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# **Evidence-Based Practices for Assessing, Supervising and Treating Domestic Violence Offenders**

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Prepared for  
**Chief Probation Officers of California**

By  
Crime and Justice Institute at  
Community Resources for Justice

Authors  
Michelle Webster  
Kristin Bechtel

**August 2012**



### **Crime and Justice Institute (CJI) at Community Resources for Justice**

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CJI's parent corporation, Community Resources for Justice (CRJ), is a Boston-based non-profit corporation that has been providing direct care and supportive services to society's most challenged citizens for over 130 years. CRJ's direct service programs include residential and day programming for adult and youth offenders reentering the community, at-risk youth, and adults with mental illness and developmental disabilities across New England. More information on CRJ's programs can be found at [www.crjustice.org](http://www.crjustice.org). While CJI is also headquartered in Boston, MA, its staff and network consultants work at sites throughout the country.

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#### **Suggested Citation:**

Webster, M. and K. Bechtel (2012). *Evidence-Based Practices for Assessing, Supervising and Treating Domestic Violence Offenders*. Crime and Justice Institute at Community Resources for Justice: Boston, MA.

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## Executive Summary

Community supervision agencies are struggling with budget cuts, high caseloads and pressure to reduce failure rates. In recent years there has been tremendous growth in what we know about cost-effective practices in community supervision that have been proven to reduce offender risk and improve public safety. With this in mind, CPOC commissioned this paper and companion training curriculum on what is known about evidence-based practices in assessing, treating and supervising domestic violence offenders.

### Evidence-Based Practices in Community Corrections

Community supervision agencies are struggling with budget cuts, high caseloads and pressure to reduce failure rates. A growing body of literature points to four core practices that when implemented as a system can contribute to reductions in reoffending. These include (1) use a risk assessment tool to identify criminogenic risks and needs; (2) employ tailored supervision strategies and treatment plans; (3) implement a system of rewards and sanctions; and (4) provide skill-building support for probation officers.

### Assessing Offender Risk and Needs

A robust body of literature has developed about the key factors associated with the risk of recidivism. This knowledge, gleaned from research and practice, has been translated into a variety of risk and needs assessment tools. These instruments typically include items measuring both static (unchangeable) and dynamic (changeable) risk factors that have been found to be associated with ongoing criminal behavior.

Assessing the change in offender risk level, however, requires an examination of dynamic (changeable) risk factors. Not all risk factors carry the same probability of future criminal behavior. Research points to what has become known as the “Big 4” risk factors—those factors which are most predictive of future offending. These include (1) history of antisocial behavior (static risk factor); (2) antisocial personality pattern; (3) antisocial attitudes; and (4) antisocial peers.

### Assessing Domestic Violence Risk

Several specialized risk assessment scales have been developed for use with domestic violence offenders. While substantial strides have been made in risk assessment for general violent offending, the development of reliable risk assessment tools for domestic violence offenders still remains a work in progress. Generally, research has found moderate predictability of recidivism among the most commonly used domestic violence risk assessment tools. Research on understanding the risk factors specific to domestic violence and testing of risk scales in this area is still under-developed. No one tool stands out as superior in predicting the risk of domestic violence recidivism.

What is clear from the research is that use of a *general risk assessment tool* is an appropriate and effective correctional practice. No single risk assessment tool can predict behavior with complete accuracy. However, an objective assessment instrument combined with the skills and experience of probation staff will more accurately predict the risk of recidivism than purely subjective assessment based on a gut feeling. Research has consistently shown that systematically assessing an individual’s risk using an actuarial tool to develop a supervision and treatment plan that matches an offender’s risk level and needs results in less recidivism.

## Predictors of Recidivism

Significant gaps exist in the literature about our understanding of the predictors of continued violence between intimate partners. Although the body and sophistication of domestic violence research has grown substantially over the last few decades, many questions remain unanswered. Among these is developing a better understanding of the predictors of reabuse. The paper reviews the body of research on factors associated with domestic violence recidivism and highlights key findings.

## Effectiveness of Batterer Intervention Programs

Domestic violence offenders generally have a high rate of recidivism. Studies using direct victim interviews over a period of time estimate repeat violence in the range of 40 to 80 percent of cases. Although the body and sophistication of domestic violence research has grown substantially over the last few decades, many questions remain unanswered.

Among these is developing a better understanding of the predictors of reabuse. Also, we have yet to figure out what works for effectively intervening with batterers to reduce recidivism. Research to date has indicated that the most common court-mandated batterer intervention programs do not reduce recidivism or alter batterers' attitudes about violence. The research literature to date, however, has yielded some general conclusions about treatment effectiveness that are outlined in the full paper.

## Supervision Practices and Policies

Most domestic violence offenders are released to community supervision. Given the limited evidence of effectiveness of current batterer interventions in reducing future abuse, community supervision is critical to ensuring victim safety. The paper discusses seven supervision strategies for domestic violence offenders.

- **Develop individualized supervision strategies and case plans.** Domestic violence offenders should not be treated as a homogeneous group. Case management plans and supervision strategies should be guided by information gleaned from the risk assessment.
- **Know your population.** Research has firmly demonstrated that domestic violence offenders come from all walks of life. Probation officers experienced in working with domestic violence offenders know that this population—despite their specific background or history—is particularly adept at using manipulation techniques.
- **Focus supervision time on criminogenic needs.** While it is important to spend supervision time discussing enforcement issues such as compliance with probation conditions, a fair amount of time should be reserved for discussing the offender's progress in obtaining services and what the probationer is getting out of the treatment.
- **Communicate with victims.** Victims are often reluctant to report ongoing violent incidents to the police. A victim may, however, talk to a probation officer who makes an effort to stay in regular contact. Having periodic conversations with victims is important both to ensure that the offender is refraining from further abuse and to gauge how the offender is responding to treatment and supervision.

- **Swift and certain response to probation violations.** It is critical to respond to new incidents of abuse even if it did not result in an arrest or criminal charges.
- **Communicate with treatment providers.** Although batterer interventions have not been shown to significantly reduce future abuse, participation can be another monitoring tool for probation officers. Communicating regularly with treatment providers can provide probation officers another window into the offender’s world and the information gleaned could help officers focus on areas of concern.
- **Partner with treatment providers to conduct domestic violence risk assessments.** Probation departments could partner with treatment providers to conduct domestic violence trailer assessments following the general risk assessment. Doing so may free up more staff time for direct supervision, capitalize on the expertise of the treatment providers and facilitate the development of stronger collaborative relationships between domestic violence treatment providers and probation staff.

## Introduction

The Chief Probation Officers of California (CPOC) commissioned the Crime and Justice Institute (CJI) at Community Resources for Justice to develop a two-part project on assessing, supervising and treating domestic violence offenders. The first part was development of this policy report summarizing what is known from the research literature on evidence based practices in the assessment, treatment and supervision of domestic violence batterers. The report was then translated into a curriculum for probation managers and staff.

The report contains the following sections:

- Evidence-Based Practices in Community Corrections
- Assessing Offender Risk and Needs
- Assessing Domestic Violence Risk
- Predictors of Recidivism
- Effectiveness of Batterer Interventions
- Recommendations for Supervision Practices and Policies

Under California law, the county-level probation chiefs are responsible for assessing offender needs and certifying and monitoring domestic violence batterer treatment programs. In 2010, county probation offices in California were responsible for supervising 311,692 adults on active probation. About 40 percent of all new prison admissions to California state prisons are felony offenders who have failed on probation. As a result, supervision agencies are under increasing pressure to embrace evidence-based practices to promote successful completion of the probation term.

In 2009, California formally recognized the importance of evidence-based practices in community corrections as a means of reducing pressure on its overburdened prison system by passing SB 678. The legislation established a performance-based funding system for county probation departments and encouraged departments to embrace evidence-based practices for supervising adult felony probationers. Between 2008 and 2010, the probation failure rate declined by 23 percent from 7.9 percent to 6.1 percent.<sup>1</sup> In 2010, county probation departments successfully diverted over 6,000 felony probationers from state prison with no apparent impact on crime rates.<sup>2</sup>

## Evidence-Based Practices in Community Corrections

Community supervision agencies are struggling with budget cuts, high caseloads and pressure to reduce failure rates. In recent years there has been tremendous growth in what we know about cost-effective practices in community supervision that have been proven to reduce offender risk and improve public

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<sup>1</sup> Administrative Office of the Courts (2011)

<sup>2</sup> Administrative Office of the Courts (2011)

safety.<sup>3</sup> A growing body of literature points to four core practices that when implemented as a system can contribute to reductions in reoffending.<sup>4</sup>

1. Assess probationers' criminogenic (crime-producing) risks and needs using a validated and normed assessment tool. Validating (testing the instrument on your population) and norming (establishing appropriate cut-off points for risk levels) are critical steps in implementing a risk assessment tool.
2. Employ tailored supervision strategies and targeted interventions that are most responsive to probationers' risks, needs, temperament and learning style.
3. Implement a system of incentives to reward positive behavior by the probationer and graduated sanctions to promptly respond to probation violations.
4. Provide skill-building for probation officers to improve officer-offender relationships reinforced by performance-driven management practices that foster and reward probation staff for success in reducing recidivism.

While the focus of this paper is on what is known from the research literature on dealing with the specialized caseload of domestic violence offenders, these general practices form an effective foundation for supervising batterers as well.

### **Assessing Offender Risk & Needs**

A robust body of literature has developed about the key factors associated with the risk of recidivism. This knowledge, gleaned from research and practice, has been translated into a variety of risk and needs assessment tools. These tools are important for community supervision agencies to:

1. Predict the risk of general and domestic violence reoffending.
2. Develop individualized case plans that are designed to address dynamic risk factors to reduce reoffending.
3. Distinguish between high and lower risk domestic violence offenders to ensure they are assigned to appropriate treatment programs.

Risk and needs assessment tools typically consist of a series of questions to guide interviews with offenders on background, behaviors, and attitudes research has demonstrated are related to criminal offending. Offender interviews are often supplemented with official records on criminal history

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<sup>3</sup> For a more complete discussion of implementing evidence-based practices in community corrections, including a framework for organizational change, see *Implementing Evidence-Based Policy and Practice in Community Corrections*, 2d Edition (2009). Washington, DC: National Institute of Corrections. Available at <http://cjinstitute.org/publications/integratedmodel>.

<sup>4</sup> See also "A Ten-Step Guide to Transforming Probation Departments to Reduce Recidivism" (2011). Washington, DC: Council of State Governments. Available at <http://www.nationalreentryresourcecenter.org/announcements/csg-justice-center-releases-guide-for-transforming-probation-departments-to-focus-on-recidivism-reduction>.

including prior supervision performance, arrests, convictions, and incarceration. An overall score is calculated to classify the offender’s risk level. Additional information from the tool can be used to determine needs for treatment programs and development of a case plan. This entire process is based on the risk-needs-responsivity (RNR) approach to offender assessment and supervision.

**Summary of RNR (Risk-Needs-Responsivity) Approach to Offender Assessment & Supervision**

<p><b>Risk Principle</b></p> <p>The premise of the risk principle is that recidivism reductions can be accomplished by ensuring that the level of treatment and supervision is proportional to an offender’s risk to reoffend.</p>	<ul style="list-style-type: none"> <li>▪ Risk of reoffending is assessed by looking at <u>static factors</u> (i.e., age at first arrest, number of prior arrests, number of prior convictions) and <u>dynamic factors</u> (i.e., antisocial attitudes, personality, peers, behavior).</li> <li>▪ Static risk factors only change in one direction (increase risk) and are not responsive to treatment intervention.</li> </ul>
<p><b>Need Principle</b></p> <p>The premise of the need principle is that correctional treatment should be focused on criminogenic needs—that is, dynamic risk factors that are directly linked to the likelihood of engaging in criminal behavior.</p>	<ul style="list-style-type: none"> <li>▪ <u>Criminogenic needs</u> include a variety of dynamic risk factors that can change over time. See the table below for a list of the seven major dynamic risk factors.</li> <li>▪ While offenders may have many needs that require treatment, only some of these needs are directly associated with their criminal behavior.</li> </ul>
<p><b>Responsivity Principle</b></p> <p>The premise of the responsivity principle is that treatment effectiveness is improved by targeting interventions to offender’s specific needs, learning style, and motivation for change.</p>	<ul style="list-style-type: none"> <li>▪ Responsivity refers to the use of cognitive behavioral and social learning models that are tailored to offender needs, learning style and emphasize the importance of the quality of the relationship between the offender and probation officer.</li> </ul>

**Criminal Risk Factors**

Risk assessment instruments typically comprise both static (unchangeable) and dynamic (changeable) risk factors that have been found to be associated with ongoing criminal behavior. Static risk factors, such as age at first offense, prior criminal history, and current offense can be used to assess risk of recidivism. Other static factors may be relevant depending on the outcome of interest (e.g., re-arrest vs. failure to appear).<sup>5</sup>

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<sup>5</sup> Bechtel, Lowenkamp, Holsinger (2011)

Assessing the change in offender risk level, however, requires an examination of dynamic (changeable) risk factors. Research points to seven dynamic risk factors closely correlated with criminal behavior.<sup>6</sup> Targeting interventions and treatment on these dynamic risk factors, also referred to as criminogenic needs, can result in recidivism reductions.

Not all risk factors carry the same probability of future criminal behavior. Research points to what has become known as the “Big 4” risk factors—those factors which are most predictive of future offending.

- History of antisocial behavior (static risk factor)
- Antisocial personality pattern
- Antisocial attitudes
- Antisocial peers

Three of the Big 4 are dynamic risk factors, meaning they can serve as treatment targets for actively reducing risk of recidivism. The table below summarizes all seven dynamic risk factors associated with criminal activity.

It is important to note that offenders may present a number of issues that while important to establishing stability in their lives, are not criminogenic needs. These include low self-esteem, anxiety, history of trauma or victimization, medical or mental health needs and learning disabilities. While these factors are not related to a risk of recidivism, issues such as learning disabilities and mental health needs, for example, directly influence *responsivity*. That is, to maximize successful outcomes for offenders, treatment must be *responsive* to offender needs, learning style and motivation for change.

### Seven Dynamic Risk Factors

Dynamic Risk Factors	Indicators	Intervention goals
1. Antisocial Personality Pattern	Impulsive, risk taking, lack of self-esteem, angry and hostile, poor problem-solving skills	Build self-management skills, teach anger management
2. Antisocial Attitudes	Rationalizations for crime, negative attitudes towards the law	Counter rationalizations with prosocial attitudes; build up a prosocial identity
3. Antisocial Peers	Criminal associations, isolation from prosocial peers	Replace procriminal friends and associates with prosocial friends and associates
4. Substance Abuse	Abuse of alcohol and/or drugs	Reduce substance abuse, enhance alternatives to substance use
5. Poor Family/Marital Relationships	Inappropriate parental monitoring and disciplining, poor family relationships	Teaching parenting skills, enhance warmth and caring
6. School/Work Failure	Poor performance, low levels of satisfactions	Enhance work/study skills, nurture interpersonal relationships within the context of work and school

<sup>6</sup> Bonta and Andrews (2007)

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**7. Lack of Prosocial  
Recreational Activities**

Lack of involvement in prosocial  
recreational/leisure activities

Encourage participation in prosocial  
recreational activities, teach prosocial  
hobbies and sports

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## Assessing Domestic Violence Risk

Unlike offenders on probation for violent crimes involving strangers, domestic violence batterers present a significant risk of further harm against the victim. Understanding the risk of future harm and offender-specific needs is essential for probation departments to craft a supervision and case plan that will optimize success.

Several risk assessment tools are available today. Some tools only measure risks or needs; others assess both. Still other tools assess the risk of specific offenses, such as domestic violence. While substantial strides have been made in risk assessment for general recidivism, the development of risk assessment tools for domestic violence offenders still remains a work in progress.<sup>7</sup> Assessing domestic violence risk typically involves one or some combination of the following approaches:

- Partner (victim) interviews
- Domestic violence risk assessment tools that focus on specific areas of risk for domestic violence offenders
- Risk scales designed for general or violent risk assessment

The table in Appendix A summarizes the various risk assessment instruments that have been developed specifically for domestic violence offenders and two general offending tools that have been found to be valid in predicting domestic violence recidivism.

### Comparison of Instruments

Several specialized risk scales have been developed for use with domestic violence offenders. (See Appendix A for a summary of these tools.) A properly validated risk assessment tool should accurately differentiate between risk levels so that offenders assessed as “high risk” reoffend at a higher rate than those assessed to be “low risk.”

Generally, research has found moderate predictability of recidivism among the most commonly used domestic violence risk assessment tools.<sup>8</sup> A recent meta-analysis concluded that domestic violence specific scales are not any more accurate in predicting recidivism (general violent crime and domestic violence) than general offending risk scales. This does not mean that all of these various tools are interchangeable. It is likely that there are some risk factors that are specific to domestic violence and some risk factors that are relevant to both domestic violence offenders and general violent offender population.

The bottom line is that research on understanding the risk factors specific to domestic violence and testing of risk scales in this area is still under-developed. No one tool stands out as superior in predicting the risk of domestic violence recidivism. Further research is needed to identify domestic violence-specific risk factors with more clarity and whether including those items in a general risk assessment improves predictive validity. There is some research to suggest that combining the victim’s perception of the risk of future violence with the risk assessment yields a more accurate prediction of risk.<sup>9</sup>

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<sup>7</sup> Hanson, Helmus and Bourgon (2007)

<sup>8</sup> Hanson, Helmus and Bourgon (2007)

<sup>9</sup> Heckert and Gondolf (2004)

What is clear from the research is that use of a *general risk assessment tool* is an appropriate and effective correctional practice. No single risk assessment tool can predict behavior with complete accuracy. However, an objective assessment instrument combined with the skills and experience of probation staff will more accurately predict the risk of recidivism than purely subjective assessment based on a gut feeling. Research has consistently shown that systematically assessing an individual's risk using an actuarial tool to develop a supervision and treatment plan that matches an offender's risk level and needs results in less recidivism.<sup>10</sup>

### Considerations for Selecting and Implementing an Instrument

As discussed above, selecting and implementing a risk and needs assessment tool is essential to making meaningful and significant reductions in recidivism. Because there is no one-size-fits-all risk assessment instrument, using multiple tools may be the best option. There are a number of factors to consider in selecting and implementing a tool or combination of tools.

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#### Considerations for Selection

- Desired outcome to be measured
- Reliability (yields consistent results) and validity (measures what it is supposed to) of an instrument
- Time it takes to complete the assessment and the ease of collecting the necessary information
- Feasibility and cost of adopting a particular tool(s)
- Similarity to other tools used in the jurisdiction

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#### Considerations for Implementation

- **Validation** - To maximize performance of the selected tool(s), it should be validated for the particular jurisdiction and population for which it will be used.
- **Training & Quality Assurance** - Provide training to staff to ensure that that the tool is consistently and uniformly implemented within the agency to inform case planning and supervision strategies.

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It is important to note that risk assessments are not meant to replace the expertise of probation staff (or other criminal justice professionals). The information gleaned from risk and needs assessments must be paired with the expertise and some degree of discretion for probation officers to develop supervision and treatment plans that make sense for individual offenders. While probation departments should allow some flexibility to use professional overrides where warranted, discounting the risk assessment results should be the exception and not the rule. These issues highlight the importance of thorough training and quality assurance policies in using any risk and needs assessment tool.

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<sup>10</sup> Andrews (2006); Quinsey, Harris, Rice, and Cormier (2006)

## Recommendations for Domestic Violence Risk Assessment

In addition to the general considerations outlined above for selecting and implementing risk assessment tools, the following recommendations are specific to selecting and implementing a risk assessment tool for domestic violence offenders.

1. **For jurisdictions trying to decide how to assess domestic violence offenders**, we recommend using a general assessment tool such as the LSI-R or COMPAS. (See the attached table for a summary of these tools.) Current research indicates that the LSI-R reliably identifies domestic violence offenders and, in particular, captures non-domestic violence criminal history information, better than offense-specific tools.<sup>11</sup> Conversely, the Domestic Violence Screening Instrument (DVSI) and Spousal Assault Risk Assessment (SARA) do not appear to be reliable in predicting general offending, especially among individuals who are scored low-risk.<sup>12</sup>
2. **Domestic violence specific needs assessments can be very helpful for case managers** in identifying criminogenic needs. For this reason, we recommend pairing a general risk assessment tool with an offense specific tool. The general tool would be used to predict the risk of reoffending and the offense-specific needs assessment could be used for the purpose of pre-treatment assessment to help guide placement in appropriate interventions.
3. **For jurisdictions that want to use a domestic violence-specific instrument**, the ODARA (Ontario Domestic Assault Risk Assessment) and the SARA (Spousal Assault Risk Assessment) have shown to be valid and reliable tools for domestic violence risk assessment and useful in developing individualized case plans.
4. **If a jurisdiction is currently using a validated domestic violence assessment**, continuing to use that tool is fine provided it has been validated for your population and it is yielding information helpful to offender management and case planning.
5. **Jurisdictions may want to use a risk screener first** to determine whether a full assessment is necessary. Some jurisdictions find that completing a full risk assessment is too time-consuming and using a brief screener can help better allocate staff resources. Risk screeners can save substantial staff time by requiring a ten-minute assessment interview or file review for all offenders, followed by a full assessment interview only for offenders scoring above a certain score. While the results of screener interviews are often highly correlated with results of the longer instrument, they should never supplant the full assessment for case planning purposes. Risk screeners only contain static elements and few, if any, dynamic elements, which are essential for case planning.

Jurisdictions should validate the risk-screening tool (just as you would for a full assessment instrument) and establish cut-off scores. Individuals scoring above the cut-off would be assessed using the full risk instrument for general offending (per the recommendation #2 above) and a domestic violence-specific tool. Those scoring below the cut-off would be treated in the lowest

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<sup>11</sup> Hanson, Helmus, and Bourgon (2007)

<sup>12</sup> Hanson, Helmus, and Bourgon (2007)

level of treatment available and could be assessed for criminogenic needs using a domestic violence-specific tool.

6. **Lower risk domestic violence offenders should be identified and treated as such.** Research indicates that there is a population of low-risk domestic violence offenders who either have a single police-involved incident<sup>13</sup> or reduce offending very quickly. A longitudinal study, which tracked domestic violence offenders for nine years, concluded that there are individuals who engage in violent behavior infrequently and then are not otherwise involved in the criminal justice system.<sup>14</sup> This is not to diminish the significance of the violent events, particularly for the victims, but merely to point out that some lower-risk offenders do desist from engaging in further violent behavior fairly quickly. Generally, these lower-risk offenders appear to have a higher stake in conformity, meaning they are generally employed, have prosocial relationships, and are positively engaged in their community. These factors have been associated with a lower likelihood of reoffending. These lower-risk offenders, who should score low risk when using a properly validated risk assessment, should be treated using generally acceptable lower levels of supervision and treatment.
7. **Low-risk domestic violence offenders should not be placed in treatment with high-risk offenders.** One of the primary reasons for differentiating individuals by risk level is to ensure that low and high risk individuals are not assigned to the same treatment groups. Research suggests that while certain intensive treatment programs can be very effective in reducing recidivism among high-risk offenders, it can actually increase recidivism among low-risk individuals.<sup>15</sup> Researchers have explained that mixing risk levels may expose lower-risk individuals to the more destructive behavioral patterns of higher-risk offenders thereby straining their prosocial relationships and their productive community engagement.
8. **Regardless of the risk assessment tool selected, jurisdictions should validate the instrument for their population.** Validation is critical to ensure that the risk classifications reliably and accurately reflect the likelihood of reoffending among the population in which the tool is being used. This process could involve testing the instrument both retrospectively and prospectively.
9. **Offenders should be re-assessed when appropriate.** In the event of a new offense, low-risk offenders should be re-assessed and potentially treated as high-risk, using administrative overrides if necessary. The instrument used for reassessment needs to be designed for that purpose. It is also helpful to keep track of the initial assessment and reassessment scores as distinct scores in the database, which should also include the reason for the reassessment. Finally, the reassessment should be shared with treatment providers.

## Predictors of Recidivism

Significant gaps exist in the literature about our understanding of the predictors of continued violence between intimate partners. Understanding what we do know, however, is important for community supervision professionals working with domestic violence cases for the following reasons:

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<sup>13</sup> Weisz (2001); Maxwell, Garner, and Fagan (2001)

<sup>14</sup> Wilson (2006)

<sup>15</sup> Latessa, Lovins, and Smith (2010)

1. Empirically validated risk factors make risk assessment more accurate and helpful for supervision professionals in developing supervision strategies and case plans.
2. Identification of dynamic (as opposed to static) risk factors is important in developing treatment interventions targeted at reducing or mediating those risk factors.
3. Understanding the relationship between particular interventions, risk reduction and outcomes would help system professionals identify models that could be replicated on a larger scale.

Domestic violence offenders generally have a high rate of recidivism. Studies using direct victim interviews over a period of time estimate repeat violence in the range of 40 to 80 percent of cases.<sup>16</sup> Although the body and sophistication of domestic violence research has grown substantially over the last few decades, many questions remain unanswered. Among these is developing a better understanding of the predictors of reabuse. Taking stock of the body of research literature on factors associated with domestic violence recidivism points to the following general findings.<sup>17</sup>

### **Batterer History and Demographics**

- **Criminal history is a fairly reliable predictor of reabuse.** Batterers with a history of involvement with the criminal justice system are more likely to reabuse.
- **Current substance abuse is associated with reabuse.** One study found that the batterer's alcohol use in the period following arrest was found to be a significant predictor of reabuse but a history of alcohol abuse was not found to be associated with reassault.<sup>18</sup>
- **Demographic and family history variables NOT associated with reabuse.** The following individual-level variables do not appear to be predictors of reabuse: the batterer's ethnicity, the victim's age, the batterer's history of abuse in his family of origin, and his beliefs about his abuse. Research also seems to weigh against the use of the batterer's marital status as a predictor of recidivism.
- **Importance of stake in conformity<sup>19</sup> in predicting reabuse.** Stake in conformity is typically represented by batterer's income or socio-economic status, marital status, level of education and/or employment status. The likelihood of rearrest after criminal justice system involvement depends to some degree on the batterer's life circumstances. Specifically, batterer's socio-economic status and employment status seem to have an impact on rearrest: those with a greater stake in adhering to the norms of conventional society are less likely to be rearrested. An important related finding is that victims may be less likely to call the police where their batterer has a steady job and higher socio-economic status because the whole family has more to lose by a subsequent arrest.

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<sup>16</sup> Garner, Fagan, Maxwell (1995); Shepard (1992)

<sup>17</sup> Unless otherwise noted, these conclusions were drawn from a comprehensive cross-disciplinary review of the literature on the predictors of reabuse published by Canttaneo and Goodman (2005).

<sup>18</sup> Snow Jones and Gondolf (2001)

<sup>19</sup> Sherman, Schmidt, Rogan, Smith, Gartin, and Cohen (1992)

## Relationship between Batterer and Victim

- **Impact of relationship status between batterer and victim is mixed.** Evidence does not support marital status as a predictor of future abuse. The amount of time the couple has have lived together seems to be significant but the relationship is unclear.
- **History of abuse between partners is a predictor of reabuse.** Specifically, examining the history of violence is a more important predictor of reabuse than the nature of the offense that resulted in the police being called. This is an important finding for criminal justice agencies because current practice focuses almost exclusively on the current incident rather than on prior incidents. It is important to note, however, that the severity of the current incident is still an important predictor of reabuse and even lethality. Looking at both the current incident and the history of violence will provide a more comprehensive picture of what is happening in the lives of the couple.
- **Psychological abuse is associated with future abuse.** Psychological abuse characterized by dominance and isolation was found to be related to repeat physical abuse.<sup>20</sup> Other studies suggest that a history of psychological abuse may also predict future psychological abuse.<sup>21</sup>

## Interventions

- **The assumption that abuse would continue absent intervention appears to be flawed.** Several studies have found that reabuse declines over time absent any type of intervention.<sup>22</sup> The assumption that abuse will increase or, at minimum, continue between the batterer and victim in the absence of an intervention appears not to be accurate. In a related series of findings, the time period for serious reabuse was relatively short. In one study, more than two-thirds of men who would reassult did so within the first six months following arrest and those that reoffended within the first three months were more likely to reabuse repeatedly and to cause injury.<sup>23</sup>
- **The connection between treatment and reabuse is complex.** The “nothing works” conclusion in the batterer treatment literature likely really means that the relationships are too complex to only look at the impact on recidivism. Rather, research must look to developing a better understanding of the interactions of a variety of factors that are likely related to the effectiveness of treatment models and reductions in recidivism. The bottom line is that the effectiveness of a particular intervention depends, in part, on the life circumstances of the recipient. Some interesting, but more nuanced, findings to come out of recent research on interventions are as follows:
  - **Voluntariness of treatment.** Several studies have noted that whether a batterer volunteers to participate in treatment or is ordered to do so by the court seems to interact with other variables to impact treatment effectiveness.<sup>24</sup>
  - **Victim reporting.** Research seems to indicate that victims are less likely to report reabuse to the police after the batterer has been in treatment.<sup>25</sup> A possible explanation for this

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<sup>20</sup> Bennett, Goodman, and Dutton (2000); Bennett, Cattaneo, and Goodman (2003)

<sup>21</sup> Harrell and Smith (1996); Gondolf, Heckert and Kimmel (2002)

<sup>22</sup> Aldarondo (1996); Ford and Regoli (1992); McFarlane, Willson, Lemmey, and Malecha (2000); and Tolman, Edleson, and Fendrich (1996)

<sup>23</sup> Gondolf (1997)

<sup>24</sup> Rosenbaum, Gearn, and Ondovic (2001)

phenomenon is that women whose partners have been required to participate in treatment feel safer and are more likely to want to reunite. A sense of hope or desire to repair the relationship may dissuade them from involving the police in the future. This interaction effect, makes it difficult to determine whether the treatment really resulted in less violence.

- **Personality type.** Another study found that a batterer's personality type interacted with the type of treatment. For instance, offenders with dependant personalities responded better to psychodynamic treatment, while those who exhibited more antisocial tendencies did better in treatment with a cognitive behavioral focus.<sup>26</sup>

### Victim's Level of Resources

- **Victims' access to services and resources is an important predictor of future violence.** Findings across several studies point to the importance of connecting victims to services and resources for stabilizing their lives as an important factor in reducing future abuse. One study found that intensive short-term legal or advocacy services reduced the likelihood of reabuse.<sup>27</sup> Another study found a similar relationship but also concluded that the effectiveness of the intervention in reducing future violence was mediated by victim's self-reported quality of life. In other words, "improvement in quality of life can influence a woman's perception of what is possible for her to have or achieve and also expand her personal resources for protection from abuse."<sup>28</sup>

The research on the predictors of future violence by domestic violence offenders involved in the criminal justice system is still very much under development. Very few firm conclusions can be drawn from the research. What we do know points to the importance of identifying risks and needs and targeting interventions and supervision strategies to best respond to the individual.

### Effectiveness of Batterer Interventions

As the proceeding sections demonstrate, domestic violence is a complicated community problem and we have yet to figure out what works for effectively intervening with batterers to reduce recidivism. Research to date has indicated that the most common court-mandated batterer intervention programs do not reduce recidivism or alter batterers' attitudes about violence.<sup>29</sup> See the table below for a brief summary of the three most common batterer intervention programs currently in use.

### General Take-Away Points on Batterer Interventions

Overall, research using a variety of methodologies has found very little support for the long-term effectiveness of batterer interventions. While we still know very little about what makes treatment effective at reducing recidivism among domestic violence offenders, the research literature to date has yielded some general conclusions.

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<sup>25</sup> Gondolf (1988, 1998)

<sup>26</sup> Saunders (1996)

<sup>27</sup> Bell and Goodman (2001)

<sup>28</sup> Bybee and Sullivan (2002)

<sup>29</sup> Jackson, Feder, Forde, Davis, Maxwell and Taylor (2003)

## 1. Program Completion

Some studies point to modest reductions in recidivism among those who complete treatment. For instance, one study found that men who completed more group sessions were less likely to engage in repeat violence compared to those who failed to complete any or only completed a few sessions.<sup>30</sup> The conclusiveness of this finding is uncertain, however, in light of a study that produced opposite results finding that the number of sessions completed did not significantly influence recidivism.<sup>31</sup>

## 2. Factors Influencing Intake and Program Attrition

One study found that as many as half of men who initially contact a program for an intake assessment fail to appear for the assessment.<sup>32</sup> Successful completion of intake assessment increased between 64-95 percent when a 30-day follow-up court contact was required.<sup>33</sup> Several factors have found to be related to program attrition though there is still substantial debate in the research about the relative strength of these factors: low socio-economic status, low educational level, age (younger offenders), unemployment, prior criminal history, substance abuse and high pathology.<sup>34</sup>

## 3. Stake in Conformity

The factors cited relating to attrition rates are the flip side of the factors associated with having a stake in conformity. Some empirical evidence exists to support the notion that variables that represent an individual's desire to conform to societal norms are associated with lower levels of future violence. These variables include being married, residential stability, employment and higher socio-economic status.<sup>35</sup>

## 4. Length of Treatment

One study found some evidence that a longer treatment period (26 weeks vs. 8 weeks) resulted in less recidivism among those who completed the full treatment program.<sup>36</sup> The longer period group also did experience a higher attrition rate. Other studies, however, have found no differences between longer and shorter treatment periods.<sup>37</sup>

## 5. Cognitive Behavioral Programs

Some cognitive behavioral programs have been found to modestly impact future offending among batterers, particularly among high-risk offenders.<sup>38</sup> The most effective cognitive behavioral programs for reducing recidivism are those that focus on attitudes, values and beliefs of offenders.<sup>39</sup>

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<sup>30</sup> Gordon and Moriarty (2003); Gondolf (2002)

<sup>31</sup> Dunford (2000)

<sup>32</sup> Gondolf and Foster (2001)

<sup>33</sup> Gondolf (2000)

<sup>34</sup> Brown, O'Leary and Feldbau (1997); DeHart, Kennerly, L. Burke and Follingstad, (1999); Scott and Wolfe (2003); and Daly and Pelowski (2000)

<sup>35</sup> Jackson, Feder, Forde, Davis, Maxwell and Taylor (2003)

<sup>36</sup> Jackson, Feder, Forde, Davis, Maxwell and Taylor (2003)

<sup>37</sup> Snow Jones and Gondolf (2001)

<sup>38</sup> Wilson, Bouffard and MacKenzie (2005)

<sup>39</sup> Andrews et al. (1990); Andrews and Dowden (1999, 2006); Dowden and Andrews (1999a, 1999b); Lipsey and Wilson (1998); Lowenkamp, Latessa and Holsinger (2006)

## Widely Used Batterer Intervention Programs

Program	Description	Length of Intervention
<b>Duluth</b>	<p>Follows a structured curriculum in a classroom format to explore violence as a means of maintaining power and control.</p> <ul style="list-style-type: none"> <li>• In this model, the batterer establishes and maintains control over the victim through coercion and intimidation punctuated by periods of violence.</li> <li>• Emphasizes the development of critical thinking skills on a host of central themes such as respect, support, trust, and negotiation.</li> <li>• Grounded in emphasis on community response to the problem.</li> </ul>	Variable
<b>AMEND</b> Abusive Men Exploring New Directions	<p>Focuses on establishing accountability, increasing awareness of the social context of domestic violence and developing new skills.</p> <ul style="list-style-type: none"> <li>• Program consists of 4 stages. The first two stages involve intensive education and confrontation to address batterer’s denial.</li> <li>• The third stage is group therapy designed to help the batterer see his behavior patterns, take responsibility and make a plan to avoid violence in the future.</li> <li>• The final stage is optional and involves community service and political action to stop domestic violence.</li> </ul>	<p>Variable period of intervention from 36 months to 5 years.</p> <ul style="list-style-type: none"> <li>• Most batterers are assigned to 36 weeks of treatment by courts.</li> </ul>
<b>Emerge</b>	<p>Combines cognitive-behavioral techniques with a group therapy approach that encourages members to hold one another accountable for their behavior.</p> <ul style="list-style-type: none"> <li>• More flexible and interactive than programs based on the Duluth model.</li> <li>• Two phases: First phase focuses on education and skill building. Second phase is group therapy that blends cognitive-behavioral approaches with a group process focused on accountability.</li> <li>• Focuses on the broader relationship between victim and offender and not just the violent incident.</li> <li>• Participants identify favored control tactics and focus on correcting that behavior.</li> </ul>	<p>Program lasts 48 weeks in two phases:</p> <ul style="list-style-type: none"> <li>• 8 weeks of orientation</li> <li>• 40 weeks of group work</li> </ul>

## Recommendations for Supervision Practices and Policies

Most domestic violence offenders are released to community supervision. Given the limited evidence of effectiveness of current batterer interventions in reducing future abuse, community supervision is critical to ensuring victim safety.

- **Develop individualized supervision strategies and case plans.**  
Domestic violence offenders should not be treated as a homogeneous group or merely misdemeanor offenders. Case management plans and supervision strategies should be guided by information gleaned from the risk assessment. A one-size-fits-all approach with batterers will

not provide sufficient protection for victims of domestic violence. Special conditions can be developed to respond to needs and risks specific to the case at hand.

- **Know your population.**

Research has firmly demonstrated that domestic violence offenders come from all walks of life. Some may have socioeconomic backgrounds and a criminal history that is similar to offenders on a general probation caseload while others will have a steady job, comfortable income, and no prior exposure to the criminal justice system. Probation officers experienced in working with domestic violence offenders know that this population—despite their specific background or history—is particularly adept at using manipulation techniques.

Domestic violence offenders often minimize the crime and attempt to blame the victim, the criminal justice system, substance use or anything else that takes the focus off the offender and excuses the behavior. Offenders will also often try to recruit the probation officer to be an ally by making light of the offense or asking rhetorical questions about what the officer would have done in a similar situation. Probation officers need to send a clear message that the offender's behavior was wrong and that any future abuse will not be tolerated.

- **Focus supervision time on criminogenic needs.**

While it is important to spend supervision time discussing enforcement issues such as compliance with probation conditions, a fair amount of time should be reserved for discussing the offender's progress in obtaining services and what the probationer is getting out of the treatment. Many probation departments are now using motivational interviewing techniques as a tool to facilitating more open dialogue and assist officers in using motivational techniques for working with offenders.

- **Communicate with victims.**

As discussed above, victims are often reluctant to report ongoing violent incidents to the police. A victim may, however, talk to a probation officer who makes an effort to stay in regular contact. Having periodic conversations with victims is important both to ensure that the offender is refraining from further abuse and to gauge how the offender is responding to treatment and supervision. Perhaps the offender is not being physically abusive but has continued to be aggressive, hostile, or threatening. This is important information for the probation officer to have in dealing with the offender and so the probation officer can refer the victim to needed resources.

- **Swift and certain response to probation violations.**

It is critical to respond to new incidents of abuse even if it did not result in an arrest or criminal charges. Again, talking to the victim is an important part of remaining informed about what is happening once the offender leaves treatment or the probation officer's office. Violation hearings could be triggered by victim reports of violence, issuance of a new restraining order, an arrest for another non-domestic violence crime, missed or positive drug tests and failure to participate in batterer interventions.

- **Communicate with treatment providers.**

Although batterer interventions have not been shown to significantly reduce future abuse, participation can be another monitoring tool for probation officers. Communicating regularly with treatment providers can provide probation officers another window into the offender's

world and the information gleaned could help officers focus on areas of concern. For example, it would be helpful to know which offenders fail to enroll, attend inconsistently or are routinely disruptive. Failure to participate in batterer programs is a predictor of future abuse.

- **Partner with treatment providers to conduct domestic violence risk assessments.**  
Probation departments could partner with treatment providers to conduct domestic violence trailer assessments following the general risk assessment. Doing so may free up more staff time for direct supervision, capitalize on the expertise of the treatment providers and facilitate the development of stronger collaborative relationships between domestic violence treatment providers and probation staff.

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## Appendix A: Domestic Violence & General Risk Assessment Tools

Tool	Description & Items	Length	Strengths & Limitations	
Domestic Violence Risk Assessment Tools	<b>SARA</b> <sup>40</sup> Spousal Assault Risk Appraisal	This is the most widely used structured assessment tool for domestic violence. It screens for empirically established risk factors for domestic violence among adult males. Designed as a guide for structuring professional judgment rather than providing firm cut-off points for decision-making. <ul style="list-style-type: none"> <li>▪ <u>Static Factors</u>: general and domestic violence criminal history</li> <li>▪ <u>Dynamic Factors</u>: psychosocial adjustment, aversive attitudes, employment issues, thinking errors associated with escalation in assaults, weapon use, threatening statements, and violating restraining orders.</li> <li>▪ <u>Sources of information</u>: offender, victim, collateral records, psychological assessments</li> </ul>	20 items	+ Uses well-established psychometric properties. + Easy to score and risk management flows well from scores. - Variables are derived from clinical judgments rather than actuarial. <sup>41</sup> - Does not assess relationship status.
	<b>DVSI</b> <sup>42</sup> Domestic Violence Screening Instrument	Used by the State of Hawaii to determine supervision levels for domestic violence offenders. <ul style="list-style-type: none"> <li>▪ <u>Static Factors</u>: general and DV criminal history, prior DV treatment, prior substance abuse treatment, child witnesses, current restraining order, community supervision status at time of offense, family DV history</li> <li>▪ <u>Dynamic Factors</u>: employment status</li> <li>▪ <u>Sources of information</u>: collateral records</li> </ul>	12 items	+ Instrument has been demonstrated to be valid on a sample of Hawaiian offenders. - Risk level cut-offs did not significantly vary with regard to domestic violence re-arrest recidivism rates.

<sup>40</sup> Kropp and Hart (2000). The Spousal Risk Assessment (SARA) Guide: Reliability and Validity in Adult Male Offenders. *Law and Human Behavior*, 24, 101-118 and Kropp, P.R. (2004). Some Questions Regarding Spousal Assault Risk Assessment. *Violence Against Women*, 10(6), 676-697.

<sup>41</sup> Clinical assessments use professional judgment, general intake questionnaires, or psycho-social forms. Actuarial assessment processes involve using research-derived items that are correlated with recidivism and antisocial behavior and the tool itself has been empirically demonstrated to be statistically predictive of specific offender outcomes.

<sup>42</sup> Hisashima, J. (2008). Validation Study of the Domestic Violence Screening Instrument (DVSI). See [http://hawaii.gov/icis/documents/DVSI%20Validation%202003-2007%20\(Jan%202008\).pdf](http://hawaii.gov/icis/documents/DVSI%20Validation%202003-2007%20(Jan%202008).pdf).

Tool	Description & Items	Length	Strengths & Limitations	
Domestic Violence Risk Assessment Tools	<b>ODARA</b> <sup>43</sup> Ontario Domestic Assault Risk Assessment	Unlike the other DV-specific risk assessments where items were developed based on theory or prior research, ODARA items were developed empirically. Items that could be reliably assessed by the police were tested and the scale was developed from those items most closely associated with subsequent police contact for domestic violence. <ul style="list-style-type: none"> <li>13 yes/no items that include questions about substance abuse, offender's history of violence, number of children, and victim's barriers to support.</li> </ul>	13 items	<ul style="list-style-type: none"> <li>+ Easy to complete with generally readily available information.</li> <li>+ ODARA appears to have the strongest results from the research so far.</li> <li>- ODARA is also one of the newer scales and has less current research in the DV literature.</li> </ul>
	<b>DA</b> <sup>44</sup> Danger Assessment	This is the oldest DV risk assessment tool on this list that is still in use. Initially it was developed for use in emergency rooms to assess a woman's risk of being killed by her partner. It is now also used to assess the likelihood of spousal assault recidivism. <sup>45</sup> <ul style="list-style-type: none"> <li>To be completed by the female victim in collaboration with someone trained to administer the tool.</li> <li>The scale includes a timeline to document the frequency and severity of abuse, 20 yes/no questions (e.g., Does he own a gun?, Is he unemployed?) and an algorithm to translate the responses into risk categories.</li> </ul>	20 item checklist and a calendar	<ul style="list-style-type: none"> <li>+ Easy to use and interpret.</li> <li>+ Psychometric properties have been published.</li> <li>+ Replications on large samples have been promising.</li> </ul>
	<b>PAPS</b> <sup>46</sup> Partner Abuse Prognostic Scale	Development of items on the PAPS scale were informed by both offenders and victims. For use with adult males. Provides cut-off scores for determining risk levels.	17 items	<ul style="list-style-type: none"> <li>+ Uses well-established risk factors</li> <li>+ Reported psychometric data are promising</li> </ul>

<sup>43</sup> Hilton, N.Z., G.T. Harris, M.E. Rice, C. Lang, C.A. Cormier, and K.J. Lines (2004). A Brief Actuarial Assessment for the Prediction of Wife Assault Recidivism: The Ontario Domestic Assault Risk Assessment. *Psychological Assessment*, 16, 267-275.

<sup>44</sup> Campbell, J.C. (1986). Nursing Assessment for Risk of Homicide with Battered Women. *Advances in Nursing Science*, 8, 36-51 and J.C. Campbell (2005). Assessing Dangerousness in Domestic Violence Cases: History, Challenges and Opportunities. *Criminology and Public Policy*, 4, 653-672.

<sup>45</sup> Heckert, D.A. and E.W. Gondolf (2004). Battered Women's Perceptions of Risk versus Risk Factors and Instruments in Predicting Repeat Reassault. *Journal of Interpersonal Violence*, 19(7), 778-800.

<sup>46</sup> Murphy, M.C., M.T. Morrell, D.J. Elliott, and M.N. Neavans (2003). A Prognostic Indicator Scale for the Treatment of Partner Abuse Perpetrators, *Journal of Interpersonal Violence*, 18 (9): 1087-1095.

Tool		Description & Items	Length	Strengths & Limitations
Domestic Violence Risk Assessment Tools	<b>CTS/CTS2</b> Conflict Tactics Scale	One of the most widely used tools for measuring interpersonal violence between married or co-habiting couples. Each question is asked in terms of both respondent's and partner's behavior. <ul style="list-style-type: none"> <li>CTS2 now includes items to assess for psychological aggression, sexual coercion, and negotiation as well as physical assault and injury.</li> </ul>	39 items	- Widely used research tool for indentifying intimate partner violence but not well-suited for risk assessment purposes.
	<b>KFS</b> Kerry's Femicide Scale	Development of the scale was based on information gathered from men convicted of killing their partner. Scale is unique in that it identifies characteristics of men who kill women with whom they have been in an intimate relationship.		- Scale only takes into account the most extreme violence (murder).
Tool		Description & Items	Length	Strengths & Limitations
General Risk Assessment Tools	<b>STRONG</b> Level of Service Inventory	STRONG is a 4th-generation risk and needs assessment tool delivered through a web-based interface. Two components: <ul style="list-style-type: none"> <li>26 item static risk assessment</li> <li>70 item needs assessment</li> </ul>	Variable	+ Developed to take into account risks, needs and responsivity measures.
	<b>LSI-R</b> Level of Service Inventory	This third generation instrument is a valid measure of both general and violent recidivism and has been reliably used to identify more specific domestic violence outcomes. Scale has also been able to predict treatment drop-out.	54 items	+ One of the most widely used and independently validated risk and needs assessment instruments available.
	<b>COMPAS</b>	This fourth generation general risk assessment tool is designed to predict violence, recidivism, failure to appear, and non-compliance with probation conditions. <ul style="list-style-type: none"> <li>Items vary based on which scales an agency selects for offender assessment.</li> </ul>	Variable	+ COMPAS has an automated case management software that can be combined with other tools to help inform criminogenic need targets for specific offender populations.  - Multiple versions of the COMPAS have been developed but few independently reviewed validation studies have been conducted.

**Appendix B:**  
**Risk Assessment Tools Used by California Probation Departments**

County	Assessment #1	Used for:	Assessment #2	Used for:	Assessment #3	Used for:
Alameda	LS/CMI	New probationers, follow up-and those being reassigned	Static 99	Defendants who have either been charged or convicted	-	-
Alpine	-	-	-	-	-	-
Amador	-	-	-	-	-	-
Butte	STRONG	New and every 6 months on Active Supervision Cases	-	-	-	-
Calaveras	COMPAS	All	-	-	-	-
Colusa	-	-	-	-	-	-
Contra Costa	CAIS	-	Static 99-R	-	-	-
Del Norte	Static 99	Sex Offenders	STRONG	Felony Probation	-	-
El Dorado	Static 99-R	Adult Male Sex Offenders	Adult Probation Risk	Electronic Monitoring Eligibility	-	-
Fresno	Static 99	Sex offenders / new at time of RPO	DRI-II	Pride grant (DUI offender); new 6 months	-	-
Glenn	-	-	-	-	-	-
Humboldt	STRONG	-	Static 99	Sex offenders	-	-
Imperial	-	-	-	-	-	-
Inyo	STRONG	All clients	Static 99	Sex offenders	-	-
Kern	Static 99	Sex offenders	STRONG	All felony probationers	STRONG ONG	Selected high risk probationers
Kings	-	-	-	-	-	-
Lake	-	-	-	-	-	-
Lassen	STRONG	New cases	-	-	-	-

County	Assessment #1	Used for:	Assessment #2	Used for:	Assessment #3	Used for:
Los Angeles	-	-	-	-	-	-
Madera	LSI-R	New and every felony probationer	Static 99-R	Registered 290 PC sex offenders.	-	-
Marin	LSI-SV	Investigations	LSCMI	Supervision	SARA	DV
Mariposa	-	-	-	-	-	-
Mendocino	STRONG	All felony probationers prior to caseload assignment.	-	-	-	-
Merced	LSI-R	All offenders	Static 99	Sex offenders	-	-
Modoc	-	-	-	-	-	-
Mono	-	-	-	-	-	-
Monterey	Proxy	Risk	Static 99-R	Sex offenders	STR	Static Risk
Napa	LS/CMI	New probationers and transfers	LSI/RSV	Post sentence if not assessed via LS/CMI Pre-sentence	Static 99	All sex offender cases
Nevada	STRONG	Felony and misdemeanor	-	-	-	-
Orange	NIC Risk Needs	New/every 6 months with regular probationers	SARA	DV probationers for case planning	Brief Homicide Assessment	DV Probationers
Placer	Static 99	Sex Offenders	DRII	DUI Offenders	-	-
Plumas	-	-	-	-	-	-
Riverside	COMPAS	Adult clients	Static 99-R	Sex Offenders	DVSI	DV Clients
Sacramento	Static 99	290 PC registrants	STRONG	Adult probationers	LS/CMI	Adult Probationers
San Benito	LS/CMI Risk/Needs A	Felony cases	Static 99-R	Eligible sex offenders	DVSI	Domestic violence
San Bernardino	COMPAS	All formal probationers	Static 99	Sex offenders	SARA	Domestic violence

County	Assessment #1	Used for:	Assessment #2	Used for:	Assessment #3	Used for:
San Diego	COMPAS	All adults during investigation and supervision	SARA	DV Offenders, 1st time	Static 99	Sex offender registrants
San Joaquin	STRONG	All adult offenders	Static 99	Adult male sex offenders	Stable 2009	6-month reassessment for sex offender
San Luis Obispo	-	-	-	-	-	-
San Mateo	CAIS (NCCD)	New clients & reassessed every 6 months	Static 99-R	Registered sex offenders	-	-
Santa Barbara	Hawaii Proxy	Initial screening on all new offenders	COMPAS	All new offenders	SARA	All new DV offenders
Santa Clara	Dept Classification	-	WI Risk & Needs Assessment	All probationers	STATIC 99	Sex offenders
Santa Cruz	STRONG	All new cases 18-25 years old	-	-	-	-
Shasta	STRONG	-	Static 99R	Sex offenders	-	-
Sierra	-	-	-	-	-	-
Siskiyou	STRONG	Everybody we supervise	-	-	-	-
Solano	Static 99	Sex offenders	LSIR-V	New probationers	LS/CMI	New & regular probationers
Sonoma	STRONG	HR, MR & specialized caseloads	Static 99-R	Sex offenders	-	-
Stanislaus	LSI-SV LSI-R	All probationers	Static 99	Sex offenders	ORAS/PAT	In-custody pre-trial assessment
Sutter	STRONG	New cases assigned to formal probation	Static 99	Adult sex offenders	-	-
Tehama	STRONG	Classifying offenders risk to reoffend	-	-	-	-
Trinity	-	-	-	-	-	-

<b>County</b>	<b>Assessment #1</b>	<b>Used for:</b>	<b>Assessment #2</b>	<b>Used for:</b>	<b>Assessment #3</b>	<b>Used for:</b>
Tulare	Proxy	All cases	COMPAS	Medium to high risk offenders	Static 99	Sex offenders
Tuolumne	LSI-R	New and every 6 months	Static 99	Sex offenders	-	-
Ventura	Proxy	General population	Lethality	Domestic violence	Static 99-R	Sex offenders
Yolo	STRONG	New and existing probationers	Static 99-R	Sex offenders required to register 290 P.C.	-	-
Yuba	STRONG	All	Static 99-R	Sex offenders	SARA	Domestic violence
San Francisco -A	COMPAS	Probation/PSI	Static 99	Sex offenders	ODARA	Domestic violence