

Intervening with men who use violence: innovative approaches from across the Indo-Pacific

CEVAW Scoping Review Practitioner Information Sheet

Why this matters

Practitioners across the sector are trialling **innovative approaches** to intervening with men who use domestic and family violence (DFV) – but too often, this work happens in silos. Programs are developed independently, piloted with limited resources, and when funding ends the knowledge of what was tried and what was learned rarely reaches other practitioners.

This scoping review maps **42 interventions** for male perpetrators of DFV across the Indo-Pacific region. It is the first review of its kind to focus on this region and to examine the diversity of approaches in use. Its purpose is **not to rank which programs work**, but to show practitioners:

- what approaches exist
- what they look like in practice
- where learning and collaboration opportunities exist.

Community approaches and cultural context

Community-based and bystander interventions were far more prevalent outside Australia, and this reflects cultural context as much as program design. Many countries across South and Southeast Asia have strongly **collectivist cultural structures**, where community norms, kinship systems, and peer networks are central to how people respond to harm. Interventions built on these structures – engaging male peers, community leaders, and families – reflect this reality.

17 of the 22 interventions identified without bystander engagement were Australian. This **raises an important question** for the sector: are Australian practitioners and funders drawing enough on community-based approaches, particularly for communities with their own collectivist frameworks such as Aboriginal and Torres Strait Islanders and men from culturally and linguistically diverse backgrounds?

About this study

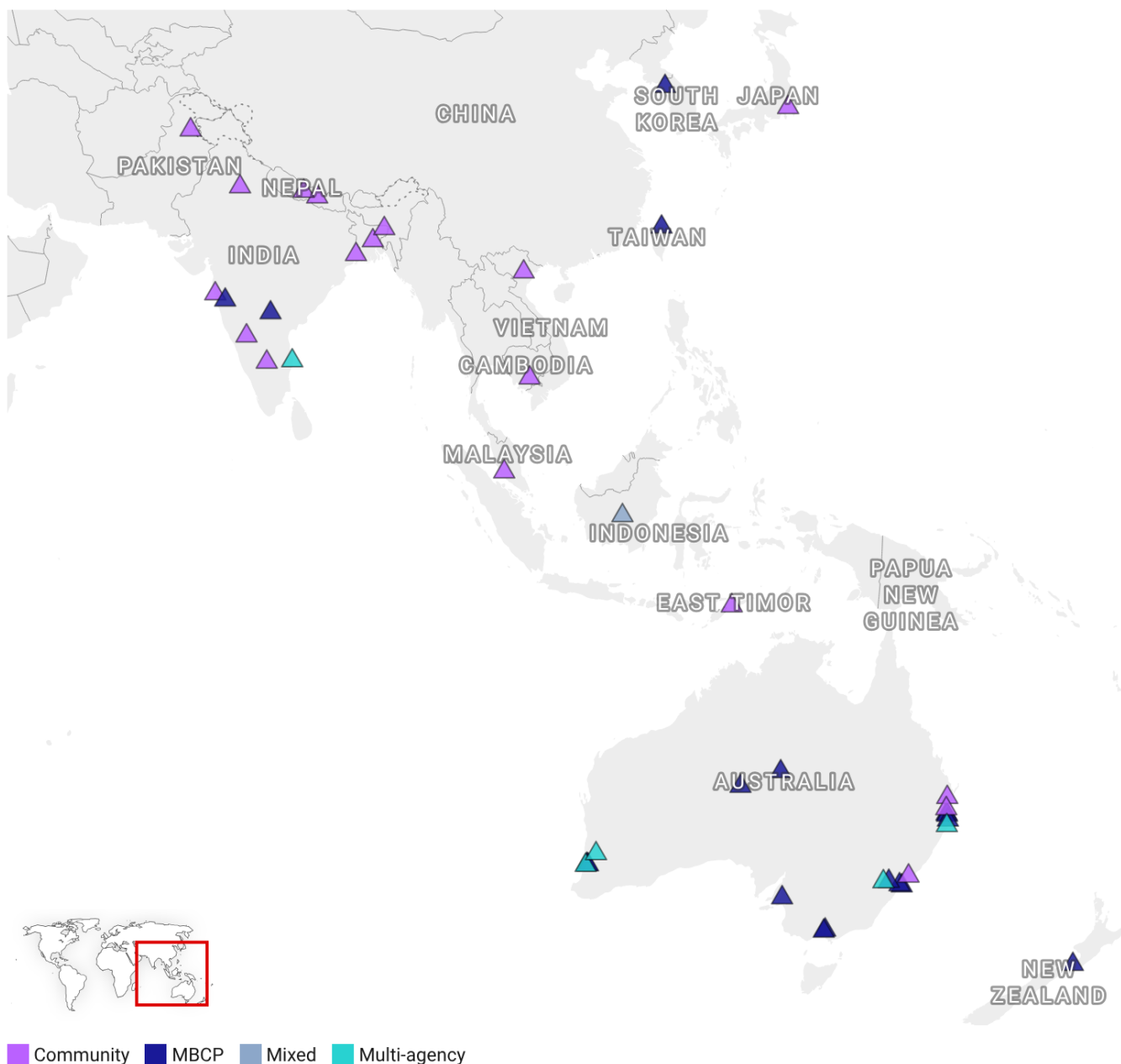
24,632	50	42	14 of 42
articles screened	studies included	unique interventions identified	Indo-Pacific countries represented

Nine interdisciplinary databases searched using the Arksey – O'Malley scoping review framework. Peer-reviewed literature only. Eligible studies discussed a deployed DFV intervention in an Indo-Pacific country targeting adult male participants. The review did not assess program effectiveness. Full details of the methodology and included studies are available in the published article <https://doi.org/10.1177/15248380261451797>



The intervention landscape

Of 42 Indo-Pacific countries in the search region, only 14 produced peer-reviewed literature on perpetrator programs. Almost half of all identified interventions (48%) were based in Australia.



Three broad approaches emerged:

Men's behaviour change programs (MBCPs) – 18 interventions. The dominant model in Australia, New Zealand, South Korea, and Taiwan. Group-based, typically court-mandated, rooted in feminist and psychoeducational frameworks.

Whole-of-community approaches – 18 interventions. Predominantly found outside Australia, particularly across South and Southeast Asia. Engage the person using violence and the broader community – bystanders, peers, family members, faith leaders, and elders.

Multi-agency and integrated approaches – 6 interventions. Coordinate across multiple services, addressing violence alongside mental health, substance use, housing, fathering, and child safety.

Features of innovative approaches: what does innovation look like?

74% of identified interventions went beyond a standard MBCP model. Below are the key features of innovative practice – with examples drawn directly from the review.

Edutainment and creative media

Drama, serial radio or video storytelling, games, quizzes, skits, and street performances engage men and communities in learning about gender equity, consent, and non-violence – meeting people in community settings rather than requiring them to seek out a service.

Example: *Change Starts at Home (Nepal)* – serial radio drama used as the basis for community discussion on attitudes, alcohol, and conflict resolution. *GlobalConsent (Vietnam)* – serial drama on dating relationships and consent for university-aged men, paired with educational modules on bystander intervention.

Workplace-based delivery

Taking intervention into settings where men already are – factories, offices, sporting clubs – rather than expecting them to voluntarily seek a program. This approach is particularly effective for reaching men who would not self-identify as needing support.

Example: *HERrespect (Bangladesh)* – skits, plays, and group discussions inside garment factories, targeting violence against women workers both in and out of the workplace. *Namagaagi Naave (India)* – awareness campaigns, educational theatre, and one-to-one support for factory workers.

Whole-of-community and bystander engagement

Designing interventions that engage not just men who use violence but the people around them – peers, family, coaches, and community leaders – as active participants in change. Individual behaviour change is more sustainable when supported by the wider social environment.

Example: *Men Against Violence (Australia)* – bystander training for AFL teams, engagement at basketball events, and education at an Aboriginal football academy. *Parivartan (India)* – male cricket coaches trained to lead gender equity education with young athletes.

Sports and male-dominated spaces

Using sport – both as a site of engagement and as a vehicle for masculinity conversations – to reach men who may be resistant to traditional service models. Sporting culture can both normalise harmful masculinities and be a powerful space for challenging them.

Example: *Men Against Violence (Australia)*; *Parivartan (India)*. *The Cambodia Men's Network* also used informal men's dialogue sessions and community advocacy as entry points for men already engaged in community life.

Technology and online delivery

Digital platforms, online modules, and apps reach men who cannot or will not access face-to-face services – including men in rural or remote locations, or those for whom stigma is a barrier to help-seeking.

Example: *BETTER MAN (Australia)* – self-directed online program for men using violence, inclusive of LGBTQIA+ participants. *MEND (Australia)* – 20-week MBCP delivered fully online, developed specifically for men in rural areas without access to in-person services.

Tailoring for fathers

Recognising that fathering identity and the relationship with children is often a powerful motivator for change, and building this explicitly into program design – rather than treating it as incidental to the core intervention.

Example: *Caring Dads (Australia)* – MBCP tailored for fathers who use violence, integrating the perspectives of partners and children. *KODY (Australia)* – MBCP for fathers with AOD issues within a whole-of-family approach. *RESTORE (Australia)* – community-based approach focused on parenting capacity and community resource connection.

Addressing alcohol and other drugs (AOD)

Integrating AOD support directly into DFV intervention, rather than treating them as separate service streams. Substance use is a contributing factor in a significant proportion of DFV, but traditional MBCPs rarely address it explicitly.

Example: *Integrated Cognitive Behavioural Intervention (India)* – MBCP developed specifically for men with alcohol dependence. *KODY (Australia)* – whole-of-family response to co-occurring substance use and DFV.

Indigenous-led and culturally grounded approaches

Moving beyond Western psychoeducational frameworks to ground intervention in Indigenous knowledge, methodologies, and community accountability – including Aboriginal concepts of deep listening, shame, and kinship responsibility.

Example: *Narrative Approach MBCP (Australia)* – an Aboriginal-led feminist group work program using the practice of deep listening to understand men's use of violence and experience of shame. The only identified Australian intervention explicitly grounded in Aboriginal methodology.

Research and practice gaps: what this review didn't find

Gaps in inclusion	• Only 2 of 42 interventions directly addressed the needs of marginalised populations. • First Nations men, men from culturally and linguistically diverse backgrounds, men with disability, and LGBTQIA+ people are largely absent from the intervention literature. • Heteronormative program assumptions may exclude queer men whose experience of DFV differs from the dominant model. • A lack of cultural grounding can make interventions inaccessible or harmful for Aboriginal and Torres Strait Islander men and men from CALD backgrounds.
Gaps in geography	• 28 of 42 Indo-Pacific countries produced no eligible peer-reviewed literature. • Some countries with the highest DFV rates – identified in WHO and UN data – are entirely absent from the intervention research base. • This does not mean programs do not exist there – it means they are not captured in academic publishing, which reflects broader inequity in the global research system. • A significant body of practice knowledge from NGO-led programs in low-resourced countries exists in grey literature and policy documents and is not reflected in this review. • This gap is being actively addressed: CEVAW researchers are expanding this work to include a grey literature review, which will capture programs that are being delivered and documented outside academic publishing channels.
Gaps in evidence	• Longer-term evaluation of diverse and innovative approaches is almost entirely absent. • Many programs were described as pilots – run once, with short-term funding, without resources to evaluate impact over time. • The evidence base cannot tell us whether diverse approaches are more effective than traditional MBCPs – not because they are not working, but because they have not been adequately evaluated or sustained.

What's still needed

This review identified programs – it did not evaluate their effectiveness, nor did it track which received ongoing funding beyond their initial pilot phase.

For funders and governments	• Move beyond funding isolated pilots. Sustained, multi-year investment is required for innovative programs to be properly implemented, evaluated, and scaled. • Culturally safe and Indigenous-led programs need resourcing that is not contingent on conforming to standard program models.
For practitioners	• Connect with what already exists before designing something new. This review identified 42 programs addressing problems your service is likely grappling with. • Consider accessibility: culture, sexuality and gender identity, geography, and disability all affect who can engage with your program.
For researchers and policy makers	• Prioritise long-term evaluation of non-standard approaches, particularly programs for marginalised groups. • Explore whether whole-of-community approaches could be effective in the Australian context. • Ensure policy responses include diverse and community-based approaches, not just mandated MBCPs.

Source: McLachlan, F., Swart, T., Desmond, K., & O'Leary, P. (2026). Male perpetrator interventions for domestic and family violence in the Indo-Pacific: A scoping review. *Trauma, Violence, & Abuse*. Advance online publication. <https://doi.org/10.1177/15248380261451797>