WHAT YOU NEED TO KNOW ABOUT BATTERER INTERVENTION AND IPV

THE TOOLS WE USE AND THE POWER OF WORKING TOGETHER

ZEROV®

Kentucky united against violence.

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Kentucky Batterer Intervention Program Lead

DEFINITIONS IN STATE LAW: KRS 403.720

(2) "Domestic violence and abuse" means:

(a) Physical injury, serious physical injury, stalking, sexual assault, strangulation, assault, or the infliction of fear of imminent physical injury, serious physical injury, sexual assault, strangulation, or assault between family members or members of an unmarried couple; or

(b) Any conduct prohibited by KRS 525.125, 525.130, 525.135, or 525.137, or the infliction of fear of such imminent conduct, taken against a domestic animal when used as a method of coercion, control, punishment, intimidation, or revenge directed against a family member or member of an unmarried couple who has a close bond of affection to the domestic animal;

WHY IS OUR WORK SO NEEDED?

41% of women and 26% of men have experienced some form of IPV, including physical violence, sexual violence, or stalking, during their lifetime.

1 in 5 homicide victims are killed by an intimate partner.

50% of all female homicide victims are killed by intimate partners (Wilson, et al. 2022).

7% of male homicide victims are killed by intimate partners.

Structural and socioeconomic conditions can add to risk factors for domestic violence as it can lead folks to be more vulnerable to various types of coercive control.

Stats retrieved from CDC: https://www.cdc.gov/intimate-partner-violence/about/index.html August 27, 2024

WHAT CAUSES PEOPLE TO ACT OUT VIOLENTLY IN DOMESTIC SITUATIONS?

Domestic Violence continues to be about power and control dynamics in relationships

No one single factor defines why people cause harm to people in domestic situations.

Learned behaviors are a factor in many cases, but not all.

There is a link to socioeconomic conditions, but that only explains some cases.

Violence is a chosen behavior, but the factors that lead to that choice are often complex and specific to the individual who causes harm.

WHY BATTERER INTERVENTION AND NOT THERAPY?

Couple's Therapy - When there is a danger or fear of abuse, the relationship is unequal. Also, couple's therapy is collaborative in the share of responsibility for problems in the relationship. Victims are not responsible for being abused, so sharing responsibility for solutions to abuse against them can become abusive and coercive.

Mental Health Therapy - Some abusers do have mental health issues that need to be addressed. However, that is **not** a replacement for the accountability and change process promoted by batterer intervention. Therapists who work with abusers should be trained to recognize and challenge abusive patterns. That is why BIP exists.

Substance Use Treatment - If an abuser has a substance use issue, then they have 2 problems. Many people abuse substances every day and never harm anyone. Abusive behavior is not random. It is a choice. Abuse is also rarely expressed ONLY when intoxicated.

Anger Management - Kentucky has **no** regulations around anger management. Anyone can do it with or without credentials. BIP providers are required to adhere to the respective laws outlined in 922 KAR 5:020 and others. Also, anger is not a cause of abuse. Anger is normal and natural, but hurting those we love is a choice.

* While there is no one-size fits all approach, we only promote utilizing evidence-based program materials that comply with 922 KAR 5:020

WHAT IS THIS WORK, REALLY?

THERAPEUTIC

- PROFESSIONAL LICENSURE
- UTILIZES CLINICAL TECHNIQUES AND JUDGEMENT IN APPROACH
- PROCESSES WITH CLIENTS ON DEEP TOPICS AND INTROSPECTIVE PERSONAL ISSUES DURING GROUP

PSYCHOEDUCATIONAL

- TEACHES SKILLS, TECHNIQUES, AND TRAINS ON INFORMATION RELATED TO HEALTHY RELATIONSHIPS.
- DISPELS MYTHS USING INFORMATION.
- UTILIZES VALID TOOLS TO HELP WITH DEVELOPMENT AND APPLICATION OF SKILLS

BIP - MORE OPPORTUNITY TO MANAGE RISK

Regular contact:

Weekly sessions give providers repeated opportunities to notice new threats, coercive behavior, or changes in participation.

Track engagement:

Missed sessions, failure to participate, and violations of court orders become visible to the provider.

A path to action:

In Kentucky, providers must notify the referring court or department when a participant is admitted or involuntarily discharged. Discharge for new abuse or increased risk also triggers an attempt to notify the victim

COMMUNITY-COORDINATED RESPONSE: THE KEY TO MAKING A DIFFERENCE

COMMUNITY-COORDINATED RESPONSE (CCR):

Designed originally in the 1980's, CCR was created to meaningfully address domestic violence across the wide spectrum of people who handle domestic violence situations.

Involves people such as victim's advocates, prosecutors, judges, police, BIP and mental health providers, and other community members who respond to DV. This is a coordinated effort to protect victims and prevent abuse.

Places responsibility to address domestic violence on the community, rather than on any one person or organization.

SCREENING

- AS WITH MANY DISCIPLINES, SCREENING IS A BIG PART OF THE WORK WE DO WITH A PERSON WHO HAS CAUSED HARM.
- FOR BIP, SCREENING MEANS OBTAINING INFORMATION ABOUT WHERE THE PROGRAM PARTICIPANT FALLS IN THE COURT SYSTEM AND IDENTIFYING POTENTIAL OTHER NEEDS
- AN OPPORTUNITY TO OBTAIN EPO/DVO INFORMATION, YOUR COURT OTDERS, AND CRIMINAL HISTORY.
- SCREENING TOOLS MAY INCLUDE SUBSTANCE USE SCREENERS, BEHAVIORAL HEALTH INVENTORIES, AND OTHERS.
- IF OTHER ISSUES ARE IDENTIFIED, THE PARTICIPANT MAY BE SENT FOR FURTHER EVALUATION FOR SUBSTANCE USE OR OTHER MENTAL HEALTH CONCERNS AND YOU WILL BE NOTIFIED IN ACCORDANCE WITH 922 KAR 5:020

https://www.ncbi.nlm.nih.gov/books/NBK64829/

ASSESSMENT AND SURVIVOR CONTACT

- THOUGH NOT REQUIRED BY REGULATION (YET), HAVING A COMPREHENSIVE EVALUATION TOOL IS IMPORTANT.
- KENTUCKY REQUIRES DANGER ASSESSMENT. WE RECOMMEND OUR PROVIDERS TO USE COLORADO'S DOMESTIC VIOLENCE RISK NEEDS ASSESSMENT (DVRNA).
- OTHER DANGER ASSESSMENTS INCLUDE THE CAMPBELL DANGER ASSESSMENT -5 (DA-5) AND DANGER ASSESSMENT TOOL (DA-R)
- DOING APPROPRIATE DANGER ASSESSMENT REQUIRES CONTACT WITH SURVIVORS. OUR PROVIDERS ALWAYS ATTEMPT CONTACT WITH THE SURVIVOR IF IT WOULD NOT INCREASE RISK OF HARM TO THEM.

922 KAR 5:020

SECTION 9. ASSESSMENT AND ADMISSION PROCEDURES.

(1) (A) IF A BATTERER IS DETERMINED TO BE ELIGIBLE FOR A BATTERER INTERVENTION PROGRAM BASED ON ELIGIBILITY CRITERIA ESTABLISHED IN SECTION 8(1)(A) OF THIS ADMINISTRATIVE REGULATION, THE PROVIDER SHALL PERFORM AN ASSESSMENT OF THE BATTERER.

(B) THE ASSESSMENT CONDUCTED IN ACCORDANCE WITH PARAGRAPH (A) OF THIS SUBSECTION SHALL INCLUDE CONSIDERATION OF THE BATTERER'S:

1. HISTORY OF ABUSIVE BEHAVIOR, INCLUDING DEGREE OF HARM AND TYPE OF VIOLENT CONDUCT, THAT MAY INCLUDE INFORMATION PROVIDED BY A VICTIM, REFERRAL SOURCE, OR OTHER INVOLVED PROFESSIONAL;

2. CRIMINAL HISTORY;

3. RISK OF HARM TO SELF AND OTHERS;

4. MEDICAL HISTORY;

5. HISTORY OF A MENTAL DISORDER;

6. CURRENT MENTAL STATUS;

7. HISTORY OR PRESENCE OF A SUBSTANCE ABUSE DISORDER;

8. CHARACTERISTICS AND ABILITY TO BENEFIT FROM THE APPROVED PROGRAM CURRICULUM; AND

9. RELEVANT PUBLIC RECORDS, INCLUDING A POLICE REPORT AND OTHER INFORMATION ABOUT THE BATTERER.

DOMESTIC VIOLENCE RISK NEEDS ASSESSMENT (DVRNA)

PRIOR DOMESTIC VIOLENCE INCIDENTS

DRUGS AND ALCOHOL

MENTAL HEALTH

DOMESTIC VIOLENCE RISK NEEDS ASSESSMENT (DVRNA)

- SUICIDAL/HOMICIDAL IDEATION
- USE OF WEAPONS
- CRIMINAL HISTORY
- OBSESSION

DOMESTIC VIOLENCE RISK NEEDS ASSESSMENT (DVRNA)

SAFETY CONCERNS –DIRECT VICTIM CONTACT/EXPERIENCE

PAST THREATS OF VIOLENCE

ATTITUDES THAT SUPPORT ABUSE

PRIOR DOMESTIC VIOLENCE OR BIP TREATMENT

DOMESTIC VIOLENCE RISK NEEDS ASSESSMENT (DVRNA)

RECENT SEPARATION

UNEMPLOYMENT

INVOLVEMENT WITH PRO-CRIME INFLUENCERS

WHEN DOES CONTACTING A SURVIVOR INCREASE RISK?

- When the survivor and the person who has caused them harm are still cohabitating and are likely to be home at the same time.
- When the survivor is with the person who caused harm. Always ask if they are in a safe place to talk.
- If the survivor tells you not to call.
- If you reasonably suspect the participant may be tracking the survivor's phone calls or if you know it is a shared phone plan where the participant can see the calls.
- If a victim advocate working the case tells you it would put the survivor in danger.

Providers should always document the conversation in a SEPARATE location to the participant's file to keep survivors safe.

RISK ASSESSMENT IS ONGOING

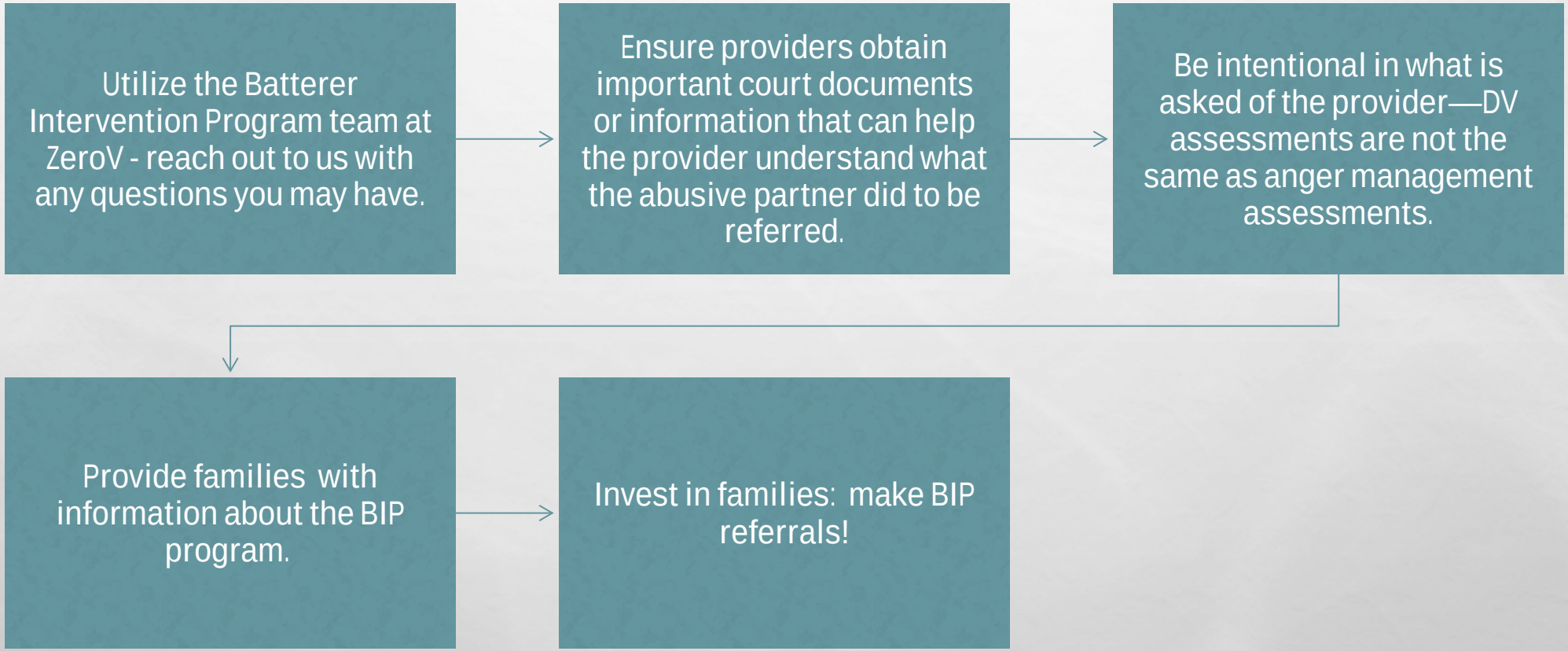
AS PROVIDERS HAVE THE CHANCE TO WORK MORE WITH A PARTICIPANT, MORE MAY BE LEARNED ABOUT THAT PARTICIPANT'S NEEDS OR CONCERNS.

RECOMMENDATIONS MAY CHANGE AS SITUATIONS CHANGE

CLINICIANS MUST MAKE RECOMMENDATIONS IN ACCORDANCE WITH BEST PRACTICE STANDARDS, ETHICAL GUIDELINES, AND THE LAWS THAT GOVERN THEIR PRACTICE.

COURTS MAY NOT ALWAYS EASILY BE ABLE TO ADJUST TO CLINICAL RECOMMENDATIONS OR PROGRAMMATIC EXTENSIONS, BUT IT IS CRUCIAL TO CONSIDER HOW TO USE NEW INFORMATION PROVIDED BY A CLINICIAN.

HOW TO BE PART OF THE COMMUNITY COORDINATED RESPONSE?



ZEROV SURVIVORS OF VIOLENCE.

ZeroV's mission is to abolish the social conditions and systems that spark, enable, and amplify intimate partner violence and to create communities where all Kentuckians can live and thrive in safety and peace.

GET INVOLVED

KRS 209a Referral Informatic
zerov.org/krs_209a
New Chrome available
Image may contai... PSX2PSP ISOs | E... VTS 201 Sources Purdue OWL: APA... Handbook of Addi... Elementary School... UMass Amherst: C... Kentucky Center f... addiction - logo All Bookmarks

KRS 209A LEGAL REQUIREMENTS FOR PROFESSIONALS

KRS 209A mandates that professionals give survivors of domestic and dating violence educational materials related to domestic or dating violence and abuse, including information about how they may access regional domestic violence programs or rape crisis centers, and information about how to access protective orders. The "Help is Here" brochure is provided by ZeroV for professionals to share with survivors to fulfill this obligation. Professionals are encouraged to explore the additional linked pages to learn more about domestic and dating violence and resources available to survivors, and to share this information as appropriate.

KRS209A Quick Sheet

"HELP IS HERE" BROCHURE

- **Standard Brochure Format (English)**
- **Large Print (English)**
- **Arabic**
- **French**
- **Nepali**
- **Pashto (Afghani)**
- **Spanish**
- **Swahili**

KRS 209a Referral Informatic
zerov.org/krs_209a
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- V Spanish
- V Swahili
- V Aida Ramic Bosnian

VICTIM SAFETY AND RIGHTS INFORMATION

- V English
- V Spanish

HOW TO GET A PROTECTIVE ORDER

- V Standard Print
- V Large Print

LEARNING RESOURCES

- V To learn more about intimate partner violence, we recommend reviewing the **learning materials**

REFERENCES

CAMPBELL, JAQUELYN C., WEBSTER, DANIEL W., AND NANCY GLASS. 2009. "THE DANGER ASSESSMENT: VALIDATION OF A LETHALITY RISK ASSESSMENT INSTRUMENT FOR INTIMATE PARTNER FEMICIDE." *JOURNAL OF INTERPERSONAL VIOLENCE* 24(4): 653–674.

CENTER FOR COURT INNOVATION. 2022. *GUIDING PRINCIPLES FOR ENGAGEMENT AND INTERVENTION WITH PEOPLE WHO CAUSE HARM THROUGH INTIMATE PARTNER VIOLENCE.* NEW YORK, NY: FUTURES WITHOUT VIOLENCE.

GRAHAM, LAURIE M., SAHAY, KASHIKA M., RIZO, CYNTHIA F., MESSING, JILL T., AND REBECCA J. MACY. 2021. THE VALIDITY AND RELIABILITY OF AVAILABLE INTIMATE PARTNER HOMICIDE AND REASSAULT RISK ASSESSMENT TOOLS: A SYSTEMATIC REVIEW. TRAUMA, VIOLENCE, AND ABUSE 22(1): 18-40.

MITCHELL, D., & CARBON, S.B. (2002). FIREARMS AND DOMESTIC VIOLENCE: A PRIMER FOR JUDGES. *COURT REVIEW,* SUMMER.

RADATZ, DANA L., RICHARDS, TARA N., MURPHY, CHRISTOPHER M., NITSCH, LISA J. GREEN-MANNING, ANGELIQUE, BROKMEIER, ANN M., AND CHARVONNE N. HOLLIDAY. 2021. "INTEGRATING 'PRINCIPLES OF EFFECTIVE INTERVENTION' INTO DOMESTIC VIOLENCE INTERVENTION PROGRAMS: NEW OPPORTUNITIES FOR CHANGE AND COLLABORATION." *AMERICAN JOURNAL OF CRIMINAL JUSTICE* 46:609-625.

REFERENCES

STOVER, CARLA S. AND KIMBERLY LENT. 2014. “TRAINING AND CERTIFICATION FOR DOMESTIC VIOLENCE SERVICE PROVIDERS: THE NEED FOR A NATIONAL STANDARD CURRICULUM AND TRAINING APPROACH.” *PSYCHOL VIOLENCE* 4(2): 117–127.

TAFT, CASEY T. AND JACQUELYN C. CAMPBELL. 2024. “PROMOTING THE USE OF EVIDENCE-BASED PRACTICE FOR THOSE WHO ENGAGE IN INTIMATE PARTNER VIOLENCE.” *AMERICAN JOURNAL OF PREVENTATIVE MEDICINE* 66(1):189−192.

WILSON RF, LIU G, LYONS BH, PETROSKY E, HARRISON DD, BETZ CJ, & BLAIR JM (2022). SURVEILLANCE FOR VIOLENT DEATHS – NATIONAL VIOLENT DEATH REPORTING SYSTEM, 42 STATES, THE DISTRICT OF COLUMBIA, AND PUERTO RICO, 2019. MORBIDITY AND MORTALITY WEEKLY REPORT. SURVEILLANCE SUMMARIES (WASHINGTON, D.C. : 2002), 71(6), 1–40. 10.15585/MMWR.SS7106A1

WARRIER, SUJATA AND KRISTINE LIZDAS (2022). REIMAGINING COORDINATED COMMUNITY RESPONSE (CCR) BATTERED WOMEN’S JUSTICE PROJECT. HTTPS://BWJP.ORG/WP-CONTENT/UPLOADS/2022/08/CCR_REPORT.PDF