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Running head: PREDICTORS OF RECIDIVISM

Prediction of Recidivism from Batterer Characteristics and Prior Arrest Records Denise Ukleja

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Abstract

A variety of batterer characteristics, such as witnessing parental violence as a child, alcohol/drug use, and a prior legal history, have been found to be correlated with domestic violence. Initial research on recidivism has also suggested that these characteristics are correlated with recidivism and, thus, may be used as possible predictor variables. This study explored the relationship between a number of batterer characteristics and recidivism within a sample of batterers involved in a domestic violence treatment program. Of the psychosocial variables explored as possible predictors, only witnessing of parental violence as a child was a significant predictor. In addition, analyses conducted between the recidivists and non-recidivists only found marital status to be significantly different between the two groups.

Prediction of Recidivism from Batterer Characteristics and Prior Arrest Records

Domestic violence is a significant problem in the United States today. Violence between partners is estimated to occur annually in 1 out of 6 households (Straus & Gelles, 1986). Domestic violence has been defined in many ways. In a very general sense, however, most agree that domestic violence refers to an act of aggression toward someone with whom one lives (Feldman and Ridley, 1995).

Only recently has the public begun to consider abuse of one's significant other as a crime (Roy, 1977; Snyder& Fruchtman, 1981). As the number of domestic violence related cases increases each year, communities are beginning to look at the effectiveness of various intervention strategies. Intervention effectiveness is often measured by assessing recidivism rates (Feldman & Ridley, 1995). Recidivism, in this field of research, is most commonly defined as any repeat domestic violence related offense (DeMaris, and Jackson, 1987; Hirschel, Hutchinson, and Dean, 1992; Syers and Edelson, 1992; Tolman and Weisz, 1995). Although there has been a great deal of research focusing on common batterer characteristics, research on the relation of these to recidivism is scarce. A few studies, however, have explored whether recidivism can be predicted from batterer characteristics, such as: a history of past legal involvement, the witnessing of parental violence as a child, and alcohol/drug usage (DeMaris and Jackson, 1987; Syers and Edelson, 1992). If it can be established that certain variables are indeed correlated with recidivism, it may be possible to tailor treatment programs to better address the specific issues at hand for these individuals.

The current study attempted to provide further information regarding whether or not any of the variables that have been found to be correlated with domestic violence can be used as predictor variables for recidivism. A variety of descriptive and past history variables, including chemical dependency, the exposure to parental violence as a child, psychopathology, family distress, legal history and gender were investigated. In an

attempt to address some of the limitations of previous research, the present study used public legal records in addition to self-report data.

The following sections provide a summary of characteristics that have been found to be correlated with domestic violence and are currently being explored as possible predictors of recidivism. The role of intervention in recidivism is also outlined, with specific focus on the role of batterer treatment programs.

Common Batterer Characteristics and Potential Predictor Variables for Recidivism

Much of the research on batterer characteristics has focused on the exploration of possible shared characteristics within the population of batterers as a whole (Gelles, Lackner and Wolfner, 1994; Gondolf, 1988; Hastings and Hamberger, 1988; Howell and Pugliesi, 1988; Roberts, 1987; Saunders, 1992; Tolman and Bennett, 1990). Currently, however, these characteristics are being explored in relation to recidivism to see if they can be used as predictors of domestic violence (DeMaris & Jackson, 1987; Hamberger and Hastings, 1990; Shepard, 1992).

Witness of Family Violence as Children:

Several studies have found that batterers were more likely to report having been subjected to domestic violence as children (Howell and Pugliesi, 1988; Saunders, 1992). A review of the research by Tolman and Bennett (1990) found that an estimated 24-81% of batterers were exposed to violence in their homes as children. A second review by Feldman and Ridley (1995) revealed that the mean percentage of batterers who witnessed domestic violence as a child may actually be higher at 60%-80%. A possible explanation for this potentially high percentage is that exposure to violence at an early age may provide an acceptable role-model to children and promote the view that physical outbursts are an acceptable outlet (Feldman and Ridley, 1995).

Recidivism studies have also found a correlation between exposure to parental violence as a child and repeat domestic violence offenses (DeMaris & Jackson, 1987). DeMaris and Jackson (1987) found that the men in their sample who had witnessed

parental violence had recidivism rates more than twice as high as those who did not. In addition, Shepard (1992) found that being a child abuse victim, when combined with other variables, helped to predict recidivist vs. non-recidivist classification.

Chemical Dependency

Alcohol consumption and drug usage by batterers has also been found to be correlated with domestic violence (Feldman and Ridley, 1995; Hastings and Hamberger, 1988; Saunders, 1992; Tolman and Bennett, 1990). A mean percentage of chronic alcohol use amongst batterers across 13 studies was calculated to be 60% (Saunders, 1992). However, binge drinking is considered by some to be an even more dangerous situation, resulting in the highest rate of domestic violence (Gelles, Lackner, & Wolfner, 1994). Tolman and Bennett (1990), however, found that although acute alcohol problems were implicated in a greater number of domestic violence cases, chronic alcohol usage seemed to be a better predictor of spousal violence. Initial studies on recidivism have found that batterers defined with having an alcohol problem where twice as likely to be recidivistic, whereas drug usage was not implicated in recidivism (DeMaris & Jackson, 1987). Similarly, Shepard (1992) found that being involved in chemical dependency treatment and being ordered for a chemical dependency evaluation are two of the strongest predictors of recidivism.

Criminal History:

One of the most frequently found correlates of domestic violence is a history of past criminal charges for non-violent offenses (Gelles and Straus, 1988; Gondolf, 1988; Saunders, 1992). Although all batterers do not have a criminal record, a study by Roberts (1987) found that 60% of his sample had prior felony or misdemeanor charges against them. Another study that provides supportive data, found that batterers committing the most severe assaults on their partners were more likely to have prior records than the controls (Tolman and Bennett, 1990). In contrast, however, both

Shepard (1992) and DeMaris and Jackson (1987) did not find a history of prior nonviolent offenses to predict recidivism.

It is also being suggested that a history of specifically violent charges may be a predictor of recidivism. Straus, Gelles, and Steinmetz (1980) estimate that about two thirds of the males that batterer once will repeat the offense within one year. Chen, Bernsani, Myers, and Denton (1989) also found that having a large number of prior violent charges is strongly correlated with recidivism

Psychopathology

Studies on the possible psychopathology of batterers have been inconclusive (Tolman & Bennett, 1990). For example, Hastings and Hamberger (1985) found that most of their sample of 105 batterers met the criteria for diagnosis of some type of personality disorder. Similarly, Hotaling and Sugarman (1986), found a profile of batterers similar in many ways to clinical descriptions of males with borderline or antisocial personality disorders. However, Faulkner (1988), found that his sample of batterers' scores on measures of psychopathology were not elevated. No empirical studies exploring the correlation between psychopathology and recidivism were located.

Environmental Factors and Stress

A number of environmental stressors have also been found to be correlated with domestic violence (Berry, 1995; Feldman & Ridley, 1995; Hastings & Hamberger, 1988; Howell and Pugliesi, 1988). Batterers have been found to have lower socioeconomic status and lower levels of education than non-batterers (Berry, 1995) On a related note, Hastings and Hamberger (1988) reported that batterers in their sample had a higher tendency to be unemployed. Research has also suggested that batterers tend to be more depressed, have a poorer self-image and higher stress levels than non-batterers (Berry, 1995). Following from these lines, it can also be hypothesized that stress resulting from problems in the family can also lead to violence. No empirical studies exploring the correlation between these environmental factors and recidivism were located.

Gender

Gender is a variable that has been overlooked in much of the domestic violence research (Bogaerts, 1997). A possible explanation for this is that a large majority of arrested batterers are male (Bourg & Stock, 1994). General population studies, however, have found that there is little overall difference in reports of violence rates between men and women (Straus, 1980). In support of this, Bogaerts (1997) found that there were no significant differences between male and female batterers on a number of different variables, such as the witnessing of parental violence as a child, psychopathology, history of violent crimes, and the degree if violence used. The relationship between gender and recidivism, however, has not yet been explored.

Intervention and Its Role in Recidivism

Recidivism is a commonly used measure of the effectiveness of various intervention attempts within the community (Feldman and Ridley, 1995). It is hypothesized that an effective program should result in a decrease in recidivism within the community following its implementation (Feldman and Ridley, 1995). Communities have adopted a variety of different intervention strategies in an attempt to decrease recidivism, but evaluation of the three most common intervention strategies (pro-arrest policies, pro-prosecution policies, and batterer treatment programs) has led to inconclusive results.

Pro-Arrest Policies

Early studies on the effectiveness of pro-arrest policies provided encouraging results suggesting that pro-arrest policies may indeed result in lower recidivism rates within the community (Sherman and Berk, 1984). Follow-up studies, however, have found pro-arrest policies to be a no better deterrent of domestic violence than other methods, such as pro-prosecution policies and batterer treatment programs (Dunford, 1990; Hirschel, Hutchinson and Dean, 1992).

Pro-Prosecution

Pro-prosecution studies, wherein communities have implemented stringent post-arrest sanctions (e.g., being put in jail, having to go before a judge, having to pay fines) have found similar inconsistent results. For example, Ford and Regoli (1992) found that recidivism rates were 50% lower when prosecution of any sort was implemented. Steinman (1988), however, found that post-arrest sanctions had little effect on recidivism rates.

Combined Approaches

As a result of these inconsistencies, communities have turned to more integrated approaches combining arrest, prosecution, and mandating offenders to batterer treatment programs (Syers and Edelson, 1992; Tolman and Weisz, 1995). The initial research on the effectiveness of such programs has been promising (Tolman and Weisz, 1995). A study by Syers and Edelson (1992), found that at 12 months post-treatment completion, batterers who were arrested and mandated to treatment showed significantly lower recidivism rates (20%) as opposed to those who were not arrested (39.2%) and those who were arrested but were not mandated to treatment (48.9%). Chen et al. (1989), however, found that recidivism rates were only lower when batterers completed at least 75% of the treatment sessions. Other studies, however, have found that treatment completion may not be a factor in recidivism (Edelson & Grusznski, 1988; Hastings & Hamberger, 1988).

Two Main Limitations in Predicting Recidivism

Data Source

A majority of the studies on recidivism have gathered self-report and victim-report data to determine recidivism rates (Feldman & Ridley, 1995). The problem with this type of data is that it is sometimes subjectively influenced and often difficult to collect. A review article by Feldman and Ridley (1995) indicated that recidivism rates varied according to data source, with 40% recidivism being reported from the police-

report data compared to 24% from self-report, and 34% from victim-report. It is hypothesized that victim and self-report data may be somewhat unreliable due to the subjectivity of the participants, as well as tendencies to interpret recidivism differently than the police/legal systems interpretations (Feldman and Ridley, 1995). In an attempt to address this problem, this study will utilize police-report data as a relatively objective measure of recidivism rates.

Gender Bias

The research to date has also been focused solely on male batterers. This tendency is most likely due to the fact that the majority of reported domestic violence related incidents involve a male perpetrator and a female victim. However, it has been hypothesized that the extremely low percentage of female batterers is unrepresentative (Straus, 1980). For example, Straus (1980) found that there is little difference between husbands and wives in overall violence rates in a national survey. Bogaerts (1997) also found that female batterers did not differ significantly from male batterers on a number of different variables, such as the witnessing of parental violence as a child, family distress, and the degree of abuse. No research to date has been found exploring the effectiveness of batterer treatment programs for women. Following from this, it would be interesting to see if this lack of difference between the sexes would still remain across recidivism rates.

Current Research

The present study investigated whether certain batterer characteristics, could be used as predictors for recidivism in a sample of batterers residing in a community that used a combined prosecution approach to domestic violence. It was hypothesized that the psychosocial variables information from the self-report data collected during the assessment at the screening agency for the batterer treatment programs could be used to help predict recidivism.

More specifically, I hypothesized that the following variables would combine to predict recidivism: (1) criminal history, (2) witnessing of parental violence as a child, (3) chemical dependency, (4) psychopathology, and (5) family distress. The relationship between prior domestic violence reports, demographic variables, and recidivism was also explored. In addition, an exploratory analysis was also conducted to further explore the possible relationship between gender and recidivism.

Method

Participants

This study utilized a sample of 102 participants, developed and used in previous domestic violence research projects (Bogaerts, 1997; Sprowl, 1997). This initial sample included 75 male and 27 female batterers who are or were enrolled in a batterer treatment and screening program in a moderately-sized Midwestern town. Two inclusion criteria were used for the current study: (1) participants had to have completed the assessment at the screening agency, and (2) had at least 12 months follow-up data. As a result, 11 participants were dropped from the sample before any statistical analyses were conducted. Three participants were known to have moved from the area; one was deceased; one did not complete the assessment; one file was not available for review; and five participants did not meet the time requirements for follow-up.

Of the remaining 91 participants, 76% ($\underline{n} = 69$), were male and 24% ($\underline{n} = 22$) were female. The mean age of the participants at the time of assessment was 33 years, with a range of 17-60 years. Of the participants, 74% ($\underline{n} = 67$) were Caucasian, 25% ($\underline{n} = 23$) were African American, and 1% ($\underline{n} = 1$) were of other ethnicity. Ninety two percent ($\underline{n} = 84$) of the individuals in the sample had been court-mandated to treatment, 7% ($\underline{n} = 6$) were there voluntarily, and 1% ($\underline{n} = 1$) was involved as a result of a mixed condition.

Of the sample of 91 assessment completers, a sub-sample of 52 <u>treatment</u> completers was identified. These individuals had completed 100% of their required

treatment and also had 6 months of post-treatment data. This sample of participants showed a similar profile to the larger assessment completer sample with regard to gender, age, ethnicity and referral condition to treatment. Eighty three percent of the treatment completers ($\underline{n} = 43$) were male, and 17% ($\underline{n} = 9$) were female. The mean age of the participants at the time of the assessment was 34 years, with a range of 19-60 years. In the sub-sample, 79% ($\underline{n} = 41$) of the participants were Caucasian, 19% ($\underline{n} = 10$) were African American, and 2% ($\underline{n} = 1$) were of other ethnicity. Of these participants, 90% ($\underline{n} = 47$) were court-mandated to treatment, and 10% ($\underline{n} = 5$) were involved on a voluntary basis.

Procedures and Measures

Data for this study were collected in three ways. First, the existing database developed by Bogaerts (1997) and Sprowl (1997) was used. This database consisted of assessment information on each individual participant, gathered from individual client files at a screening agency for batterer treatment programs in a moderately-sized Midwestern community. Secondly, additional data regarding treatment completion was collected from these client files specifically for this study. Thirdly, information form police reports, regarding present and prior criminal offenses was gathered from a database at the State's Attorney's Office.

Measures of batterer characteristics. The information used regarding batterer characteristics was self-reported and collected during an open interview assessment at the screening agency and summarized numerically in the database developed by Bogaerts (1997) and Sprowl (1997). Five numerical scales condensed and simplified the data from the assessment:

- (1) witnessing or being exposed to childhood violence (e.g., "Did you ever witness a family member threaten another when you were a child?" and "Were you ever hit with an object as a child?")
- (2) alcohol/drug use of the participant (e.g., "Have you ever been in chemical

- dependency treatment?" and "How often do you use alcohol?")
- (3) legal history of the participant (e.g., "Were you previously arrested for assault?" and "Are you currently on probation?")
- (4) psychiatric history of the participant (e.g., "Have you ever taken psychotropic medication?" and "Are you currently going to counseling?")
- (5) family distress (e.g., "What is the current quality of the relationship you have with your mother?" and "What is the quality of the relationship between your parents?") (Sprowl, 1997).

This assessment data was analyzed in an attempt to explore whether any of the variables could be used as predictors for recidivism.

Measures of treatment participation. Additional information for each participant was gathered specifically for this study from the client files at the treatment program. This data was coded by subject number and then added to the database. The new information included: the date the assessment began, the number of sessions required to complete the assessment, the date the assessment was completed, when and to which treatment program the subject was referred to, the number of treatment sessions completed, the number of possible treatment sessions, and the date of treatment completion.

Legal charges and recidivism. Additional data for this study was also collected from a computer database at the State's Attorney's office in the Midwestern community. This database included all charged police reports involving the client as the perpetrator (excluding those for traffic violations). Reports had been entered into this database monthly since approximately 1993. All non-traffic related charges that had been filed against each participant were gathered from this database from two years prior to the assessment start date through 12 months after the assessment completion, and/or 6 months following treatment completion. These charges were coded according to offense type and date.

Four separate offense type groupings were formed to help simplify coding: "domestic violence", "general violence", "destructive/intrusive behavior", and "other offenses". Offenses coded as "Domestic Violence" included charges of violence in which a domestic relationship existed, such as domestic battery and violations of orders of protection. "Generally violent" incidents included those of a violent nature, in which no domestic relationship was indicated on the police report. These included offenses such as aggravated battery and assault. "Destructive/intrusive behavior" offenses included those such as home invasion and telephone harassment, in which no domestic relationship was identified. "Other offenses" included any offense (excluding traffic violations) that did not fall into any of the above mentioned categories (i.e., possession of drug paraphernalia, theft, and forgery).

This legal history data was coded incident by incident and then summarized for three time periods. First, offenses that occurred between the assessment start date and 2 years prior were coded as Pre-Assessment incidents. Secondly, incidents that occurred between the start and completion of the assessment were coded as During-Assessment incidents. Lastly, Recidivism incidents were those that occurred following either assessment or treatment completion as described below.

Recidivism for the assessment completer sample was defined as any incident of domestic violence that occurred between the completion of the assessment and 12 months following this. Recidivism for the treatment completer sub-sample was defined as any incident of domestic violence that occurred between the date of completion of treatment and 6 months following this. These operational definitions of recidivism can be considered quite conservative, as two stringent criteria had to be met before an incident was considered to be recidivistic: (1) charges had been brought (and not simply filed) by the State's Attorney's Office and (2) the incident was specifically charged as "Domestic Violence" because a domestic relationship was identified.

In addition, a more liberal measure of recidivism was also defined for this research. In the liberal definition, recidivism was defined as any charge brought for a violent offense, regardless of whether or not a domestic relationship was identified. This alternate operational definition of recidivism was included in an attempt to account for the possibility of incidents being coded as "general violence" when in fact a domestic relationship did exist, but was not identified (i.e., a charge being filed as "battery" when the attack involved a significant other).

Results

Assessment Completers

General description of prior legal involvement. Previous legal involvement was first explored within the entire sample of assessment completers. Table 1 depicts a summary of offenses during the Pre-Assessment period (i.e., 2 years prior to the start of assessment). Of the 91 participants, 87% ($\underline{n} = 79$) had at least one "domestic violence" incident in the "pre" time period, and 21% ($\underline{n} = 19$) of the participants had two or more such incidents. Only 13% ($\underline{n} = 12$) of the participants did not have any Pre-Assessment domestically violent incidents. It is also important to note that in the Pre-Assessment period, 9% ($\underline{n} = 8$) of the participants had charges brought for a "generally violent" incident. In addition, 2% of the participants ($\underline{n} = 2$) were charged with "destructive/intrusive" offenses, and 13% ($\underline{n} = 12$) were charged with at least one incident in the "other" category.

Table 2 includes a summary of the incidents that occurred between the start date of the assessment and the date of its completion (i.e., "During-Assessment" charges). These charges can also be considered as legal history because they occurred before any treatment intervention had begun. A smaller number of the sample were charged with "domestic violence" during the assessment, with only 5% (n = 5) of the participants having at least one such offense. No participants were charged with "general violence"

or "destructive/intrusive" offenses during this assessment period, but 2% of the participants ($\underline{n} = 2$) were charged with an offense labeled as "other".

Recidivism. Using the conservative measure of recidivism, which included only those incidents specifically charged as "domestic violence," the recidivism rate for the sample was 13% ($\underline{n} = 12$). An additional 5 participants had incidents of "general violence" during this time period. Using the liberal definition of recidivism, which included charges for any violent offense (i.e., "domestic violence" and "general violence"), these 5 participants were included as recidivists, and hence, the recidivism rate increased to 19% ($\underline{n} = 17$). Of the 13 % ($\underline{n} = 12$) of the sample that had incidents coded as "domestic violence," only one participant had 2 such incidents; and of the 5% $(\underline{n} = 5)$ who had incidents of "general violence," none had multiple incidents. (None of the participants had both "domestic violence" and "general violence" incidents.)

A demographic analysis of the 12 conservatively defined recidivists reveals that they are fairly similar to the sample of non-recidivists. Table 3 provides a comparison of recidivists compared to non-recidivists on the following demographic variables: age, gender, race, entry status into treatment, employment and marital status. The groups did not differ significantly on t-tests or Chi-squares at the 0.05 level for age, gender, race, entry status, and employment. A chi-square for marital status, however, did reveal a significant difference between the groups, with a higher number of the recidivists being divorced or separated $\chi^2(3, N = 91) = 11.752, p \le 0.01$.

Table 4 provides a summary of the means and ranges for Pre-Assessment charges for the 12 recidivists (as conservatively defined) compared to the means of the nonrecidivists. T-tests of the means revealed that there was no significant difference between recidivists and non-recidivists on any of the charge types during the Pre-Assessment time period.

A multiple regression was also conducted to explore whether any psychosocial variables from the assessment could be used to successfully predict recidivism within this sample. Each participant's self-reported history of witnessing or being exposed to childhood violence, alcohol/drug history, criminal history, history of family distress, and psychopathology were entered into the regression. Results indicated that the 5 variables accounted for only a marginally significant proportion ($R^2 = 0.097$) of the variance in recidivism, F(5,90) = 1.93, $p \le 0.10$. Of the variables entered into the regression, only childhood violence was significant, beta = 0.31, t(1,90) = 2.74, $p \le 0.01$. A multiple regression was also conducted using the more liberal definition of recidivism ($\underline{n} = 17$ recidivists). This regression, however, did not account for a significant proportion of the variance ($R^2 = 0.045$) in the sample, F(5,85) = 0.551, $p \ge 0.10$.

Recidivism of Treatment Completers

Of the 91 assessment completers, 52 participants completed their treatment programs and had at least six months of follow-up data. Additional analyses were conducted specifically on this group of treatment completers. Of these participants, 6% (n = 3) were recidivistic because they were charged with "domestic violence" after treatment completion. None of the participants were charged with "general violence" after treatment, thus, the liberal and conservative measures of recidivism yield the same results. Because there were only three recidivists in this sub-sample, a regression analysis was not computed, due to insufficient sample size and resulting lack of statistical power. Instead, descriptive data on the three recidivists is provided below, with comparisons to the measures of central tendency for the non-recidivists.

Table 5 depicts a summary of demographic information for the recidivists compared to the non-recidivists. Although the mean age of both samples was similar ($\underline{\mathbf{M}}$ = 35 vs. $\underline{\mathbf{M}}$ = 33), the samples varied slightly in regard to gender, race, employment status, and marital status. Overall, the sub-sample of recidivists is more homogenous than that of the non-recidivists, with all 3 of the treatment completer recidivists being male, Caucasian, and court-mandated to treatment. Table 5 provides a detailed summary

of the means of the recidivists compared to that of the non-recidivists on age, gender, race, entry status into treatment, employment and marital status.

Table 6 provides the mean Pre-Assessment legal charges for recidivists compared to the non-recidivists. It is interesting to note that the mean legal charges in the Pre-Assessment time period for "domestic violence" was lower for the recidivists as compared to the non-recidivists ($\underline{M} = 0.68 \text{ vs. } \underline{M} = 1.39$). Pre-Assessment incidents of "general violence", "destructive/intrusive" and "other" offenses were also lower for the recidivists in this sample.

Table 7 compares recidivism and non-recidivism z-scores for the five major psychosocial variables from the assessment. No statistical analyses were conducted between these samples due to the small sample size of recidivists. An exploratory analysis, however, revealed that for the variable of "witnessing childhood violence", the recidivists all had z-scores that were higher than the mean for the non-recidivists, with 1 recidivist scoring one standard deviation above the mean, and 2 recidivists scoring two standard deviations above the mean. This finding remained consistent with the finding from the multiple regression on the assessment completers, which indicated that the recidivists were more likely to have witnessed parental violence as a child.

Discussion

The current study attempted to add to the limited knowledge about domestic violence recidivism within a community that had adopted a combined prosecution approach to domestic violence. Previous literature has found that recidivism rates vary according to the type of report data used, with self-report data resulting in the lowest reported recidivism rates, victim-report data resulting in moderate rates, and policereports resulting in the highest reported rates (Feldman and Ridley, 1995). As a result, police-report data that had been screened by the State's Attorney's office and then charged, was used in this study in an attempt to get the most accurate recidivism rates

possible. This study also included female batterers in the sample to explore whether or not a gender difference would emerge in regard to recidivism.

In previous research, recidivism has been explored primarily in communities that had a pro-arrest policy to domestic violence(Feldman & Ridley, 1995). A review of these studies by Feldman and Ridley (1995) reported that the recidivism rates ranged from 24% to 80%. Recidivism rates in the current study (as defined three ways), ranged from 6%-19%. Although it is possible the sample used in this study is truly less recidivistic than those used in other studies, the discrepancy may be explained via problems with this data set. For example, Feldman and Ridley (1995) suggested a minimum post-treatment follow-up period for recidivism of 12 months. In comparison, this study only implemented a 6 month post-treatment follow-up and a 12 month postassessment follow-up. It is therefore possible that the sample used in the current study might have shown higher recidivism rates, given a longer post-treatment time period.

Another potential explanation for the relatively low recidivism rates centers on the operational definition of recidivism. Recidivism was defined in this study as "incidents in which charges were brought and filed by the State's Attorney's Office". Although it was originally hypothesized that this definition of recidivism would yield the most conservative and certain rate of recidivism, it can also be argued that this definition is too constrictive and does not truly illustrate the actual rates of recidivism. Because of this operational definition, the true recidivism rate within the sample may be higher because filed reports are dropped if there is not enough evidence to charge.

Other limitations, outside of the control of the experimenter, may also have contributed to these low recidivism rates. For example, it is possible that many acts of domestic violence were not reported to the police. Any and all such incidents were not represented in this study. As a result, it is probable that the actual recidivism rate in this community is much higher than that found in this study. In addition, it is nearly impossible to follow individuals for recidivism if they have moved to another county, are in jail, or if they have changed their names. As a result of these limitations, the recidivism rate within the population may look relatively small, when in fact it is not.

In lieu of these proposed explanations for the low recidivism rates found in this study, it is also important to present the possibility that the rates are not due to any of the aforementioned limitations. As previously stated, this study used a sample of batterers from a community that had adopted a combined prosecution approach to domestic violence. Such an approach combines pro-arrest and prosecution policies with the mandating of batterers to treatment. This type of approach is relatively new, and only one study was found that explored recidivism rates within this type of community (Svers and Edelson, 1992). Syers and Edelson found a recidivism rate of 20% when such a program was implemented. The low rates of recidivism found in the current study seem to support the findings of this previous research. As a result, an alternative explanation for the low recidivism rates found in this study may be that the combined approach is working in this community and may be more effective than pro-arrest policies alone. Before accepting this proposed explanation, however, additional research should be done in this community with a longer follow-up time period for recidivism and a larger sample size.

In addition to recidivism rates, a variety of psychosocial, demographic, and legal history variables were explored in an attempt to see if any could be used as possible predictors for recidivism. A major hypothesis of this study was that the psychosocial variables from the assessment data, would combine to predict recidivism. The current study did not fully support this hypothesis, but a trend towards significance was identified, suggesting that these variables could possibly be correlated with recidivism.

Of the five psychosocial variables explored (alcohol/drug use, criminal legal history, witnessing childhood violence, family distress, and psychiatric history), only witnessing childhood violence was a significant predictor of recidivism. Although an analysis of the five variables was only conducted for the sample of assessment

completers, an exploratory analysis of the treatment completers suggests that witnessing childhood violence may be a predictor for recidivism within this group as well. These finding provide additional support to the existing research on recidivism that has found recidivists more likely to have witnessed parental violence as children (DeMaris & Jackson, 1987; Shepard, 1992).

Although this study did find one of the psychosocial variables to be a potential predictor for recidivism, the other variables listed above were not found to be predictors, as suggested by previous research (DeMaris & Jackson, 1987; Shepard, 1992). The failure of this study to replicate these results may be the result of weak sub-scale measures used for each of the psychosocial variables. Information collected during an assessment interview with the batterer treatment program screening agency was used in the development of these sub-scales (Sprowl, 1997). This information from the assessment was self-reported and subjective. As a result, the sub-scales developed have not been tested for validity or reliability. More objective measures that have been found to be valid and reliable could be used in future research in an attempt to address this potential limitation.

In addition to the psychosocial variables listed above, research on recidivism has suggested that a history of violent charges may also be a predictor for recidivism (Chen et. al., 1989; Roberts, 1987; Shepard, 1992). Research in this area, however, has been inconclusive, with some studies finding prior history of violence to be correlated with recidivism (Chen et. al., 1989, Roberts 1987; Straus, 1992) and others finding no such correlation (DeMaris and Jackson, 1987; Shepard, 1992). As a result of these inconsistencies, prior legal offenses for violence were explored in this research. It was hypothesized that a legal history of violence would be a predictor of recidivism. This hypothesis was only partially supported. In support of the inconsistencies that already exist in the literature, this study found the assessment completer recidivists to have higher means scores of legal history for "domestic violence" than the non-recidivists, and the treatment completer recidivists to have legal history means for "domestic violence" that were lower than the non-recidivists. The results of this study, in addition to the inconsistencies in the previous literature, suggest that a prior history of legal charges for violence may not be a reliable predictor of recidivism.

An additional secondary hypothesis of this study was that demographic variables could be used to differentiate between the recidivists and non-recidivists. Analyses conducted on the assessment completer group revealed that the recidivists did not differ significantly from the non-recidivists in regard to age, race, entry status into treatment, or employment. In addition, no gender difference was found in regard to recidivism. The only demographic variable that was significantly different between the recidivists and non-recidivists was marital status, with recidivists being more likely to be divorced or separated, and non-recidivists being more likely to be single. Exploratory analyses conducted on these same demographic variables for the group of treatment completers revealed that they were very much like the assessment completer group, in that there was little difference between the recidivists and non-recidivists on any of the demographic variables.

Although this study attempted to address some of the limitations of previous research by using police report data and including female batterers in the sample, the follow-up time for recidivism was short and the number of recidivists was small. As a result, I would recommend caution in interpreting the results of this study.

Several recommendations can be made for future studies in this area. For example, future research should implement a longer post-treatment time period in which to measure recidivism. The overall sample size used could also be increased, thereby increasing statistical power in the analyses. The combination of demographics, psychosocial variables and legal history data could also be combined in the analyses to see if these variables together can predict recidivism. Finally, I suggest the usage of both

police report and victim report data in an attempt to get the most accurate report of recidivism rates.

Although several potential limitations have been identified in this study, the results found may have important clinical implications. This study found that the recidivists were twice as likely to have witnessed parental violence as children. As a result, treatment programs should consider spending significant time addressing this issue with its clients. It has been documented that batterers often believe their children do not see and/or are not exposed to the abuse (Feldman and Ridley, 1995). This study suggests otherwise. Education of both batterers and children in regard to the fact that domestic violence is a choice and is wrong, may help break this cycle.

In addition, results from this study suggest that a clear picture of a recidivist may not exist. Of all the possible predictor variables explored, only two were found to be potential predictors: witnessing parental violence as a child, and marital status. As result, the assessment interview may be very important for batterer treatment programs, in that it can provide programs with information about each client and his/her individual's needs in treatment.

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Table 1

"Pre-Assessment" Charges: Distribution of Assessment Completer "Pre-Assessment"

Incidents by Percentage and Number of Participants

National Association (Control of Control of		S	
Type of Charge:	<u>0</u>	1	≥ 2
Domestic Violence	13% (12)	66% (60)	21% (19)
General Violence	91% (83)	9% (8)	0% (0)
Destructive/Intrusive	98% (89)	1% (1)	1% (1)
Other	87% (79)	10% (9)	3% (3)

Note: Rows sum to 100% of sample ($\underline{n} = 91$)

Table 2

<u>During Assessment Charges: Distribution of Assessment Completer "During-Assessment" Incidents by Percentage and Number of Participants</u>

Side Market and Control of the Contr	Number of Charges			
Type of Charge:	<u>0</u>	1	≥2	
Domestic Violence	94% (85)	3% (3)	2% (2)	
General Violence	100% (0)	0% (0)	0% (0)	
Destructive/Intrusive	100% (0)	0% (0)	0% (0)	
Other	98% (89)	2% (2)	0% (0)	

Note: Rows sum to 100% of sample ($\underline{n} = 91$)

	Percentage (and Number) of Participants		
N Notabled	Recidivists	Non-Recidivists	
Age	34 years	33 years	
Gender			
Male	83% (10)	75% (59)	
Female	17% (2)	25% (20)	
Race			
Caucasian	67% (8)	75% (59)	
African-American	33% (4)	24% (19)	
Other	0% (0)	1% (1)	
Entry Status			
Court-Mandated	100% (12)	91% (72)	
Voluntary	0% (0)	8% (6)	
Mixed	0% (0)	1% (1)	
Employment			
None	25% (3)	11% (9)	
Full-time	25% (3)	34% (27)	
At least Part-time	50% (6)	51% (40)	
Other	0% (0)	4% (3)	
Marital Status			
Married	25% (3)	30% (23)	
Divorced/Separated	58% (7)	30% (24)	
Single	17% (2)	39% (31)	
Other	0% (0)	1% (1)	

**************************************	Mean Number (and Range) of Charges		
Type of Charge:	Recidivists	Non-Recidivists	
Domestic Violence	1.33 (0-7)	1.18 (0-4)	
General Violence	0.00(0)	0.10 (0-1)	
Destructive/Intrusive	0.00(0)	0.05 (0-3)	
Other	0.08 (0-1)	0.18 (0-2)	

Percentage and Number of Participants

	Percentage (and Number) of Participants		
***************************************	Recidivists	Non-Recidivists	
Age	35 Years	33 years	
<u>Gender</u>			
Male	100% (3)	82% (40)	
Female	0% (0)	18% (9)	
Race			
Caucasian	100% (3)	78% (38)	
African-American	0% (0)	20% (10)	
Other	0% (0)	2% (1)	
Entry Status			
Court-Mandated	100% (3)	90% (44)	
Voluntary	0% (0)	10% (5)	
Employment			
None	33.3% (1)	12% (6)	
Full-time	33.3% (1)	31% (15)	
At least Part-time	33.3% (1)	53% (26)	
Other	0% (0)	4% (2)	
Marital Status			
Married	33.3% (1)	22% (11)	
Divorced/Separated	33.3% (1)	43% (21)	
Single	33.3% (1)	33% (16)	
Other	0% (0)	2% (1)	

Table 6

Mean Number and Range of "Pre-Assessment" Charges for Treatment Completer

Recidivists vs. Non-Recidivists

	Mean Number (and Range) of Charges		
Type of Charge:	Recidivists	Non-Recidivists	
Domestic Violence	0.68 (0-1)	1.39 (0-7)	
General Violence	0 (0)	0.06 (0-1)	
Destructive/Intrusive	0 (0)	0.82 (0-3)	
Other	0.33 (0-1)	0.163 (0-2)	

Table 7

Z-Scores of the Psychosocial Variables from the Assessment for the Treatment

Completer Recidivists vs. the Non-Recidivist Means

**************************************	Psychosocial Variables Z-scores				
***************************************	Alcohol/Drug	Criminal	Childhood	Family	Psychiatric
	Use	Legal	Violence	Distress	History
		History			
Participant 1	-1.62	-0.85	1.34	2.12	-0.48
Participant 2	-1.62	0.01	2.04	0.34	-0.66
Participant 3	1.28	-1.71	2.04	-0.04	0.41
Mean for Non- Recidivists	0.23	-0.06	0.01	-0.08	-0.18