

# Changing the Domestic Violence Narrative: Aligning Definitions and Standards

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Published online: 25 October 2016  
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**Abstract** Many states use a broad legal definition of domestic violence that includes intimate partner violence along with family violence, and it is from this broader conceptualization that the criminal justice system intervenes and often treats all types of offenders in the same way. This judicial response can include a mandate to attend a Batterer Intervention Program-type group, which does little to address violence that occurs outside of the “traditional” partner violence paradigm. In order to advance interventions for physical partner violence that adequately address both male and female perpetration, as well as the broader conceptualization of domestic violence, we must align definitions and standards among researchers, service providers, advocates, policymakers, and the public health and criminal justice systems. Examples of how this misalignment has stalled progress in offender treatment are discussed and a plan for enabling continued innovation in the field is presented.

**Keywords** Batterer Intervention Programs · Domestic violence · Family violence · Intimate partner violence · Legal definitions · Offender treatment · State standards

Formula stories are constructed in order to understand a social problem and to help those affected by that problem in defining

and assigning a narrative to a lived experience. Unfortunately, domestic violence<sup>1</sup> – a very complex social problem – has been reduced to a simple formula story that excludes many of those who perpetrate and experience it. This story includes severe physical violence, intimidation and controlling behaviors among intimate partners, and almost universally portrays women as victims and men as perpetrators — “pure victims and evil villains” (Loseke 2001). While this formula story raises awareness and highlights the seriousness of the issue – and may be applicable and useful to some women (Guthrie and Kunkel 2015) – it does not reflect the broader legal definition of domestic violence used by states across the country and those who are arrested and whose cases are adjudicated by the criminal justice system. Researchers, service providers, advocates, policymakers, and the public health and criminal justice systems need to re-examine and modify the language and definitions used in both the spheres of criminal justice and social service provision in order to advance the field and improve our responses to domestic violence. This article demonstrates the disparity between definitions, state standards, and domestic violence offender treatment approaches, and how these disparities stall and prevent innovation in domestic violence offender treatment. More specifically, the article focuses on changes needed in state standards to enable the provision of treatment options that align with the broad legal definitions of domestic violence and to promote innovation in offender treatment, such as the possibility of involving victims in the offenders’ treatment should victims want to be included.

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<sup>1</sup> In this article, domestic violence is being defined broadly as abusive behavior (physical, sexual, emotional, economic, or psychological) perpetrated by an intimate partner or family member against another. Thus, domestic violence is the board term being used to include both intimate partner violence and family violence (e.g., adult child and parent or adult siblings). The terms are not being used interchangeably.

## Court-Mandated Treatment in the US

In the United States (US), many jurisdictions use a broad definition of domestic violence that includes intimate partner violence along with family violence (e.g., adult child and parent) – and both male and female offenders. Table 1 shows a sample of state definitions of the relationship that must exist between offenders and victims for a crime to be considered domestic violence. It should be noted that while there are differences between states, none define domestic violence as only between intimate partners, or only males as perpetrators and females as victims. These legal definitions are starkly dissimilar to the formula story above and the conceptualization of domestic violence by the feminist movement and

grassroots activists who helped move the issue from the private to the public sphere.

Treatment approaches for domestic violence offenders were developed using the same narrow conceptualization of domestic violence that emphasizes gender and power inequality in opposite-sex intimate partner relationships (Pence et al. 1993) and this perspective continues to influence how treatment is provided today. This creates a significant disconnect between the statutory definitions of domestic violence – and therefore, who is prosecuted for domestic violence crimes – and the legislative standards for treatment programs that offenders are court-mandated to attend. This disconnect has been heightened by pro-arrest and mandatory arrest laws for domestic violence enacted across the US which have

**Table 1** Definition of relationship between domestic violence victim and offender

State	Definition of relationship between domestic violence offender and victim
Arizona <sup>a</sup>	... Relationship between the victim and defendant is one of current or former marriage, residing in the same household, when the relationship is or was formerly a romantic one, when they have a child in common, when one party is pregnant with the other's child, or when they are related by blood, marriage, or court order.
California <sup>b</sup>	... Abuse perpetrated against a current or former spouse, a current or former cohabitant, a person with whom the offender has or had a dating relationship with, a person with whom the offender has a child in common, a child of such a party, or any other person related by consanguinity within the second degree.
Florida <sup>c</sup>	... Against another household or family member, including current or former spouse, people related by blood or marriage, people currently or formerly residing together as a family, or people who have a child in common.
Georgia <sup>d</sup>	... Between past or present spouses, people who are parents of the same child, parents and children, stepparents and step children, foster parents and foster children, or other persons living or formerly living together in the same household
Kansas <sup>e</sup>	... Against someone who is a family or household member including current or former spouses, parents, stepparents, people presently or formerly having lived together, people who have a child in common, or a man and a pregnant woman who alleged to be expectant parents.
New York <sup>f</sup>	... People related by consanguinity or affinity, people who are legally married or were formerly married, people who have a child in common, people who currently or formerly lived in the same household, people who have been in an intimate relationship regardless of whether they have cohabited or not, and any other category of persons defined by the office of children and family services.
North Carolina <sup>g</sup>	... Against a current or former spouse, someone currently or formerly living with the offender, a child, a parent, someone having a child in common with the offender, someone currently or formerly sharing a household, or someone with whom the offender has or had a dating relationship.
Texas <sup>h</sup>	... By one family member against another ... Family violence also includes abuse against a family or household member, and dating violence.
Utah <sup>i</sup>	... By one cohabitant against another. With cohabitant defined as a person 16 years or older who: is or was a spouse of the other party; is or was living as if a spouse of the other party; is related by blood or marriage to the other party; has one or more children in common with the other party; is the biological parent of the other party's unborn child; or resides or has resided in the same residence as the other party.
Wisconsin <sup>j</sup>	... Against a current or former spouse, against an adult the person lives or lived with, or against a person sharing a child in common.

<sup>a</sup> Arizona Revised Statutes § 13–3601

<sup>b</sup> California Family Code § 6211

<sup>c</sup> Florida Statute § 741.28

<sup>d</sup> Georgia Code § 19-13-1

<sup>e</sup> Kansas Statute § 21–5414

<sup>f</sup> New York Social Services Law § 459

<sup>g</sup> North Carolina Statute § 50B-1

<sup>h</sup> Texas Family Code §§ 71.004; 261.001(1); 71.0021(a)

<sup>i</sup> Utah Code § 77-36-1

<sup>j</sup> Wisconsin Statute § 968.075

significantly increased the number of female offenders across the country.

Domestic violence offender treatment has long been dominated in the US by Batterer Intervention Programs (BIPs) with a singular focus of changing men's sexist attitudes and related behaviors while holding offenders "accountable" for their crimes. Though research suggests that attention to offender heterogeneity improves the ability to predict treatment outcomes (Stoops et al. 2010), homogenous domestic violence treatment continues to be the most common approach in the US. The prevailing treatment models for BIPs were developed based on the work of feminist scholars to address the formula story scenario noted above. The Domestic Violence Intervention Project (DAIP), created in Duluth, Minnesota in 1983, became the predominant treatment model to mandate domestic violence offenders to attend and it remains the leading model of group treatment today (Aaron and Beaulaurier 2016), with some states specifying the "Duluth Model" curriculum as the standard BIP response (Barner and Carney 2011; Gondolf 2010). Additionally, some programs now also incorporate elements of cognitive behavioral therapy (Aaron and Beaulaurier 2016; Smedslund et al. 2011).

It is estimated that there are over 2,500 BIPs active in the US today (Boal and Mankowski 2014) despite research that raises serious questions about their effectiveness due to high attrition rates (Babcock et al. 2004; Jewell and Wormith 2010; Price and Rosenbaum 2009), little evidence of attitudinal and behavioral change (Gondolf 2000; Jackson et al. 2003), and inconsistent contact with victims (Mills et al. 2006; Price and Rosenbaum 2009). Additionally, this treatment approach was not developed in response to empirical findings about domestic violence, such as the prevalence of female offenders, the frequency of cases where family members or intimate partners "continue to cohabituate or must remain in close contact due to children in common or religious beliefs and cultural norms" (Aaron and Beaulaurier 2016, p.5), or that many couples reunite after state intervention (Mendez et al. 2014; Stith et al. 2004). Furthermore, while some states require gender-specific groups for treatment, not all do, and depending on the size of the community female offenders may be placed in a group along with male offenders (if allowed by state standards). Additionally, intimate partner violence offenders might be placed in a group along with family violence offenders (e.g., adult child and parent). Both of these situations pose a challenge to service providers who are required to deliver the "standard" curriculum.

There is a growing body of research suggesting the need for more customized domestic violence treatment approaches (Cantos and O'Leary 2014; Dutton and Corvo 2006; Mills et al. 2013; Murphy and Eckhardt 2005; Price and Rosenbaum 2009; Rizza 2009; Stuart 2005), in no short part to address the variety of defendants who appear at social service agencies for court-mandated treatment. Table 2 illustrates

the variance in state guidelines for domestic violence offender treatment programs and the resultant complexity of developing and adopting new interventions within this context.

### What Change is Needed?

The disparity between legal definitions and the common conceptualization of domestic violence as between intimate partners with a male perpetrator and female victim is a problem that must be resolved in order to improve our responses to domestic violence. It has become a marked impediment to innovation in the field, and in particular to innovation in treatment for offenders. To overcome this barrier two things must happen:

- State standards for offender treatment programs need to be modified to accommodate the broader legal definition of domestic violence (i.e., both intimate partner violence and family violence, both male and female offenders) and,
- State domestic violence coalitions, and the trainings and certifications for providers serving both victims and offenders, need to depart from the domestic violence formula story in order to better match legal definitions and the variety of offenders and experiences.

These changes will allow for offender treatment programs to address the complexity of domestic violence and the unique needs and circumstances of those involved. The broad reconceptualization would also help in addressing some of the current controversies over gender differences in perpetration of physical partner violence (see Winstok and Straus 2016) as it would allow for and encourage responses to domestic violence that are not only based on gender and issues of cultural sexism, but rather on type of violence and subgroups of offenders. More specifically, within intimate partner violence, research has demonstrated the complexity of the issue and has highlighted the fact that the standard treatment ignores intimate partner violence typology and may be ineffective for particular types of violence (Holtzworth-Munroe and Stuart 1994; Johnson 2006). This shift would also enable advocates and service providers to offer assistance to victims and families whose experiences do not match that of the formula story victim.

### The Possibility for Innovation in Offender Treatment

Within the domestic violence field, court-mandated offender treatment is an area primed for innovation. Work is being done in communities across the country to develop treatment approaches that reflect the broad conceptualization of domestic violence, but due to restrictive state standards these

**Table 2** State guidelines for domestic violence offender treatment programs

State	Minimum length	Curriculum	Gender	Conjoint treatment	Limitations
Arizona <sup>a</sup>	<ul style="list-style-type: none"> <li>• 1st offense: 26 sessions</li> <li>• 2nd offense: 36 sessions</li> <li>• 3rd offense: 52 sessions</li> </ul>	<ul style="list-style-type: none"> <li>• Group or individual counseling, or both</li> <li>• Established timeline and criterion for successful completion</li> <li>• Professionally recognized, with supporting research within the last five years</li> </ul>	• N/A	• N/A	• N/A
California <sup>b</sup>	<ul style="list-style-type: none"> <li>• Specified number of sessions by court</li> </ul>	<ul style="list-style-type: none"> <li>• Lectures, classes, group discussions, and counseling</li> <li>• Program staff must have some specific knowledge of abuse</li> <li>• Approval from probation department, renew annually</li> </ul>	• Single gender	• No couples or family counseling	• Perpetrators not allowed to enroll voluntarily
Florida <sup>c</sup>	<ul style="list-style-type: none"> <li>• 24 sessions within 29 weeks</li> </ul>	<ul style="list-style-type: none"> <li>• Based on psycho-educational model addressing tactics of power and control</li> </ul>	• N/A	• N/A	• Perpetrators not convicted not allowed to participate
Georgia <sup>d</sup>	<ul style="list-style-type: none"> <li>• 24 sessions within 27 weeks</li> </ul>	<ul style="list-style-type: none"> <li>• Educational model</li> <li>• Hold the offender solely accountable, challenge and identify control tactics, identify myths and effects of abuse.</li> <li>• Facilitators must have either a bachelor's degree or two years work with batterers, victims or victim advocates</li> </ul>	• Same gender	• No couples, marriage, or family therapy	• N/A
New York <sup>e</sup>	• N/A	• N/A	• N/A	• N/A	• N/A
Kansas <sup>f</sup>	<ul style="list-style-type: none"> <li>• At least 24 weeks</li> </ul>	<ul style="list-style-type: none"> <li>• Separate IPV and child abusers</li> <li>• Group processing approach</li> <li>• Develop relationship with judicial system to increase offender accountability</li> </ul>	• May combine genders under caution	• BIPs shall not use couples or family therapy	• N/A
North Carolina <sup>g</sup>	<ul style="list-style-type: none"> <li>• 26–30 weeks</li> <li>• 39 h total</li> </ul>	<ul style="list-style-type: none"> <li>• Group sessions</li> <li>• Programs establish procedures for required staff qualifications</li> <li>• Must not treat violence as due to mutual process, psychopathology, or anger</li> </ul>	• Single gender	• No couple therapy or counseling	• N/A
Texas <sup>h</sup>	<ul style="list-style-type: none"> <li>• 18 weekly sessions</li> <li>• At least 36 h total</li> </ul>	<ul style="list-style-type: none"> <li>• Gender-specific services for adult males</li> <li>• Consider perpetrators solely responsible</li> <li>• Batterers agree to be drug and alcohol free</li> </ul>	• Single gender	• No couples or marriage counseling	• Solely provided to adult males
Utah <sup>i</sup>	<ul style="list-style-type: none"> <li>• 16 weeks</li> <li>• 1 h/week</li> </ul>	<ul style="list-style-type: none"> <li>• Psychological and educational service</li> <li>• In-depth interviews and assessments of new clients</li> <li>• Accompanied by counseling/individualized treatment</li> </ul>	• N/A	• Available after 12 sessions	• N/A

**Table 2** (continued)

State	Minimum length	Curriculum	Gender	Conjoint treatment	Limitations
Wisconsin <sup>j</sup>	• N/A	<ul style="list-style-type: none"> <li>• Groups run by 2 facilitators</li> <li>• Facilitators must have at least 40 h of training on DV</li> <li>• Focus on male power and control issues, issues of sexism and gender stereotyping</li> </ul>	• Single gender	<ul style="list-style-type: none"> <li>• No couples or family counseling</li> <li>• Allows a “couples orientation” session</li> </ul>	<ul style="list-style-type: none"> <li>• Standards do not address female perpetrators</li> </ul>

<sup>a</sup> Arizona Administrative Code R9-20-208 & R9-20-302

<sup>b</sup> California Penal Code § 1203.097

<sup>c</sup> Florida Statute § 741.325

<sup>d</sup> Georgia Administrative Rules and Regulations 125-4-9.06, 125-4-9.07, & 125-4-9.08

<sup>e</sup> [http://www.opdv.ny.gov/whatisdv/about\\_dv/nyresponse/nysdv.pdf](http://www.opdv.ny.gov/whatisdv/about_dv/nyresponse/nysdv.pdf)

<sup>f</sup> Kansas Attorney General, *Essential Elements and Standards for Batterer Intervention Programs*, 6–7 (2012), <http://ag.ks.gov/docs/documents/bip-standards.pdf?sfvrsn=12>

<sup>g</sup> North Carolina Administrative Code 17.0706, 17.0708, & 17.0711

<sup>h</sup> Texas Department of Criminal Justice Community Justice Assistance Division, *Battering Intervention and Prevention Program (BIPP) Accreditation Guidelines*, 11 (2014), [https://www.tdcj.state.tx.us/documents/BIPP\\_Accreditation\\_Guidelines.pdf](https://www.tdcj.state.tx.us/documents/BIPP_Accreditation_Guidelines.pdf)

<sup>i</sup> Utah Administrative Code r. 5001-21-6

<sup>j</sup> Wisconsin Batterers Treatment Provider Association, *Certified Domestic Abuse Batterers Treatment*, 6 (2007), [http://www.wcadv.org/sites/default/files/resources/WBTPA%20Standards\\_2007.pdf](http://www.wcadv.org/sites/default/files/resources/WBTPA%20Standards_2007.pdf)

approaches are limited in their reach. A change in the state standards for offender treatment programs would allow for the testing and replication of alternative approaches, enabling service providers to implement programs that show promise elsewhere in their own communities. As the field operates now, even programs that are shown through rigorous research to be safe and promising are either forbidden or cautioned against by statute, or are rejected by the field for not fitting into the narrow formula story. To illustrate the challenges of innovation in domestic violence offender treatment, an example based on the authors’ work in developing, implementing, and studying an alternative treatment approach is provided below.

New York University’s Center on Violence and Recovery has collaborated with local criminal justice systems, treatment providers, victim advocates, and community members to both develop and study one such alternative treatment approach to domestic violence. The approach, Circles of Peace, is a restorative justice-based program that accommodates the participation of victims who choose to do so, and was developed as a response to an emerging interest in alternative treatments that included victim participation (Mills 2008; Mills et al. 2013). Restorative justice is an approach to addressing conflict that focuses on repairing harm and creating meaningful change in the lives of those involved in or impacted by an incident. It is a theory that understands violence and crime to be violations of relationships rather than violations of the state, and holds

responsible parties accountable by addressing the needs of those harmed instead of focusing on punishment or retribution. Restorative justice is practiced in different forms (e.g., peacemaking circles, victim-offender dialogues, and conferencing) and has been used across the world to address a variety of crimes.

The Circles of Peace model, created in 2004, is the first of its kind in the US to use restorative justice principles to treat offenders arrested for domestic violence crimes. It is flexible, culturally sensitive, and works with the criminal justice system to interrupt patterns of abuse. Furthermore, the model can be used to address the broad variety of domestic violence cases that come into contact with the criminal justice system including family violence cases (e.g., adult parent and child), female offenders, and same-sex intimate partners. The model has been implemented in the criminal justice systems in Nogales, Arizona and Salt Lake City, Utah.

A randomized controlled trial in Arizona comparing a traditional batterer intervention program to the Circles of Peace model, supported by the National Science Foundation, as well as years of anecdotal evidence, indicates the restorative justice model has concrete benefits for individuals, families, and communities and could provide a viable treatment alternative that moves beyond the standard BIP offered in most US jurisdictions (Mills et al. 2013). The Arizona study suggests that Circles may be more effective in reducing overall arrests and falsifies the claim that it is dangerous to use restorative justice



for domestic violence (Mills et al. 2013). To build upon and potentially affirm these findings, National Science Foundation and National Institute of Justice-funded studies are currently underway in Utah examining the effectiveness of a traditional BIP compared to an approach that incorporates Circles of Peace.

While this research has shown that an alternative treatment approach for domestic violence offenders that includes victim participation can be implemented safely, Circles of Peace can only be offered as a treatment option in states that allow for conjoint treatment in their state standards. Both Arizona and Utah are two states that allow for conjoint treatment. In Utah, offenders must complete a minimum of 16 weeks of treatment and conjoint treatment is allowed after an offender has completed 12 weeks of offender only group treatment. In Arizona, first time offenders must complete a minimum of 26 weeks of treatment and victim participation is allowed from the onset. The Arizona study included all domestic violence (both intimate partner and family violence) cases mandated to treatment during a year and a half long period. Sixty-two percent of the cases that started the Circles of Peace program had a victim voluntarily participate in at least one treatment session with the offender (Mills et al. 2013). This finding highlights the desire for victims to be involved in their offenders' treatment. However, many states do not allow for conjoint treatment and this illustrates just one impediment to innovation. This is not to say that Circles of Peace is an appropriate treatment option for all domestic violence offenders, but rather one of many possible alternative treatment approaches that can address the variety of domestic violence cases that are broader than the formula story (e.g., family violence cases, cases with female offenders, and cases between same-sex intimate partners).

Researchers and service providers are beginning to acknowledge that the experiences and desires of domestic violence victims do not always fit into the formula story and the typically prescribed solutions (e.g., going to a shelter, leaving a relationship) are not always the optimal choices for victims of abuse. There is research and growing momentum across the field for service providers to consider the unique desires of and trade-offs for individual victims when developing safety plans and working through next steps (Thomas et al. 2015). This same rationale can be applied to the formula story for domestic violence offenders. Although proponents of the dominant gender paradigm for domestic violence want to believe that there is one source of abusive behavior for domestic violence offenders who appear in court and at social service agencies, the legal net has been cast too wide and the definition of domestic violence is too broad for this singular theory to possibly be true.

In order to better prevent future incidents of violence and to help intimate partners and/or families heal from their abusive histories, we must be able to offer domestic violence offender treatment that is meaningful and better matched to the unique

experiences of individuals – both victims and offenders. If we are able to broaden the conceptualization of domestic violence that is used by service providers, advocates, and policymakers to match that of the criminal justice system, then we can examine and begin to offer solutions to intimate partners and/or families that are more effective than BIPs have proven to be.

The ubiquity of the formula story for domestic violence in both the legislative and service provision arenas has left the field in a devastating and perpetual loop that does little to address the issue: courts are mandating a treatment that has been shown to be minimally effective and yet judges are limited in their ability to do anything else. Matching definitions between standards for offender treatment programs and the criminal justice system and a broader conceptualization of domestic violence that departs from the formula story will better reflect the reality of those who come into contact with the criminal justice system for domestic violence crimes. These changes will help promote needed innovation in offender treatment across the country, with the overall hope to alleviate the burden of domestic violence in our society.

## References

- Aaron, S. M., & Beaulaurier, R. L. (2016). The need for new emphasis on batterers intervention programs. *Trauma, Violence, and Abuse*, 1524838015622440.
- Babcock, J. C., Green, C. E., & Robie, C. (2004). Does batterers' treatment work? A meta-analytic review of domestic violence treatment. *Clinical Psychology Review*, 23(8), 1023–1053.
- Barner, J. R., & Carney, M. M. (2011). Interventions for intimate partner violence: a historical review. *Journal of Family Violence*, 26(3), 235–244.
- Boal, A. L., & Mankowski, E. S. (2014). The impact of legislative standards on batterer intervention program practices and characteristics. *American Journal of Community Psychology*, 53(1–2), 218–230.
- Cantos, A. L., & O'Leary, K. D. (2014). One size does not fit all in treatment of intimate partner violence. *Partner Abuse*, 5(2), 204–236.
- Dutton, D. G., & Corvo, K. (2006). Transforming a flawed policy: a call to revive psychology and science in domestic violence research and practice. *Aggression and Violent Behavior*, 11(5), 457–483.
- Gondolf, E. W. (2000). A 30-month follow-up of court-referred batterers in four cities. *International Journal of Offender Therapy and Comparative Criminology*, 44(1), 111–128.
- Gondolf, E. W. (2010). The contributions of Ellen Pence to batterer programming. *Violence Against Women*, 16(9), 992–1006.
- Guthrie, J. A., & Kunkel, A. (2015). Problematizing the uniform application of the formula story: advocacy for survivors in a domestic violence support group. *Women & Language*, 38(1), 43–62.
- Holtzworth-Munroe, A., & Stuart, G. L. (1994). Treatment of marital violence. In L. van de Creek & S. Knapp (Eds.), *Innovations in clinical practice: a source book* (Vol. 13, pp. 5–19). Sarasota: Professional Resource Press.
- Jackson, S., Feder, L., Forde, R. D., Davis, C. R., Maxwell, D. C., & Taylor, B. G. (2003). Batterer intervention programs: where do we go from here? (NCJ Publication No. 195079). Washington, DC: United States Department of Justice, Office

- of Justice Programs, National Institute of Justice. Retrieved from <http://www.ojp.usdoj.gov/nij/pubs-sum/195079.htm>.
- Jewell, L. M., & Wormith, J. S. (2010). Variables associated with attrition from domestic violence treatment programs targeting male batterers: a meta-analysis. *Criminal Justice and Behavior*, 37(10), 1086–1113.
- Johnson, M. P. (2006). Conflict and control: Gender symmetry and asymmetry in domestic violence. *Violence Against Women*, 12(11), 1003–1018.
- Loseke, D. R. (2001). Lived realities and formula stories of ‘battered women’. In J. F. Gubrium & J. A. Holstein (Eds.), *Institutional selves: troubled identities in a postmodern world* (pp. 107–126). New York: Oxford University Press.
- Mendez, M., Horst, K., Stith, S. M., & McCollum, E. E. (2014). Couples treatment for intimate partner violence: clients’ reports of changes during therapy. *Partner Abuse*, 5(1), 21–40.
- Mills, L. G. (2008). *Violent partners. A breakthrough plan for ending the cycle of abuse*. New York: Springer.
- Mills, L. G., Grauwiler, P., & Pezold, N. (2006). Enhancing safety and rehabilitation in intimate violence treatments: new perspectives. *Public Health Reports*, 121(4), 363.
- Mills, L. G., Barocas, B., & Ariel, B. (2013). The next generation of court-mandated domestic violence treatment: a comparison study of batterer intervention and restorative justice programs. *Journal of Experimental Criminology*, 9(1), 65–90.
- Murphy, C. M., & Eckhardt, C. I. (2005). *Treating the abusive partner: an individualized cognitive behavioral approach*. New York: The Guilford Press.
- Pence, E., Paymar, M., Ritmeester, T., & Shepard, M. (1993). *Education groups for men who batter: the Duluth model*. New York: Springer.
- Price, B. J., & Rosenbaum, A. (2009). Batterer intervention programs: a report from the field. *Violence and Victims*, 24(6), 757–770.
- Rizza, J. (2009). Beyond Duluth: a broad spectrum of treatment for a broad spectrum of domestic violence. *Montana Law Review*, 70(1), 125–146.
- Smedslund, G., Dalsbø, T. K., Steiro, A., Winsvold, A., & Clench-Aas, J. (2011). Cognitive behavioural therapy for men who physically abuse their female partner. *Cochrane Database of Systematic Reviews*, (2), CD006048. doi:10.1002/14651858.CD006048.pub2
- Stith, S. M., Rosen, H., McCollum, E. E., & Thomsen, C. J. (2004). Treating intimate partner violence within intact couple relationships: outcomes of multi-couple versus individual couple therapy. *Journal of Marital and Family Therapy*, 30(3), 305–318.
- Stoops, C., Bennett, L., & Vincent, N. (2010). Development and predictive ability of a behavior-based typology of men who batter. *Journal of Family Violence*, 25(3), 325–335.
- Stuart, G. L. (2005). Improving violence intervention outcomes by integrating alcohol treatment. *Journal of Interpersonal Violence*, 20(4), 388–393.
- Thomas, K. A., Goodman, L. A., & Putnins, S. (2015). “I have lost everything”: trade-offs of seeking safety from intimate partner violence. *American Journal of Orthopsychiatry*, 85(2), 170–180.
- Winstok, Z., & Straus, M. (2016). Bridging the two sides of a 30-year controversy over gender differences in perpetration of physical partner violence. *Journal of Family Violence*. doi:10.1007/s10896-016-9896-x.