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Do Batterer Intervention Programs Work? Two Studies

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ABOUT THIS REPORT

For more than a decade, courts have been sending convicted batterers to intervention programs rather than to prison. But do these programs work? Two studies in Florida and New York tested the most common type of batterer intervention. Their findings raise serious questions about the effectiveness of these programs. However, problems conducting the research raise questions about the studies' findings.

What did the researchers find?

Batterer intervention programs do not change batterers' attitudes and may have only minor effects on behavior, according to these studies. The Florida study found no significant differences between those who had treatment and those who did not as to whether they battered again or their attitudes toward domestic violence. The study did find an apparent relationship between whether an offender was employed or owned a house and whether he reoffended: Those with the most to lose were the least likely to reoffend. In New York, batterers

in a 26-week program were less likely to reoffend than those in an 8-week program, but neither group showed any change in attitudes toward women or domestic violence.

What were the studies' limitations?

Researchers face serious problems in studying batterer intervention programs:

- Batterers drop out at high rates.
- Victims often relocate or become difficult to find.
- No measures have been designed to specifically assess batterers' attitudes.
- To protect victims, judges often override random assignment of batterers to a control group.

These research limitations can affect the quality of the collected data, which can, in turn, affect researchers' ability to draw verifiable conclusions. Although both studies tried to address these limitations, they could not avoid them entirely.

Do Batterer Intervention Programs Work? Two Studies

Batterer intervention programs have been proliferating in the United States for the past two decades. These programs give batterers an alternative to jail. They usually involve several months of attendance at group therapy sessions that attempt to stop the violence and change the batterers' attitudes toward women and battering.

Mounting evidence indicates that the programs might be ineffective.

Two recent evaluations, one in Broward County, Florida, and the other in Brooklyn, New York,¹ evaluated interventions based on the Duluth model, which is the most commonly used program in the Nation—many States mandate its use (see "Types of Batterer Interventions"). The Broward County study found that the batterer intervention program had little or no effect, and the Brooklyn study found only minor improvement in some subjects. Neither program changed subjects' attitudes toward domestic abuse.

However, limitations in the studies raise additional issues. Are the evaluations correct that these programs don't change batterers' behavior and attitudes, or do shortcomings in the evaluations cover up program effects? There is no adequate answer to this question. Both issues may need to be addressed in future programs and studies.

Broward County: Does stake-in-conformity matter most?

The Broward County study found no significant difference between the treatment and control groups in attitudes toward the role of women, whether wife beating should be a crime, or whether the State has the right to intervene in cases of domestic violence. It also found no significant difference between these groups in whether victims expected their partners to beat them again. Moreover, no significant difference was found in violations of probation or



This report is based on a longer research report: *Batterer Intervention Programs: Where Do We Go From Here?* by Shelly Jackson, Lynnette Feder, David R. Forde, Robert C. Davis, Christopher D. Maxwell, and Bruce G. Taylor, Washington, DC: U.S. Department of Justice, National Institute of Justice, June 2003, NCJ 195079.

TYPES OF BATTERER INTERVENTIONS

The Broward County and Brooklyn batterer intervention programs were based on the Duluth model. The Duluth model's underlying theory is that batterers want to control their partners and that changing this dynamic is key to changing their behavior. Its curriculum uses a "power and control wheel" depicting tactics abusers use to control their partners. Themes counteracting these tactics are discussed in classes and group sessions that attempt to induce batterers to confront their attitudes and behavior.

There are several alternatives to the Duluth model. Cognitive-behavioral intervention views battering as a result of errors in thinking and focuses on skills training and anger management. Another model, group practice, works from the premise that battering has multiple causes and is best addressed through a combined approach that includes an individual needs assessment. Proponents of these programs believe that a more long-term approach than the Duluth model is necessary.*

Programs based on batterer typologies or profiles are gaining popularity. These interventions profile the batterer through a psychological assessment, then classify him by level of risk, substance abuse, and other factors that may influence which intervention is most likely to work for him. Programs based on this approach are still relatively new and not fully evaluated.

A controversial intervention is couples therapy, which views men and women as equally responsible for creating disturbances in the relationship. It is widely criticized for assigning the victim a share of the blame for the continuation of violence.

Notes

*Examples of these programs include Emerge and AMEND (Abusive Men Exploring New Directions). See Healey, K., C. Smith, and C. O'Sullivan, *Batterer Intervention: Program Approaches and Criminal Justice Strategies, Issues and Practices*, Washington, DC: U.S. Department of Justice, National Institute of Justice, 1998, NCJ 168638.

rearrests, except that men who were assigned to the program but did not attend all sessions were more likely to be rearrested than members of the control group.

Evaluators tried to determine what could account for differences in men's self-reports of physical violence. They considered whether the offender was assigned to treatment; the number of classes he attended; and such stake-in-conformity variables as marital status, residential stability, and employment. These last factors proved crucial.

Attending the program had no effect on the incidence of physical violence. Rather, offenders who were employed, married, and/or owned a home were less likely to batter again. Younger men and men with no stable residence (regardless of age) were more likely to abuse their partners. Older men who owned a home were less likely to do so.

Twenty-four percent of men in both the experimental and control groups were rearrested at least once during their year on probation. Again, attending the program had no effect. Rather, whether an

offender was employed (a stake-in-conformity variable) seemed to have more influence on whether he was rearrested.

Brooklyn: Is longer treatment more effective?

The Brooklyn study unintentionally had two experimental groups of offenders. After the study was underway, defense attorneys objected to the 26-week program's duration and cost and advised their clients not to participate. To preserve the study, offenders were offered an accelerated 8-week program, which created a second experimental sample.

Batterers assigned to 26 weeks of treatment were less likely than the control group and those assigned to 8-week classes to be arrested again for a crime against the same victim. Neither program changed batterers' attitudes toward domestic violence. There were significant differences in reoffending, however. Even though more offenders completed the shorter program, the 26-week group had fewer criminal complaints than either the control group or the 8-week group.

Men who attended the longer treatment committed fewer new violent acts than those who attended the shorter treatment or those who had no treatment. This may suggest that providing treatment for a longer period of time helped reduce battering during the term of treatment and for some time thereafter.

Program and research issues

Concerns about research methodology cloud most batterer intervention program evaluations, and these two studies were no exception. The major issues are—

- *Maintaining sample integrity.* Keeping assignments to batterer programs truly random is consistently a challenge.²
- *Low attendance, high attrition, difficulty following up.* High dropout and low response rates can lead to overly positive estimates of program effects.
- *Inadequate data sources.* Official records used to validate batterer and victim reports may be collected inconsistently across jurisdictions; also, they capture

A “statistically significant reduction in violence” may mean little to a battered woman.

only those violations that reach the authorities. Evidence suggests that batterers often avoid rearrest by switching to psychological and verbal abuse.³

- *Difficulty measuring outcomes.* Evaluators lack good survey instruments to measure batterer behavior and attitudes. The revised Conflict Tactics Scale (CTS2) used in these studies was not designed for before and after measurements.⁴ The Brooklyn study raised another issue common to batterer intervention program studies: Do evaluations examine the effects of the intervention or the effects of assignment to a treatment group?⁵
- *Who is defining success?* A final concern is broader in scope: Is a mere reduction in violence enough? These studies considered a reduction in violence to be a success based on the premise that it is unrealistic to expect batterers to abandon violent behavior after one intervention. But a “statistically significant reduction in violence” may mean little to a battered woman.⁶

New directions for protecting victims

The bottom line is: What are the best ways to protect victims? Batterer intervention programs are one approach, although much remains to be learned about them—specifically, which program works best for which batterer under which circumstances.⁷ But perhaps what is needed is a whole new approach.

Rethinking intervention.

The models that underlie batterer intervention programs may need improvement. New approaches based on research into the causes of battering and batterer profiles⁸ may be more productive than a one-size-fits-all approach.⁹ Researchers may also draw lessons from other disciplines, such as substance abuse interventions—for example, that length of treatment may influence the outcome.¹⁰

Improvements in how programs are put into practice may also be necessary, since variations in how programs are carried out may reduce their effectiveness. Researchers have noted greater effects in demonstration programs implemented by researchers than in practical programs

implemented by juvenile or criminal justice agencies. Thus, the degree to which a program is faithful to the intervention model may determine how well it works. For example, some programs have few sanctions for dropping out, whereas others closely monitor attendance. This suggests the need to test the effectiveness of close monitoring and required attendance.

Linking batterer programs to other programs and responses. Batterer intervention programs may be effective only in the context of a broader criminal justice and community response to domestic violence that includes arrest, restraining orders, intensive monitoring of batterers,¹¹ and changes to social norms that inadvertently tolerate partner violence.

If monitoring is partly responsible for lower reoffense rates, as the Brooklyn experiment suggests, judicial monitoring may be a useful approach. The Judicial Oversight Demonstration initiative—a collaboration among the National Institute of Justice, the Office on Violence Against Women, and three local jurisdictions—is testing this idea.¹² Other innovations

Although these studies focus on male batterers, women batter as well. The dynamics of battering appear to differ for men and women, which suggests a need for intervention programs designed specifically for female batterers. Currently, it appears that most women batterers are being placed in male-dominated batterer intervention programs.

might include mandatory intervention (indeterminate probation) until the batterer no longer endangers his partner, an approach that has been used with sex offenders.¹³

Improving evaluations.

Although the quality of batterer intervention program evaluations has improved,¹⁴ barriers remain. By collaborating, researchers, practitioners, and policymakers may be able to develop better strategies and improve the rigor of experimental evaluations.

For example, researchers need to find better ways to maintain contact with batterers and victims and better instruments than the revised CTS2.¹⁵ They need to develop more reliable ways of validating batterer and victim reports than relying strictly on official records of rearrests and probation violations. Statistical tools can be applied to

correct for nonrandom assignment and other problems.¹⁶

Since batterer intervention programs are a relatively new response to a critical social problem, it is too early to abandon the concept. More work needs to be done to determine the causes of battering and test new responses.

Notes

1. Davis, R.C., B.G. Taylor, and C.D. Maxwell, *Does Batterer Treatment Reduce Violence? A Randomized Experiment in Brooklyn*, final report to the National Institute of Justice, Washington, DC: National Institute of Justice, 2000, NCJ 180772; Feder, L., and D.R. Forde, *A Test of the Efficacy of Court-Mandated Counseling for Domestic Violence Offenders: The Broward Experiment*, final report to the National Institute of Justice, Washington, DC: National Institute of Justice, 2000, NCJ 184752.
2. Compromises in random assignment may have diluted the Brooklyn program's impact.
3. See Gondolf, E.W., "Patterns of Reassault in Batterer Programs," *Violence and Victims* 12(4)(1997): 373–87; and Harrell, A.V., *Evaluation of Court-Ordered Treatment for Domestic Violence Offenders*, final report to the State Justice Institute, Washington, DC: The Urban Institute, 1991.
4. The revised CTS2 assesses offender reports of abuse. See Straus, M.A., S.L. Hamby, S. Boney-McCoy, and D.B. Sugarman, "The Revised Conflict Tactics Scale (CTS2): Development and Preliminary Psychometric Data," *Journal of Family Issues* 17(3)(1996): 283–316. Concerns about the types of batterers studied and the effects of mandating treatment are discussed in Davis, et al., *Does Batterer Treatment Reduce Violence?* 15–17.
5. The Broward study statistically tested for this possibility and found no treatment effect.
6. See Edleson, J.L., "Controversy and Change in Batterer's Programs," in *Future Interventions with Battered Women and Their Families*, ed. J.L. Edleson and Z.C. Eisikovitz, Thousand Oaks, CA: Sage Publications, 1996.
7. Gondolf, E.W., "Batterer Programs: What We Know and Need to Know," *Journal of Interpersonal Violence* 12(1)(1997): 83–98.
8. Holtzworth-Munroe, A., and G.L. Stuart, "Typologies of Male Batterers: Three Subtypes and the Differences Among Them," *Psychological Bulletin* 116(3)(1994): 476–97. Also see Wexler, D.B., "The Broken Mirror: A Self Psychological Treatment Perspective for Relationship Violence," *Journal of Psychotherapy, Practice, and Research* 8(2)(1999): 129–41.
9. Healey, K., C. Smith, and C. O'Sullivan, *Batterer Intervention: Program Approaches and Criminal Justice Strategies, Issues and Practices*, Washington, DC: U.S. Department of Justice, National Institute of Justice, 1998, NCJ 168638.

10. Taxman, F.S., "12 Steps to Improved Offender Outcomes: Developing Responsive Systems of Care for Substance-Abusing Offenders," *Corrections Today* 60(6)(1998): 114–117, 166. Also see Howard, K.I., K. Moras, and W. Lutz, "Evaluation of Psychotherapy: Efficacy, Effectiveness, and Patient Progress," *American Psychologist* 51(10)(1996): 1059–1064.

11. A. Klein, cited in Healey, et al., *Batterer Intervention: Program Approaches and Criminal Justice Strategies*, 10.

12. "Experiment Demonstrates How to Hold Batterers Accountable," *National Institute of Justice Journal* 244 (July 2000): 29.

13. Hafemeister, T.L., "Legal Aspects of the Treatment of Offenders With Mental Disorders," in R.M. Wettstein, ed., *Treatment of Offenders With Mental Disorders*, New York: Guilford Press, 1998: 44–125.

14. Davis, R.C., and B.G. Taylor, "Does Batterer Treatment Reduce Violence? A Synthesis of the Literature," *Women and Criminal Justice* 10(2)(1999): 69–93.

15. See Gondolf, E.W., "Batterer Programs: What We Know and Need to Know;" and Sullivan, C.M., M.H. Rumpitz, R. Campbell, K.K. Eby, and W.S. Davidson, "Retaining Participants in Longitudinal Community Research: A Comprehensive Protocol," *Journal of Applied Behavioral Science* 32(3)(1996): 262–76.

16. See Jackson, S., et al., *Batterer Intervention Programs: Where Do We Go From Here?* NIJ Special Report, Washington, DC: U.S.

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Additional reading

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