


Programs for men who have used violence against women: an overview of interventions in Brazil


Programas de atenção a homens autores de violência contra as mulheres: um panorama das intervenções no Brasil

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Abstract

Violence against women is considered a serious public health problem and a violation of rights around the world. As part of the policies to fight against this violence, the Maria da Penha Law foresees the participation of male perpetrators of violence (MPV) in care programs whose main activity is to hold reflective groups. This article presents a mapping of programs for MPV in Brazil conducted between 2015 and 2016. This is a qualitative, exploratory and descriptive research carried out in two steps. First, we found 41 programs from the five regions of Brazil, of which 26 answered a questionnaire with open and closed questions. We analyzed data according to four categories: program structure, methodology, monitoring and evaluation, and results and challenges. Second, we analyzed other mappings of Brazilian and international programs with MPV, as well as national and international documents that suggest guidelines for their execution. We found similarities between the programs and documents analyzed, such as the linkage with governmental bodies, basis on gender theories, and implementation of group interventions. Based on the dialogue between other mappings and studies and the findings of our analysis, the authors suggest minimum guidelines for holding reflective groups.

Keywords: Men; Violence Against Women; Group Processes.

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Resumo

A violência contra mulheres é considerada um grave problema de saúde pública, uma violação dos direitos em todo o mundo. Como parte das políticas de enfrentamento a esse tipo de violência, a Lei Maria da Penha prevê a participação de homens autores de violência (HAV) em programas de atenção cuja atuação principal é a realização de grupos reflexivos. Este artigo apresenta um mapeamento de programas para HAV no Brasil realizado entre 2015 e 2016. Trata-se de uma pesquisa qualitativa, exploratória e descritiva realizada em dois momentos. No primeiro, foram localizados 41 programas das cinco regiões do país, dos quais 26 responderam um questionário com perguntas abertas e fechadas. Os dados foram analisados segundo quatro categorias: estrutura do programa, metodologia empregada, monitoramento e avaliação e resultados e desafios. No segundo momento, foram analisados outros mapeamentos de programas brasileiros e internacionais com HAV, além de documentos nacionais e internacionais que sugerem diretrizes para sua execução. Notou-se semelhanças entre os programas encontrados e os documentos analisados, como o vínculo das iniciativas com instâncias governamentais, fundamentação nas teorias de gênero e modalidade de intervenções em grupo. A partir do diálogo entre outros mapeamentos, estudos apresentados e resultados encontrados, sugere-se diretrizes mínimas para a realização de grupos reflexivos.

Palavras-chave: Homens; Violência Contra a Mulher; Processos Grupais.

Introduction

Violence against women and girls is recognized as a serious public health problem and a violation of human rights throughout the world (Ellsberg, 2015). In the Brazilian context, according to *Ligue 180* data, the number of complaints has increased significantly in recent years (Brasil, 2016). According to the annual report of the National Secretariat of Policies for Women (Secretaria Nacional de Políticas para as Mulheres - SPM), there was a 93.87% increase in reports of domestic and family violence only between 2015 and 2016, resulting in a total of 112,545 records through *Ligue 180*.

This is an important agenda of the feminist and women's movement, which calls attention to the need for support and protection for women in situations of violence, educational strategies for awareness raising and prevention, as well as accountability of perpetrators, mostly men (Assis, 2018, Brasil, 2013).

Aligned with these movements and actions, we can see an increase in academic production in the field of health related to this theme, bringing together works on the offer of services, analyses of public policies, and interdisciplinary theoretical constructions that can help to produce reflections on the tripod formed by gender, violence and health (Gomes, Cecchetto, Nascimento, 2017, Pinto et al., 2017).

In addition, in the last 20 years, we have witnessed the formulation of different prevention and care strategies for domestic and gender violence in Brazil and in the international arena (Toneli, Beiras and Ried, 2017). Until the early 1990s, efforts to address domestic and gender-based violence prioritized attention to women in situations of violence, in order to encourage complaints, to organize specialized care services and to foster prevention experiences. These initiatives focused on the gender perspective, drawing attention to the psychosocial, health, economic and political consequences of this type of violence, constituting an important agenda for the women's and feminist movement (Debert; Gregori, 2008). We point out that the problem is complex and, therefore, not limited to strategies of public safety and punishment, nor strictly of health or social assistance; it is necessary to think in an interdisciplinary way and in different fronts and initiatives.

In this same period, studies on men and masculinities proliferated, including reflections on male participation in domestic and gender violence, intensifying debates about asymmetries from a gender perspective (Aguayo; Nascimento, 2016). The production of knowledge from the academy, together with actions developed by civil society organizations that began working with men within the framework of the United Nations conferences, such as those in Cairo (1994) and Beijing (1995), were important for the promotion of coping strategies and the prevention of domestic and gender violence from initiatives for men and boys (Jewkes; Flood, Lang, 2015).

More recently, these initiatives have been the object of reflection and criticism on the part of the feminist and women's movements, public policy makers, especially from the health sector, and civil society organizations working on masculinities from a critical gender perspective (Aguayo et al., 2016, Chagoya, 2014, Lima, Büchele, 2011, Ponce-Antezana, 2012).

At the end of the 1970s, the first interventions aimed at male perpetrators of violence (MPV) began to appear in the US. In the following years, norms and guidelines were developed to work with this public, giving rise to programs in different cultural, social and political contexts (Boira Sarto, 2010; Geldschläger et al., 2010; Lila, Garcia, 2010; Toneli et al., 2010).

These programs have been named variously: "rehabilitation", "educational", "psychoeducational", "reflective", "therapeutic" and "reeducation". Such variety of understandings is tied to the different methods, theoretical-epistemological perspectives and aims adopted by such initiatives (Ponce-Antezana, 2012).

Even though starting from a punitive logic, the Maria da Penha Law suggests, in its text, the implementation of groups with "aggressors", encouraging the creation of several initiatives and public policies with MPV. However, even before the enactment of the law, there were already a few experiences with MPV, as pointed out by Nascimento (2001) and Acosta, Andrade Filho and Bronz (2004). Thus, we start from the premise that MPV interventions are an important and necessary

strategy for coping with domestic and gender violence, which is an important concern of both health and public safety.

With the emergence of programs for MPV, studies have sought to identify, investigate and systematize their experiences with this public through large-scale mapping, such as those of the World Health Organization (WHO), carried out globally by Rothman, Butchart and Cerdá (2003) and Taylor and Barker (2013), in addition to those carried out in Brazil by the Instituto Noos (Beiras, 2014) and Citizenship, Study, Research, Information and Action (Cepia) (Linhares and Pitanguy, 2016).

These studies enabled the systematization of experiences focused on the methodological approaches used, establishing criteria and guidelines for implementing care services based on a diversity of theoretical perspectives, adapting to the laws in force in each locality. It is worth highlighting that, in the Brazilian case, in 2008, SPM, in collaboration with a group of researchers, activists and government representatives and multilateral agencies, produced the first official guidelines on the performance of services for MPV in the document entitled *General guidelines of accountability and education services for aggressors* (Brasil, 2008).

Thus, in understanding the importance of these interventions in addressing domestic and gender-based violence, in 2016, in partnership with *Núcleo Margens* and *Instituto Noos*, we carried out a national mapping of initiatives for MPV. This research follows a previous mapping, carried out in 2014 by *Instituto Noos* (Beiras, 2014); in this article, we propose to analyze specific aspects of the programs investigated, in order to suggest criteria and guidelines for the accomplishment of new actions directed to MPV.

The article presents two interrelated discussion axes: (1) a documentary analysis of mappings, guidelines and criteria for programs for MPV in the national and international spheres; and (2) analysis of qualitative data obtained through a non-exhaustive mapping of MPV programs in Brazil.

For documentary analysis, we have gathered: (1) documents that systematize experiences, methodological approaches, guidelines and national

and international criteria for MPV groups; and (2) studies on national and international mapping of MPV programs. This documentary analysis intends to dialogue with the results obtained from the mapping of the Núcleo Margens with Instituto Noos (NM-IN), with a view to developing proposals of minimum guidelines for the organization of MPV programs. It thus should be pointed out that this documentary analysis is not a review of the scientific literature, but rather of approximations and dialogues with specific publications that, due to their comprehensiveness and analytical rigor, we consider important for discussing the formulation of minimum criteria for programs with MPV.

The documentary analysis was structured around four axes of analysis: (1) structure, (2) methodology, (3) evaluation and (4) results and challenges. In the first one we analyze the type of linkage, origin and aims of these programs. In the methodology axis we seek to observe the methodological aspects employed, such as type of service, structure of meetings, theoretical basis used and the participating public. In the third axis we analyze the monitoring and evaluation processes of the programs themselves. Finally, in the results and challenges axis, we seek to analyze the results achieved by the programs and the challenges faced in their implementation, operationalization and maintenance.

The same axes were used for analyzing the national mapping carried out by NP-IP. In this way, we seek to analyze the points of convergence and divergence between the different programs, in dialogue with the recommendations expressed in the national and international documents mentioned above. In the discussion of the results, we added a fifth axis, in which the scope and limitations of such programs are discussed with the scientific literature on the subject. In the end, we will seek to present criteria and guidelines that guide the creation, structuring and operationalization of MPV programs in Brazil.

The mapping is an exploratory and non-exhaustive survey of MPV programs in Brazil. The data were obtained through two questionnaires, with open and closed questions, seeking to identify the structural, methodological and quantitative aspects

of each program, applied in two distinct phases: the first of update and the second of expansion. The updating phase refers to the contact with the programs already investigated in the 2014 mapping. Questionnaires were sent to 19 of them - 13 of which were answered - in order to detect any changes in their operating structure.

Concerning the expansion phase, other programs not included in the 2014 mapping were evaluated, identified through an Internet search and by the professional network of the researchers involved. In this phase, 22 questionnaires were sent, of which only seven were answered, gathering information about the theoretical assumptions, methodology and structure of the programs.

Chart 1 summarizes this course.

Chart 1 - Overview of mapping

Mapping accomplished in 2014	19 questionnaires received
1st phase: update in 2016	19 questionnaires sent 12 questionnaires received
2nd phase: expansion in 2016	22 questionnaires sent 07 questionnaires received
Total number of programs identified	n=41
Total number of programs answering the questionnaires	n=26

Forty-one (41) programs for MPV were identified across the country. By gathering the data obtained in the previous mapping and those of the expansion phase, we obtained data on 26 programs in operation or that have previously worked at some point, from 15 different Brazilian states and in the five regions of Brazil: North (AC and PA), Northeast (BA), Midwest (DF, GO and MT), Southeast (ES, MG, RJ and SP) and South (PR, SC and RS).

This research followed the relevant ethical standards and was approved by the Research Ethics Committee (CEP) of the Federal University of Santa Catarina (UFSC), according to the number 44550715.5.0000.0121.

Documentary analysis

The definition of parameters for the regulation of MPV programs is fundamental for performing evaluative processes and assuring an ethical-political stance towards violence against women. National and international documents suggest criteria, guidelines and methodologies for the creation and development of groups within these programs. These governmental or academic documents are intended to guide the implementation of programs and services within the framework of initiatives to address domestic and gender violence.

Because of the breadth and diversity of experiences derived from public policies and civil society, we have selected two national and three international documents that suggest guidelines for programs that hold MPV groups: *Diretrizes gerais dos serviços de responsabilização e educação do agressor* (General guidelines of accountability and education services for aggressors), produced by the then SPM (Brasil, 2008); *Metodologia de grupos reflexivos de gênero* (Methodology of reflective gender groups) (Beiras, Bronz, 2016), of the Instituto Noos; and *Programa de reeducación para víctimas y agresores de violencia de pareja: manual para responsables de programa* (Re-education program for victims and perpetrators of partner violence: a manual for program managers, Híjar, Valdéz-Santiago, 2010), developed by the National Institute of Public Health (INSP) of Mexico; *Criterios de calidad para intervenciones con hombres que ejercen violencia en la pareja* (HEVPA) (Quality Criteria for interventions with male partners, Montero; Bonino, 2010), developed by Grupo 25 of Spain; and Guidelines for developing standards for working with male perpetrators of domestic violence, of the Work with Perpetrators of Domestic Violence in Europe (WWP, 2008).

We also sought to know other national and international mappings that would help us to analyze programs for MPV: the Brazilian document developed by Cepia in 2016, which gathered information on 16 programs in Brazil (Linhares and Pitanguy, 2016); the report produced by the WHO in 2003, which investigated 66 programs in five continents (Rothman, Butchart and Cerdá, 2003); the

report of the Promundo Institute, which carried out in 2013 a qualitative research with five programs from different countries (Taylor, Barker, 2013); and the report produced by Geldschläger (2011) of the Conexus Association, of Spain, which investigated 170 programs in the European continent.

We emphasize that it is not our goal to present each of these documents in detail, but to make a comparison between their recommendations and the results of our study. Thus, we constructed an overview of recommendations taking into account the first three axes of analysis: (1) structure, (2) methodology, and (3) evaluation.

As for the documents that seek to establish criteria and guidelines for the functioning of the program, in the **structure** axis, Montero and Bonino (2010) base, as aim of the programs, the premise of transforming cultural practices as an important way of coping with domestic and gender violence, highlighting the accountability of MPV. They also emphasize the need for dialogue between MPV programs and other services and policies for women. It is emphasized that these programs should be considered as one of the measures for coping with violence against women and, therefore, should integrate the set of policies and actions that are conducted in this direction (Montero and Bonino, 2010).

The authors identify that the aims of the groups should comprise a network to deal with domestic and gender-based violence, and should not replace criminal sanctions against MPV. Similarly, in Brazil, programs must form the network to combat domestic violence against women (Brasil, 2008). Regarding MPV's access to programs, all documents point to the judicial route as the main gateway, although they are not restricted to it, which also suggests the linkage of programs with government agencies.

As far as **methodology** is concerned, all publications highlight, among its criteria, that the programs should apply a gender perspective, seeking to understand the social and cultural pillars that foster the perpetuation of domestic and gender violence, although the way this concept is addressed differs across documents. Some include the topic of masculinities as a specific discussion, while others understand it as part of the gender

debates. There are publications that add theoretical specificities of psychology, education, human rights and poststructuralist studies as contributions to the development of programs.

Program duration is an aspect that varies greatly across the guidelines we analyzed. Recommendations point from a minimum of 12 meetings (Beiras, Bronz, 2016) to those that add up to 100 hours (Montero, Bonino, 2010). Others suggest 24 sessions divided thematically (Híjar; Valdéz-Santiago, 2010). Some guidelines recommend that interventions be made for at least one year, in order to ensure more lasting exchanges between the team and MPV (Montero and Bonino, 2010).

We also note that all the documents indicate the need for continuous training for the facilitators who will work in the program. These should have a broad knowledge of the theories that support the conduction of the program, the themes that will be worked with MPV, and the techniques that will be used. The use of group interventions is the most recommended, although some point out the need for individual meetings.

As regards program **evaluation**, all texts suggest that programs and groups should undergo some evaluation and monitoring, in order to ensure their functioning and to establish results. Montero and Bonino (2010) point out that criteria should be established to guide this evaluation, so that it is coherent. In Brazil, evaluations should be carried out in a way that articulates the other state bodies involved and provides responses to the State and civil society (Brasil, 2008).

As regards the other mappings analyzed, in relation to **structure**, we found many of the programs to be linked with judicial organs. According to Instituto Noos and WHO reports, more than 60% of the programs have some connection with government agencies, either through funding or for being a part of the judicial sector (Rothman, Butchart, Cerdá, 2003).

Geldschlager (2011) points out that there are few programs whose participation by men is voluntary. Thus, as shown by Beiras (2014), their form of inclusion in the programs is very varied. In Latin America, no paid programs were found, that is, they charge for the participation of men. This

system is more frequent in Europe (Geldschlager, 2011) and in the United States (Rothman; Butchart; Cerda, 2003). According to the US report, paid programs start from the premise that disbursement of money is important for engaging men in the process of reflection (Rothman; Butchart; Cerda, 2003). On this aspect, it is necessary to be attentive and go beyond, reflecting on the economic and socio-cultural context, as well as on vulnerabilities and public policy structures in these regions. In a way, this explains the lack of paid programs in Latin America, where contexts of vulnerability and economic instability are greater.

Regarding **methodologies**, we observed that there is a great variety of intervention models, even among those who perform them in groups. The greatest diversity refers to frequency and duration. According to the European mapping, programs have been identified that carry out interventions over a period between 13 and 25 weeks (Geldschlager, 2011). In Brazil, the mapping performed by Cepia indicates that this range varies between six and 19 meetings (Linares, Pitanguy, 2016), while in the mapping carried out by the Instituto Noos the period is from five to 20 meetings (Beiras, Bronz, 2016).

This difference of methodological strategies can also be observed concerning the epistemologies used. While the model of educational and reflective groups prevails in Latin America, we observe that the cognitive-behavioral model is predominant in the US (Taylor; Barker, 2013). Despite the variety of epistemologies, we have identified a great influence of gender studies. On other theoretical-epistemological perspectives, few were based on studies of masculinities and feminist theory. According to the WHO, the use of feminist theories in programs is still controversial and is more frequent in South American programs (Rothman, Butchart; Cerda, 2003). Nevertheless, the use of these theories is heterogeneous, sometimes restricted only to the recognition of gender stereotypes driven by men or the unequal sexual division of household tasks. We lack studies that can indicate more qualitatively how these theories effectively base these interventions and their effects in practice.

In Latin America, most of the programs investigated use group interventions (Beiras,

2014, Linhares, Pitanguy, 2016, Taylor, Barker, 2013). These data also align with those in the European context (Geldschläger, 2011). In relation to groups' facilitation and coordination teams, the analyzed reports point to the need to train professionals in the theories that underlie the programs and in the themes that are addressed in the interventions. They also suggest the importance of the presence of qualified professionals in the teams. The report by Promundo points out that the training of facilitators has proved to be a problem in programs in the global South (Taylor; Barker, 2013).

Regarding **monitoring** and **evaluation** of interventions, the lack of quality criteria for an adequate examination of group functioning interferes negatively with the process, as indicated by the CEPIA and Promundo reports (Linhares, Pitanguy, 2016, Taylor, Barker, 2013). According to the WHO and Conexus reports, only one third of the programs investigated carry out some kind of follow-up during and after the groups. According to the US report, two-thirds of the groups that perform some type of evaluation are in developed countries (Geldschläger, 2011; Rothman, Butchart; Cerdá, 2003).

The results of the interventions present divergences, as the mapping of Promundo (Linhares and Pitanguy, 2016) points out. While in the US it is possible to identify a recurrence of 32% of the men who participated in the programs, in the Spanish mapping this rate is 22%.

Still in relation to the retrieved mappings, we observed notes made regarding **difficulties and challenges**. In Brazil, according to the Cepia and Instituto Noos reports, one of the great obstacles faced by these initiatives is the link with the justice apparatus, which often hinders the creation and implementation of programs (Beiras, 2014; Liniras, Pitanguy, 2016). The international reports point to the lack of quality criteria, official guidelines and theoretical-epistemological issues among the main difficulties in the operationalization of programs (Rothman, Butchart, Cerda 2003, Taylor and Barker, 2013).

Results and discussion

In order to broaden the discussion about the experiences raised by the national mapping,

we compared these data with the documentary analysis of other mappings and with the guidelines and criteria presented previously. As with the documentary analysis, the discussion will be divided into four topics, following the research themes discussed previously: structure, methodology, evaluation and results.

Regarding group structure, five programs are executed by civil society organizations (CSOs), 19 are governmental in nature, such as municipalities, public universities, the judiciary or specialized secretariats, and two are the result of partnership between CSOs and government bodies.

This tendency of the programs to present governmental ties was already pointed out in the mapping of 2014 (Beiras, 2014), mainly after the promulgation of the Maria da Penha Law. This shows the effect of the law and its popularization, as well as greater evidence and encouragement for these services to be part of the different public policies to combat violence against women. In general, the programs have some connection with public agencies, such as public defenders, courts of law, and special secretariats, generally linked to the area of protection of women. Even programs run by CSOs also have some form of connection with government agencies, such as public funding. This articulation can be done by means of some kind of support for the programs to carry out their interventions, such as the availability of financial resources, physical space, or so as to afford access to the men who participated in the groups, following an international trend (Rothman, Butchart, Cerdá, 2003). Thus, we perceive that the link with government agencies also influences the judicial nature of referrals that outline the aims of the programs.

Although these differ in their aims, the focus on coping with and preventing domestic and gender violence against women is present in all of them. Aims such as MPV's accountability and focus on reducing recurrence of domestic violence and gender are present in most initiatives (n=16).

As verified in the SPM guidelines for program implementation, most programs are articulated with the judiciary (Brasil, 2008) (n=14). The linkage of programs with other governmental initiatives is in line with recommendations expressed in other

studies. There is also an emergence of initiatives related to courts of justice (n=8) and social assistance networks (n=3), in line with the indication of the Maria da Penha Law for MPV to participate in such services (Beiras, 2014).

Regarding the epistemological and theoretical bases, gender theories are still predominant (n=22), which is in agreement with other international studies. We also note references that include feminist theories and on masculinities. The WHO study (Rothman; Butchart, Cerdá, 2003) points out that feminist theory is more present in developing countries (a group including Brazil), corroborating what we observe in the Brazilian context, in which half the respondents reported to base themselves on such a theory. Regarding the use of studies on masculinities, the data disagree with those obtained from research in other places (Rothman; Butchart; Cerdá, 2003). Use of psychoeducational approach (n=12) and systemic theory (n=7) area also mentioned, thus in keeping with INSP recommendations (Híjar; Valdéz-Santiago, 2010). Only three programs use cognitive-behavioral psychology theories, following the line usually adopted by American and European groups (Taylor; Barker, 2013).

It seems, therefore, that national and international programs, with the exception of some US and European ones aligned with cognitive-behavioral psychology, understand the importance of the relationship between hierarchies and gender asymmetries and violence against women, denaturalizing men's violent behavior and placing the discussion within the scope of social production and reproduction of gender for these and those. This discussion seems fundamental for the deconstruction of violent relations between men and women, based on gender inequality.

As in the national and international studies analyzed, there is a great variety of orientations about program structure. We found open groups (n=13), closed groups (n=11) and groups which are open until a certain period (n=2), continuous (n=13) and periodical (n=15) groups, and also programs directed to a specific audience type (n=19) or without such a conception (n=7).

There is no standard as to the number of meetings to be held. This varies between five and

30. This difference may be linked to the theoretical bases and the availability of resources or to the institutionalization of the program. Among the studies analyzed, only the Mexican guidelines establish strict criteria for number and frequency of encounters (Híjar; Valdéz-Santiago, 2010).

Most group activities are coordinated by more than one facilitator. In some cases, coordination is shared between men and women. The analyzed studies highlighted the benefits that this composition can bring to MPV groups (Beiras; Bronz, 2016).

As far as facilitation is concerned, programs are greatly concerned with the initial and periodic training of facilitators. Twenty-two programs carry out some type of training for facilitators, including topics related to gender, masculinities and public policies. It is worth mentioning that in the *E agora José?* program in São Paulo, facilitators go through 20 meetings with the same themes that will be worked with MPV. Some of the analyzed studies emphasize the importance of training for a successful program (Beiras, Bronz, 2016, Taylor, Barker, 2013).

Thus, we can observe that there is no homogeneity in the methodological models that structure the programs in Brazil. However, we can highlight some points in which there is consistence across the analyzed actions, such as basis in gender theories and the importance of facilitator training.

Regarding evaluation of the effectiveness and efficacy of their interventions, only one program did not perform any type of evaluative procedure during or after the MPV intervention. Although the types of evaluation are varied, programs use periodic reports prepared by the team to track the results. The modes of information collection also vary from program to program: use of questionnaires, interviews during or after the meetings, minutes of interventions, etc.

The Instituto Albam, in Belo Horizonte, due to the model of linkage with Justice, collects results through judicial hearings with MPV. The evaluation model carried out by the Nucleus of Phenomenological Research (Nufen), in Pará, consists of three moments: individual reports of each facilitator after each intervention; writing a collective report after the closure of interventions; and creation of a WhatsApp group with two program participants for activity monitoring.

The WHO report (Rothman; Butchart; Cerdá, 2003) points out that only a third of the groups do some type of evaluation or monitoring of their activities. In the Brazilian case, the systematization of meetings was also verified, unlike the international mappings (Linhares and Pitanguy, 2016). On the other hand, in the study with European actions (Geldschläger, 2011), only half of the groups surveyed perform this activity. The mappings carried out by Promundo and the WHO are noteworthy for the lack of quality criteria for constructing an evaluation model of current programs (Rothman; Butchart; Cerdá, 2003; Taylor; Barker, 2013).

Reports thus indicate that there are few impact assessment studies with rigorous research designs, such as randomized controlled trial (RCT). This is in line with another study that analyzed interventions with men in the health field, including those aimed at coping with gender-based violence (Barker and Ricardo, Nascimento, 2007).

Thus, in the evaluation of programs, the results obtained are used to render accounts to the organs to which the programs are linked or to improve their activities. However, although in almost all programs there is an evaluation model, these are hardly shared with other groups or published in academic publications, which hinders the production of critical reflection that helps in the formulation of public policies and guidelines for the creation of new Software.

Therefore, as can be seen, monitoring and evaluation processes are one of the key points of MPV programs with respect to their scope and limitations. There is a shortage of material and financial resources for maintaining and expanding networks to address violence against women, both nationally and internationally. Thus, investing resources in MPV programs lacks information on the extent of the results obtained that justify such an investment. For this, there is a strong debate about how evaluation processes should be performed and what is the set of “success” indicators to be applied (Aguayo et al., 2016; Barker, Ricardo; Nascimento, 2007). In addition, another discussion in the field addresses the need for accountability systems for these initiatives, so that they are publicized and contribute to social control by social and academic

organizations and movements and public policy managers (Flood, 2015; MenEngage Alliance, 2016).

Challenges in implementing and maintaining programs

The implementation of programs directed to MPV still faces strong obstacles, hindering their operationalization and maintenance. We identified that the link with public agencies in the area of security and Justice is one of the great difficulties in its implementation. Since more than half of the programs analyzed have a governmental link (n=21), these end up being subject to the current political and economic conditions, which ends up restricting the performance of the institutions that propose them.

Among the difficulties listed, we highlight: the establishment of deadlines for implementation of interventions, making it difficult to continue after the contracts expire; the restriction on funding under this predetermined time-frame; lack of adequate physical space; the transitions in public management, which affect the continuity of activities; and the lack of public policies that guide public agencies about the need for programs as a form of protective measure. If, on the one hand, it is desirable that public policies assume the task of organizing and making these programs available, on the other hand, the inconsistency of Public Administration jeopardizes their continuity and effectiveness.

Current cultural conceptions about masculinities and gender relations are another factor that negatively influences the creation and development of these programs. The debate on gender, masculinities and domestic and gender violence, despite the visibility in recent years, is still recent in Brazil and is not free from tensions and contradictions on the part of social sectors, such as those linked to the organized social movement, or even between academics of different theoretical affiliations. Similarly, the place of man in the marital dynamics and in gender relations also points to a debate permeated by controversies, especially with regard to more punitive perspectives or others that advocate the importance of the re-signification of masculinities as a fundamental contribution to

more equitable relations and, consequently, with less violence (Aguayo et al., 2016, Facchini, Ferreira, 2016, Taylor, Barker, 2013). The strangeness of MPVs themselves participating in these initiatives in discussing issues related to gender relations causes them to refuse to work on the themes listed or to stop participating in the programs.

In addition, we live with a patriarchal and macho perspective in the legal sphere, which influences the perception of judges and other justice operators, who often do not understand the need for these interventions, showing how important it is to carry out sensitization, training and critical reflection with these actors (Beiras; Bronz, 2016, Souza, 2017).

Based on the previous study conducted in 2014, we found that ten programs that were in operation at that moment ended their activities. Among the main reasons included, it is worth mentioning the end of agreements with public agencies and changes in the political scenario.

Final considerations

Given the data obtained from this mapping and the experiences and learning systematized by the documents analyzed, as well as the accumulated experience of more than one decade of the Maria da Penha Law, we understand as fundamental the discussion about a national public policy that can establish minimum guidelines for programs with MPV, as well as strengthen existing experiences.

Thus, we seek to systematize a set of recommendations for the national context, based on the references mentioned. These recommendations bring to the debate scene the accumulation of experiences of interventions directed to MPV from the action of social movements and governmental instances, also relying on recent Brazilian academic production on men in the scenario of domestic, intrafamilial, gender and conjugal violence. In addition, the analysis of programs for men in the context of health, particularly at the international level, has highlighted the importance of involving men in the promotion of gender equity and equality.

In this way, we suggest some minimum recommendations around four axes: theoretical approach, methodology, public policies and evaluation.

Regarding theoretical and epistemological approaches:

- use of a gender perspective and contemporary feminist theories with a critical and reflexive approach, which include human rights, gender equality, intersectionalities, diversities and deconstruction of patriarchy, homophobia and transphobia are fundamental to avoid naturalization, banalization and social legitimation of violences and problematize how the different markers of difference contribute to social inequalities;
- emphasis on programs of a reflective or psychoeducational rather than therapeutic nature, to avoid a psychologizing or pathologizing perspective of violence.

Regarding methodology:

- minimum number of meetings between 12 and 15, in order to ensure the reflective quality and deepening of the work carried out;
- a multidisciplinary perspective that contemplates the complexity of the subject, without reducing it to simplistic causes and effects;
- encouragement of reflective and critical methodologies that can produce broader subjective, cultural and social changes, without restraining to individualizing responsibilities;
- centrality in dynamics of MPV accountability, with participatory and active methodologies, reflective questions, use of play activities, and resignifications about the social construction of masculinities.

Regarding public policies:

- promotion of a specific national policy that can guarantee public financing and technical and professional structure;
- integrated work with other services geared to women and families;
- encouragement of continuing training processes, as well as networking dialogues

with facilitators from different regions of the country.

Regarding evaluation:

- the need for impact assessment studies that contribute to measuring the contribution of these programs to addressing domestic and gender violence against women, their cost-effectiveness and the possibility of scaling up;
- dissemination of knowledge of previous experiences and international guidelines as a way to contribute to the construction of intervention models with MPV;
- systematizing the lessons learned in order to help formulate other initiatives, avoiding that new programs are initiated in a fragile or simplistic way;
- building sustainability guarantees for actions aimed at women and men in situations of violence as part of a broad policy to promote gender equality.

These contributions can collaborate for a joint action to combat violence against women and girls, strengthening the network to combat and prevent violence, something necessary for the construction of a more just, democratic and caring world and for solving this complex problem that persists in our society.

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Authors' contribution

Beiras conceived the study. Incrocci collected the data, analyzed by Beiras, Nascimento and Incrocci. All authors contributed to the writing of the article.

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