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# Guiding Principles for Engagement and Intervention with People Who Cause Harm through Intimate Partner Violence

These guiding principles were created as part of the Abusive Partner Accountability and Engagement Training and Technical Assistance Project, an initiative funded by the Office on Violence Against Women. They are designed to inform abusive partner intervention programming (APIP), also known as battering intervention, at all stages of intervention—development, implementation, and evaluation. The goal of the principles is to enhance not only programs but also the broader community response to accountability and engagement for people who cause harm through intimate partner violence (IPV).<sup>1</sup> Equity, in all its forms, is a central component of the guiding principles and is interwoven into the fabric of each interrelated principle.

The guiding principles are meant to be aspirational (i.e., they are rooted in some of the most innovative practices in the field); inspirational (i.e., they outline the basic components that lead to alignment with the principle); and operational; (i.e., they include practice implications that can be incorporated into policies and procedures). This is a living document and will continue to shift as new evidence-informed practices, and practice-based approaches emerge.

## **Definition of Accountability**

Accountability is a process to create pathways to responsibility, healing, hope, transformation, and in some cases restoration, in people who cause harm, systems, and communities. It requires systems and communities to remedy barriers to change, and support people who cause harm to repair the harms caused by IPV.

# Survivor Voices Valued are Centered

IPV causes harm to survivors in many ways: physically, sexually, mentally, emotionally, and economically. Survivors should define safety and healing from IPV. APIPs should collaborate with community-based advocates and survivors to understand and address identified needs. Systems of oppression that perpetuate discrimination and create barriers for marginalized survivors must be consistently and intentionally addressed to be genuinely survivor-centered.

# Practice Implications

Programs should:

- Develop and convene a survivor advisory board with diverse representation, including survivors who access supportive services in the community and those who do not;
- 1. This document uses person-first language to describe people who cause harm through intimate partner violence/coercive control. People who cause harm is used thereafter for readability purposes.

- Meet regularly with community-based advocacy groups regarding issues related to survivor safety;
- Participate in coordinated community response teams, task forces, and/or high-risk management teams to support the diverse needs of survivors;
- Implement robust partner contact and survivor safety protocols and assess these protocols regularly;
- Utilize curricula reviewed by advocates and survivors, and that places survivor safety as its primary goal;
- Incorporate feedback, program design and implementation strategies reviewed and created by survivors and seek this input regularly;
- Invite advocates to observe programming regularly and offer feedback; and
- Create cross-training opportunities for APIP providers and advocates on respective roles, how systems of oppression impact survivors, and how to incorporate culturally-responsive practices.

# Accountability is Personal, Communal, and Systemic

Individuals, communities, and systems all create the environment where IPV occurs and the spaces where those harms can be addressed. People who cause harm are fully responsible for their behaviors and can choose to be accountable and change. Personal change requires an understanding of the root causes of thoughts, beliefs, feelings, and behaviors that harm self and others and an active commitment and practice toward healing and transformation. Interpersonal, communal, and systemic accountability and support can increase the likelihood of a person's choice to heal and change. System and community-based agencies should identify the harms they have created through oppressive practices and policies and remedy these barriers to safety, accountability, and healing for people who cause harm, survivors, and their children.

# Practice Implications

Programs should:

- Work in collaboration with their community partners to facilitate community discussions on the impact of IPV on the community, ways in which the community and systems have allowed harm to continue, and strategies to address harm and promote healing;
- Incorporate activities that are restorative and healing and include reflection on the impact of harm through IPV on the person causing harm, their partner, children, extended family and friends, and the larger community;
- Create opportunities for participants to bring in a community peer to the class to discuss the impact of IPV;
- Allow program observation to ensure transparency to the community; and
- Where appropriate, create opportunities for participants to repair the harm of their behavior through engaging in community advocacy to raise awareness about IPV.

#### Hope and Dignity are Restored

Intervention and engagement strategies should create spaces for transformation, healing, safety, and well-being for people who cause harm. APIPs should collaborate with other community-based agencies to do the same with adult and child survivors. Programs should treat participants with dignity and respect, valuing their commitment to change and transformation. They should provide skill-building and access to wraparound support to address the harm and violence, and help participants develop goals for healthy, non-abusive relationships. Intervention and engagement strategies should recognize participant experiences while including support to heal past trauma and the harms caused by systems of oppression.

#### **Practice Implications**

Programs should:

- Incorporate the science of hope and trauma;
- Create opportunities for change through goal setting, role-playing, and peer-to-peer support;

- Implement anti-oppressive and trauma-informed program facilitation and engagement;
- Incorporate supportive services that address the impact of histories of systemic oppression and allow for healing opportunities that can break the intergenerational impact of oppression on the use of violence;
- Identify additional community resources for supporting participants outside of programming, including resources to support healing and trauma resolution; and
- Engage current and former participants in social justice initiatives to shift community norms.

# Culture and Community are Reflected and Valued

Intervention and engagement strategies need to meet the needs of the diverse populations within their communities and center culture as a critical component of meaningful intervention. Addressing the harms of IPV requires genuine collaboration between system- and communitybased actors to develop strategies resulting in safer and healthier intimate partner, family, peer, and community relationships. To do so, these intervention and engagement strategies should center on the communities they serve and engage their members as experts, develop collaborative wraparound supports, reflect the diversity and intersectionality of participants, practice cultural reverence and humility, and when possible, develop community accountability processes outside formal systems.

# **Practice Implications**

Programs should:

- Partner with local, regional, or national culturally-specific organizations to incorporate cultural values and teachings into curricula that reflect the diversity of your community<sup>2</sup>;
- Partner and compensate organizations that provide culturally specific programming tailored to meet the needs of specific cultural groups;

- Ensure that community members (outside formal systems) are included in coordinated community responses and task forces, and that partners outside the criminal legal system have the opportunity to make referrals to programs;
- Offers a system of sponsorship in which program participants are supported by family or community members, as well as former participants;
- Invite a wide variety of organizations to participate in meetings and coordinate services for program participants, including housing assistance, employment supports, education services, parenting classes, immigration aid, health, mental health, and substance use programming;
- Incorporate practices that address both individual and collective change, transformation, and healing;
- Hire staff and facilitators that mirror the cultures and social locations of the communities you serve; and
- Center the voices of survivors that reflect the social location of participants.

# Interventions and Engagement Strategies Respond to the Needs and Strengths of People Who Cause Harm Through IPV

Since people who cause harm through IPV have different needs, strengths, personal goals, and motivations for using abuse, communities should develop multiple pathways to accountability. Practitioners must acknowledge the nuances and complexities of humanity, understanding that many people who cause harm have been impacted by systems of oppression, may have experienced trauma in their own lives, and have varying levels of risks and access to basic needs. All these factors may influence their use of abuse and/or pathways to change. Engagement and intervention strategies should be traumainformed and person-centered, moving away from one-size-fits-all approaches, addressing the unique needs of participants, and leveraging participants' inherent strengths and goals to effect positive behavior change.

## **Practice Implications**

Programs should:

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- Incorporate trauma-informed, trauma-focused, healing-centered, and restorative approaches;
- Develop peer support and/or post-program programming options for participants who desire continued connection and support;
- Utilize a comprehensive intake assessment for programs to identify the level of risk and needs and consider differential length based on risks and needs;
- Address co-occurring issues like mental health, unemployment, substance use, and parenting after violence, among others;
- Address co-occurring issues like trauma, mental health, unemployment, substance use, and parenting after violence, among others;
- Prioritize strategies for early intervention and prevention of domestic violence; and
- Build strong community-based intervention programs and referral processes to coincide with criminal legal system referral systems.

### **Racial Justice is Centered**

A deep analysis of intersectionality and systems of oppression—particularly racism—is needed to create truly holistic interventions. Survivors and people who cause harm are deeply affected not only by sexism but other types of oppression, including structural and systemic racism. In close collaboration with the community, programs should address the impact of all oppressive systems and not only focus on individual change. They should also embark on self-reflection about how their policies, practices, and alliances may contribute to racial and other types of social injustices and make appropriate corrections.

# Practice Implications

Programs should:

Mandate ongoing training for all staff (not only facilitators) on anti-racism and intersectionality, covering the role of racism and systems of oppression in increasing the prevalence of and inconsistent responses to IPV, and provide ongoing training for community members and stakeholders on similar topics;

- Incorporate lessons on anti-racism, whiteness, and oppression into curricula;
- Implement anti-racist supervision and support practices for staff;
- Regularly reviews policies, practices, and alliances to ensure anti-oppressive practices and invite external reviewers to assist with this process;
- Facilitate ongoing conversations about racial justice with community organizations, and include those working with marginalized populations, including Black Indigenous People of Color (BIPOC), Lesbian Gay Bisexual Transgender Queer Intersex, Asexual, and Gender Nonconforming (LGBTQIAGNC)+ people, and people who experience disabilities, among others; and
- Engage in social justice advocacy to transform communities and systems.

### Self-Reflection is Prioritized

Facilitating a healing, growth, and accountability process for others is only possible as an extension of the facilitators' exploration of those factors in their own lives. Everyone is impacted by systems of oppression—white supremacy, heteropatriarchy, settler colonialism, ableism, classism-as well as their own personal experiences of trauma, and everyone can cause harm. These factors prevent one's capacity to be present for others in ways that promote healing and transformation. Facilitators, agency leadership, and system stakeholders must engage in ongoing self-reflection to understand and acknowledge their privilege and power, actively work to dismantle systems of oppression, and take accountability for harm caused in their own lives and within their fields of practice. This breaks down the us vs. them dichotomy that separates anti-IPV professionals from participants and provides a model of self-reflection and accountability for participants and the broader community.

#### **Practice Implications** Programs should:

 Encourage staff to join abusive partner intervention programming as participants before becoming facilitators and encourage stakeholders to observe and/or join programming as well;

- Require training on anti-racist and antioppressive practices for all staff and stakeholders in your community;
- Identify reflection, evaluation, and accountability processes as an organization;
- Create spaces where staff and stakeholders can engage in introspection and maintain self-awareness about power, privilege, and oppression;
- Develop an evaluation and accountability process for facilitators that includes peer review and participant feedback; and
- Provide facilitation supervision with an equity lens.

#### For More Information

With the support of the U.S. Department of Justice's Office on Violence Against Women, and in collaboration with Futures Without Violence and a multi-disciplinary team of national experts, the Center for Court Innovation's Abusive Partner Accountability and Engagement Training and Technical Assistance is designed to help jurisdictions undertaking a comprehen-sive review of current approaches to domestic violence offender accountability and engage-ment.

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### Visit our clearinghouse:

courtinnovation.org/abusive-partner-resources

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