural and racial
influences need to be recognised (Almeida and Dolan-Delvecchio, 1999; Bent-Goodley et al., 2007). This is especially the case when working with perpetrators from the Turkish community as special attention must be directed to their patriarchal beliefs, the influences of living in a different social and cultural environment and gendered power relations in families in the UK context. Being aware of these issues played a significant role in building rapport and trust at the initial stage of the interventions. In addition, Lago (2006) notes that:

... the counsellor requires an understanding of the political processes in society that continue to perpetuate racist and discriminatory processes. An understanding of these mechanisms is necessary in order for the counsellor at least to avoid recreating them within his or her therapeutic practice. (p. 21)

This research came to a similar conclusion on perpetrators’ experiences of racism and discrimination where there was a lack of culturally-competent interventions. Professionals’ exploration of the men’s experiences of oppression in larger society was key to increasing their ability to provide a safe therapeutic environment for them. Similarly, Carrillo and Tello (1998) noted that black and minority ethnic men’s experiences of oppression might challenge professionals to build a trusting relationship in interventions.

The professionals’ role and power is likely to influence the men’s engagement. For instance, the professionals’ educational backgrounds and work experiences were often identified as helpful for developing a trusting relationship. However, professionals should be cautious not to use their “power (personal, role, gender, cultural, racial, institutional) with clients and also that they do not impose culturally biased views or procedures for action that will effectively be harmful to clients” (Lago 2006, p. 124). Therefore, breaking cultural biases is key to providing a non-judgmental and safe therapeutic environment and increasing the
men’s active engagement in the sessions. Likewise, cultural norms should be
recognised by professionals in all interventions in order to achieve the men’s
active engagement (Bernal, 2006; Sue et al., 2009).

The findings of this research about individual therapy sessions suggest that long-
term treatment and building rapport and trust with men are essential for effective
therapeutic interventions. Campbell et al. (2010) also found that trust and
confidentiality were key for understanding whether perpetrators sought or
engaged with help for their violence. After trust was built, the men’s engagement
increased and they often followed behavioural change processes. Similar
findings from many other studies highlighted that perpetrators’ unique needs
based on a stage of change should be considered in order to achieve a positive
therapeutic relationship and men’s behavioural change (Day et al., 2009; Scott
and Wolfe, 2003; Stephenson et al., 2017; Zalmanowitz et al., 2013).

Professionals employ different conceptual models, including more supportive,
empathic and confrontational interventions. Even though some studies argued
about the importance of confrontational tactics in order to increase perpetrators’
responsibility (Pence and Paymar, 1993; Mullender, 1996), many studies
illustrated that confrontational approaches reduced perpetrators’ engagement
(Campbell et al., 2010; Chovanec, 2009; Marshall et al., 2003; McMurran and
Ward, 2010). In order to build trust and rapport at the beginning of the
interventions, empathic listening, understanding their reasoning for violence, and
a collaborative therapeutic relationship often promoted success in working with
Turkish perpetrators. Similar conclusions have been reached by other studies
which emphasise the importance of an empathic and safe environment for an
effective therapeutic relationship (Daniels and Murphy, 1997; Partanen, 2008; Ross et al., 2008; Räsänen, 2013; Morrison et al., 2017; Murphy and Baxter, 1997).

In fact, providing a non-judgmental, safe and empathic environment was the strongest predictor of Turkish men’s engagement in interventions. Furthermore, Sonkin and Dutton (2003) stressed the importance of a therapeutic relationship in their application of attachment theory to interventions with the partner of the violent men because it provides a non-judgmental environment. Professionals need to provide a trusting and empathic therapeutic environment in order to secure the men’s active engagement. This was an important finding because some participants’ experiences of migration were linked to discrimination and racism when accessing UK public services. This became inextricably connected with the negative process of building trust and rapport with the professionals. Lack of a trained interpreter in an intervention was also identified as an obstacle to actively engaging in interventions. The issues around language will be developed in the following section.

Linguistically competent approaches

Whilst social, cultural and religious backgrounds impact on the men’s willingness to attend interventions, the rate of engagement in interventions tends to differ according to which programme they are involved in. For instance, private therapy sessions with Turkish professionals were identified as a beneficial support and many men shared how they achieved a healthy, intimate relationship as a result. Importantly, professionals’ competence in language skills and being aware of their social and cultural backgrounds were vital factors in securing men’s
engagement in interventions. Language barriers of black and minority ethnic perpetrators in interventions have been described by some studies that highlighted the importance of culturally sensitive practices (Al-Aman, 2012; Gondolf and Williams, 2001; Tas et al., 2008). However, my research is unique in indicating how Turkish men face obstacles to becoming involved in interventions due not only to language barriers but also social and cultural backgrounds as there is a silence about talk about domestic violence in Turkish communities. The majority of Turkish men mentioned their frustration about the lack of culturally-sensitive services, giving that as a reason for not following the professional’s suggestions.

Having culturally- and linguistically-competent interventions is an important factor in increasing engagement (Andrés-Hyman, Ortiz and Añez, 2006). The data on Turkish men who had limited English proficiency show the difficulty of succeeding with mainstream interventions. While some professionals pointed out that a good interpreter impacts on men’s engagement in positive ways, some men shared their uncomfortable feelings of having an interpreter during the sessions due to concerns of confidentiality and translation of their feelings. The concerns of confidentiality are interconnected with having the same social and cultural background with the interpreter because of the small community and they worry that the interpreter may know their family members. Linguistically-competent professionals were perceived as individuals who could better understand their social, cultural and religious backgrounds. In the following paragraphs, I will discuss how the findings show that providing a good interpreter can enhance the effectiveness of interventions by clarifying the skills needed to perform this role.
The findings revealed that the use of interpreter in an individual therapy or couple counselling is beneficial for Turkish men who lack English language skills. A few professionals stated that an interpreter can become involved in interventions in order to facilitate communication with men who cannot speak English. The majority of professionals highlighted the need to utilise the services of trained interpreters. This finding was confirmed by the literature which highlighted how utilising trained interpreters can be successful for black and minority ethnic groups in mental health services and family therapy sessions (Ali, 2004; Hadziabdic and Hjelm, 2013; Lucas, 2016; Pazos and Nadkarni, 2010; Pugh and Vetere, 2009).

Some researchers have argued that a lack of trained interpreters during sessions results in a poor outcome (Pazos and Nadkarni, 2010). For example, untrained interpreters were identified as individuals who were family or community members (Pazos and Nadkarni, 2010). This had the potential to increase the men’s drop-outs or insufficient engagement in interventions due to their inadequate skills to perform in this role. In my research due to one participant’s lack of language skills, his son was the interpreter during the sessions. This was quite problematic. He had more problems about his relationship with his wife and he attended in the psychiatric intervention with his son. So, there were questions of how this professional work could support him with under this circumstance. The service should have provided an independent interpreter for him as he had many sensitive problems at home which were linked to his depression. In addition, Chand (2005) emphasised that using a child as an interpreter should be considered unethical and unprofessional, not least because children cannot truly understand the nature of the problem and the
parents might not share their sensitive issues with their children present. Therefore, it is unlikely that men would feel comfortable about sharing these experiences when children are the interpreters.

The professionals pointed out building trust and rapport between the men and interpreters is key in increasing the men’s engagement in the process. As domestic violence is a sensitive topic, the interpreter should be aware of confidentiality (Hadziabic and Hjelm, 2014; Sue and Sue, 2013). Several studies have confirmed that the interpreter needs to build a degree of trust and rapport with the client in the sessions (Boyles and Talbot, 2017; Dubus, 2016; Mirdal et al., 2012; Pazos and Nadkarni, 2010; Sawrikar, 2015). Many studies found that the interpreter should be aware of the clients’ complex circumstances in order to empower the individuals who attended family therapy (Boyles and Talbot, 2017; Sue and Sue, 2013). Because of the individuals’ sensitive and potential traumatic experiences during interventions, the interpreter needs to be capable not only in terms of language but also gender, religion, social and cultural issues in health care settings (Hadziabic and Hjelm, 2014). In addition, programme providers and professionals need to develop an effective relationship with interpreters in order to provide effective services (Lucas, 2016).

**The strategies of taking new actions**

The previous paragraphs focused on clarifying how professionals’ skills and values can reduce cultural and social distance between Turkish men and professionals. In this section, I will provide an overview of the strategies that professionals often employed in order to challenge the men to take new actions. In addition, this section gives an overview of how men can implement strategies
in order to reduce and stop their violent behaviour as becoming involved in intervention activities and following professionals’ suggestions are key indicators of engagement. The research findings strongly suggest that both professionals’ skills and the treatment approaches are fundamental in providing culturally-competent services. The treatment approaches included implementing a working alliance, teaching time-out techniques and anger management approaches, and developing empathy skills.

Professionals stated that a working alliance was important in the men’s engagement in interventions because it often reduced their resistance. For instance, the men mostly stated that their goals for interventions did not match the professionals’ goals; this reduced the men’s engagement and often increased the drop-out. Other studies came to the same conclusion, i.e. that perpetrators drop out due to the lack of a working alliance in domestic violence interventions (Brown, O’Leary and Feldbau, 1997; Cadsky et al., 1996; Carbajosa et al., 2017; Lomo, Haavind and Tjersland, 2016; Rondeau et al., 2001; Taft et al., 2004). Likewise, several studies on black and minority ethnic groups in therapeutic interventions found that professionals’ competency in therapeutic alliance and empathy impacts on building trust and positive relationships (Brown et al., 1997; Fuertes et al., 2006; Horvath and Symonds, 1991; Martin et al., 2000; Sue et al., 2009). These findings support the importance of the agreement and rapport between the professionals and perpetrators during interventions.

Time-out was identified as a core approach for reducing violent behaviour and helping the men to end their abusive actions (Daniels and Murphy, 1997).
However, many men in my research reported that they could not apply time-out in an appropriate way which resulted in a poor outcome. The main reasons for poor outcome were about the men’s unwillingness to follow the guidelines of the technique and dropping out of the programmes early. Similarly, Wistow et al. (2016) noted that some men used time-out to extend their controlling behaviour or to interrupt their abusive behaviour during interventions. The findings by Wistow et al. are similar to my research findings in terms of how perpetrators often fail to implement time-out. However, my findings were different as they showed how the men justified their unwillingness to apply time-out by blaming the women. Because of their power gendered relations, many men perceived time-out as a sign of losing power when they left the environment.

In my research, one participant mentioned how he tried to apply time out. However, when he was practising time-out, he faced some unexpected behaviour by his wife as she did not understand the nature of time-out. His wife perceived this strategy as a new act of intimidation. So, she requested him to stay and talk. In this story, she was critical of his actions as he did not tell why he left the home. He expected her to understand the reasons for his actions of attempting to end his violent behaviour. However, he was supposed to explain his indications of his actions in order to achieve successful results. Yet, his insufficient application of the strategy caused more problems. In this sense, he started to think that interventions were based on British culture and his wife could not understand these strategies appropriately. Some studies showed that the same result is common among the men who do not apply the time-out strategy appropriately (Debbonaire et al., 2003; Jenkins, 1990; Wistow et al., 2016).
The applications of anger management techniques, time-out, understanding of the consequences of their violent acts and developing empathy with their family members were beset by complications in the form of strong patriarchal concepts, masculinity, class, gendered power relations, and insufficient accessible culturally-sensitive services. Despite these complicated circumstances, some men in this research were able to apply some strategies in order to achieve healthy and respectful intimate relationships. For instance, increasing their awareness about the feelings of partners and children helped some men to reduce their abusive behaviour. When the men realised that their partners were individuals who had the right to make their own choices and decisions, the men often successfully found alternative ways of acting. Likewise, Kelly and Westmarland (2015) found that perpetrators’ realisation of women’s rights and freedom helped them to build a healthy relationship. However, this did not necessarily mean that ideas of male power over women were overcome.

**Model of the factors influencing the men’s engagement in interventions**

Based on the interviews with Turkish men and professionals, a model was derived from their lived experiences in domestic violence intervention processes. The model includes dynamic and interconnected themes which present the men’s social and cultural contexts in their unique circumstances. This model shows how Turkish men can seek help for their violent behaviour and engage in interventions in the UK by focusing on their constructions in their subjective experiences. These constructions were often shaped by race, gender, class, culture, patriarchal beliefs and culturally-sensitive practices.
The influences of social and cultural backgrounds on engagement

The men’s responses to attending interventions were linked to their values and beliefs about what it is to be a man in a family and community, and the majority of the men held traditional male gender roles in their families. These unique circumstances are helpful in order to provide effective services for Turkish perpetrators of domestic violence. Based on the literature review and the data analysis, it is evident that the lived experiences of black and minority ethnic perpetrators of domestic violence need to be considered in their social and cultural structures (Guru, 2006; Hancock and Siu, 2009; Pfitzner et al., 2015; Williams, 1992). In thinking about a model, I examined social, cultural and religious backgrounds by asking what Turkish men brought with them when they came to the UK which was associated with their engagement in domestic violence interventions. Essentially, traditional gendered power relations and patriarchal beliefs on the roles of husbands in families were identified as difficulties in attending interventions. As Loncarevic and Reisewitz (2016) and Marshall and Furr (2010) indicate, when men hold strict gendered power relations, male violence is rationalised in families who have patriarchal beliefs.

As noted by Liversage (2013), immigration status is a strong indicator for Turkish men’s socialisation and psychological process in understanding their difficulties in integrating into a new country. The men’s resistance to understanding gender equality is especially related to their social and cultural backgrounds. Because Turkish men in this research talked about the importance of marriage and being a powerful man for family unity, their violence was mostly justified as a means of protecting their role as husbands. Importantly, they blamed women’s lack of adherence to traditional gender roles by raising the issues of their insufficient
engagement in interventions. This finding is consistent with several studies which noted that perpetrators often blame women for their violence (Ararat et al., 2014; Fatani, 2010; Murphy and Ting, 2010; Sokoloff and Dupont, 2005).

Another obstacle within the Turkish community was the social stigma and pressure from family and community members not to attend the therapeutic help and to hold traditional male dominant gender roles. This is because there is a very powerful social stigma attached to male violence in families. Exploring how the men engage in domestic violence interventions and construct their involvement in intervention processes provides an understanding of the complex social and cultural context in relation to their actions.

When the men did not find appropriate support, community members who held patriarchal beliefs might be able to reinforce violence against women. Often, the men felt that they had a right to control their wives. This strong belief is an important issue in understanding why many men could not continue to attend interventions regularly. Similarly, some studies examined how men’s violence might be reinforced in some communities that have an honour culture (Vandello and Cohen, 2003; Vandello and Cohen, 2008).

Another important dimension in developing a model to understand Turkish men’s engagement in domestic violence interventions is that domestic violence happens in Turkey as well. As such, different circumstances that influence men’s actions in the UK need to be considered. These circumstances are about having DVPPs and effective protections for survivors of domestic violence in the new country. These two key dimensions should be taken into account because perpetrators’ violent behaviour is taken more seriously in the UK than in Turkey.
Furthermore, it should be understood how men’s migration experiences, insufficient understanding of the UK system, language barriers, inadequate support system and lower socio-economic status makes them more isolated in the system. Similarly, studies on black and minority ethnic perpetrators’ involvement in interventions have found the relationship between immigration related stressors and insufficient engagement in interventions (Gondolf and Williams, 2001; Guru, 2006).

The majority of the men were not aware of the existing services and the meanings and benefits of therapeutic intervention programmes in the UK, and mostly did not know available services for them in order to end abusive actions and achieve a healthy and respectful intimate relationship. This has been confirmed by Gondolf and Williams (2001) who found that black and minority ethnic perpetrators have less experience in therapeutic interventions and more resistance to becoming involved in the sessions. Because of their unfamiliarity with the therapeutic environment, many men were unaware of the non-judgmental and safe conditions in the sessions. Therefore, they often spent some time understanding the therapeutic relationship with the professionals and it was only then that they shared their experiences of abusive actions and took responsibility by attempting to employ alternative behaviour.

Moreover, it was the men who attended the sessions with professionals of different social and cultural backgrounds who described the sessions as unbeneficial or based on unsupportive processes as these professionals could not understand their cultural, social and religious backgrounds. In this environment, many men were unable to share their cultural and religious views
with the professionals. In addition, the men’s concerns about being seen as weak and not living up to their masculine identity prevented them from engaging actively in the sessions.

**Providing available culturally-sensitive interventions**

Given the cultural and social contexts which impact on the men’s involvement and satisfaction in interventions, it is important to discuss the availability of culturally-competent interventions. This discussion will help to determine what is missing in understanding Turkish men’s circumstances and how this might promote more culturally-competent strategies for the Turkish community. Many participants mentioned the inability to access information due to a lack of language. Even though some participants attended the sessions with an interpreter, they were often uncomfortable due to concerns about confidentiality and not being exactly understood. In this research study, this was mentioned by several professionals providing private therapy or located in a local psychiatric service. Likewise, the importance of confidentiality and building trust between the interpreter and client has been cited by several researchers (Hadziabdic and Hjelm, 2014; Sue and Sue, 2013).

Especially for those men who lived outside London, accessing Turkish-speaking or culturally-competent professionals was described as a barrier in taking regular sessions. Scott and King (2007) described the geographical distance as an external responsivity factor for treatment engagement. For instance, one participant stated that he could receive a few sessions in person but he could not continue attending the sessions because the professional was located far away.
In these circumstances, he could not benefit from this process as he was only able to attend a few sessions.

Thus, it may be difficult for men to attend regular sessions if there are no Turkish speaking therapists available in their locations. As we can see here, socio-economic position and available Turkish speaking professionals were identified as issues impacting on his involvement in interventions. In providing services to Turkish perpetrators, it is essential to take into account their value systems and cultural norms, with the aim of respecting their views but not colluding in violence against women. Creating such an empathetic and safe environment allows men to feel they are not being judged, which can allow them to open up with their sensitive or traumatic experiences. Likewise, Hong et al. (2000) found that black and minority ethnic offenders often felt judged by their community which led them to feel shame and embarrassment.

The types of interventions, such as one-to-one or group based interventions, should be implemented based on the needs of the perpetrators. For instance, group-based culturally-sensitive interventions appeared to be important to strengthen the men’s engagement because of the group culture and family cohesiveness of the Turkish community. According to the recent report of Project Mirabal, the interviews with perpetrators show that they found group work more comfortable than a one-to-one session. Therefore, a group-based intervention is beneficial in improving the behavioural change process (Kelly and Westmarland, 2015). Many researchers have also noted that individual couple therapy as well as group based interventions should be implemented based on perpetrators’ needs (Clarke, Simmonds and Wydall, 2004; Stith et al., 2004).
Professionals need to understand the experiences of migration and cultural conflict among Turkish men. For instance, my participants moved to the UK where a more gender equal environment exists compared to Turkey. However, the majority of participants also moved to places where more Turkish people live in a new country. Moving to these places reduced the stress of adapting to the UK as they built networks with individuals of the same racial and ethnic background. However, this also had disadvantages as there was no motivation to improve their English language skills; they remained unaware of the rules around violence against women and children in the UK, and there was resistance to integrating with a new gender equal environment in terms of women’s freedom and rights. Some participants also expected to have similar interactions with the criminal justice system and the police in the UK that they had in Turkey. Their ideas of the rules around male violence against women in Turkey did not contribute to ending their abusive actions. Therefore, they needed to be informed about the rules of violence against women and the benefits of attending domestic violence interventions or individual therapeutic support in the UK.

Patriarchal values and male dominated gender roles are important values in traditional Turkish culture (Kandiyoti, 1995). These issues should be carefully worked on by professionals and on no account be ignored as Turkish men often drop out of sessions when they feel they are being misunderstood or these cultural issues are not being taken into account. Several studies on therapy in a multi-cultural setting found that misunderstandings of cultural issues can arise due to lack of awareness about clients’ social and cultural values (Houser and Thoma, 2013; Laungani, 2004; Tanaka-Matsumi, 2008). However, considering
their social and cultural backgrounds may help men to engage in the process and make sense of applying some anger management techniques in order to stop violent behaviour. In this sense, it will be more effective to first develop a positive therapeutic relationship with the men. Developing a therapeutic relationship has been identified as key to effective counselling by many studies (Cochran and Cochran, 2006; Hick, 2010). From the findings, I developed a model in Figure 7 which shows the multifaceted factors associated with Turkish men’s engagement in domestic violence interventions in the UK.

Figure 7 sets out the answers to my research questions by presenting the factors around how Turkish men engage in interventions in the UK. Their engagement can be divided into two main parts – contributing factors of engagement and circumstances associated with poor engagement and resistance. The research findings suggest that these factors are interconnected with patriarchy, masculinity, gender, race, class and programme related conditions. Overall, the most significant strategy in domestic violence interventions for Turkish men was about understanding male power and privilege in patriarchal values and providing culturally-competent services.
Culturally-competent approaches and professionals emerged as a key condition in increasing the men’s engagement. In this research sample, some men sought help for their anger and violence in psychiatric treatment but these services did not prove to be entirely helpful to them. Therefore, it is vital to refer violent men not only to psychiatric treatment but also to appropriate domestic violence.
intervention programmes. The results of my research show that the professionals’ willingness to increase their capacity and skills to understand the men’s social, cultural and racial backgrounds, and acknowledge the racism, discrimination and migration experiences was a key factor for effective behavioural change processes among the perpetrators who live in a society with different cultural values to their home country.

Summary

A conceptual understanding of Turkish men’s engagement in interventions requires taking into account the intertwined themes because the domestic violence perpetrator intervention process is complex and multifaceted. This research provides an understanding of key issues of engagement in interventions and implications for what would work for Turkish male perpetrators of domestic violence in the UK in order to increase their engagement in behavioural change processes. There is an important contribution in understanding the patriarchal beliefs and values of Turkish men by clarifying the reluctance that Turkish men experience in engaging in interventions. Several studies found that the entitlement, patriarchal values, and strictly gendered power relations often made men challenge describing their violent behaviour towards their wife and children as wrong (Almeida and Dolan-Delvecchio, 1999; Sever and Yurdakul, 2001). While the majority of the men did not realise their abusive actions were wrong, many men complained about the legal system which protects women and children but leaves them vulnerable. In addition, the majority of the men shared their frustrations in accessing culturally-competent services. The evidence illustrates an inadequate support system for behavioural change by highlighting the unavailability of the services (Campbell et al., 2010).
The feelings of shame and guilt, and questions about confidentiality and public stigma are linked with the men’s engagement in interventions. Fear of being labelled a perpetrator who is attending interventions is important as it often prevents men from engaging in interventions. These issues were identified within Turkish men’s experiences of living in a different social and cultural society and socio-economic positions. My research identifies how migration experiences and class impacted on participants’ choices over attending private or mainstream counselling services. A lower socio-economic status was an issue for dropping out of the sessions at an earlier stage for some men. According to the participants’ lived experiences, the factors around blaming women in a cultural context, migration experiences, gender power dynamics and class positions must be taken into account through culturally-sensitive interventions because the patriarchal concept, for example, plays a significant role in understanding intimate partner violence. This consideration improves effective interventions and social policies.

The process of men taking responsibility for their abuse includes three major stages. The first stage examines the men's previous experiences linked to their social and cultural backgrounds by focusing on men's work identity. In the second, professionals challenged men to accept their current positions by removing external factors for their violent actions. The third stage is about future plans for a healthy intimate relationship by challenging men to apply anger management techniques and improve empathy. The influences over Turkish men’s engagement in interventions included their feelings and thoughts about their need to change and their perceptions of strategies and suggestions for taking responsibility. This level of motivation and readiness to change has been
confirmed by several studies which examined the factors of perpetrators’ engagement and readiness for treatment (Day et al. 2009; Lomo et al., 2016; McMurran and Ward, 2010; McMurran, 2002; Sartin et al., 2006; Stephenson et al., 2017).

Conclusion

In this section, I will present contribution to research, implications for practice and policy, future research directions and limitations of the research. Given the findings about Turkish men’s engagement in interventions from data from nine Turkish men and eleven professionals, providing culturally-sensitive interventions is essential in order to achieve positive outcomes among Turkish communities in the UK. This research has sought to examine how Turkish perpetrators engage in domestic violence interventions by considering their cultural and social backgrounds. The central focus of this research is on how cultural, racial and social factors interweave in complex ways to bring about Turkish perpetrators’ engagement in interventions. The most important contribution in this research is the consideration of how Turkish men’s engagement in interventions was strongly linked to the understanding of the societal context by offering culturally-sensitive interventions. In addition, this research contributes to understanding how patriarchy, masculine identity, strict gendered power relations and migration-related stressors lead to men’s unwillingness to attend interventions. Therefore, providing culturally-sensitive services was identified as an important requirement for the men’s engagement in interventions. These have significant influences on the men’s acceptance of their violence as wrong and on them taking responsibility during interventions.
Major themes including patriarchy, masculine identity, socio-economic position, migration experiences, gender and culture are key markers underlying Turkish men’s experiences of everyday life in the UK. These themes are evident in the complicated issues linked to Turkish men’s engagement and behavioural change outcomes in intervention programmes. The main goal is to increase knowledge about the lived experiences of Turkish perpetrators in domestic violence interventions in the UK. This research provides in-depth perspectives and experiences of the men’s engagement in interventions through unique examples. Therefore, this research provides an understanding of Turkish men’s needs and experiences in interventions in order to increase their involvement in the process of interventions. The goal is to foster a more nuanced recognition of the themes that may enable programme providers to deliver effective strategies for Turkish perpetrators and potentially for black and minority groups in interventions. In this way, intervention programmes can offer an effective behavioural change process.

Contribution to research

My research is the first study that explores Turkish perpetrators’ engagement in domestic violence interventions in the UK through semi-structured interviews. This social issue provides important insight into the men’s lived experiences of engagement in domestic violence interventions in the Turkish community in the UK. Moreover, the semi-structured interviews allowed me to gain an understanding of how the men interacted with professionals, family and community members in the processes of interventions. As given in the detailed procedures on gathering data and the analysis of the data in Chapter Three, this
research acts as a guide for future research which could explore other issues of Turkish men’s experiences in domestic violence interventions.

This study examines how Turkish men identify the process of taking responsibility in order to end their abusive actions during interventions. Previous studies have mostly explored male perpetrators’ justifications for their violent behaviour (Adams, 2012; Bowen, Brown and Gilchrist, 2002; Mullaney, 2007). This is the first exploratory research that delves into how Turkish men engage in domestic violence interventions in the UK context; such an exploration helps to increase the men’s engagement and provides safety to survivors. However, interventions for domestic violence perpetrators include some difficulties in fully changing abusive behaviour and achieving a healthy and respectful intimate relationship. Given the lack of knowledge about Turkish men’s engagement in interventions in the UK, interviews with the men and professionals have revealed that culturally-competent strategies should be taken into account. Furthermore, future research needs to focus on how programme providers, social policies and communities can provide effective approaches in interventions in order to achieve safe and healthy families. Therefore, this present study contributes to understanding the factors around the violent men’s involvement in domestic violence interventions in Turkish groups in the UK.

Social and cultural structures are significant factors for understanding the implications of domestic violence interventions as they help us to take into account individuals’ race, gender, class and patriarchal values in a community. As my theoretical framework is based on feminist-informed gender theory and intersectionality, the interactions with family members and professionals among
Turkish men have been analysed. The findings of the data analysis clarified the need to examine the social structures and patriarchal community influences in order to have a comprehensive understanding of the phenomena. In addition, Turkish men’s engagement is influenced by complex factors including low socio-economic status, the influences of community members, the difficulties of integrating into a new country and the available culturally-sensitive interventions. Thus, this research highlights the need for more feminist and holistic approaches to promote the men’s engagement in domestic violence interventions.

Although this research is not an action research, I intend to share my core findings with professionals who work with perpetrators in interventions. Therefore, the benefits of the outcomes of this study are that programme providers and social policy-makers might consider Turkish perpetrators’ unique perspectives and implement appropriate strategies to increase engagement. It is assumed that the outcomes of the study will lead to developing the men’s communication skills, non-violent behaviour and other such improvements. Perpetrators could reduce and even end their violent behaviour and other related problems if they fully engaged in interventions. All these benefits could enhance the safety of survivors.

Implications for practice

In this section, I will illustrate the implications of effective strategies in culturally-sensitive practices that might help perpetrators’ engagement in interventions. The implications of culturally-sensitive practices include understanding social and cultural backgrounds, being aware of stressors about living in a society with different cultural values to Turkey, and increasing community-based practices.
Professionals’ understanding of the values and traditions of the men was critical for building rapport and trust with them. According to one professional’s observations, sensitive issues around ‘compulsory heterosexuality’ in the community in relation to patriarchal beliefs impacted on the men blaming women and taking responsibility. Therefore, complex and sensitive patriarchal and cultural circumstances need to be recognised by practitioners.

DVPPs, couple counselling, individual therapy sessions and psychiatric help are services that play significant roles in reducing and ending domestic violence. However, many factors influence whether these intervention processes achieve positive outcomes. Most of the studies indicated that implementing long-term structural approaches often achieve behavioural change in perpetrators (Featherstone and Fraser, 2012; Kelly and Westmarland, 2015; Marshall and Burton, 2010; Wojnicka et al., 2016). The research findings revealed that social, cultural, religious and structural factors impacted on perpetrators’ perceptions of interventions and their relationship with professionals during interventions. For instance, the framework of intersectionality and feminist-informed gender theory was utilised to understand key concepts around Turkish men’s lived experiences in interventions. In addition, this framework benefits in the understanding of the practical implications of domestic violence perpetrator interventions. The intersectionality helped me to analyse how gender, race, class and social structures played a part in men taking new actions (Cole, 2009). Feminist-informed gender theory also takes into account the dynamics of patriarchal beliefs which are inextricably connected to the men’s belief system in understanding their constructions around the roles of wife and husband in families (Catlett, Toews and Walilko, 2010). Being aware of this belief system is
important to develop a framework that can achieve respectful interactions with the men’s partners.

**Understanding racial and cultural backgrounds**

In considering racial backgrounds, this study discusses the importance of identity work in interventions among Turkish perpetrators who immigrated to the UK by dealing with the obstacles to integrating into UK culture. An understanding of their racial backgrounds and cultural traditions in relation to male dominated gender roles underlies the importance of implementing culturally-sensitive and accessible interventions for them. According to the professionals involved in my sample, the men often drop out of the sessions if the professionals do not provide a safe and confidential environment but instead apply confrontational methods. Likewise, Rasanen et al. (2012) noted that the clients’ unique needs should be considered by making some adjustments in intervention strategies in order to achieve positive outcomes in domestic violence perpetrator interventions.

My research findings suggest that professionals need to be trained or develop their knowledge independently about people who hold different racial and cultural backgrounds from them. Similarly, Lockhart and Mitchel (2010) described culturally-competent practices as “the acquisition of knowledge, skills, attitudes, and values that will enable individuals, organizations and societal institutions to respond effectively to a diverse society” (p. 5). However, Das and Carter-Anand (2016) argue that the process of implementing culturally-competent practices can be challenging for practitioners because of the “dominant and oppressive ideologies” in many places (p. 28). Therefore,
professionals need to be able to self-reflect and become aware of their biases and assumptions about black and minority ethnic groups in order to provide effective services (Das and Carter-Anand, 2016).

A substantial volume of studies found that perpetrators often minimise their violent behaviour or deny abusive behaviour (Blacklock, 2001; Bowen, 2011; Kelly and Westmarland, 2015; Partanen et al., 2006; Wood, 2004). Similarly, my research findings showed that many men had difficulties describing their actions as domestic violence due to patriarchal culture, social, religious and structural factors. However, the culturally-competent approaches are key practices in increasing the men’s awareness of the meanings of domestic violence. Most of the professionals highlighted that the men avoided mention of domestic violence as a first consideration in attending the intervention because of masculine identity and the feelings of shame and guilt of being a perpetrator of domestic violence. Ideologies and beliefs about masculinity have been identified as strong indicators of men’s lack of involvement or poor engagement in interventions (Augusta-Scott and Maerz, 2017; Courtenay, 2000).

Being aware of stressors about living in a society with different cultural values to Turkey

Migration experiences and socio-economic position are factors that influenced the men’s participation in interventions, especially in private therapy sessions. Men who moved from Turkey to the UK often faced obstacles to understanding the seriousness of the law on domestic violence as they often shared how the violent events did not have any consequences on their lives in Turkey. The evidence illustrates that perpetrators’ violence against women is often tolerated
and the criminal justice system often does not make perpetrators accountable for their abusive actions in Turkey (Pervizat, 2011). In addition, insufficient culturally sensitive services for Turkish perpetrators of domestic violence can be a barrier for their behavioural change processes. When the women or children reported the domestic violence to the police, the men then understood the rules in the UK. Similarly, several studies found the influences of the criminal justice system on the perpetrators’ behavioural change process (Heckert and Gondolf, 2000; Respect, 2015; Silvergleid and Mankowski, 2006). This was especially the case for men who were fathers as they were restricted from seeing their children. Increasing the men’s awareness about the meanings of emotional, financial, sexual and verbal violence, and coercive and controlling behaviour is essential to challenge the men to identify their actions as violent behaviour. This realisation can help them to reduce and end domestic violence in Turkish communities.

While the men’s awareness of the available services was important in understanding their engagement in interventions, the experiences of discrimination and racism were also identified as important circumstances in their involvement in behavioural change process. These racist and discriminatory practices were related to the lack of trained interpreters during the sessions and the overlooking of the men’s religious and cultural views by the professionals. For example, one participant, Cem, consistently highlighted his negative experiences by identifying how his son was an interpreter during the sessions. This participant also perceived the suggestions as inappropriate given his religious convictions. Likewise, the participant Ali claimed racist and discriminatory practices because of his Islamic name; he perceived an unfair assessment of his case. As well as these perceptions around racist and
discriminatory practices, he held strong patriarchal beliefs on his justifications for violent behaviour.

Likewise, Keating and Brown (2016) examined the experiences of black and minority ethnic groups in mental health settings by focusing on how to reduce stigma and discrimination. They found that “more complex issues of identity, spirituality, embodiment, social exclusion, racialization and racism are overlooked; this is the challenge for transformative social work practice” (p. 148). As a result, it is important to provide community-based practices. This idea will be developed in the next section.

**Increasing community-based practices**

Social stigma in the community and mistrust about the interventions is a barrier to involvement in domestic violence interventions. However, Rondeau et al. (2001) noted that building a positive therapeutic relationship and working alliance can reduce and stop mistrust which increases the men’s willingness to change their behaviour. Moreover, racial and cultural backgrounds play significant roles in understanding the men’s knowledge about the benefits and meanings of the interventions. Because of the feelings of shame, guilt and concern about receiving judgmental comments or sanctions during interventions, the majority of the men mentioned their unwillingness about participating in interventions at the beginning of the process. To address this, the men must first be informed about the meanings and procedures of the interventions because they are often not aware of the nature of the interventions. They mostly hold negative biases about interventions such as them having no benefit and being pointless and time-consuming practices. The main reasons for these negative thoughts and feelings
are that they think their social and cultural backgrounds are not taken into account in traditional interventions, especially those offered by non-Turkish professionals. This is also connected to the men’s resistance to accepting their actions as domestic violence or realising the consequences of violence on family members. Therefore, informing the community about available services is key in reaching out to men who act violently towards their partners and children.

Attending therapeutic interventions is perceived as a shameful situation because of the social stigma in the community. The studies on social stigma in therapeutic help also found that the outcomes of the interventions related to the fear of stigma in the community (Hatch et al., 1996; Hong and Ku, 2017; Sparrow et al., 2017; Williams et al., 1998). In taking into account this cultural stigma and the men’s feelings of anxiety and shame in participating in interventions, it is important to convey the information whilst being aware of this cultural issue. This stigma is linked to the belief about “being a powerful man” because getting support is often perceived as losing power. In addition, the studies found perpetrators’ resistance to sharing their sensitive and private experiences in interventions (Carbajosa et al., 2017; Lomo et al., 2016; Scott and King, 2007). The perceptions of being a man and accepting therapeutic support should therefore be reframed by breaking the dominant masculine identity. In addition, the professionals need to encourage men to realise the interventions as beneficial processes for family members’ well-being.

As discussed in this research, many men tried to get support through their personal connections and, if they were recommended to attend interventions, they participated in therapeutic or psychiatric help. Therefore, it is imperative to
note the influences of family members and friends on the men’s involvement in interventions. In many Turkish families, the conflicts and problems between couples try to be resolved first in family settings. As a result, working on more community-based intervention strategies is a vital step that needs to be taken by Turkish families who experience domestic violence. For instance, Kim (2010) emphasised that community-based intervention helps:

> to address violence, identify the problem, map allies, create common goals, and coordinate a plan of action and response [so that] communities in various formations can create a new set of norms, practices, and relationships to not only end violence but to build community health. (p. 196)

Community-based interventions are promising practices for providing effective responses to violence by individuals who are hard to reach. In order to reach black and minority ethnic communities, the framework of transformative practice should be considered. This includes “a strong element of working collaboratively and co-productively with minority communities, of mutual learning, engagement and responsiveness, and of listening to and reflecting critically on the voices and experiences” of black and minority groups (Cemlyn and Allen, 2016, p. 162). As a result, my findings illustrate the importance of collaborative work with community members by listening to their struggles and perspectives about domestic violence interventions.

While my research suggests community-based practices increase men’s active engagement in interventions, this recommendation has some dangers. These dangers are linked to the social stigma and perceptions around discriminatory practices. For instance, community members might be concerned about their culture being labelled brutal and backward because domestic violence is often identified as a shameful issue. Likewise, Geraldine, Diamond and Shukra (2009)
noted that community members were concerned that their perspectives and experiences could be exaggerated by social workers or social policy makers. This can lead to disengagement among individuals in the community. Diversity within Turkish groups means that not all community members experience similar obstacles to accessing services (Geraldine, Diamond and Shukra, 2009). Diversity in the community and disengagement makes it challenging to achieve consistent voices. Community-based efforts can be seen as inappropriate for some individuals as they perceive domestic violence as a private matter. While religious leaders might be key groups in Turkish communities during community-based practices, male dominated leaders might avoid accepting the existence of domestic violence in their communities. Overall, complex and sensitive circumstances and differences in Turkish groups need to be recognised in order to reduce potential dangers and increase the effectiveness of community-based interventions.

**Implications for policy**

Given the fact that professionals were able to assist the men to recognise their violent behaviour and their need to change during the interventions, the implications for policy will be clarified in this section. I will concentrate on how key issues can increase the men’s engagement by highlighting the importance of considering the men’s social and cultural contexts and applying culturally-competent strategies.

Domestic violence is taboo and often perceived as a family issue in Turkish communities (Cihangir, 2012; Department for Communities and Local Government, 2009). The evidence illustrates that the influences of community
members and patriarchal beliefs are powerful factors in shaping the men’s actions in various contexts (Broady, Gray and Gaffney, 2014; Dogan, 2014a; Guru, 2006; Kaufman, 1999). Importantly, the immigration related stressors such as language barriers, lack of awareness about existing services and insufficiently trained interpreters during the sessions have emerged from the data as barriers to the men’s active engagement in interventions. In taking into account these influences, promoting culturally-sensitive interventions is important in order to foster healthy and respectful intimate relationships in Turkish communities in the UK.

Increasing knowledge about the rules of violence against women which is a criminal activity in the UK is something that the men should be aware. Even though the majority of the men tolerated violence, the professionals should clearly inform them of the consequences of violence against women and children. Due to the tolerance of violence, the community needs to be informed about the meanings of domestic violence and the consequences of violence on family members. Yet, this informing process might not be straightforward because it could be perceived as a judgmental practice. As such, it needs to be clarified carefully by recognising the sensitivity of the issue, their cultural diversity and obstacles to integrating into UK culture. This would help the men to take greater responsibility and encourage them to change their abusive behaviour. Explaining the meaning of domestic violence by emphasising how violent acts influence family members in harmful ways is a vital step for the community members in order to foster greater respect. This process is quite challenging because some community members can reinforce male violence against women
within patriarchal concepts (Chronister and Aldarondo, 2012; Douki et al., 2003; Gondolf and Williams, 2001; Sallan-Gül, 2013).

The ways of educating the men on domestic violence could take the form of social media, newspapers, local television and community meetings. Nevertheless, domestic violence is a highly secretive issue and the men often refuse to accept that their actions amount to abuse because they often justify their violent acts. On the other hand, some men in this research who attended psychiatric help shared their frustrations about inappropriate support. Other men needed to be informed about the available services to them in order to increase their involvement in interventions. However, this informing process might not directly name domestic violence because the men often do not label their situation as domestic violence. As a result, this process can be about relationship problems because of the sensitive cultural dynamics. Many studies pointed out the importance of building rapport and trust for a positive therapeutic relationship (Holdsworth et al., 2014; Taft and Murphy, 2007). The professionals should take into account the men’s initial resistance to talking about their violence in interventions.

In providing educational materials, increasing the number of Turkish-speaking or culturally-competent professionals is also key to secure the men’s trust in the interventions. In order to increase trust in the agencies, setting up more group-based culturally-sensitive interventions promotes the men’s involvement and willingness to take new actions. Importantly, some positive examples in the community, such as role models, are critical practices for men’s realisations of the benefits of the programmes. Similarly, the existing literature found that the
role models in a community or group-based intervention impacted on the perpetrators’ change behaviour in positive ways (Ballou, 1995; Stephenson et al., 2017). Some professionals in my research suggested that questioning the men’s cultural views and rituals during interventions can be perceived as respectful behaviour because this shows that their backgrounds, religion and values are being considered. Through this approach, the men can build rapport and trust.

Religion and culture are important dynamics in the understanding of the rationalisation of violence due to male privilege and power. It would therefore be beneficial to inform religious leaders and other key people in the community on this subject. For instance, several studies highlighted the influences of religious leaders on people and how they can educate individuals about available services (Al-Aman, 2012; Ayyub, 2007; Heimlich, 2011; Wilson, 2006). However, there is also evidence that some religious leaders might stop women survivors’ help-seeking behaviour (Ayyub, 2007). Thus, getting support from religious leaders could be problematic if they hold patriarchal values about male privilege and power over women.

As some people experienced difficulties accessing interventions, places where perpetrators can easily go should be established. For instance, when the men accessed the services by referring themselves, they mostly completed the sessions effectively. Likewise, Brandon and Hafez (2008) examined the influences of community and religious organizations on perpetrators’ involvement in their initial efforts in the help-seeking process. They found the important influence of these organizations on their actions so these places should be able
to appropriately inform the people who need to receive help through domestic violence interventions.

In order to increase the benefits of the interventions, positive and efficient communications with the community members would be useful processes because the majority of immigrant people feel alienation and distrust the system and agencies (Murphy and Ting, 2010). This issue is also related to the insecure position they perceive that they are in a new country. Even though there is no direct finding around the relationship between the feelings of insecurity and insufficient engagement among immigrant perpetrators in interventions, some studies found the relationship between the feelings of insecurity and difficulties of acculturation among Turkish immigrants in various contexts (Arends-Tóth and Van de Vijver, 2008; Ataca and Berry, 2002). More studies are required about the men’s sensitive and complex positions in relation to domestic violence in the Turkish and other black and minority ethnic communities in the UK.

Developing more centres in which the benefits of interventions could be explained, such as in mosques and community centres, and the services available to black and minority ethnic groups, would be beneficial. Moreover, in order to increase perpetrators’ willingness to attend behavioural change processes, effective responses to perpetrators of domestic violence by probation services are also required. It is critical for the prosecution services to supervise perpetrators as they are in a powerful position over perpetrators (Bowen, 2017).

**Future research and recommendations**

Culturally-sensitive practices that create a positive relationship with professionals may often lead to successful interventions although more research is needed in
this particular topic. The findings in this research are mostly applicable to Turkish men in interventions but they have implications for other black and minority ethnic perpetrators in the UK or other places around the world. Future research directions will be clarified in this section by concentrating on how to increase the perpetrators’ willingness to attend interventions and change abusive behaviour.

Multicultural therapy might appear inadequate as a means of ending domestic violence. However, in order to build a positive therapeutic relationship and increase the men’s motivations to attend interventions, understanding individuals’ religious views can be useful. For instance, Roysircar (2003) noted that a psychotherapist should “be aware of Islamic social, moral, and legal duties of psychological significance in order to develop interventions that will respond to the cultural barriers of Muslim clients” during counselling (p. 258). Likewise, the intervention processes should recognise Turkish perpetrators’ unique identities in the UK. For instance, many men experience oppressions in the community which need to be examined and understood by therapists. In this way, therapists or programme providers could help men within a broader understanding of their positions in a community and how it impacts on their relationship with their wives and children.

In order to foster healthy and respectful intimate relationships, intervention approaches need to take into consideration the needs and struggles in the lives of the perpetrators. When intervention programmes understand the overall picture and experiences that these men deal with throughout their lives, they can implement appropriate approaches. Therefore, the intervention approaches should be carefully implemented by considering current or previous sensitive and
harmful experiences in the men’s lives. An investigation into their potential vulnerable position in a community and power status in family settings would help in the application of more appropriate strategies for their complex issues. For instance, the study by Gray et al. (2014) found key barriers that prevented many perpetrators from regularly attending interventions. These barriers were “ongoing external pressures, such as work, financial concerns and mental health issues” (Gray et al., 2016, p. 175). Furthermore, the evidence consistently shows that many black and minority ethnic perpetrators experience oppression in their community or at the hands of institutions (Almeida and Hudak, 2002). Without focusing on their unique experiences based on race, class, gender and patriarchal values, the interventions process could fail to achieve a successful outcome for the behavioural change process.

This present research acknowledges that the Turkish community holds a unique social and cultural position in the UK. Therefore, traditional interventions appear to fail to achieve engagement among Turkish perpetrators. Similarly, Gondolf and Williams (2001) found the high rate of drop out among African American perpetrators in traditional interventions. In terms of Turkish men’s inadequate engagement, this is strongly linked to therapists’ lack of understanding of their religious, social and cultural backgrounds and experiences of discrimination in the community. As such, these cultural and environmental issues, as well as race and ethnicity, should be taken into consideration in any attempt to achieve men’s engagement. Language is also a barrier for many Turkish men becoming involved in interventions even though they are aware of their need to change their behaviour. Having a bilingual therapist and receiving culturally-competent
interventions are factors are effective means of engaging Turkish men who act violently towards their partners.

According to the experiences of Turkish men, the traditional therapeutic approaches are inadequate as a way to promote positive behavioural change processes, especially if men experience language barrier, lack of knowledge about therapeutic interventions; hold strict patriarchal values, unique migration experiences and male dominated gender roles. Professionals’ accounts also indicate that understanding men’s socialisation and psychological process in the UK develops trust and rapport with them which can help them to develop alternative behaviour. Hence, the factors of successful domestic violence interventions for Turkish perpetrators can be identified under the culturally-competent services by considering the interconnected influences of religion, culture, migration status and patriarchal concepts. In addition, culturally-competent professionals need to be bilingual or be able to provide trained interpreters in order to offer effective behavioural change processes for perpetrators in the UK who do not speak English.

Limitations of the research

The most important limitation of this research was the small number of participants (nine Turkish men and eleven professionals). This occurred because domestic violence is often perceived as taboo in Turkish communities. Many people do not describe men’s abusive and controlling behaviour as domestic violence. The sample size is an indication of the fact that exploring men’s engagement in domestic violence interventions in Turkish community is sensitive and taboo. Turkish men who have been perpetrators involved in interventions in
the UK are hard to reach groups due to the strong patriarchal values and the sensitivities of the topic. Being a female doctoral student researching Turkish male perpetrators’ engagement in interventions included several sensitive and difficult obstacles to gathering data because gender, race and class plays a significant role in accessing participants. Therefore, many men, DVPPs and social service agencies were often unwilling to take part in my research.

During the data collection, some Turkish men were reluctant to open up to me as a researcher. This could be because they misunderstood my actions and have been socialised in a society where men do not share their private experiences. Many researchers also found that male perpetrators often experience difficulties in sharing their sensitive experiences and are unwilling to take part in research due to their dominant masculinity (Augusta-Scott and Maerz, 2017). Their denials and minimisations of their violent behaviour have also been barriers for them sharing their experiences (Harne and Radford, 2008; Stoops, 2003; Wood, 2004). In addition, these men may experience feelings of shame due to their violent behaviours (Loeffler et al., 2010; Tangney and Dearing, 2002). Attending therapy or an intervention is also perceived as weakness.

Despite the obstacles to accessing participants, I was able to recruit the participants through my personal connections and by accessing private and local therapy and counselling services that work with Turkish speaking communities (see Chapter Three for details). In order to access my participants, I also contacted several community services, mosques and solicitors. Professionals who work with domestic violence cases in Turkish communities are often willing
to help my research because they feel that this issue needs to be researched to make services more effective for perpetrators.

Both men’s socialisation and masculinity have critically impacted on my data gathering processes. To overcome this, I tried to explain that this research would help their voices to be heard and the results of the study would improve the approaches in interventions based on their experiences and perspectives. When they thought that the research would be beneficial for the Turkish community, then they were more willing to participate in my research. Convincing the participants to believe that the research is beneficial is an important motivational factor to lead them to take part in the research (Jensen and Laurie, 2016). Hence, many men’s refusal to attend the research resulted in a small sample size.

Even though not including survivors’ views and experiences on perpetrators’ behavioural change processes can be perceived as a limitation, this research concentrated on how men tell their own stories in seeking help for their violence and engage in interventions. Rather than focusing on the outcome of the interventions, I investigated the ways in which Turkish perpetrators started becoming involved in and attended interventions and applied some strategies in their intimate relationships. In addition, the relationship between the professionals and the men was explored in order to have a better understanding of the men’s interactions and the processes of interventions. This is the first piece of exploratory research which conducted semi-structured interviews with Turkish men and professionals in domestic violence intervention processes. In addition, the research has helped to increase the understanding of how Turkish
men engage in interventions in the UK. The investigation of this highly sensitive and beneficial topic is the strength of this research. Thus, this research contributes new knowledge to the literature and helps social policies and programme providers of domestic violence interventions to develop effective services for Turkish groups experiencing domestic violence.

**Overall Conclusion**

This research has uncovered socio-cultural issues that influence Turkish perpetrators’ engagement in interventions in the UK. The application of culturally-sensitive practices often addressed these issues and increased perpetrators’ engagement. Further, the quality of the relationship between a Turkish man and a programme facilitator and the quality of intervention approaches had a real impact on bringing about successful engagement. This research has investigated how Turkish men engage in domestic violence interventions in the UK by conducting semi-structured interviews with nine men and eleven professionals. This investigation realised that the men’s lived experiences and perspectives of domestic violence intervention processes are determined by complex social and cultural backgrounds, traditional patriarchal beliefs and the influences of community members.

Importantly, community members need to understand the meanings and benefits of the services by providing community-based interventions in order to break the social stigma. The influences of the patriarchal structure are strongly confirmed by the data. Hence, there is an important need for collective community responses to end domestic violence. The male dominated gender role and privilege in families is often taken for granted by husbands in families (Adams,
2012; Kandiyoti, 1995). Some community members can justify male violence against their partners because of the extensive rights allotted to men in patriarchal structures (İlkkaracan, 1996). When the men live in this social context, it is difficult for them to seek help for their violence and attend intervention processes. However, if community members are aware of the consequences of domestic violence and do not reinforce male violence against women, they may be able to direct their men to apply for professional support.

On the other hand, the perceptions and experiences of institutionalised racism can prevent them from perceiving professional support as appropriate or helpful for them. The reality is that informing the community members including religious leaders and other community leaders in order to inform them about the implications and benefits of interventions is a vital process to increase the safety of family members.

The traditional intervention approaches were often identified as having a lack of strategies and competency to help black and minority ethnic perpetrators in the UK (Durrance and Williams, 2003; Guru, 2006; Powis and Walmsley, 2002), with the majority of men in this research stating their preference to attend private practices with a Turkish-speaking therapist. The professionals stated that considering Turkish cultural and social backgrounds is a key factor in engaging with the men in domestic violence interventions by building trust and rapport. Therefore, the findings of the study suggest that understanding the men’s unique social and cultural backgrounds and providing a safe and confidential environment enables the men to actively engage in interventions.
Whilst there is a need for more research on this topic, this study contributes new knowledge to the literature on engagement in domestic violence perpetrator interventions among Turkish men and implications for practice in the UK. Masculine identity, patriarchal beliefs and insufficient culturally-competent professionals were identified as factors in the men’s lack of engagement in interventions whereas culturally-sensitive practices were factors that increased the men’s engagement. The interconnectedness of race, gender, class, and social and cultural backgrounds impact on the men seeking help and attending domestic violence interventions. Such complicated and multifaceted circumstances should be critically identified in order to provide effective services for these perpetrators.
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APPENDICES

APPENDIX 1: Conceptual framework

- **CLASS**: Socio-economic status, employment
- **GENDER**: Traditional gender roles, gendered power, sexism, male dominance
- **RACE and ETHNICITY**: Racism in social services, social policies, cultural and religious backgrounds
- **PATRIARCHY**: Honour shame dynamics, male privilege, and hegemonic masculinity
- **FATHERING**: Recognising feelings and experiences of children, contact with children's social services, and improving fathering skills
- **CULTURALLY-SENSITIVE APPROACHES**: Understanding cultural and traditional norms and men's privilege, oppression and power in a community, group cohesion, peer support, immigration status
- **TURKISH MEN'S ENGAGEMENT IN INTERVENTION PROCESSES**: Understanding harmful consequences on their partner and children, getting in a prison, feeling awful or guilt or shame, concern of partner leaving, being isolated from community
APPENDIX 2: Theoretical framework

Intersectionality Theory
CLASS
RACE
GENDER

TURKISH MEN'S ENGAGEMENT IN INTERVENTIONS

Feminist-informed gender theory
PATRIARCHY
MALE
COMPETENCE
MASCULINITY
APPENDİX 3: The six phases of thematic analysis (Braun and Clarke 2006)

<table>
<thead>
<tr>
<th>Phase</th>
<th>Description of the process</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Familiarising yourself with your data</td>
<td>Transcribing data (if necessary), reading and re-reading the data, noting down initial ideas.</td>
</tr>
<tr>
<td>2. Generating initial codes</td>
<td>Coding interesting features of the data in a systematic fashion across the entire data set, collating data relevant to each code.</td>
</tr>
<tr>
<td>3. Searching for themes</td>
<td>Collating codes into potential themes, gathering all data relevant to each potential theme.</td>
</tr>
<tr>
<td>4. Reviewing themes</td>
<td>Checking if the themes work in relation to the coded extracts (Level 1) and the entire data set (Level 2), generating a thematic ‘map’ of the analysis.</td>
</tr>
<tr>
<td>5. Defining and naming themes</td>
<td>Ongoing analysis to refine the specifics of each theme, and the overall story the analysis tells, generating clear definitions and names for each theme.</td>
</tr>
<tr>
<td>6. Producing the report</td>
<td>The final opportunity for analysis. Selection of vivid, compelling extract examples, final analysis of selected extracts, relating back of the analysis to the research question and literature, producing a scholarly report of the analysis.</td>
</tr>
</tbody>
</table>
APPENDIX 4: Invitation letter

Dear Sir/Madam,

I am Zeynep Turhan, doctoral student at Goldsmiths University of London in the Social Work Department under the supervision of Professor Claudia Bernard. I am writing to invite you to take part in a research study exploring Turkish men’s experiences on their engagement in interventions.

Its purpose is to explore key issues around perpetrators’ behavioural change processes and improve training for professionals involved with these cases. I have been asked to invite clients and group facilitators to help with the study. I am seeking programme providers or group facilitators who are working or have worked with Turkish male perpetrators as well as Turkish male perpetrators who are attending or have attended a domestic violence interventions to take part in an individual interview. I would like to give you some information about the project and then ask if it’s appropriate for me talk with you.

Here are some things for you to know about the study:

• If you decide to participate, you would be interviewed for about 40-60 minutes.

• Your participation is totally voluntary and even after starting you can stop at any time.

• Whether or not you choose to participate, your services at this agency or any other will not be affected in any way.

• The information you share will be kept confidential.

Do I have your permission to contact you? You will be given more information and have a chance to have your questions answered further. What time and day can you be contacted and what email address and phone number is the most secure and convenient way to reach you?

Thanks in advance for your kind help.

Yours sincerely,

Zeynep Turhan

zturh001@gold.ac.uk

07459874869

Researcher.
APPENDIX 5: Participation information sheet for Turkish men

Lived Experiences of Turkish Men’s Engagement in Domestic Violence Interventions

I invite you to participate in a study about your views and experiences in a domestic violence interventions.

WHAT IS THE PURPOSE OF THIS RESEARCH?

This research aims to get a better understanding of your experiences of these programmes in London.

WHAT WILL HAPPEN IF I AGREE TO TAKE PART?

If you decide to participate, I would like to interview you for 40-60 minutes. The time and location of the interviews will be organised and negotiated with confidentiality and safety issues in mind. All interviews will be audio recorded and conducted in private by myself. I will ask you questions about: the history of your participation in an intervention programme, your relationship with group members and facilitator, and your ideas about improving domestic violence interventions.

CAN I WITHDRAW IF I DO NOT WISH TO CONTINUE?

Your participation in this project is entirely voluntary and you are free to stop your participation at any time.

WHAT WILL HAPPEN TO THE INFORMATION I SHARE WITH YOU?

The information you share will be kept confidential. You will not be identified in any reports from the study. If you give us permission to audio record the interview, I will not put your name on the recording. After the information from the recording is written down, the recording will be erased. All notes and recordings will be kept locked in my personal computer with secure password and not accessible to anyone. The consent form will be kept locked in my room separately from the information you provide. No one from the courts or any other agency will see or hear your information. However, if you threaten to hurt yourself or another individual, this confidentiality agreement might be broken. I will first discuss my concerns with you and encourage you to report this to the relevant agencies. If I need to share any information about things that I have serious concerns about with the project worker or programme provider. I will first seek to gain your permission to do so.

WHAT WILL HAPPEN WITH THE RESULTS OF THE STUDY?

The findings will inform how programme providers and social policies can provide more effective services for Turkish men in interventions. The results will be written up in my thesis and will be used in professional and academic journal and conference presentations.

WHAT ARE THE RISKS TO ME IF I DECIDE TO PARTICIPATE IN THE STUDY?

I do not anticipate any major risks to you if you decide to participate in this study. You might find it embarrassing to be asked about your struggles and experiences with the intervention process and your current concerns. I am taking several steps to minimize any risks. For instance, if you feel upset at the end of the interview you will be given some immediate support by the interviewer. In addition, if you want someone to talk with further, we will refer you to a counsellor and other supportive resources if you do not already have these available.

WHAT ARE THE EXPECTED BENEFITS FOR ME OR OTHERS?

I hope the findings from the research project will benefit Turkish men who may use programmes in the future and programme providers.

AUDIO RECORDING

Please sign the consent form if you are willing to have this interview audio recorded. You may still participate if you are not willing to have the interview recorded. If you change your mind during the interview, the audio recorder can be turned off.

WHAT CAN I DO IF I HAVE ANY COMPLAINTS OR CONCERNS ABOUT THE RESEARCH PROCESS?

You can contact the researcher Zeynep Turhan by phone on 07459874869 or via email at zturh001@gold.ac.uk. If you have any concerns, you can contact Professor Claudia Bernard who is supervising this research study. You can contact her on 0207 919 7837 and c.bernard@gold.ac.uk.
APPENDIX 6: Participation information sheet for Turkish men (Turkish)

Bilgilendirme formu

Türk Erkeklerin Önleme Programına Katılımlarıyla İlgili Tecrübeleri

Önleme programındaki tecrübelerinizi ve görüşlerinizi öğrenmek için bu araştırmaya sizi davet ediyoruz.

ARAŞTIRMANIN AMACI NEDİR?

Çalışmanın ana amacı sizin önleme programlarına katılım ve tecrübelerinizi kesfetmek ve yeni teknikler ve uygulamalar geliştirmesinde burda ortaya çıkacak olan yakısların önemini ortaya koyarak.

EĞER ARAŞTIRMAYA KATILIRSANIZ NELER YAPMANIZ BEKLENMEKTEDİR?

Eğer çalışmaya katılmayı kabul ederseniz, yaklaşık 40-60 dakikalık bir görüşme süreci olacaktır. Önleme programına katılım sürecini, süreçteki tecrübe ve görüşlerini anlamaya yönelik sorular sorulacaktır. Özellikle bu sürecin nasıl daha etkili bir şekilde hizmet verebileceğine yönelik görüş ve önerileriniz sorulacaktır.

EĞER ARAŞTIRMAYA DEVAM ETMEK İSTEMEMEK İSTEMEDİM NE OLUR?

Bu araştırmaya katılmanız tamamen gönüllülük ilkesine bağlıdır ve istediğiniz zaman görüşmeniyi bırakma hakkına sahipsiniz.

VE RDİGİM BİLGİLERİN GİZLİLİĞİ NASIL KORUNUR?


ARAŞTIRMA SONUCLARI NASIL KULLANILACAK?

Araştırma sonuçları program kurucularını ve sosyal politika uzmanlarını bilgilendirecektir. Bu durumda etki verimi hissedilecektir. Ayrıca bilgilerin analiz edilip doktora tezinde, makalelerde ve konferanslarda kullanılacaktır. Yapılan analizlerin ve verilerin açıklıkta size ulaşılması için olağanüstü bir işlem planlanmıştır.

ARABAŞTIRMAYA KATILIMMDA BANA KARŞI BİR TEHLIKE VAR MI?

Bu katılımınızla ilgili herhangi bir risk faktörü yoktur. Önleme programlarına katılım süreciyle beraber, bu süreçteki tecrübeleriniz ve görüşleriniz analiz edilip doktora tezinde, makalelerde ve konferanslarda kullanılacaktır. Yapılan analizlerin ve verilerin açıklıkta size ulaşılması için olağanüstü bir işlem planlanmıştır.

BU ÇALIŞMANIN BANA FAYDASI VAR MI?

Araştırma sonuçları önleme programlarında çalışan uzmanların daha başarılı teknikler sunmalarına ve Türk adamlarının daha olumlu tecrübeler kazanmalarına yardımcı olacaktır.

SES KAYIT SÜRECİ

Eğer yapılacak görüşmenin kayıt edilmesine izin verirseniz, görüşmenin kayıt edilmesini istemiyorsanız araştırmaya bu şekilde de katılabilirsiniz.

EĞER ARAŞTIRMADA SÜRECİNDE SİKAYETLERİM YA DA SORULARIM OLURSA KİME NASIL BASVURABİLİRİM?

Eğer arastırmaya ile ilgili herhangi bir sorun olursa, benimle 07459874869 telefon numarasıyla ya da zturh001@gold.ac.uk email adresinden iletişime geçebilirsiniz. Eğer arastırmaya sureci ile ilgili bazı endiseleriniz varsa, Porfesor Claudia Bernard’a 0207 919 7837 ve c.bernard@gold.ac.uk den ulaşabilirsiniz.
APPENDIX 7: Participation information sheet for programme providers or therapists

Lived Experiences of Turkish Men’s Engagement in Domestic Violence Interventions

I invite you to participate in a study about your viewpoints and experiences in a domestic violence perpetrator programme.

WHAT IS THE PURPOSE OF THIS RESEARCH?

The main purpose of the study to examine perspectives and experiences of programme providers and group facilitators who are working or have worked with Turkish perpetrators in interventions. These views will be about Turkish men’s engagement in programmes. I wish to interview participants from about 3 programmes and two group facilitators for each programme.

WHAT WILL HAPPEN IF I AGREE TO TAKE PART?

If you decide to participate, I would like to interview you for about 40-60 minutes. The time and location of the interviews will be organised and will take place at the intervention project. All interviews will be recorded and conducted in private by myself. I will ask you questions about: how you describe your experiences about Turkish perpetrators’ engagement in interventions.

CAN I WITHDRAW IF I DO NOT WISH TO CONTINUE?

Your participation in this project is entirely voluntary and you are free to stop your participation at any time.

WHAT WILL HAPPEN TO THE INFORMATION I SHARE WITH YOU?

The information you share will be kept confidential. You will not be identified in any reports from the study. If you give us permission to audio record the interview, we will not put your name on the recording. After the information from the recording is written down, the recording will be erased. All notes and recordings will be kept locked in my personal computer with secure password and not accessible to anyone. Your contact information will not be kept after the interview.

WHAT WILL HAPPEN WITH THE RESULTS OF THE STUDY?

The findings will inform how programme providers and social policies can provide more effective services for Turkish men in interventions. The results will be written up in my thesis and will be used in professional and academic journal and conference presentations.

WHAT ARE THE RISKS TO ME IF I DECIDE TO PARTICIPATE IN THE STUDY?

I do not anticipate any major risks to you if you decide to participate in this study.

WHAT ARE THE EXPECTED BENEFITS FOR ME OR OTHERS?

In the long run, I expect that the findings of the study will improve your strategies and knowledge in working with Turkish men in order to increase their engagement in interventions.

AUDIO RECORDING

Please sign the consent form if you are willing to have this interview audio recorded. You may still participate if you are not willing to have the interview recorded. If you change your mind during the interview, the audio recorder can be turned off.

WHAT CAN I DO IF I HAVE ANY COMPLAINTS OR CONCERNS ABOUT THE RESEARCH PROCESS?

You can contact the researcher Zeynep Turhan by phone on 07459874869 or via email at zturh001@gold.ac.uk. If you have any concerns, you can contact Professor Claudia Bernard who is supervising this research study.

You can contact her on 0207 919 7837 and c.bernard@gold.ac.uk.
APPENDIX 8: Consent form

Lived Experiences of Turkish Men’s Engagement in Domestic Violence Interventions

I confirm that (please tick box as appropriate):

<table>
<thead>
<tr>
<th>Statement</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>I have read and understood the information about the research that is provided in the information sheet.</td>
<td></td>
</tr>
<tr>
<td>I have been given the opportunity to ask questions about the research and my participations.</td>
<td></td>
</tr>
<tr>
<td>I am willing to take part in this research project voluntarily.</td>
<td></td>
</tr>
<tr>
<td>I understand that I am free to withdraw from the research at any time without giving any reason.</td>
<td></td>
</tr>
<tr>
<td>I clearly understand the procedures of confidentiality.</td>
<td></td>
</tr>
<tr>
<td>I give my consent for audio recording during the interview.</td>
<td></td>
</tr>
<tr>
<td>I confirm that anonymous questions and responses from audio recording may be used in publications, reports and other research outputs.</td>
<td></td>
</tr>
<tr>
<td>I agree that the study can be published.</td>
<td></td>
</tr>
<tr>
<td>I agree to sign and date this informed consent form.</td>
<td></td>
</tr>
</tbody>
</table>

Participant:

___________________________________________________________________  _______________________________________________________________________
Printed Name Signature                                                Signature                               Date

Researcher:

______________________________________________________________________
Printed Name Signature                                                Date
APPENDIX 9: Consent Form (Turkish)
İzin formu
Turk Erkeklerin Onleme Programına Katılımlarıyla İlgili Tecrubeleri

Lütfen aşağıdakiları onaylıyorsanız tik atınız:

| Araştırmının içeriği ve süreci ile ilgili olan bilgilendirme formunu okudum ve anladım. |
| Araştırmaya katılımım ve araştırma ile ilgili sorularımı sormama izini verildi. |
| Bu araştırmaya katılmaya istekliyim ve gönüllülük ile katıyorum. |
| İstediğim zaman araştırmadan hiçbir sebep belirtmeden ayrılabileceğim konusunda bilgilendirildim. |
| Araştırmının güvencilik ve gizlilik ilkelerini açıkça anladım. |
| Mülakat boyunca yapılacak olan ses kaydı için izin veriyorum. |
| Mülakat sonucundaki bilgilerin isim kullanılmaksızın yayınlanmasında bir sakınca görmüyorum. |
| Çalışmanın yayınlanmasına izin veriyorum. |
| Asağıya tarihle birlikte imzami atmayı kabul ediyorum. |

Katılan kişi:

___________________________________________________________________

Isim ve İmza Tarih

Arastirmaci:

___________________________________________________________________

Isim ve İmza Tarih
APPENDIX 10: Semi-structured interview questions for Turkish men

Prompts

What are the problems that you are facing in the UK and how these impact on your relationship with family members?

How do you recognise your problems with your wife or ex-partner?

How does general practitioner or social service worker refer you to the interventions?

What happened during the referral processes?

Initial issues of engagement

Tell me about how you have come to this intervention programme?

When was your first participation in an intervention programme? What was it like? What did you think then? Who if anyone influenced your actions? Tell me about how he/she or they influenced your participation? Tell me about your thoughts and feelings when you learned and became involved/participated in an intervention programme?

Could you describe the events that led up to participating in an intervention programme?

What was going on in your life then? How would you describe how you viewed DVPP before you participated in a programme? Has your view of the DVPPs changed?

Intermediate questions on interactions with group members and group leader

Tell me about your interactions with group members and therapist.

How have your thoughts and feelings about the interactions with the group leader evolved?

The incidences of positive and negative engagement in a group

How do you describe your positive experiences (engagement) in interventions since you started participating?

What are examples of negative experiences (engagement)?

Tell me how you go about engaging in a group? What do you do in interventions in a typical day?

End questions about the process of engagement

What do you think are the most important ways to engage in a group? How did you discover them?

Tell me how your views may have changed since you have been involved in a DVPP?

After having these experiences, what advice would you give to someone who has just started to participate in a DVPP?

Is there anything that you might not have thought about before that occurred to you during this interview?

Is there anything else you think I should know to understand your engagement better?

Is there anything you would like to ask me?
APPENDIX 11: Semi-structured interview questions for Turkish men (Turkish)

Türk adamlar için mülakat soruları

Teşekkür

İngilterede de yaşayan bir Türk erkeği olarak yaşadığınız sıkıntılar neler ve bunlar aile bireyleri olan ilişkilerinizi nasıl etkiler? (What are the problems that you are facing in the UK and how these impact on your relationship with family members?)

Eşinizle anlaşımadığınız ya da sorunları olduğunu nasıl anladınız? (How do you recognise your problems with your wife or ex-partner?)

İngiltere sisteminde GP ya da herhangi bir social service size bir yerlere yönlendirdi mi? (How does general practitioner or social service worker refer you to the interventions?)

Bu yönlendirmeyi takip ettiysen ya da etmediysen neler oldu o zaman? (What happened during the referral processes?)

Katılımla ilgili ilk karşılaşılan durumlar

Bu önleme programına nasıl katıldığınız hakkında konuşabilir misin?

Ne zaman bu programa başladın ve nasıl bir duygusal süreç hali içerisindeydin? Bu ilk süreçler neye benziyordu? Daha sonraki süreçler neler hissetmeye ve düşünmeye başladı? Bu süreçlerde seni en çok etkileyen olaylar, durumlar ya da kişiler nelerdir?

Hangi olaylar bu programa katmanızı sebep olduğunu anlatabilir misiniz?

Programa katılımınza birlikte hayatınızda ne gibi değişiklikler oldu? Önleme programına katılsanız önce bu programlara ilgili görüşlerinizi nasıl tanımlarsınız? Bu programlara karşı görüşlerinizde bir değişim oldu mu?

Grup lideri ya da terapiste veya grup üyelerine karşı etkileşimleryle ilgili sorular

Grupdaki diğer kişilerle olan etkileşiminiz nasıl?

Grup liderine karşı olan duygu ve düşünceleriniz nasıl?

Katılımcıların katılımlarıyla alakalı olarak olumu ve olumsuz olaylar

Onleme programına katıldığınızda yaşamışınız olumu tecrübeleriniz nasıl tanımlarsınız?

Onleme programında olumsuz yani hoşuna gitmeyen yaşantılar nelerdir?

Programa (istekli ya da zorunlu) nasıl katılıyordunuz? Bu süreçteki genel tecrübeleriniz neler?

Etkin katılım süreciyle ilgili son sorular

Programı daha etkin ve başarılı yapabilme için neler gerekli?

Onleme programına katıldığınızda sonra bu programa karşı olan görüşlerinizde nasıl değişimler yaşadı?

Tüm tecrübelerinize bakarak, bu programlara yeni katılacak kişilere neler önerirsiniz?

Onleme programına katılマンdan önce tahmin etmediğiniz yaşantılar oldu mu?

Anlatıklarınız dışında önleme programına etkin katılım sürecinizle ilgili olarak eklemek istediginiz bir şey var mı?

Bana sormak istediginiz bir sorunuz var mı?
APPENDIX 12: Interview questions for Turkish men - demographic

Date: ____________________

File Number: ______________________

Will you please provide the following information?

1- Age: ______________

2- Residency: Camp [ ] Village [ ] City [ ] Town [ ] Other (please specify)

3- Immigration status: Migrant [ ] Residence [ ]

4- If you are immigrant when did you come to the UK? _____________________

5- Civil status: Single [ ] Married [ ] Divorced [ ] Widowed [ ] Others (e.g. engaged…)

6- Religion: Muslim [ ] Christian [ ] Other (please specify) _____________________

7- Educational Level: Illiterate [ ] Primary school [ ] High school [ ]
   Diploma [ ] Bachelor degree [ ] Master’s degree or higher [ ]

8- Characteristics of the family: Nuclear [ ] Extended [ ]

9- Do you have children, if yes how many? _____________________

10- Number of people living in the home? _____________________

11- Do you work? Yes [ ] No [ ]

12- The amount of time spent in interventions_____________________

13- Types of your participation in the intervention programme Volunteer [ ] Court order [ ] Others: _____________________
APPENDIX 13: Interview questions for Turkish men – demographic (Turkish)

Demografik mulakat soruları

Tarih: ____________________

Dosya numarası: ____________________

Asagidaki soruları lütfen cevaplar misiniz?

1- Yaşınız: ________________

2- İkamet yeri: Kamp [] Kasaba [] Şehir [] Köy [] Diger ________________

3- Göçmenlik durumu: ________________

4- Eğer göcmensiniz ne zaman İngiltere’ye geldiniz? ________________

5- Medeni durum: Bekar [] Evli [ ] Boşanmış [ ] Dul [ ] Diger ________________

6- Din: Müslüman [ ] Hristiyan [ ] Diger ________________

7- Eğitim durumu: Okur yazarlığım yok [ ] İlkokul [ ] Lise [ ] Lısans [ ] Yüksek lısans ya da üstü [ ]

8- Aile karakteristiği: Çekirdek [ ] Geniş [ ]

9- Çocugunuz var mı, varsa kaç tane? ________________

10- Evinizde kaç kişi yaşıyor? ________________

11- Bir işte çalışiyor musunuz? Evet [ ] Hayir [ ]

12- Ne zamandan beri beridir önleme programına katılıyorsunuz? ________________

13- Önleme programına katılıınız ne türdür? Gönüllü [ ] Mahkeme kararıyla [ ] GP[ ]

Diger: ________________
APPENDIX 14: Demographic information for professionals

Will you please provide the following information?

1. The period of working with people as a therapist or programme providers: 

2. Ethnicity: 

3. Gender: Female [ ] Male [ ]

4. The approach/type of the interventions 

5. The time period of working with Turkish men 

APPENDIX 15: Interview questions for programme providers or therapists

1. How do you describe the experiences of Turkish men’s first attendance in a therapy or interventions? (Türk erkek danışanlarınızın danışmaya ilk başvurma süreci nasıl olur?)

2. How do you describe/understand men’s engagement in interventions? (Danışmaya katılımlarını nasıl anlatırısınız?)

3. How do you describe Turkish men’s motivations in involving in a therapy? (Terapiye katılmalarındaki motivasyonlar nelerdi ve bunları nasıl anlarısınız?)

4. What are the examples of positive involvement in terms of applying the strategies in order to stop their violent behaviour? (Terapide öğrendiklerini ya da kazandığı farkındalıkları sosyal ilişkilerine nasıl yansıtırlar ya da yaşıtmayı çalışırlar?)

5. What types of problems influence their involvement in a therapy and their application of techniques or strategies in their social relationships? (Ne tür sorunlar danışanlarınızın etkin katılımlarını, öğrendiklerini algılamasını ve uygulamasını nasıl etkiler?)
APPENDIX 16: Debriefing sheet for participants who are Turkish men

Thank you for taking part in my research. Your data is anonymised and I will analyse the data by comparing other participants’ experiences and views to achieve differences and similarities.

I do not expect that your participation in this research will have a negative influence on anyone. However, if you were upset or distressed by participation in this study, please make contact with your programme providers or facilitators in interventions. I can also recommend the counselling services or psychological therapies offered by DERMAN which works with individuals from Turkish, Cypriot and Kurdish communities who need help or support for their health and wellbeing. I provide the contact information of Derman below.

Once again I would like to remind you that you can withdraw your consent to participation in this study at any time without giving a reason. Contact details are provided below.

DERMAN
The Basement
66 New North Road
London N1 6TG
020 7613 5944
services@derman.org.uk

Zeynep Turhan
Doctoral student
zturh001@gold.ac.uk
07459874869

Professor Claudia Bernard
Social Work
c.bernard@gold.ac.uk
0207 919 7837
APPENDIX 17: Debriefing sheet for participants who are Turkish men (Turkish)

Bilgilendirme raporu

Araştırmaya katıldığınız için çok teşekkür ederim. Bütün bilgiler anonim olacak ve analiz sürecinde diğer katılımcıların bilgileri ile karşılaştırılarak değerlendirilecektir.


Tekrar ediyorum bu çalışmaya katılımını istediğiniz zaman geri çekebilirsin ve bunun için sebep bildirmene gerek yok. İletişim bilgileri aşağıda verilmiştir.

DERMAN
The Basement
66 New North Road
London N1 6TG
020 7613 5944
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Zeynep Turhan
Doktora öğrencisi
zturh001@gold.ac.uk
07459874869

Professor Claudia Bernard
Social Work
c.bernard@gold.ac.uk
0207 919 7837
24 January 2017

Dear Zeynep

**RE: Ethical Approval The Lived Experiences of Turkish Men’s Engagement in Domestic Violence Interventions in London**

The Departmental Research Ethics Sub-Committee has considered your application for ethical approval for your research into Turkish men’s engagement in domestic violence interventions in London. I am pleased to inform you that ethical approval has been granted.

Yours sincerely,

Claudia Bernard
Chair Postgraduate Research Committee