# TREATMENT DESIGN The Forum outlined the following treatment design as most effective:

**Education** - a component which addresses the belief systems legitimizing and sustaining domestic violence, including information motivating participants to change their abusive behavior.

**Therapy** - provides an opportunity for participants to process the information provided to them and apply it to their individual situations. It should also provide an opportunity to develop and improve support systems.

**Crisis Management** - ongoing assessments should be built into the group process in order to identify highrisk offenders and protect the safety of victims, children, and other offenders as well as providers.

**Constitution** - treatment **groups** are generally most effective when comprised of 10 to 12 members, lasting a minimum of 24 weekly sessions, and averaging two hours per session.

#### FEE FOR SERVICE

Batterers' treatment programs should charge a fee for participation, whether or not it is court ordered. Sliding fee scales may be available for indigent clients.

#### APPROPRIATE GROUP MEMBERSHIP

The standards address group programs designed for adult males who are violent toward others in **intimate relationships.** However, the Adult Batterers' Treatment Forum recognizes the need for other specialized treatment programs to treat female, juvenile, and gay batterers.

#### INAPPROPRIATE MEMBERSHIP

- Persons in active psychosis.
- Persons in need of primary treatment for sexual assault, child sexual abuse, or child abuse or neglect.
- Persons with untreated alcohol or drug addictions.
- Persons at high risk for lethality.
- Persons for whom group treatment is not appropriate (determined by provider).

# INAPPROPRIATE TREATMENT The Forum has deemed the following types of treatment inappropriate for adult male batterers:

- Any treatment approach blaming or intimidating victims, endangering victims, or coercing victim participation is not appropriate.
- Couples, marriage or family therapy is prohibited during the batterers' treatment phase. It may be used only when the batterer has completed the program, the violence has stopped, and the victim is in agreement.
- Anger management therapy that attributes the primary cause of violence to anger.
- Addiction counseling that defines violence as an addiction and the victim and children as enabling or codependent in the violence.

For more information or for a referral to a batterers' program nearest you that is currently in compliance with these standards, contact:

North Dakota Council on Abused Women's Services/ Coalition Against Sexual Assault in ND 418 E Rosser #320 Bismarck, ND 58501 Ph: 701-255-6240 1-888-255-6240 www.ndcaws.org

9/08



### TREATMENT



A SUMMARY FOR JUDGES AND SERVICE PROVIDERS FROM THE NORTH DAKOTA BATTERERS' TREATMENT FORUM



#### INTRODUCTION

The North Dakota Adult Batterer's Treatment Forum was established in 1995 as a joint effort of the North Dakota Council on Abused Women's Services/ Coalition Against Sexual Assault in ND and the Division of Parole and Probation. Volunteer members of the forum include individuals from a variety of human service, criminal justice, legal, and social service fields.

#### **MISSION**

The initial mission of the forum was to develop standards for the treatment of batterers in North Dakota, creating a network promoting the safety of victims and assisting batterers in stopping abusive behavior. Although treatment guidelines are not currently mandatory, the forum leaves open the possibility of future statutory enforcement.

#### **PHILOSOPHY**

The standards define domestic violence as a crime involving power and control, and requiring swift and sure consequences for batterers in order to protect victims. Cooperation with and intervention by the police, courts, and probation services as well as victim advocates, offender-specific treatment programs, schools, and child protection services are all necessary to deter this abusive behavior.

These "swift and sure consequences and intervention necessary to end domestic violence" should include the arrest of the perpetrator, a mandatory assessment and required treatment ordered by the courts. Any comprehensive plan should also include the responsibility of the offender to pay for the required evaluation and treatment services.

Batterers' treatment, under the standards, is intended to provides tools for participants to change. Whether or not participants choose to change their behavior remains their responsibility.

### PRINCIPLES OF PRACTICE After much in-depth discussion, the Forum adopted the following principles of practice:

- •Marriage, couples', or family counseling should never be an initial intervention. Such counseling is not precluded forever, but should never occur during batterers' treatment. Counseling may be used only when the abuser has completed the program, the violence has stopped, and the victim is in agreement.
- Battering a family member or intimate partner is a crime and is never the fault of the victim.
- •Swift and sure consequences for batterers are critical, particularly those imposed by the criminal justice system. Two years of probation should be the minimum consequence for any level of domestic violence.
- •Intervention with batterers must be a cooperative effort involving at least the following: police, probation, courts, victim advocates, schools, offender-specific treatment and child protection services.
- •There are strong political and cultural dimensions to male battering behavior. Primarily battering is part of an overall oppressive pattern of male violence.
- •Treatment groups should be accessible on an ongoing basis.
- Batterers should assume financial responsibility for the cost of their treatment.
- •Treatment is an ongoing process, providing batterers with education and therapy. Treatment does not imply cure.
- •Domestic violence is not a disease or an illness, but a learned behavior.
- Violence is a choice that is not provoked or elicited by the battered partner.
- Victims of domestic violence should not be mandated into any treatment or intervention program as a result of their seeking redress for having been victimized.

#### PROGRAM ETHICS

### The standards proscribe the following ethical guidelines for group treatment. Programs should, at minimum:

- Meet standards of the Adult Batterers' Treatment Forum.
- Establish and maintain cooperative working relationships with local domestic violence programs, domestic violence task forces, victims of violence and the Adult Batterers' Treatment Forum.
- Refrain from seeking funding for batterers' treatment services that competes with funding for victims' services.
- Acknowledge in all services that the safety of victims and their children takes precedence over all other treatment objectives.
- Develop and enforce policies for their staff addressing ethical standards such as sexual harassment, equal opportunity and professional practice.
- 6. Abide by standards regarding human subjects research and accept responsibility for the selection of research topics and methods that will promote the safety and integrity of victims, protect victim confidentiality and contribute toward the elimination of domestic violence.

### TREATMENT STAFF ETHICS All treatment staff should:

- Be of good moral character, including remaining violence free in their own lives.
- Model respectful personal and professional relationships and communicate respect toward victims of violence.
- Be open to self-examination and receptive to feedback on issues of power and control, victim blaming, sexism and collusion in their own lives.
- 4. Immediately warn victims of any danger the provider believes they may be in.
- 5. Immediately report suspected child abuse or neglect pursuant to North Dakota Century Code 50-25.1-02.

#### QUALIFICATIONS OF GROUP FACILITATORS

Within each treatment group, the two facilitators should always have between them the educational and experiential components listed below. In the case of only one facilitator (which is not recommended), he/she must meet all of the following requirements:

- Be licensed in a human service-related field by a North Dakota licensing board. If one facilitator is not licensed, he/she is still required to complete continuing education credit in domestic violence issues.
- Must be experienced working with both victims and perpetrators of domestic violence, including a minimum of 50 hours of direct clinical work with perpetrators and one year of direct clinical work with victims.
- Facilitators should always have training in the following areas prior to facilitating a group:

dynamics of violence
power and control
interviewing and assessment
crisis intervention
group process
substance abuse
gender issues
victims' issues
legal issues
resistive issues

All batterers' treatment staff shall have violence-free personal relationships. No individual may service as paid or unpaid staff who has been a perpetrator of abuse or battering unless he has successfully completed batterers' treatment program that is in accordance with these standards and has been violence-free for no less that two years.