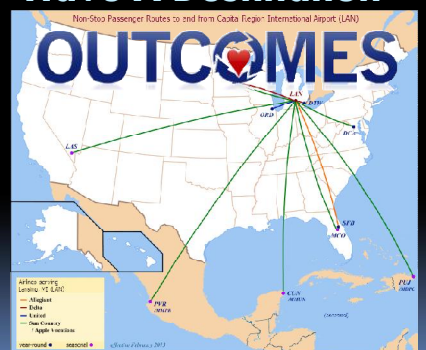


**Domestic Violence Offender Treatment:
Differences and Results**
*How to Talk about BIP Efficacy
and Examine Our Assumptions about
Batterers and Batterer's Intervention*



Jeffrie K. Cape, MSW, LMSW
David J. H. Garvin, MSW, LMSW

**Every Journey Must
Have A Destination**



Non-Stop Passenger Routes to and from Capital Region International Airport (LAN)

OUTCOMES

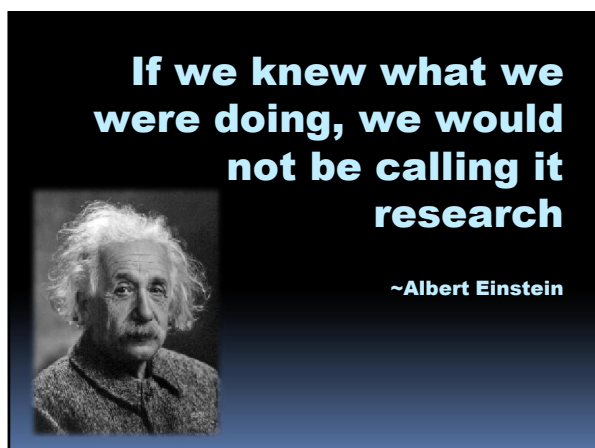
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**WHATEVER
YOU THINK
THE
OPPOSITE**



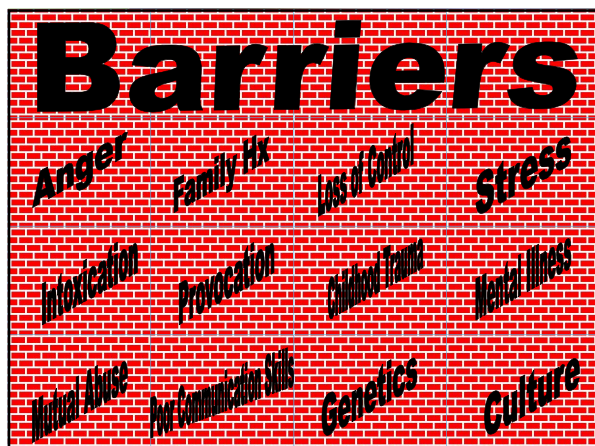
**Conceptual
Clarity**

***What you understand and believe will guide
your interventions.***
(for better AND for worse)











What is the difference?

The difference is **much less** than what most people want it to be

**Men Who
DO Batter**


**Men Who DO
NOT Batter**

Batterers are not all that different than the rest of us...similar, **but turned up**

1. I **want** what I **want**, when I **want** it and I am willing to get it at another's expense!
2. Who has not thought about hitting another person...men who batter, have the same thought, **but think it is a good idea!**
3. Justifications abound!

Simply put...

"You can't talk your way out of something that you behaved your way into"




"So what happens now?"

"We chase the lie 'til it leads to the truth."

Gil Grissom
(*Fahrenheit 932*)

"I was out of control"

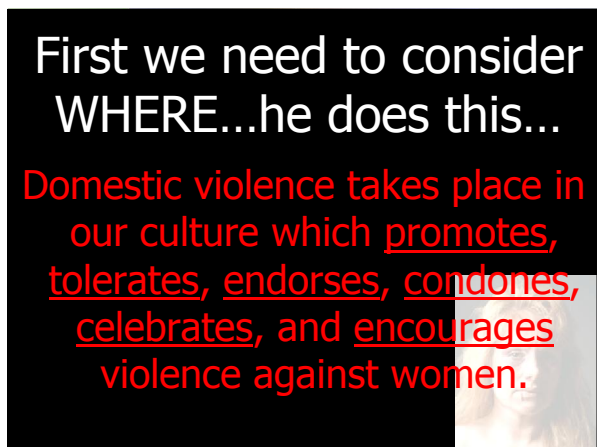


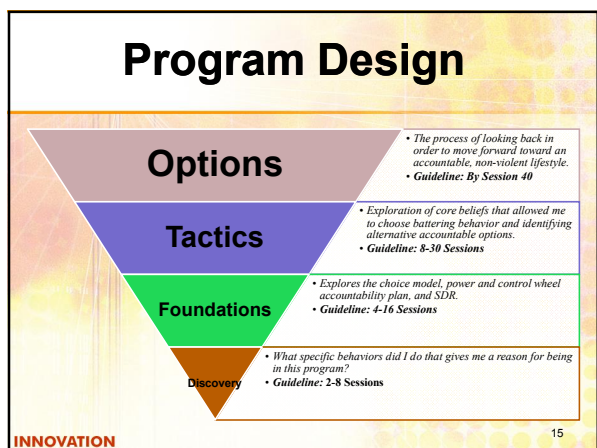
LISTEN:

You will find the exceptions to the rule

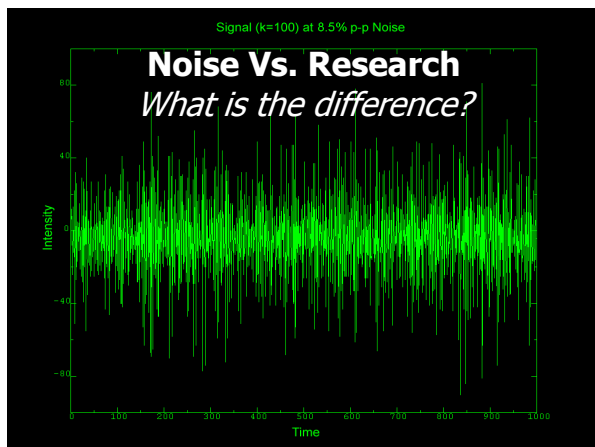


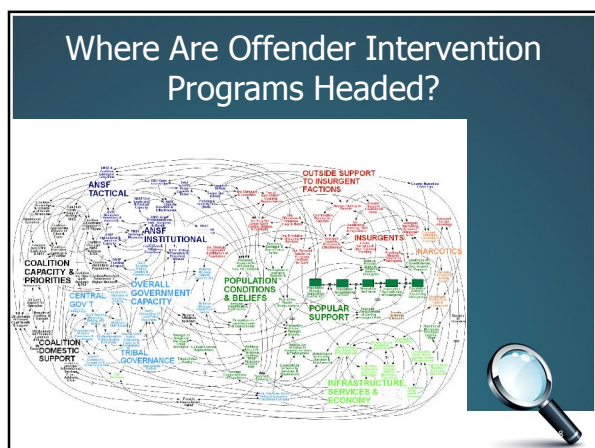












Research-are BIPs working?

(combined with monitoring, judicial review, etc)

- What is working?
- Who obtains what information?
- What is the yardstick?



Briefly the different models out there and that different models are sometimes for different offenders

(especially mentioning Duluth, MRT-dv, DBT, Cognitive Behavioral approaches, etc.)

- What is your child's name?
- Different names for the same or similar things
- Questions?
- The more important questions are:
 - Is the program connected?
 - Who is the program connected with
 - How has the program developed over time?




High risk offenders (what works)?

- High risk according to whom?
- History known and unknown

• CCR





AQUILA2008

The AQUILA Working Group is dedicated to providing accurate, evidence-based information about batterer intervention programs and their impact on men who batter. We are committed to enhancing dialogue and public awareness about these programs and about the potential for change for many men who have a history of domestic violence.

We support and promote program models that:

- Center on the safety and well-being of adult victims/survivors of intimate partner violence and their children
- Promote responsibility and safe, nurturing relationships for men who have a history of domestic violence
- Encourage multi-institutional collaboration and family capacity to hold men who batter accountable for their conduct and encourage them to change.
- Acknowledge that men who attend batterer intervention programs face multiple barriers to long-term change (such as poverty, exposure to violence, addiction and disproportional impact of our systems), and provide holistic services to help men deal with issues that complicate the change process.

<http://groups.yahoo.com/group/aquila2008/join>

**International
Email based discussion group**




Access us on the web

<http://www.biscmi.org/aquila/>

Evidence of a Positive Effect of batterer programs:

Where do you get stuck when asked "Do BIPs work?"






To date there have been more than 35 evaluations of batterer intervention programs

They have yielded inconsistent results


"Damn it Jim!...I'm a BIP Facilitator... not a researcher"





Issues with BIP Research

- Mixed research results
- False hope for victims
- May need to match batterer to specific intervention to maximize positive outcomes
- Misunderstanding of effect size
- Issues that compound the problem: substance abuse, mental disorders, poverty



Issues with BIP Research

- Variable standards for programs;
- Lack of cultural competence
- An integrated justice response (law enforcement, prosecutors, advocates, defense lawyers, probation officers, judges, BIPs) increases the possibility of a positive outcome
- Court mandated participants = lower motivation to change



Methodology dilemmas

- Defining a BIP
- Defining success
- Defining abuse
- Defining re-abuse
- True random sampling
- Identifying outcome measures
 - ? Victim feedback
 - ? Criminal recidivism
 - ? Validated measures
- Varying philosophies & methods of BIPs
- Regionally influenced confounds
- Generalizing results



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Q. Success in a BIP is defined as...

- The perpetrator of DV will NEVER EVER, EVER, EVER use any battering tactic or abuse anybody EVER in their life again.
- An improvement from a baseline measure.
- Victims' perception of safety.
- Something else... ☒





Often times the OUTCOMES have been “hijacked”

The Criminal Justice System may define the outcome as program completion...if this is what we want...then...

- Design programs that are easily completed
- Develop curriculum that focus on things that _____ (fill in the blank)

We not only believe that men can change and stop their violence and abuse...but that they can develop and nurture the presence of attributes which are antithetical to DV

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Incident Vs. Context

The language of recidivism is linguistically steeped in an incident based analysis

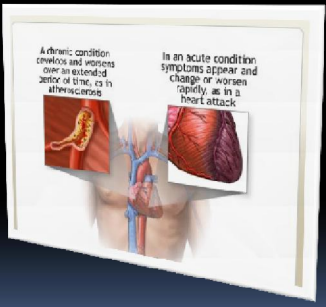
The criminalization of men's violence against women brought with it some unintended consequences.

Acute v. Chronic

Acute and Chronic Health Effects

Acute health effects are characterized by sudden and severe exposure and rapid absorption of the substance. Normally, a single large exposure is involved. Acute health effects are often reversible. Examples: carbon monoxide or cyanide poisoning.

Chronic health effects are characterized by prolonged or repeated exposures over many days, months or years. Symptoms may not be immediately apparent. Chronic health effects are often irreversible. Examples: lead or mercury poisoning, cancer.

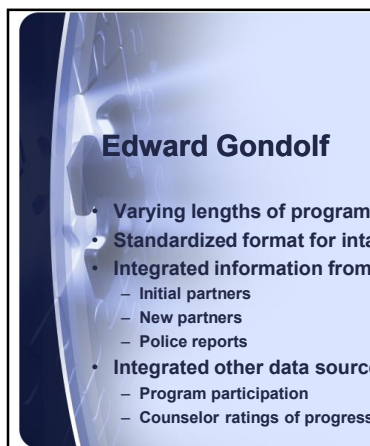


Acute v. Chronic Considerations ...through whose eyes?



Men's Violence Against Women is a Chronic Problem that comes to the attention as an Acute Episode

The Problem: We have created systems of response to an acute episode and may be lulled into a perception that men's violence against women is an acute problem, when in fact it is a chronic problem



Edward Gondolf

- Varying lengths of program participation
- Standardized format for intake assessment
- Integrated information from multiple sources:
 - Initial partners
 - New partners
 - Police reports
- Integrated other data sources:
 - Program participation
 - Counselor ratings of progress, etc.

Edward Gondolf

- **Results of Research (after 48 months)**
 - Completers re-assaulted at a lower rate than drop out comparison group
 - 48% vs. 70%
 - Of the 48% who re-assaulted:
 - 22% did so repeatedly (*cause 80% of injuries*)
 - 26% did so once
 - 10% did so within the 1st month after completion
 - 90% did not re-assault in the last 12months
- **Results of the Research (after 15 months)**
 - Partners reported general decrease in non-physical abuse
 - Down from 82% to 44%
 - Majority of women reported being “better off” or “feeling safe”

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Etiony Aldarondo

22 Individual Outcome Studies

- Follow up time: 7 weeks to 3 years
- Recidivism Rate: 7% to 47% (average 26%)
In Average:
 - Police Records: 15%
 - Self Report: 24%
 - Victims Report: 34%

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Etiony Aldarondo

Seven Quasi-Experimental Evaluations
According to Police Reports

- Follow up time: 4 months to 11 years
- Sample size: 100 to 840
- Recidivism Rate for Completers: 0% to 18% (average 9%)
- Recidivism Rate for Dropouts: 10% to 40% (average 26%)

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Etiony Aldarondo

- Six Quasi-Experimental Evaluations
- According to Abuse Victims Reports:
 - Follow up time: 5 months to 1 year
 - Sample size: 68 to 840
 - Recidivism Rate for Completers: 26% to 41% (average 32%)
 - Recidivism Rate for Dropouts: 40% to 62% (average 46%)

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Etiony Aldarondo

Three Experimental Studies

- Follow up time: One year
- Sample size: 56 to 644
- Recidivism:


	<u>BIP</u>	<u>Control</u>
Police Records	4-18%	4-31%
Self Report	14%	16%
Victim Reports	15-29%	22-30%

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Etiony Aldarondo

- Limitations
 - Controlling for error across studies
 - Different conditions having different impacts
 - Measurements were not consistent across sites
 - Effect size is larger but controlling for differences reduces accuracy of reporting
 - More difficult to make generalizations
 - Only a summary of the completed research

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Massachusetts Certified Batterer Intervention Program Study

Random sample of 2,045 defendants from 1998 to 2004

Massachusetts Office of the Commissioner of Probation (2004). *Restraining Order Violators, Corrective Programming and Recidivism*.


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Massachusetts Certified Batterer Intervention Program Study

- Findings:
 - Rate of restraining order violations more than doubled for those offenders who did not complete a Certified Batterer Intervention Program.
 - 62% of a random sample of 2,045 offenders successfully completed a BIP when actively supervised; only 30% of unsupervised did.
 - More than 50% of sample were violence-prone, poorly-educated, under-employed, indigent, and had serious substance abuse issues.


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Edward Gondolf

Longitudinal, quasi-experimental study of four sites across the US with a sample size of 840, with follow up time of 15, 30 and 48 months

Gondolf, E. (2002). *Batterer Intervention Systems*. Thousand Oaks, CA: Sage.



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Edward Gondolf

- **Re-assaults** (48 percent):
 - Nearly ¼ in first 15 months
 - 20% Repeat-reassaulters = 80% of injuries
 - Length (more than 3 mo) and content of programs didn't seem to matter
- **But systems DID matter:**
 - Enter program within 2 to 2.5 weeks
 - Court monitoring of attendance
 - Swift response to noncompliance

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Limitations of Research Design

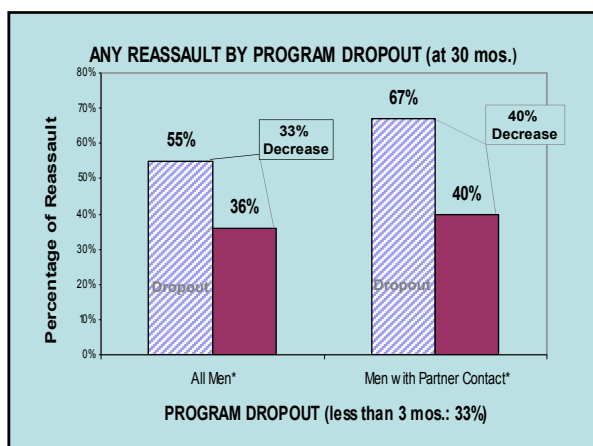
- Unable to identify key aspects of the BIP intervention that were effective
- Not able to account for changes in programs and program structures
- Unable to clearly isolate effects to program participation (i.e., what was learned)
- Because not randomly assigned to groups cannot be generalized without some caution
- Social factors that impact the research

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NIJ Special Report: Batterer Intervention Programs, June 2003

- "In both studies (Broward and New York City Experimental Evaluations), response rates were low, many people dropped out of the program, and victims could not be found for subsequent interviews."
- The tests used to measure batterers' attitudes toward domestic violence and their likelihood to engage in future abuse were of questionable validity.
- In the Brooklyn study, random assignment was overridden to a significant extent [*an 8 week program was substituted for the control of no treatment*]. Which makes it difficult to attribute effects exclusively to the program."

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EVIDENCE OF PROGRAM EFFECT
Other indicators

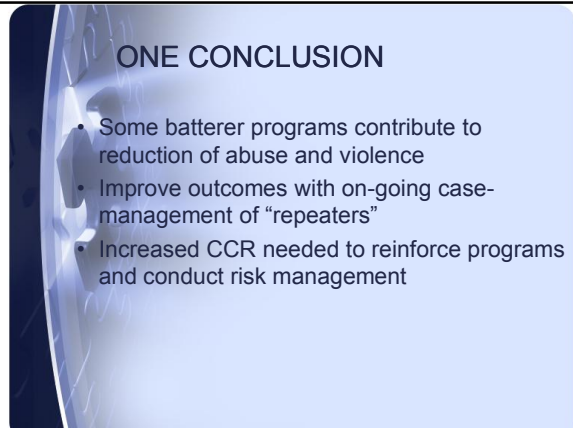
- Deterrence (perception of sanctions) not a predictor of reassault
- Majority of men's and women's program recommendations are positive
- Majority of women attribute men's change to the program
- Men identify program lessons as a means of avoiding abuse
- Numerous personal accounts of program-based change

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Summary

- Experimental evaluations have major shortcomings that contribute to misleading interpretations.
- Longitudinal outcomes suggest de-escalation of abuse following criminal justice/batterer program intervention.
- Complex analysis of established batterer programs show moderate "program effect."
- Program context (e.g., court linkages) influences program outcomes, especially "swift and certain" response to non-compliance.

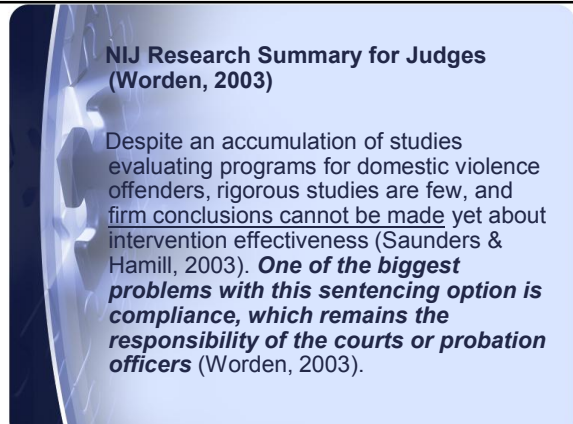
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ONE CONCLUSION

- Some batterer programs contribute to reduction of abuse and violence
- Improve outcomes with on-going case-management of “repeaters”
- Increased CCR needed to reinforce programs and conduct risk management

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NIJ Research Summary for Judges (Worden, 2003)

Despite an accumulation of studies evaluating programs for domestic violence offenders, rigorous studies are few, and firm conclusions cannot be made yet about intervention effectiveness (Saunders & Hamill, 2003). ***One of the biggest problems with this sentencing option is compliance, which remains the responsibility of the courts or probation officers*** (Worden, 2003).

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Thank you!

If we've left you with more questions than answers:

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