

INFORMATION TO USERS

This manuscript has been reproduced from the microfilm master. UMI films the text directly from the original or copy submitted. Thus, some thesis and dissertation copies are in typewriter face, while others may be from any type of computer printer.

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleedthrough, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send UMI a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

Oversize materials (e.g., maps, drawings, charts) are reproduced by sectioning the original, beginning at the upper left-hand corner and continuing from left to right in equal sections with small overlaps. Each original is also photographed in one exposure and is included in reduced form at the back of the book.

Photographs included in the original manuscript have been reproduced xerographically in this copy. Higher quality 6" x 9" black and white photographic prints are available for any photographs or illustrations appearing in this copy for an additional charge. Contact UMI directly to order.

UMI

A Bell & Howell Information Company
300 North Zeeb Road, Ann Arbor MI 48106-1346 USA
313/761-4700 800/521-0600

BOSTON UNIVERSITY
SCHOOL OF EDUCATION

THE EFFECT OF A DOMESTIC VIOLENCE PROGRAM ON
INCARCERATED BATTERERS

by

P. CHRISTOPHER MENTON
B.A., CURRY COLLEGE, 1975
Ed. M., BOSTON UNIVERSITY, 1977

Submitted in partial fulfillment of the
requirements for the degree of
Doctor of Education

1998

UMI Number: 9901949

**Copyright 1998 by
Menton, P. Christopher**

All rights reserved.

**UMI Microform 9901949
Copyright 1998, by UMI Company. All rights reserved.**

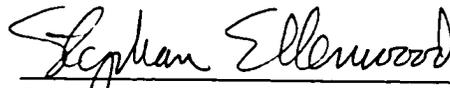
**This microform edition is protected against unauthorized
copying under Title 17, United States Code.**

UMI
300 North Zeeb Road
Ann Arbor, MI 48103

© Copyright by P CHRISTOPHER MENTON, 1998

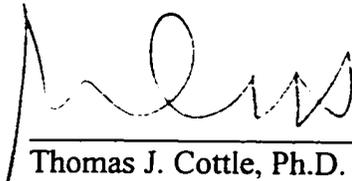
Approved by

First Reader



Stephan Ellenwood, Ph.D.
Professor of Education

Second Reader



Thomas J. Cottle, Ph.D.
Professor of Education

Third Reader



Michael D. Shively, Ph.D.
Professor of Criminal Justice

This dissertation is
dedicated to my
parents and couples like them
who choose
virtue and reason

ACKNOWLEDGMENTS

An actress upon winning an Oscar thanked everyone she had ever met. I, too, am grateful to the same extent. However, this acknowledgement focuses on those who directly aided in the writing of this study. My partner, Judy Menton receives first billing. Her support runs the spectrum from moral to technical. Her faith and patience are reminiscent of Job's.

My readers more than fulfilled their responsibilities. A program at Boston University was something I was convinced possible by Stephan Ellenwood. His matter-of-fact attitude was quieting. He made the road ahead seem traversable and was a staying force. I am awed by Tom Cottle's critique of my work. His mentoring lifted me. Through Michael Shively I viewed this study as logistically possible albeit needing careful construction. His acuity with research methods and his guidance of my prior correctional research forays lent sureness to all the steps I undertook.

Many of the staff at the Norfolk County Sheriff's Office and Correction Center provided invaluable assistance to this work. Andrea Cooper was the originator of the DVP program. Her genuine nature, attention to record keeping, and the access she provided allowed me to tell this story.

The faculty and staff at the School of Education made learning fun. The support and interest of Kevin Ryan and Phil Tate made a difference in my work. Edwin Delattre's encouragement has been a tonic. The assistance of Nancy Burrell and John Houlihan

helped me uncover the story in the words and data I generated.

A large part of this study was drawn from the work of Marsha Della-Guistina. Her willingness to share videotapes that captured the words and expressions of batterers in treatment added a strong dimension to this study. Beth Walsh and Michael Asher kept me current with a flood of readings. They and Mary Connor provided listening ears to vent frustrations and to bounce ideas off. Jeanne Regan's prodding allowed for no looking back. But when I looked up from the work I saw Nathan and Dina looking back at me, maybe wanting help with their homework, or a ride. Their belief in their father strengthened my belief in myself

THE EFFECT OF A DOMESTIC VIOLENCE PROGRAM ON
INCARCERATED BATTERERS

(Order No.)

P. CHRISTOPHER MENTON

Boston University, School of Education, 1998

Major Professor: Stephan Ellenwood

Professor of Education

Abstract

This study examines the effect of a domestic violence intervention program on men incarcerated for spousal battering. The program model, rate of recidivism and participant dialogue were all sources of data. The use of a three-phase data assembly and analysis produced an extensive study of a treatment for incarcerated batterers, a topic that has heretofore received only modest attention in social science research.

The first phase of this study was a program evaluation of the Domestic Violence Program (DVP) at the Norfolk County Sheriff's Office and Correctional Center (NCSOCC) in Dedham, Massachusetts. The structure and content of the DVP was compared to existing cognitive behavioral models in the fields of batterer intervention and corrections. In the second phase, the records of 306 former inmates of the NCSOCC were analyzed to determine rates of recidivism. Records were divided into three comparison groups of batterers: those who received the treatment, those who declined, and those who did not have an opportunity to receive the treatment. An offender

seriousness grid based on the Massachusetts Sentencing Commission Guidelines was developed and used to predict recidivism differences among comparative groups. The third phase of this study analyzed the dialogue of spousal batterers in the DVP sessions. The analysis used a process coding method. One nine-week cycle of sessions was observed by the researcher. A second nine week cycle of sessions was videotaped and viewed by the researcher. Dialogue from the first, middle, and final sessions of the two nine week cycles were analyzed for evidence of cognitive restructuring within the incarcerated batterers participating in the DVP.

It was concluded that: 1) the DVP in structure and content was similar to other effective cognitive behavioral intervention models; 2) the treatment group was made up of more serious offenders and should have recidivated at a rate higher than the group that had no opportunity for treatment. The treatment group however recidivated at a similar rate to the comparison groups; and 3) participants demonstrated cognitive restructuring.

Batterers and those who in the past battered but are currently convicted on other crimes, make up a substantial segment of those incarcerated in America. Therefore it is important to know what are effective interventions with incarcerated batterers. Treatment in the community stops when the batterer is jailed. Jailing becomes the intervention; it provides temporary protection for the abused. The DVP was an effective intervention for spousal battering. The DVP improved the intervention of jail and it provided treatment beyond that in the community. It gave batterers an opportunity to change their behaviors and thoughts.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	v
ABSTRACT	vii
LIST OF TABLES	xii
CHAPTER	
I. INTRODUCTION	1
Purpose	2
Rationale	2
Background	8
Definitions	21
Hypotheses	24
II. REVIEW OF THE LITERATURE	25
Causes of Domestic Violence	25
Treatment Approaches	31
Effective Corrections	38
Summary	44
III. DESIGN OF STUDY	45
Introduction	45
Subjects	48
Method of Treatment	53

	Data Gathering	53
	Treatment of the Data	55
	Limitations	57
	Summary	60
IV.	ANALYSIS OF DATA	62
	Overview of Study Design	62
	Comparison of Tenets, Standards, and Principles	62
	Effective Correctional Strategies	70
	Analysis of Statistics	76
	Offender Seriousness	79
	Recidivism Rates	89
	Type of Group Facilitation	96
	Cognitive Restructuring	99
	First Session	99
	Middle Session	101
	Final Session	104
	Summary	107
V.	CONCLUSIONS, DISCUSSION, AND RECOMMENDATIONS	108
	Conclusions	108
	Discussion	114
	Recommendations	117

Epilogue	122
APPENDICES	
A. SCREENING FORM	123
B. PROGRAM DESCRIPTION	137
C. VARIABLES LIST	140
D. VARIABLE FREQUENCIES TABLES	144
E. HISTORY AND FAMILY OF ORIGIN EXERCISE	167
F. PERMISSION	174
G. SESSION TRANSCRIPTS	178
REFERENCES	189
VITA	199

LIST OF TABLES

Table	Page
1. Background Characteristics of the Total Sample	51
2. DVP Comparative Analysis to Amend	63
3. DVP Comparative Analysis to Massachusetts Guidelines and Standards for Certified Batterers Programs, Section 4, Intervention Methodology	67
4. DVP Comparative Analysis to Characteristics of Effective Corrections Programs	74
5. Background Characteristics by Group	77
6. Actual Time Served	78
7. Massachusetts Sentencing Guidelines Grid	85
8. Offender Seriousness Grid	86
9. Offender Seriousness Rank by Group	87
10. Offender Seriousness Score by Group	88
11. Reoffended by Group	90
12. Apparent Domestic Violence - Reoffended by Group	93
13. Recidivism Measures by Intervention Group	97
14. Outcome Measure by Form of Group Leadership	98

15.	Witness to Parental Violence and/or Subject of Abuse	
	Recidivism Total Sample Self-Reported During Screening	103
16.	Witness to Parental Violence and/or Subject of Abuse	
	Recidivism Completer Group Sample Self-Reported During	
	Screening	103

Appendix Tables

17.	Ages of Sample Subjects	145
18.	Race of Sample Subjects	146
19.	Marital Status	146
20.	Highest Education Level Completed	147
21.	Learning Disability	147
22.	Head Injury	148
23.	Security Rating	148
24.	Mental Health History	149
24.	Mental Health Commitments	149
26.	Substance Abuse Treatment	150
27.	Substance Abuse	150
28.	In Substance Abuse Recovery	151
29.	Number of Children	151
30.	Family of Origin	152
31.	Military Service	152

Appendix Tables, continued

32.	Witness to Family Violence	153
33.	Abused as a Child	153
34.	Age of First Court Appearance	154
35.	Community Batterers Program	155
36.	Religion	155
37.	Occupation	156
38.	Committing Court	156
39.	Prior Offenses - Number	157
40.	Type of Prior Offenses	160
41.	Current Charge	160
42.	Sentence in Months	161
43.	Type of Release	162
44.	Knowledge That Domestic Violence Law Resulted in Jail	162
45.	Who Caused Jail	163
46.	Type of New Charge	163
47.	Number of New Charges	164
48.	Number of Guilty New Charges	165
49.	Number of Pending New Charges	166
50.	Months Free	166

CHAPTER I

INTRODUCTION

In the early 1990's a district court judge had a conversation with his son. A few years before the judge had taken a tour of a correction facility designed to hold and treat drunk drivers. His son had been an official at that facility which compelled incarcerated drunk drivers to participate in treatment. Both believed the facility was effective. During the conversation the judge suggested that a correction facility for domestic violence offenders be established. The facility would have an intense treatment focus. His son wrote a proposal and submitted it to the state commissioner of correction, a state senator and others. No action resulted. Meanwhile, this same judge presided over an arraignment of a spousal batterer. The prosecutor believed the man was a threat to the safety of his wife and asked that bail be set at \$5000, at that time a relatively high sum for a domestic violence offense. The judge agreed with the recommendation and set bail at \$5000. The arraigned man posted the bail, tracked his wife down to an in-law's home in the next county and shot her dead. On the television and in the newspapers, the prosecutor for that county said the judge did not act responsibly by setting such a low bail. That judge was the researcher's father. This dissertation evolved out of the original proposal for responding to spousal batterers.

Purpose

The purpose of this study is to investigate the effects of a domestic violence intervention program on incarcerated spousal batterers. One gauge for understanding effectiveness is comparing one specific program, the Domestic Violence Program (DVP), to structure, context, and content of existing models. A second gauge of effectiveness is the rate of recidivism among program participants, the rate at which new arrests are made. A third gauge for identifying effectiveness is determining whether there has been cognitive restructuring in program participants detected through changes in the character of their dialogue.

Rationale

Historically, willingness to respond to spousal battering is a recent development. The first women's shelters opened in the United States in the mid-1970's. "By 1985, an estimated 780 battered women shelters were operating nationwide" (Carden, 1994). Currently, there are programs operating in over 3,200 counties within the United States. Even more recent than shelters are programs for batterers (Star, 1983). Carden notes that the first program in the United States for batterers opened in Massachusetts in 1977. Massachusetts has a number of batterer intervention programs as well as a certification process for these programs. Increased public focus on battering over the past 15 years has caused criminal justice agencies to revise their responses. The mission and function of the police have expanded and changed to correspond to the importance of the problem.

Domestic violence makes up a major portion of incoming police calls. The procedures for dealing with these calls have become increasingly complex and consume more time and more expense than has been historically devoted to domestic violence calls. The cost of spousal battering includes the social resources designated to keep order. Regardless of the amount of attention paid by criminal justice agencies to the issue of domestic violence, Uniform Crime Report(UCR) statistics show that a large number of violent crimes against women are committed by spouses or boyfriends.

About three-quarters of all lone-offender violence against women was perpetrated by an offender whom the victim knew. In 29% of all violence against women by a lone offender, the perpetrator was a husband, ex-husband, boyfriend, or ex-boyfriend--an intimate. Female victims of violent incidents were more likely to be injured when the perpetrator was an intimate than when the assailant was a stranger.(Siegel, 1996)

The criminal victimization of women by their intimates or former intimates - ex-husbands, ex-boyfriends - is under-reported according to a progression of statistical surveys. The four statistical surveys examined in this discussion are the UCR; the National Crime Victimization Survey (NCVS); and the two National Surveys on Domestic Violence (NSDV).

Concerning crime in general, Eskridge (1995) compared the UCR total of 1.9 million violent crimes in 1993 to the NCVS total of 10.9 million violent crimes for the same year. It is important to note that the NCVS consistently is significantly higher in its number of incidents of crime than is the UCR which is compiled by the FBI (Bastian,

1995). The UCR only tabulates those crimes that are reported to the police. The NCVS measures how many crimes took place and does not consider whether they have been reported. Eskridge (1995) concludes that there is a substantial under-reporting of crime in general.

The UCR tabulates crimes reported, while the NCVS tabulates crimes perceived by respondents in a demographically balanced survey. Regarding incidences of domestic violence, even the NCVS under-reports. The NCVS seeks to know about crime rather than about family violence. Gelles and Straus (1988) note the discrepancy between the second NSDV and the NCVS for the same year. The 1986 NSDV rate for incidences of violence in the home was 164 per 1,000 (Gelles and Straus, 1990, p. 97). That number translates to a population-wide figure of eight million women being battered by their husbands annually. Interestingly, the rate was similar for female to male domestic violence. Gelles and his associates, however, explain some mitigating factors that discount the seriousness of female to male violence. Two mitigating factors why female to male violence is less significant are severity and self defense. Physical differences between men and women generally means violence by a woman will have less force and meet more resistance. This dissertation does not examine female to male intimate violence.

The NSDV rate of 164 per 1,000 is significantly higher than the 2.2 per 1,000 figure of the NCVS of the same year. Gelles and Straus explain that the questions asked were different. The NCVS initially asks questions such as, "Have you been the victim of

a crime?" Many perpetrators and victims do not consider spousal battering to be a crime and would be screened out by answering "No" to that initial question. In further analysis of the data, Gelles and Straus (1990) assert that over 1.8 million women in the United States in 1985 were victims of severe assault by their partners. They believe this figure to be an underestimate. Even using the most conservative figures on spousal violence, which would be those from the UCR, criminal behavior within a household is a large part of the violent crime. The NCVS researchers believe the amount of this criminal violence in large measure remains undetected. Therefore, we can only analyze costs to social service systems associated with the violence through estimation and extrapolation.

There is a human cost associated with spousal battering. The effects upon the victims and even upon the perpetrator are long-term. The cost in individual terms also costs society as a whole. One such cost can be seen as the degradation in quality of life for the victims and their children. Family and friends of victims are affected. Many believe that the degradation of quality of life for the victims and children, while unquantifiable, is an important factor in an analysis of this problem (Herman, 1992, Gelles, 1988, Ressler et al., 1991). Spousal violence has immediate effects upon the victim and her children and there can be long term consequences in the society at large. Children from abusive families can be expected to have a higher rate of dysfunctional abnormalities - inability to trust, deceitful behavior - qualities that do not serve the societal systems. The effects on children start by damaging the individual. The damaged individual may as an adult cause problems on a social level. Through the family's cues

and signals, social learning takes place. If these signals, or this learning, condones violence as the preferred solution to problems, then it is reasonable to assume that the following generation will embrace this concept as well. Evidence exists (Herman, 1992, Ressler et al., 1991) that children who witness spousal battering have a tendency to utilize the same methods when they themselves enter into an adult intimate relationship.

Ultimately, we must examine the cost represented by the actual harm to the victimized members of the society. Prior to universal suffrage and the social developments encouraged by late twentieth century feminism, full citizenship for wives did not exist. Spousal battering has become a point of focus for feminist efforts (Adams, 1989 A). Arguably the current status of married women in many cases remains unequal to that of their husbands. This inferior status makes women vulnerable (Gelles & Straus, 1988). The social attitudes, however, are changing with regard to women's rights and, therefore, spousal battering. The target of spousal battering is a citizen vested with the full rights and privileges of any other citizen in this nation. Gelles and Straus (1988) point out this attitudinal change. In their comparative analysis of the first and second NSDV, 1975 and 1986 respectively, they note a significant drop in the incidences of spousal battering reported. Gelles and Straus (1988) believe an important cause for this drop is the declining social acceptance of battering from the time of the first survey to that of the second survey. It is unknown whether this represents a decrease in the actual number of instances of battering or an increase in the reluctance to admit to battering. Perhaps it is a bit of both. With society's disapproval of battering, some victims may feel

empowered to act, while feelings of shame could cause others to become further isolated (1988).

The costs of spousal battering have been absorbed by social services and the affected individuals. Society's willingness to bear the cost, thus to accept battering as a social norm, is itself a concern. Recently the U.S. Surgeon General found that "battering of women by husbands, ex-husbands or lovers [is] the single largest cause of injury to women in the United States" (Siegel 1996, p.2135). Four women in America each day die from spousal abuse (Daimant, 1997). The heavy costs, combined with the repugnance of these acts, justify the study of a domestic violence intervention program.

A discussion of cost is important to demonstrate the gravity of the problem and the reasonableness of studying an intervention program for incarcerated batterers. Costs can be divided into two categories: the financial costs of the demands on social system resources; and the more subtle costs in individual terms. Financial costs to society include medical care, counseling, social services, and legal aid. These associated costs are a drain upon social resources. The medical care of battered victims' personal injuries burdens the healthcare system. One estimate is that 18% of hospital emergency room admissions are to treat injuries caused by domestic violence (Siegel 1996). Hospital admissions for injuries from battering is one issue. The medical costs from the long term deteriorating health also factor into costs. In the current healthcare financial climate, the treatment of these intentional injuries translate into substantial dollar amounts. Hospitals take great pains to absorb no financial loss, so this cost is borne by society. Furthermore,

violence within the family gives rise to the need for social service agencies. The mission of social service agencies is to provide a social safety net. Yet for many agencies, ensuring the client's physical safety has become the "de facto" function. Entire branches of the social service system have sprung up around the issues of domestic violence. One example is the Society for the Prevention of Cruelty to Children. Others like shelters for battered women are more recent in origin and have grown extensively over the last 20 years.

Background

Viewing spousal battering as a criminal act warranting imprisonment is a recent development. Incarceration for violating a restraining order or spousal assault has not been the preferred approach within the field of domestic abuse intervention (Fagan, 1996; Rosenbaum, Gearan, & Ondovic, 1997; Star, 1983). However, deprivation of liberty is a serious measure, meant to impress upon the batterer the gravity with which these acts are held. In the last twenty years, the rates incarcerated for most other types of criminals has increased. The overall rate of incarceration has increased four fold in the last two decades (American Correctional Association, 1993). In light of this, it is a wonder that more batterers are not in jail. As Gelles and Straus (1988) explain, batterers have not been thought of as criminals and therefore have not been candidates for incarceration.

Siegel's (1996) extensive article on the history of wife beating in the United States, *"The Rule of Love;" Wife Beating as Prerogative and Privacy*, traces the

progression of legal views regarding spousal battering. The English common law of the 1600's is her starting point. She relates this history to a contemporary reluctance by some in the legal system to aggressively pursue remedies for wife beating. Siegel (1996) states that under the euphemism of chastisement, corporal punishment upon a wife was normal. It was an interwoven part of this country's early history. "Chastisement" was the justification for husbands to beat their wives. The law in the 1600's took the view that wives were property as were slaves, children, and pressed sailors. This common law gave license to husbands to abuse their wives. Within the context of that time, the only articulated limits on a husband's abusive behavior were not to kill or permanently injure his wife. Even if these parameters were exceeded, wives who were viewed as property, had little or no legal redress. The family was a hierarchical unit similar and akin to government units. The husband was the master of this small government-like unit (1996). As the concept of humans as property was increasingly questioned, battering, although legally permitted, came to need new justifications. This need arose in the 1800's, in large measure, due to the abolitionist movement. The logic that Siegel recounts is that the master-slave relationship, which the marital relationship of the time mirrored, was falling into disrepute. Chastisement was a vestige of slavery and had to be revised (1996). Even prior to the 1800's, the concept of chastisement was being attributed to those other people. Chastisement was being distanced as an excuse to batter. Chastisement was viewed through the "woozle effect," (Gelles et al., 1988). The wozzle effect is a false belief, by members of a group, that a particular activity or behavior is

being done by someone outside the group when in fact it is members within the group who are responsible. Such an effect facilitated the continued practice of chastisement. This "antiquated practice [chastisement] persisted primarily among the...lower class" (Siegel 1996). Ironically calling wife beating an "antiquated practice" in itself sanctioned battering. Battering was justified as one of the "old ways" to which more primitive (lower class) people still adhered. Wife battering is then framed as a custom, *moré*, or tradition. These qualities or attributes, once attached to battering, enhance its credibility as a behavior within the culture.

Through the 1800's, chastisement as a justification for wife beating was waning. Siegel points out that the immunity the chastisement's rationale had for the batterer was not diminished. The immunity from criminal prosecution for the wife beater stood, it needed new justification to continue. The justice system provided another justification for this immunity. The next step in preserving "de facto" immunity was judges refusing to hear domestic abuse cases. "[P]reserving the privacy of the family and to promote domestic harmony" was the rationale used. Judges, using this rationale, refrained from applying common criminal law to domestic cases (1996). During the 1800's, the status of many disenfranchised classes or groups of people, most notably slaves, was changed through emancipation. The whole hierarchical master-slave relationship was discredited. The view of the husband as master with the right to correct his wife through chastisement was undermined. But the reticence of the judiciary and other parts of the legal system, such as police and prosecutors, to deal with wife beating issues remained (1996).

The law did change to increase the social status of wives. However, these changes in divorce and separation statutes lacked practical application. For wives, particularly wives with children, the options were inaccessible and impractical. The choice of divorce or separation would most likely throw a wife and her children into poverty. If a battered wife chose to be divorced or separated from her abusive spouse, she could not support herself (1996). Siegel suggests that over time, the law has preserved the de facto inequable status between husbands and wives. These differences became less visible, yet they remained. Reforms to the divorce and separation laws were ostensibly designed to meet the needs of abused wives. These reforms actually served quite a different purpose. They modernized a system of formal and informal immunities for wife beaters. Thus, formal and informal immunity in criminal and tort law for batterers remained (1996).

The modernization of immunity for batterers is what Siegel calls, "the rule of love which [then] supersedes the rule of force." The rule of force was a sanctioning of chastisement. The rule of love sought harmony within the family. Siegel believes this was a modernization of the patriarchal social structure. The "privacy of family and to preserve domestic harmony" was the rationale that replaced chastisement as the prevailing justification for violence and inequity within the family. The overtly accepted notion of a husband's right to use force became an internalized norm - unspoken and unseen. The unequal relationship in families continued. Women were still expected to adhere to subservient wifely roles. Inequality in marital relationships remained the rule.

The expectation was for women to be cheerful and to voluntarily submit for a happier marriage. A wife was to behave altruistically rather than in a self interested fashion (1996).

The law was not applied to acts within a marriage. Marriage was depicted as existing on a higher plain of relationship than common social interaction or organizations. The family, in other words, was distinct from other spheres of life. The family was to serve as the sanctuary from selfish individualism typically found in dealing with people outside the family. The internalized norm of wife beating had an incumbency of privacy. "The public gaze was to be shut out and the expectation was for the parties to forgive and forget" (Siegel, 1996). This gender-neutral language, such as "parties," disguised the duty upon the victim to not seek redress for beatings she received. This standard of family harmony carried with it the continued belief that spousal battering was a justified action for the woman's failure to maintain this harmony.

The facade of self-control for all individuals in a marriage was, "when the wife beater failed to exercise self-control the victim was expected to exercise self-control and bear the abuse. Interspousal litigation violated fundamental precepts of the doctrine of marital unity" (Siegel, p. 2162). This essentially provided immunity for husbands from interpersonal torts. Using a literal interpretation of tort law statutes, a battered spouse was allowed to sue her abuser. The judiciary, however, chose to interpret the meaning and intent of these laws to exclude interspousal litigation. With wives not allowed to sue, the result was continued immunity for the batterer. Batterers were permitted, under the

guise of fostering altruistic values in the families. to commit acts which would have resulted in lawsuits if committed against someone outside the family. Viewing family violence as a torts issue, making it a civil issue, kept spousal battering from being criminalized. Reconciliation was urged; punishment was a last resort. Violence was viewed as the expression of emotions, not as criminal conduct. This view of battering as an emotional expression reaches into the current era. In 1968, for example, the International Association of Police Chiefs, in their training publication, said that the arrest of a batterer would be the last resort and that arrests serve only to aggravate rather than preserve the peace (Siegel, 1996). Tracing the roots of social and justice system responses to wife beating explains how society's response evolved. An important countering social force, both in the late 1800's and the late 1900's, was the existence of women's rights movements. The issue of family violence, particularly battering, becomes an important focus for the feminist oriented/women's rights struggle. Although gains made in legal sanctions against battering in the 1800's seemed hollow, they provided a framework to build upon. Feminism of the late 1900's occurred in an entirely different social climate. For that reason, much more dramatic results are being experienced in this century than one hundred years ago. Contemporary feminism has prompted changes in the societal response to spousal battering (Adams, 1988). Without these changes, the incarceration/intervention program which this dissertation studies would not be in existence (Massachusetts General Law Annotated (MGL) Chapter 209A, as amended 1996).

In looking back at society's responses to wife beating, "response" is too narrow a concept. In U.S. history wife beating was a socially accepted behavior. As an accepted practice wife beating was effected by social cues and signals. The signals of the early colonial times in American society up into the twentieth century could be paraphrased as a progression of messages. Early signals gave the message that beating your wife was alright if she required correction and punishment. Next, signals applied modified approval which might be interpreted to say, beating your wife is alright if she requires correction and punishment, but it is kind of a low class thing to do. With overt repudiation of chastisement, the message is further modified to read, beating your wife is alright if she requires punishment and correction, but it is kind of a low class thing to do, so it is best to keep it quiet and behind closed doors. This final somewhat subliminal social message to males and also to females was reinforced by the legal realities (Siegel, 1996). 300 years ago the legal status of women was nonexistent. As the American system of justice progressed, the inclusion of women had to be won. Victories were slow and initially disingenuous laced with insincerity. The recognition of these rights was slow and initially insincere. As Siegel details, the rights of women were unequal on other plains besides marital union. Women's rights to own property, to enter into contracts and to participate in litigation were also initially nonexistent and later at best unequal in the American justice system. The prevailing image up until the 1950's was an idyllic marriage with the attentive wife existing in loving yet subordinate status to the husband. Then came the 1960's (Adams, 1988).

What has come to be known as the social upheaval of the 1960's gave rise to many organized movements with agendas protesting perceived injustices. The mainstays of this era were the civil rights movement, the anti-war movement, and feminism. The general theme of all these movements was anti-establishment. The establishment was viewed as the government, universities and large industrial corporate forces. These establishment forces protected the prevailing social mores and norms, many of which were viewed as unfair or worse by members of these protest movements (Adams, 1988). The substantial influence these movements exerted is due to simple mathematical demographics of the baby boom. At the time, the baby boomers were entering adulthood, a time of transition and rebellion. This brought a tremendous force to bear upon the existing culture. Sheer numbers of budding adults served to promote the momentum for civil rights, anti-war protests, and the growth of feminism. The influence of the women's movement continues to be felt today. Much legislation related to domestic abuse has been influenced by the forces initially set in motion during that protest era.

Over the past 20 years, the perception of battering has undergone substantial change in the public's view. Public opinion has affected the justice and social systems' responses. Many questions have been raised about male domination. The roots of male domination extend far back into the history, Eve was told the, "he [Adam] shall rule over you" (Genesis 3:16). The ability to use violence is a natural ability and vested to a ruler. The decision to use violence in specific situations is influenced by our culture. In the family setting, violence is too frequent a course of action. Historically, the response of

society and the justice system has been to simply mask the immunity of wife beaters.

However, now and for the past two decades, diminished tolerance for spousal battering is the trend. The reasons for this diminished tolerance are dictated by logic and prompted by the rising influence of women as a constituency influencing public opinion and elections.

Public opinions effect changes in social policy. Changes in statutes, in the enforcement and interpretation of these statutes, in the judicial procedures, and in the character of sanctions all are components of contemporary policy changes. The effectiveness of policy change is determined by how these components function in consort. In the case of Massachusetts the statute that covers domestic violence is entitled, "The Massachusetts General Law, Chapter 209A, Abuse Prevention." It is referred to as 209A. It was added to the Massachusetts General Laws (MGL) by a senate bill in 1978. In the last 10 years, it has been revised extensively. The punitive sanctioning for spousal batterers has increasingly become more stern and severe. The statutes in the 1800's regarding divorce, separation and spousal litigation were ineffective in protecting women from domestic violence. 209A is different. The effectiveness of 209A is constantly questioned and reviewed. Under this law, courts issue restraining orders barring accused batterers/perpetrators from contact with their victims. Continued or severe violations of this law are met with escalating sanctions. This is consistent with the national trend towards increased penalties for batterers (Fagan, 1996).

Changes in enforcement refer to police practices, procedures and policies. These

policies have undergone a substantial evolution from tacit approval of battering as recent as the 1960's, to a conciliatory mediator role in the 1970's, to a mandatory arrest policy for some types of violations of Chapter 209A. Siegel (1996) and Fagan (1995) both document that as recent as the late 1960's, police policies actively discouraged arrest in domestic matters. In the 1970's police officers received training in crisis intervention and mediation. Thus, an attempt was made to transform the police officers into family counselors. Sherman and Berk (1984) conducted a study of police responses to spousal battering calls. Police responding to cases of moderate domestic abuse were randomly assigned one of three intervention strategies. The first intervention strategy was to talk to the batterer. The second strategy was to tell the batterer to leave. The third strategy was to arrest the batterer. The arrest response yielded the lowest rate of recurrence of incidences of battering. Tolman and Edleson (1995) and Fagan (1996) point out that attempts to replicate this experiment were mixed. The comparative options to arresting in the Sherman and Berk (1984) study were narrow in range compared to other possible interventions with batterers that are available (Garner, Fagan & Maxwell, 1995).

Research on spousal batterers' intervention programs has been extensive yet inconclusive (Eisikovits & Edleson, 1989). Intervention program structures differ as do the research designs, making it difficult to determine which interventions work with which batterers. Research results only offer impressions. These impressions influence policy and practices. An example of the effect an impression has is seen in the arresting of batterers. The tracking of arrests is relevant to this study because arresting a batterer is

the first step to possible incarceration. The question about the effectiveness of arresting batterers remain. Garner, Fagan, and Maxwell, (1995) attempted to replicate the Sherman and Berk 1984 study in five cities. Of these sites, 78% failed to show a significance in lowering recidivism for arrested batterers as compared to the two alternatives - police ordering the batterer to leave and on-the-scene counseling of the couple.

A second impression has emerged that arrest in itself is not enough. The effectiveness of an arrest is enhanced by additional factors (Tolman & Edleson, 1995). Arrest, followed by intervention, is more effective than simply arrest alone (Fagan, 1996). Once arrested, additional factors are set in motion. An arrest usually prompts a court appearance. The court may issue a restraining order and mandate that the batterer attend an intervention program in the community. These programs in Massachusetts are men's groups that use a cognitive behavioral/social learning type of model (Massachusetts Department of Public Health, 1995). Court orders and mandatory programs are the additional factors that may enhance the effectiveness of arrest. However, there is a high percentage of court orders violation (Isaac, Cochran, Brown, & Adams, 1994). High also are the drop-out rates from community based batterer intervention programs. Edleson (1995) states that from one-third to one-half of those assigned to batterer groups drop out. On attrition alone, we must question the effectiveness of these programs. Dropping out of a program correlates with a higher rate of continued spousal abuse (Tolman & Edleson, 1995). Dropping out of a program and re-offending can lead to incarceration (Massachusetts Trial Court, 1994). Incarceration in these cases is used as a secondary

level intervention after less stern remedial interventions have failed. Arrest policies for batterers across the nation changed based on Sherman and Berk's study (Fagan, 1996). In Massachusetts, MGL 209A was amended to make arrest of alleged spousal batterers mandatory if police witnessed a violation of a restraining order or detecting evidence of battering. The availability of restraining orders has also changed; thirty years ago only divorced women were allowed to obtain restraining against batterers (Fagan, 1996). Under MGL 209A, anyone believing her/himself to be in danger of battering may swear to that fact in court and lodge a restraining order against their alleged perpetrator. Police and court officials who the researcher has contacted believe that the arrest process is over-used in relation to the actual need. Often times in cases of battering, arrest is neither enough of an intervention (Tolman & Edleson, 1995) nor the end of the legal process.

Change in how spousal battering is adjudicated is important in transforming social policy into meaningful action. In the past, the judiciary played a crucial role that inhibited victims' safety and promoted perpetrator immunity (Siegel, 1996). Now judges are compelled to invoke mandatory sanctions. They are pressured, for the safety of the victims, to use caution when ruling in cases of spousal battering. Judges have been given support on how best to handle spousal battering cases including training sessions and published guidelines (Massachusetts Trial Court, 1994). Judges' experiences using the guidelines and statutes over time also affect their use of sanctions. Under MGL 209A, the most commonly used sanctions are restraining orders and mandatory participation in a community based batterers' intervention program. Another sanction available to judges is

incarceration. The literature is silent on its use or, in rare instances, rejects this type of sanction (Fagan, 1996; Rosenbaum, Gearan, & Ondovic, 1997; Star, 1983). The United States Department of Justice (1998 p. vi) acknowledges an increased use of incarceration as a sanction for battering. MGL 209A provides three means that can result in batterer incarceration. First, by court authority, violation of a restraining order is contempt-of-court. That alone can warrant incarceration. Second is by statute. Section 7 of MGL 209A statute lists sentences of not less than sixty days nor more than two and a half years for restraining order violations (Isaac, Cochran, Brown & Adams, 1994). The third means occurs when the batterer is charged with a related crime (Watson, 1997). Simple assault and attempted murder are commonly addendum charges that can cause a batterer to receive a sentence to a correctional facility (Watson, 1997). Although referred to in MGL 209A, these other charges are not specified.

Today the common law standard of prohibiting wife beating that caused death or permanent injury (Siegel, 1996) is surpassed. A willingness by the judiciary to use incarceration for battering, that did not cause death or permanent injury, reflects changes in public attitudes about spousal battering and incarceration. The objective of incarceration can be more than punitive; it can be remedial. These kinds of policy changes are heavily influenced by public attitudes. Social policy objectives regarding spousal battering are in transition. This transition started in earnest during the 1960's and 1970's. Attention to domestic violence in general, and spousal battering specifically, prompted changes in statutes and practices. The direction that a policy will take is

effected by social attitude and public opinion. Attitudes and opinion represent social momentum and therefore are strong influences. The public's attitude towards the toll of spousal battering has effected policy. This attitude is in part shaped by the media's decision to focus attention on spousal murders. From the media we know that in Massachusetts every two weeks on average a women is killed by her spouse. By choosing to focus attention on this issue the media has influenced policy. Thanks in part to the media, the public's tolerance of battering is waning.

Domestic violence is a social problem with far reaching consequences. It affects those who are involved in relationships which contain domestic violence and it has effects in society at large. Male rule over the family, with the implied right to use violence, has been with society as far back as we care to look. The caveman dragging a women by the hair that he has just clubbed and conquered is a familiar image. Over the last 20 years, however, our responses to domestic violence have become increasingly more attentive towards its amelioration and elimination. Responses have taken the form of social science studies, state legislation and federal programs. The aim, of these responses, is to develop and identify effective methods of addressing domestic violence.

Definitions

The terms that describe domestic violence and methods to ameliorate it need to be considered. Terms related to violence by and towards intimates can bias a discussion. The following definitions denote how these terms will be used in this study. These

definitions are included to promote objectivity and clarity for the discussion.

Domestic abuse covers all kin and household relationships, all kinds of abuse, and the entire range of severity. More than one type of domestic abuse may exist within a single household. Barker, in the Social Work Dictionary (1995), defines abuse as “improper behavior intended to cause physical, psychological or financial harm to an individual or group.”

Battering is abuse that is violent, including a range of behaviors from impolite behavior and shoving to homicide. Specific acts include punching, kicking, choking or the use of a weapon.

Spousal battering is violence that occurs between intimate partners such as husband-wife, Boyfriend-girlfriend, ex-boyfriend, ex-girlfriend or co-habitant. Wife beating is the more traditional term. Perhaps Carderelli (1996) may have the most precise term in the title of his book, “Violence Between Intimate Partners.”

Intervention is the action taken in an attempt to stop the spousal batterer. Intervention is the rehabilitative programming used with spousal batterers. *Intervention* infers a forceful model, designed to come between the person and his behavior. It causes the person to respond - to participate in the rehabilitation process.

Cognitive behavioral interventions are treatment processes that are directive in nature (Gendreau, 1993). The client participates actively in instruction. The intent is to have an effect upon the behavior of an individual through an interactive training process that seeks to restructure the cognitive processes within the individual (Adams, 1989).

Cognitive distortion is when an individual's mental process inaccurately interprets external events and thereby justifies inappropriate reactions (Katz, 1988). Cognitive distortion is the phenomenon effective correctional practices seek to remedy (Ross, Fabiano & Ewles, 1988).

Domestic Violence Program (DVP) is the cognitive behavioral intervention program implemented at the Norfolk County Sheriff Office and Correction Center (NCSOCC) in Dedham, Massachusetts.

Recidivism is new arrests and charges subsequent to release from a correction institution. In this study, the rate of new arrests was calculated for subjects on release for at least; eight, twelve, eighteen, and twenty-four months.

Victim Notification Request (VIN) means that by law, prior to the release of the inmate, the victim must be notified. The victim has made this request so as to have time to take appropriate steps to assure her safety. In this study a VIN on an archival record, of a research subject, was a determinant in classifying an offense as an apparent domestic abuse offense.

Social learning theory asserts that humans learn from those around them. Social learning theory is "the acquisition of novel [new] response through observational learning" (Bandura and Walter, 1963). It builds upon the tradition of the behaviorists Pavlov and Skinner. According to social learning theory, identification with and

imitation of the behavior of others contributes to the development of habituated behavior (da Anda, 1995). The restrictions and demands of social behavior are shaped, learned and internalized through reinforcing patterns.

Hypotheses

Is a cognitive behavioral intervention for incarcerated spousal batterers an effective method for reducing domestic violence? In determining the effect of a domestic violence intervention program on the behavior of incarcerated batterers, the following hypotheses were tested:

1. The design of the Domestic Violence Program (DVP) at the Norfolk County Sheriff's Office and Correction Center (NCSOCC) in Dedham, Massachusetts will be consistent in design, content and execution with existing effective cognitive behavioral program models.
2. The incarcerated batterers who complete the DVP will have a lower recidivism rate than those who do not complete the DVP.
3. Incarcerated batterers who attend the DVP will demonstrate evidence of cognitive restructuring upon completing the program.

CHAPTER II

REVIEW OF THE LITERATURE

This review focuses on theoretical constructs regarding domestic violence, batterer intervention programs and characteristics of effective correction programs. The review of the literature is divided into three sections: Causes of domestic violence, treatment approaches and effective correctional strategies.

Causes of Domestic Violence

Given the unpredictable nature of humans and the variability in behavioral science research methods, it is a challenge to understand spousal battering. Human nature is multi-dimensional and infinite in complexity. William Pithers (1993) states that a phenomenon akin to battering, predatory sexual behavior (sex offenders), exists because the offenders simply want to indulge in these behaviors. In a more societal context, Gelles and Straus (1988) start their book with a chapter titled, "Because They Can." These causal explanations imply the existence of behavioral choice and that these choices are affected by socio-environmental conditions. These brief, blunt explanations infer that the batterer generally has and exercises a choice in battering - a choice influenced by cognitive distortions that assures the batterer that violence is the proper solution for the situation. Comments from batterers reflect cognitive distortions;

"[E]very now and then, I had given her a hard time, just to keep her in line."

"You tell [your girlfriend] to do something and they don't...and that makes you mad."

"[I] hit her hard enough to cause a miscarriage. I said, 'We ain't able to take care of no crumbs [child] around here!'" (Katz, 1988 p. 229)

Explanations as to the causes of spousal battering are organized into an all inclusive framework. Spousal battering can be examined in light of the individual, the relationships, the environment, or some combination of two or more. These combinations are called integrative explanations (Cardarelli, 1996). In the *Handbook of Family Violence*, Margolin, Sidner and Gleberman (1988) organize causes of domestic violence into three domains: the intrapersonal, the interpersonal, and the sociocultural.

Intrapersonal levels of causation "look for pathological conditions, either in the assaulter or the victim or both" (Margolin et al., 1988). Intrapersonal causes of spousal battering include psychological disorders such as passive aggressive or addiction prone behaviors, pathological jealousy and pathological dependence. Neurological and biochemical disorders also fit this domain. Margolin et al. point out that certain pathologies such as poor impulse control or substance abuse are of questionable validity in explaining battering behavior. In the instance of poor impulse control, Gelles and Straus (1988) suggest that, if these behaviors were symptomatic of poor impulse control, then the victims and venues should be broader in range than simply spouses in the privacy of the homes. Margolin et al. (1988) and Gelles et al. (1988) point out that substance abuse is a correlate but the causal properties of substance abuse are inconclusive.

In looking at intrapersonal explanations of spousal battering, the reader is cautioned against the "woozle effect." The wozzle effect is the tendency to attribute undesirable behavior to someone outside the group when in fact it is behavior of some within the group. By attributing negative behaviors to those unlike ourselves, battering is portrayed as a behavior of dysfunctional individuals. In utilizing intrapersonal explanations of spousal battering, the "woozle effect" offers false comfort by removing the causes of violence from a broader explanation and characterizing spousal battering as isolated aberrations. The explanations of intrapersonal or pathological causes must be considered. At the same time they should not serve to relieve the culture and those close to the situation of responsibility to deal with spousal battering.

Conversely, broader explanations seem to remove the onus from the individual perpetrator. "Interpersonal explanations focus on the interactions of persons involved with each other as well as other persons with whom they have had contact" (Margolin et al, 1988). The interpersonal level of explanations for battering involve the batterers themselves, the dynamics of the intimate relationship and the victim. The batterer's relationship with another specific person or people such as parents or male friends could have affected the batterer's propensity to use violence. The systems model is one explanation of spousal battering at the interpersonal level.

Systems therapists maintain that because wife abuse occurs within an interpersonal dynamic, it is most effectively confronted in the interpersonal setting, either in conjoined therapy or couples groups. The perceived dynamic is an "...interactional dysfunction in the violent couple." (Sprenkle, 1994)

The position of systems theorists that "violence is a systemic product rather than the result of individual pathology" (Straus, 1973) is controversial. This interpretation of the systems theory is repudiated by the feminist theorists and by many family therapists (Carden, 1994). That victims have some culpability in violence perpetrated upon them is an insinuation that causes the controversy and repudiation. Blaming the victim (Ryan, 1972), a powerful concept and an unpopular stand to take in the field of batterer's intervention. Sprenkle (1994) acknowledges that the perpetrators of violence are solely responsible for their actions. He holds, however, that the violent behaviors are a dynamic component of the relationship. There are interpersonal dynamics that at times culminate in spousal battering. The quandary posed is to understand the role of the victim of violence.

Explaining the problems with the systems model highlights the complexity of spousal battering. In many abusive relationships, the victimization is in one direction; in other relationships, however, there may be a more fluid antagonism operating. One extreme may be illustrated in the play War of the Roses (Blessing, 1986). In the play two people, husband and wife, developed such an intense hate/love relationship that they eventually destroyed each other. The Stockholm syndrome illustrates the other extreme, wherein the victim becomes a loyal and willing hostage of terrorists, or in the case of battering, the abuser. Hostages can develop intense loyalty to their captors, believing this to be their best means of survival. In an abusive relationship the victim may strive to

please the batterer in an attempt to save herself. The option of leaving may be too frightening. It is common knowledge that one of the most dangerous times for a battered person is when she tries to leave her abuser.

Intergenerational transmission is another example of the interpersonal level of influence on spousal battering. Parents and their rearing techniques have been found to be particularly influential on spousal battering. Renzetti (1996, p.80) points out that intergenerational transmission of violence is "the children learn[ing] what they live." Straus, Gelles and Stienmentz (1980) found that those "men and women who witnessed their parents physically attacking one another were three times more likely to have been violent towards their own partners than men or women who grew up in nonviolent households." The intergenerational model is an example of social learning theory. Friends, peers or associates is another type of interpersonal influence. Another man can influence a man's choice to use violence against a spouse. These associations can, in essence, give permission by extolling the value of spousal battering. The potential batterer sees acceptance through the utilization of battering. Battering is a shared value he can have with his associates. By influencing the choice of another to batter one reinforces his own belief in the value of battering. Battering is portrayed as manly, powerful and enhancing control of your world. A respected tough guy is described by another young man in the neighborhood:

"Everybody respected him...Johnny was always telling us about bitches. To Johnny, every chick was a bitch...And a man had to be a dog in order to handle a bitch." (Katz, 1988, p. 229)

The vulgar language and brutal inferences glorify battering behavior. To those who practice battering, proselytizing to others strengthens the internal justification. Promoting battering reinforces the cognitive distortion that depicts battering as a norm.

Margolin et al.'s (1988) third level is the sociocultural explanation. Here "historical, legal, cultural and political factors contribute to wife beating." Social beliefs about violence and violence in families as an expedient, effective and acceptable tool for resolving dilemmas influence the perpetrator's decision to batter. The widespread acceptance of violence within the culture and the perception of violence on the global level as a solution to problems also contributes to the acceptability of violence on the personal level. A most insidious sociocultural factor has been the tacit acceptance of family violence as detailed by Gelles and Straus (1988). Their overall premise is that spousal battering has been exercised by the perpetrators with little fear of consequences. "The absence of effective social control [i.e., police intervention] over family relations decreases the cost of one family member being violent towards another" (1988). The lack of cost to the perpetrator is a signal of tacit approval by his society. His can behave violently with negligible cost and consequences. "In the vestiges of a patriarchal society, men are taught to dominate women and violence is one way to maintain this dominance" (Margolin et al., 1988). This goes to the heart of Gelles' thesis that societal attitudes towards battering of wives is tacitly approved by social conditions.

The framework of three domains as explanations for domestic violence offers a perspective on the roots of spousal violence. The intrapersonal, interpersonal and

sociocultural theories serve as a range of explanations encompassing most points of view as to why battering takes place. Each case of battering is a complex combination of factor influencing the choice to batter. These factors are found among the theories just discussed. An integration of all three perspectives is required, presenting a major challenge to society's efforts in addressing spousal battering.

Treatment Approaches

Spousal battering is part of our culture. Gelles and Straus (1988) document the existence of spousal battering. We know spousal battering was committed prior to the first National Survey on Family Violence (NSFV) in 1975 (Segeil, 1996), although we do not know the extent. Gelles and Straus' survey informed us that spousal battering was a prevalent issue requiring society's attention. Growing out of this knowledge and the feelings it invokes is a resolve to remedy this problem. But how do we remedy battering? The safety of victims became the primary concern and therefore the starting point. This is reflected in the growth of shelters. Providing refuge naturally matches the flight aspect of the fight or flight response which is a survival instinct (Whyte, 1994). The growth of shelters for battered women, and the other support systems for victims, mark the initial efforts to remedy spousal battering in the 1970's (Adams, 1996; Carden, 1994). Shelters however are short-term solutions. For remedies to be substantive the spousal batterer as well as the victim need to be effected.

A focus on the batterer/perpetrator initially meant sending him to therapeutic

counseling. Traditional psychological interventions, such as psychodynamics, were ill-prepared to address the problem of battering (Adams, 1989). The traditional therapeutic model was developed in nineteenth century patriarchal Europe. Feminist theory views the traditional therapeutic model as being impaired because it was influenced by the social attitudes of those times (Adams, 1988 & 1996). The effectiveness of the traditional therapeutic approach is further questioned because of the non-directive nature of these models. In the psychodynamic models, the agenda is set by the client. The introspective character of this approach is confounding when used with a batterer who, because of cognitive distortion, feel justified in his use of abuse. The batterer believes he is justified in committing violent acts against his intimate partner (Katz, 1988). Therefore traditional therapeutic models fall short. They seek to resolve the battering using reason and self-discovery when, within the batter, those means are impaired. The traditional models do not direct the batterer's focus towards social learning, where useful information might be found. The internal cognitive process of the batterer justifies the batterer's actions. An introspective process does not provide discoveries necessary to dissuade the batterer from continuing the pattern of violence. An external source is needed for the batterer to acquire the information necessary to change his behavior.

The need for alternatives to psychodynamics grew out of a belief that battering is learned behavior, and that learning occurs at both the interpersonal and societal levels. Social learning theory replaces the traditional introspective model. Social learning interventions are based on the following:

Social learning theory [that] typically consists of instructions, modeling, role playing, and performance feedback-with ancillary use in some instances of contingent reinforcement, prompting, shaping, or related behavioral techniques. Developing in part out of the empirical tradition of behavior modification, [and] interpersonal skills training efforts...(Goldstein, 1988)

Cognitive behavioral intervention is a form of Social Learning Theory. It first appears in 1975 in Novaco's Anger Management Treatment (Dutton & McGregor, 1991). Novaco focussed on:

1. Changing client's perceptions of an "aversive stimulus."
2. Teaching clients to use their own arousal as a cue for nonaggressive coping strategies.
3. Increasing client's perception that they control themselves in provoking circumstances.
4. Teaching clients to analyze "provoking circumstances" in stages with self instruction for managing each stage.
5. Teaching relation techniques to enable clients to reduce arousal anger.

Dutton and McGregor (1991) credit Ann Ganley with bringing cognitive behavior therapy into the family intervention setting. Ganley's approach is designed to facilitate social learning. The objective is for the male batterer to re-learn how to view men's roles. According to Ganley, this re-learning contradicts what the batterer believes. The batterer has been taught the stereotypical view of men as absolute rulers in their homes. The intent is for the batterer to learn that his beliefs are in conflict with the attitudes society

holds as appropriate interactions in the family (Ganley, 1981). The expectation of a cognitive behavioral intervention is to alter the batterer's behavior by changing his beliefs. These beliefs include: the role of a man in society, the status of women, the use of violence as a solution to problems, and their inability to control their use of violence. Social learning theory undergirds the curriculum content in a cognitive behavioral intervention.

Eisikovits and Edleson (1989) discussed the therapeutic formats used in cognitive behavioral interventions. The formats, borrowed from the psychodynamic models, include couples or co-joined therapy, individual batterer's therapy and batterers' groups. The systems model is an example of cognitive behavioral therapeutic approach used with couples experiencing domestic violence. One of Eisikovits and Edleson's (1989) major criticisms of the systems theory is that the objective of the therapy is ambiguous. Is the objective safety for the victim or repair of the relationship? This ambiguity reflects society's confusion. In instances of spousal battering, determining the best course of action, the repair or termination of the relationship, may not be clear. In couples therapy, the clarifying of this question can unwittingly perpetuate the controlling behavior of the batterer. Individual batterer therapy is an improvement in that it identifies the perpetrator as the person responsible for the violent behavior. While Eisikovits and Edleson (1989) view this approach as a major step forward, it has its drawbacks. Star (1983) points out that any individual therapy is client-centered. Being client-centered can reinforce dominating-controlling behaviors. The controlling behavior of a batterer is indicative of

cognitive distortions of a narcissist (Peck, 1983). Whatever narcissistic inclinations the batterer might have can be nourished in this format. A second drawback is in achieving the objective of changing behavior. In the one-on-one setting, the effectiveness of behavioral training is difficult to gauge. The perpetrator usually has a history of manipulations. For this reason observed or reported behavior changes are suspect as manipulations aimed at winning over the therapist to the batterer's side. Other drawbacks are that it is expensive and generally too passive in nature. Economy and positive behavior changes should be the goals of any social service program. Spousal batterer interventions need to use cost effective and assertive approaches. For these reasons, individual therapy is less preferred than the therapeutic format of groups (Star, 1983).

Therapeutic batterers' groups that have been studied were based in the community, as were couple's and individual therapies. They are cost effective because a therapist can serve a number of clients at one time. Group therapy was initially discussed at length by Yalom (1970). Yalom's intent was to use a non-directive "Rogerian" approach. The dynamics of therapeutic groups, however, offers a good setting for cognitive behavioral approaches. A therapeutic group of male batterers with a strong facilitator or facilitators can offer a structured environment in which to address battering related issues in an honest and forthright manner. The advantage of groups is that they provide what Star (1983) calls a multi-level intervention. Issues such as: elimination of a feeling of isolation, control of and choice to use violence, and behavior practicing are addressed. In the group setting, the manipulative tools of the batterers may be turned

inward or towards others in the group to promote behavioral changes. The competent group therapist employs a curriculum of cognitive behavioral intervention. The men's therapeutic group seeks to affect the perceptions of batterers. This approach is becoming the preferred approach in dealing with batterers. Tolman & Bennett (1990) and Eisikovits & Edleson (1989) collected evaluation research data on batterers' intervention programs. Both of these studies reveal the dominant usage of the group format with the treatment methodology usually being some form of the cognitive behavioral model.

The level of research undertaken and the research methodology for evaluating intervention programs renders inconsistent and inconclusive results. In The Counseling Psychologist issue on wife abuse, Ann Carden (1994) concludes that:

Seventeen years after the founding of the first program designed to eliminate wife abuse by working with the wife abuser, we have only the most primitive notions about what works. Why and how it works. Or even whether, in the long run, it does work. Because the effectiveness of an intervention is significantly affected by accuracy of the intervener's comprehension of the target population, it is clear that there is much more work to be done. (p.573)

Carden calls for "more work to be done." The batterers' program she refers to as being the first is Emerge, based in Cambridge, Massachusetts (Adams, 1996). Despite Eisikovits and Edleson's (1989) claim that evaluation of intervention programs is inconsistent and inconclusive, use of these programs is expanding. Emerge is currently one of the three programs in Massachusetts that provides Department of Public Health approved batterer intervention staff training. The staff training is part of the Massachusetts Department of Public Health (MDPH, 1995) 'Guidelines and Standards for

the Certification of Batters Intervention Programs.' These guidelines focus heavily on the use of cognitive behavioral approaches. The services provided are referred to as education or training. Reference to education or training is consistent with the concept of what takes place in cognitive behavioral interventions. Thus, Massachusetts policy directs the form of remedy for battering that should take place in the community.

Policy aimed at finding remedies to spousal battering is shaped by theory, treatment approaches, and social attitudes-public opinions. What the public wants influenced what treatment approaches are developed and used. Less public tolerance and sterner policy transforms battering into a deviant/criminal behavior. This change of view has important implications. In this change in perception, the spousal batterer is relegated to the status of criminal. In viewing the domestic batterer as a criminal, the study of family violence and criminology are joined. The cognitive behavioral training approach is directive and less client indulgent than traditional psychodynamic therapy and it is the directive approach that appeals to the public. The criminal justice system has adopted cognitive behavioral intervention. In doing so these programs are transformed into sanctions for criminal offenses. As a result, other criminal justice sanctions are more easily applied to batterers. Society is willing to use criminal justice sanctions for battering offenses that do not involve killing or permanently injuring spouses. The willingness to criminalize spousal abuse is a major step.

Effective Corrections

Viewing battering as a crime leads to an examination of correctional theory. Corrections is "the systematic and organized efforts directed by a society that attempt to punish offenders, protect the public from offenders, change offenders' behavior and compensate victims" (Snarr & Wolford 1985). The actual expressions of this description vary. The trend, however, is to use prison as a last resort, as a placement for dangerous people and drug offenders for whom no other treatments seem appropriate. Using prison as a last response is consistent with Prothrow-Stith's three levels of responses to violence. Her model is based on a medical model, with three levels of response: primary, secondary, and tertiary (Prothrow-Stith & Weissman, 1991). The primary level of responses to violence is violence prevention. Examples include anti-violence programs in schools and public service messages. This level tries to influence the people's perceptions of violence and is preventative in nature. The secondary response is remedial. Remedial responses seek to correct the disorder, in this case, the violent behavior by an individual, after it has been identified. Examples include counseling or probation. The tertiary response addresses irreparable harm. It is punitive. The tertiary response has been imprisonment for those who cause grave harm or death to their victims. The punishment for violent behavior is after the fact. At this level, thoughts of remedies are abandoned. Responses to spousal violence can be compared to responses to violence in general.

In the case of family violence, the third level of response has been used after a spouse has been murdered or maimed, similar to the old British common law. In prison

there are many men who have committed homicide or done permanent physical damage to their intimate partners. Programs in schools that teach about violence in dating and in the family, serve as a primary response. Community-based programs for spousal batterers that have developed over the past 20 years, serve as secondary responses. In Massachusetts, incarceration, traditionally a tertiary response, is now also a secondary response. Through legislation, the statutes have increased the possibility of perpetrators being incarcerated at earlier stages of spousal battering. Previously only the most serious of violent acts earned prison sentences. The use of incarceration as an intermediate response to domestic violence is part of the evolution to a broader set of responses to spousal battering.

Correctional reform, in many ways, parallels other social movements of the 1960's and the 1970's. Correctional reforms were a reaction to riots and disorder within the correctional institutions during the late 1960's and early 1970's. In order to gain a better understanding of how these reforms were working, the state of New York established a Governor's Special Committee on Criminal Offenders in 1966 (Martinson, 1974). This Committee hired Martinson and his colleagues to conduct a comprehensive survey on what was known about rehabilitation programs. Although the report was completed in 1970, it was only able to be published after litigation. Martinson infers that the report was suppressed by the Special Committee because the report's conclusions were contrary both to those expected and to what was then current correctional policy. Martinson concluded that, "with few and isolated exceptions, the rehabilitative efforts that have been

reported so far have had no appreciable effect upon recidivism" (1974).

Martinson's work quickly became known as the "nothing works in corrections" study. It became a factor in a shift in focus of correctional practices from rehabilitation towards deterrence or punishment (Gendreau, 1981). The rehabilitative programs Martinson asserted as ineffective include life skills training, group counseling, individual counseling and educational and vocational training. Martinson's study considered research done on 231 rehabilitative programs that were conducted between 1945 and 1967. From this group, the only results of research that offered scientifically accepted experimental standards were considered. Many programs did not meet this standard and their results and practices were not considered in this study. Gendreau (1981, 1995) states that Martinson on many points was wrong - that his methodology was flawed and that his conclusions reflect these flaws.

In Gendreau's study, "Principles of Effective Correction With Offenders" (1995), he offers eight principles of effective interventions in corrections and six principles of ineffective interventions. Gendreau's study employed a more sophisticated technique of social science research. Martinson examined only those studies that met accepted research standards and only considered outcomes. On the other hand, Gendreau's meta-analysis of correctional rehabilitative programs sought to identify the characteristics of effective programs and identify the presence of these characteristics and their correlation to effective correctional programs as measured by lower recidivism. The closer dissecting analysis is termed "black box research" because it looks at the individual

factors in determining whether a rehabilitative program contains components similar to programs that have been shown as effective.

Effective intervention programs include the principles of:

1. Intensive services that are behavioral in nature.
 - a) Intensive services occupy 40-70% of the offenders time while in a program and are of 3 to 9 months duration.
 - b) Behavioral strategies are essential to effective service delivery.
2. Behavioral programs targeted at the crimino-genic needs of high risk offenders.
3. Responsitivity-offender, therapist, program.
 - a) Matching the treatment approach with the learning style and personality of the offender.
 - b) Matching the offender with the therapist.
 - c) Matching the therapist with the type of program.
4. Program contingencies/behavioral strategies enforced in a firm but fair manner.
 - a) Reinforcing contingencies under the control of the therapist.
 - b) Staff, with meaningful input from offenders, design, maintain and enforce contingencies.
 - c) Positive reinforcers out number punishers by at least 4:1.
 - d) Internal controls e.g. judiciously used to detect possible anti-social activities of clients.
5. Therapists relate to offenders in interpersonally sensitive and constructive ways and are trained and supervised appropriately.
 - a) Therapists are selected on the basis of interpersonal skills that are associated with effective counselling.
 - b) Therapist have at least an undergraduate degree with training on theories of criminal behavior.
 - c) Therapists receive 3-6 months formal and on-the-job training.
 - d) Therapists are re-assessed periodically on the quality of their service delivery.
 - e) Therapists monitor offender change on intermediate targets of treatment.
6. Program structure and activities disrupt the delinquency network by placing

offenders in situations (people and places) where pro-social activities predominate.

7. Relapse prevention in the community.
 - a) Plan and rehearse alternative pro-social responses.
 - b) Monitor and anticipate problem solutions.
 - c) Practice new pro-social behaviors in increasingly difficult situations and reward improved competencies.
 - d) Train significant others to provide reinforcement for pro-social behavior.
 - e) Booster sessions i.e., brief returns to formal phase of treatment program.
8. High level of advocacy and brokerage as long as the community agency offers appropriate services.

Ineffective interventions include the principles of:

1. Traditional "Freudian" psycho-dynamic and "Rogerian" non-directive or client-centered therapies.
2. "Medical model" approaches.
3. Subculture and labelling approaches.
4. Programs, including behavioral, that target low risk offenders.
5. Programs, including behavioral, that target offender need factors that are weak predictors of criminal behavior, i.e., anxiety and depression.
6. "Punishing smarter" strategies.

Both sets of principles are incorporated into the Correctional Program Assessment Inventory (Gendreau and Andrews, 1993). The CPAI is designed to identify the presence or absence of these two sets of principles within an intervention program. Treatment of violent offenders has developed to predominantly employ directive cognitive behavioral interventions (Ross, Fabiano & Ewles, 1988, Spectrum Abuse Inc., 1993, Goldstein, 1988,

Gendreau, 1994). Cognitive behavioral approaches seek to change behaviors through prosocial cognitive restructuring. Interventions aimed at cognitive restructuring seek to broaden clients' interpretations and responses to external events. In a rough comparison of treatment philosophies, the common thread of cognitive behavioral approaches is discerned both in batterer interventions and in effective treatment programming in correctional settings.

The one study found that examined the treatment of incarcerated batterers did not track any form of recidivism. Canadian criminologists, Barbara Wolfus and Ralph Bierman (1996), administered a battery of pre- and post-psychological tests to battering offenders in a provincial correctional institution in Ontario, Canada. Their study was designed so as to identify cognitive, behavioral and emotional changes in the subjects who underwent a 12 week treatment program called Relating Without Violence (RWV). Wolfus and Bierman state that, "participants in the RWV group showed changes over and above the changes exhibited by the two comparison groups." They noted the design of the study did not allow for the development of data leading to a recidivism statistic and recommended a recidivism statistic as the next step. This study of the DVP has taken that next step and developed a recidivism statistic for incarcerated batterers and examined the dialogue of batterers in treatment.

Summary

In this chapter, causes of domestic violence, treatment and effective corrections were examined. Causes of domestic violence vary but are composed of influences; from within the mind of the batterer, his interpersonal relations and the signals he receives from the society in general. The clinical approaches to the amelioration of spousal battering have developed in earnest over the past 20 years and are consistent with effective correctional interventions. There is a relationship between family violence and violence in society (Isaac et al, 1994, Dutton & Hart, 1993). Commonality between theories of family violence and effective corrections is evident. Gendreau's correctional interventions mandate a behavioral emphasis. The increased behavioral emphasis focuses heavily on client training to habituate the desired behavior. By looking at incarceration as more than a tertiary response to battering, opportunities to intervene and study these interventions abound. A foundation for understanding battering is emerging. Policy determines what placement and intervention options are available both to the batterer and to the general criminal. Spousal battering is now a crime with sanctions that include incarceration. The policy in a number of Massachusetts county correctional facilities is to initiate or continue the use of a batterers' intervention program - men's therapeutic groups. This study of how effective that strategy is becomes relevant to the field of correctional theory as well as to the study of spousal battering. The objective of this study is to gauge the effectiveness of a batterers' intervention program. The design to gauge program effectiveness is the focus of the next chapter.

CHAPTER III

DESIGN OF THE STUDY

Introduction

This study examines the effect of a domestic violence intervention program on men incarcerated for spousal battering. The program model, rates of recidivism, and participant dialogue were all sources of data. The use of a three-phase data assembly and analysis permitted an extensive study of incarcerated batterers, a topic that heretofore has received only cursory attention in social science research.

The first phase of this study consisted of a program evaluation of the Domestic Violence Program (DVP) at the Norfolk County Sheriff's Office and Correctional Center (NCSOCC) in Dedham, Massachusetts. The structure and content of the DVP was compared to existing cognitive behavioral models in the fields of batterer intervention and corrections. In the second phase, the records of 306 former inmates of the NCSOCC were analyzed to determine rates of recidivism. In the third phase of this study the dialogue of spousal batterers in the DVP sessions were analyzed. One nine-week cycle of sessions was observed by the researcher; a second nine-week cycle of sessions was videotaped and viewed by the researcher. Dialogue from the first, middle, and final sessions of the two nine-week cycles were analyzed for evidence of cognitive restructuring within the incarcerated batterers participating in the DVP.

The setting for this study was the Norfolk County Sheriff's Office and Correction Center (NCSOCC) located in the median strip of Interstate Route 95 in Dedham, Massachusetts. The facility was accredited by the American Correction Association and operated under the supervision of the Norfolk County Sheriff. The Center houses pre-trial detainees in a jail section and sentenced inmates in the House of Correction section. The Domestic Violence Program (DVP) at the NCSOCC has been in operation since 1993. The program consists of a screening process for potential participants, a nine-week psychoeducational group therapy program, a long-term program, and a follow-up program in the adjacent pre-release center. Research access was through a referral by the facility's Staff Training office. The researcher was referred to the Director of Inmate Programs and through him, to the DVP Coordinator. Permission to conduct the research was granted by the Norfolk County Sheriff via the Director of Inmate Programs (Appendix F).

Prior to the DVP starting a nine-week cycle, the coordinator, who functions as the primary group leader, interviewed prospective participants. These interviews took place in the program offices and the institution's housing units. The interviews were guided by the screening form, Appendix A. Based on information from the screening, a one-page write-up consisting of a diagnostic assessment of the prospective participant was developed. A review of these write-ups confirmed that all those interviewed had a history of domestic violence. The few who were screened and determined to be inappropriate for the program had language deficits or mental illnesses that prevented meaningful

participation in the DVP. After approximately 30 intake evaluations were conducted, and participants selected, the intervention program began. Participants were assigned to either a morning group twice a week, or an afternoon group twice a week. Both groups were led by the DVP Coordinator. In the morning session a male social worker who works for the Massachusetts Department of Mental Health co-facilitated. Whether the difference in facilitation had an effect was considered. This was done by comparing recidivism rates of subjects based on which facilitation model was used in the nine-week cycle they attended. The first session of the cycle was an orientation session where the overall objectives of both the participants and the program itself were articulated. Ground rules were established regarding attendance, expectations to participate, behavior and speech within the group, and expectations regarding respect and confidentiality of what others say in the group.

The hypotheses tested were: 1. if the DVP at the NCSOCC, will be found consistent in design, content and execution with established cognitive behavioral program models; 2. if the incarcerated batterers who complete the DVP will have a lower recidivism rate than those who do not complete the DVP; and 3. will the incarcerated batterers who attend the DVP demonstrate evidence of cognitive restructuring after completing the program?

Subjects

The first phase of the study compares the DVP to three other intervention approaches. There were no subjects per se since the focus of this phase of the investigation was the DVP structure and content.

The severity of abuse committed by subjects in this study was sufficient to warrant incarceration. In Massachusetts offenders sentenced to a county correction facility such as the NCSOCC receive sentences of moderate length - 2½ years or less. Although a number of factors effect sentencing length, the seriousness of the offenses committed is a major determinant. Examples of arrests involving "domestic crimes" in one Massachusetts community included: violation of a restraining order, simple assault, malicious destruction of property and attempted murder (Watson, 1997). The subjects of this research were separated into two distinct sets according to the research phase. In the second-phase, the recidivism study, records of former inmates were analyzed for recidivism rates. In the third-phase the subjects were 24 inmates who were attending DVP sessions. All were screened and approved to attend the DVP.

For the recidivism phase of this research, the records of 326 inmates who had been screened and approved for inclusion in the DVP were examined. The records of 20 subjects provided inadequate data and were dropped. All subjects in the recidivism investigation had been incarcerated at NCSOCC for a period of time between July 1994 and December 1996. At the time of the study all these subjects had been released from

the NCSOCC. Table 1 shows the background characteristics of the subjects. Over half (53%) of those sampled were under thirty years of age. Only a small percentage (9%) were over forty. Most of the men in the sample were white (78%). A majority (63%) had completed high school or its equivalent. A very small number (4%) graduated from college. Regarding marital status, the greater number (61%) in the sample were single. Only a small number (9%) reported being currently married. Close to a third (31%) were divorced or separated. Eleven (4%) out of total sample had no prior record. More than half (55%) had between one and twenty four prior offenses, the mean was twenty. A small number (4%) had over one hundred prior offenses.

Each subject in the sample was assigned to one of the three comparative groups. Assignment to a group was based on the inmates involvement with the DVP. Those who attended 13 or more session were designated as having "completed" the DVP. Those choosing to attend less than 13 sessions or none at all were designated as "declined" Those who left the NCSOCC before having a chance to choose to attend were designated as "unavailables." The largest group (43%) contained those who completed the DVP. The group containing those declining to attend a complete cycle of the program made up just over a quarter of the sample (26%). The declining group included subjects who were at the institution and chose to attend from zero to twelve sessions. The unavailable group was somewhat larger (31%). The unavailable group contained subjects who, like subjects in the other two groups, were screened and approved to attend the DVP. They were

moved from the NCSOCC before they had an opportunity to attend, this move was beyond their control.

Subjects in the third phase of the study were observed in an effort to find evidence of cognitive restructuring. They are referred to as "participants" as distinguished from "subjects," in the recidivism phase. Participants were both inmates and attenders of the DVP during the time they were observed. There was a total of 24 participants. Twelve participants were in videotaped sessions from the summer of 1997 recorded by Professor Marsha Della-Guistina of Emerson College. Another 12 participants were observed during 18 sessions of a complete cycle observed by the researcher. The selection of participants was determined by virtue of their attendance in one of these two cycles of the DVP sessions.

Table 1
Background Characteristics of the Total Sample

CHARACTERISTIC	NUMBER (N)	PERCENT (%)
AGE		
Under 21	19	6
21-25	53	17
26-30	93	30
31-35	66	22
36-40	48	16
41-45	13	4
46-50	12	4
51 or more	4	1
RACE		
White	238	78
Black	50	16
Latino	15	5
Other	3	1
EDUCATION*		
Less than high school	96	32
High school	187	63
College	14	4
MARITAL STATUS**		
Single	184	61
Divorced	59	20
Separated	33	11
Married	26	9
# OF PRIOR OFFENSES***		
0	11	4
1-24	155	55
25-49	61	25
50-99	44	16
100 or more	12	4

Table 1 continued

Background Characteristics of the Total Sample

CHARACTERISTIC	NUMBER (N)	PERCENT (%)
GROUP		
Completed DVP	130	43
Declined DVP	80	26
Unavailable for DVP	96	31
Data missing	* in 9 cases ** in 4 cases *** in 23 cases	

Method of Treatment

All the subjects who participated in the DVP at NCSOCC received a treatment. This treatment was psychoeducational in nature with a group therapy format. Twentyseven hours of treatment were divided into 1½ hour sessions held twice a week over a nine-week period. The treatment involved a curriculum developed by the program coordinator based on a model developed by Lindsey et al. (1993). The goal of the treatment was to provide a short-term cognitive behavioral intervention (See Appendix B).

Data Gathering

Data collected to assess recidivism came from three sources. The first source was screening records maintained by the DVP Coordinator (sample Appendix A). Information contained in these records includes the subject's age, military history, number of children, substance abuse history, history of mental illness, head injury, educational level and a number of other variables listed in Appendix C. The information was in large part, self-reported. A second source of data was compiled from the electronic archive records at the NCSOCC. These records provided the following information: dates of incarceration, any special security rating such as violence, suicide prone, or a request to notify the victim of the release of the offender, committing court, and occupation. The archives also provided concrete identifiers of the subjects of the

study including - name, date of birth and Social Security number. Identifying information was assembled separately and forwarded to the third source of data. The identifying files were always kept secured and separated from files scheduled for data analysis.

The Massachusetts Criminal History Systems Board (CHSB) was the third source. The identifier files were submitted to the CHSB. The CHSB manages and provides for the security of all criminal history records within the state of Massachusetts. Permission for access to records was acquired from the CHSB. The permission letter is included in Appendix F. A request was made according to the protocol detailed in correspondence and telephone conversations with personnel at the CHSB. The CHSB provided information on subsequent offenses and detailed prior offense history within the state. CHSB files returned to the researcher were then stripped of identifying information. Assigned codes were substituted for concrete identifiers to ensure the anonymity of the subjects in the study. A list of the variables developed from this data are listed in Appendix C. A denotations was made to identify the primary source of a particular variable, whether it be from the DVP screening evaluation, NCSOCC archives or the CHSB. Appendix D presents frequency distributions and descriptive statistics.

Data gathered to assess cognitive restructuring came from participants' dialogue. The dialogue and behavior of the participants were observed by two means. First, the researcher attended and observed 18 sessions, a complete cycle. This provided a familiarity with the process and one point of comparison. The second point of

comparison was videotaped sessions previously recorded by Professor Della-Guistina. The videotapes provided an exact record of dialogue. A sampling procedure was used to select videotape sessions. Three videotaped sessions were targeted to assess change in thinking: the first, the ninth and the final sessions. These three sessions provided a framework for process coding (Bogdan & Biklen, 1992), a method for detecting changes in observed samples. The first session provided a baseline; the words used and how they were used revealed how each participant thought as they entered the DVP. By the ninth session half the DVP had been presented. Through the DVP exercise used during that session participants had an opportunity to report on people and events they believed influenced their development. In the final session, through a closure exercise participants had a chance to reflect and comment on their thoughts about themselves, their fellow participants and the DVP. Approximately 40 hours were spent analyzing the three taped sessions. Observation of two DVP cycles, one live and one on videotaped provides internal validity. Appendix G provides an example of participant dialogue in.

Treatment of the Data

For the recidivism phase of the study, data collected from three sources, DVP screening evaluations, NCSOCC electronic archives, and CHSB reports, were combined (variable list see Appendix C). Data were converted into a format accepted by Statistical Program for Social Science (SPSS for Windows). All data testing was performed on SPSS at the Boston University Information Technology Center.

Data collected as field notes were transcribed. Notes were taken while viewing the first, ninth and final sessions of videotaped dialogue. Dialogue from the first session was compared to dialogue in the other two sessions. Notation of recurring terms and the context of their usage, across all three sessions, were identified and selected as indicators of cognition. Observations from the first session were used to detect changes in the cognitive systems within the participants over later sessions. The terms tracked were germane to battering. A comparison of context of terms used was employed as process codes (Bogdan & Biklen, 1992) The first session dialogue served as a base line and was then compared to the dialogue of the ninth and final sessions to detect cognitive change.

Data collected for statistical purposes first underwent a simple frequency check (Appendix D) in order to identify inputting errors. Any errors were corrected. Subjects were divided into the comparative groups: completers, decliners and unavailables. Thus divided, chi square or one-way analysis of variance tests were conducted to determine demographic similarity and recidivism rates. The researcher subclassified offenses into two categories: apparent and ambiguous domestic abuse offenses. In examining records, if the offense was clearly domestic violence it was deemed apparent. This includes: Violation of a Restraining Order, Assault and Battery (on a woman) with a Dangerous Weapon, and Contempt. Records that included victim notification requests were also categorized as apparent cases of domestic violence. Subjects whose offenses were categorized by the researcher as ambiguous were determined to be domestic abuse

offenders in two screenings by correction staff professionals at NCSOCC. These officials had the added advantage of access to additional information including; police reports, probation records and an access to the offender. Those subclassified as apparent domestic abuse offenders received this same screenings. Based on these screenings, it is reasonable to conclude that, those approved for the DVP were domestic violence offenders.

Limitations

Limitations influenced the shape of this study. Three sets of limitations were present in this studying of incarcerated batterers. The first set of limitations, faced in any attempt to study battering, concern definition and detection of battering. The second set of limitations involve the study of treating incarcerated batterers. In the literature, the issue of treating incarcerated batterers is ignored (Fagan, 1996) or rejected (Star, 1983). The third set of limitations are those intrinsic to studies in correctional institutions, and include protection of the offender privacy and ensuring that no intrusive experimentation was done upon incarcerated subjects.

The process of defining and detecting the reoccurrence of battering presented challenges. In this study, the standard of "re-arrest" was used as an indicator of continued battering. This indicator missed battering behaviors that were unreported, undetected by the police or were judged by the police to fall short of the legal standard for unlawful

battering. Other standards for measuring renewed battering, in prior studies, include self-reporting and reports by the targets of the batterers. These standards were not available to this study. The standards of self-report or information from the target of the battering have proven problematic (Eisikovits & Edleson, 1989; Jacobson & Gottman, 1998), self-reporters tend to under-reporting and reports from targets of battering are difficult to obtain.

The second set of limitations concerns the relative silence in the literature about treatment programs for incarcerated batterers. Citations in the literature regarding incarcerated batterers are usually in one of two contexts. The first context from studies such as Dutton and Hart (1993) assert that a large number of incarcerated men were batterers before they were common criminals. The second context of reference is exemplified by a 1998 National Institute of Justice report that 25% of prisoners in local jails are there for battering offenses. The only study (Wolfus & Bierman, 1996) found investigated the treatment of batterers in prison. Wolfus and Bierman administered psychological testing pre and post treatment. Based on the psychological testing, they asserted that the program was more effective than not going to the program. The scarcity of prior research on treatment programs for incarcerated batterers was a limitation in obtaining guidance for designing a study. This study employed adaptations of research methods used to study batterers programs in the community, as well as research strategies used to study other treatment programs for incarcerated individuals. Additionally, identifying demographic characteristics of those incarcerated for domestic battering

offered important information about who goes to jail for battering. Finally, the opportunity was available to learn more about the individual batterers through observation of actual treatment sessions. This proved useful both for the program evaluation and as a rich source of qualitative data. The process of conducting three different studies simultaneously affected the quality of each phase. However, to adequately study a treatment program for incarcerated batterers all three phases of the research design were needed.

The process of identifying an incarcerated batterer based on his charge had limitations that were overcome through reliance on NCSOCC staff screening. As Watson points out (1996), batterers may be charged with any of a number of offenses depending upon their behavior either during the incident of battering or when the police arrive. The batterer's behaviors and police discretion determine the crime charged. Because charges related to battering were so varied, the victim notification requests were used to determine whether a charge could be interpreted as apparent domestic abuse or ambiguous domestic abuse. These classifications were used for prior offenses, offense prompting incarceration and subsequent offenses.

The third set of limitations involved protecting the privacy of the offender and ensuring that no intrusive experimentation was done upon study subjects. When conducting research in a correction institution a number of precautions are in place and must be managed by the researcher. Protection of offenders' privacy includes restrictions on access to their criminal records. In accessing criminal records, permission was

required and obtained from the CHSB and the NCSOCC (see Appendix F). The CHSB, however, can only provide information on offenses that occurred in-state. Records for offenses that occur outside the state of Massachusetts could not be tracked. An additional limitation in this set concerns the United States Department of Health and Human Services title 45 Code of Federal Regulations Part 46 Subpart C (DHHS CFR 46). DHHS CFR 46 states that no intrusive research may be conducted upon inmates without a laborious review by a specially constituted Research Review Board (RRB). This study was designed not to need DHHS CFR 46 review restrictions. As a result individual interviews with the offenders were not conducted. The researcher was prohibited from tape recording or note taking while with inmates. The videotape, because it was from another source, did not have this limitation. Inmates had signed waivers with the filmmaker and the filmmaker was free to share the film with the researcher. The restriction from contacting batterers individually, whether in the institution or later in the community obviously limited this study.

Summary

The need to develop information on the treatment of incarcerated batterers was a driving force. The three-phase study was implemented from November 1997 through January 1998. The characteristics of the DVP, the rate of recidivism for batterers, and changes in the way batterers in the DVP talked about battering were all examined to

provide a comprehensive overview. By using a three-phase study, the data collected was triangulated. "The triangulation of measurement process is far more powerful evidence supporting the proposition than any single criterion approach" (Isaac & Michael, 1981). In the following chapter, results of the analysis of each phase are presented.

CHAPTER IV

ANALYSIS OF DATA

Overview of Study Design

The purpose of this study was to gauge the effects of a domestic violence program on the recidivism rates and cognitive restructuring of incarcerated spousal batterers. The analysis of the data is divided into three sections. The first section is a comparative program analysis, the second reports the rate of recidivism and the third section documents participants' dialogue for evidence of cognitive restructuring.

Comparison of Tenets, Standards, and Principles

Examining the DVP structure and content was important in assessing the likelihood of reduced recidivism and cognitive restructuring. The DVP Director purports to follow the philosophy and the curriculum created by Lindsey, McBride and Platt (1993) in their book, Amend, Breaking the Cycle. The Amend model is representative of batter intervention programs. It was established in 1977 in Colorado and is an integrated part of that state's response to battering. The tenets of the Amend philosophy were compared to observations of what transpired in the DVP program. Lindsey et al. (1993) presents seven tenets to guide in the implementation of their model (see table 2).

Table 2
DVP Comparative Analysis to Amend

Amend's Tenets

First, we believe that the feminist concept of male violence as a means of attaining power and control explains significant amounts of the behavior of men who are violent. This assumption undergirds AMEND's intervention with violent men.

Second, we believe that intervention with who batter their mates requires a value-laden and directive approach; thus, AMEND therapists are not neutral observers with our clients. We state that violence is a crime. We affirm that violence and abuse are wrong and unethical behaviors.

Third, AMEND therapists subscribe to the idea that violence and abuse are responses that people choose out of a range of potential behaviors. The victim is not responsible for the violence and abuse directed at her. The perpetrator is responsible for his behavior.

Fourth, we believe that teaching behavioral change is the first priority of the counselor to violent men. Once a man has stopped his violence and abuse, he and his counselor can begin to work with intrapsychic features of his problems.

DVP

The DVP examined male roles and concepts of what being a man means.

Leaders consistently redirected equivocations; It was stated that participants use of violence was wrong; their culpability for choosing violence was asserted.

The theme of choice was enforced throughout the nine week cycle.

The first priority of the DVP group leader was to teach behavioral change, by emphasizing and reinforcing that choice, was a responsibility and a power within the individual.

Table 2 Continued
DVP Comparative Analysis to Amend

Amend's Tenets

DVP

Fifth, we believe that intervention designed to end violent and abusive behavior permanently is a long-term process, one to five years.

The DVP acknowledged that ending abuse and violence was a long-term process. The DVP was however shorter in length.

Sixth, we believe that ending violent and abusive behavior is a complex process that requires multi-modal intervention

The curriculum used multi-modal approaches, incarceration added a substantial dimension.

Seventh, we believe treatment of batterers requires special skills and training, which we require of all AMEND therapists. Our manual presents the foundation on which our training rests.(pg. 3)

Both group leaders were social workers, with extensive experience both in mental health and in corrections. The DVP director was on the Governor's Committee Against Domestic Violence and had attended national workshops.

Overall the DVP was consistent with the Amend philosophy. The curriculum advocated by Amend was similar with the actual curriculum of the DVP. In presentation, the DVP was consistent with the Amend belief in group therapy model over other models. Many of the worksheets presented in the DVP were from the Amend curriculum. The major difference between the Amend model and the DVP was the setting, the community versus a correctional center. The Amend philosophy advocated a high integration with the community. The correctional system was more concerned with protecting the public by keeping perpetrators incarcerated until their term was completed. Tenet five places the time frame needed to make a differences far higher the DVP. The DVP met most of Amend's foundational tenets. The DVP's length of program and integration with community are weaker than the framers of the Amend program believed necessary

In Massachusetts communities, the only programs permitted to provide services to batterers are those that meet the guidelines of and are certified by the Massachusetts Department of Public Health (DPH). The required certification was established for programs operating in the community. Section 4 of the guidelines, *Intervention Methodologies*, provided a basis for comparison with the DVP (see table 3). The intervention methodology section started with the edict that the primary format shall be group sessions. "These group sessions will be educational and interventional in character with the goal of stopping coercion, violent behavior and other types of battering." The

guidelines further required a program to be 80 hours. This is far greater than the 27 hours of the DVP. The DVP focused on gender roles, the culture and how these issues contributed to abuse. Section 4.2 E. required that social and cultural issues that contribute to abusive behavior be identified and addressed. Other more extensive foci on ethnic morés were not addressed. This may be because of time and resource constraints. All of the State standards were met except for the length of time spent in intervention sessions. All of the standards for the Educational component were met. None of the inappropriate approaches and methods listed in the DPH Guidelines were found in the DVP. The DVP strongly met the Massachusetts Guidelines and Standards for Certified Batterers Programs, Section 4, Intervention Methodology.

Table 3
DVP Comparative Analysis to Massachusetts Guidelines and Standards for Certified Batterers Programs, Section 4, Intervention Methodology

4.1 Specialized Groups

DVP

A. Composition of the groups shall be restricted to perpetrators of domestic abuse who are of the same gender.

The DVP had an all male population.

B. A perpetrator shall attend a program of 80 hours, with individual sessions of 1-1/2 to 2 hours in length

The DVP consisted of 27 hours of sessions and 2 hours of orientation.

C. Groups shall, at some point, provide ample opportunity for participation in discussions, and for feedback to the perpetrator.

Discussion was an intricate component; feedback was a part of dialogue and returned home work.

D. The maximum size of groups is 15 participants.

Groups started with 18 to 10 participants and finished with approximately one third dropping out.

E. The program has the responsibility to impose any reasonable conditions on participants in intervention services that it deems appropriate.

The DVP leader had such authority.

Table 3 Continued
DVP Comparative Analysis to Massachusetts Guidelines and Standards for
Certified Batterers Programs, Section 4, Intervention Methodology

4.2 Educational Component

DVP

The curriculum of the educational component shall minimally include:

A. Identification, confrontation and change of abusive and controlling behaviors to victims including partners and children. All forms of physical abuse and intimidation shall be identified and challenged. Specific attention to emotional, mental, sexual and economic abuse shall be included.

Exercises were conducted that identified, confronted and changed these forms of abuse.

B. Identification and discussion of the effects of violence and abuse on victims, including children who witness such abuse. The short and long term effects of violence on spouses and children shall be enumerated. Clients shall be expected to take responsibility for creating these consequences: the exercises shall build empathy and take the perspective of the victims.

Exercises were conducted that prompted the participant to discover from personal experience the effects of abuse and violence.

C. Confrontation of excuses for abuse. This shall include a philosophical stance that abuse is the sole responsibility and choice of the perpetrator; abuse is never justified.

The reality of abuse as a choice of the perpetrator was reinforced throughout the program.

D. Identification and practice of cooperative and non-abusive forms of communication. Perpetrators are expected to learn non-abusive and responsible ways of treating their partners and children.

The intra group dialogues practiced non-abusive communications.

E. Identification of cultural and social influences that contribute to abusive behavior without allowing these issues to excuse or justify individual responsibility for abuse.

Social influences were examined. Ethnic focus was not observed.

Table 3 Continued
DVP Comparative Analysis to Massachusetts Guidelines and Standards for
Certified Batterers Programs, Section 4, Intervention Methodology

4.6 Inappropriate Methods

DVP

A. psychodynamic individual or group therapy which centers causality of the violence on the past

The DVP did not use any of these inappropriate methods.

B. communication enhancement or anger management techniques which lay primary causality on anger

C. systems theory approaches which treat the violence as a mutually circular process, blaming the victim

D. addiction counseling models which identify the violence as an addiction and the victim and children as enabling or co-dependent in the violent drama

E. family therapy or counseling which places the responsibility for adult behavior on the children

F. gradual containment and de-escalation of violence

G. theories or techniques which identify poor impulse control as the primary cause of violence

H. methods which identify psychopathology on either parties' as a primary cause of violence

I. fair fighting techniques, getting in touch with emotions or alternatives to violence.(pp.10-12)

Effective Correctional Strategies

Gendreau (1996) described principles of effective intervention with offenders. The first principle was that the services should be intensive and behavioral in nature. Gendreau meant that 40-70% of the offender's time should be spent in the program and the program should last three to nine months. The sentence structure of the NCSOCC was consistent with the three to nine month duration. However, inmates did not spend 40-70% of their time in the DVP related activities. The DVP did meet the description of an effective behavioral program in that it was cognitive behavioral in nature and attempted to change the cognition, attitudes, values and expectations which maintain antisocial behavior. Gendreau's second principle was that a program targeted high risk offenders. DVP batterers were high risk offenders. Men with histories of battering are more likely to commit serious crimes at higher rates than men not convicted of battering crimes (Isaac et al., 1994).

The third principle was that of responsivity to the offense. This described a match between the offender and the intervention. The diagnostic intake procedure for participation in the DVP satisfied this principle at one level. An appropriate match between the offender and the therapist in the program was a default process. The program was voluntary in nature and addressed a specific issue, battering behaviors. If the potential participants did not match well with the group leader, then they dropped out. Limited personnel inhibited the DVP's ability to meet this principle more fully.

The fourth principle of effective intervention asserted that if the program had contingencies to deal with possible inappropriate behaviors by the offender. The contingencies must be under the control of the therapist. In this case, they were. In response to committing inappropriate behavior, the group leader met with the individual and informed him of the inappropriateness of his behavior, gave instructions on what the positive behaviors are, and the consequences if those behaviors are not adhered to. The fourth principle called for a ratio of positive reinforcers to be much higher than negative reinforcers. Positive reinforcement was difficult in a correctional situation where there was enforced conformity and acting out is dealt with swiftly and punitively. In spite of this, the verbal reinforcers about hope and the power to change were consistent and powerful. The positive consequences were repeatedly detailed: a less chaotic life, a life where relationships were possible with less friction and violence. The fifth principle was that the group leader or therapist be able to relate in an interpersonally sensitive and constructive way. This implied that the therapists were trained and supervised appropriately. In a prior section, the group leader's qualifications were discussed. Here something different was required, a kind of affect and empathy on the part of the group leader. In the case of the DVP, the group leader, was the developer of the program with a high level of dedication to the program and a deep belief in the goals and techniques. Further she demonstrated a belief in the individual's ability to change and takes steps to validate the therapeutic environment as a nurturing, dignified environment that was both sensitive and authoritative.

The sixth principle was that the program structure and activities disrupted the criminogenic environment that prompted the offense in the first place. In the NCSOCC, incarceration interrupted criminal battering. The second part of the principle was that prosocial activities be predominant as Owens (1989) states, "the correctional institutions operated properly impose social controls as a model of prosocial concepts." The NCSOCC was a highly ordered and controlled environment. The offenders were serving sentences for what were considered to be less serious offenses. Therefore, the enmity between offenders and staff, specifically between security staff and offenders, was less than that of the state prison. The seventh principle asked that relapse prevention in the community be connected to an effective correctional program. This was not controllable by the group leader for the DVP. However, many of these participants returned to the community under conditions of probation or parole and therefore were required to attend community-based batterer programs. Through years of experience, the group leader has developed contacts with many of the probation departments as well as the community based batterer programs. The connections were not formalized. The eighth principle was that offenders be assisted in finding appropriate supportive services in the community once they are discharged. Again, this was somewhat problematic in the DVP. However, on the first day of the program, participants were given a list of community-based programs. They were urged to take steps to participate in these programs after they go back into the community. This was consistent with the reminder that their violence, abusiveness, and substance abuse behaviors required long-term cognitive behavioral

supports in order for changes to remain in place. Finally, Gendreau's six principles of ineffective program were not present in the NCSOCC's DVP.

Overall the DVP was consistent with the three models of cognitive intervention. The DVP was weak in time spent on rehabilitation programming and ties to related services in the community. Time and community ties are issues partially controlled by resources. If we believe Gendreau, shoring up these issues would make DVP a more effective program.

Table 4
DVP Comparative Analysis to Characteristics of Effective Corrections Programs

<u>Principles</u>	<u>DVP</u>
1. Intensive services that are behavioral in nature.	The recommended percentage of program time was not met.
2. Behavioral programs targeted at the crimino-genic needs of high risk offenders.	The focus was on both static and dynamic risk factors.
3. Responsivity-offender, therapist, program.	The DVP was specifically designed for factors presented by offender type.
4. Program contingencies/behavioral strategies enforced in a firm but fair manner.	A mix of demanding and empathic behavioral strategies were used.
5. Therapists relate to offenders in interpersonally sensitive and constructive ways and are trained and supervised appropriately.	Coordinator and co-facilitator had advance degrees and demonstrated high levels of concern.
6. Program structure and activities disrupt the delinquency network by placing offenders in situations (people and places where pro-social activities predominate).	The correction environment enforced pro-social standards and separated offenders from victims.
7. Relapse prevention in the community.	Referral information was at the first session provided. no formal aftercare in place.
8. High level of advocacy and brokerage as long as the community agency offers appropriate services.	The DVP Coordinator was an established professional with contact and influence.

Table 4 Continued
DVP Comparative Analysis to Characteristics of Effective Corrections Programs

<u>Characteristics of ineffective correctional interventions:</u>	<u>DVP</u>
1. Traditional "Freudian" psychodynamic and "Rogerian" non-directive or client-centered therapies.	No ineffective interventions were observed in the DVP.
2. "Medical model" approaches.	
3. Subculture and labelling approaches.	
4. Programs, including behavioral, that target low risk offenders.	
5. Programs, including behavioral, that target offender need factors that are weak predictors of criminal behavior, i.e., anxiety and depression.	
6. "Punishing smarter" strategies.	
(Gendreau, 1996, pp.120-127)	

Statistical Analysis

Three sets of statistics are contained in this section. The first set examines the background characteristics by the comparative group. The second set examines recidivism measures by comparative group. The third section presents data on group leadership structure and its effects on outcomes.

When initially reviewing the screening records of the DVP, it became apparent that within the data existed three comparison groups. Those three groups were completers, decliners and unavailables. Each subject in the sample was assigned to one of the three comparative groups. Assignment to a group was based on the subject's involvement with the DVP. Those who attended 13 or more sessions were designated as having "completed" the DVP. Those who chose to attend less than 13 sessions or none at all were designated as "declined" Those who were determined eligible for the DVP but left the NCSOCC before having a chance to choose to attend were designated as "unavailables."

The background characteristics for each of the three groups were compared. Table 5 shows that there were no significant differences (at $\alpha = .05$) among the groups on the following characteristics: age, race, education, marital status and prior offenses. Although not significantly different, the unavailable group had a low average number of prior offenses (25.5%) and the completers had the highest average with 35.3%. The 10% difference in number of prior offenses between completers and unavailables prompted further investigation to detect differences existed between comparison groups.

Table 5
Background Characteristics by Group

Characteristic	Completed (N=130)	Declined (N=80)	Unavailable (N=96)	Significance
AGE				
Mean (sd)	31.3 (7.2)	30.4 (6.8)	31.5 (8.6)	F=0.49, n.s.
RACE				
White	80%	75%	77%	$\chi^2=3.85$, n.s.
Black	15%	18%	17%	
Latino	4%	8%	4%	
Other	1%	0%	2%	
MARITAL STATUS				
Single	63%	64%	56%	$\chi^2=6.81$, n.s.
Divorced	14%	22%	25%	
Separated	14%	8%	9%	
Married	9%	7%	9%	
EDUCATION				
Less than high school	30%	27%	31%	$\chi^2=1.41$, n.s.
High school or equal	66%	58%	63%	
College	4%	7%	4%	
NUMBER OF PRIOR OFFENSES				
Mean (sd)	35.3 (40.6)	30.6 (33.5)	25.3 (22.2)	F=2.28, n.s.

Table 6
Actual Time Served

Characteristic	Completed (N=129)	Declined (N=77)	Unavailable (N=96)	Significance
<hr/>				
Number of Months Incarcerated at Correction Center				
Mean	10.4	9.1	5.8	F=20.52,
(sd)	(5.9)	(5.3)	(4.0)	p < .0001 ^a

^a Post hoc tests showed: completed > unavailable and declined > unavailable.

A one-way analysis of variance test was conducted to determine whether the group differences were statically significant for actual time served. Table 6 shows that there was a significant difference between the groups on average amount of time served ($F=20.52, p<.0001$). Post hoc tests revealed that the completers and decliners were incarcerated for significantly longer times than the unavailables. The mean for the actual amount of time served by the unavailables was less than 60% of the time served by those in the completed and declined groups. The shorter periods of incarceration explained their unavailable status - they were not in the institution long enough to attend the DVP. Although other factors affect length of sentence, shorter periods of incarceration can infer less serious offenses and a lower likelihood to reoffend. Further testing was conducted to investigate offense and offender seriousness.

Offender Seriousness

An initial examination of demographic characteristics for the comparative groups seemed to indicate that these groups were equivalent. Two differences were noted between the comparative groups. The first difference was that completers had a higher number of prior offenses. The second difference was that those in the unavailable group were incarcerated for significantly shorter periods of time. These two pieces of information hinted at the possibility that completers were more serious criminals than the decliners and the unavailables. If the completers were more serious offenders, then they could be expected to recidivate at a higher rate than the other two groups (Gendreau,

1996; Wolfgang & Ferracuti, 1967 pg 155). To pursue the issue of crime seriousness, two foundational studies regarding rating of seriousness of crime were examined. This was to see whether offense seriousness rating scores could be used to rate offenders in my. The first instrument examined was the 1978 Sellen-Wolfgang Seriousness Scale (Wolfgang, Thornberry & Ferracuti, 1987). The second was a survey rating seriousness of crimes (Rossi, Waite, Bose, & Berk, 1974). Both of these studies proved to be problematic in application to the current work. For example Rossi et al. rates beating a spouse as being less serious than beating a stranger or stealing a color TV. What both studies recorded was public perception of a crime's seriousness in another time and the offenses did not align well with those in. Neither the Sellen - Wolfgang Seriousness Scale nor the survey by Rossi, et.al.(1974) were used.

Further investigation was pursued for an appropriate crime seriousness rating system yielding an article summarizing the guidelines released by the Massachusetts Sentencing Commission (Yas, 1996). The Commission was made up of justice system professionals representing a broad range of perspectives within the justice system. Judges, prosecutors, defense attorneys, representatives from parole, probation, corrections, public safety and juvenile justice were on the Commission. The Commission's Executive Director and staff were criminal justice information management professionals. The Commission's guidelines corresponded well with the offenses in my study.

The Report to the General Court, the state legislature, prepared by the Massachusetts Sentencing Commission (1996) organized crime seriousness on a grid

system using two sets of criteria. On the Y (vertical) axis, current offenses were categorized into seriousness levels from one being for minor offenses to nine for murder. All offenses have punitive sanctions listed by level of offense seriousness. On the X (horizontal) axis of the grid, was the Criminal History Scale which rated an offender based on the seriousness and number of prior criminal convictions. Criminal history groups were classified from A to E - A being no or minor record to E being serious violent record. Criteria for classifications are as follows;

**Massachusetts Sentencing Commission
Criminal History Groups**

- E Serious Violent Record**
Two or more prior convictions in any combination for offenses in levels seven through nine.

- D Violent or Repetitive Record**
Six or more prior convictions in any combination for offenses in levels three, four, five, or six; or
Two or more prior convictions in any combination for offenses in levels five or six; or
One prior conviction for offenses in levels seven through nine.

- C Serious Record**
Three to five prior convictions in any combination for offenses in levels three or four; or
One prior conviction for offenses in levels five or six.

- B Moderate Record**
Six or more prior convictions in any combination for offenses in levels one or two; or
One or two prior convictions in any combination for offenses levels three of four.

- A **No/Minor Record**
No prior convictions of any kind; or
One to five prior convictions in any combination for offenses in levels one or two.

This system was an ideal design for the population of offenders in my study. The combining of offense level and prior criminal history group provided an organized system for rating and scoring the seriousness of an offender. This system readily adapted to measure the offender seriousness for subjects in the recidivism phase's three sample groups. The prior criminal records were tallied for each subject by the offense level and number of convictions. This provided a seriousness of criminal history letter rating for each subject. Next, the current offense was assigned a level based on the Commission Report Appendix A which has a level designation for all offenses. By pairing the subject's offense level with the criminal history scale rating, placement on the grid for each subject was achieved. Within each cell of this grid, the Sentencing Commission has recommended a range of sanctions. Recommended sanctions reflect the seriousness of offense and the seriousness of an offender's prior criminal record. In adapting the grid to seriousness of offender for this study, sentence recommendations were converted into point scores. As can be seen in Table 7, the grid cells were not numerically valued. Instead there is a range of sanctions within each grid cell. In order to calculate offender seriousness, a point value for each grid cell was assigned. Many cells in the grid contained "intermediate sanctions" - a sanction less than incarceration. Intermediate sanctions were in levels ranging from 1 through 4. Converting intermediate sanctions

into points that meshed with months was done by rating intermediate sanctions as if they were months. Intermediate Sanction #1 equaled one month point, Intermediate Sanction #2 equaled four month points, Intermediate Sanction #3 equaled eight month points and Intermediate Sanction #4 equaled 12 month points. All incarceration sanctions were converted to months point. Correspondingly 12 month points were added to all month scores. For each cell, the ranges were added together and averaged. That average became the offender seriousness point value assigned all subjects in that cell. Placement in a cell on the grid, through analysis of prior criminal history and current offense level, then received an offender seriousness point score. In categorizing and tabulating prior and current offenses, only offenses with a guilty or filed disposition were counted. Cases that were dismissed or found not guilty were not excluded from the analysis of either the seriousness of the present crime or criminal history grouping. This procedure was consistent across the three comparative groups, as were all data collection procedures. By contrast, when counting subsequent offenses, all new arrests were counted.

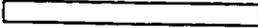
Table 8 illustrates the plotting of study subjects on the grid adapted and modified from the Sentencing Commission's grid (Table 7). The information from the Table 8 grid was tested using two methods (Tables 9 & 10). For the first test, cells were ranked and a Kruskal-Wallis 1-Way Anova test was conducted. The test yielded significance ($\alpha = .05$). A second analysis of variance test was conducted using the offender seriousness scores. Significance was again found. Both tests revealed the subjects in the completer group to be more serious offenders than subjects in the unavailable group. Because of a low group

n and a substantially larger standard deviation, test results for the decliner group as compared to the completer group were inconsistent. Decliners seriousness score averages in both tests were higher than the averages for the unavailable group. The decliners were more serious offenders as compared to the unavailables. The objective for these two tests, however, was to discover differences in offender seriousness between the unavailable group and the completers. Results of both tests showed completers to be more serious offenders the unavailables. This information is consistent with test conducted on number-of-prior-offenses (Table 5) and time-served (Table 6). Based on the seriousness scores, unavailables should recidivate at a rate significantly lower than completers. Gendreau believes that "static factors" in an offenders like information from the offender seriousness grid are reliable indicators in predicting recidivism. The more extensive a man's involvement with criminal behavior is the more likely that behavior will continue (Gendreau, 1996).

Table 7
Massachusetts
Sentencing Guidelines Grid

Level	Illustrative Offense	Sentence Range				
		A	B	C	D	E
9	Murder	Life	Life	Life	Life	Life
8	Manlaughter (Voluntary) Rape of Child with Force Aggravated Rape Armed Burglary	96 - 144 Mos.	108 - 162 Mos.	120 - 180 Mos.	144 - 216 Mos.	204 - 306 Mos.
7	Armed Robbery (Gun) Rape Mayhem	60 - 90 Mos.	68 - 102 Mos.	84 - 126 Mos.	108 - 162 Mos.	160 - 240 Mos.
6	Manlaughter (Involuntary) Armed Robbery (No gun) A&B DW (Significant injury)	40 - 60 Mos.	45 - 67 Mos.	50 - 75 Mos.	60 - 90 Mos.	80 - 120 Mos.
6	Unarmed Robbery Stalking in Violation of Order Unarmed Burglary Larceny (\$50,000 and over)	12 - 36 Mos. IS-IV IS-III IS-II	24 - 36 Mos. IS-IV IS-III IS-II	36 - 54 Mos.	48 - 72 Mos.	60 - 90 Mos.
4	Larceny From a Person A&B DW (Moderate injury) B&E (Dwelling) Larceny (\$10,000 to \$50,000)	0 - 24 Mos. IS-IV IS-III IS-II	3 - 30 Mos. IS-IV IS-III IS-II	6 - 30 Mos. IS-IV IS-III IS-II	20 - 30 Mos.	24 - 36 Mos.
3	A&B DW (No or minor injury) B&E (Not dwelling) Larceny (\$250 to \$10,000)	0 - 12 Mos. IS-IV IS-III IS-II IS-I	0 - 15 Mos. IS-IV IS-III IS-II IS-I	0 - 18 Mos. IS-IV IS-III IS-II IS-I	0 - 24 Mos. IS-IV IS-III IS-II IS-I	6 - 24 Mos. IS-IV IS-III IS-II IS-I
2	Assault Larceny Under \$250	IS-III IS-II IS-I	0 - 6 Mos. IS-III IS-II IS-I	0 - 6 Mos. IS-III IS-II IS-I	0 - 9 Mos. IS-IV IS-III IS-II IS-I	0 - 12 Mos. IS-IV IS-III IS-II IS-I
1	Operating Aft Suspended Lic Disorderly Conduct Vandalism	IS-II IS-I	IS-III IS-II IS-I	IS-III IS-II IS-I	0 - 3 Mos. IS-IV IS-III IS-II IS-I	0 - 6 Mos. IS-IV IS-III IS-II IS-I
Criminal History Scale		No/Minor Record	Moderate Record	Serious Record	Violent or Repetitive	Serious Violent

Sentencing Zones

-  Incarceration Zone
-  Discretionary Zone (incarceration/intermediate sanction)
-  Intermediate Sanction Zone

Intermediate Sanctions Levels

- IS-IV 24-Hour Restriction
- IS-III Daily Accountability
- IS-II Standard Supervision
- IS-I Financial Accountability

The numbers in each cell represent the range from which the judge selects the maximum sentence (Not More Than).
The minimum sentence (Not Less Than) is 2/3rds of the maximum sentence and constitutes the initial parole eligibility date.

Table 8
Offender Seriousness Grid

(based on the Sentencing Guideline Grid of Massachusetts Sentencing Commission)

Seriousness Level of Current Offense Serious ↑ ↓ Minimal	7	C = 0 D = 0 U = 2 21 (87)	C = 0 D = 0 U = 0 22 (97)	C = 1 D = 0 U = 0 24 (117)	C = 1 D = 1 U = 0 25 (147)	
	6	C = 2 D = 0 U = 0 17 (62)	C = 0 D = 0 U = 0 18 (68)	C = 2 D = 1 U = 0 20 (74.5)	C = 1 D = 2 U = 0 21 (87)	C = 0 D = 0 U = 0 23 (114)
	5	C = 0 D = 0 U = 0 12 (19.2)	C = 0 D = 0 U = 0 13 (21.6)	C = 1 D = 1 U = 0 16 (57)	C = 4 D = 3 U = 0 19 (72)	C = 1 D = 1 U = 0 21 (87)
	4	C = 2 D = 1 U = 2 8 (12.2)	C = 3 D = 0 U = 0 10 (16.2)	C = 2 D = 1 U = 0 11 (16.8)	C = 3 D = 3 U = 2 14 (37)	C = 1 D = 0 U = 1 15 (42)
	3	C = 16 D = 9 U = 16 5 (9.8)	C = 20 D = 12 U = 21 6 (10.4)	C = 9 D = 13 U = 20 7 (11)	C = 45 D = 14 U = 23 8 (12.2)	C = 2 D = 2 U = 2 9 (15.6)
	2	C = 1 D = 1 U = 0 1 (3)	C = 1 D = 0 U = 3 2 (7.75)	C = 1 D = 4 U = 1 3 (8.6)	C = 4 D = 2 U = 2 4 (9.2)	C = 1 D = 0 U = 0 5 (9.8)
	Criminal History Scale	A	B	C	D	E
	Minimal ← → Serious					

C = Completers
 D = Decliners
 U = Unavailables
 Cell Rank (Cell Score)

Table 9

Offender Seriousness Rank by Group

Kruskal-Wallis 1-Way Anova

<u>Mean Rank</u>	<u>Cases</u>		
157.97	121	Group = 1	Completed
144.32	76	Group = 2	Declined
130.24	<u>93</u>	Group = 3	Unavailable
	Total	290	

	Chi-Square	D.F.	Significance
Corrected for ties	6.01	2	.049

Table 10

Offender Seriousness Score by Group

One-Way Analysis of Variance

<u>Group</u>	<u>Count</u>	<u>Mean</u>	<u>Standard Deviation</u>	<u>Standard Error</u>
Complete	121	18.95	22.45	2.04
Declined	76	21.35	26.06	2.99
Unavailable	<u>93</u>	<u>13.42</u>	<u>12.12</u>	<u>1.26</u>
Total	290	17.81	21.03	1.24

F-Ratio = 3.33

F-Probability = .04

Fisher LSD Post Hoc test showed that: completers and decliners had significantly higher offender seriousness score than unavailables.

Recidivism Rates

The objective of this section is to demonstrate the effectiveness of the intervention in statistical terms. Criminal arraignments subsequent to release from the NCSOCC were recorded as recidivisms. These arraignments were necessitated by an arrest. When the three groups were compared on subsequent arraignments, there was no significant difference among them. Recidivism results were derived by using two series of chi square tests. The first series examined recidivism for any offense for all subjects on release for 8, 12, 18, 24, and 30 months (Table 11). The second series examined recidivism only for apparent cases of domestic violence (Table 12). Tables 11 and 12 show the recidivism outcome measures by intervention group. In both series of tests no significance ($\alpha=.05$) was shown. The rate for initial rearrests was between comparative groups showed little difference. A search for patterns among comparison groups revealed little.

Table 11

Reoffended Within 8 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	60 55.6%	37 50.7%	50 54.9%	147 54.0%
Yes (n) (%)	48 44.4%	36 49.3%	41 45.1%	125 46.0%
Total	108 39.7%	73 26.8%	91 33.5%	272 100.0% n.s.

Reoffended Within 12 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	51 53.7%	35 51.5%	48 55.2%	134 53.6%
Yes (n) (%)	44 46.3%	33 48.5%	39 44.8%	116 46.4%
Total	95 38.0%	68 27.2%	87 34.8%	250 100.0% n.s.

Table 11 continued

Reoffended Within 18 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	37 56.1%	31 53.4%	38 58.5%	106 56.1%
Yes (n) (%)	29 43.9%	27 46.6%	27 41.5%	83 43.9%
Total	66 34.9%	58 30.7%	65 34.4%	189 100.0%
				n.s.

Reoffended Within 24 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	28 57.1%	23 54.8%	23 54.8%	74 55.6%
Yes (n) (%)	21 42.9%	19 45.2%	19 45.2%	59 44.4%
Total	49 36.8%	42 31.6%	42 31.6%	133 100.0%
				n.s.

Table 11 continued

Reoffended Within 30 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	13 65.0%	9 47.4%	6 37.5%	28 50.9%
Yes (n) (%)	7 35.0%	10 52.6%	10 62.5%	27 49.1%
Total	20 36.4%	19 34.5%	16 29.1%	55 100.0%
				n.s.

Percentage Within Group to Recidivate

	<u>Sample Number</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>
8 months	275	44.4%	49.3%	46%
12 months	250	46.4%	48.5%	44.8%
18 months	189	43.9%	46.0%	41.5%
24 months	133	42.9%	45.2%	45.2%
30 months	55	35.0%	52.6%	62.5%

Table 12

Apparent Domestic Violence - Reoffended Within 8 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	80 74.1%	47 64.4%	69 75.8%	196 72.1%
Yes (n) (%)	28 25.9%	26 35.6%	22 24.2%	76 27.9%
Total	108 39.7%	73 26.8%	91 33.5%	272 100.0% n.s.

Apparent Domestic Violence - Reoffended Within 12 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	67 70.5%	43 63.2%	67 77.0%	177 70.8%
Yes (n) (%)	28 29.5%	25 36.8%	20 23.0%	73 29.2%
Total	95 38.0%	68 27.2%	87 34.8%	250 100.0% n.s.

Table 12, continued

Apparent Domestic Violence - Reoffended Within 18 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	42 63.6%	36 62.1%	51 78.5%	129 68.3%
Yes (n) (%)	24 36.4%	22 37.9%	14 21.5%	60 31.7%
Total	66 34.9%	58 30.7%	65 34.4%	189 100.0% n.s.

Apparent Domestic Violence - Reoffended Within 24 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	30 61.2%	26 61.9%	33 78.6%	89 66.9%
Yes (n) (%)	19 38.8%	16 38.1%	9 21.4%	44 33.1%
Total	49 36.8%	42 31.6%	42 31.6%	133 100.0% n.s.

Table 12, continued

Apparent Domestic Violence - Reoffended Within 30 Months by Group

<u>Reoffend</u>	<u>Completed</u>	<u>Declined</u>	<u>Unavailable</u>	<u>Total</u>
No (n) (%)	10 50.0%	11 57.9%	11 68.8%	32 58.2%
Yes (n) (%)	10 50.0%	8 42.1%	5 31.3%	23 41.8%
Total	20 36.4%	19 34.5%	16 29.1%	55 100.0% n.s.

Considering the results of the offender seriousness tests the completers were expected to be re-arrested at a higher rate than the unavailibles. They were not. Only one test showed any significance regarding recidivism (see table 13). A Post hoc test showed that the completers and the unavailibles had significantly lower numbers of new offenses than the decliners. The decliners initial time intervals to rearrest were similar to those of the completers and unavailibles. The difference is that decliners went on to be arrested more times after that initial re-arrest. Decliners and completers were not concluded to be significantly different in offender seriousness testing (table 9). In number of subsequent arrests however decliners seemed to be more serious offenders.

Type of Group Facilitation

Those who completed the program experienced one of two forms of intervention group leadership. The first form of leadership was a female and male co-therapist model; the second model was a female therapist only. Table 14 presents recidivism outcome measures broken down by these two types of leadership for the completer group only. As can be seen from Table 14, there were no significant differences between the two leadership formats on any of the recidivism outcome measures.

Table 13
Recidivism Measures by Intervention Group

Characteristic	Completed (N=130)	Declined (N=80)	Unavailable (N=96)	Significance
NUMBER OF NEW OFFENSES				
Mean	2.8	4.4	2.4	F=3.78, p<.02 ^a
(sd)	(5.4)	(6.3)	(2.9)	

^a Post hoc tests showed: completed < declined and unavailable < declined.

Table 14
Outcome Measure by Form of Group Leadership
 (Completer only)

Characteristic	Female & Male Co-Therapist (n=65)	Female Therapist (n=56)	Significance
Subsequent Arraignments			
No	52%	41%	$\chi^2=1.5$, n.s.
Yes	48%	59%	
Subsequent Pending or Guilty Offenses			
No	59%	45%	$\chi^2=2.3$, n.s.
Yes	41%	55%	
Type of Subsequent Arraignments			
No New Charges	52%	41%	$\chi^2=2.2$, n.s.
Apparent DV	8%	14%	
Ambiguous DV	28%	30%	
Number of Charges including Ap and Amb	12%	14%	
Number of New Offenses			
Mean (sd)	31 (6.2)	25 (4.5)	$t=0.56$, n.s.

Cognitive Restructuring

The data for this phase of the study were the words of the DVP participants. The technical ability of videotape to repeatedly show these words being said in these sessions, allowed for an accurate record of participants' dialogue. Therefore the following analysis of dialogue focused exclusively on the group that was videotaped. The dialogue was not substantially different than that of the other group and was more amenable to repeated scrutiny. Appendix G is sample of the dialogue in context.

First Session

At the start of the first session, the group leader instructed the participants to take turns, give their name and state what they expected to get out of this group. In both observed groups, the responses were short and usually made no direct reference to violence. Four out of twelve participants used the word violent/violence;

"To take care of violent behavior."

"Hope to change actions that lead to becoming violent."

"To learn about violence."

"Educate myself of violent behavior."

The word "violence" was used by one third of the participants. The phrasing distanced the participant from the violence. One comment, "To take care of violent behavior," objectifies violence. It is something to be taken care of, like a leaky roof.

The word "control" was used seven times and the concept of control eluded to twice more with the words "handle" and "deal." The word/concept "control" was frequently (9:12) included as a reason for attending the DVP. Participants stated that they

wanted control over anger(5), temper(1), impulse(1), rage(1) and issues(1). This implies a cognitive construct that believes in the lack of internal control.

"Control of anger towards my wife and how to deal with those things."
"Deal with issues that got me in trouble in the past, stay out of jail."
"Control my anger and not lash out"
"Learn to control temper."
"Control anger, get a little education out of this program."
"Control anger, learn about violence."
"Get something out of the program, better myself control temper."
"Control my poor impulse control."
"I got a bad temper sometimes and I don't know how to handle it."

Five times "learning" was included as a reason for coming to the DVP;

"I got a bad temper and haven't learned to handle it."
"learn to control temper."
"To learn about violence."
"Educate myself of violent behavior."
"Get a little education."

The use of the words *violence*, *control*, and *learn* offer a view of the participants' reasons for being in the DVP and their interpretation of their life issues. Violence was distanced. The few who did mention it phrased the term as if it did not apply to them. Control was viewed as something they did not have over violent behavior or precursors that, in their view, caused the violent behavior. To view the DVP as a learning program provided an opportunity to seek and receive intervention while still denying responsibility. It got them in the door.

Middle Session

At the start of the ninth session worksheets were handed out titled "History and Family of Origin" (Appendix E). The group leader instructed the participants to take the worksheet, which was presented in a landscape format, and hold it so that the horizontal line across the top of the page became a vertical line. "Draw a line through the midpoint and put half your age," she directed. At the bottom of the line, she asked them to record their earliest memory. Then she asked the participants to take some time and jot down events or memories that had a dramatic effect upon their lives. This took 15 minutes. The group leader coaxed, guided and advised throughout as needed. Next, each participant orally presented his timeline. After each person finished, the group leader applied some themes to each story. The worksheets continued for five pages asking information on the influence of relatives, events, and behaviors and was assigned as homework (Appendix E).

The second half of the timeline included memories of the participants' use of violence. Pairing these two sets of memories prompted an awareness that their own violence was a reliving of when they were the targets of violence. That they were doing unto others what had been done to them was, for some, an epiphany. It invoked powerful emotional responses and tears. Many participants saw their personal role reversal from recipient to abuser. This was not, they claimed, how they wanted their lives to turn out.

"My father beat me...beat my mom...I think I am very abusive to women."

"My father snapped my mother's neck, she spent two years in the hospital... I have been abusing her [girlfriend] for years."

"Stepfather abused my mother. She shot him. I became the schoolyard bully. Kind of been a bully ever since."

"I never wanted to be like my dad."

"Didn't want to be like my father - did my kids and my wife wrong."

"I was abused, I took my frustrations out on others, tried to stab a teacher."

At that point men who, 4 weeks prior, would not connect the word "violence" to their own behavior were starting to make that connection. Responses in this exercise blamed parents and others for the abuse participants experienced or witnessed. Participants articulated responsibility for their own behavior, seeing its roots but understanding that the choice was theirs. Tables 15 and 16, from the recidivism sample, tallied responses to violence in the family of origin at around 50%. This information was recorded during DVP screening. Observed participants, in this week 4 exercise, overwhelmingly responded with tales of seeing and/or being subjected to parental violence (7:8) or 87.5%. One participant made no reference to his parents.

Table 15
Witness to interparental violence / abused as a child
Recidivism total sample - self reported during screening

		<u>Child abuse</u>		
		Yes	No	Total
<u>Violent family of origin</u>				
Yes	(N)	37	18	55
	(%)	12.3%	6.0%	18.2%
No	(N)	82	165	247
	(%)	27.2%	54.6%	81.8%
Total	(N)	119	183	302
	(%)	39.4%	60.6%	100.0%

Table 16
Witness to interparental violence / abused as a child
Recidivism completer sample - self reported during screening

		<u>Child abuse</u>		
		Yes	No	Total
<u>Violent family of origin</u>				
Yes	(N)	15	10	25
	(%)	11.6%	7.8%	19.4%
No	(N)	41	63	104
	(%)	31.8%	48.8%	80.6%
Total	(N)	56	73	129
	(%)	43.4%	56.6%	100.0%

Final Session

At the beginning of the final session, the group leader asked each participant to, in turn, speak directly to each person in the group and tell each person what it meant to have that person in the group. One purpose of this goodbye exercise was to practice closure in a civil fashion. The group leader reminded the participants that many of their past goodbyes had involved rough circumstances including the intervention of police. This goodbye signified an end to a particular group and an initial effort to change their lives. From a research perspective the goodbye exercise served another purpose; it provided an opportunity to observe the participants while they reflected on the intervention process. Each participant told each other participant what it meant to be in the group with him. All addresses were respectful. Many individuals said they identified with what the other had told of his beliefs, experiences, and behaviors.

"You remind me of my situation."

"You make me relive my hurt by putting it right out there."

"I see a little bit of everyone here in me."

"You remind me of myself."

"You made me think and remember things I'd forgotten."

"You're like me hard headed."

"We are both stubborn people."

"[Your experience] could have been mine."

They offered each other encouragement and advice. Their words reflected an integration of the material covered in this program and a desire to use the tools presented. To a younger participant others said;

"I wish you would speak up more." "You have grown a lot; you used to be just

violent." "You and I have practiced restraint with each other out on the basketball court and that's amazing."

The younger participant has this to say to a fellow participant, "You are the first person I ever apologized to, you have helped me learn to control my anger. I never told anyone before how I was feeling."

These exchanges between the youngest participant and others show application of curriculum contained in the DVP. "I wish you would speak up more," the DVP taught that talking was a preferred choice over violence. In the quote one batterer encouraged another batterer to speak, to use words. "You have grown a lot," is a positive reinforcer. In the full quote "grown" or "grow" is repeated 7 times (see Appendix G). The practice of "restraint" on the basketball court by the younger participant is sighted by two participants. The speaker characterizes the use of restraint as "amazing," an achievement. The younger participant addresses another participant and reveals information of learning control, expressing feeling including, for the first time, sorrow. These types of exchanges were typical of the dialogue in the goodbye exercise.

The goodbyes reflected the influence of the DVP and provided examples of cognitive restructuring. Miller (1992) asserts that people are able to advise and encourage others more readily than they can themselves. Many of the examples of cognitive restructuring took the form of advice to other participants, the advice related back to behaviors and concepts examined in the DVP:

"take a step back, start over [disengage]."

"Just gotta stop being violent, gotta say bump it-it ain't worth it no more."
translates to, choose not to be violent, the personal costs are too high.

"That stubbornness, break it down, change." Reflect upon your position.

"Channel anger away from violence." Vent your anger in non-violent ways.

"One minute you're fine then you fly off, control that, you can't do that, you got to think before you act." Look at what you call impulsive violent behavior.

"You know partying and drinking is a pattern - I can't tell ya what to do - something inside [you] gotta tell ya." Certain things you do lead to violence.

In giving advice to others, participants were observed trying to put into words new cognitive constructs. Not all participants could verbally convey concepts so new to them and struggled. Schön's (1983) reflective-in-action theory demonstrates cognitive restructuring through the use of dialogue in a teaching environment. Schön used dialogue between a teacher and student as explanatory examples of what he called "reframing." The goodbye exercise served this same purpose. The process of applying new conceptual constructs to another person is evidence of cognitive restructuring and a possible precursor to behavioral change. The gist of the many addresses was, "in you I see me." The tendency to urge peers/fellow participants to make the choices that will end the violence was evidence of cognitive restructuring. Some comments were directed towards the participant himself.

"I didn't think I had a problem. Now I know I have been abusive towards women."

"I put myself in the position. I see the impossibility of unsaid wishes."

Two powerful factors occurred in the closing addresses. First, the depriving nature of an incarcerated environment seemed to serve as a deterrent: "I don't want you to come back here." Second, the choice to attend and complete the DVP was influenced by another

participant. Incarceration and peer influence were compelling reinforcers for the participants who completed the DVP.

Summary

The DVP was found similar to the Amend program model. It met those parts of the Massachusetts guidelines that were applicable and conformed to the effective correction characteristics; however the DVP involved less time than recommended in all three comparison models. The DVP's connection with domestic violence intervention resources in the community was also found wanting. Both time, on program related activities, and connection with the community were important pieces to the three comparison program models. The rate of recidivism for subjects completing the DVP was not significantly different than the rate for subjects in the comparison groups. Given the higher offender seriousness score of completers and that decliners had higher rates of subsequent offenses some effect on recidivism can be assumed. Cognitive restructuring was evident in DVP participants. By comparing participant dialogue over the first, middle and final sessions, substantial change was detected. The way participants conceptualized how they came to be incarcerated and what the future held for them changed markedly.

CHAPTER V

CONCLUSIONS, DISCUSSION AND RECOMMENDATIONS

This chapter contains a discussion of the study's findings, an examination of issues germane to conducting research in correction institutions, and a set of recommendations for domestic violence interventions and their study.

Conclusions

In the first phase of this study, the program comparisons, the DVP was found generally consistent in design with the Amend tenets (Lindsey, McBride & Plant, 1993), the Massachusetts guidelines for batterers intervention programs (Massachusetts DPH, 1995), and Gendreau's (1996) Principles of effective intervention with offenders. The DVP varied with all three comparison models in two areas; first the length of time spent on program-related tasks. In the case of correction characteristics, time spent on task fell short both on time per week and the overall length of the program. The second difference between the DVP and the comparison models was the lack of a formalized aftercare component and other community based resources. These two points of difference are important and most likely effected recidivism rates.

The recidivism data in tables 11 and 12 showed DVP completers did no worse than the other two groups. The higher number of prior offenses and the significantly

longer time served by completers as compared to the unavailables suggests that the completers were more likely to fail. Completers had more experience with the criminal justice system and scored significantly higher in the offender seriousness grid. The number of prior offenses, time served and the offender seriousness score indicated that the completers were more serious offenders, although other demographic characteristics for all groups measured similar. A test for number of rearrests per subject showed a pattern of higher amounts of reoffending for decliners. Table 13 revealed the decliners had a higher number of new offenses compared to completers and unavailables.

Considering differences in comparison groups, completers experienced a success rate that they might not have had, had they not attended the DVP. We can assume that because the program was voluntary decliners selected not to attend. That reveals a difference in the internal make-up of the decliners versus the completers and could be of interest in a future study. The DVP did not have the capacity to enroll more inmates. The number of clients screened for the program anticipated the decliner rate at approximately 40%. In subsequent studies of incarcerated batterers, the issue of compelling or coercing of batterers into treatment needs to be examined. Compelling treatment is consistent with Gendreau's second principle of effective intervention which states that programs should target high risk offenders. In the third phase of this study the DVP seemed to reveal positive changes within those attending. The dialogue of the participants changed over the course of the treatment. This lent confidence to the assertion that though recidivism rates were not statistically significant, something was going on in the DVP which

warrants further investigation. Viewed as a whole the research findings for the DVP's: structure, rate of recidivism and participant changes in conceptualization showed the DVP to be an effective program. The DVP's worth was positively influenced by institutional conditions and competent program execution. Intervention programs for incarcerated batterers are in correctional institutions from Massachusetts to California. It would be wise to learn more about interventions for incarcerated batterers.

The findings of this study are consistent with much of the research on batterers programs as well as correctional rehabilitation programs in that the results are inconclusive. Many limitations of this study are intrinsic to the any study of human behavior. The option of saying, nothing works is an attractive one. Martinson's (1974) assertion that nothing works with regard to correction programs has been widely recognized as an authoritative assessment of society's inability to reform criminals. Gottman and Jacobson (1998) have been characterized as saying "nothing works" with regards to batterers treatment (Ebbert, 1998) and that resources need to be diverted to services for the targets of battering. In both the Martinson study and in the work of Jacobson and Gottman, scientific rigor has been used to narrow the view so as to eliminate programs that perhaps have an effect upon violent behavior. The structure of such programs as Communication Without Violence (Stewart & Brighton, 1995) and Gang Peace in Boston defy quantifying social science methods of investigation. Of equal or perhaps greater concern is what taking the position that nothing works implies. If we hold that nothing works, does that imply that nothing should be tried; or that only

programs that are structured so as to allow social science investigation should be developed? That it is difficult to find effective programs, hopefully means that broader methods of understanding what transpires in rehabilitative programs need to be developed. This dissertation stands as an effort to apply broad based investigatory techniques to an intervention program. To bemoan that nothing works seems unproductive and almost counter-intuitive, yet it aids in the justification of punitive sanctions for perpetrators of violent spousal battering. On an intellectual level we know incarcerated batterers are eventually released. On a visceral level we deny this reality.

For some incarcerated batterers, a cognitive behavioral domestic violence intervention program correlates with reduction in arrests. In the case of batterers, we are identifying behaviors known to be antecedents of both more generalized criminal behavior and violent behavior in the next generation. Therefore the positive effects of treating incarcerated batterers can be both short-term in reducing recidivism and long-term in that it strikes at the roots of learned violent behavior. The curriculum of these programs is an important factor in their success. Like the DVP an effective curriculum needs to be a combination of cognitive, behavioral and affective components. Respectively these components prompt change in the mental, behavioral and emotional realms. Developing and implementing a program that effectively balances these three components is difficult. If the affective component is overemphasized the weaknesses of traditional therapy surface. Treatment becomes non-directive in nature and is susceptible to batterer manipulation. However, if a cognitive behavioral intervention does not

integrate a genuine affective component the program will be sterile and ineffective.

The DVP offered two different leadership styles in the group therapy sessions. One was the male and female group facilitation model advocated by Stewart and Brighton (1995). Although there was no statistical significance between the two styles, the usage of male and female co-facilitators model in a group offers some practical benefits. The sessions do not need to be cancelled if one facilitator is unavailable. The use of female and male facilitators in a group therapy serves to recreate the family (Yalom, 1970) the place where battering or violent behaviors were usually learned. The male-female therapist model, viewed from an Erikson (Bischof, 1970) perspective, provides an opportunity for the batterer to resolve earlier developmental failures within the recreated family. The symbolic modeling of parenting provided by having male-female facilitators, although not showing a statistically significant effect, did show a lower percentage of recidivism with those who attended the DVP cycles. We know from the literature (Gottman and Jacobson, 1998) that chaotic childhoods are antecedents to battering behavior. As noted in tables 14 and 15, only 50% of the sample, when initially screened, reported a history of either witnessing inter-parental abuse or of being abused themselves as children. It is important to note that four weeks into the program the percentages of reported incidents changes. The participants revealed either witnessing inter-parental abuse, being abused themselves or both at a rate of 87.5%. We are left with the dilemma of when to believe the batterer - at an initial interview or survey, or later when they have shown some level of investment in an intervention program. I assert that a higher level of

credibility can be assumed with a batterer who has shown a four-week, 13- hour commitment to the DVP. Would someone give up such personal information as freely?

Research models used in investigating the DVP were similar to prior research on interventions for batterers. The gauge of re-arrests was a baseline similar to that used by Sherman and Berk (1984) and those who tried to replicate them (Garner, et al., 1995). In these studies, re-arrests became the standard for recidivism. Fagan (1996) and others (Dutton & McGregor, 1991; Abate, 1997) recommend that arrest itself is not enough and that other actions need to be taken. In response, community based battering intervention programs have been developed and studied extensively (Hamberger, 1997; Edleson, 1995; Tolman & Edleson, 1995; Star, 1983). This dissertation takes the next step, and examines an intervention that is beyond those previously studied. With few exceptions (Wolfus & Bierman, 1996), studies of batterers' intervention programs have concerned themselves with batterers who are in the community. Increasingly batterers are being incarcerated (United States Department of Justice, 1998) because of the way laws targeting domestic violence are being amended (MGLA. Chapter 209A.,1996). Therefore, this study, looking at incarcerated batterers, particularly those who received a cognitive behavioral intervention, addresses the logical next step in the study of intervention with batterers. With a decreased tolerance for domestic violence in our media, public opinion and legislatures, the increased incarceration of batterers is inevitable. As part of this next step, theories on effective and ineffective correctional programming characteristics (Gendreau, 1996) were considered. Gendreau asserts that

programs, properly constructed and conducted, will cause lower recidivism. The one study found that examined the treatment of incarcerated batterers (Wolfus & Bierman, 1996) did not tracked recidivism.

Discussion

Conducting a treatment program within a correctional facility has a number of drawbacks. Incarceration creates boredom and deprivation, a fertile ground for subculture values to take hold. Very powerful forces within the inmate subculture are sexism and machoism. Being a single sex environment, behaviors viewed as gender-specific become magnified. Within the male incarcerated culture examples of this are; excessive use of profane language, loud intimidating speech, focus on physical fitness, and a higher likelihood of violent incidences. A second drawback is the restricted movement in a correctional environment. Access to all areas of a correctional facility are restricted and therefore require either an escort or personnel to open a series of locked doors. When a therapy or treatment session is held, the availability and willingness of security staff to provide services has an effect upon the attendance in these programs. With the good order of an institution being the primary concern of institutional administrators, allocations of funds for personnel and other resources necessary in providing treatment programs are modest in comparison to what are considered more necessary expenses - security and basic need items (food, clothing, heat). In spite of these drawbacks, programs in correctional institutions that demonstrate characteristics of effective

correctional programs, do have a positive impact and do lower the rate of recidivism for offenders (Gendreau, 1996).

Gendreau's characteristics of effective correction programs were present in the DVP. Two of Gendreau's characteristics that had a weak presence in the DVP were, *time spent in program* and *relapse prevention in the community*. Gendreau (1996 pg. 7) states that "services should occupy 40-70% of the offenders time...and are of 3 to 9 months in duration." Although the percentage of time spent in the program was lower than recommended, the participants dialogue revealed a substantial amount of program focused exchanges outside the sessions. Relapse prevention in the community was not a formal component of the DVP. A discussion on relationships with community resources is included in the recommendations section of this chapter. The effective corrections characteristic that was most strongly met by the DVP was fifth, *relate to offenders in sensitive and constructive ways*. The facilitator's concern epitomized this characteristic. The DVP therapeutic like environment was fostered by the facilitator's genuine concern for participants. The facilitator's concern was the affective component mentioned at the start of the chapter. The influence of the DVP facilitator was apparent. Her themes laced the participants' dialogue. The first theme was learning. Framing the group as an educational experience transformed the perception of the process from "we will fix you" to "you can change." You can change was a more palatable presentation. Choice, hope and change were important themes of the DVP and played a part in bringing and keeping participants in the program. Within the DVP a number of components coalesced to

facilitate cognitive restructuring of participants. In a firm yet caring manner, the DVP confronted violent behavior and portrayed it as controllable and unacceptable. DVP peers broke each others isolation and developed a value for choice and change.

More batterers are being incarcerated while the rate of domestic homicides has declined (United States Department of Justice, 1998). We can assume then that the increased incarcerations are for offenses warranting secondary responses - remedial responses. Gendreau has identified in detail what works in correctional programs. Gelles and Straus (1988) stated that effective remedies to domestic violence need to be developed at the societal level. A secure correctional facility designed and focused solely to intervene with batterers would integrate effective individual treatment with a strong signal that society's tolerance for family violence is diminishing. A correction facility charged with a single mission is at an advantage in its pursuit of effective programming. Batterer intervention/detention facilities should be set up to serve regions sufficient to populate them. Pilot programs can be designed to employ effective strategies, avoid ineffective strategies and develop informed improvements. All program activity should be recorded for research in a format that serves the needs of the criminal justice community as well. Indiscriminate incarceration of batterers is wrong. Judges need, available to them, sufficient information to assess risk and appropriate options for imposing sanctions.

Recommendations

The information developed for this study provides guidance to the question "Where do we go from here?" The use of incarceration as a response to battering is a fact. Given this fact, it becomes our responsibility to utilize the incarceration of batterers in ways that most effectively ameliorate domestic violence. Six recommendations are offered as a result of this study:

1. Further study that is long-term in character and focussed on the incarceration and treatment of batterers.
2. The integration of incarceration into a broader range of responses towards battering.
3. The development of a range of responses in an organized system where the responses would be more closely matched to the needs of the batterer.
4. Separate secure facilities designed specifically for batterers.
5. Education programs for adults and children
6. A public campaign using the resources of the mass media that rejects violence as a solution to disputes within a family.

Recommendation #1 - Further study that is long-term in character and focussed on the incarceration and treatment of batterers: Nationwide, a quarter of local jail populations are domestic abuse offenders (USDOJ, 1998). To properly respond to this

information, we should know more about these offenders - how they came to be incarcerated, what demographics they represent, what needs they have, precursors to their incarceration and other relevant factors. To date, studies on incarcerated batterers are sparse. We do know that a large segment of the total incarcerated population started their criminal careers of violence practicing domestic abuse (Dutton & Hart, 1993). To know more about incarcerated batterers is to know more about initial criminal activity and provides an opportunity to study future common criminals in an earlier stage of antisocial development, as domestic abusers. Information that can be gleaned from studies of incarcerated batterers will inform and better equip us to address the issue of domestic abuse. Perhaps some valuable information on the prevention of crime in general can be learned.

Recommendation #2 - The integration of incarceration into a broader range of responses towards battering: This study is not advocating the wholesale incarceration of batterers. The reality is that incarceration of batterers happens to an extensive degree. That degree can logically be expected to remain stable or grow. Correctional institutions are isolated from the community. They lack integration with resources in the community, both criminal justice, as well as social service systems. In the case of the incarcerated batterer, in order to integrate the sanction of incarceration with the range of other treatments and sanctions, a conscious effort must be undertaken to compensate for the natural reluctance to work together. Community services and correctional institutions instead remain isolated and separated. The grim mystique of correctional institutions as

well as their physical separation from the community need to be acknowledged and overcome. Correctional systems must view their obligation as extending past the front gate. Community-based correctional systems as well as social services are physically and administratively separate from correctional institutions. Liaison personnel, inter-agency action committees, and other types of linkage, need to be developed so as to create a more seamless application of social intervention towards battering.

Recommendation #3 - The development of a range of responses in an organized system where the responses would be more closely matched to the needs of the batterer:

A range of options for addressing domestic violence is lacking. Furthermore there is no particular assurance that the correct intervention is available for each batterer. What is available and preferred by professionals may be more influential in the referral process than the actual level of service required by the batterer. Within a formalized system administered through the courts or in tandem with social service agencies, diagnostic tools could be used to identify more accurately the needs of a specific batterer and refer him to that intervention. It must be understood that, regardless of how well developed, diagnostic tools are far from perfect. Tools such as risk assessment indicators can only be guides. In spite of the shortcomings and the dangers, in trying to predict human behavior for the purposes of selecting a more appropriate intervention, what other choices are there? Risk assessments should remain flexible and adaptive. New information in the field is being developed on batterer typologies as well as antecedents to battering. New information must translate into more efficient amelioration.

Recommendation #4 - Separate secure facilities designed specifically for batterers: The development of correctional facilities used to service demographically specific groups such as women, sex offenders, drunk drivers, and juveniles, is not a new concept. The premise for the development of such facilities is to better manage the problems posed by the population within that demographic group as well as to better service them. A correctional facility with a narrow focused mission is better able to fulfill that mission for there is less ambiguity in the purpose and there can be a higher concentration on the objectives. When a program is designed to specifically address one offender group such as drunk drivers or sex offenders, that entire correctional environment can become a therapeutic milieu. Most facets of its operation consider how to best serve and further the objectives of the program. In the case of batterers where social learning is such an important factor, a separate secure environment should have a positive effect upon the batterer's behavior.

Recommendation #5 - Educational programs for adults and children. In providing education regarding domestic relationships, the social learning model must be employed. The social learning model advocates prosocial behaviors within intimate relationships. Advocating prosocial behaviors presents a major challenge because the principles of social education are not those of lessons to be learned from books. The principles of social education involve behavior and expressions of beliefs. Perhaps at early age, didactic curriculum techniques serve to lay a foundation. However, for lessons in social learning, to be effective, they must possess tangible meaning for the target

group. Therefore curriculum techniques need to be powerful, genuine and clearly sensitive to the needs of the target group. Here again, diagnostic identification of precursors or antecedents to domestic violence need to be considered. Those displaying the precursors, be they children or adults, should be provided with more intense education. For the student population in general, the curriculum demands need not be overwhelming for the schools. We are simply talking about instilling a value that we claim to have and integrating this value into current curriculum. In most cases, simple curriculum integration should be sufficient.

Recommendation #6 - A public campaign using the resources of the mass media that rejects violence as a solution to disputes within a family: Battering is rooted in a historical acceptance of the practice and immunity for its practitioners. We need only look at some of the numerous successful ad campaigns for products and services as well as the campaigns for social change relative to smoking and drinking to know that we have a powerful tool to affect social norms. Mass media is an effective tool. It holds promise to eliminate the acceptance of domestic violence and to send the signal that domestic violence will no longer be tolerated. Trying to unravel the complexities of domestic violence requires both micro and macro approaches. Intervention with individuals and public-wide rejection of domestic violence are both necessary. Public resolve to ameliorate domestic violence will positively influence the approval and funding of more focused micro solutions.

Over the past twenty years the incidence of violence by intimates has shown some decline (United States Department of Justice, 1998). Reflective, more assertive intervention that focuses on the batterer and cognitive restructuring through self awareness will further the decline.

Epilogue

Gavin de Becker, an anti-stalking and risk assessment specialist, recounts an incident when he went to a correctional treatment program (1997). He met with a group of clients in the program and shared his story of growing up in a chaotic home where the adults were violent and abused substances. When he finished he took questions.

The first hand to go up was that of a man about my age, but I thought we had little else in common. He was tattooed, scarred, overly muscular, and weathered. He was the kind of man most people would fear on a dark street... He looked me up and down and asked, "You and me had the same childhood, but you're in that nice suit - how'd that happen?"

I have learned the kindness of a teacher, a coach, a police officer, a neighbor, the parent of a friend, is never wasted. These moments are likely to pass with neither the child nor the adult fully knowing the significance of the contribution... Though nothing apparent marks the occasion, inside that child a new view of self might take hold. (pp.226-227)

De Becker talks about a "new view of self taking hold." A new view taking hold is apparent in the words of a completed DVP participant to the coordinator, "You were warm and kind, but you put it right out there and made me work. You gave me a foundation to build upon."

Appendix A
SCREENING FORM

NORFOLK COUNTY CORRECTIONAL CENTER
Psychological Department/Programs Bureau

SOCIAL & PSYCHOLOGICAL HISTORY

NAME: _____
Date Admitted: ____/____/____ Date evaluated: ____/____/____
D.O.B.: ____/____/____ Social Security # ____-____-____
Place of birth: _____

FAMILY HISTORY

Number of children: _____ Your order: _____
Number of brothers: _____ Number of sisters: _____
Mother living? Y N Father living? Y N
How old were you when you stopped living with your parents? _____
With whom did you live? _____
When did this happen? _____
Why did you stop living with your parents? _____

Are you at the present time in contact with any of your family members? Y N
If yes - whom? _____ How often do you see them? _____

Any alcoholism in your family? Y N
Who has the problem? Father Mother Brother(s) # _____ Sister(s) # _____
Any other substance abuse in your family? Y N
Who has the problem? Father Mother Brother(s) # _____ Sister(s) # _____

Name of substance? _____

Marital Status: Single Married Divorced Separated Widowed

Date: ____/____/____

If divorced, describe circumstances: _____

Page 2

CONT: Social Psychological History

Number of children? _____ How often do you see them? _____

Describe your present family relationships? _____

What will your future family relationships be: _____

DRINKING/DRUG HISTORY

A. Started drinking at age: _____

What were you drinking? _____

Amount? _____

How often? _____

Where? _____

When? _____

At what age did problems result from your drinking? _____

Describe the problem or problems? _____

Have you experienced: seizures hallucinations Blackouts ?

B. Started drug use at age: _____

Type of drugs? _____ Period used: 19__ to 19__

Amount? _____

How often? _____

Where? _____

CONT: Social Psychological History

TREATMENT PROGRAMS INVOLVED

Name	Dates	Period without drugs
_____		From ____ To ____
_____		From ____ To ____
_____		From ____ To ____
_____		From ____ To ____

MEDICAL HISTORY

Past Hospitalizations	Dates	Reason

Major injuries/accidents: _____

Head injury w/loss of consciousness: _____

Allergies: _____ Last tetanus: _____

Tested for HIV (optional)...Date: ____ / ____ / ____

PSYCHOLOGICAL HISTORY

Past Psychiatric Hospitalizations	Dates	Reason/Diagnosis

CONT: Social Psychological History

Presently taking medications for this condition: (list type and amount)

Are you taking any other medications: (list type) _____

Have you ever attempted suicide: _____ When? _____

Do you presently contemplate committing suicide? _____

How? _____

PROBLEM LIST

What are some of the major problems that need to be addressed by you to help you to succeed in the community and with your family?

Evaluating Psychologist: _____

Date: ____ / ____ / ____

Time: ____ : ____

Update: ____ / ____ / ____

Time: ____ : ____

INMATE'S UNDERSTANDING OF REASON FOR INCARCERATION: _____

LIKELIHOOD FOR HARM:

Hx of Suicidal Ideations, Plans, Attempts: _____

History of Violence as a Victim or Perpetrator: _____

Have you ever set fires, hurt animals, purposely frightened anyone? _____

Inmate's Current Statements/Presentation regarding suicidality or potential towards violence towards others:

Potential Victim: _____

Availability of Weapons in Living/Working Environment: _____

Hx/evidence of inability to care for self leading to likelihood of harm to self: _____

NORFOLK COUNTY CORRECTIONAL CENTER

Psychological Department/Program Services

PSYCHIATRIC ASSESSMENT

NAME: _____ DATE: ____ / ____ / ____ TIME: _____ HOURS

AGE: _____ D.O.B.: ____ / ____ / ____ HOUSING: _____

I. Chief complaint: _____

II. Present illness and relevant past psychiatric history:

(A) Present illness and previous episodes of this illness, hospitalizations, etc...

(B) Personal profile/personal & family history: (include marital status, number of children, vocational/educational, social/sexual relations, relevant family history...)

(C) Military & Court History:

(D) Alcohol and/or Drug History: (include early stages, when it became a problem, types of substances used, amount, duration, most recent use, withdrawal/intoxication signs and symptoms):

(E) Psychotropic Medications: (past, current use, amount, frequency, most recent use, compliance, effectiveness, prescribed by...):

III. Mental Status: (check blocks, add comments when necessary)

GENERAL APPEARANCE	POSTURE	FACIAL EXPRESSION	GENERAL BODY MOVEMENTS
<input type="checkbox"/> neat & appropriate	<input type="checkbox"/> appropriate	<input type="checkbox"/> appropriate	<input type="checkbox"/> appropriate
<input type="checkbox"/> physically unkept	<input type="checkbox"/> slumped	<input type="checkbox"/> anxious, fearful	<input type="checkbox"/> accelerated,
<input type="checkbox"/> clothing disheveled	<input type="checkbox"/> rigid, tense	<input type="checkbox"/> depressed, sad	Increased speed
<input type="checkbox"/> clothing bizarre	<input type="checkbox"/> atypical,	<input type="checkbox"/> angered, hostile	<input type="checkbox"/> decreased, slow
<input type="checkbox"/> unusual physical traits	inappropriate	<input type="checkbox"/> expressionless	<input type="checkbox"/> peculiar
	<input type="checkbox"/> gait & coordination	<input type="checkbox"/> bizarre, inappropriate	<input type="checkbox"/> inappropriate
<input type="checkbox"/> other....	<input type="checkbox"/> other....	<input type="checkbox"/> eye movements	<input type="checkbox"/> restless, fidgety

Comments:

- | | | | |
|--|--|--|---|
| <p>ATTITUDE</p> <ul style="list-style-type: none"> <input type="checkbox"/> cooperative <input type="checkbox"/> domineering <input type="checkbox"/> submissive <input type="checkbox"/> suspicious <input type="checkbox"/> provocative <input type="checkbox"/> uncooperative <input type="checkbox"/> other | <p>AFFECT</p> <ul style="list-style-type: none"> <input type="checkbox"/> appropriate <input type="checkbox"/> blunted <input type="checkbox"/> inappropriate <input type="checkbox"/> other | <p>MOOD</p> <ul style="list-style-type: none"> <input type="checkbox"/> appropriate <input type="checkbox"/> apathetic <input type="checkbox"/> euphoric, elated <input type="checkbox"/> angered, hostile <input type="checkbox"/> fearful, anxious, apprehensive <input type="checkbox"/> depressed, sad <input type="checkbox"/> other | <p>SPEECH</p> <ul style="list-style-type: none"> <input type="checkbox"/> appropriate <input type="checkbox"/> mute <input type="checkbox"/> incoherent <input type="checkbox"/> pressured <input type="checkbox"/> slowed <input type="checkbox"/> slurred <input type="checkbox"/> other |
|--|--|--|---|

Comments:

- | | | |
|---|---|---|
| <p>THOUGHT PROCESS</p> <ul style="list-style-type: none"> <input type="checkbox"/> appropriate <input type="checkbox"/> loose association <input type="checkbox"/> flight of ideas <input type="checkbox"/> tangential <input type="checkbox"/> decreased through flow <input type="checkbox"/> blocking <input type="checkbox"/> perseveration <input type="checkbox"/> other... | <p>THOUGHT CONTENT</p> <ul style="list-style-type: none"> <input type="checkbox"/> appropriate <input type="checkbox"/> suicidal ideation* <input type="checkbox"/> homicidal ideation* <input type="checkbox"/> delusions* <input type="checkbox"/> ideas of reference* <input type="checkbox"/> auditory hallucinations | <ul style="list-style-type: none"> <input type="checkbox"/> visual hallucinations <input type="checkbox"/> thought insertion/
broadcasting/removal <input type="checkbox"/> preoccupation <input type="checkbox"/> phobias <input type="checkbox"/> neologism <input type="checkbox"/> other... |
|---|---|---|

Comments:

- | | | |
|--|--|--|
| <p>LEVEL OF
CONSCIOUSNESS</p> <ul style="list-style-type: none"> <input type="checkbox"/> alert <input type="checkbox"/> drowsy <input type="checkbox"/> stupor
 <input type="checkbox"/> comatose <input type="checkbox"/> other... | <p>ATTENTION
CONCENTRATION</p> <ul style="list-style-type: none"> <input type="checkbox"/> good <input type="checkbox"/> fair <input type="checkbox"/> poor | <p>ORIENTATION</p> <ul style="list-style-type: none"> <input type="checkbox"/> fully oriented <input type="checkbox"/> disoriented to place <input type="checkbox"/> disoriented to
person <input type="checkbox"/> disoriented to time <input type="checkbox"/> other... |
|--|--|--|

Comments:

MEMORY

- normal
- impaired
- immediate recall
- impaired recent memory
- other...

INTELLECTUAL FUNCTIONING

- impaired abstract thinking
- impaired calculation ability

ESTIMATE INTELLIGENCE

- above average
- average
- below average
- special needs

Comments:

INSIGHT

- good
- impaired
- poor

JUDGMENT

- good
- impaired
- poor

IV. Inmates strengths (knowledge, significant skills, etc...):

V. Legal competency (impressions and history):

VI. Provisional diagnosis:

- Axis I:
- Axis II:
- Axis III:
- Axis IV:
- Axis V:

VII. Assessment of dangerousness to self or others:

Behavioral Checklist

Check all that apply:

PAST:

I was raised in a family with one or more of the following:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Alcoholism | <input type="checkbox"/> Violence | <input type="checkbox"/> Parent loss |
| <input type="checkbox"/> Mental health problems | <input type="checkbox"/> Frequent moves | <input type="checkbox"/> Child abuse |

I have had problems with:

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> School work | <input type="checkbox"/> School authorities | <input type="checkbox"/> The law or police |
| <input type="checkbox"/> Work | <input type="checkbox"/> Other relationships | <input type="checkbox"/> Money |

In the past, I have had one or more of the following:

- | | | |
|--|---|---|
| <input type="checkbox"/> Multiple relationships with women | | |
| <input type="checkbox"/> Separation(s) | | |
| <input type="checkbox"/> Restraining order issues | <input type="checkbox"/> Custody dispute | <input type="checkbox"/> Children's whereabouts unknown |
| <input type="checkbox"/> Child visitation restricted | <input type="checkbox"/> Multiple separations | <input type="checkbox"/> Partner left with no warning |
| <input type="checkbox"/> Divorce | | |
| <input type="checkbox"/> Restraining order issues | <input type="checkbox"/> Custody dispute | <input type="checkbox"/> Children's whereabouts unknown |
| <input type="checkbox"/> Child visitation restricted | <input type="checkbox"/> Multiple divorces | <input type="checkbox"/> Partner left with no warning |

PRESENT:

In my present relationship:

- | | |
|---|--|
| <input type="checkbox"/> I am separated | <input type="checkbox"/> My partner's whereabouts are unknown. |
| <input type="checkbox"/> I have been separated more than once. | <input type="checkbox"/> My divorce is pending. |
| <input type="checkbox"/> A restraining order has been issued against me. | <input type="checkbox"/> I am involved in a custody dispute |
| <input type="checkbox"/> I am allowed no visitation with the children. | <input type="checkbox"/> My partner left with no warning. |
| <input type="checkbox"/> I am looking for my partner. | <input type="checkbox"/> I feel abandoned. |
| <input type="checkbox"/> I have called my partner names, including body parts and animals. | |
| <input type="checkbox"/> I have slapped, hit, kicked, grabbed, pushed, or used a weapon on my partner. | |
| <input type="checkbox"/> I blame my partner for my injuries. | |
| <input type="checkbox"/> I am unwilling to let go of my partner. | |
| <input type="checkbox"/> I am having difficulty concentrating, eating or sleeping because I am thinking about my partner. | |
| <input type="checkbox"/> I am hostile/angry/furious because I feel betrayed. | |
| <input type="checkbox"/> My relationship is extremely tense or volatile. | |
| <input type="checkbox"/> I am extremely jealous and blame my partner for all types of promiscuous behavior. | |
| <input type="checkbox"/> I have been violent before. | |

- I have killed pets.
- I have made threats against my partner.
- I have threatened suicide
- I have attempted suicide.
- I continue to try to convince my partner she is wrong about the separation.
- I have access to a gun.
- I have used alcohol before, during or after fights with my partner.
- I use amphetamines, speed, cocaine, crack, or marijuana.
- I want to hurt my partner.
- I have no desire to stop my controlling or abusive or violent behavior.

I have committed past or present:

- Harassment Disturbance Violation of restraining order
- Menacing Assaults Felony
- Plea bargains in past related to domestic violence
- Past arrests for domestic violence
- Dismissed charge in past related to domestic violence

List other crimes (for example: drunk driving, selling drugs, robbery, burglary, rape, homicide, embezzlement)

Lethality Checklist

Client's name _____ Date _____

Check all that apply:

1. Objectifies partner (calls her obscene names, body parts, animals)
2. Blames victim for perceived injuries to self
3. Is unwilling to stay separated from victim (tracking/stalking)
4. Is obsessed with victim (cannot function: is not eating, sleeping, or working)
5. Is hostile/angry/furious (feels betrayed)
6. Appears to be distraught (feels abandoned)
7. Is in an extremely tense, volatile relationship
8. Is extremely jealous, blaming victim for all types of promiscuous behavior
9. Has perpetrated previous incidents of physical violence
10. Has killed pets
11. Has made threats
12. Has made previous suicide attempts
13. Is threatening suicide
14. Has access to victim
15. Has access to guns
16. Abuses alcohol
17. Abuses amphetamines, cocaine or crack
18. Has thoughts/desires/intentions of hurting partner
19. Has no desire to stop his violent and/or controlling behavior

I believe the victim is at risk: Strongly agree 1 2 3 4 5 strongly disagree

Evaluation summary:

CAUTION: A perpetrator with few of these characteristics may still be dangerous, but the more that apply, the greater his potential for lethal behavior.

TREATMENT PLAN

<u>Problems/Needs</u>	<u>Plan</u>
Interpersonal/Management: _____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Psychiatric/Psychological _____	_____
_____	_____
_____	_____
_____	_____
Medical: _____	_____
_____	_____
School/Education: _____	_____
_____	_____
_____	_____
Substance Abuse: _____	_____
_____	_____
_____	_____
Other: _____	_____
_____	_____

Appendix B

PROGRAM DESCRIPTION

IN-HOUSE DOMESTIC VIOLENCE PROGRAM

The main program is presented in eighteen 1½ hour sessions, totalling 27 hours over nine weeks. It is a multi-modal therapeutic approach, embracing the feminist position that domestic violence is a means by which batterers retain power and control over women. We teach that battering is part of a continuum of coercive behaviors that include verbal harassment, stalking, intimidation, rape and incest. Recovery for men who batter involves their understanding and accepting how male privilege and social support for the oppression of women gives covert sanction for men's individual acts of violence and abuse.

Using the AMEND philosophy and curriculum for treatment of batterers, a number of varied films and addiction education materials, the offender is offered options for behavior change. Prospective participants are evaluated for amenability to this voluntary treatment program, the ultimate goal of which is to teach the perpetrator to stop his violence. Acceptance of responsibility, anger management, gender role training, communication and problem-solving skills, and social consequences of violence are addressed. The small group experience of 8-12 allows for optimum member participation, and very importantly...sets the stage for long-term offender specific treatment in the community. Many of the inmates are court mandated to batterers' programs when they leave our facility, and this experience truly opens the door to that kind of treatment. **It is a voluntary program and no good time is given.** It is clearly stated that the program does not take the place of a court-mandated Department of Public Health certified Batterers' Treatment Program.

After successful completion of this cycle, participants with longer sentences are invited to join long-term groups, each addressing in depth particular areas of concern as follows:

ANGER: Based on an anger management program developed by a correctional psychologist, helping the offender to recognize his angry feelings, learning their causes, and how to deal with them in a responsible and appropriate manner.

GROWING UP MALE, Identifying the Violence in My Life: learning how men are raised to hold in pain and turn anger into violence, how men learn about women and how women are set up to be targets of their violence, and identifying and getting help with issues of physical, emotional and sexual abuse.

ANGER, POWER, VIOLENCE AND DRUGS, Breaking the Connection: learning tools to eliminate violence in response to other people.

BECOMING WHOLE, Learning New Roles: offering tools to help offenders reconstruct their lives and relationships by developing alternatives to violence. (The last three programs follow the "Men's Work" format used in the Oakland Men's Project.)

I have recently added:

PORTRAITS OF DOMESTIC ABUSE: Breaking the Cycle, a Video and User Manual created by the Dane County Sheriff's Office, Dane County, Wisconsin. I have used this in an eight-session program.

THE ANGER GUIDE, A Blueprint for 12 Time-Limited Sessions, by Claudia Black. Includes role of and expression of anger, A. A. Step work, stress reduction, negative thinking and numerous handouts, and

REPEAT AFTER ME, looking at the past, feelings, self esteem, creating a stronger self, and rituals and spiritual influences.

Throughout the programs, participants are taught how to put their feelings and needs into words. As the weeks progress, the work done helps the men make sense out of their emotional reactions and behavior choices in relation to others, and to begin to alter the ways in which they think, process information and make decisions. We affirm that violence is a crime, that violence and abuse are wrong and unethical behaviors. They are responses that people choose out of a range of potential behaviors, and that the victim is **NEVER** responsible for the violence and abuse directed at her. In cases where addiction is also an issue, we make it clear that sobriety is an absolute pre-requisite for being able to make the choice for a violence-free life. It is taught and reinforced that alcohol and drugs are not an excuse for violence, because we work with a population in which we see a high propensity of our violent offenders who also substance abuse.

For those who are participating in the Juris Monitor electronic monitoring program, a 12-week stabilization program using the "Learning to Live Without Violence" format written by Dr. Dan Sonkin is presented. This program explains how to effectively control and channel anger, discusses the issues of drug and alcohol use, alienation, jealousy and how to "let go" of a relationship if necessary.

In terms of qualifications, the Domestic Violence Victim/Witness Coordinator is a Licensed Independent Clinical Social Worker, with a Master's Degree in Social Work and a Forensic Sub-concentration from Boston College Graduate School of Social Work, a Bachelor's Degree in Criminal Justice, Drug and Alcohol Counseling Certificate from Stonehill College, who has trained and worked in settings focusing on forensic mental health, substance abuse and sexual abuse treatment, and batterer-treatment certified through the Emerge training program. A certified male co-facilitates at treatment sessions.

Appendix C
LIST OF VARIABLES

<u>Name of Variable</u>	<u>Source</u>	<u>Comment</u>
Subcode	Screening	Arbitrarily assigned code to use as identifiers in order to maintain confidentiality
Age	Screening & Archive	Age as reported by the subject at the time of the screening.
Race	Screening	Race as reported by the subject at the screening verified in archives.
Marital status	Screening	Self reported.
Highest educational level	Screening	Verified through archives.
Learning disability	Screening	Self reported, required substantiation.
Head injury	Screening	Self reported.
Security rating	Archives	This is to notify all who look at the record that a person has issues of security concerns.
Mental health history	Screening	Self reported.
Mental health commitments	Screening	Self reported.
Prior substance abuse treatment	Screening	Self reported
Substance abuse	Screening	Self reported
In recovery from substance abuse	Screening	Self reported
Number of children	Screening	Self reported
Type of family of origin	Screening	Self reported

<u>Name of Variable</u>	<u>Source</u>	<u>Comment</u>
Prior military experience	Screening	Self reported; verified in archives
Witness to family violence as a child	Screening	Self reported
Abused as child	Screening	Self reported
Age of first court appearance	Screening	Self reported
Prior attendance in a community-based batterers intervention program	Screening	Self reported
Religion	Archives	Probably self reported
Occupation	Archives	Self reported
Sentencing Court	Archives	This denotes the court that the served offense was received in.
Number of prior offenses	CHSB	
Type of prior offenses	CHSB	
Current charge	Archives	
Sentence in months	Archives	
Type of release	Archives	
Awareness of existence of domestic abuse laws	Screening	This was a yes/no variable which was checked yes if comment reflected any knowledge of law breaking related to domestic violence.
Who was responsible for subject's incarceration	Screening	A variable based on the subject's perception.

<u>Name of Variable</u>	<u>Source</u>	<u>Comment</u>
Type of new charges	CHSB	
Number of new charges	CHSB	
Number of new guilty charges	CHSB	
Number of new open cases	CHSB	
Month/Year/Date of re-offense	CHSB	
Discharge date	Archives	
Commitment date	Archives	

Appendix D
Frequency Tables

Table 17
AGES OF SAMPLE SUBJECTS

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Cum Percent</u>
17	1	.3	.3
18	2	.7	1.0
19	8	2.6	3.6
20	8	2.6	6.2
21	7	2.3	8.5
22	5	1.6	10.1
23	15	4.9	15.0
24	10	3.3	18.3
25	16	5.2	23.5
26	15	4.9	28.4
27	21	6.9	35.3
28	18	5.9	41.2
29	15	4.6	45.8
30	23	7.5	53.3
31	11	3.6	56.9
32	12	3.9	60.8
33	19	6.2	67.0
34	13	4.2	71.2
35	11	3.6	74.8
36	8	2.6	77.5
37	14	4.6	82.0
38	9	2.9	85.0
39	13	4.2	89.2
40	4	1.3	90.5
41	5	1.6	92.2
42	3	1.0	93.1
43	1	.3	93.5
45	4	1.3	94.8
46	3	1.0	95.8
47	3	1.0	96.7
49	2	.7	97.4
50	4	1.3	98.7
51	1	.3	99.0
52	1	.3	99.3
60	1	.3	99.7
62	1	.3	100.0
Total	306	100.0	

Table 18
RACE OF SAMPLE SUBJECTS

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
White	2	238	77.8	77.8	77.8
Black	3	50	16.3	16.3	94.1
Latino	4	15	4.9	4.9	99.0
Other	5	3	1.0	1.0	100.0
	Total	306	100.0	100.0	

Valid cases - 306; Missing cases - 0

Table 19
MARITAL STATUS

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Single	1	184	60.1	60.9	60.9
Divorced	2	55	18.0	18.2	79.1
Separated	3	30	9.8	9.9	89.1
Married	4	21	6.9	7.0	96.0
Married prior d	5	5	1.6	1.7	97.7
Sep prior d	6	3	1.0	1.0	98.7
Divorced x2	7	4	1.3	1.3	100.0
	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 20
HIGHEST EDUCATION LEVEL COMPLETED

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Grade level	6	3	1.0	1.0	1.0
	7	1	.3	3	1.3
	8	9	2.9	3.0	4.4
	9	28	9.2	9.4	13.8
	10	21	6.9	7.1	20.9
	11	34	11.1	11.4	32.3
GED	12	76	24.8	25.6	57.9
HS	13	72	23.5	24.2	82.2
HS +	14	39	12.7	13.1	95.3
BA	15	11	3.6	3.7	99.0
BA+	16	3	1.0	1.0	100.0
	.	9	2.9	Missing	
	Total	306	100.0	100.0	

Valid cases - 297; Missing cases - 9

Table 21
LEARNING DISABILITY

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Learn Disab.	1	50	16.3	16.3	16.3
ADHD	2	16	5.2	5.2	21.5
None Reported	3	240	78.4	78.4	100
	Total	306	100.0	100.0	

Table 22
HEAD INJURY

<u>No. Reported</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	199	65.0	66.1	66.1
1	78	25.5	25.9	92.0
2	17	5.6	5.6	97.7
3	2	.7	.7	98.3
4	4	1.3	1.3	99.7
7	1	.3	.3	100.0
.	5	1.6	Missing	
Total	306	100.0	100.0	

Valid cases - 301; Missing cases - 5

Table 23
SECURITY RATING

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Victim notify	1	13	4.2	4.3	4.3
Assaultive	2	90	29.4	30.1	34.4
Suicidal	3	6	2.0	2.0	36.5
1+2	4	150	49.0	50.2	86.6
1+3	5	24	7.8	8.0	94.6
2+3	6	16	5.2	5.4	100.0
.	.	7	2.3	Missing	
Total		306	100.0	100.0	

Valid cases - 299; Missing cases - 7

Table 24
MENTAL HEALTH HISTORY

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
None disclosed	0	239	78.1	79.1	79.1
Bi-polar	1	45	14.7	14.9	94.0
Depression	2	9	2.9	3.0	97.0
Impulse Disorder	3	2	.7	.7	97.7
PTSD	4	2	.7	.7	98.3
Affect disorder	5	2	.7	.7	99.0
Multiple or other	6	1	.3	.3	99.3
	7	1	.3	.3	99.7
	9	1	.3	.3	100.0
	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 25
MENTAL HEALTH COMMITMENTS

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	239	78.1	79.1	79.1
1	45	14.7	14.9	94.0
2	9	2.9	3.0	97.0
3	2	.7	.7	97.7
4	2	.7	.7	98.3
5	2	.7	.7	99.0
6	1	.3	.3	99.3
7	1	.3	.3	99.7
9	1	.3	.3	100.0
.	4	1.3	Missing	
Total	306	100.0	100.0	

Valid Cases - 302; Missing cases - 4

Table 26
SUBSTANCE ABUSE TREATMENT

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	118	38.6	39.1	39.1
0	1	.3	3	39.4
1	70	22.9	23.2	62.6
2	50	16.3	16.6	79.1
3	34	11.1	11.3	90.4
4	10	3.3	3.3	93.7
5	11	3.6	3.6	97.4
6	4	1.3	1.3	98.7
8	1	.3	.3	99.0
9	3	1.0	1.0	100.0
.	4	1.3	Missing	
Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 27
SUBSTANCE ABUSE

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
None reported	0	37	12.1	12.3	12.3
Alcohol	1	74	24.2	24.5	36.8
Drugs	2	24	7.8	7.9	44.7
Drugs & Alcohol	3	159	52.0	52.6	97.4
Prescription	4	1	.3	.3	97.7
Indiscriminate	5	7	2.3	2.3	100.0
.	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 28
IN SUBSTANCE ABUSE RECOVERY

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Not applicable	0	36	11.8	11.9	11.9
In recovery over a y	1	72	23.5	23.8	35.8
Not in recovery	2	185	60.5	61.3	97.0
In recovery over ten	3	9	2.9	3.0	100.0
.	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 29
NUMBER OF CHILDREN

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	90	29.4	29.8	29.8
1	96	31.4	31.8	61.6
2	68	22.2	22.5	84.1
3	22	7.2	7.3	91.4
4	16	5.2	5.3	96.7
5	5	1.6	1.7	98.3
6	3	1.0	1.0	99.3
7	1	.3	.3	99.7
9	1	.3	.3	100.0
.	4	1.3	Missing	
Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 30
STRUCTURE OF FAMILY OF ORIGIN

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Not available	0	13	4.2	4.3	4.3
Intact	2	133	43.5	44.0	48.3
Reconstructed	3	25	8.2	8.3	56.6
Single parent	4	116	37.9	38.4	95.0
Foster	5	15	4.9	5.0	100.0
.	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 31
MILITARY SERVICE

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Military exp	1	60	19.6	29.9	19.9
No military	2	242	79.1	80.1	100.
.	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 32
WITNESS TO FAMILY VIOLENCE

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Yes	1	55	18.0	18.2	18.2
No	2	247	80.7	81.8	100.0
	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 33
ABUSED AS A CHILD

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Not reported	0	183	59.8	60.6	60.6
Physical	1	90	29.4	29.8	90.4
Sexual	2	11	3.6	3.6	94.0
Both ph sex	3	18	5.9	6.0	100.0
	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 34
AGE OF FIRST COURT APPEARANCE

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
8	2	.7	.8	.8
9	2	.7	.8	1.6
10	2	.7	.8	2.4
11	7	2.3	2.8	5.3
12	5	1.6	2.0	7.3
13	29	9.5	11.8	19.1
14	29	9.5	11.8	30.9
15	28	9.2	11.4	42.3
16	35	11.4	14.2	56.5
17	38	12.4	15.4	72.0
18	19	6.2	7.7	79.7
19	13	4.2	5.3	85.0
20	10	3.3	4.1	89.0
21	5	1.6	2.0	91.1
22	3	1.0	1.2	92.3
23	2	.7	.8	93.1
24	4	1.3	1.6	94.7
25	4	1.3	1.6	96.3
26	1	.3	.4	96.7
27	2	.7	.8	97.6
28	1	.3	.4	98.0
35	2	.7	.8	98.8
36	1	.3	.4	99.2
41	1	.3	.4	99.6
42	1	.3	.4	100.0
.	60	19.6	Missing	
Total	306	100.0	100.0	

Valid cases - 246; Mission cases - 60

Table 35
COMMUNITY BATTERERS PROGRAM

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
None reported	1	264	86.3	87.4	87.4
Completed program	2	19	6.2	6.3	93.7
Did not complete	3	18	5.9	6.0	99.7
Couples counsel	4	1	.3	.3	100.0
	.	4	1.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 36
RELIGION

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
None reported	0	38	12.4	12.7	12.7
Catholic	1	221	72.2	73.9	86.6
Protestant	2	37	12.1	12.4	99.0
Jew	3	1	.3	.3	99.3
Muslim	4	1	.3	.3	99.7
Other	5	1	.3	.3	100.0
	.	7	2.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 299; Missing cases - 7

Table 37
OCCUPATION

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
None	0	65	21.2	21.7	21.7
Unskilled	1	78	25.5	26.1	47.8
Tradesman	2	128	41.8	42.8	90.6
Sales	3	9	2.9	3.0	93.6
Technical	4	8	2.6	2.7	96.3
Professional	5	11	3.6	3.7	100.0
	.	7	2.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 299; Missing cases - 7

Table 38
COMMITTING COURT

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Quincy	1	178	58.2	59.5	59.5
Dedham	2	37	12.1	12.4	71.9
Wrentham	3	23	7.5	7.7	79.6
Stoughton	4	7	2.3	2.3	81.9
Norsup	5	17	5.6	5.7	87.6
Brookline	6	14	4.6	4.7	92.3
District other count	7	18	5.9	6.0	98.3
Superior other	8	5	1.6	1.7	100.0
	.	7	2.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 299; Missing cases - 7

Table 39

PRIOR OFFENSES - NUMBER

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	11	3.6	3.8	3.8
1	3	1.0	1.0	4.8
2	2	.7	.7	5.5
3	9	2.9	3.1	8.6
4	8	2.6	2.7	11.3
5	5	1.6	1.7	13.0
6	8	2.6	2.7	15.8
7	13	4.2	4.5	20.2
8	5	1.6	1.7	21.9
9	6	2.0	2.1	24.0
10	10	3.3	3.4	27.4
11	10	3.3	3.4	30.8
12	4	1.3	1.4	32.2
13	5	1.6	1.7	33.9
14	10	3.3	3.4	37.3
15	5	1.6	1.7	39.0
16	6	2.0	2.1	41.1
17	8	2.6	2.7	43.8
18	6	2.0	2.1	45.9
19	8	2.6	2.7	48.6
20	5	1.6	1.7	50.3
21	3	1.0	1.0	51.4
22	4	1.3	1.4	52.7
23	12	3.9	4.1	56.8
24	6	2.0	2.1	58.9
25	6	2.0	2.1	61.0
26	4	1.3	1.4	62.3
27	3	1.0	1.0	63.4
28	1	.3	.3	63.7
29	4	1.3	1.4	65.1
30	2	.7	.7	65.8
32	5	1.6	1.7	67.5
33	4	1.3	1.4	68.8
34	5	1.6	1.7	70.5
35	2	.7	.7	71.2
36	1	.3	.3	71.6
37	2	.7	.7	72.3
38	2	.7	.7	72.9

Table 39, continued

(PRIOR OFFENSES, NUMBER)

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
40	3	1.0	1.0	74.0
41	6	2.0	2.1	76.0
42	2	.7	.7	76.7
43	2	.7	.7	77.4
44	1	.3	.3	77.7
46	3	1.0	1.0	78.8
49	3	1.0	1.0	79.8
50	2	.7	.7	80.5
51	2	.7	.7	81.2
52	1	.3	.3	81.5
53	1	.3	.3	81.8
54	1	.3	.3	82.2
55	2	.7	.7	82.9
56	1	.3	.3	83.2
57	1	.3	.3	83.6
58	4	1.3	1.4	84.9
59	3	1.0	1.0	86.0
60	1	.3	.3	86.3
61	1	.3	.3	86.6
63	2	.7	.7	87.3
64	4	1.3	1.4	88.7
65	1	.3	.3	89.0
66	1	.3	.3	89.4
67	1	.3	.3	89.7
69	1	.3	.3	90.1
71	2	.7	.7	90.8
72	1	.3	.3	91.1
74	3	1.0	1.0	92.1
76	1	.3	.3	92.5
80	4	1.3	1.4	93.8
81	1	.3	.3	94.2
85	1	.3	.3	94.5
86	1	.3	.3	94.9
91	1	.3	.3	95.2
92	1	.3	.3	95.5
95	1	.3	.3	95.9
100	1	.3	.3	96.2
112	1	.3	.3	96.6

Table 39, continued (PRIOR OFFENSES, NUMBER)

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
115	1	.3	.3	96.9
117	1	.3	.3	97.3
121	1	.3	.3	97.6
122	1	.3	.3	97.9
125	1	.3	.3	98.3
128	1	.3	.3	98.6
146	1	.3	.3	99.0
166	1	.3	.3	99.3
217	1	.3	.3	99.7
290	1	.3	.3	100.0
.	14	4.6	Missing	
Total	306	100.0	100.0	

Valid cases - 292; Missing cases - 14

Table 40
TYPE OF PRIOR OFFENSES

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
None	0	11	3.6	3.8	3.8
Apparent dv	1	10	3.3	3.4	7.2
Ambiguous dv	2	107	35.0	36.6	43.8
Both	3	164	53.6	56.2	100.0
	.	14	4.6	Missing	
	Total	306	100.0	100.0	

Valid cases - 292; missing cases - 14

Table 41
CURRENT CHARGE

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Apparent dv	1	118	38.6	38.8	38.8
Ambiguous w/ vio	2	130	42.5	42.8	81.6
Ambiguous w/o vio	3	56	18.3	18.4	100.0
	.	2	.7	Missing	
	Total	306	100.0	100.0	

Valid cases - 304; Missing cases - 2

Table 42
SENTENCE IN MONTHS

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
2	3	1.0	1.0	1.0
3	7	2.3	2.3	3.3
4	4	1.3	1.3	4.6
5	4	1.3	1.3	6.0
6	70	22.9	23.2	29.1
7	4	1.3	1.3	30.5
8	1	.3	.3	30.8
9	9	2.9	3.0	33.8
10	3	1.0	1.0	34.8
11	5	1.6	1.7	36.4
12	76	24.8	25.2	61.6
14	2	.7	.7	62.3
15	12	3.9	4.0	66.2
16	3	1.0	1.0	67.2
17	1	.3	.3	67.5
18	30	9.8	9.9	77.5
19	1	.3	.3	77.8
20	2	.7	.7	78.5
21	2	.7	.7	79.1
24	28	9.2	9.3	88.4
26	2	.7	.7	89.1
30	22	7.2	7.3	96.4
31	1	.3	.3	96.7
36	2	.7	.7	97.4
42	4	1.3	1.3	98.7
48	2	.7	.7	99.3
120	1	.3	.3	99.7
162	1	.3	.3	100.0
.	4	1.3	Missing	
Total	306	100.0	100.0	

Valid cases - 302; Missing cases - 4

Table 43
TYPE OF RELEASE

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
End of sentence	1	207	67.6	69.2	69.2
Paroled	2	50	16.3	16.7	86.0
Released by court	3	17	5.6	5.7	91.6
Transferred	4	25	8.2	8.4	100.0
	.	7	2.3	Missing	
	Total	306	100.0	100.0	

Valid cases - 299; Missing cases - 7

Table 44
KNOWLEDGE THAT DOMESTIC LAW RESULTED IN JAIL

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Yes	1	106	34.6	35.2	35.2
No	2	195	63.7	64.8	100.0
	.	5	1.6	Missing	
	Total	306	100.0	100.0	

Valid cases - 301; Missing cases - 5

Table 45
WHO CAUSED JAIL

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
Drug alcohol	1	56	18.3	19.1	19.1
Self	2	119	38.9	40.6	59.7
Victim	3	28	9.2	9.6	69.3
Others, family polic	4	53	17.3	18.1	87.4
1 and 2	5	20	6.5	6.8	94.2
1 and 3	6	4	1.3	1.4	95.6
1 and 4	7	13	4.2	4.4	100.0
.	.	13	4.2	Missing	
	Total	306	100.0	100.0	

Valid cases - 293; Missing cases - 13

Table 46
TYPE OF NEW CHARGE

<u>Value Label</u>	<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
No new charges	0	112	36.6	38.2	38.2
Apparent dv	1	29	9.5	9.9	48.1
Ambiguous dv	2	102	33.3	34.8	82.9
Both ap and am	3	50	16.3	17.1	100.0
.	.	13	4.2	Missing	
	Total	306	100.0	100.0	

Valid cases - 393; Missing cases - 13

Table 47
NUMBER OF NEW CHARGES

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	112	36.6	38.2	38.2
1	43	14.1	14.7	52.9
2	35	11.4	11.9	64.8
3	15	4.9	5.1	70.0
4	22	7.2	7.5	77.5
5	18	5.9	6.1	83.6
6	8	2.6	2.7	86.3
7	6	2.0	2.0	88.4
8	5	1.6	1.7	90.1
9	5	1.6	1.7	91.8
10	5	1.6	1.7	93.5
12	4	1.3	1.4	94.9
13	3	1.0	1.0	95.9
15	2	.7	.7	96.6
17	1	.3	.3	96.9
18	1	.3	.3	97.3
20	2	.7	.7	98.0
22	1	.3	.3	98.3
23	2	.7	.7	99.0
26	1	.3	.3	99.3
30	1	.3	.3	99.7
39	1	.3	.3	100.0
.	13	4.2	Missing	
Total	306	100.0	100.0	

Valid cases - 293; Missing cases - 13

Table 48
NUMBER OF GUILTY NEW CHARGES

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	192	62.7	65.8	65.8
1	37	12.1	12.7	78.4
2	20	6.5	6.8	85.3
3	12	3.9	4.1	89.4
4	8	2.6	2.7	92.1
5	6	2.0	2.1	94.2
6	5	1.6	1.7	95.9
7	1	.3	.3	96.2
8	1	.3	.3	96.6
9	2	.7	.7	97.3
12	3	1.0	1.0	98.3
13	2	.7	.7	99.0
14	1	.3	.3	99.3
17	1	.3	.3	99.7
19	1	.3	.3	100.0
.	14	4.6	Missing	
Total	306	100.0	100.0	

Valid cases - 292; Missing cases - 14

Table 49
NUMBER OF PENDING NEW CHARGES

<u>Value</u>	<u>Frequency</u>	<u>Percent</u>	<u>Valid Percent</u>	<u>Cum Percent</u>
0	204	66.7	69.9	69.9
1	32	10.5	11.0	80.8
2	19	6.2	6.5	87.3
3	9	2.9	3.1	90.4
4	14	4.6	4.8	95.2
5	2	.7	.7	95.9
6	2	.7	.7	96.6
7	4	1.3	1.4	97.9
8	2	.7	.7	98.6
9	2	.7	.7	99.3
10	1	.3	.3	99.7
12	1	.3	.3	100.0
.	14	4.6	Missing	
Total	306	100.0	100.0	

Valid cases - 292; Missing cases - 14

Table 50
MONTHS FREE

Group	Count	Mean	Standard Deviation	Standard Error
Completed	121	12.491	8.946	.813
Declined	75	12.690	8.840	1.020
Unavailable	93	13.696	8.916	.924
Total	289	12.931	8.894	.523

F Ratio .5170 F Prob. .5969

Appendix E
History and Family of Origin

History And Family Of Origin

On the time line, write significant events in your life and the age at which they occurred. For example: parents' divorce, emotional or physical or sexual abuse, deaths, marriage, marriage, estrangement.

BIRTH

TODAY

Describe the members of your family and how each affected the significant events of your life.

Father

Mother

Stepfather

Stepmother _____

Brothers (including stepsiblings) _____

Sisters (including stepsiblings) _____

Grandparents _____

Any other significant people (aunts, uncles, foster parents, teachers, friends) _____

What was my role in the family?

How did I relate to other members of my family?

What were the roles of each member of my family?

Who was the "boss" in my family and how did I know this?

Who got along best and who had the most conflict?

How was conflict dealt with in my family?

What were the important rules in my family?

Which were the "unspoken" rules?

How was discipline dealt with in my family? _____

Who got in the most trouble? _____

Who did what kinds of discipline? _____

Was I physically, sexually or emotionally abused? _____

Any other thoughts I have about my family or origin?

Have you considered writing a letter to any members of your family with which you have unfinished business, unexpressed feelings or grievances? Writing a letter to them can help clarify the issues you have with them and help you look at your unresolved feelings. (It does not matter if they are alive or not, or whether or not you mail the letter. Talk to your therapist about this idea.)

If you were to write a letter to a relative, what are some of your thoughts you would like to express?

Appendix F

Permission



WILLIAM F. WELD
Governor

KATHLEEN M. O'TOOLE
Secretary

The Commonwealth of Massachusetts
Executive Office of Public Safety
Criminal History Systems Board
Criminal Justice Information System
200 Arlington Street, Suite 2200
Chelsea, Massachusetts 02150

KATHLEEN M. O'TOOLE
Chair
CRAIG D. BURLINGAME
Executive Director

(617) 660-1800
Fax (617) 660-1813
August 06, 1997

Chris Menton
75 Rosemary Road
Dedham, MA 02026

RE Certification For Access To CORI For Research Purposes
Principal Researcher: Chris Menton
Title of Proposal: Evaluating a Behavioral Intervention Program for Incarcerated
Spousal Batterers

Dear Mr. Chris Menton.

The Criminal History Systems Board (CHSB) has approved the application submitted by Mr. Chris Menton for access to Criminal Offender Record Information (CORI) for research purposes as described in the application as submitted.

This approval is based upon the representations made in the above-referenced application as to the preservation of subject anonymity. It is further based upon and contingent upon completion of a non-disclosure form (copy enclosed) by the project director/principal researcher and any staff member participating in this research project, and the submission of all such forms as completed to the CHSB.

Having been provided with this approval, Chris Menton, as Principal Researcher, and specifically those of his staff involved in this research project will be bound by the regulations of the CHSB as they relate to CORI certification for research purposes. Willful violations of those regulations may subject the offender to the civil and criminal sanctions imposed by M.G.L. Chapter 6, Sections 177 and 178 and those sanctions imposed by 803 CMR 8.03(2)

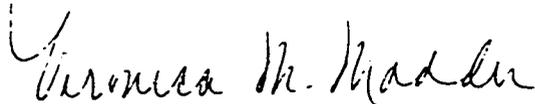
Mr. Chris Menton
Page Two
August 06, 1997

You are required to show a copy of this letter to any agency holding the CORI necessary for the research project. If any such agency has questions about disseminating CORI in response to your request, please have the agency contact me at the address and number noted hereon.

Finally, upon completion of this research project, you must notify the Criminal History Systems Board of such, and that you have destroyed all CORI accessed for purposes of the project.

Please feel free to contact me if you have any questions or comments regarding any aspect of the foregoing certification.

Very truly yours,



Veronica M. Madden
Deputy Director/General Counsel

VMM/mah
Enclosures

The Commonwealth of Massachusetts
County of Norfolk



JOHN H. FLOOD
SHERIFF

OFFICE OF THE
SHERIFF



P.O. BOX 149
200 WEST STREET
DEDHAM, MA 02027
329-3705
FAX 326-1079

July 21, 1997

Mr. Christopher Menton
75 Rosemary Road
Dedham, MA 02026

Dear Chris:

I am pleased to inform you that Sheriff Flood has approved your request to conduct a Research Study on our Domestic Violence Intervention Program at the Norfolk County Correctional Center.

I understand that you will conduct a two-phase approach to the research study: A Recidivism Study and Program Evaluation, consisting of a correctional program assessment inventory. Both approaches will be valuable in validating the integrity and effectiveness of the program. It will also assist us in documenting program outcomes and evaluation data for future funding considerations.

Please contact Andrea Cooper, Domestic Violence Coordinator at Extension 240 to arrange an initial meeting.

I look forward to working with you.

Sincerely,

A handwritten signature in cursive script that reads "James P. Kilcoyne".

James P. Kilcoyne, Assistant Deputy Superintendent
Bureau Chief Program Services

Appendix G
Session Transcripts

First Session - Introductions and Expectations

Good morning my name is Tom. I am hoping to get a little bit of control over my anger towards my wife and get a little control over those kind of things.

My name is Rob. I'm not sure. Basically I'm looking not to come back here anymore. This is getting old. I'm 33 years old. This should be the last time. This is tiring.

Hello my name is Jack. I'm looking to deal with some of the issues that I have failed at in the past and hopefully I will stay out of jail myself.

My name is Luther. I am hoping to change some of my actions that lead to me getting angry and lashing out and getting violent. I want a better way of life for myself and hopefully I will be able to do something for myself and for somebody else

My name is Shane. I want to take care of my violent behavior, how to control myself better.

Chris, try to learn to control my temper.

Tad, try to control my anger and get a little education out of this program.

Mitchell. I am here to educate myself about my violent nature. hopefully set a better example for my children.

Ben I'm here to try to control my anger and try to learn about violence

Roger I'm here to try to better myself in this program and get something out of the program and control my temper a little better.

Dan and ah I want to try to learn how to control my poor impulse control ya know. Got a temper sometimes and I don't know how to handle it.

Andy. I am here to try to control my anger and keep myself from lashing out.

Session #9

History and family of origin exercise excerpts.

Andy: I don't remember much about my childhood. I blocked it out. I was physically abused. You know. I took everyone's problems, my mom took it out on me. Everybody. Nobody else got hit. I did. I don't really remember much. I just have flashbacks of abusive stuff. I remember being in foster care in a foster home in Atown. I thought I changed, but I didn't. I went to school. I just started taking my frustrations out on everybody else. I got involved with drugs. I got expelled for beating up the principal and I tried to stab another teacher. When I was 17 years old in another situation, I got in a shootout with the state police. I wound up doing a bit in prison. When I got out nothing changed. I didn't care. I still hurt pretty bad inside. I got involved in a relationship and I shouldn't have. I just started hitting her like I was treated when I was a kid. I came back to jail and when I got out I just did the same thing. And here I am now, 19 months later.

Dan: I started taking a lot of that hurt and everything onto my ex and I ended up holding her hostage in my bedroom I wanted her to be my mother and father and everything else I just messed up I know somethings wrong inside. I tell myself, hey I'm the smartest guy around. Which I think I am. But I just can't control my temper sometimes when I look to and it just happens again. So after abusing her for a few years, the drugs, everything else, she'd rather do her own thing then we got back together, things that had happened I'd

bring up then there'd be an explosion again then the second baby was born. Still got a great job and it all just went down the tubes with the drugs, the violence and the abuse. And then jail. I ended up beating up. My mother ended up getting involved with this guy and I ended up breaking his nose, his arm and collarbone because I warned him twice not to abuse my mother she had been through a rough time. He thought he was just going to freeload off her and take her for a ride. He locked me out of my house and that was the final straw. I broke in and beat him bad. I would never beat him like that maybe taking out all my frustrations on everyone else on this guy he really got a heck of a whooping I'm lucky I didn't kill him.

Roger: I was young at the time and basically another incident. My stepfather, he used to abuse my mother pretty regularly and you know, myself and my older brother used to see that pretty frequently. I grew up in the projects and it was hard, you know, struggling and things like that. At one point, I guess she got tired of it and then one day, you know, we seen an ugly incident. She took it upon herself and fought back and she, you know, shot him. She shot him and we witnessed that at the time. We was young then and I guess he got out of there and he straightened up his act now and that's about it.

Ben: I don't know how to be a father to them. I would say I never wanted to be like my dad cause he hit my mother and this and that, and he beat us when he was drunk and I found myself coming to jail with him.

Session #18

Mitchell addresses other participants.

Tom's story reminds me a lot of mine because of the daughter's situation. I like Tom because he been through a lot, its been rough and he's not giving up. He's clearly orientated. He's going to be with his family and he is trying to do what it takes to make it work and I like that a lot. I like the way he thinks about your daughter. I like the way he think about your wife. I like the way you re-evaluate the situation that you've been into so when you go back so you won't be the same way. It takes a lot for a man to look at hisself and re-evaluate hisself and try to correct the problem. I like that approach.

My buddy Andy. Andy has grown a lot, you grown a lot you know, you've grown a lot Andy. When I first met Andy he was just a fighter. Always wanted to fight ya know what I'm saying. I like Andy. I'll always stay friends. He kind of mad at me the other day when we was playing basketball. But I have to apologize because I took advantage. I'm in a group with you. I share with you alot. You share with me alot. So I know what ticks you, you know. You an excellent basketball player. I just couldn't cover you no other way so I had to work on your nerves but I apologized for that man because your a good friend, you know. We kid around a lot. We talk a lot, you know. And I really think you've grown a lot. I'm not the best of judges, you know, but I watch people. I analyze a

lot of things to me you have grown. Our friendship has grown from where it's started and I hope it continues to grow.

Dan. Dan makes me think of a lot of pain when I talk to him. You make me relive my hurts and my pain. You put it right out there, you know. I think that's been good for the group, I really do. You know. It's just the way of you saying things. You make me relive the pain that I've been through and reliving makes me put it out there in front of me. So I can deal with it and I like that part that you bring to the group. It makes the group whole and I appreciate that. I'll miss you.

Mr. Ben: Mr. Tenacity. You never Ben since I've known you, you've been back and forth to the hole - you still just keep plugging. You going to make things work, no matter what. You know you have problems but you are dealing with it. And you always have a kind word to say all the time. Whenever I see you, whatever we talking about, we have a kind word. With that rough exterior you portray, you always have a kind soft word to say. I have a lot of respect. Keep it up. I think you have a lot of tenacity I admire that.

Luther saying goodbye to the group leaders.

I felt as though if I had to say something, if I couldn't get an answer from Andrea, I know I'll get it from you. It's kind of like the man with the woman. That was good
Andrea Cooper. Mrs. Andrea Cooper. God sends his angels in strange ways. Sometimes we don't see them and sometimes we do. I see an angel in you. I see an angel in you.
You allowed me to use your shoulder to cry on. You let me know that I could stand up and smile and love myself. You never promised me anything. You never told me what to do. You just said here it is, let's get busy. I'll help if you put your hand out there. When you talk, you talk about yourself, about what you feel as a woman. What you feel as a person and how you feel about me as a person. You never told me I couldn't do it. You always said I could. You were right. When I had my tough days, when we were here in groups, you always came and you showed and help when I needed you in the unit too. I'd say there is Andrea thank God I need to talk to her. And you'd listen to me. And you give me good advice. You give me good suggestions. And they weren't just for the day, Andrea. They were for a lifetime. They worked for me. You showed me ways to stop my violence, to end it. That I could make the choice to do it and I could do it. And I believed you. I believe that I can. I really do. I know that. Without you giving me the opportunity, here in this place, I don't know if that would've happened with me. I think I would've realized some things, but I don't think I would've opened up to a lot of things in my life that I talked about in this group without your help. Just by doing that, just by

doing that. This gave me a chance to stop my violence. Stop abusing somebody that I care about. And maybe from stop abusing someone else in the future. That's what all this group has done for me. That's what all these guys, all you guys here. Every time you talked about your relationships and yourself and the way you feel and what you are looking for, a lot of that's a piece of me too. A lot of that in a lot of ways. Because I have a lot of history. I got a lot of things that I want for myself in the future. When I talked earlier about a home. You know, when Andrea was talking about walking on the beach the first thing I thought about was cooking in the kitchen. Because that's comfortable for me. I honestly know that by not sharing with myself and not being as honest as I possibly can about what makes me angry, or why I get sad, or why I feel hurt, by not talking about things I like to do that make me happy. By holding those things in I set myself up to physically, mentally, or emotionally abuse someone else. Because my expectations are for that person to know without me telling them and that's not possible. That's not possible. The only way that I found that people get to know me is by me telling them. By me telling them. I found out that I can stop. I can check myself. I can come to a level where I can discuss what I need to discuss, or if I can't I am able to open my mouth and say, I can't handle it right now. And move on. I am smart enough to know even if I have to pick up a phone to save my behind, I can do that. I don't care if it's calling 911. Ya know if it stops the violence it stops the violence. The group itself and just the institutional environment is one that shows me I have to do something about my life. No one else but me. Listening to some of you guys in the group talking about that you have

been here a few times and stuff like that, that tells me if I keep abusing people, I'm going to be here too. I have a choice.

REFERENCES

REFERENCES

- Abate, C. (1997). Towards an intergrated response to Domestic Violence.
A report from N.Y. State Senator's Public hearing.
- Adams, D. (1996). Program Manual: Frist stage groups for men who batter.
Cambridge: Emerge.
- Adams, D. (1989). Feminist-based intervention for battering men.
In L. Caesar, & L. Hamberger (eds.), Treating men who batter: Theory, practice
and programs. (pp. 3-22). NY: Springer.
- Adams, D. (1989 July/August). Identifying the assaultive husband in court:
You be the judge. Boston Bar Journal. pp.23-25.
- Adams, D. (1988). Treatment models of men who batter: A profeminist analysis.
In K. Yllö, & M. Bograd (Eds), Feminist perspective on wife abuse. (pp. 176-
197). Beverly Hills: Sage.
- American Correctional Association. (1993). Directory. Laurel, MD.
- American Psychiatric Association. (1994) Diagnostic and statistical manual of
mental disorders. Fourth Edition. Washington, DC: American Psychiatric
Association.
- American Psychological Association (1993). Violence and youth: Psychology's
Response. Vol I: Summary Report of the American Psychological Association
Commission on Violence and Youth. Washington DC.
- Bandura, A. (1977). Social learning theory. Englewood Cliffs, NJ: Prentice Hall.
- Bandura, A. & Walters, R. (1963). Social learning and personality development. NY:
Holt, Rinehart and Winston.
- Barker, R. (1995). Social Work Dictionary: 3rd.Ed. Washington: National Association
of Social Workers Press.
- Barton, R. and Turnbull, B. (1981). A failure rate regression model for the study
of recidivism. In J. Fox (ed). Models on quantitative criminology. (pp. 81-101).
New York: Academic Press.

- Bastian, L. (1995). Criminal victimization: 1993 . In C. Eskridge (ed). Criminal justice: Concepts and Issues. (pp.19-25). Los Angeles: Roxbury Press.
- Berry, D. (1995). The domestic violence sourcebook. Los Angeles: Lowell House.
- Besharov, D. (Ed.)(1990). Family violence: Research and public policy issued. Washington: American Enterprise Institute.
- Bischof, L. (1970). Interpreting personality theories. 2nd Ed. New York: Harper & Row.
- Blessing, Lee. (1986). War of the Roses : A play in three scenes. New York, NY : Dramatists Play Service.
- Bogdan, R. & Biklen, S. (1992). Qualitative research for education. Boston: Allyn and Bacon.
- Bograd. M. Battering, (1994). Competing clinical models, and paucity of research. The Counseling Psychologist 22, (4). 593-597.
- Cardarelli, A. (ed.) (1996). Intimate partners: Patterns, causes and effects. Boston: Allyn and Bacon.
- Carden, A. (1994). Wife abuse. The Counseling Psychologist 22, (4). 539-582.
- Crowell, N. and Burgess, A. (eds.) (1996). Understanding violence against women. Washington D.C.: National Academy Press.
- de Anda, D. (1995). Adolencece overview. In L.Ginsberget al. Encyclopedia of social work. 19th ed Silver Spring, Md: National Association of Social Workers.
- de Becker, G. (1997). The gift of fear: Survival signals that protect us from violence. Boston: Little Brown and Company.
- Diamant, A. (1997, October 26). Violence and silence: They don't tell, but we should ask. The Boston Globe, pp E1, E3.
- Dolan, J. (1997) The background characteristics and recidivism rates of releases from Massachusetts Correctional Institutions durring 1993. Massachusetts Department of Correction.

- Dutton, D., Bodnarchuk, M., Kropp, R., Hart, S., & Ogloff, J. (1997). Wife assault treatment and criminal recidivism: An 11-year follow up. International Journal of offender therapy and comparative criminology. 41 (1), 9-21.
- Dutton, D. & Hart, S. (1993). Risk markers for family violence in a federally incarcerated population. Forum on correction research. 5 (2).
- Dutton, D. & McGregor, B. (1991). The symbiosis of arrest and treatment for wife assault: The case for combined intervention. In M. Steinman (Ed.), Women battering: Policy Resonances. Cincinnati: Anderson Publishing.
- Ebbert, S. (1998, May 11). Few batterers are treatable, study suggests. Boston Globe, pp C1-2.
- Edleson, J. (1995). Do batterers' programs work?. paper presented at the International study group on the future of intervention with battered women and their families held in Haifa.
- Eisikovits, Z. & Edleson, J. (1989). Intervening with men who batter: A critical review of the literature. Social Service Review. 37, 385-414.
- Eisikovits, Z. & Pelled, E. (1990). Qualitative research on spouse abuse. In D. Besharov (Ed.), Family violence: Research and public policy issued. (pp. 1-12). Washington: American Enterprise Institute.
- Engeldinger, E. J. (1986). Spouse abuse: An annotated bibliography of violence between intimates. Metuchen, NJ: The Scarecrow Press.
- Eskridge, C. (ed)(1996). Criminal justice: Concepts and issues. Los Angeles: Roxbury Publishing.
- Fagan, J. (1996) The criminalization of domestic violence: Promises and limits. Washington, DC: National Institute of Justice.
- Fineman, M. A. & Mykitiuk, R. (1994). The public nature of private violence: The discovery of domestic abuse. New York: Routledge.
- Finkelhor, D., Hotaling, G. & Yllö, K. (1988). Stopping family violence: Research priorities for the coming decade. Newbury Park, CA: Sage.

- Ganley, A. (1981). Court-mandated counseling for men who batter: A three-day workshop for mental health professionals. Washington D.C.: Center for Women Policy Studies.
- Gansberg, M. (1964, March 27) 38 Who saw muder didn't call the police. The New York Times.
- Garner, J., Fagan, J. & Maxwell, C.(1995) Published findings from the Spousal Assult Replication Program: A critical review. Journel of Quantitative Criminology.11 (1), 3-28.
- Gelles, R. & Straus, M. (1988). Intimate violence. New York: Simon and Schuster.
- Gelles, R. & Straus, M. (1990). Physical violence in American families. New Brunswick, NJ: Transaction Publishers.
- Gelles, R. , Straus, M. & Steinmetz, S. (1981). Behind closed doors: Violence in the American family. Garden City NY: Anchor Books.
- Gendreau, P. (1996). The principles of effective intervention with offenders. In A. Harland (Ed.), Choosing correctional options that work. Thousand Oaks, CA: Sage.
- Gendreau, P., & Andrews, D.A. (1994). The Correctional Program Assessment Inventory. (4th ed.) University of New Brunswick, Saint John,
- Gendreau, P. (1981). Treatment in corrections: Martinson was wrong. Canadian Psychology. 22, 332-338.
- Goldstein, A. (1988). The prepare curriculum: Teaching prosocial competencies. Champaign: Research Press.
- Hamberger, L. (1997). Cognitive behavioral treatments of men who batter their partners. Cognitive and Behavioral Practices. 4,147-169.
- Haskell, M., and Yablonsky, L. (1974). Criminology: Crime and criminality. Chicago Rand McNally.
- Hansen, N. (1994). A critique of Carden's integrative model for treatment of batterers. The Counseling Psychologist. 22,(4), 583-586.

- Herman, J. (1992). Trauma and recovery. New York: Basic Books.
- Isaac, N., Cochran, D., Brown, M., and Adams, S. (1994). Men who batter: Profile from a restraining order database. Archives of Family Medicine 3, 30-34.
- Isaac, S., and Michael, W. (1981). Handbook in research and evaluation: For education and the behavioral sciences. San Diego: Edits.
- Jacobson, N. & Gottman, J. (1998). When men batter women. N.Y.: Simon & Schuster.
- Katz, J. (1988). Seductions of crime. Basic Books.
- Larson, L. & Garrett, G. (1996). Crime, justice and society. Dix Hill, N.Y.: General Hall.
- Lindsey, M., McBride, W., & Plant, C. (1993). Amend: Philosophy and curriculum for treating batterers. Littleton, CO: Gylantic Publishing.
- LIS Inc. (1997). Assessment of batterers: A special project report to Larry Solomon; Deputy Director National Institute of Corrections. Longmont CO.
- Margolin, G., Sibner, L.G., & Gleberman, L.(1988). Wife battering. In V. Van Hasselt, R. Morrison, A.Bellack & M. Hersen, (eds.), The handbook of family violence. New York: Plenum Press.
- Martinson, R. (1974). What works? Questions and answers about prison reform. The Public Interest. 35, 22-54.
- Massachusetts Department of Public Health. (1995). Massachusetts guidelines and standards for the certification of batterers intervention programs. Boston.
- Massachusetts General Law Annotated Part II. Title III. Chapter 209A. (1996) West Publishing.
- Massachusetts Sentencing Commission. (1996) Report to the General Court.
- Massachusetts Trial Court. (March 1994). Draft Abuse prevention proceedings. Boston.
- Menton, C. (1996). Information management creates opportunities to effectively restructure probation sanctions for domestic abusers Community Correction Report 3, (4) 1.

- Miller, T. (1992). Self-discipline and emotional control. Boulder: Career Track.
- Nordquist, J. (1986). Domestic violence: Contemporary social issues: A bibliographic series, no. 4. Santa Cruz: Reference and Research Services.
- Owens, B. (1988). Reproduction of social control. New York: Praeger
- Peck, S. (1983). The people of the lie: The hope for healing human evil. New York: Touchstone.
- Pithers, Wm. (1993). Relapses prevention with sex offenders: Applications to treatment and supervision. Program description. Waterbury VT: Vermont Department of Corrections.
- Pithers, W., Cumming, G., Beal, L., Young, W., & Turner, R. (1989). Relapses prevention: A method for enhancing behavioral self-management and external supervision of the sexual aggressor. In Schwartz B. (Ed.), A practitioner's guide to the treatment of the incarcerated male sex offender. (pp. 121-135). Washington, DC: National Institute of Corrections.
- Prothrow-Stith, D. & Weissman, M. (1991). Deadly consequences. New York: Harper Collins.
- Prudell, J. (1997, March 9) . Pressing of domestic assault case signals crackdown, officials say. Boston Globe, p. B5.
- Ressler, R., Burgess, A. & Douglas, J. (1988). Sexual homicide: Patterns and Motives. Lexington, Massachusetts: D.C. Heath and Company.
- Renzetti, C. (1996). Violence and Abuse among same-sex couples. In A. Cardarelli (ed.), Intimate partners: Patterns, causes and effects. (pp. 70-89). Boston: Allyn and Bacon.
- Rosenbaum, A., Gearan, P. & Ondovic, C. (1997). Completion and recidivism among court-and self-referred batterers in a psychoeducational group treatment program: Implications for intervention and public policy. The University of Massachusetts Medical School.
- Ross, R., Fabiano, E. & Ewles, C. (1988). Reasoning and rehabilitation. International Journal of Offender Therapy and Comparative Criminology. 32, 29-35.

- Rossi, P., Waite, E., Bose, C. & Berk, R.(1974). The seriousness of crimes: Normative structures and individual differences. American Sociological Review. 39 (2), 224-37.
- Ryan, W., (1972). Blaming the victim. New York: Random House.
- Sherman, L. W. & Berk, R. A. (1984). The specific deterrent effect of arrest for domestic assault. American Sociological Review 49, 261-272.
- Schön, D.A. (1983). The Reflective Practitioner. New York: BasicBooks.
- Siegel, Reva B. (1996). "The rule of love": Wife beating as prerogative and privacy. Yale Law Journal.105 (8), 2117-2207.
- Snarr, R. & Wolford, B. (1985). Introduction to corrections. Dubuque, IA.: Wm. C. Brown.
- Sonkin, D. (Ed.). (1987). Domestic Violence on Trial: Psychological and legal dimensions of family violence. New York: Springer Publishing.
- Spectrum Abuse Associates. (1993). Correctional Recovery Academy Proposed Program Description. Southborough MA.
- Sprenkle, M. (1994). Wife abuse throught the lens of "Systems Theory." The Counseling Psychologist. 22 (4), 598-602.
- Star, B. (1995). Domestic violence. In L. Ginsberg,et al. Encyclopedia of social work. 15th- issue. Silver Spring, Md: National Association of Social Workers.
- Star, B. (1983). Helping the abuser: Intervening effectively in family violence. New York: Family Service Association of America.
- Steinman, M, (1991). Women battering: Policy responses. Cincinnati: Anderson Publishing.
- Stevens, M. (1994). Stopping domestic violence: More answers and more questions needed. The Counseling Psychologist 22, (4). 587-592.
- Stewart, T. & Brighton, P. (1995). Communications without violence: A public safety treatment model. Brief Program Description. Marstons Mills, MA.

- Straus, M. & Stienmetz, S. (1974). Violence in the family. New York: Dodd, Mead.
- Sullivan, H. (1953). The interpersonal theory of psychiatry. New York: W. W. Norton.
- Tolman, R., & Bennett, L. (1990). A review of quantitative research on men who batter. Journal of Interpersonal Violence, 5 (1), 87-118.
- Tolman, R., & Edleson, J. (1995). Intervention for men who batter: A review of the research. In S.R. Stith & M.A. Straus, (Eds.), Understanding partner violence: Prevalence, causes, consequences and solutions. (pp. 262-273). Minneapolis: National Council on Family relations.
- United States Department of Health and Human Services (1991). Protection of human subjects. 45 Code of Federal Regulations, part 46 section C.
- United States Department of Justice. (1998). Violence by intimates: Analysis of data on crimes by current or former spouses, boyfriends, and girlfriends. Washington DC: Bureau of Justice Statistics.
- United States Department of Justice (July 8 & 9, 1997). Batterers intervention focus group workbook. Washington DC: Office of Justice Programs, Violence Against Women Programs and the National Institute of Corrections.
- United States Department of Justice (July, 1997). Domestic violence and stalking: The second annual report to Congress under the Violence Against Women Act. Washington DC: Office of Justice Programs, Violence Against Women Grants Office.
- Van Hasselt, V., Morrison, R., Bellack, A., & Hersen, M. (Eds.) (1988). The handbook of family violence. New York: Plenum Press.
- Warr, M. (1991). America's perception of crime and punishment. In J. Sheley (Ed.), Criminology: A contemporary Handbook. Belmont CA: Wadsworth Publishing.
- Watson, R. (1997). "Second quarter crime report." Cambridge Massachusetts Police Department.
- Whyte, D. (1994). The heart aroused. New York: Currency Doubleday.
- Wilson, D. (1993). The moral sense. New York: Free Press.

- Wolfgang, M., Thornberry, T. & Ferracuti, F. (1987). From boy to man, delinquency to crime. Chicago: University of Chicago Press.
- Wolfgang, M. & Ferracuti, F. (1967). The subculture of violence: Towards an integrated theory in criminology. London: Social Science Press.
- Wolfus, B. & Bierman, S. (1996). "An evaluation of a group treatment program for incarcerated male batterers." International Journal of offender therapy and comparative criminology. 40(4), 318-333.
- Worthen, B. & Sanders, J. (1987). Educational evaluation: Alternative approaches and practical guidelines. White Plains: Longman.
- Yalom, I.. (1970). The theory and practice of group therapy . New York: Basic Books
- Yas, D. (1996, April 15). Massachusetts Sentencing Commission releases set of guidelines; Grid system lauded, details questioned. Massachusetts Lawyers Weekly . pg. 1.

VITA

199

VITA

P CHRISTOPHER MENTON

Dedham, Massachusetts

Education

<u>1977</u>	M. Ed.	Boston University
<u>1975</u>	B. A.	Curry College

Massachusetts Department of Correction

<u>1988-95</u>	Coordinator of Staff Training
<u>1984-87</u>	Supervisor of Security and Training
<u>1980-83</u>	Shift Commander
<u>1979-80</u>	Correction Counselor
<u>1974-79</u>	Correction Officer

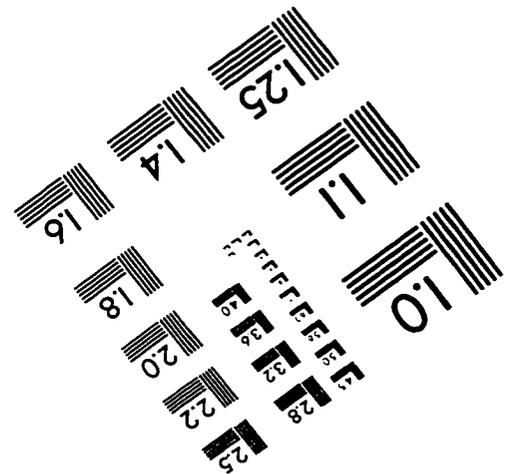
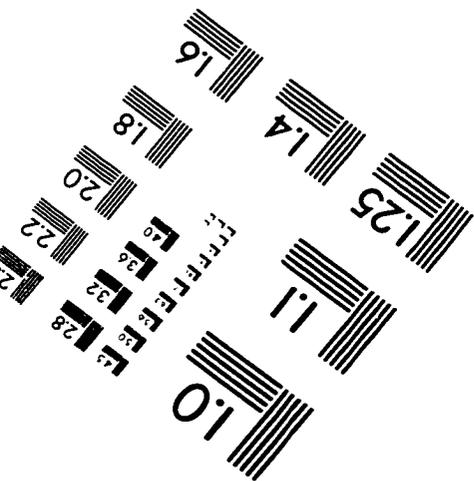
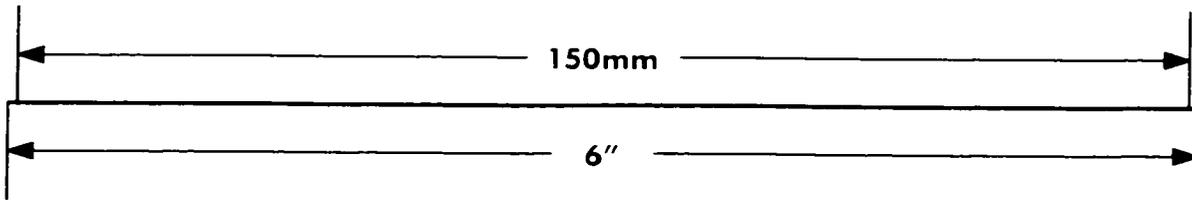
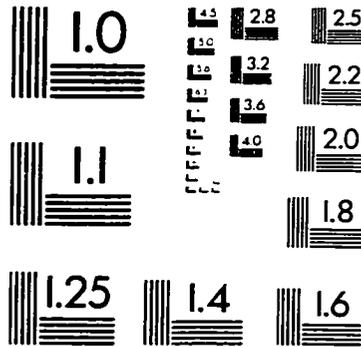
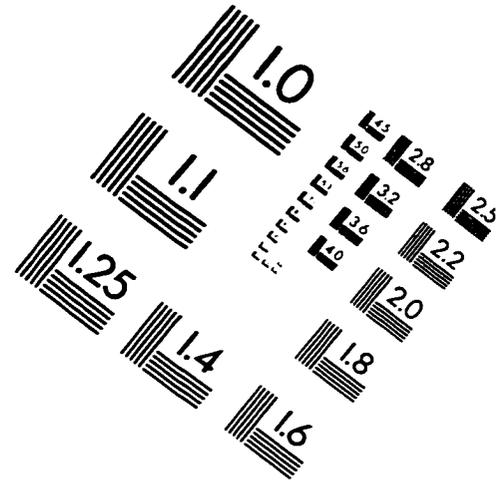
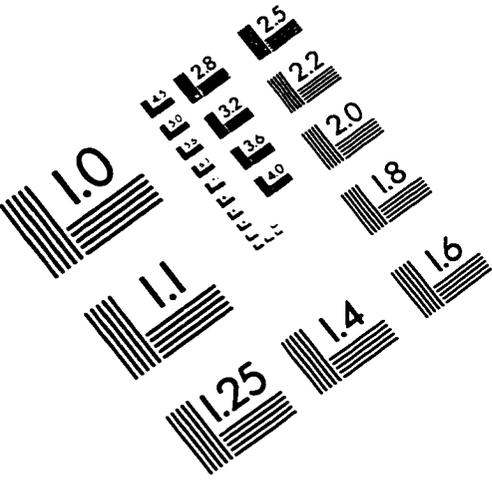
Higher Education Instructor

Boston University
University of Massachusetts, Boston
Northeastern University
Curry College
Fisher College

Publications

- Menton, C., "Information management creates opportunities to effectively restructure probation sanctions for domestic abusers" Community Correction Report . May/June 1996 Vol. 3, No.4 pg. 1.
- Gagnon, T. and Menton, C., "Development of staff peer training model on communicable disease," The Journal of Correctional Training. Winter 1993.
- Gagnon, T. and Menton, C., Communicable Diseases - Peer Education. (1993, Curriculum)National Institute of Corrections Training Network. Longmont, CO.
- Nerboso, D. and Menton, C., Strategic Study Skills. (1993, Curriculum) National Institute of Corrections Training Network. Longmont, CO.
- Regan, Paul (pseudonym), "Social Education Shock", Academic Therapy:(1979) Vol. 14, No. 4.

IMAGE EVALUATION TEST TARGET (QA-3)



APPLIED IMAGE, Inc
1653 East Main Street
Rochester, NY 14609 USA
Phone: 716/482-0300
Fax: 716/288-5989

© 1993, Applied Image, Inc., All Rights Reserved