Reclaiming the Narrative of Batterer Interventions Programs*

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Plan for Presentation

- Make a case for a contextualized and systemic perspective in evaluating the effectiveness of programs for male perpetrators of DV
- Review the evolving narrative about BIPs in the US
- Go over the accumulated research evidence on the effectiveness of BIP interventions
- Present ideas about what a more comprehensive and dynamic systemic response to domestic violence may look like
- Discuss the Project Mirabal--an innovative multidimensional study of "Domestic Violence Perpetrator Programmes" in the UK
Truth-O-Meter Ratings

The goal of the Truth-O-Meter is to reflect the relative accuracy of a statement.
The meter has six ratings, in decreasing level of truthfulness:

TRUE – The statement is accurate and there’s nothing significant missing.
MOSTLY TRUE – The statement is accurate but needs clarification or additional information.
HALF TRUE – The statement is partially accurate but leaves out important details or takes things out of context.
MOSTLY FALSE – The statement contains an element of truth but ignores critical facts that would give a different impression.
FALSE – The statement is not accurate.
PANTS ON FIRE – The statement is not accurate and makes a ridiculous claim.
Statement #1: Personal Context

Most people in this audience believe that BIPs are so important for the safety and quality of their lives that they would be willing to set aside 1% to 5% of their monthly income to support the proper functioning of BIPs in their communities.

- TRUE
- MOSTLY TRUE
- HALF TRUE
- MOSTLY FALSE
- FALSE
- PANTS ON FIRE
Truth-O-Meter Ratings

TRUE
MOSTLY TRUE
HALF TRUE
MOSTLY FALSE
FALSE
✓ PANTS ON FIRE
Statement #2: Relational Context

Most partners in intimate relationships experience low to moderate levels of distress.

- TRUE
- MOSTLY TRUE
- HALF TRUE
- MOSTLY FALSE
- FALSE
- PANTS ON FIRE
Relational Context: High Levels of Distress in Intimate Relationships

- In the US-approx. 90 to 96% of adults will marry
- Approx. 40-45% of marriages end in divorce
- Approx. 25% of couples divorces within 3 years
- Approx. 80% will remarry
- About 60% of remarriages end in divorce
Domestic Violence in the U.S.A.

- 1 out of 6 American households reports some form of physical violence between husbands and wives (13% of all marriages)
- 25 to 30% of married women in the US experience some form of spouse abuse at some point in their marriage (approx. 15 million women have experienced violence in their marriage)
- 13% or about 5 million women have been chronically and severely abused by husbands
Domestic Violence in the U.S.A.

- 40% of newly married couples report verbal aggression against partner (verbal to physical violence progression)
- Rates of violence in dating relationships range from 9% to 69% among young dating couples
Statement #2: Relational Context

Most partners in intimate relationships experience low to moderate levels of distress.
Truth-O-Meter Ratings

TRUE
MOSTLY TRUE
HALF TRUE
✓ MOSTLY FALSE
FALSE
PANTS ON FIRE
Statement #3: Social Context

Levels of economic inequality at national and state levels have a weak relationship to individual health and social problems.

TRUE
MOSTLY TRUE
HALF TRUE
MOSTLY FALSE
FALSE
PANTS ON FIRE
Social Context of Relevance: Economic Inequality & Violence

Homicide rates are higher in more unequal rich countries

Social Context of Relevance: Economic Inequality & Drug Use

Drug use is more common in more unequal countries

Index includes use of:
- Opiates
- Cocaine
- Cannabis
- Ecstasy
- Amphetamines

Social Context of Relevance:
Economic Inequality & Mental Illness

The prevalence of mental illness is higher in more unequal rich countries.

Social Context of Relevance: Economic Inequality & Social Problems

Health and social problems are worse in more unequal countries.

Index includes:
- Life expectancy
- Maths & literacy
- Infant mortality
- Homicides
- Imprisonment
- Teenage births
- Trust
- Obesity
- Mental illness (inc. drug and alcohol addiction)
- Social mobility

Statement #3: Social Context

Levels of economic inequality at national and state levels have a weak relationship to individual health and social problems.
Truth-O-Meter Ratings

- TRUE
- MOSTLY TRUE
- HALF TRUE
- MOSTLY FALSE
- ✓ FALSE
- PANTS ON FIRE
Large numbers of people are having a very difficult time sustaining harmonious relationships and honoring their commitments to loved ones. The amount of distress and violence in intimate relationships and the insidious impact of economic inequality in the well-being of societies suggest that there are important contextual and systemic forces at play. Are the people we serve immune to these forces? Don’t lose sight of this fact when setting up expectations about the effectiveness of interventions with male perpetrators of domestic violence.
Statement #4: Political Context

Our elected officials are committed to supporting the well-being of our people and promoting the conditions under which harmonious intimate relationships can flourish.

- TRUE
- MOSTLY TRUE
- HALF TRUE
- MOSTLY FALSE
- FALSE
- PANTS ON FIRE
Political Context of Relevance:
Allocation of financial resources in U.S.

CONTINUUM OF SERVICES

Wellness Promotion & Prevention
Prevention
Remedial Treatment

1%-3%
97%-99%
Statement #4: Political Context

Our elected officials are committed to supporting the well-being of our people and promoting the conditions under which harmonious intimate relationships can flourish.
Truth-O-Meter Ratings

TRUE
MOSTLY TRUE
HALF TRUE
✓ MOSTLY FALSE
FALSE
PANTS ON FIRE
Who is responsible for addressing advancing the conditions of justice needed for our individual, relational and community well-being?

When it comes to DV we should ask...
US-Collective Ambivalence

- Government officials?
- Criminal justice system?
- Shelters for battered women?
- National/state coalitions?
- Batterer intervention programs?
- Nonprofit organizations?
- Citizens?
- Researchers?
Collective Ambivalence & Blame

- In the absence of a clearly articulated systemic response to DV, and given the persistence of DV in our communities, much too often we end up blaming intervention programs for men for our collective failure to protect women and children from the violence perpetrated by men.

- How did we get here? How have BIPs become such an easy target to blame?
Historical Context of Relevance: The Shifting Conversation About BIPs

- Value-Based Centered Conversation: Late 1970’s & early 1980’s
  - Men’s programs (part of social movement, volunteer men; slow growth)
  - Small part of an emerging systemic response to DV
  - Guided by commitments to social justice, gender equity, egalitarianism, and social change
  - This initial group of men knew that there were important social forces at play that needed to be addressed and took a leadership role to do so.
Historical Context of Relevance: The Shifting Conversation About BIPs

- Crime-Based Centered Conversation: 1990’s
  - Criminalization of violence against women in intimate relationships → Explosion in # of programs for men
  - BIP’s became an important component of the criminal justice response to DV
  - Favored adoption of structured curriculum-based behaviorally-oriented programs over other alternatives
  - Expansion of services came along with very high expectations for success as defined by the criminal justice system (# of men served, cost of services, recidivism rates)
  - Commitments to social justice, gender equity, and social change became secondary—background music
Evidence-Based Centered Conversation: 2000’s

- Rates of DV remain reprehensibly high, rates of violent crimes going down, number of privatized prisons going up, and the mass incarceration of black and brown men in full force
- Push to apply biomedical criteria and experimental methodology to the evaluation of the effectiveness of BIP’s and to define evidence this way
  - Randomized assignment of participants to groups
  - Reliance on meta-analyses as convenient bottom-line verdict on programs and policies
Evidence-Based Centered Conversation

- A noticeable trend towards turning group interventions with perpetrators of intimate partner abuse into forms of therapy focused on the emotional well-being of clients
- Predictable expansion efforts by mental health professionals into a perceived new market
- Commitments to social justice, gender equity, and social change are now “elevator music”
Call for Evidence-Based Practice & Policy

- Everywhere: Education, child welfare, juvenile justice, youth programs, health care

- Why?
  - Persistent gap between what is known and the policies and practices in place (i.e. We know more than what implemented practices and policies reflect.)
  - Era of accountability, finite resources
  - Pressure to support only programs proven to work
Time for another truth check...
Statement #5

Scientists agree that “evidence-based” means that evidence is generated through randomized clinical trials (i.e. experiments).

- TRUE
- MOSTLY TRUE
- HALF TRUE
- MOSTLY FALSE
- FALSE
- PANTS ON FIRE
What does “evidence-based” mean?

- “The definition most aggressive promoted today (the gold standard) holds that approaches to solving social problems should be considered evidence-based only when they have been found to be effective by research methods involving random assignment of participants to experimental and control groups” (Schorr, 2009, parenthesis added).
“Criminological [experimental] randomists have overreached in their claims and generated their own folklores, or what I think are more appropriately referred to as myths. Experimental myths are more than just stories or part of a tradition—they have become actively institutionalized in the routine workings of criminology”.

“[E]xperiments are not the gold standard simply because there is no free-standing gold standard”.

Robert Sampson, Past President, American Society of Criminology (2010)
“Even the field of medicine, which gave randomized clinical trials their heyday, has outgrown their constraints. The Roundtable on Evidence-Based Medicine of the Institute of Medicine called for a re-examination of what constitutes evidence and suggested that randomized clinical trials should not be considered the goal standard” (Shorr, 2009).
<table>
<thead>
<tr>
<th>ATTRIBUTES OF EFFECTIVE COMPLEX INTERVENTIONS</th>
<th>ATTRIBUTES ASSOCIATED WITH &quot;GOLD STANDARD&quot; EVALUATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Significant front-line flexibility exists within established quality standards</td>
<td>Intervention is standardized, discretion minimized</td>
</tr>
<tr>
<td>Intervention evolves in response to experience and changing conditions</td>
<td>Intervention remains constant over time</td>
</tr>
<tr>
<td>Intervention/program design reflects local strengths, needs, preferences</td>
<td>Intervention is centrally designed and uniform across sites</td>
</tr>
<tr>
<td>Intake/recruitment into program falls under local control, within broad parameters</td>
<td>Intake is centrally designed to permit random assignment</td>
</tr>
<tr>
<td>Multiple components respond to children in family, peer, and neighborhood contexts</td>
<td>Single-factor, single-sector interventions</td>
</tr>
<tr>
<td>Interactive components take into account the interrelationships among health, social, educational needs</td>
<td>Components are clearly separable</td>
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<td>Training and setting emphasize continuing, respectful relationships and other hard-to-measure attributes</td>
<td>Focus on readily measured inputs</td>
</tr>
<tr>
<td>Implementers believe in the intervention and go beyond their job description to respond to clients</td>
<td>Implementation is value-free</td>
</tr>
</tbody>
</table>

Lisbeth B. Schorr, Pathways To Outcomes.org, 2009
Scientists agree that “evidence-based” means that evidence is generated through randomized clinical trials (i.e. experiments).
Truth-O-Meter Ratings

TRUE
MOSTLY TRUE
HALF TRUE
MOSTLY FALSE
✓ FALSE
PANTS ON FIRE
More Expansive and Ecologically Valid Approach to Evidence-Based Practice

There is a growing consensus that a more inclusive approach allows organizations and individuals—on the basis of research, theory, and experience—to determine practices most likely to help them achieve their goals be they proven programs, promising practices, capacity building, or the development of innovative efforts.
Evidence-Based Medicine
Evidence-Based Social Work Practice

Source: Adapted from Haynes, Devereaux, and Guyatt 2002.

Evidence-Based Public Health

1. Community assessment
2. Quantifying the issue
3. Developing a concise statement of the issue
4. Determining what is known through the scientific literature
5. Developing and prioritizing program and policy options
6. Developing an action plan and implementing interventions
7. Evaluating the program or policy

Transdisciplinary Evidence-Based Practice Model
Council on Evidence-Based Behavioral Practice, NIH Office of Behavioral and Social Sciences Research

Time for another truth check...
Statement #6

BIPs are “evidence-based practice”.

TRUE
MOSTLY TRUE
HALF TRUE
MOSTLY FALSE
FALSE
PANTS ON FIRE
BIPs as Evidence-Based Practice

- Evidence-based practices are rooted in evidence generated through research and practice.
- EB process in BIPs skewed towards the practice side:
  - definition of problem -> design of intervention -> identification of limitations -> revision of the problem -> modification of interventions -> identification of limitations -> ....
- BIPs as consumers of research have done a poor job articulating the research basis of their work.
Statement #6

BIPs are “evidence-based practice”.

Truth-O-Meter Ratings

TRUE
MOSTLY TRUE
✓ HALF TRUE
MOSTLY FALSE
FALSE
PANTS ON FIRE
Statement #6

BIPs do not work—there is no evidence that men who attend programs do better than those who don’t.

TRUE
MOSTLY TRUE
HALF TRUE
MOSTLY FALSE
FALSE
PANTS ON FIRE
The accumulated empirical literature (outcome studies, quasi-experimental evaluations, and experiments) shows that about $2/3$ of men who complete BIPs remain nonviolent following treatment.

The accumulated empirical literature also shows:

- **Protective orders** are an effective form of violence deterrence for more than half of the men;
- About $2/3$ of all men arrested for domestic violence offences do not re-assault within six months.
- **Coordinated community response networks** enhance the efficacy of various interventions and further reduce IPV recidivism.

The research also suggests that the more CCRs components are present the lower the violence recidivism rates of men who complete BIPs.
Follow up time: 4 months to 11 years

Recidivism rate for completers: 0% to 18%
  (average 9%)

Recidivism rate for dropouts: 10% to 40%
  (average 26%)

Aldarondo, 2010
Naturalistic Quasi-Experimental Evaluations of BIPs: Victims Reports

- Follow up time: 5 months to 1 year
- Recidivism rate for completers: 26% to 41%
  (average 32%)
- Recidivism rate for dropouts: 40% to 62%
  (average 46%)

Aldarondo, 2010

- 4 sites with range in systems
  - 3-mo. Program & court reviews
  - 9- mo. Program & probation supervision
- 4-year longitudinal follow-up (every mos.)
- 850 program participants plus female partners
- 70% response rate for 30 mo. FU; 60% for 4 yrs.
- 12,000 interviews overall
Main Findings

- 30% re-assault by 15 mos., 42% over 4 yrs.
- De-escalation of re-assault over time—80% No re-assault, previous year at 30 mos.
- 20% subgroup who repeatedly re-assaulted (5% overall unrelenting and very severe)
- Influence of court response and other services
Warning: Major Issues

- About 20% were repeatedly violent throughout follow-up
- Lack of response to “repeaters”
- Low service contact or additional protections for women partners
- Need for identification and containment of repeaters (on-going risk management)
Statement #6

BIPs do not work—there is no evidence that men who attend programs do better than those who don’t.
What Can You Do to Enhance the Effectiveness of Interventions with Men who Batter?

- Recognize both the benefits and limitations of existing interventions
- Improve our ability to engage perpetrators of dv in the change process (ind. treatment planning, SA, social barriers)
- Improve offender compliance through judicial review
- Develop appropriate responses to “repeaters”
Enhancing the Effectiveness of Interventions with Men who Batter

- Integrate practices conceived with an appreciation of the needs of specific cultural and ethnic groups
- Encourage and support judicial leadership in integrating legal and social strategies and services into CCRs
- Recalibrate expectations of BIPs
The Evolving Narrative of BIPs

- Rekindle commitment to social justice, gender equity, egalitarianism, and social change
- Assert and expand BIPs’ leadership role in the systemic response to IPV
- Make the generation of knowledge and documentation of relevant evidence an essential component of BIPs
- Become “BIP Practitioner-Researchers”
Thank you!

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