IPV Intervention Research

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Interventions for IPV-What We Know

- Mandatory arrest deters IPV in the short term (Maxwell, Garner & Fagan, 2001)
- Batterer intervention programs have a small impact on IPV recidivism and are more effective for men who are employed
- One size fits all Batterer intervention is not effective (Babcock, Green, & Robie, 2004; Feder & Wilson, 2005)

What We Know Continued

- Co-occurrence of IPV and substance abuse is about 50%
- substance use facilitates violence
- Co-occurrence of IPV and child maltreatment
- Interventions that target intersection of substance use and IPV show promise
- Ignoring the complexity of the issues does not work

What We Know Continued

- Coordinated approaches (police, mental health, advocacy) are effective at engaging victims and encouraging use of police for IPV (Stover et al. 2010)
- There is evidence of different types of IPV requiring differential responses
  - Co-occurring IPV and substance abuse
    - SADV (Easton et al, 2007) BCT (O'Farrell & Fals-Stewart)
  - Situational/mutual violence (Stith, McCollum & Rosen, 2011)
  - Power/control
  - Intimate Terrorism

- There are effective clinical interventions to help victims of IPV (direct victims and child witnesses)
  - Cognitive Processing Therapy (Resick)
  - Trauma Focused CBT (Cohen, Mannarino & Deblinger)
  - Child-Parent Psychotherapy (Lieberman & Van Horn)
  - Simultaneous group treatments for mothers and children (Graham-Berman)

Intervention Development

- Studies that assess a family system rather than one member (e.g. victim, perpetrator, child witness)
  - Design, implement and test interventions based on family needs rather than one size fits all
- Targeting substance abuse treatment programs since approximately 50% of their clients endorse IPV in the last year
- Group versus Individual approaches
- Coordination of Law-Enforcement, child protection and mental health

Barriers to Intimate Partner Violence Research

- SILOS!!
  - by discipline, specialty, funding source
- Lack of cross disciplinary community of scientists that are easily identifiable
- Fear-if we ask, we have to do something
  - Child protection reporting
  - If a program doesn't show efficacy it will lose funding
- Ethics
  - Safety
  - IRBs
  - Offering "control" conditions
  - Accuracy of reporting

- Methodology
  - How do we define, measure, and track IPV
  - Need an intermediate measure of IPV risk that doesn't rely on victim or perpetrator self report or police records
- Policy
  - State policies, laws, funding for interventions may limit testing new approaches to IPV intervention
- Research findings are not disseminated and adopted!!

Areas of needed research

- Development and testing of new measures of risk for violence that are not dependent on self reporting
- Testing new approaches to intervention that are coordinated across service systems
- Assessment of client satisfaction, how were services helpful, unhelpful, did they target their needs wishes?
- Dissemination science related to IPV interventions and practices