

Promoting Successful Outcomes with Domestic Violence Offenders

Reentry in the State of Connecticut:
Partners in Progress
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What is Domestic Violence?

- The Centers for Disease Control (CDC) defines intimate partner violence as “abuse that happens between two people in a close relationship.”
- The National Coalition Against Domestic Violence (NCADV) defines intimate partner violence as the “willful intimidation, physical assault, battery, sexual assault and/or other abusive behavior perpetrated by an intimate partner against another.”

(CDC, 2006; NACDV, 2007)
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Characteristics of Domestic Violence

- Includes physical abuse, sexual abuse, threats, and/or emotional abuse
- Occurs between the hours of 6:00 p.m. and 6:00 a.m.
- 2/3 of DV incidents occur in the home
- Presence of drugs and alcohol
- More often in rented housing
- Within families with lower annual incomes

(CDC, 2006; BJA, 2007)
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State Domestic Violence Laws

From the NCADV Fact Sheet (2007):

- States differ on the type of relationship that qualifies under DV laws.
- Most states require the victim and perpetrator to be current or former spouses, living together, or have a child in common.
- A significant number of states include current or former dating relationships in domestic violence laws.
- A few states specifically exclude same-sex IPV.

(NCADV, 2007)
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Connecticut's DV Law

- Connecticut law defines “family violence” as an incident between family or household members that either causes physical injury or creates fear that physical injury is about to occur. Family violence is not a separate criminal offense.
 - Crimes that may be charged as a family violence offense include such crimes as assault, kidnapping, and sexual assault.
 - Verbal abuse or argument is not considered family violence unless there is present danger and the likelihood that physical violence will occur.
 - The discipline of minor children by parents or guardians is not considered family violence unless abuse occurs.
 - Those who engage in violence against a spouse or family member can be charged with a misdemeanor or a felony depending on the facts of the case.

(From: Connecticut Judicial Branch Law Libraries, 2009)

Connecticut's DV Law

- “Family or household members” are spouses, former spouses, parents and their children, people age 18 or older related by blood or marriage, people age 16 or older either living together or who have lived together, and people who have a child together whether or not they are or have been married or have lived together (CGS § 46b-38a).

(From: Connecticut Judicial Branch Law Libraries, 2009)

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Risk Factors Found to be Associated with Higher Rates of DV

- Drug and alcohol abuse
- Childhood exposure or victim of violence
- Unemployed
- Jealous, controlling, and/or verbally abusive
- Unmarried but co-habiting
- African-American couple
- Woman higher educated than male partner
- Male different race/ethnicity than female partner

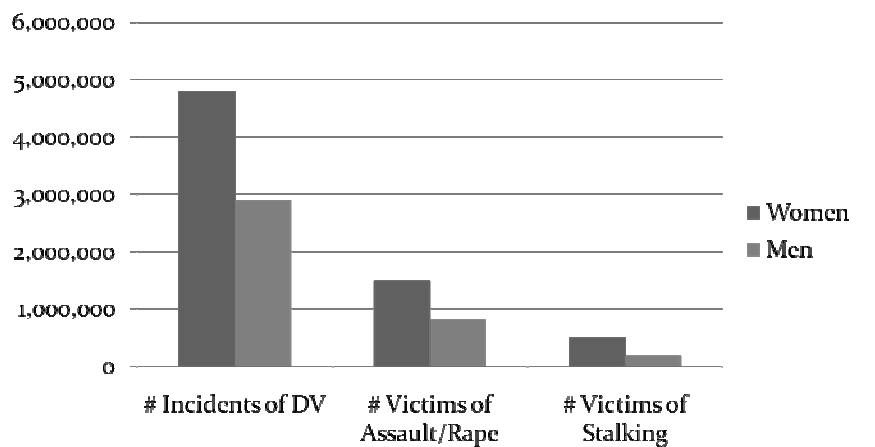
(CDC, 2006; Tjaden & Thoennes, 2000)
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The Scope of Domestic Violence

- 1 in 4 women will experience DV in her lifetime
 - 1 in 14 men
- 1.3 million women are physically assaulted or raped by an IP each year
 - 800,000 men
- 500,000 women are stalked by an IP annually
 - 185,000 men
- 4.8 million incidents of IP assaults and rapes each year on women
 - 2.9 million incidents on men

(NCADV, 2007; Tjaden & Thoennes, 2000; CDC, 2006)
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Domestic Violence Annually



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(Tjaden & Thoennes, 2000)

Women Comprise the Majority of Victims

- 85% of victims are female
- 20 – 24 year old women are at greatest risk for nonfatal IP violence
 - For African American women, the risk begins at age 16
- There are higher rates of DV among non-white women, including African-Americans and American Indian/Alaskan Natives
 - May be at least partially accounted for by economic or cultural differences – needs further study
- Women who are separated report higher rates of DV (vs. married, single, or divorced)

(NCADV, 2007; Bobbitt, et al., 2006; Tjaden & Thoennes, 2000; BJA, 2007)
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More about Female Victims

- Females are more likely than males to be injured from IP violence
- Females are more likely to be murdered by an intimate partner than males
- African-American females are twice as likely to be murdered from an IP than white females
- Females are more likely than males to experience a higher number of assaults from the same partner

(Bobbitt, et al., 2006; Tjaden & Thoennes, 2000; BJA, 2007)
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Fatalities as a Result of DV

Fatal DV (< 1% of DV)

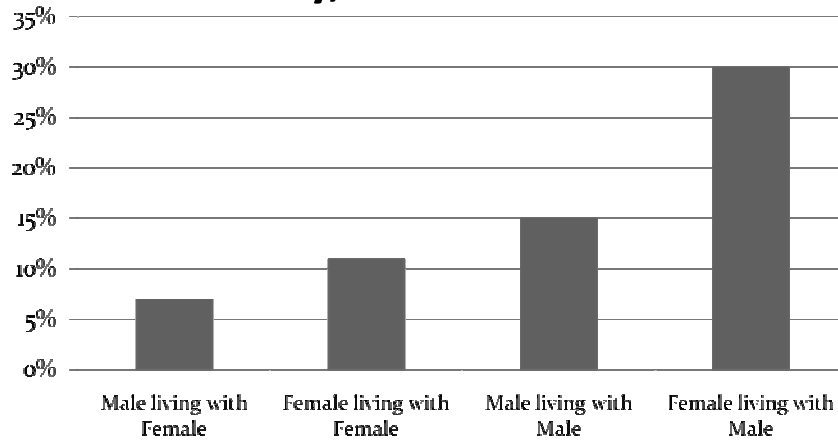
- 30% of all female homicides were committed by IP's
 - 1,181 female victims of fatal DV in 2005
- 5% of all male homicides were committed by IP's
 - 329 male victims of fatal DV in 2005

Non-Fatal DV (99% of DV)

- 1/3 of victims report being physically attacked
 - e.g., being hit, slapped, or knocked down, grabbed, held, or tripped – or less often – being raped, sexually assaulted, or attacked with a weapon.
- 2/3 of victims report they were threatened with attack

(BJA, 2007)
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Percentage Reporting Victimization in NVAW Survey, 2000



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(Tjaden & Thoennes, 2000)

Who are the Perpetrators of DV?

- 96% of perpetrators are male
 - More research needed; however, preliminary research suggests that men are more likely to be the perpetrators in both heterosexual and homosexual relationships
- Close in age to the victim
- Same race as the victim

(Tjaden & Thoennes, 2000; BJA, 2007)
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What Do We Know about Perpetrators of DV and their Victims in Connecticut?

- In FY 2007/08 there were 14,856 inmates in CT's prisons; 2,059 (13.8%) had DV sub-codes.
- During the same time period:
 - 671 inmates completed DV programming
 - 748 were on the waiting list

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What Do We Know about Perpetrators of DV and their Victims in Connecticut?

- Racial Breakdown of DV Program Completers
 - 42% are Black
 - 31% are White
 - 25% are Hispanic
- Program completion rates are similar across race

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The Effects of Domestic Violence

- Victims of IPV and DV are more likely to smoke, abuse substances and engage in risky sexual behavior.
- IPV and DV often results in physical injury, psychological trauma, and death.
- IPV and DV can be intergenerational and have long lasting impact.
- Children who witness DV are more likely to perpetrate violent acts.
- The costs of DV exceed \$5.8 billion each year; \$4.1 billion for direct medical and mental health care.

(CDC, 2006; NACDV, 2007)

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Some Ongoing Challenges

- Not enough is known about offenders who commit domestic violence.
 - IPV is underreported to police, friends, and family (BJA, 2007)
- There is little research about the effectiveness of domestic violence programs (see Aos et al., 2006)
- What research exists suggests that batterer's intervention and anger management programs may not be effective in reducing domestic violence behavior.
- The stakes are high!

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What Does the Research Suggest about What *MAY* Work to Reduce Violence among DV Perpetrators?

- Risk assessment tools used in combination with specialized tools may assist in targeting appropriate offenders – don't mix high risk offenders with medium and low risk offenders (Bechtel & Woodward, 2008; Woodward & Bechtel, 2008)
- Emerging research suggests there may be different DV typologies and levels of risk which would suggest the need for varying levels of treatment and dosage (not "one size fits all" programming)
- Multi-model approaches that include: cognitively based batterers' intervention and anger management programs in combination with substance abuse treatment (where indicated) is more effective
- "Finding the hook" for offenders seems to yield a better treatment outcome: those who have children and are invested in seeing them, those who are invested in their current relationship, those who are more naturally prosocial (marital status, employment, residential stability)

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What are Other States Doing to Promote Successful Outcomes for DV Offenders?

- According to Woodward & Bechtel (2008), the 3 most common community-based batterers' intervention programs include:
 1. Duluth, Duluth, MN
 2. EMERGE, Denver, CO (from 36 weeks up to 5 years)
 3. AMEND, Quincy, MA (up to 48 weeks with additional treatment recommended for about 1/3rd of participants)
- Programs are cognitively-based, focus on pattern of behavior, relationship issues; research findings are mixed
- Those states we surveyed have some type of institutionally-based batterers' intervention, anger management and/or substance abuse treatment programming followed by community-based programming
- Some states have established statewide management boards to promulgate program standard and/or certify providers:
 - RI Batterers' Intervention Oversight Committee
 - CO Domestic Violence Offender Management Board

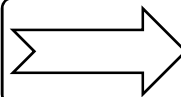
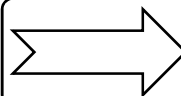
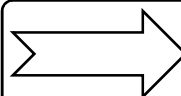
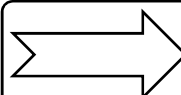
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What are Other States Doing to Promote Successful Outcomes for DV Offenders?

- Many states collaborate with partners
 - There are statewide coalitions on domestic violence and/or sexual violence in every state in the country; 55 in all
 - Other partners: corrections, parole, courts, child welfare, treatment providers, employers, victim advocates, families
- Some states have specialized probation and/or parole caseloads (for example, RI, CT, NH)

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Implications of the State of our Knowledge about Domestic Violence Offenders

-  Apply the principles of evidence-based practices
-  Apply the principles of effective reentry practices
-  Adopt a victim-centered approach
-  Implement research strategies to inform DV offender management strategies

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Apply the Principles of Evidence-based Practices

- Use dynamic risk/needs assessment (like LSI-R coupled with DV specific like SARA)
- Target higher risk offenders for interventions
- Do not mix low risk offenders with medium and high risk offenders
- Provide varying levels of interventions based on risk
- Use multi-model strategies
- Plan for ongoing research strategies to increase knowledge about perpetrators and what works to reduce their risk of re-offense

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Apply the Principles of Effective Reentry Practices

- Assure a seamless continuum of management, supervision and interventions
- Identify and collaborate with partners
- Establish a collaborative case management approach

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Adopt a Victim-Centered Approach

- Work with state and/or local DV coalitions to assure a victim-centered approach (e.g., CCADV)
- Refer victims and families to appropriate services
- Help victims develop safety plans
- Notify victims about offenders' release, supervision plan and conditions

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And most important of all...

Implement Research Strategies to Inform DV Offender Management Strategies

- To learn more about what may work to reduce recidivism among DV offenders
- To contribute to the national/international research
- To improve/enhance validity of assessment tools and intervention

CT DOC is currently collecting data on the DV population to determine DV offender typologies (Dr. Patrick Hynes)

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Questions and Answers

- Questions?
- Implications for reentry?
- Recommendations stemming from implications?

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Resources

- Aos, S., Miller, M. & Drake, E. (2006). Evidence-Based Adult Corrections Programs: What Works and What Does Not. Olympia, WA: Washington State Institute for Public Policy. <http://www.wsipp.wa.gov/rptfiles/06-01-1201.pdf>
- Bechtel, K. & Woodward, W. (2008). Overview of Domestic Violence (DV) Risk Assessment Instruments (Frequently Asked Questions). Washington, DC: National Institute of Corrections. <http://nicic.org/Downloads/PDF/Library/023364.pdf>
- Bobbitt, M., Campbell, R., & Tate, G. (2006). Safe Return: Working Toward Preventing Domestic Violence when Men Return from Prison. New York, NY: Vera Institute of Justice. http://www.vera.org/publication_pdf/368_661.pdf

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<http://www.ojp.usdoj.gov/bjs/intimate/ipv.htm>

CDC Centers for Disease Control and Prevention(2006).

Understanding Intimate Partner Violence: Fact Sheet, 2006.

http://www.cdc.gov/ncipc/dvp/ipv_factsheet.pdf

Connecticut Coalition Against Domestic Violence (CCADV)

<http://www.ctcadv.org/tabid/205/default.aspx>

Connecticut Judicial Branch Law Libraries (2009). Domestic Violence in Connecticut.

http://www.jud.state.ct.us/lawlib/Notebooks/Pathfinders/DomesticViolence/domviolence.htm#app_d

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Connecticut Sexual Assault Crisis Services (CONNSACS)

<http://www.connsacs.org/index.htm>

NCADV National Coalition Against Domestic Violence(2007).

Domestic Violence Facts.

[http://www.ncadv.org/files/DomesticViolenceFactSheet\(National\).pdf](http://www.ncadv.org/files/DomesticViolenceFactSheet(National).pdf)

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