The Allegheny County Department of Human Services reviewed national research, evidence-based practices and local batterer intervention programs as part of a collaborative effort to improve community response to domestic violence. The following is a summary of the findings and a description of resulting activities.

Domestic violence remains a persistent social problem and women's health concern, claiming as its victims an estimated 1.3 million U.S. women each year. Half of women abused by their partners sustain injuries. And, in the case of some 41 percent of abused women, those injuries are serious enough to require medical care.

Changing the behavior of batterers is a key element of a coordinated community-wide approach toward curbing domestic violence and ensuring the safety of its victims, 85 percent of whom are women. Studies suggest, however, that developing effective, high-quality batterer interventions remains a work in progress across the nation, state and Allegheny County, where, in 2011, more than 1,000 batterers were referred to intervention programs by the courts.

The general consensus of research on batterer intervention programs is that they yield modest results, at best. Batterers who attend programs tend to lack the motivation for treatment. Researchers find that programs generally lack empirical support, and the approaches that inform them are less evidence-based than shaped by ideological positions.

Moreover, a significant knowledge gap exists in regard to these programs. A full understanding of the complex set of factors that lead to domestic violence remains elusive. How and why existing programs work or don't work, and whether new approaches are effective, are other questions without clear answers. The importance of closing the knowledge gap is underscored by evidence that suggests that poorly run programs not only fail to achieve intended outcomes, but risk endangering abused women and tend to shelter batterers from accountability.

Pennsylvania is one of 43 states with standards for batterer intervention programs that cover such issues as program philosophy and protocols, assessments, intake procedure, curriculum and discharge criteria. Although Pennsylvania's standards are considered to be among the more thorough, adoption of these standards is voluntary and not consistently applied.

A review of batterer intervention programs in Allegheny County encompassed three programs and evaluated each on approach, curriculum and structure. While all three embraced a psycho-educational perspective, approaches varied from cognitive behavioral therapy with a focus on recognition of irrational beliefs to weekly self-reports and exercises designed to confront individual tactics of abuse and control. Exercise-based classes were the most frequent structure, followed by group counseling.

Individual batterer intervention programs varied in quality; each had strengths and weaknesses. Program completion rates ranged from 11 percent to 95 percent. Common issues across all programs included: lack of oversight and monitoring (leading to uneven quality across programs); outcomes measurement was hampered by inadequate staff capacity, inconsistent data collection and lack of incentives for compliance; interactions and communication between programs and the courts was inconsistent at best; assessments to better identify client need and appropriateness for program participation were not being conducted; and program referrals were made in a subjective and inconsistent manner.

DHS, the Allegheny County Court of Common Pleas, the Allegheny County Jail and the District Attorney's office are taking steps to address such issues and improve the quality, consistency and fidelity of batterer intervention programs. Program criteria were identified as a basis for selecting agencies qualified to provide programming to batterers, including establishing a standardized method for tracking referrals and measuring program outcomes across all programs. The information will offer a better understanding of program issues, such as the relationship between program completion and recidivism. In addition, it will inform stakeholders (ranging from judges to human services caseworkers) and contribute to the coordination of their efforts, which is seen as a critical part of ongoing efforts to improve community response to domestic violence, change the behavior of batterers and ensure the safety of their victims.

Using the results of the review as a guide, a Request for Proposals was issued in January 2013 to identify providers to implement batterer intervention programs in the community and within the Allegheny County Jail; five providers submitted a total of seven responses (five for community-based services and two for programs in the jail). Two of the five providers were identified as "certified" for community-based program implementation; two others were identified as "provisionally certified" (able to provide services but monitored in identified areas of concern). Community-based program implementation began in April. As of the date of this report, one provider has been selected for jail-based programming, and implementation is underway.

Program implementation and monitoring, including data collection/analysis, is being collaboratively managed by DHS, the courts, the District Attorney's office and other community partners.