

LCADV RESEARCH CONSORTIUM

A PROJECT OF THE LOUISIANA COALITION AGAINST DOMESTIC VIOLENCE

Minimum Standards for Batterer Intervention Programs

Victor L. Bissonnette, Ph.D.
Eric Carlson, Ed.S., L.P.C.
Barbara P. Davidson, M.S.W.
Pat Davis, D.S.W., M.P.H.
Jean H. Hollenshead, Ph.D.
Shannon W. Kilpack, B.C.S.W.
Michelle Masse, Ph.D.
Patsy Taylor

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Louisiana Coalition Against Domestic Violence

Post Office Box 77308

Baton Rouge, LA 70879-7308

Phone: 225/752-1296

Current Members 1998

Merni Carter, M.Ed., Coordinator
Louisiana Coalition Against Domestic Violence
Baton Rouge

CHAIRPERSON

Melissa Kater
1st Judicial District Attorney's
Victim Assistance Program
Shreveport

PARTICIPANTS

Victor Bissonnette, Ph.D.
Southeastern Louisiana University
Hammond

Mary Capps, Ph.D.
Nicholls State University
Thibodaux

Eric Carlson, Ed.S., L.P.C.
Bossier Diagnostic and Counseling Center
Bossier City

Angela Clark
Formerly Battered Women's Task Force
Baton Rouge

Tracy Dahmer, M.S.W.
Tangipahoa Parish Sheriffs Office
Hammond

Barbara Davidson, M.S.W.
Battered Women's Program
Baton Rouge

Pat Davis, D.S.W., M.P.H.
Office of Public Health
Louisiana Dept. of Health and Hospitals
New Orleans

Jean H. Hollenshead, Ph.D.
Louisiana State University
Shreveport

Pamela Jenkins, Ph.D.
University of New Orleans
New Orleans

Clayton Latimer
Department of Social Services
New Orleans

Catherine Lemieux, Ph.D.
Louisiana State University
Baton Rouge

Bonnie Lewis, Ph.D.
Southeastern Louisiana University
Hammond

Michelle Masse, Ph.D.
Louisiana State University
Baton Rouge

Ann Polak
Calcasieu Women's Shelter
Lake Charles

Kathy Sambola, M.S.W., B.C.S.W.
Southeastern Louisiana University
Hammond

Patsy Taylor
Louisiana Training Consortium
Ponchatoula

Christopher Velardo, M.S.W., B.C.S.W.
Domestic Violence Offender Program
Baton Rouge

Purpose of this Document

The development of minimum standards for batterer intervention programs was undertaken by the LCADV Research Consortium in order to define and describe the recommended program structure, format, content and techniques used by programs that target perpetrators of domestic violence. These standards are intended for use by practitioners when designing new programs or adapting existing programs, and as a guide for use by court systems when deciding which intervention programs are appropriate for court referral.

As intervention with batterers is an evolving and specialized field of practice, the Consortium's work included as the basis for this document an extensive survey of current research, examination of existing standards and proven models used in other states, and distillation of the professional expertise of the Consortium members.

History of this Document

This document was developed by the LCADV Research Consortium, a project of the Louisiana Coalition Against Domestic Violence. The consortium was initiated in January 1995, in order to bring together advocates, clinicians, and scholars to identify, evaluate, and publicize responsible intervention methods in the field of domestic violence.

The Louisiana Coalition Against Domestic Violence is a network of battered women's programs, other organizations, and individuals who share the common goal of ending violence against women and their children in Louisiana. The Coalition arose out of the desire of those working with battered women and their children to meet on a regular basis to share ideas and information, obtain training relevant to their work, jointly study and respond to proposed government policies and procedures, and enhance their individual efforts to effect social change.

The standards outlined in this document have been reviewed and approved by the member programs of the Louisiana Coalition Against Domestic Violence.

In the 2014 legislative session, in response to problems noted in the field, advocates requested changes to the state law governing domestic abuse intervention programs. In the fall of 2014, LCADV began assembling a small workgroup to craft opportunities to educate communities about these changes and better engage domestic abuse intervention programs with the coalition.

In January and February of 2015, this workgroup completed minor updates to the standards, which brought them better in compliance with new state law.

Workgroup Members:

Robert Hanser, Ph.D.
4th Judicial District Batterer Intervention Program
Monroe, LA

Sami Riley
Chez Hope
Franklin, LA

Beth Meeks, M.S.
Louisiana Coalition Against Domestic Violence
Baton Rouge, LA

Mariah Stidham Wineski
Louisiana Coalition Against Domestic Violence
Baton Rouge, LA

Ralph Peters, M.A.
Family Violence Intervention Program
Lafayette, LA

Guiding Principles for Batterer Intervention Programs

The primary purpose of any batterer intervention program is to stop domestic violence. The safety of individual victims and potential victims of domestic violence should supersede all other intervention program policies.

All batterer intervention programs must, through all phases of development, implementation and evaluation:

- hold batterers accountable for their violent and controlling behavior, disallow collusion and victim blaming by batterers and others, and teach new skills that will facilitate changes in their behavior. The intervention methods should not focus on the relationship or the actions of the battered partner, but maintain a focus on the batterer's violent behavior and the safety of the battered partner.
- continually assess the lethality of all program participants, and take appropriate action to protect partners, minor children, and others from known dangers posed by the program participants.
- work collaboratively with battered women's service providers to assure that battered partners are provided access to advocacy and other assistance while the abusers are participating in the intervention program. Batterer intervention services should complement, not compete with, battered women's services for resources such as staff or funding. Batterer intervention programs should be part of a coordinated community response to domestic violence.
- report compliance and noncompliance to the courts or other referral sources.
- challenge myths about domestic violence and promote "zero tolerance" of violent behavior.

Batterer Intervention and The Court System

Intervention service providers should maintain familiarity with the federal, state, and local laws on domestic violence, and with the operation of the criminal justice system. In particular, intervention service providers should be familiar with laws pertaining to crimes against persons, with their duty to warn individuals who may be in danger, and with the legal mandate to report child abuse and neglect, as well as abuse of the elderly.

The Exchange of Information

Each intervention program should establish and maintain an ongoing exchange of information with the court system (e.g., attorneys, judges, and probation/parole officers), with the batterers who are applicants or participants in the intervention program, and with the battered partners or other potential victims of these batterers. The activities involved in this information exchange will vary depending on whether or not the batterer intervention program is providing services that are court-mandated.

We strongly recommend that each intervention program establish some formal agreement (e.g., a memorandum of understanding) with the court system that specifies the exchange of information. The following list outlines some important items that should be covered in such an agreement:

- the method of exchange of information between the intervention program and the court, including:
 - how the intervention program is to obtain pertinent court records, (e.g., protection orders, arrest records, bail conditions, and probation/parole conditions), as well as prior treatment records; and
 - how any further incidents of violence or violations of any court orders will be documented and reported to the court; and
 - how the intervention program will comply with court requirements to provide participant evaluations to the court or designated agency. These could include attendance, participation, progress, and recommendations for further intervention.
- the intervention program's authority over intake and screening, case management, duration of services, and the parameters of confidentiality.
- the acceptance criteria of the intervention program.
- the fees or financial costs of the intervention program.
- the consequences for a participant who violates the intervention program's policies.
- the consequences for a participant who is discharged before the completion of the program, and the role of the program's staff in hearings on the participant's failure to comply with the intervention mandate.
- the responsibility of the intervention program to inform law enforcement and any appropriate agency, as well as the battered partner, of any known risk of violent behavior posed by the program participant that may result in serious bodily injury or death to the battered partner or any other person.
- the responsibility of the intervention program to protect the confidentiality of all communications and records pertaining to the partners of batterers who are applicants or participants in the intervention program.
- the responsibility of the intervention program to refuse to accept any battered partner into offender programming who has been mandated to participate in a batterer intervention program. These partners should be referred to victim programming for the court required sessions at no cost to the partner.

Intervention Program Procedures

Intake

All batterer intervention programs must conduct an initial screening intake interview with the applicant to assess whether or not the applicant would benefit from the program's services. The program may refuse to enroll an applicant if the program determines that the applicant would not benefit from the program, or that the applicant's presence would present an unacceptable disruption or risk to the program or the other participants. The intervention program should develop and utilize criteria for the acceptance or rejection of applicants to the program.

Each intervention program has the responsibility to evaluate whether or not any client should be required to engage in drug and alcohol counseling, individual psychotherapy, or other treatment prior to or during their participation in the batterer intervention program.

All batterer intervention programs should obtain at least the following information during the intake procedure:

History of abuse: During intake, the intervention program should collect information about the applicant's history of abusive behavior, including:

- abusive behavior, battering, and control of partners in the present and previous relationships.
- other incidents of violence.
- experience as a target or witness of abuse.

Ongoing assessment of lethality: During intake, and throughout intervention, the intervention program should assess the potential lethality of the participant.' This must include the assessment of each of the following:²

- threats of homicide or suicide.
- fantasies of homicide or suicide.
- possession of, access to, or a history of using weapons.
- the degree of possessiveness in relation to the battered partner.
- the degree of obsessiveness about, and dependency on, the battered partner.

Most of these items were adapted from Assessing Whether Batterers Will Kill Pennsylvania Coalition Against Domestic Violence, 1990

² *Many of the forms used to collect information from or to form a contract with participants are provided by several of the nationally-recognized training programs (e.g., the Duluth model).*

- basic screening for depression or mental health issues.
- level of access to the battered partner or other family members.
- legal and illegal drug or alcohol use.
- sexual abuse of the battered partner or others.
- the battered woman's assessment of the battering partner's lethality.

At the time of intake, the intervention program should provide the applicant with a complete and current description of the program curriculum.

If a court-mandated applicant is not accepted, the intervention program should inform the court as to why the applicant was not accepted, and make specific recommendations for action (e.g., treatment for substance abuse).

Collecting collateral information. During the intake process, the intervention program should, if possible, collect information from relevant sources such as police reports, "rap sheets," prior treatment, previous partners, family members, or probation officers.

The relationship between the intervention program and the batterer's victim(s). During or after intake, the batterer intervention program should notify the battered partner of the applicant's acceptance or rejection for intervention services, and any conditions that have been imposed on acceptance into intervention.

The program should encourage battered partners to make plans to protect themselves and their children, and should inform battered partners of the availability of any local service providers for battered partners.

The battered partner or other partners have the right to refuse to cooperate with the batterer intervention program. The battered partner or other partners should be assured that while her/his input is helpful to the intervention facilitator, it is not required as a condition of the perpetrator's involvement in the intervention program.

All information obtained from the victim/partner is confidential and cannot be disclosed without a signed release.

Contract

At the time of intake, the program must require the applicant to enter into a written, uniform contract with the intervention program that includes at least:

- an agreement to comply with the rules of the program.
- an agreement to stop violent, threatening, and controlling behaviors.
- an agreement to comply with all court orders.
- an agreement to execute all necessary documents for the release of information from and to battered partners, law enforcement agencies, the court, and other appropriate agencies and authorities.
- waivers of confidentiality by the participant so that the intervention program can:
 - inform the battered partner about service providers and the participant's status in the intervention program.
 - warn battered partners, law enforcement agencies, and other appropriate agencies about any known risk of serious harm posed by the participant.
 - provide the court with any required reports.
- notification of the participant's limited right to confidentiality, and the requirement that participants protect the confidentiality of other participants.
- an agreement that the agency will not disclose any information about the battered partner.
- an agreement that the participant will provide documents related to prior violence, and prior or concurrent intervention services.
- a statement of:
 - intervention philosophy.
 - length of the program.
 - attendance policies, and the expectation of participation.
 - how fees will be handled.
 - the program's drug and alcohol policy, including the requirement that the participant attend all sessions free of non-prescribed drugs and alcohol.
 - criteria for noncompliance and completion discharge.
 - consequences of noncompliance.

Discharge Criteria and Process

Every batterer intervention program should establish criteria for both noncompliance (i.e., administrative) and completion (i.e., contractual) discharge, which should include the following considerations:

The evaluation for a noncompliance discharge should be initiated when there exists:

- continued use of threatening, controlling, or violent behavior.
- failure to maintain regular attendance.
- failure to comply with the intervention conditions or provisions which are part of the participant's contract (e.g., attendance while under the influence of drugs or alcohol).
- failure to pay fees.
- violations of relevant court orders.
- behavior that is disruptive or detrimental to the group process.

The program should establish criteria for a completion discharge of the participant that should include, but not be limited to, the following:

- consistent attendance and completion of any homework, logs, or assignments.
- cooperation with group rules.
- absence of abusive, violent, controlling, or threatening behavior while in intervention.
- compliance with court orders and other provisions and conditions of participation in intervention.

Every program should have an established procedure for notifying the battered partners, the court, and other appropriate agencies of the noncompliance and completion discharges of the participants.

Program Content

Format

The preferred format for batterer intervention programs is ongoing, same-sex groups, facilitated by two co-leaders (a female and a male). Group size may vary, but ideally should not exceed 20 individuals per group. The length of group meetings should be at least 1 1/2 to 2 hours, and participants should attend weekly, in-person group sessions for at least 26 weeks.

Educational Content of Batterer Intervention

All batterer intervention programs should acknowledge that violence against women is a learned behavior, and that violence is used by batterers to maintain control over their partners. Thus, intervention should focus on learning nonviolence and the appropriate sharing of power and communications within relationships. The goals of the educational sessions should include at least the following:

- To identify, confront, and change all forms of abusive and controlling behaviors. This discussion should include how the use of violence and coercion achieves the goals of controlling behavior.
- To identify and discuss the destructive impact that violence has on the batterer's victims.
- To confront the denial and minimizing of abuse, the blaming of the victim, and other excuses for abuse. The program must emphasize that the batterer is solely responsible for the abuse and that abuse is a willful choice that is never justified.
- To identify cultural and social sources of attitudes toward women that contribute to abusive behavior.
- To confront attitudes and beliefs that promote the use of abusive behavior, such as:
 - Belief in one's entitlement to control the activities of another person.
 - Belief in rigid sex-role stereotypes.
 - Belief in gender superiority and privilege.
 - Belief that aggression can be legitimately used to enforce privilege and authority.
- To promote attitudes and beliefs that contribute to nonviolent, non abusive relationships, such as:
 - Respect for equal rights and shared power in relationships.
 - Belief in nonviolent approaches to resolving disagreements or conflicts.

- To identify and practice cooperative and non-abusive forms of interpersonal behavior. This portion of the intervention should focus on the development of interpersonal behaviors that are an alternative to violent/abusive behaviors. These behaviors should promote equality between partners in the relationship, and should not provide the batterer with other means of abusing or exerting control over his partner.

Couples, Conjoint, and Marriage Mediation

Because of the presence of violent and controlling behavior in the relationship, traditional methods of couples counseling may expose a battered partner to a heightened risk of abuse. Batterers sometimes use the therapeutic environment to extend their control of the battered partner. In addition, batterers sometimes retaliate with violence against their partners immediately following a counseling session, in response to information the partner disclosed during the session.

Thus, any form of couples or conjoint counseling, or marriage mediation or enhancement, is inappropriate and should never be considered a component of batterer intervention services.

Battered partners shall never be compelled to participate in couples counseling.

Couples counseling might serve a role in improving the quality of a relationship after successful completion of batterer intervention. Couples counseling should be considered only if:

- the violence and coercion have ceased completely,
- the battered partner is no longer fearful of the perpetrator, and
- both partners desire to engage in some form of couples counseling to improve the quality of their relationship.

Inappropriate Intervention Methods and Techniques

- Any theory or method of intervention that in any way attributes responsibility for the abusive behavior to the battered partner, or that diminishes the individual batterer's responsibility for the abusive behavior, is inappropriate.
- Any theory or method that treats the violence as a mutual process within the relationship is inappropriate. The intervention method must attribute responsibility for the abusive behavior to the batterer.
- Any theory or method that identifies poor impulse control as the primary cause of the abusive behavior is inappropriate. The intervention method should emphasize desire for control as the primary cause of abusive behavior.

- Any approach that accepts a gradual reduction in violence is inappropriate. The intervention method must demand an immediate stop to all violent behavior.
- Any technique that features any form of "ventilation" or "release," such as punching pillows or other objects, should never be used as part of an intervention program for domestic batterers. Researchers have found that these approaches actually condone and promote the violent expression of emotions.³
- Psycho dynamic therapy, or any other individual or group therapy which focuses primarily on past relationships, events, or uncontrollable factors, as the cause of the abusive behavior is inappropriate. The intervention method should emphasize that the abuser willfully and purposefully chooses to exhibit his abusive behavior.
- Non-directive therapies (e.g., Humanistic or Client-Centered Therapy) are inappropriate. The intervention method must actively challenge and modify inappropriate behavior and attitudes.

Minimum Qualifications for Facilitators

It can be very difficult to assess the qualifications of batterer service providers. It is possible for an individual to hold an advanced degree and a license in the mental health services and to lack expertise in batterer intervention services. On the other hand, it is possible for an unlicensed individual to have a wealth of training and experience in providing batterer intervention services.

Thus, when assessing the qualifications of batterer intervention providers, one should assess the educational background, license or certification, and the training and experience that an individual has in providing batterer intervention services.

The following requirements should be met:

- Each facilitator must have completed at least 40 hours of victim-centered training which may include training offered by victim services provider programs, providing advocacy for battered women and their children, conducting women's and children's groups, or attending panels or presentations at which victims discuss their experiences of domestic violence.
- Each facilitator must have training and experience in facilitating psycho-educational groups (ideally, groups of resistant men). Each facilitator must have at least 40 hours of direct, face-to-face experience co-facilitating batterer intervention groups prior to leading facilitation of a group.
- Each facilitator must have completed a nationally-recognized training program in providing batterer intervention services (e.g., the Duluth Model or EMERGE), which specifically addresses the dynamics of domestic violence within the context of power and control, the effects of domestic violence on victims and their children, the historical

³For a summary of this research, see *Anger, the Misunderstood Emotion*, by Carol Tavris (1989).

nature of domestic violence, the role of the facilitator, lethality assessment, teaching alternatives to violent and controlling behavior, and avoidance of facilitator collusion with batterers.

- Each facilitator should have substance abuse training specific to domestic violence.
- Facilitators must be committed to nonviolence.
- Facilitators must be committed to the ongoing development and monitoring of the methods and techniques used in the batterer intervention program.

Maintenance of Minimum Standards

- Batterer intervention service providers should complete approximately 10 hours per year of continuing training. This training might take in a number of different forms, depending on the needs of the individual program. However, the following educational experiences are especially useful in maintaining the effectiveness of service providers:

workshops, seminars, or conferences on domestic violence, batterer intervention services, laws concerning domestic violence, child abuse, or substance abuse.

supplemental experiences such as court attendance at domestic violence hearings, police ride-alongs, or supervised work at a victim services program.

- Service providers should develop a regular process for staffing case studies and processing major issues on an ongoing basis.
- Service providers should engage in regular and ongoing assessment that would be subject to review based on these standards by a monitoring and evaluation team.
- Service providers should be willing to participate in any local coordinating councils or task forces that are designed to develop, facilitate and/or monitor a collaborative community response to domestic violence.

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