

Concept Paper:
Considerations for programs for those impacted by domestic violence crimes in Alaska
UPDATED: September 2022

PURPOSE

This concept paper provides a summary of the background and status of Alaska's battering intervention programs in preparation for revised programming by the State of Alaska. Information in this paper has been gathered through an extensive series of research activities on best practices, a review of other state practices, and a robust multidisciplinary stakeholder engagement process over the course of 18 months. The paper is intended to provide the Council on Domestic Violence and Sexual Assault (CDVSA) and other decision-makers a starting point for updating battering intervention programming in Alaska, and does not represent a consensus around specific recommendations, but rather a status of Alaska's system and findings for further consideration under a revised system.

BACKGROUND

Programs for Rehabilitation of Perpetrators of Domestic Violence is outlined in Title 22, Chapter 24 within the Department of Corrections (DOC), Alaska Statute 44.28.020. DOC is charged with the responsibility for approving and regulating battering intervention programs. Through a mutual Memorandum of Agreement, DOC has delegated the responsibility for approving and regulating Battering Intervention Programs (BIPs) to the CDVSA. BIP Programs in Alaska were developed in the mid-1990's as part of a comprehensive strategy to reduce domestic violence in Alaska.

Over the years BIP and Prison-based Programs (PBP) have morphed as funding was reduced and research indicated programs aimed at changing the behavior of abusive partners were limited at best and ineffective at worst. Struggles continued with efficacy, inconsistent data collection, and lack of funding resulted in programs with little flexibility or documented positive outcomes.

In 2019, CDVSA began to examine the need to revamp and improve Alaska's approach to serving abusive partners with an eye toward accountability for their actions and addressing their own trauma and need for healing. With limited resources and funding it took two years to establish a Perpetrator Rehabilitation Workgroup. This Workgroup was charged with finding ways to better serve this population, to expand programs to meet the community, cultural and gender needs, and to improve safety for victims and survivors of interpersonal and intimate partner violence. In April 2021, the Council on Domestic Violence and Sexual Assault organized and convened the Perpetrator Rehabilitation Workgroup (workgroup) which convened and discussed programming framework and strategy issues to improve battering intervention programs in Alaska. The workgroup spent its first seven monthly meetings having presentations and dialogue with subject matter experts across a range of sectors and disciplines.

During the winter of 2021-2022, researchers from the University of Alaska Anchorage conducted research-focused presentations during four monthly meetings identifying best practices and current research related to intervention approaches to reduce domestic violence and its recurrence. This work was complemented by a Master of Social Work Practicum student also from UAA, including a comprehensive review of six other states' approaches to domestic violence (DV) intervention programming.

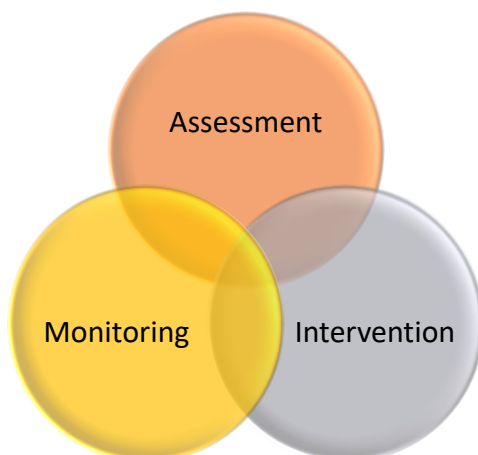
Additionally in 2022, another academic effort conducted one-on-one informant interviews with key stakeholders. The CDVSA Batterer Intervention Program Stakeholder Interview Project was conducted to include non-Workgroup stakeholder insights and other perspectives that may not have risen to conversation topics in the Workgroup. One-on-one confidential interviews were conducted with stakeholders representing the six Alaska regions (i.e., Southeast, Southcentral, Southwest, Western, Arctic, and Interior). Stakeholders included representatives of victim advocates, BIP providers, probation officers, law enforcement, judges, and attorneys (prosecutor and defense). The final report synthesizing the narratives of the stakeholders obtained from the interviews will also be submitted to CDVSA and discussed with the Workgroup in Fall 2022}.

As of fall 2022, this version of the concept paper is being shared with stakeholders for feedback online, and in person/virtually during a dedicated and focused conversation on October 4, 2022. The concept paper will be updated based on the stakeholder input received and will be submitted to the CDVSA action to redesign the current Alaska BIP programming.

While not all stakeholders may agree on the best approach, there is agreement that Alaska can do better. There also seems to be agreement that evidence-informed practices exist and can be modified to meet the unique and diverse situation in the state. This concept paper outlines key elements that a revised intervention programs should consider in the future.

FRAMEWORK, DEFINITIONS + RESEARCH

The workgroup and research team organized discussions into three focus areas: Assessment, Intervention, and Monitoring.



Dedicated work sessions were focused on exploring what options might be included in each focus area, the barriers, and limitations. Below are the definitions used for each focus area, as well as a summary of the research and evidence that was presented and discussed by stakeholders.

Assessment

- **Definition**

- *Focus: Offender risks, strengths, needs, motivation, characteristics of DV/IPV situation, and victim safety.*
- ONGOING evidence-based procedures used to identify historical and current risks, severity of risks, protective factors, needs, and motivation.
- Measures/Tools – Standardized and tested set of questions or factors used to identify presence and/or extent of risks, behaviors, strengths, and/or needs.
- Screening – *Does a risk or protective factor factor/behavior/experience exist?*
- Assessment – *If yes, how extensive, severe, impactful, etc.?*

- **Research: Assessment Empirical Evidence Summary**

- Various forms of DV/IPV risk assessment tools are designed to predict different outcomes or targets (e.g., lethality) and have been developed for use within different systems (e.g., law enforcement, treatment, monitoring, sentencing), and require different information and training to complete.
- The **research supporting the evidence-base of current DV/IPV risk assessment is significantly limited in scope and rigor** as compared to the risk assessment literature focused on general offending populations.
- Existing DV/IPV-specific measures lean more toward **screening** related to type of violence and risk of recidivism rather than integrated and/or comprehensive **assessment** needed for effective intervention, treatment, and monitoring.
- Although, the identified risk factors related to contributing factors for DV/IPV **perpetration** and **future risk of recidivism** (two different targets) are both well-established - **NO single DV/IPV screen and/or assessment measure exists that identifies all currently known DV/IPV risk factors** related to causes, severity, risk of recidivism, and/or treatment needs – either individually or as a whole.
- Thus, the focus, types, target factors, and extensiveness of assessment needed depends on the following:
 - Goal of assessment (e.g., predict risk of recidivism, prevent violence, treatment);
 - Identified needs and capabilities/resources;
 - Given touchpoint/role within the system (e.g., court, treatment provider, probation);
 - Severity/Criminogenic Risks;
 - Motivation; and
 - Decision at hand (e.g., screen in/out vs. comprehensive integrated treatment plan).

- **Assessment Takeaway:** The higher the risks, more complex the needs, and the importance of the decision, the more complex and broader selection of validated assessment measures, clinical training, and designated victim safety will be required to create individualized, meaningful, and effective interventions and monitoring.

Intervention

- **Definition**

- Individual or group **treatment** intended for offenders, aiming to promote awareness about moral disengagement of their actions, award of all the damages caused, and to identify new strategies to prevent or reduce repeat offence (Travini, 2020).

-or-

- Counseling and more specialized psychotherapies seek to change behaviors, thoughts, emotions, and how people see and understand situations (SAMHSA, 2022).

- **Research: Intervention (Treatment) Empirical Evidence**

- Matching treatment to a reliable assessment of needs and severity is essential.
- Combined treatments - CBT, mindfulness, SUD treatment, motivational interviewing, and restorative justice ALONG with psycho-educational programs show the most success in the data.
- Emerging models look to address trauma and encourage therapeutic relationships and behavioral health perspectives between individuals and communities.
- Restorative Justice models have been a good fit at the state level, particularly for misdemeanor cases as well as in many indigenous communities.

Monitoring

- **Definition**

- *Focus:* Regular, proactive, and ongoing offender monitoring and supervision of required adherence to conditions and victim safety.
- Taxman (2002) defines supervision as “a means to engage the offender in a process of improving compliance with general societal norms including the conditions of release” (p. 20).

- **Research: Monitoring Empirical Evidence**

- Proactive, direct, consistent, and sustained engagement with DV/IPV offenders and victims by an assertive, partnered, trained, and coordinated interprofessional system
- The level and intensity of offender monitoring and supervision are based on an individualized assessment of DV/IPV and criminogenic risk factors
- Considers individual motivation and accountability needs, preferences, and cultural relevance

- All justice contact provides enhanced implementation and communication provided through the lens of system fairness/procedural justice to both offender and victim
- Includes proactive victim safety verification with victim safety paramount
- Violations are dealt with predicably, swiftly, and consistently
- Offender assessment, treatment, and intervention are continuously evaluated for impacts and program/system improvements.

DRAFT

CONSIDERATIONS FOR NEW PROGRAMMING

The following findings summarize the considerations for new programming for Alaska based on the research and discussions with stakeholders.

OVERALL PROGRAM GOALS:

All intervention programs should:

- Prioritize victim safety
- Hold people accountable
- Be rehabilitative and therapeutic
- Address individual risks and needs
- Be healing for all of those impacted by domestic violence
- Aim to change behaviors

PROGRAM DESIGN

Update the words we use to reflect the goal of positive outcomes

- There is broad stakeholder support for the Dept. of Corrections, CDVSA and all organizations working in this space to update the program name to better reflect program intentions and principles.
- Stakeholders have suggested that the terms “batterer” and “perpetrator” are not constructive terms to use when expecting an individual to embrace change.

Emphasize evidence-informed practices and evaluation in programming

- Findings in this concept paper and in a new approach for this programming are evidence informed.
- For new intervention programs, there should be a comprehensive evaluation component included to assess the efficacy of the programming and the rates of recidivism.
- Intervention programs should go through a re-approval process every 5 years to ensure they are using best practices and effective methods of evaluation.

Adopt shared guiding principles

- Alaska would benefit from adopting guiding principles to steer and focus the work being done to improve intervention programs.

Assess statewide community readiness

- Alaska, as an overarching community, would benefit from understanding its readiness for change.

Require local community readiness assessments

- Local regions, communities, and programs responsible for carrying out this work need to assess and demonstrate community readiness to accept and embrace this work for it to be effective.

PROGRAM IMPLEMENTATION AND DELIVERY

Promote improved understanding of the system and promote coordination

- We need to better understand the current system of intervention programs as a continuum of interventions, not stand alone.
- During the workgroup process, it became clear that those working across sectors could benefit from increased knowledge about (list most prominent ones here such as court system, corrections, behavioral health, etc.) – should we suggest some longer-term way to promote agency or system coordination?

Prioritize victim safety and align programming with best practices research

- Victim safety is currently and should continue to be a priority when developing and funding intervention programs. Collaboration and the co-creation of strategies with victims' services providers and administrators must continue.
- Evidence suggests co-locating DV and BIP programs can create actual or perceived conflicts of interest that can impede the therapeutic relationship. Co-locating programs could also create a risk to victims.
- All new intervention programs should establish an MOU with local victims' services, to coordinate the goal of victim safety.

Focus on inclusivity + meeting people where they're at

- Recognize the need for inclusivity by making intervention programs accessible and available to both cis and transgender men and women, as well as non-binary individuals as programming is further developed.
- Consider the complicated dynamics of family systems in intervention programming. This includes situations where co-parenting is required and a future relationship with a violent partner can't be ended. Future programming should better recognize these needs and aim to provide resources and services to all parties to meet people where they are at.

Training development and requirements should be prioritized

- Subject matter experts and practitioners with experience should develop a training that focuses on domestic violence intervention services and evidence-based practices for working with those enrolling in intervention programs.
- Facilitators providing intervention services will be required to take targeted and specialized training once it is developed, and to take continuing training to stay current in new research, interventions, and approaches.

Weave cultural healing throughout programming

- Recognize the importance of culture and context when developing new intervention programs.
- Ensure that the community is ready and willing to engage in community-based programming ideals for intervention and rehabilitation.
- Commit resources to exploring community-based accountability models that are working in other locations; there is evidence that these types of restorative justice models are effective on state levels and in rural communities.

Updated regulations

- Picking up on draft regulations from 2014, promulgate updated regulations for consistency with new programming.

PROGRAM EVALUATION**Updated and consistent evaluation measures**

- The State of Alaska should work with subject matter experts to develop a comprehensive and consistent way of measuring program effectiveness.