# FINAL REPORT

# ACCOUNTABILITY WORKGROUP

Council to End Domestic Violence Fairfax, VA, March 21, 2024 The Honorable John C. Cook, Chair

#### **INTRODUCTION**

The Council to End Domestic Violence (CEDV) formed the Accountability Workgroup in 2022 to examine policies regarding those who commit acts of domestic violence and to focus specifically on the concept of accountability. The Workgroup sought to explore how an accountability process can create pathways to responsibility, healing, hope, transformation, and in some cases restoration in people who cause harm, systems, and communities. Such a process requires systems and communities to remedy barriers to change and to provide avenues for people who cause harm to repaire the harms caused by domestic violence. (See Guiding Principles, Center for Court Innovation (CCI), 2022.)

The Workgroup determined that an accountability process should not only improve existing systems, but also include measures beyond those provided by the criminal justice system. The Workgroup explored other ways that those who cause harm can own their actions and be part of measures aimed at reducing recidivism. The Workgroup also discussed how the greater community can participate in providing accountability.

#### **EVALUATIVE PROCESS**

#### I. Membership

The Workgroup included the following members, outside consultants, and support staff personnel:

Name	Organization
John C. Cook	Chair
Chris Davies	Workgroup Staff; Domestic and Sexual
	Violence Services (DSVS)
Andréa Nunes-Gardner	Workgroup Staff; DSVS
Gretchen Soto, succeeded by Melody Vielbig	DSVS
Brittany Davis	Center for Justice Innovation (CJI), formerly
	Center for Court Innovation (CCI)
Joe Meyer	Shelter House
Dr. Brenda McBorrough	Faith Communities in Action (FCIA)
Jonathan Yglesias	Virginia Sexual and Domestic Violence
	Action Alliance (VSDVAA)
Courtenay Schwartz	VSDVAA
Katrina Smith	Court Services, Juvenile and Domestic
	Relations District Court (JDRDC)
Kim Parr	Community Corrections, JDRDC
Dawn Butorac	Fairfax Public Defender's Office
Pia Miller, succeeded by Jenna Sands	Deputy Commonwealth Attorney
Derwin Overton	Opportunities, Alternatives & Resources
	(OAR)
Mercedes Alonzo	Department of Family Services (DFS),
	Children Youth and Families, Father
	Engagement

Name	Organization
Kevin Ochs	DFS, Children Youth and Families
Jaya Nelliot, succeeded by Shaneen Dewendre	Ashiyanaa
Jamie Milloy	OAR; survivor
Donna Audritsh	DSVS Anger and Domestic Abuse
	Prevention and Treatment (ADAPT)
	facilitator; survivor
Dr. Adam Allston	Health Department, Population Health
	Section, Division of Epidemiology &
	Population Health
Iman Omer-Bahar	Health Department

#### II. Meetings and Process

The Workgroup met 21 times between June 2, 2022, and March 21, 2024, generally for 90 minutes on the third Thursday of each month. Subgroups of the Workgroup held nine additional meetings. The Workgroup heard presentations from outside and in-group members, held discussions, and developed working materials outside of the formal meeting structure. All Workgroup meetings were public and in-person, with remote video accessibility for out-of-town members and the general public.

The Workgroup would like to extend its deepest gratitude to the people and organizations listed below who presented or provided materials and resources. In addition to tapping the expertise of its members, the Workgroup consulted or created the following resources:

- June 30, 2022:
  - Fact Sheet: Guiding Principles for Engagement and Intervention with People Who Cause Harm through Intimate Partner Violence (Center for Justice Innovations [CJI], formerly Center for Court Innovations [CCI])
  - Accountability Workgroup mission statement
  - Accountability Workgroup overview
- August 25, 2022: Goal creation template
- November 15, 2022: Accountability Workgroup Goals and Objectives (Final)
- November 30, 2022: Focus Group Subgroup reference of CJI model and questions for focus groups
- December 15, 2022: Proposed plan for survivor focus groups and surveys
- January 19, 2023:
  - o Focus group/survey participant recruitment flyer
  - Facilitator recruitment letter
  - Focus group participant informed consent document
  - o Draft of survivor focus group questions
  - o Draft of survivor survey questions
  - Accountability presentation by Gretchen Soto, DSVS

- February 16, 2023: Presentation about how those who cause harm manipulate the court system by Courtney Schwartz of the VSDVAA
- March 16, 2023: Project RISE (Reimagining Intimacy through Social Engagement) presentation by Heaven Berhane and Karolin Betances
- April 20, 2023: OAR presentation
- May 18, 2023: Project Mirabal presentation by Dr. Nicole Westmarland
- June 15, 2023: Community Corrections presentation by Kim Parr, JDRDC
- July 20, 2023: Summary of Focus Group Results presentation by Chris Davies, DSVS
- August 17, 2023: Overview of curricula and approaches of local Domestic Violence Intervention Programs (DVIPs), also called Batterer Intervention Programs (BIPs)
- October 19, 2023:
  - Consultation with Toni Zollicoffer, Director of DSVS, about how to identify and support organizations in the community, bringing public resources and technical assistance to faith-based and other groups who represent the communities they serve
  - Creative Intervention Toolkit
  - Community based accountability programs presentation by Dr. Adam Allston
  - Partner Resource List, provided by Andréa Nunes-Gardner, DSVS
  - Updated CEDV Accountability Workgroup Membership List
- November 16, 2023:
  - Concept report from Promising Programs
- References from Brittany Davis, CJI:
  - Winnebago Mentor Court Fact Sheet.docx (innovatingjustice.org)
  - Winnebago County Domestic Violence Courts: Working with the Community to Address Family Violence (CJI YouTube channel)
  - Domestic Violence Mentor Courts | Center for Justice Innovation (innovatingjustice.org)
- January 18, 2024:
  - Concept report on post-incarceration recommendations by Jamie Miloy, OAR
  - Concept report on pretrial recommendations by Kim Parr, JDRDC

 Concept report on survivor recommendations by Dr. Brenda McBorrough February 15, 2024: Article referenced by CJI in edits, summarizing interviews with 26 women in Baltimore, MD about justice preferences and recommendations: Decker, M. R., Holliday, C. N., Hameeduddin, Z., Shah, R., Miller, J., Dantzler, J., & Goodmark, L. (2022). Defining Justice: Restorative and Retributive Justice Goals Among Intimate Partner Violence Survivors. Journal of Interpersonal Violence, 37(5-6), NP2844-NP2867. https://doi.org/10.1177/0886260520943728

## III. Goals, Deliverables, and Objectives

The Workgroup developed the following goals, deliverables, and objectives to guide its deliberations.

1. Center and listen to the experiences of survivors as a guide to inform the services, processes, and changes that are most urgent.

## a. Deliverables:

i. Present a report on recommendations from survivors about experience to guide accountability work to inform this workgroup's actions and for a perpetual feedback loop to the system

# b. **Objectives**:

- i. Gather survey data from survivors and those who cause harm
- ii. Focus groups with survivors and those who cause harm to answer what is needed and what is missing in accountability
- iii. Develop a SWOT from focus group findings (strengths, weaknesses, opportunities, threats)

# 2. Restore hope and dignity for those affected by domestic violence.

# a. **Deliverables:**

i. Those affected will have autonomy in decision-making and adequate supports

# b. Objectives:

- i. Analyze results of focus groups/surveys and incorporate ideas
- ii. Measurement tool, such as pre-post survey
- iii. Tailoring of offerings (not one-size-fits-all)

# **3.** Support self-determination for survivors and their families with options and resources for safely separating or restructuring family relationships.

## a. Deliverables:

- i. Identify options and recommendations to expand and strengthen, such as:
  - 1. Easy and affordable access to couple's mediation as a follow-up to a BIP
  - 2. Financial stress management resources
  - 3. Shelters, housing, advocates, etc. for survivors
  - 4. Places for those who cause harm to go to increase safety
  - 5. Nontraditional interventions for those who cause harm, including those who cannot afford a BIP
  - 6. Peer support groups and the organizational support to perpetuate them (forums might exist that have strength and need to be identified)
  - 7. Any dyadic resources require careful risk assessment and safeguards in the community system (which we might not yet have in Fairfax County)
- ii. Compile a menu of viable options and an education process for explaining options

## b. Objectives:

- i. Identify existing resources (including BIPs)
- ii. Ensure system is equipped to engage a variety of resource options

# 4. Promote stronger links between accountability and healing.

## a. Deliverables:

- i. Present data on how participation in BIP (or other accountability interventions) relates to how the victim experienced healing (per focus group participants' definition of "healing" and "accountability")
- b. **Objectives**:

- i. Focus group, survey, and interview questions to include this question
- ii. Longer-term follow-up data from partners of BIP participants
- 5. Create multiple pathways to accountability, including alternatives to the criminal justice and other traditional systems and responses, to reduce recidivism.
  - a. Deliverables:
    - i. To identify or create one or more additional pathways to accountability in the community not related to CJS
    - ii. To measure how well these work over time to reduce recidivism (using metrics of behavior changes beyond recidivism)
  - b. **Objectives**:
    - i. Learn from communities who have developed such alternatives
    - ii. Identify alternative measures of success
- 6. Use evidence- and practice-based methods to promote effective means of accountability.

#### a. Deliverables:

- i. Gather information about evidence- and practice-based models used in various locations (including approaches that are relevant for a variety of cultures)
- b. **Objectives**:
  - i. CCI can provide some of these examples to explore
- 7. Engage the community in its role in domestic violence prevention and accountability.
  - a. Deliverables:
    - i. Implement community-centered structures for accountability
  - b. **Objectives**:
    - i. Identify a process for engaging community entities
    - ii. Carry out this process
    - iii. Provide education to community entities to become part of this process (e.g., clergy, family members, Safe Havens "Between Compassion and Accountability", Futures Without Violence prevention)
    - iv. Conduct focus groups with family members, etc.
    - v. Include the role of children
- 8. Promote the awareness, coordination, and implementation of strategies to address policy, systemic, social, and cultural biases that contribute to disparities in both the occurrence of domestic violence and opportunities for restorative healing.

# a. **Deliverables:**

i. All recommendations and initiatives of the Workgroup acknowledge and respond to biases and will address disparities

#### b. Objectives:

- i. Measure baseline knowledge about biases and disparities
- ii. Assure Workgroup is informed about biases that contribute to disparities

## **IV.** Community Input

#### A. Introduction

Accountability for domestic violence is defined as the process by which those who cause harm acknowledge abusive behaviors and their impacts with remorse and embark on an effort to repair harm and prevent similar further abuse. Accountability differs from punishment. Punishment is imposed by authority and does not target improvement for any party or for the community. Accountability is—like behaviors that cause harm—the choice of the person who causes harm. Accountability targets improvement for the person who caused harm, the person who was harmed, and the community. Communities and their systems are responsible for promoting individual accountability with efficacy and justice, including safety and autonomy for survivors.<sup>1</sup>

One of the goals of the CEDV Accountability Workgroup was to center solutions on the voices of survivors. To this end, the Workgroup engaged local domestic violence service providers and other professionals to invite survivors to participate in focus groups and a survey to learn about their experiences and preferences for how accountability is addressed in those who cause harm. Participants were offered modest compensation for focus group participation, their identities were kept confidential, no services were made conditional on participation, and it was acknowledged that no survivor has an obligation regarding the accountability process.

The Workgroup had hoped to extend its focus groups to those who cause harm, to providers and professionals, and to community members who could represent those who could provide additional methods of accountability. However, the effort to host focus groups for survivors proved to be more difficult than anticipated, and there was not enough time or resources to initiate additional focus groups with these other parties.

#### B. Focus Groups

Two 90-minute focus group sessions were held, April 26 and June 17, 2023. Focus group facilitators, who were affiliated with the Accountability Workgroup, were trained to facilitate and signed an agreement to maintain participant confidentiality. The focus groups centered around:

- Victim service providers
- Intervention services for participants' current or former partners
- Police and courts
- Community systems

Participants were invited to describe their experiences with each of these entities and their preferences and suggestions for how these entities might support accountability in those who cause harm in a way that supports the safety and interests of those who have been harmed. Seven women participated in the focus groups. Their ages were between 33 and 50 years (average of 41 years). Two were White/Caucasian, two were Black/African-American, one identified as more

<sup>&</sup>lt;sup>1</sup> "Exploring Harm and Accountability", Virginia Sexual and Domestic Violence Action Alliance Membership Meeting, November 16, 2021.

than one race (Black and Asian), one identified as an "other" race, and one declined to identify race. Two of the women were Hispanic/Latinx, four were not, and one declined to say.

# C. <u>Survey</u>

A survey consisting of 19 questions, taking an estimated nine minutes to complete, was administered anonymously via SurveyMonkey between June 2 and July 14, 2023. The same topics were addressed in the survey as in the focus groups, with a combination of multiple-choice and write-in response questions. Many of the participants responded richly to open-ended questions, which provided qualitative data. Twenty-one women between the ages of 35 and 64 participated, including some who were focus group participants. Twelve survey respondents identified as White, three as Asian, two as Black, three as an "other" race, and one as American Indian or Alaskan Native. Five identified as Hispanic/Latinx and 16 did not.

# D. <u>Summary of Focus Group and Survey Responses</u>

While the sample size of the focus groups and surveys was not sufficient to give statistical validity to the result, several themes emerged from focus group participants. None of these themes should be taken to represent the experiences and preferences of every survivor, but each is important for the community to consider in its accountability response:

- Survivors do not feel heard by courts, law enforcement, and child welfare systems.
- The criminal justice and child welfare systems do not promote accountability for harm.
- There is an over-reliance on law enforcement and courts and a lack of other options such as:
  - Professional services relevant to accountability
  - Peer-led support networks
  - Public awareness and education
- Systems and communities are easily manipulated to compound harm to survivors; education and safeguards are needed to prevent this.
- Survivors are not protected within systems of accountability, resulting in further harm. Examples cited include:
  - Victim blaming
  - o Dismissing danger
  - Professionals or officials intimidating survivors
  - Forcing survivors into compromising positions

While the survey sample is too limited to generalize findings, several statements emerged repeatedly from survey respondents:

- Survivors want to be believed when they reach out for help.
- The current criminal justice system is not sufficient to promote accountability.
  - Law enforcement and court responses to people experiencing domestic violence and to those who cause harm need improvement.

- Options outside the criminal justice system need to be equipped to protect survivors.
- No intervention should keep a survivor in a relationship when they prefer to leave.
- Conversely, no intervention should require a survivor to cut off contact with a partner before receiving support.
- The entire community and its systems must become better informed about domestic violence to better understand, believe, and support people who have experienced it and to promote accountability for those who cause harm. The system must not become a vehicle for perpetuating harm.

Survivors suggested a variety of community and system solutions to promote accountability:

- Jail time for the person who caused harm (12 participants)
- Individual therapy for the person who caused harm (12 participants)
- Divorce (10 participants)
- Arrest (10 participants)
- Support from family, friends, mental health or substance use treatment providers, or a domestic violence intervention program for the person who caused harm (8 participants)

Other solutions suggested by a few participants included:

- Supervised visitation
- Mediation
- Court-ordered restitution
- Faith community support
- Couples counseling
- Child Protective Services involvement

The following are some direct quotes from participants:

- I have lost a lot of family members, because they have more faith in the courts than in me. My support team is really my friends. I find certain organizations' services helpful. I go to those places for help.
- Is there a platform for DV survivors to be part of the community, not just by sharing our experiences with leaders but with each other? I would like there to be a peer network that addresses the needs of survivors, not just a support group but a community peer leadership group.
- Waiting for a person to change who was not going to change did not serve me and added to my danger.
- *Abuse is emotional, and the community does not come into play until well after that fact, when things become physical.*
- The process I had to go through with the system was more traumatizing than the actual abuse.

• We both wanted help... and we could not find [a couple's therapy provider to address domestic violence accountability]. Some people would want to address things individually, some as a couple, and some would want a partner to be ordered to a program. That was not even ordered, even though there was a place on the form to request it and we both wanted it.

Some participants offered suggestions for how the Fairfax County community can support accountability in those who cause harm:

- Provide education across courts, law enforcement, social services, and the whole community on how to identify survivors of domestic violence and what actions are helpful or unhelpful in promoting safety and accountability. This education should be delivered by outside experts not embroiled in the current system. It should include the following topics:
  - Domestic violence patterns
  - Believing survivors
  - Affirmation and empathy
  - Upholding autonomy
  - Labeling abusive behaviors
  - Overcoming taboo
  - Advocacy on behalf of survivors
- Provide or facilitate options for peer support groups, mentoring, and networking forums by survivors with lived experience.
- Make frequent contact with and provide support to survivors throughout the accountability process.
- Engage a variety of community-based options, including those that do not rely on courts.
- Provide prevention and early intervention services for families at the first signs of distress.
- Address unresolved trauma in those who cause harm.

## E. <u>Limitations</u>

The results of the focus groups and survey should be interpreted carefully. The Workgroup made every attempt to reach and include a larger number of adult voices from a more diverse range of participants in regard to gender, race, and ethnicity. Flyers and the survey were made available in eight languages, and potential facilitators were identified to hold focus groups in other languages. While the distribution of participant race and ethnicity was not greatly different from that of the Fairfax County population, the fact that there were relatively few non-White, non-female, non-English-proficient, young adult, or older adult participants limits the generalizability of the results. For brevity, anonymity, and privacy, participants were not asked if they were cisgender or about their sexual orientation, health information, income and education, or region of residence. However, these are likely important factors in survivor preferences. More information is needed regarding how to support accountability within specific marginalized communities.

Because of the relatively small and homogeneous participant sample and the wide range of responses, no central tendencies can be interpreted for most of the data. However, that wide range of responses clearly illustrates one important fact—that there is no single system or single approach to accountability that is generally preferred or even acceptable. Survivors who participated asked for a wide range of resources across a wide range of systems. According to these data, it seems that no vehicle of accountability should be dismissed.

The Workgroup considered that there were a number of potential reasons why many people were reluctant to participate in the focus groups. Reasons for this reluctance might include fear of involvement with law enforcement or government and language and cultural barriers. The Workgroup notes these same issues are at play when survivors are reluctant to access the law enforcement or courts. Breaking through these barriers and establishing greater trust with survivors will be key to any successful effort to expand accountability.

# F. <u>Comparison to Other Research</u>

To confirm data consistency, the results of the focus groups and survey were considered alongside the 2017 dissertation research of Workgroup member, Dr. Brenda McBorrough, "Developing a More Holistic Response to Survivors of Family Violence."<sup>2</sup> Dr. McBorrough's research included in-depth interviews and conversations with seven survivors in Northern Virginia who collectively had experienced every form of domestic violence and, in many cases, encountered multiple generations of family violence. Her sample was demographically complementary to this Workgroup's sample, with six African American women and one Hispanic woman, ages 36 to 75. The focus of Dr. McBurrough's project was on the need to break the silence on family violence and transform the church's response. Her results were consistent with several themes from the inquiry of this Workgroup. Specifically, Dr. McBorrough's participants cited the need to:

- Center survivor voices and engage survivors in viable responses
- Increase community awareness, education, and prevention
- Provide alternatives for accountability beyond law enforcement and courts
- Increase accessibility to resources

Concerning support for alternative sources of support and accountability, only one of the seven participants had engaged law enforcement or criminal courts. Three had disclosed to church leaders, but stated that the leaders' responses were not helpful.

<sup>&</sup>lt;sup>2</sup> Brenda B. McBorrough, "Developing a More Holistic Response to Survivors of Family Violence," DMin diss. (Palmer Theological Seminary of Eastern University, 2019).

An article published in the Journal of Interpersonal Violence<sup>3</sup> summarized the preferences and recommendations of 26 women in Baltimore, Maryland about the judicial system and accountability. Similarly to the women interviewed by members of this Workgroup in Northern Virginia, the women in the Baltimore study sought a variety of means for accountability, some involving retribution (carceral approaches relying on the justice system) and others involving restoration (such as the person who caused harm acknowledging responsibility, achieving safety and stability with the person who caused harm, and treating the person who caused harm toward rehabilitation). The women in the Baltimore study also cited the importance of getting away from a person who causes harm. Similarly to the Northern Virginia sample, the women in the Baltimore sample cited the limitations of the justice system and the fact that it does not address the root issues. All these studies together highlight the facts that survivors of domestic violence are not adequately served by any single solution and that the justice system is not designed to deliver some of the accountability outcomes they seek.

# G. <u>Implications</u>

Following are implications gathered from the above community input:

- Survivors vary in how much confidence they place in the community for accountability, but they agree that the current criminal justice system response is insufficient to promote accountability.
- Some people who experience domestic violence want more community involvement in accountability, and others fear being pressured by the community to stay in a harmful relationship or to take responsibility for moderating the behavior of the person who caused harm. People who experience domestic violence feel similar pressures from law enforcement and courts.
- Some survivors want a greater variety of methods for accountability, while others find it risky to stand by in the hope that a partner will change.
- No single approach is safe and effective in all cases. However, survivors want all entities involved in accountability to be educated about domestic violence and attuned to the needs and safety of survivors. Points of contact for accountability are diverse and need to be better equipped and coordinated in how they support people who experience domestic violence and promote accountability for those who cause harm.

## WORKGROUP RECOMMENDATIONS

The Workgroup developed its recommendations in three categories.

First is the establishment of a new, completely voluntary accountability system outside of the criminal justice system run by nonprofit community organizations with oversight from a nonprofit organization. No governmental agency would be involved in oversight or administration of the project, in order to maintain independence, except to ensure that public

<sup>&</sup>lt;sup>3</sup> Decker, M. R., Holliday, C. N., Hameeduddin, Z., Shah, R., Miller, J., Dantzler, J., & Goodmark, L. (2022). Defining Justice: Restorative and Retributive Justice Goals Among Intimate Partner Violence Survivors. Journal of Interpersonal Violence, 37(5-6), NP2844-NP2867. https://doi.org/10.1177/0886260520943728

funds are used in a manner consistent with their intended purpose. This Workgroup recommends that public funding be conditional upon the recipient organization setting and achieving measurable targets consistent with the purposes set forth in this report and with ongoing guidance from an advisory board that includes representation by persons who have experienced domestic violence.

Second are continued improvements to the existing court-related programming administered largely by the Juvenile and Domestic Court and county agencies. These recommendations—which include the implementation of a domestic violence accountability docket, sanctioning and sentencing guidelines, measures aimed at repairing harm, additional education and support for those who cause harm, and informational pamphlets to help all parties navigate law enforcement and court processes—are considered complementary to existing efforts within the court to improve its services.

Third are recommendations for enhancing existing post-incarceration programs through enhanced collaboration between county agencies, law enforcement, the courts, and nonprofit partners.

# I. The Establishment of a Community-Based Accountability System

This is a draft proposal for a pilot program in Fairfax County. This program would develop and maintain a system of community alternatives to address domestic violence outside of the current police and judicial system responses.

A. <u>Need</u>

We know through anecdotal information from Workgroup members, qualitative data from focus groups, and some survey results that many persons who experience domestic violence and persons who cause harm would welcome an accountability system that seeks to heal injury, holds accountable those who cause harm, prevents further harm, and provides for the potential of a continued relationship free from violence when sought by both parties. Some persons experiencing domestic violence *prefer* an option that supports accountability in the person causing them harm and does not rely upon police or the judicial system. We know that the current public safety system is not equipped to provide these options.

Despite the existence of several domestic violence intervention program providers in Fairfax County who accept voluntary participants, few people volunteer to participate, which indicates that the public does not typically seek these types of programs to address domestic violence, outside of a court referral. This is likely due to several factors including, but not limited to, the perception that these programs are inextricably linked to the judicial system, lack of culturally specific options, and difficulty spreading information about these programs to subcommunities within Fairfax County.

Research on certain community-based programs in other jurisdictions has shown that community-based interventions can effectively engage people who are not court-ordered toward accountability. These programs engage the social systems that are not only trusted by and influential to the person who caused harm, but also important for survivor safety. For example, participants and other parties involved in a non-mandated, tailored Respect and Responsibility program in New York City said in surveys and focus groups that the program had increased self-awareness, understanding of abusive behaviors, and social support among participants.<sup>4</sup>

There are opportunities to promote accountability in communities as well as accountability with those who cause harm. Some communities experience inequities that isolate and compound harm. These communities experience the negative effects of domestic violence and are best positioned to influence change. When communities address barriers that isolate and cause harm, they create resilience that can engage change and promote safety. Domestic violence prevention can be more than just stopping harm. It can build stronger, healthier, peaceful, and more just communities.

#### B. <u>Design</u>

An alternative accountability system would be completely voluntary (by both parties) and outside of any court, public safety, or governmental accountability system. It would rely on family, faith groups, neighborhoods, community groups, and other non-governmental partners, with the assistance of trained personnel operating out of the nonprofit sector. Based on the successful community-led interventions of Project RISE (Reimagining Intimacy through Social Engagement) in New York, a nonprofit organization,called "the Hub", would provide staff support to accountability groups (which could include extended family, faith communities, neighborhoods, men's clubs, or other community groups) that work on a case-by-case basis with all parties involved in domestic violence to bring about attitudinal and practical change. Those causing harm would have goals and targets, with the group providing guidance and accountability. Those causing harm would be engaged in the accountability process in ways other than arrest and incarceration. The Hub organization would provide guidelines, training, and assessment services.

This design would equip trusted community institutions to support accountability in a way that increases self-determination and safety for survivors. This would include culturally specific institutions that are relevant and trusted by the community.

## C. <u>Goal</u>

The goal of a community-based response system is to create and maintain sites where domestic violence accountability programs can be tailored to cultural and/or personal differences, while maintaining the integrity of the principles of domestic violence accountability and survivor self-determination and safety. The goal for the pilot would be for a nonprofit organization (the Hub) to conduct community outreach and develop a framework and resources that community-based organizations could use to promote accountability within their settings, incorporating these organizations into an expanded coordinated community response to domestic violence. It would be the goal of this nonprofit to launch a pilot under which it would identify and develop up to five community-based organizations willing to stand up accountability

<sup>&</sup>lt;sup>4</sup> S. Ervin, S. Nembhard, & C. Nmai (2024). *Research Report: A New Nonmandated Program for People who Cause Intimate Partner Violence*. Urban Institute, Washington, DC.

programs, each from a unique community inside Fairfax County. It will be important for the County to define for the Hub how an advisory board should be assembled and the process for choosing the five community-based organizations.

# D. Mechanism

The Hub would be identified by the County via application and vetting, to serve as the convener for the community-based accountability sites. The roles of the Hub would be as follows:

- Develop a framework based on best practices for accountability for those who cause harm that adheres to domestic violence programming principles and is culturally flexible.
- Ensure all relevant entities are consulted, as feasible, in the design and administration of the program.
- Recruit community leaders to develop community-based accountability programs, including, but not limited to, places of worship, neighborhood and community centers, and existing community support groups.
- Provide initial education and ongoing consultation to the program providers for educational programming, group and individual support, services for couples and families, and/or peer-based programs.
- Educate leaders and sites on discussing domestic violence and safely recruiting participants.
- Develop guidelines with tools to assess and respond to risk of harm and to ensure that the needs of the individual fall safely within the scope of the program.
- Maintain guidelines for all providers that meet evidence-based practices and the principles of domestic violence accountability and survivor/ self-determination and safety.
- Evaluate and maintain a current list of trained community-based accountability program sites.
- Organize regular opportunities for program providers to discuss insights, challenges, and success stories with one another.
- Conduct outreach to survivors and other community partners by developing opportunities to educate the community about domestic violence and the community-based accountability options available.
- Continue to assess factors contributing to domestic violence and barriers to survivors accessing support.
- Assist with recruitment and training of additional qualified volunteers to support community-based accountability.
- Educate community leaders on how to find or become a trained program provider.
- Maintain a list of domestic violence resources that can be accessed by program providers, community leaders, and survivors in the community.
- Measure and report data related to impact and efficacy.
- Reshape social norms in the community to address domestic violence.

• Ensure the protection of the confidentiality and privacy of individuals from the community who contribute to the program.

# E. Funding and Support

Pilot funding for the program would be provided via grant through Fairfax County.<sup>5</sup> Organizations interested in functioning as the Hub would apply and use the funds for staff, training materials, informational and educational materials, and evaluation materials. In the future, fundraising and other grant applications would be used for continued funding.

Several existing community-based accountability programs have been identified as potential sources of information for the Hub. These include the Center for Justice Innovation (CJI), The Collective Healing and Transformation (CHAT) Project restorative justice circles, the RISE Project, Respect and Responsibility, and Neighborhood and Community Services youth programs.

# II. Recommendations on Improving Accountability Within the Judicial System

# A. <u>Scope</u>

While there is no one size fits all response when it comes to domestic violence, there are ways to ensure that the process is consistent in determining the needs of each defendant and victim, which services or programs are appropriate, and compliance while being monitored. Court Services should be used as a mechanism to promote accountability, increase survivor safety, and improve outcomes for all parties involved including the defendant, survivor, children and the family unit as a whole.

The proposed judicial system improvements in this report are geared toward enhancing current accountability programming and systems as well as adding new evidence-based programs that will improve outcomes for people who experience domestic violence. Included in these recommendations are the implementation of a domestic violence accountability docket, sanctioning and sentencing guidelines, measures aimed at repairing harm, additional education and support for those who cause harm, and informational pamphlets to help all parties navigate law enforcement and court processes.

# B. <u>Demonstration of Need</u>

Currently, defendants who are placed on pretrial and probation supervision in Fairfax County do not get any domestic violence related risk assessments through Court Services. The evidence-based risk assessments that are conducted as a requirement of the Department of Criminal Justice Services (DCJS) for all local pretrial and probation services do not sufficiently address the risks and needs specific to incidents involving domestic violence.

Additionally, there is no formal court process to follow up on a defendant's progress while on court-ordered supervision. When the Court is notified of non-compliance through

<sup>&</sup>lt;sup>5</sup> The FY 2024 Carry Over package, which would be brought before the Board of Supervisors in September 2024, is one possible source of funding for the pilot program.

affidavits filed by Court Services, the violations are often dismissed or nolle prosequi. There is no data on why this occurs. It could be, in part, that the probationer brought themselves back into compliance by the time the case came to court. It could also be that the pretrial or probation officers did not receive notice of court dates and subsequently were not present when the case disposition occured. This also happens with motions filed by the defendants' counsel to amend court orders. The result of this is that, at times, the Court does not hear directly from the pre-trial or probation officer who would be able to provide supporting arguments to the violation and make recommendations on any further need or risk factors that should be addressed.

There is another trend toward plea deals between the Commonwealth Attorney's Office and defense counsel that include treatment or a program but not pretrial or probation supervision. This presents many challenges for both the defendant and the treatment program service provider. Without supervision, the defendant is on their own to navigate the process of locating an appropriate program, enrolling in the program, and ensuring the Court receives the appropriate documentation upon completion. Defendants are not generally aware of the State Certification Curriculum for Domestic Violence Intervention Programs or which programs have such certification. They also may not be assessed for additional criminogenic risks or needs that may hinder progress in such a program. This presents a hardship on the program if there are issues with compliance or other barriers keeping the defendant from being successful in the program. A pretrial or probation officer assigned to assist these cases would help to alleviate many of these issues and lead to more successful outcomes.

In addition, if the defendant is not placed on probation as a part of the Court's order, they do not receive the full extent of the services available to help them improve their lives and become more productive members of the community and better members of their families. Community Corrections pretrial and probation officers, using motivational interviewing and other evidence-based practices, often go beyond what is ordered on the bench and assist the defendant with the creation of a Case Service Plan. Goals are set and the probation officer works with the defendant to help them succeed in reaching those goals. These goals vary but can include household budgeting (many domestic disputes occur due to a lack of household funds), job placement, employment training, substance abuse counseling (when not already ordered but deemed necessary), obtaining a driver's license and more.

The focus groups conducted with survivors as part of this Workgroup highlighted their experience with the court system and concluded that some did not feel their voices were centered. There also have been instances where a survivor does not show up for court as a witness and the charges are subsequently nolle prosequi with no follow-up on why the victim had missed court. There is no formal process in place to follow up with the survivor after completion of a case to gather data on success.

The Workgroup identified the gathering of data to measure the success of our court processes as a significant challenge. First, there is no generally recognized measure of success. Is it the number of offenders who are not arrested again for a year? Two years? Is it arrests or convictions? How does one measure partial success? Without agreement on the definition of success, measuring success is most challenging. It is also difficult to track those who cause harm and those who experience domestic violence. Project Mirabal noted that this was a significant barrier to program assessment.<sup>6</sup> Absent a requirement to provide contact information and to respond to inquiries, some of those who cause harm leave the area or simply move on. One idea for measuring success could be to follow up with domestic violence intervention program participants and those who were harmed to ask the question, "did it work?" While the question is subjective, responses could capture those situations where there was some measure of success or failure beyond simply re-arrest or subsequent conviction. Project Mirabal noted in their report that they were able to survey and interview survivors because national accreditation standards in the United Kingdom require Domestic Violence Perpetrator Programs (equivalent to Batterer Intervention Programs – "BIPs" - in Virginia) to provide professional support to survivors connected to program participants. However, Virginia BIP accreditation standards only require that the survivor be informed, and Fairfax County BIPs represented on the Workgroup have observed that most survivors decline to engage in further conversation with professionals calling on behalf of a BIP. Such could make it infeasible to rely on survivors for BIP efficacy data.

# C. Implementation of a Domestic Violence Accountability Docket

A domestic violence accountability docket could create pathways to better partnerships among relevant entities through a Domestic Violence Coordinated Court Response Team that includes designated members of the:

- Judiciary
- Commonwealth Attorney's Office
- Public Defenders Office or other defense attorney
- Victim Services/Victim Advocate
- Law Enforcement
- Court Services
- Child/Adult Protective Services, if involved
- Domestic Violence Intervention Program Service Provider
- Other Service Providers

The coordination of involved entities in a domestic violence accountability docket would provide a better understanding of the case-specific risks, needs, and responsivity factors that drive violent behavior. This would assist in identifying appropriate responses and programming to promote accountability. A docket would also significantly reduce the incidence of probation violations being heard and dismissed without a probation officer present to provide testimony and recommendations.

Cases would be identified to be assigned to the docket at arraignment or advisement or when the first court date is set. Input would be given from all involved entities in each case on a coordinated action plan to be considered as part of the plea or disposition. The Victim Impact Statement would include the victim's proposed action plan, which would be taken into

<sup>&</sup>lt;sup>6</sup> L. Kelly & N. Westmarland (2015). Domestic Violence Perpetrator Programmes: Steps Toward Change. Executive Summary of Project Mirabal. https://projectmirabal.co.uk/wp-content/uploads/2020/06/ProjectMirabalexecutivesummary.pdf

consideration for sentencing. A uniform court order would be filled out by the Domestic Violence Coordinated Court Response Team prior to being presented to the judge. Judges could make any adjustments as they see fit. After sentencing, a review set every 60-90 days would address ongoing compliance and progress; the timeframe could be increased or decreased based on progress.

Measures would need to be identified to reflect current outcomes for survivors involved with the court and to reflect the impact of the accountability docket. Additional funding and resources would be needed for the staffing and facilities to administer the docket.

# D. <u>Sanctioning and Sentencing Guidelines</u>

Sanctioning and sentencing guidelines can balance consistency and accountability. Guidelines are not required but can provide creative ways to address non-compliance while addressing needs and barriers. A partner organization can provide examples of sanctioning matrices.

# E. <u>Court-Ordered Restitution</u>

In an effort to repair the harm caused by domestic violence, a provision would be included as part of the court order that the person who caused harm be required to "fix" what was damaged. This refers directly to property damage, monetary losses, physical damage, or any other harm caused by the violence. Visual reminders such as property damage can delay healing and, if left unaddressed, can contribute to ongoing trauma.

# F. Domestic Violence Intervention Pre-Class, Waitlist Groups, and Jail Groups

The purpose of a domestic violence pre-class, such as the three-hour Tactics and Choices class used in Georgia, is to introduce what the full certified program includes. This educational class offers specific program information and touches on some of the main topics in the certified class. This class is not an intervention but should be used during the pretrial phase of a case to prepare the defendant for the full program, which would be ordered as part of the post-dispositional phase. This class could also be used post disposition as part of the probation intake. It could be offered by Court Services with facilitating staff who have obtained specialized training and/or certification, or it could be added as part of the intake with a certified domestic violence intervention program.

Waitlist groups are mostly educational with the structure of a support group. These groups can be held in Court Services with specially trained staff or be added to a local certified domestic violence program curriculum. Waitlist groups can be used after the offender has attended the three-hour pre-class and while they are awaiting a certified domestic violence program to start. Waitlist group models have been used by the Community Services Board when a defendant was assessed and recommended for substance abuse services but there was a waitlist. Jail domestic violence groups provide domestic violence education while a defendant is incarcerated awaiting trial or serving a sentence. Funding for additional staff and materials would be needed to implement these programs in Fairfax County. They could be staffed by probation officers, possibly in collaboration with other local domestic violence intervention providers. The specific curriculum and model for waitlist and jail-based groups would need to be identified.

## G. <u>Informational Pamphlets for Victims and Defendants on Statutes and Rights</u> <u>During the Law Enforcement and Court Processes</u>

Informational pamphlets can help those who experience domestic violence and those who cause harm to navigate the court system and the array of available services in the community. Pamphlets for victims might include information about services available to them, how to contact the professionals involved, their rights pertaining to protective orders, and other pertinent information. Pamphlets for defendants might include information about statutes involving weapons possession, protective order compliance, how to contact service providers or officials, and other important information. These pamphlets would be handed to the victim or defendant in court. They could also be more widely distributed in police stations, community centers, libraries, and other gathering places to reach a larger audience.

## III. Recommendations on Improving Post-Incarceration Systems

## A. <u>Scope and Need</u>

Within the current system, some individuals convicted of a domestic violence charge are sentenced to probation or to jail time plus probation, while others are ordered to be on good behavior with no probation or jail time. There are three probation departments that serve clients ordered into probation supervision in Fairfax County: two local Community Corrections units and State Probation and Parole.

If probation is ordered, a risk assessment may be conducted to determine risk and needs; this may result in a referral for treatment. Often, an individual is court-ordered to complete a certified Batterer Intervention Program (BIP). Timeframes for enrollment and completion are set by the Court, Probation, or both. Occasionally, a review date is set by the Court at the conclusion of the probation term to check on progress, but most of the time the court review date is set on the administrative docket where the file will be reviewed without any of the parties present. A probation officer makes a client referral to a BIP, either directly or by providing a list of BIP options (such as ADAPT, OAR, and Northern Virginia Family Service). The service provider sends monthly reports and completion or noncompliance reports to the probation officer, following guidelines from the Virginia Batterer Intervention Program Certification Board standards.

Relationships between probation officers and service providers allow for clients to receive tailored care once they are enrolled in a BIP program. Deadlines set by the courts and probation departments tend to be more flexible than pretrial deadlines. This allows clients-who are experiencing challenges in the program to participate in individual sessions, complete extra sessions, or start the program over, instead of being discharged from the program. Individuals are often screened for other risk factors by probation before being referred to services. During the

referral process, the probation officer may provide additional information to support the client's successful completion of services. A barrier to this information sharing exists, however, as the current Code of Virginia significantly restricts the ability of probation officers to share certain information. The confidentiality of local adult probation and pretrial agencies records and reports are governed by Va. Code §§ 9.1-177.1 and 19.2-152.4:2. These codes restrict the sharing of information to anyone not classified as a Criminal Justice Agency as defined in section 9.1-101.

#### B. <u>Pre-Release Access to Services</u>

Pre-release services should be available for both parties, to support those who continue to be in relationship post-release. Coordinated efforts by the Adult Detention Center, Department of Corrections, Probation Services, and certified BIPs are needed so that those who cause harm and are incarcerated can receive programs and services pre-release. This should include the certified BIP and other wraparound services. Since the parties involved in domestic violence may be in contact for the duration of the incarceration, having the support of services during incarceration can better support safety in the relationship post-incarceration.

For survivors who want to maintain their relationship with the person who is incarcerated, support services could be specifically tailored to prepare for the relationship to resume in-person. Services such as relationship counseling could be available for those who have completed a BIP and demonstrated accountability for the harm they caused and are now in a place where they may repair the relationship. When there has been domestic violence, couples' therapy is indicated only when both partners are freely willing, when they feel safe to be candid and direct with each other, and when the person who caused harm has already made deep and lasting individual change to prevent any form of future domestic violence. The purpose of couple's therapy should never be for the survivor to assume any responsibility for the other partner's behavior but to manage stress and conflict, improve communication, and heal emotional wounds.

Funding for jail-based programming would need to come from sources other than participant fees. Funding would be required for qualified staff and training. The impact of such programming would need to be measured.

#### C. Housing, Mental Health, and Substance Use Services

People who have caused harm need access to affordable housing when they are released from jail so that families are not pressured to live together before they feel safe and ready to do so. Families experiencing domestic violence sometimes need a temporary separation to prevent escalation. This separation may extend beyond the time when the person who caused harm is released from jail. There is currently no emergency housing option for those who cause harm, and funding for housing programs is insufficient to meet the needs of families in the county who are experiencing domestic violence and need to live apart temporarily. Mental health and substance use disorder evaluation is needed post-incarceration before a referral to a BIP. This provides BIP providers with more information about the client's current mental health and substance use treatment recommendations. Unaddressed mental health and substance abuse issues can delay those who cause harm from entering BIP programming, delaying safety for the survivor and community. Once these evaluations are completed, if services are recommended, there are additional barriers in our community. There are limited service options available for those who are uninsured or do not meet the Community Services Board criteria for admission to mental health or substance use disorder treatment.

## D. <u>Coordination and Communication</u>

Coordinated efforts are needed to ensure that all parties involved are apprised of all programming options, how each program operates, and how the clients can be supported in the programs. This can be achieved with more representation on the Virginia Batterer Intervention Program Certification Board and a dedicated website for families dealing with domestic violence that includes information about local services such as certified BIP programs in Fairfax County and how to access them.

It would also be beneficial to have an ongoing workgroup that includes all stakeholders involved in the community coordinated response to domestic violence. This would allow for information sharing and staffing of circumstances that arise where there is a need for a unique approach. Information sharing is crucial to success in cases where clients are ordered to probation.

Information sharing is essential to the success of most programs. We recommend that the Va. Code §§ 9.1-177.1 and 19.2-152.4:2 be amended to allow information sharing between local adult probation and pretrial agencies and service providers. Collaboration between these parties is crucial to support client treatment and accountability, and consequently contributes to survivor and community safety.

## E. Increased Flexibility

More flexibility in program structure is needed to allow individualized services. Rather than offering a one size fits all approach to treatment, participant level of care should be based on an initial risk assessment. If a participant's risk elevates while in treatment, the participant should be shifted to a higher level of care to extend services. Examples include a structure where higherrisk individuals can attend class twice per week at first and then step down as their risk level decreases. Alternative options—such as one-on-one services in cases where this modality of treatment is clinically appropriate to address the risk and meet the needs of the client—must also be available without burdening the participant with additional cost.

Occasionally, a person, most often a woman, uses force in response to domestic violence against them, resulting in criminal charges and court-ordered treatment. BIP providers require the flexibility to customize treatment appropriately for such survivors who use force or to recommend alternative services where indicated, to achieve accountability and safety and to satisfy court orders.

Some of these changes would require additional funding, as many participants cannot afford the market rate for weekly individual therapy services.

#### F. Court Orders for BIPs

Information about the difference between BIP services and anger management should be provided to judges. A BIP is the recommended treatment to address domestic violence, while anger management is contraindicated to address domestic violence. Judges should consistently require a BIP, rather than an anger management program, for all domestic violence cases.

It is further recommended that judges add language to court orders regarding "completing a BIP assessment and following all recommendations" of a BIP service provider, rather than simply "completing a BIP," as clients sometimes need other services to address their risk and needs before a BIP is appropriate. BIP services are not sufficient to meet clients' needs when they are experiencing mental health issues and substance use disorder. In those cases, a BIP provider may refer a client to complete mental health and/or substance use disorder treatment prior to complete BIP services. Existing services in the community can be leveraged for these purposes. However, as indicated above, there are limited mental health and substance use services for clients who are uninsured or do not present with symptoms that meet the Community Service Board criteria for services.

#### CONCLUSIONS

While Fairfax County has made substantial progress toward ending domestic violence, assisting survivors, and promoting accountability in those who cause harm, there remains much work to be done. Not every survivor is heard. There are limited resources and options to promote accountability in those who cause harm. Systems are antiquated and stretched. Our proposals would strengthen significantly our current capacities to achieve our goals.

The survivor voices we heard cited the limitations of the criminal justice system and current community systems; they seek a more responsive community with a variety of options and resources. Anecdotal evidence also indicates some of those who cause harm and the families and communities around those involved may welcome an approach outside of government and law enforcement, thereby increasing the chances of success in some circumstances. Without a community-based option, survivors who are not adequately served by the criminal justice system are left without recourse and continue to experience harm. To provide a community-based option, we propose the County launch a pilot program to establish an alternative accountability system outside of the criminal justice system. Managed by a nonprofit hub, this system would be entirely voluntary and would seek to involve the greater community in the effort to hold accountable those who cause harm in new and different ways. We propose the County allocate sufficient funding in its FY 2024 carry-over package to launch this pilot project as outlined above.

Our existing court-supervised system would be enhanced through the establishment of a domestic violence accountability docket. The docket would be managed through a Domestic Violence Coordinated Court Response Team where survivor voices would be included in identifying accountability measures. Team oversight of the docket would complement probation oversight. Efforts to promote accountability would include repairing harm. In addition, a

domestic violence certified program could be used through probation or a jail-based program for those incarcerated. All of these efforts would require increases in funding on a long-term basis.

Post-incarceration systems can be improved by beginning services, such as BIP programs and wrap-around services, during periods of incarceration. Housing is required for some upon release. Probation officers need further training and earlier access to information. Mental health assistance and substance use screening is needed on a larger scale. Programs should be more flexible and individually tailored. As part of an ongoing effort to avoid recidivism, judges should focus on requiring adherence to BIP recommendations and not just completion of the program.

We hope these recommendations are of value to the Council and the community as they continue to improve efforts to end domestic violence.