

## Useful Talking Points

### Limitations of the WSIPP Domestic Violence Treatment Effectiveness Study

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The 2012 Washington State Institute for Public Policy (WSIPP) study on the effectiveness of domestic violence treatment performed a research review of existing studies regarding domestic violence.

Studies included in the review had to involve participants ranging from *never* attending treatment to completing treatment. This means that participant's that never came to a single class, or attended only a few classes would be included in the outcome results of the study. Using this ineffective criterion, and rejecting many credible designs, this review is actually assessing the entire community response to domestic violence and not solely DV treatment effectiveness. Ex. Equivalent to concluding that if you are prescribed a medication but never take it, the medication wasn't effective.

The WSIPP review rejected many valid and credible studies that included victim reports, treatment completers and other methods of assessing the effectiveness of DV treatment. All the studies of Edward Gondolf and other long standing notable researchers were excluded.

Gondolf's research, which is highly regarded worldwide, and is much more comprehensive, finds that DV treatment is effective when you look at victim safety as criteria for successful treatment. Gondolf notes that DV treatment works best when treatment and corrections work in tight coordination with one another.

Credible researchers, including Dr. Gondolf and Dr. Mankowski with Portland State University, who perform DV treatment research, have found the WSIPP review to be an inaccurate and invalid study for assessing DV treatment effectiveness.

Participant recidivism was the main criteria for successful outcomes in the 11 studies chosen by the WSIPP review. This means that a participant who ranged from never attending treatment to completing treatment would be deemed unsuccessful if they were arrested for any crime in a two year period after the study. Ex. DV treatment would be deemed unsuccessful if someone was arrested for shoplifting or charged with any other misdemeanor.

Even if more specific domestically violent recidivism was used to determine treatment effectiveness, holding DV treatment to these criteria excludes any provision for learning from *relapse* to be a valid part of the treatment process. Many other treatment fields, like drug and alcohol treatment, use relapse as a common part of the treatment model.

From the 11 studies used in the WSIPP review, 7 studies included use of short term treatment programs ranging from 10 to 20 weeks of treatment. This cannot be compared to the required 32 class minimum in WA State.

Domestic violence is a complex issue affected by many variables that cannot be taken into account solely using an analysis that looks at recidivism. Ex. Offenders also experiencing untreated mental health or addiction issues

The WSIPP study suggests that other short term programs may be more effective than the current state required DV treatment model. Short term CCAP/MRT type programs have not been adequately researched to show their

effectiveness in addressing domestic violence issues. Some short term programs that have cropped up in Washington State have not been shown to be effective for long-term recovery from violence and abuse.

Marna Miller, the lead researcher of the WSIPP Study, spoke at the 2012 NWADVTP Conference. She made reference to her believe that DV treatment would be found to be ineffective while relating it to her point that she knew of judges who already had concerns about treatment efficacy. These comments were made before her study had been completed. It should also be noted that Ms. Miller made similar comments to NWADVTP board members and other treatment providers much earlier, in individual conversations. This lack of objectivity by the lead researcher is reason alone to consider this study suspect and possibly politically motivated.

Please see [nwadvtp.com](http://nwadvtp.com) for other more comprehensive reviews of the research, including those using a more rigorous/appropriate research design.

Ex. The Batterers' Intervention Program Study completed in 2006 in Seattle WA by Sue Hubbard found much greater effectiveness at reducing recidivism for DV treatment completers.