

Minutes from Tri-County Batterer Intervention Network Meeting
December 3, 2002

Members Present – Michael Davis (Change Point), Paula Manley (Manley Interventions), Gustavo Picazo (Changepoint), Stacey Womack (ARMS), Chris Huffine (Men's Resource Center), Courtenay Silvergleid (Portland State University), Guruseva Mason (The Salvation Army BIP), Josh Mohr (Portland State University), Richard Braucher (Portland State University), Alyssa Elting (Portland State University), Lisa Metcalf (Native American Youth Association), Julia Allisin (Native American Youth Association), Marc Hess (Multnomah County Corrections), Songcha Bowman (Private Practice)

Minutes taken by: Courtenay Silvergleid

Topic for today: Role of Probation versus the Role of Providers

Setting the stage for the conversation: One of the challenges of being a batterer intervention provider is negotiating the boundary between what providers do and what probation officers do. What do members in attendance believe are the differences between the provider and probation role?

One member suggested that the basic difference is that probation is the “hammer”, the sanctioning role. This provider said that s/he “doesn’t see my role as provider as a ‘hammer’. My battle is getting them to engage in treatment, not to reprimand them if they don’t show on the first time. I have to focus on keeping the men motivated to even come to treatment.”

One member suggested that for her/him the role division isn’t always so clear cut. How does the coordinated community response work if providers and probation officers don’t communicate, particularly with respect to men’s attendance? If a man doesn’t show up for intervention and a provider doesn’t inform probation, how does probation know about the violation?

Another member offered that if the safety of victims and potential victims is the primary concern of the community, how best to provide for that safety? Feminist model suggests that it takes a community to insure safety. In other words, a cultural change is required to provide safety. Then it becomes a question of what can each individual or each specific role contribute to the effort of victim safety. Batterer intervention providers work with men who break the law. They have committed illegal acts and are coming through criminal justice or child protection system. Those systems see the men first and have the primary job of making sure that the men fulfill their sentence or agreement. Child welfare caseworkers or probation officers are in charge of the perpetrators’ involvement and fulfillment of commitment with that system. After sentencing or agreement making, batterer intervention provides education (or therapy) to give batterers specific information and support that they can use if they decide that they want to make a change. The primary motivation for them to change has to be the community pressure. Why change something that isn’t punished? Because BI providers have direct contact with batterers on a

weekly basis, some people see that as a place for the community's work to be done. A confusion of functions arises when people expect that batterer intervention providers are there to monitor someone's behavior in the community rather than just in the classroom. As a BI provider, this member offered that s/he can not hold that person accountable outside of the classroom. "I can hold him accountable for attendance, completing homework, paying, participating in class in a responsible manner, etc., but it is the community's job to hold him accountable outside of the classroom."

Another member interjected that BI providers need to be aware of the characteristics that are associated with drop-out or abuse since knowledge about what is related to recidivism is available to the provider.

Original speaker countered – "part of my responsibility as an educator is knowing what may interfere with their ability to learn and take to heart the information. Additionally, I need to be aware of what may or may not increase or decrease their motivation. I'm not concerned with preventing them from reoffending. I can not keep them from reoffending. I'm there to challenge those things as they are presented, rather than trying to control them. I'm not going to be the person to sanction them for behavior related to violence."

Another member challenged, asking why isn't this member going to challenge the man for his behavior? Isn't it in some way collusion to not challenge?

Original speaker countered back that s/he doesn't see it as his/her job to control batterers' choices. Member went on to say that "if there is someone there to tell about man's behavior, I'll certainly relay that information. If there is an active, engaged probation officer, then I see it as my job to report. I have to make judgements about how well prepared that person is to use that information in a way that won't compromise safety and will lead to some useful outcome. I've had experience with PO whose attitudes have been, 'if I can't prove it, they don't want to know about it'."

Another member offered that a lot of the decision to share information with probation officers is dependent on what you know about how that particular person approaches issues. Role is to make people aware if someone's safety is going to be at risk. "I need to offer the perpetrator the chance to change but if I think that safety for the victim is an issue, I reach out to either probation or victim advocates. I'm aware of belief systems of clients and I see it as my responsibility/my role to that share information."

One member questioned the degree of individual case management that these men receive? Another member answered that usually contact is just in the group, some contact with the referral agency. Beyond that, things get more varied – in some agencies, there may be contact with partner. Some providers work more closely with the court insuring that the men meet more of the court requirements. Case management is more oriented to how is this man progressing in terms of his belief systems, educational topics, understanding of his own control tactics. When

someone leaves treatment, he is obviously not “fixed”, but there are some that leave with more motivation to let go of controlling behaviors than others. For the men who aren’t going to really learn or engage, we can’t keep them in the group because it isn’t really helping them and isn’t helping the group. We let him leave and let the probation officer know that he isn’t completing with “flying colors”. It is frustrating that some PO s don’t want that information. On the other hand, it is also difficult when a PO asks whether this provider thinks it is safe for perpetrator to have contact with victim since that is an impossible question to answer.

One member offered that even though it is an impossible question to answer definitively, s/he thinks that BI providers working in coordination with victim advocate and PO should be the people who can make the decision about whether return to the home is an “ok” idea.

More collaboration with victim advocate is necessary. It helps when victim advocacy is close by – in the same agency. It is unusual to collaborate on specific families with victim advocates who are not located in the same building.

This issue is currently appearing in discussions regarding the state-wide standards. How much information should be shared? Basic dilemma is that when a man in a group discloses that he has violated no contact, abused partner, been drinking, etc., to what extent should you disclose that information to the PO? One person’s position is that BI should not be seen as an extension of probation because if we do that and are known for doing that, men in group will be deceitful about their behavior and then no one is honestly talking with them about their violations. The member offered that s/he would rather have men disclosing that kind of information in the group so that together with the other group members we can talk about the implications. An obvious counterpoint is that the probation officer may have auxiliary information that might warrant intensified response.

A suggestion was made to use hypothetical situations about violations to get the men talking. Concern here is that honesty in the group is critical. One member offered that it works really well if probation officer talks with man about his violations and tells him that he must disclose those violations in group.

Something about the process of disclosure on a regular basis is really therapeutic. If the group has a norm that encourages disclosure that can be really effective. Sometimes the group will challenge the men to call his PO.

One member mentioned that even in this meeting we sanction ourselves because of what we fear the reaction from others will be. What happens then is that we miss out on the opportunity to talk through the issue. Why then would men be accountable in group when the sanctions are much more severe?

Each agency responds to this issue a bit differently and maybe that variety is good. Probation officers can shop for the provider that is aligned with their approach. Fear that coordinated

community response becomes corrections based. Diversity is important since we don't know whether a corrections approach is better or worse than any other approach.

A challenge for providers is when the probation piece is not sufficient and providers have stepped in and taken over the probation responsibilities. If there isn't strong probation, there is the complex concern of "if I don't do it, who will", which can lead to providers becoming probation officers.

Important to keep in mind that we are only reaching a very small percentage of the men who are abusive in our communities. We really do need a community response that addresses the large percentage of men who never interact with the criminal justice system.

One of the pieces in the Duluth community response model is a central tracking agency for domestic violence. It is a missing piece in our communities that is very significant.

In closing, one member offered that division of responsibilities should be based on resources. Probation officers have better access to victim and previous information, which can translate into more accurate and appropriate sanctions. Providers on the other hand have more extended face to face time in the group setting. They should focus on education.