

Before we begin: Available on Oklahoma Coalition Against Domestic Violence and Sexual Assault (www.ocadvsa.org) post conference are the text of this presentation, 8 pages of resources, a Domestic Violence Behavior Checklist and a Stalking Behavior Checklist.

WHO ARE BATTERERS & WHAT WILL GET THEM TO STOP?

This is the great big question that researchers have yet to fully answer. Efforts to identify key demographic, psychological, and criminal characteristics of men who batter have led some researchers to propose batterer profiles or "typologies" to aid criminal justice professionals and batterer interventions in predicting batterers' dangerousness and potential for re-offending, as well as to match batterers with specialized forms of intervention.

Psychological Typologies

Unfortunately, no consensus concerning psychological categories for batterers has emerged from the research community although several overlapping typologies have been proposed. For example, Gondolf's 1988 study using 525 battered women as informants yielded three types of batterers:

- Sociopathic...individuals who take what they want without awareness of anyone else's needs or feelings and do so without remorse
- Antisocial...individuals with a cluster of behaviors include 3 or more of the following:
 1. failure to conform to social norms with respect to lawful behaviors as indicated by repeatedly performing acts that are grounds for arrest
 2. deceitfulness, as indicated by repeatedly lying, use of aliases, or conning others for personal profit or pleasure
 3. impulsivity or failure to plan ahead
 4. irritability and aggressiveness, as indicated by repeated physical fights or assaults
 5. reckless disregard for safety of self or others
 6. consistent irresponsibility, as indicated by repeated failure to sustain consistent work behavior or honor financial obligations
 7. lack of remorse, as indicated by being indifferent to or rationalizing having hurt, mistreated, or stolen from another
- Typical...normalish

However, Gondolf's current research on batterers -- which includes psychological assessments using the Millon Clinical Multi-axial Inventory-III (MCMI), a diagnostic tool used by a number of programs -- has yielded an extremely varied picture of batterer psychology that does not fit neatly with earlier research. His research identified the following:

- 25% of participants showed evidence of a severe mental disorder
- 25% showed narcissistic personality traits...narcissistic personality disorder is a mental disorder in which people have an inflated sense of their own importance and a deep need for admiration. Those with narcissistic personality disorder believe that they're superior to others and have little regard for other people's feelings. But behind this mask of ultra-confidence lies a fragile self-esteem, vulnerable to the slightest criticism. One can have traits without being diagnosed with the disorder.
- 24% showed passive-aggressive traits... passive-aggression is a psychological mechanism for handling hostility or anger in an underhanded or devious way that is hard for others to prove. Things are sabotaged by the passive-aggressive and it somehow is never their fault. A really good passive aggressive is very slippery with excuses, justifications, or alternative reasons for why things go awry. Passive-Aggression may not be expressed directly in behavior-but in words or humor. Sarcasm which communicates hostility is often a tool of the passive-aggressive person, as are jokes made at your expense.

- 19% were clinically depressed
- Over 50% of the men appeared to have abused alcohol

Other researchers have arrived at the following tripartite classification scheme for batterers:

- The "Family Only" Batterer is characterized as rigid, perfectionist, and conforming, with limited social skills. The family-only batterer did not experience much physical abuse in childhood and is mildly to moderately violent toward his family.
- The "Dysphoric/Borderline Batterer" is very emotional, experienced parental rejection and fears abandonment, and is extremely abusive psychologically but not severely violent physically.
- The "Generally Violent/Antisocial" Batterer tends to abuse alcohol, lacks empathy, has rigid gender role attitudes, and is narcissistic -- that is, expects special treatment and deference. He was physically abused in childhood and engages in other crimes, viewing violence as the appropriate method of solving problems.

Donald Dutton has proposed yet another tripartite scheme that is similar, but not identical, to the others. Dutton classifies batterers as emotionally volatile, psychopathic, or over-controlled/explosive.

The Third Path (a Colorado treatment agency specializing in the treatment of men and women who have experienced childhood or adult trauma) and AMEND (Colorado non profit providing offender treatment) use the MCMI to produce profiles of pathology that allow for the classification of batterers to aid treatment. At The Third Path, psychological traits are addressed in group, and groups are structured so that a mixture of personality types is present.

A synthesis of psychological typology would yield three categories under which all of the various models fit. The three categories are defined as Low-Risk Batterers, Moderate-Risk Batterers, and High-Risk Batterers. This model was identified in a 2005 article in Journal of Interpersonal Violence entitled The Utility of Male Domestic Violence Offender Typologies, New Directions for Research, Policy and Practice.

Low-Risk Batterer	Moderate-Risk Batterer	High-Risk Batterer
Low severity of violence Low frequency of violence Little or no psychopathology Usually no criminal history	Moderate severity of violence Moderate frequency of violence Moderate-high psychopathology	High severity of violence High frequency of violence High levels of psychopathology Usually have criminal history
Gondolf (1988)—typical	Gottman et al. (1995) Type II pit bull	Gondolf (1988) — types I & II
Hamberger, Lohr, Bonge, & Tolin (1996) —non pathological	Holtsworth-Munroe & Stuart (1994) — dysphoric-borderline	Gottman et al. (1995) type I cobra
Holtsworth-Munroe & Stuart (1994) — family only	Hamberger, Lohr, Bonge, & Tolin (1996) — passive-aggressive-dependent	Holtsworth-Munroe & Stuart (1994) — generally violent-antisocial
Johnson (1995) —common couple violence		Hamberger, Lohr, Bonge, & Tolin (1996) — antisocial
		Johnson (1995) — intimate terrorist

While psychological typologies are interesting from a theoretical standpoint, they offer little assistance to the criminal justice system as yet because of the in-depth assessment needed to identify these characteristics and the lack of typology-based interventions available in the field. The criminal justice-based typologies discussed below offer a more practical frontline approach to batterer triage; nonetheless,

the more subtle distinctions made possible by psychological typologies may be of great use to jurisdictions and program providers that are willing to integrate group process intervention with the educational model used by most programs . For example, in Iowa, State officials have consulted with Michael Lindsey, founder of Colorado's AMEND and The Third Path, to explore options for using batterer typology to identify high-risk offenders for private counseling, or alcohol treatment, or extended interventions that would address psychological factors as well as provide education, although Iowa State Standards mandate the use of the Duluth curriculum.

Criminal Justice-Based Typologies

While courts, probation officers, prosecutors, and program screeners in all jurisdictions routinely make decisions concerning the dangerousness of offenders and the appropriateness of various interventions for individual batterers, few jurisdictions have systematic assessment tools based on an articulated theory of batterer typology.

Recent research by John Goldkamp may offer a practical, more standardized approach to offender classification. Using demographic information, criminal histories, and substance abuse data from his study of the Dade County Domestic Violence Court, Goldkamp proposed several classification strategies to assist in the disposition of batterers.

Goldkamp's typologies focus on predicting batterer retention in treatment and the likelihood of reoffending, both with the same victim and with other women. Goldkamp's approach is attractive from a criminal justice perspective because the information necessary to predict retention in treatment and recidivism should already be available to most prosecutors, probation officers, and judges in rap sheets and probation reports without having to do a special assessment of the offender. These provide:

- Basic demographic information concerning the offender, such as race/ethnicity, age, relationship to the victim, and victim gender
- A detailed criminal history, such as current offense, any prior civil court cases, convictions, and number and types of arrests -- assault and battery arrests, same-victim arrests, and domestic-violence-related arrests
- Information about drug and alcohol involvement, including types of drugs abused.

Goldkamp's analysis found that "the probability of re-arrest was far greater for persons with any prior convictions, any prior assault and battery arrests, and indications of involvement with other drugs of abuse."

There is an approach to batterer classification that combines both psychological and criminal justice factors to create offender profiles as an aid to sentencing and supervision.

The 18th Judicial District Probation Department in Colorado has implemented a unique batterer assessment and intervention assignment process based on Michael Lindsay's research concerning batterer typology. Frank Robinson, consultant clinical social worker to the probation office, and Michael Lindsey have collaborated on an assessment tool, the Domestic Violence Behavioral Checklist, which catalogs the batterer's history of intimate relationships, parenting, criminality, substance abuse, and social and psychological dysfunction to assign the batterer to one of three offender groups: low, medium, or high level of risk. The one-page assessment tool includes 38 questions and requires approximately 45 minutes to administer. Probation officers or volunteers can be easily trained to implement it. You will find a copy online at www.ocadvsa.org following this conference.

Low-risk offenders must not have caused any physical injury and must not have committed any previous violent offenses against the victim. The offender's claim that this was the first episode of violence -- not merely the first episode to be reported -- needs to be corroborated by the victim. In addition, low-risk offenders must:

- have no history of verbal or psychological abuse (as reported by the victim)
- have no history of "chaotic or dysfunctional behavior"
- not have committed the offense during a period of separation
- have no children involved in the dispute
- have no more than two -- of a possible seven -- low-risk criteria checked.

This group of offenders is likely to be offered deferred prosecution wherein they are allowed to enter a guilty plea with the understanding that if they complete an accredited batterer program and do not reoffend for three years, the plea will be withdrawn and the charges dropped. The prospect of no criminal record is often a compelling motivation for first-time batterers who are professionals or middle-class to complete a program.

Medium-risk offenders are those with more than two low-risk factors, or one or more medium risk factors. Probation recommends that medium-risk offenders be sentenced to probation with a condition of program completion and assigns them to a probation volunteer for close tracking.

High-risk offenders include any batterer with even one high-risk indicator. For the purposes of intervention, probation divides the high-risk group into two subgroups:

1. batterers who are out of control despite consequences or interventions
2. batterers whose lives are chaotic and dysfunctional and who are obsessed with their victim

Those in the first group are not appropriate for participation in batterer programs; probation recommends that they be incarcerated.

The second group, which is supervised by a specially assigned probation officer with a reduced caseload, is recommended for both long-term (more than 36 weeks) and intensive (more than one session per week) program interventions that are structured to address the challenge of high-risk offenders. Although the court uses several programs, many of the high-risk offenders are referred to The Third Path, where Robert McBride, program director, conducts a detailed intake assessment that identifies offenders with personality disorders so that therapists can better understand and attempt to change their behaviors.

Probation officers also note on the checklist other factors that may suggest assigning the offender to a specific intervention, such as the batterer's gender, sexual orientation, primary language, need for substance abuse or child abuse treatment, or other special needs. In this manner, the Domestic Violence Behavioral Checklist integrates assessment of batterer typology and lethality with assignment to culturally appropriate interventions.

Cultural Specificity: The Influence of Class, Race, and Subculture

Factors that can affect the expression of domestic violence and response to treatment include socioeconomic status, racial or ethnic identity, country of origin, and sexual orientation.

- While a national survey of a random sample of married couples found domestic violence in all social groups, the survey revealed a higher prevalence among poorer families. Low-income men may be subject to greater stress in everyday life, and their lack of economic power and possible financial dependence on female partners may threaten their sense of masculinity, perhaps increasing the motive to assert dominance and control through physical violence.
- Wealthy batterers are less visible because they enjoy greater privacy in their family lives and have more resources for dealing with problems without involving the police or social services. Should they be prosecuted, they can afford a private attorney who may get them a lighter sentence, and they can pay for private counseling or psychotherapy in lieu of a batterer group.

- Men of color are also mandated to treatment in numbers disproportionate to their representation in the local population. Researchers attribute this overrepresentation to a correlation with low socioeconomic status, lingering discrimination in the criminal justice system, and greater exposure to violence in the community. Resistance to treatment may be higher among minority men: some African American men have attributed their being mandated to programs to racism, a charge that facilitators have had to recognize without accepting it as an excuse for battering.
- Research suggests that men of color -- including African American and Latino men -- have a lower program completion rate than other cultural or racial groups. As a result, some researchers and practitioners have proposed that the effectiveness of interventions will be enhanced among minority men if programs are not merely culturally sensitive, but, as discussed below, culturally competent. All the jurisdictions visited for this report had at least limited access to specialized treatment groups for batterers of different races, ethnicities, and sexual orientations, and most -- but not all -- agreed that specialized interventions enhanced the engagement of batterers in treatment.

Substance Abuse

The significant role of alcohol and drug abuse in domestic violence -- especially in those cases coming to the attention of the criminal justice system -- is sometimes downplayed by program staff because they wish to keep their intervention focused on the voluntary nature of domestic abuse and not excuse the batterer's behavior on the basis of a medical model of addiction.

Nonetheless, analyses of domestic abuse cases and restraining orders suggest that between 71% and 85% of domestic violence cases involve batterers who are substance abusers. According to Peter Kosciusko, a substance abuse counselor at the Dudley, Massachusetts, District Court, "While I can't say drinking is the cause of domestic abuse, it definitely pours gasoline on the fire. If we can get them sober, we have a good chance of not seeing them again."

Interventions Based on Batterer Typologies

Evidence that individual factors play a role in battering is easily found. Not everyone who grows up witnessing domestic violence becomes a batterer, and not all batterers grew up witnessing domestic violence; most males exposed to a "culture of violence" and male dominance do not batter. The questions remain whether and, if so, how the individual attributes that contribute to violence should be treated and whether programs can diversify to meet the needs of every typology.

Mounting Evidence of the Need for Typologies

Arguments that intervention should be tailored to accommodate individual psychological characteristics are not new. However, research findings pointing to the need for batterer typologies have generally failed to alter treatment programs, both because feminist-based programs view the focus on psychological attributes of batterers as a way to avoid responsibility and accountability for violence and because researchers do not agree on what a typology of batterers might look like.

Key Points

Many researchers and practitioners have concluded that a "one-size-fits-all" intervention cannot accommodate the diverse population of batterers entering the criminal justice system.

The development of more specialized approaches to batterer intervention is not in conflict with the trend toward the development of State standards or certification criteria for batterer interventions, so long as those standards allow for a diversity of responsible programming.

Two new trends in batterer intervention reflect the perceived need for more specialized approaches:

- interventions tailored to specific types of batterers (batterer typology), such as high-risk offenders, those with psychological problems, or substance abusers
- interventions with curriculums or program policies intended to accommodate socio-cultural differences in batterers, such as poverty, poor literacy, race, ethnicity, nationality, gender, and sexual orientation.

By contrast, the originator of one new cognitive-behavioral intervention argues that the problems of diverse batterers can be addressed in a "one-size-fits-all" format that treats heterosexual male and female batterers, gay and lesbian batterers, victims, and child abusers with one didactic cognitive-behavioral curriculum.

What Works: Do Interventions Stop Battering?

While numerous evaluations of batterer interventions have been conducted, domestic violence researchers concur that findings from the majority of these studies are inconclusive because of methodological problems, such as small samples, lack of random assignment or control groups, high attrition rates, short or unrepresentative program curriculums, short follow-up periods, or unreliable or inadequate sources of follow-up data (e.g., only arrest data, only self-reported data, or only data from the original victim).[46]

Among evaluations considered methodologically sound, the majority have found modest but statistically significant reductions in recidivism among men participating in batterer interventions.

A notable exception is Adele Harrell's 1991 methodologically rigorous quasi-experimental evaluation of batterer interventions in Baltimore, conducted for the Urban Institute. Harrell's study raised particular concern in the field by its unexpected findings that participants in all three batterer interventions recidivated at a higher rate than those in the control group.

Gondolf, E. (2001). *Batterer intervention systems: Issues, outcomes, and recommendations*. Thousand Oaks, CA: Sage Publications (BOOK).

Results from Gondolf's study (Gondolf, E. 2001. *Batterer intervention systems: Issues, outcomes, and recommendations*. Thousand Oaks, CA: Sage Publications) sponsored by the Centers for Disease Control are inconclusive:

- at 12 months, re-offense rates for program graduates are similar to those for batterers who dropped out at intake
- no significant variations exist in outcomes for batterers in programs of varied length and curriculum (although a three-month, pre-trial, educational program has shown slightly better outcomes when socioeconomic factors are taken into account).

Frustration with the lack of empirical evidence favoring one curriculum or length of treatment has led some researchers increasingly to look at batterers as a diverse group for whom specially tailored interventions may be the only effective approach. As a result, current research is shifting toward studying which subgroups of batterers respond to which specialized interventions.

At the same time, the question of how to evaluate batterer interventions may need to be reframed to include the broader context of criminal justice support. For example, research suggests that arrest alone is not as effective in reducing recidivism as is arrest as part of a coordinated multiagency response to domestic violence. These findings point to the need for a broader, systemic examination of the efficacy of batterer intervention. It seems likely that even if research identifies the perfect matches between interventions and offenders, criminal justice and community support for the interventions will have a crucial impact on the effort's success.

Andrew Klein, chief probation officer of the Quincy, Massachusetts, District Court Model Domestic Abuse Program, observed, "You can't separate batterer treatment from its [criminal justice system] context. You can't study the effectiveness of treatment without studying the quality of force which supports it." Research supports this view: "Police visits to the home, combined with an eventual arrest of the perpetrator, which was also followed by court-mandated treatment, were significantly more likely than other combinations of criminal justice actions to end repeat incidents of violence."

Gondolf's research also points to the importance of system-wide assessments of batterer intervention. In particular, Gondolf is concerned about the often long delay between arrest and program enrollment: "The lag may be so long that the program may be addressing men about a former life."^[51] System-wide evaluation could answer the important question of whether the speed of criminal justice response and program enrollment is more important than either program content or length.

In conclusion, Andrew Klein emphasizes that, at a minimum, every intervention must be effective in monitoring abusive behavior during the program because victims are more likely to stay with batterers who are in an intervention. In Klein's opinion, "Batterer intervention is a public safety program, not treatment; you must keep the focus on victim safety. Otherwise, the criminal justice system is only offering the batterer a safe haven to escape the consequences of his offense."

Conclusion

While the criminal justice system is devoting increased attention to domestic violence, many mechanisms and protocols for dealing with batterers are new and still being refined. Some States are still in the process of writing standards or guidelines for batterer programs. In the absence of conclusive research findings, practitioners and academics continue to debate the appropriate content of batterer interventions. In this dynamic environment, judges who adjudicate and prosecutors who try domestic violence cases, probation officers who supervise batterers, and advocates who serve victims of domestic violence all need to keep informed about new developments in the field of batterer intervention in order to perform their jobs effectively.

The Causes of Domestic Violence: From Theory to Intervention

The origins of domestic violence are the subject of active debate among victim advocates, social workers, researchers, and psychologists concerned with batterer intervention. More than in most fields, the theoretical debate affects practice. Over the last two decades, a number of practitioners representing divergent theoretical camps have begun to move toward a more integrated "multidimensional" model of batterer intervention in order to better address the complexity of a problem that has psychological, interpersonal, social, cultural, and legal aspects. Two practitioners who advocate an eclectic approach to batterer intervention describe the dilemma of practitioners looking for a single explanation for battering as follows

A need for control...Duluth model
Poor impulse control...psychodynamic
Poor self-esteem...psychodynamic
Poor couple communication...systemic.

The safest conclusion would appear to be that there are numerous routes by which intimate partners become abusive and a multitude of variables that increase the likelihood of violence.

In practice, few batterer programs represent a "pure" expression of one theory of domestic violence; the majority of programs contacted for this report combine elements of different theoretical models. As a result, when discussing program theory with batterer intervention providers, criminal justice professionals need to understand not only the primary theory the program espouses but also the program's content,

because programs may identify with one theory but draw on or two more theories in their work. Experts caution criminal justice agencies against accepting an eclectic curriculum uncritically: program components borrowed from different theoretical perspectives should be thoughtfully chosen to create a coherent approach, not a scattershot attempt hoping to hit some technique that works.

Criminal justice professionals are likely to encounter programs based on one or more of the following theories of domestic violence. Each theory locates the cause of the violence differently:

Society and culture -- Social theories of domestic violence attribute the problem to social structures and cultural norms and values that endorse or tolerate the use of violence by men against women partners. For example, the feminist model of intervention educates men concerning the impact of these social and cultural norms and attempts to resocialize them emphasizing nonviolence and equality in relationships.

The family -- Some sociologists locate the cause of domestic violence in the structure of the family, the interpersonal interactions of families, and the social isolation of families.

For example, family systems theory attributes the cause to communication problems and conflict within intimate relationships and teaches communication skills to help partners avoid violence.

Couples counseling, an intervention based on family systems theory, is controversial because of its failure to assign blame for the abuse to one person and to identify a victim. Couples counseling is also considered dangerous to the victim because it encourages the victim to discuss openly issues that may spark later retaliation by the batterer.

The individual -- Psychological theories attribute domestic violence to the individual batterer's predispositions and experiences. Battering may be attributed to personality disorders and biological dispositions to violence or, as social learning theory suggests, to the role of the batterer's social environment during childhood.

Attachment theory, a form of social learning theory, focuses on the interaction of caregivers with their children and the impact of that first attachment on an individual's ability to establish safe and healthy relationships later in life. Batterer interventions based on this theory attempt to facilitate secure attachments between batterers and loved ones (intimate partners, children, and parents). Psychodynamic approaches target the underlying psychological cause of the violence, while cognitive behavioral approaches teach batterers new patterns of nonviolent thinking and behavior.

It is important for criminal justice professionals to understand the assumptions and goals of service providers whose interventions have divergent theoretical bases, because not all intervention approaches employ techniques that are equally compatible with the goals of the criminal justice system -- protecting the victim as well as rehabilitating the offender.

Overview of Theories and Related Interventions

Feminist, family systems, and psychotherapeutic theories of domestic violence offer divergent explanations of the root causes of battering and lead to distinct intervention models. The following section outlines the basic tenets of each theory, illustrates how these assumptions influence the choice of intervention strategies, and notes the advantages and disadvantages of each theoretical and treatment approach. As noted previously, however, examples of programming based exclusively on one theory are becoming increasingly rare.

Feminist Approaches: The Social Problem Approach

Batterer intervention programs originated in the early 1970's, as feminists and others brought to public attention the victimization of women and spawned grass roots services such as rape hot lines and battered women's shelters. According to Anne Ganley of Seattle's Veteran Administration Medical Center and David Adams of EMERGE in Boston, providers of services to battered women felt that victims who had received services either returned home to face the same destructive environment or left the relationship --

and the batterer found a new victim. To help victims, advocates realized, it was also necessary to address the root cause of their problems -- the perpetrators of violence. Pro-feminist men concerned with sexism in themselves and society felt a particular responsibility for working with male abusers. As a result, some of the first systematic interventions for batterers developed from a pro-feminist perspective.

What Is a Feminist Model of Battering?

Central to the feminist perspective on battering is a gender analysis of power.[According to this view, domestic violence in intimate relationships mirrors the patriarchal organization of society in which men play a dominant role in most social institutions. Along with verbal, emotional, and economic abuse, violence is a means of maintaining male power in the family when men feel their dominance is being threatened. Economic roles have left women dependent on men and unable to escape abusive situations. Men's superior physical strength may enable them to dominate women through violence.

Feminists argue that a consequence of the social arrangement in which men hold the positions of respect and power is that men and women alike devalue the feminine and over-value the masculine.

In the feminist view, batterers feel that they should be in charge of the family: making decisions, laying down rules, disciplining disobedient wives and children, and correcting unsatisfactory performance of duties. Batterers may typically exercise control over the family in nonviolent, coercive ways and only sometimes resort to violence.

Feminist programs attempt to raise consciousness about sex role conditioning and how it constrains men's emotions and behavior (through education around sexism, male privilege, male socialization). Programs with a feminist philosophy present a model of egalitarian relationships along with the benefits of nonviolence and of building relationships based on trust instead of fear . Most feminist approaches support confronting men over their power and control tactics in all domains of the relationship, including verbal and psychological abuse, social isolation, the undermining of the victim's self-confidence, and sexual coercion.

Criticisms of the Feminist Model

Critics have claimed that the feminist perspective overemphasizes socio-cultural factors, such as patriarchal values, to the exclusion of individual factors like growing up abused. Men's behavior in intimate relationships varies across individuals, and broad cultural factors cannot explain this variability. Feminist theory predicts that all men in our society will be abusive, claim its critics, adding that besides being untrue, this theory makes it impossible to predict which men will be violent. To make individual predictions, a model must assign a role to other factors including, but not limited to, psychological deviance.

Other criticisms center not on the validity of feminist explanations of battering but on the translation of that theory into programming. For example, some observers argue that feminist educational interventions are too confrontational in tone and, as a result, are ultimately self-defeating, alienating batterers, increasing their hostility, making them less likely to become engaged in treatment and modeling the aggressive behavior the intervention is seeking to change. It is possible that the goal of the feminist model -- to rebuild the batterer's belief system in order to achieve nonviolence -- may be unnecessarily ambitious and adversarial. Batterers' existing value systems may be more easily fine-tuned to emphasize nonviolence (e.g., building on religious convictions or humanism) without a feminist overlay.

Another concern is that educational programs may effectively transmit information without deterring violent behavior. A study of graduates of Duluth's Domestic Abuse Intervention Project found that completion of the feminist educational intervention had no impact on recidivism after five years.[14] Outcomes such as these point to the need for broader evaluations that examine the impact of systemic factors -- arrest and prosecution policies, court procedures, and probation supervision -- on intervention effectiveness, as well as a clarification of the goals of feminist-based interventions. If deterrence is not a likely outcome of an intervention, other goals, such as punishment, education, behavioral monitoring, or

social change, must be explicitly advanced.

The Family Systems Model

Rather than identifying one individual as the cause of the violence and removing that person from the home or singling that person out for treatment, the family systems model advocates addressing the forces, patterns, and deficits within the family that sustain the problem, working with the family or couple together, and providing support with the goal of keeping the family intact. The target of therapy is the dysfunctional pattern of interaction, not any one individual.

Family systems therapists point out the need of couple members to individually learn interpersonal skills that could promote safety. Family systems theory leads to treatment that involves improving communication and conflict resolution skills. Both members of the couple can develop these skills through therapy that:

- locates the problem in the interaction rather than in the pathology of one individual
- focuses on solving the problem, rather than looking for causes
- accentuates the couple and individual strengths

Criticisms of the Family Systems Model

Both feminist and cognitive-behavioral approaches agree that partner abuse does not involve shared responsibility. Both approaches firmly hold that batterers bear full responsibility for the violence, victims play no causal role, and no one incites violence. Of particular concern to both feminist and cognitive-behavioral proponents is the format of couples counseling: encouraging each partner to discuss problems openly with the other partner can put the victim at risk after the session if the woman expresses complaints.

Furthermore, no frank exchange between counselor and victim concerning the abuse is likely to be possible in the presence of the batterer. Moreover, the format is conducive to victim-blaming.

Finally, if the court prohibits the batterer from contacting the victim, the family systems approach will violate the court order. For these reasons, couples counseling is expressly prohibited in many State standards and guidelines,

Psychological Approaches: A Focus on Individual Problems

Psychological perspectives hold that personality disorders or early experiences of trauma predispose some individuals to violence. Being physically abusive is seen as a symptom of an underlying emotional problem. Parental abuse, rejection, and failure to meet a child's dependence needs can be the psychological source of battering. People with these underlying problems may choose partners with whom they can reenact the dysfunctional relationship they had with their parents. Two forms of batterer intervention have evolved from this perspective: individual and group psychodynamic therapy and cognitive-behavioral group therapy.

Individual and Group Psychodynamic Counseling

Psychoanalysis can be undertaken not only in individual counseling but also in unstructured batterer groups that allow members to explore their life experiences. Psychodynamic therapies involve uncovering the batterer's unconscious problem and resolving it consciously. Proponents of psychodynamic therapy for batterers believe that other interventions are superficial: since other therapies are unable to eliminate the abuser's deep-rooted and unconscious motive for aggression, they cannot end violence but only suppress it temporarily. Long-term change requires exposing and resolving the root cause of the violent behavior.

Criticisms of Psychodynamic Approaches

Critics argue that psychodynamic therapy merely assigns a psychiatric label to people who batter (e.g.,

insecure, narcissistic, dependent, compulsive, or suffering from intermittent explosive disorder) without explaining how they got that way or what can be done about it. The psychodynamic approach has also been criticized for allowing batterers to continue the behavior until the underlying psychological problem is resolved.

Feminists argue that labeling batterers as having psychological problems not only exonerates them in their own eyes but also ignores the cultural acceptability of male dominance in the family and how it serves to keep the batterer in control of his partner. The approach pays attention to internal psychological functions of abuse for the batterer but ignores the interpersonal function of controlling the other person's behavior.

In practice, many psychologically oriented programs have moved away from the original stance that battering is caused primarily by psychological disorder and always indicates an emotional problem. Instead, they have integrated social explanations with psychological explanations. For example, some psychologically oriented theorists propose that it is the combination of a man's low self-esteem and a cultural expectation that men should be dominant and successful that produces a batterer.

Cognitive-Behavioral Model of Change

Cognitive-behavioral therapy is used in the treatment of violent offenders. Whereas the psychoanalytic tradition focuses on psychological disorders based in the unconscious and early childhood experiences, the cognitive-behavioral model focuses on conscious material in the present: therapy is intended to help individuals function better by modifying how they think and behave in current situations. The theory behind cognitive-behavioral batterer interventions maintains that behaviors are learned as a result of positive and negative reinforcements (rewards and punishments) for engaging in particular behaviors under particular circumstances. Behavior is also influenced by how people mentally construct and interpret their environment and experiences -- that is, the way they think about themselves, other people, and their relationships.

Cognitive-behavioral interventions focus on "cognitive restructuring" and skill building. Counselors focus on identifying the chain of events that lead each batterer to violence, starting with beliefs and "self-talk" -- the way we talk to ourselves in our minds. For example, a batterer whose partner is ten minutes late may tell himself, "She's out with her boyfriend" or "She can't be trusted." The programs attempt to restructure the beliefs and "self-talk" that lead to violence; for example, the programs help batterers to analyze the thought patterns underlying violent reactions (e.g., "Dinner isn't ready because my wife doesn't respect me") and learn new ways of understanding situations that trigger violence (e.g., "Dinner isn't ready because my wife had a busy day"). The program teaches nonviolent alternative behaviors, such as conflict-resolution tactics, relaxation techniques, and communication skills.

Criticism of the Cognitive- Behavioral Models

The feminist perspective criticizes the cognitive- behavioral approach for failing to explain why many men with thought patterns or skills deficits that allegedly explain their domestic violence are not violent in other relationships, how culture or subcultures influence patterns of violence, and why some men continue to abuse women even when the behavior is not rewarded. These criticisms are usually moot because most cognitive-behavioral programs integrate the feminist analysis of domestic violence, both in the cognitive component.

Compatibility of the Models With Criminal Justice Goals

The feminist educational approach to batterer intervention is theoretically more compatible with a criminal justice perspective than either the family systems or psychotherapeutic approaches in several respects.

- The feminist educational view of domestic violence is that the behavior is criminal, not just the result of faulty couple interactions or mental illness.

- The feminist educational view is that consequences are appropriate. By contrast, the psychotherapeutic explanation results in a treatment approach that is designed to modify the inner emotional life of the batterer through insight and possibly medication. Changing the inner person and prescribing medication to alter behavior may be considered by some to be beyond the scope of a criminal justice intervention.
- The primary goal of feminist educational programs is to hold batterers responsible for their violence. While most psychological programs also make this claim, feminists believe that the psychotherapeutic view of batterers as victims of childhood trauma or other mistreatment undercuts a program's ability to hold batterers responsible. The family systems approach -- unlike the criminal justice system -- holds the victim as well as the batterer accountable.
- The explicit goal of feminist educational approaches is to end the abusive behavior rather than to heal the batterer (the psychotherapeutic goal) or to improve relationships (the family systems goal).

A case can be made, however, that psychological interventions can also meet the needs of the criminal justice system. The aim of the criminal justice system in sending men to batterer programs is to reduce recidivism; for this to happen, the intervention has to be effective. While advocates of the feminist educational model criticize the psychotherapeutic model for failing to hold batterers responsible for their behavior, advocates of the psychotherapeutic approach respond that educational interventions are not successful in deterring or rehabilitating batterers because they are too short and superficial and do not address the needs of batterers with severe mental illness, who may comprise up to 25 percent of all batterers.

Indeed, the "confrontational" and didactic process of the feminist model -- as well as the feminist rhetoric in which it is framed -- may alienate the batterer and increase his hostility and resistance.

While the narrow treatment goals of the strictly educational feminist programs are compatible with the criminal justice view -- stopping the abusive behavior as expeditiously as possible and holding the batterer responsible -- the feminist theory of domestic violence also has broad social goals that may be seen as going beyond the purview of the criminal justice system.

Because feminist theory locates the cause of domestic violence in social structures and the organization of society, social change may be seen as the ultimate goal of the curriculums. In a sense, though, even this broad goal is consistent with a criminal justice agenda in that it suggests that broad-based community education and a coordinated community response are necessary for preventing domestic violence. In contrast, it is difficult to identify a broad prevention strategy that follows from either the individualistic psychotherapeutic theory of domestic violence or the family systems model.

Finally, some practitioners and criminal justice professionals are beginning to regard any form of batterer intervention as a proxy for intensive probation. While the curriculum may not deter re-offenses over time, at least during program participation batterers are being monitored closely, and their victims are receiving at least minimal attention and referrals. This heightened vigilance with regard to the batterer's behavior and the victim's welfare is compatible with criminal justice goals.

Conclusion: Multidimensional Models Dominate the Field

Many practitioners accept that there are compelling features in more than one theoretical model. In practice, regardless of their primary perspective, most programs have adopted some tenets of the feminist model. For example, they view sexual inequality and masculine role expectations of dominance as core issues to address -- along with cognitive-behavioral techniques for modifying behavior -- and they teach batterers to use "time-outs" (a behavioral technique for controlling emotional outbursts). Longer-term programs may progress through the feminist and cognitive models in stages, and some even progress to a psychotherapeutic group process model for aftercare. These programs have a brief initial phase using a feminist educational model to tackle denial of responsibility, a longer second phase teaching cognitive-

behavioral techniques for skill-building, and a third phase delving into individual psychological issues in an unstructured format for those men identified as having psychological problems contributing to battering. Other programs blend treatment modalities and approaches by combining individual, group, and couples treatment sequentially over an extended period of two to three years.

Programs may also use different models or materials to accommodate the special needs of specific types of batterers, most commonly substance abusers, African Americans, Asians, Latinos, recent immigrants, female offenders, gay and lesbian batterers, or batterers with poor literacy skills.

Some practitioners may resist incorporating consideration of individual psychology and cultural differences in interventions because they are concerned that the individual approach will eclipse consideration of the sociological factors emphasized by the prevailing feminist model. However, the critical issue from a criminal justice perspective is simply "what works"; if mixed-model interventions that incorporate psychotherapeutic elements or cultural competence are shown to be more effective in retaining and engaging batterers in treatment, questions of theory are likely to become secondary.

Key Points

Most interventions employ a mixture of theories in their curriculums, the most common of which is a psycho-educational model that encourages pro-feminist attitude change while building interpersonal skills using cognitive-behavioral techniques.

Three categories of theories of domestic violence dominate the field. Each locates the cause of domestic violence differently, and each theory leads practitioners to employ different approaches to batterer intervention:

- **Society and Culture.** Social and cultural theories attribute the problem to social structure and cultural norms and values that endorse or tolerate the use of violence by men against women partners. The feminist model of intervention educates men concerning the impact of these social and cultural norms and attempts to resocialize them emphasizing nonviolence and equality in relationships.
- **The Family.** Family-based theories of domestic violence focus on the structure of the family, interpersonal interactions within the family, and the social isolation of families. The family systems model of intervention focuses on developing healthy communication and conflict management skills with a goal of family preservation and may use couples therapy, if the situation is not a safety threat.
- **The Individual.** Psychological theories attribute domestic violence to personality disorders, the batterer's social environment during childhood, biological disposition, or attachment disorders. Psychotherapeutic interventions target individual problems and/or build cognitive skills to help the batterer control violent behaviors.

Both feminist educational and cognitive-behavioral interventions can be compatible with the goals of the criminal justice system -- protecting the victim as well as rehabilitating the offender. However, feminist educational programs offer some advantages. By contrast, family systems interventions conflict with criminal justice goals by failing to identify a victim and a perpetrator, an identification the law requires.

Controversial Approaches to Batterer Intervention

The following approaches, although commonly used, are controversial. Criminal justice professionals referring batterers to programs that feature these techniques must be careful to learn how these approaches are being integrated into the programs and be wary of programs using these methods as their primary intervention.

Anger Management

While some researchers have suggested that a small percentage of battering may be attributable to a psychological disorder involving uncontrollable rage, the "anger management" model attributes battering to out-of-control (rather than uncontrollable) anger. Anger management programs offer a short-term intervention that teaches batterers to recognize the physiological signs of anger and to then implement relaxation techniques to defuse the anger. The intervention may also teach stress management and communication skills. Many batterer treatment providers disavow the single-focus "anger management" treatment, instead incorporating anger management as one component of their intervention, sometimes under another name.

Critics have raised several concerns about the anger management approach -- even as a component of more comprehensive treatment:

Anger management programs address a single cause of battering, ignoring other, perhaps -- more profound, causes.

According to the feminist model, although they may claim to feel out of control, batterers -- are not out of control: battering is a decision, a choice. The social learning model adds that -- batterers choose to use or threaten violence because of its effectiveness in controlling their partners. The violence persists because it is rewarded.

Anger management programs teach batterers nonviolent ways to control their partners. If the underlying issue of batterer control of the victim is not addressed, critics maintain, men will misuse the techniques used to "control" anger, stress management and communication skills, to continue to control the victim. For example, a batterer could refuse his childcare responsibilities on the grounds that it is stressful.

According to "misattribution of arousal" theory, men learn to label all strong emotional states as anger when they are, in fact, experiencing feelings of betrayal or hurt. Interventions therefore need to focus on identifying the underlying emotion men are feeling in situations in which they batter rather than on means of controlling the mislabeled anger.

Finally, some practitioners are concerned that any short-term, single-focus approach can be dangerous because it gives victims, judges, and batterers the illusion that the problem has been solved. Some practitioners feel that the availability of brief, inexpensive anger management programs even undermines the credibility of the more difficult, lengthy, and expensive treatments other programs provide. One-time "Saturday Afternoon Special"- style anger management programs arouse particular concern among practitioners who feel that such short-term programs trivialize the severity of the problem in the eyes of the batterer and are unlikely to have any deterrent effect.

Individual and Couples Counseling

Many practitioners disapprove of -- and at least 20 State standards and guidelines expressly prohibit -- couples counseling for batterers. In addition, a number of program directors disapprove of individual counseling as the sole intervention for battering. Group work is considered important in helping abusers to overcome their denial by hearing other men acknowledge and deal with their behavior, and to break the isolation that is considered part of the syndrome of abuse.

Although systematic research comparing couples and group interventions has not been conducted, anecdotal evidence and the beliefs of providers (many of whom serve on committees to draft or approve State standards or guidelines) have limited the utilization of couples therapy for domestic violence. The practitioners' disapproval is based on a belief that victims of abuse are intimidated and cannot fully participate in therapy in the presence of their abusers. If victims do reveal the batterer's violence or disclose other problems, they face the threat of reprisal.

Self-Help Groups: Batterers Anonymous

Self-help batterer groups are modeled on Alcoholics Anonymous and Parents Anonymous. Member-run support groups are facilitated by former batterers who have been nonviolent for at least a year.[32] Although there are some ground rules and facilitators may introduce specific topics, the approach is unstructured, with members setting the agenda, usually addressing their personal concerns.

Self-help or support groups are an accepted model of follow-up for batterers who have completed a program and want continued support to prevent relapse, to continue the change process, or to have a place to address ongoing problems. Self-help groups are controversial as an initial intervention, however, because it is questionable whether former batterers -- especially those who have been nonviolent for only a year -- are qualified to conduct groups, unless they have been extensively involved with a program, have been trained, and are supervised. In addition, facilitators tend to use an aggressive, even belligerent, style of confrontation that more traditional programs view as inappropriate modeling of antagonistic behavior that borders on abuse. By contrast, other professionals are concerned that support groups run by former batterers may be insufficiently confrontational about members' excuses for violence and too supportive of batterers' hostility toward women.