

Tri-County Batterer Intervention Provider Network Meeting Minutes June 12th 2012

Attendance: Chris Huffine (Allies in Change), Cassandra Suess (Allies), Linda Castaneda (Manley Interventions), Sarah Voruz (Allies), Regina Rosann (ARMS), Johnnie Burt (ARMS), Dean Camarda (Allies/A Better Way Counseling), Debbie Tomasovic (A Better Way Counseling), Wendy Viola (Portland State University), Stuart Walker (DCJ DV Unit), Samantha Naliboff (VOA Home Free), Guruseva Mason, Susanne Evans (Choices), Amanda Briley (Bridges to Safety), Katherine Stansbury (Turning Points/ChangePoint), Barry Cadish (Turning Points), Jennifer Warren (Seeds of Change/Allies)

Minutes by Wendy Viola, edited by Chris Huffine

Topic: Length of Treatment

The new standards do not specify a length of treatment, but providers will create monthly progress reports, and progress summaries at critical points. Specifically, the new standards indicate that between the 32nd and 36th session a progress summary (i.e., separate from the monthly progress reports also required) will be submitted to the referral source indicating the man's status, including whether he has met minimum completion requirements. If he has not, then the provider gives some sort of estimate of when he will be done. Additional progress summaries need to be provided approximately every 4 months after that. The idea is that the length of treatment should be specific to individual men's needs. Which men should be done and how do we determine that they are done?

One thing that affects length of treatment is where men are when they first enter a group and whether they're being honest when they enter the program. Providers look for men to reduce the amount of denial and minimizing that they use, and to generally become more accountable. If men are still in denial of their abuse when they enter the program, they tend to need more time to figure out how to use the group. Men who have been through other groups, for drug or alcohol treatment or other DV groups tend to be more willing to jump in and be honest.

Is there any kind of baseline to assess some kind of change? Most programs do an intake, which addresses the abusive incident that spurred their participation in the group, as well as their history of abuse. There are some measures that you can use to assess their change. The Domestic Violence Inventory (DVI) is one of these measures. It asks about the presence of a variety of abusive behaviors. One problem is that typically as abusive men move through the programs their abuse scores should actually go UP. As men become more honest and accountable they tend to report more incidents of abuse that they previously had not acknowledged. Another challenge is that such measures are typically based on self-report. They also have high face validity—it is obvious what is being measured and therefore easy to be deceptive in responding. There's an interest in an open-ended measure about attitudes and beliefs about relationships, but such no one knows of or uses such a measure.

This raises the question of goals: do we want to reduce their discrete acts of abuse or change attitudes and beliefs? Victim safety is a central goal, but this is very hard to determine based on contact with the men alone. Assessing increased victim safety would involve contacting victims. Another goal is to change men's belief systems, such that they become more egalitarian and empathetic, and acknowledge that abuse is more than physical abuse. More general accountability and a reduced sense of entitlement, outside of just their intimate relationships, is another goal. Changes in belief systems are assessed through small changes in the way that they interact in groups—using fewer excuses, reducing their minimizing of abusive behavior, and confronting other men in the group.

The ways that men interact with others in the group can be revealing about the authenticity of their change. Communication theory can provide guidelines for making observations of these communications within the group more objective, however, we are unaware of specific measures for doing so.

More skilled facilitators tend to keep men in groups longer, as they are better able to identify men's authenticity (and lack thereof—better able to discern men who are just going through the motions from those who appear more genuinely committed to behaving differently). Skilled facilitators are also better at getting buy-in from the men to get them to recognize that using the program to facilitate genuine change will improve their lives. Part of explaining that men's lives will improve is revealing what healthy partnerships really are and what they can be, which can be surprising to the men.

As men progress in the program, they tend to identify more and more subtle forms of abuse. This subtlety also shows up in participants' journal entries. As men start to grapple with the content of the program, their journal entries shift away from simply repeating what they believe that facilitators just want to hear.

Checking in with PO's can also be helpful, to learn how participants are engaging with others outside of the BIP context. PO's also have much more contact with victims, which is priceless in terms of figuring out how much men are changing. Victims' comfort level in general with answering such questions, regardless of the actual content of their responses can be incredibly revealing. For example, partners who reply hesitantly or carefully or reservedly that things are much better are likely not being fully honest. This information can be invaluable; partner contact is the gold standard. Asking partners if there's anything that they think the men still need to work on can be very informative. Their reports of insidious and subtle abusive behavior tend to increase as they also become more sensitive to men's changing behavior.

In terms of length of stay, voluntary men tend to fall on either side of mandated men. They are much more likely to drop out, but those who stay, tend to stay longer.

One county that has been requiring abusive men to stay for varying lengths has been Marion County. The court decides how long men are required to attend the program, for either 12, 24, or

48 weeks. It is not completely clear the reasoning for the court stepping in to mandate set shorter lengths of stay. One speculation is that a provider in the county had a reputation for keeping men indefinitely in the program without clear completion requirements, resulting in some men being in the program for long periods of time. That led to a concern that providers might arbitrarily keep men in the program just for financial reasons. Sometimes some providers make strong recommendations in their discharge summaries that men ought to continue attending groups after their required 24 weeks. Sometimes men will say explicitly during their exit interviews that 24 weeks is not long enough for them. These men tend to be the ones who have really bought in and are beginning to genuinely change. Some of the men voluntarily take advantage of free drop in opportunities. As long as men are still actively involved in working the program, facilitators are encouraging of their continued participation.

One significant concern with variable length is that some of the men who are the least willing to continue their participation in the program as per providers' recommendations are the most problematic and would most need to stay. Creating progress reports and being in contact with PO's about men's progress can be helpful for warning men that they will be asked to continue their participation. However, a more objective measure of men's progress would be helpful for justifying decisions that men should continue attending the group. One such measure is a "quiz" of comprehension of concepts and skills taught in groups. Another measure, inspired by a concept from Dialectical Behavior Therapy would be a list of treatment interfering behaviors (e.g., being late, not completing homework, not providing feedback to others, etc) that the individual is doing. The expectation is that they would need to stop doing those behaviors in order to progress and complete the program. Another approach is an interview within a month to six weeks of men's expected dismissal from the program, which addresses the content knowledge that's taught in the group. Some programs also ask participants to create a list of their own goals at intake, and progress on these goals can also be assessed in the middle of men's participation as well as at the end.

Objective ways of assessing men's progress include the number of groups that they've attended out of a predetermined number and completion of homework assignments. A more qualitative measure is evaluating an individual man's level of change and/or understanding of the material. It was observed that we can never know for certain whether a man is applying any of the new behaviors, concepts, or beliefs in his personal life, only whether he appears to understand them (e.g., the difference between knowing whether someone can read and whether they actually are reading). Which of these three approaches that providers favor will reflect providers' beliefs about what is responsible for change.

We can agree that more is better, but facilitators are bound to differ in terms of why we think that more is better and what we believe about the mechanisms of change for batterers. A number of reasons were given for why this is longer term work, beyond the 32 week minimum given in the new standards. It can take longer than that to undo a lifetime of belief systems. Working through denial and buying into the program can easily take 3-6 months, which doesn't leave much time to absorb the program once the man is actually open to it. Some programs frame this

work as a lifestyle change, which can easily take longer than a year. Making it more difficult still is that this new lifestyle is, in many ways, counter-cultural. It is important that the values that participants adopt in the group should follow them when they leave the group—that they have internalized them. The integration of new values and thought processes inherently takes an extended amount of time. There are also few resources outside of the provider to provide men with additional on-going support in the same way that there are widely accessible AA meetings to help men stay sober following treatment. Abusive men are more on their own when they leave so they may need to stay longer to increase the likelihood of sustained success. Another benefit to having participants in the program longer is so that they can provide peer teaching within groups (e.g., they are more likely to bring up the more subtle forms of abuse, and have experienced positive changes in their relationships that they can share).

One reason that didn't emerge in this brainstorming of the reasons to keep men longer is the ability to cover content. While it varies from agency to agency, some would be hard pressed to cover all of the curriculum within 32 sessions. It would mean that the men who are the quickest to complete would not be exposed to all of the material. But even for programs with shorter curriculums, focusing solely on working through the curriculum is a weaker motivation for program length than the rate of absorbing the core of the curriculum—it's analogous to cramming for a final exam versus studying and absorbing material over the course of a semester.

There are arguments in favor of setting a set number of sessions for completion rather than determining it individually. Using a set number of sessions avoids giving anyone else the illusion that facilitators really know how well a man is doing. Other outcome measures can be misleading, and participants may be putting something over on providers. The same rationale applies to the use of assignments as a means of determining men's progress. Simply counting weeks relieves providers of the responsibility of knowing how much participants are experiencing genuine change—something they may not be able to knowledgeably or accurately describe. It may also dissuade abusive men from feeling they have to “fake it” to get out. A set number of weeks also assures that all of the men are treated equally and without any arbitrary extensions of time.

It's easier for facilitators to identify when men haven't changed than to assert confidently that they have. The concern is that men who haven't changed might need to stay longer while men who appear to have changed might be misleading or faking it.

One significant concern about variable lengths of intervention is that a program might start offering a shorter intervention and start getting a much higher enrollment as participants will shop around for the shortest possible program. This would then put pressure on the other agencies in the county to shorten up their programs as well.

It was observed that there seemed to be consensus among the providers present that longer is better. Perhaps as a result, no one had yet talked about who WOULDN'T need a longer program? Who would only need 32 to 34 sessions? One group might be that (very) small

number of abusive men who are immediately accountable and engaged in the program, and their time is limited for some other reason (e.g., planning to move out of the area, having a significant schedule conflict). Even if men are immediately accountable, it would be preferable to keep them for longer than 34 weeks. This belief however, is based on the assumption that the ability to articulate accountability translates into behavior change. Another group of men who would necessitate a shorter program are male secondary aggressors, though this group is also very small. A third group would be men who aren't amenable to treatment, who have "served their time," and whose continued participation is a detriment to the rest of their group. This is also a very tiny group, distinct from non-compliers. The best alternative for working with these men is continued supervision. This last group is very difficult to explain to judges. It sounds like a very small number of men who would be able to successfully complete a program within 34 weeks. Of men who have contact with P.O.'s, very very few of them will require a shorter program.

One concern voiced is that almost no one appears in favor of this shorter length of stay other than judges and defense attorneys. It was commented that in some counties judges are the weak link in the coordinated community response. What can be done about this? While there are occasionally DV trainings held for judges, very few of them attend these trainings, and it is a challenge to ask them to be open to recognizing the issues surrounding DV. Some of the judges maintain a power and control stance themselves. In some cases, even when they agree with the content of the training, the way that laws are written sometimes prevent them from making decisions that the training would advocate.

Why was it even decided to shorten the length in the first place? The change was primarily driven by judicial concerns which were partly raised by probation. In some counties the bench has ignored the standards because they didn't agree with how long men with misdemeanors were required to be in treatment. They were concerned about the financial and other burdens that length of stay created for men who had "only" committed a misdemeanor crime, many for the "first time". The hope has been that by shortening the required length, more judges and defense attorneys would sign off on directing abusive men to programs compliant with the state standards (rather than to shorter programs that were not compliant). There are programs as short as one session (a weekend long, 16 hour training for "Aggression Control"). It seems to be a question of what the community is willing to give as a consequence for terrorizing family members? It's not a question of how we as providers figure out how to fit our program into the framework that the community has provided us, but it is our responsibility to be a voice for accountability and victim safety. This is a reflection of how our society views DV. However, the reality is that we can't keep men forever, and we do need to work within the community's framework to a certain extent.