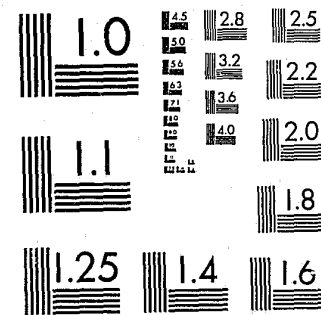


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United States Department of Justice
Washington, D. C. 20531

5-27-82

M 4500.1F
December 21, 1977

OMB APPROVAL NO. 43-R0223

U. S. DEPARTMENT OF JUSTICE LAW ENFORCEMENT ASSISTANCE ADMINISTRATION		CATEGORICAL GRANT PROGRESS REPORT	
GRANTEE South Florida Family Violence Program 1351 N.W. 12 Street, Miami Fla. 33125	LEAA GRANT NO. 78-DF-AX-0106	DATE OF REPORT 7/14/81	REPORT NO. 9
IMPLEMENTING SUBGRANTEE Janet Reno, State Attorney Eleventh Judicial Circuit 1351 N.W. 12 Street, Miami, Fla. 33125	TYPE OF REPORT <input type="checkbox"/> REGULAR <input type="checkbox"/> SPECIAL REQUEST <input checked="" type="checkbox"/> FINAL REPORT		
SHORT TITLE OF PROJECT Domestic Intervention Program	GRANT AMOUNT \$404,132		
REPORT IS SUBMITTED FOR THE PERIOD 10/1/78	THROUGH 11/30/80		
SIGNATURE OF PROJECT DIRECTOR	TYPED NAME & TITLE OF PROJECT DIRECTOR Joan Svaldi Farr, Director		

COMMENCE REPORT HERE (Add continuation pages as required.)

See enclosures

U.S. Department of Justice
National Institute of Justice

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Further monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing regulations (FNC 74-7; Omnibus Crime Control Act of 1976).	
BY GRANTEE STATE PLANNING AGENCY (Official)	DATE

458771 (REV. 2-77)

REPLACES EDITION OF 10-73 WHICH IS OBSOLETE.

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Page 1

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DOMESTIC INTERVENTION PROGRAM

Introduction

There is no single more perplexing problem facing the urban criminal justice system than that category of offenses collectively labeled as domestic violence. Domestic violence refers to any kind of family - related physical abuse involving members of the same family or household as both victim and offender.

Surveys consistently show that domestic disturbances represent the largest single category of calls that most police departments receive. During 1975, an estimated 20,510 murders and 484,710 aggravated assaults were reported to the police in the United States. As reflected in the FBI Uniform Crime Reports:

"Approximately two-thirds of all murders were committed by relatives, friends, or acquaintances of the victim; more than half of these family killings involved spouse killing spouse".

Domestic disturbances represent a danger not only to the participants but also to the police officers who respond to these calls. More than 15% of the law enforcement officers killed in 1975 were responding to domestic disturbance calls.

Domestic Violence in Dade County

In order to measure the volume of domestic violence cases in the Dade County Criminal Justice System, the State Attorney's Office undertook a sampling of felony and misdemeanor cases processed by Dade County courts during a two week period in March, 1978. This study yielded the following results:

1. fully 30% of the total number of offenses directly arose from incidents of domestic violence;
2. aside from the traditional categories of offenses associated with domestic violence (aggravated assault, aggravated battery, child abuse), a substantial number of other categories of offenses (burglary, battery on police officers, resisting, etc.) are directly attributable to incidents involving domestic violence.

In addition to this sampling, the State Attorney's Office along with the Dade County Medical Examiner undertook a study of the 4,736 homicides which have occurred in Dade County in the 21 year period since 1956. A sample of 821 of these homicides was examined and yielded the following conclusions:

1. 49% of the homicides occurred within the household of the victim;
2. in 39% of the homicides, the motive for the killing was a domestic argument between the assailant and victim.

In an effort to address the problem, the Office of the State Attorney convened a series of planning meetings with representatives from all components of the criminal justice system. The purpose of these meetings was to design a program for the victims and the offenders involved in domestic violence in Dade County. Based on that design, on July 1, 1978, the Domestic Intervention Program began operations jointly funded by an LEAA discretionary grant and the Office of the State Attorney for the Eleventh Judicial Circuit. The total award from LEAA of \$404,132 was matched by local funding from the State Attorney's Office in the amount of \$87,262.

Program Description

The primary goal of the Domestic Intervention Program is the reduction of domestic violence within Dade County, Florida. The Program has sought to attain this goal through a two-pronged approach to service provision:

1. establishment of a Pre-Arrest Prevention Program specifically designed for domestic violence cases requiring community crisis intervention as an alternative to the "no-arrest" or "non-action" police response;
2. establishment of a Post Arrest Diversion Program specifically designed for defendants in domestic violence cases as an alternative to the traditional prosecution response.

The establishment of these two Program components required the creation of an efficient and effective treatment process which addresses the victim, the abuser, and the family unit and within the context of which advocacy for comprehensive and system-wide services may be provided.

An Organizational Chart and a Comparative Overview of the Program Components appears in Appendix 1.

Pre-Arrest Component -

In December, 1978, a subcontract was entered with the Dade County Victim's Advocate Program for the purpose of establishing the Pre-Arrest Component of the Program.

The purpose of creating a Pre-Arrest Unit may be described as two-fold:

- A. to provide immediate crisis intervention counseling and referral to appropriate treatment;
- B. to provide police officers who respond to domestic scenes with an alternative other than the existing choices of arrest or inaction.

The integration of the four Pre-Arrest Unit Counselors into field crisis intervention work in coordination with police officers proved to be a difficult process requiring considerable cross-training and experimentation.

During the period from January through March, 1979, the four Pre-Arrest Unit Counselors were assigned to train

with the Safe Streets Unit of the Dade County Public Safety Department. This unit is comprised of police officers who have been trained as specialists in on-the-scene crisis intervention in response to intra-family crimes.

As a result of this extended period of applied training, the Program, in consultation with police officials and the Victim's Advocate Program, re-assessed the crisis model of this Component. In an effort to ensure the safest, most efficient, and most effective use of Program personnel in coordination with law enforcement agencies, the conclusion was reached that the Pre-Arrest Unit Counselors were best equipped to receive referrals within 24 hours of the domestic incident rather than on the scene. That is, referrals would be made soon after the incident, but sufficiently later to reduce the potential for recurrence of the violence while the Counselor is on the scene but lacking the benefit of police presence. The two-fold purpose of the Pre-Arrest Unit remains intact and valid. Police officers who respond to domestic incidents have learned to use the skills of Pre-Arrest Unit Counselors to provide the in-depth crisis intervention and treatment which the demands of police work preclude the officer from providing. At the same time, the Pre-Arrest Counselors clearly recognize the province of the police officer in immediate, on-the-scene response. Police officers routinely route the victims of domestic incidents to the Program office on a day-after basis as an alternative to inaction.

In the Pre-Arrest Component, the point of entry into the violent family is the victim of domestic violence. In all cases, the approach to the provision of services is two-fold:

- A. the provision of treatment for the victim, and if possible the batterer, via family therapy and/or counseling;
- B. the utilization of portions of the justice system, both civil and criminal, to bring the violence under control such that the therapy or counseling may be of benefit to the victim. This includes obtaining Temporary Restraining Orders under Florida Statute 741.30 for victims as well as acting as an advocate for the victim in criminal proceedings against the deft.

In preparation for the opening of intake in March, 1979, the Pre-Arrest Unit Counselors undertook a review of the 1978 files of the Safe Streets Unit. A total of 464 domestic violence recidivist cases were researched with respect to case-descriptive data. These hard-core, repeater cases were contacted by the Pre-Arrest Unit Counselors. While many of those who could be contacted rejected Program services,

the initial intake population for this Unit was comprised of these recidivist cases, perhaps the most difficult cases handled by the Safe Streets Unit.

During the initial period of operation, March 1 through December 31, 1979 (10 months), a total of 306 actual referrals were made to or were contacted by the Pre-Arrest Component. A total of 124 cases accepted or were accepted for Program services in the Pre-Arrest Unit. In comparison, during the second year of operation from January 1 through December 31, 1980, a total of 347 cases were accepted for Program services, a number nearly triple that of cases accepted for services in the previous year of operation. This dramatic increase in Pre-Arrest Unit intake may be construed as a reflection of the acceptance the Unit has earned within the community.

Below appears a summary of the Pre-Arrest Unit 1979-1980 Case Data for purposes of comparison.

Pre-Arrest Unit Data

<u>Report Period</u>	<u>Description</u>	<u>Number of cases</u>
<u>1979</u> (March 1 - December 31)	<u>Intake</u>	124
	<u>Dispositions</u>	75
	Unsuccessful Terminations	18
	Successful Completions	57
	<u>Active at the close of 1979</u>	49
<u>1980</u> (January 1 - December 31)	<u>Intake</u>	347
	<u>Dispositions</u>	356
	Transferred to Post Arrest	3
	Unsuccessful Terminations	95
	Successful Completions	261
	<u>Active at the Close of 1980</u>	37
<u>1980</u> (January 1 - December 31)	<u>Temporary Restraining Orders</u> Prepared and Entered	86

SOUTH FLORIDA FAMILY VIOLENCE PROGRAM
SHORT TITLE: DOMESTIC INTERVENTION PROGRAM
PRE ARREST UNIT 1979 PARTICIPANTS

DEMOGRAPHIC DATA

SUBJECT: VICTIM:

<u>Sex:</u>	#	%	#	%
Male.....	112	90%	10	8%
Female.....	12	10%	114	92%
Total	124	100%	124	100%

Racial/Ethnic Group:

Black.....	76	61%	78	63%
White.....	32	26%	27	22%
Spanish.....	15	12%	18	14%
Other.....	1	1%	1	1%
Total	124	100%	124	100%

Age:

Less than 18..	1	1%	3	2%
18.....	0		3	2%
19.....	3	2%	2	2%
20.....	3	2%	1	1%
21.....	6	5%	6	5%
22.....	1	1%	11	9%
23.....	3	2%	5	4%
24.....	1	1%	2	2%
25.....	5	4%	7	6%
2630.....	26	21%	27	22%
3140.....	48	39%	34	27%
4150.....	21	17%	18	14%
51+.....	6	5%	5	4%
Total	124	100%	124	100%

Case Descriptive Data

<u>Relationship Between Subject & Victim (s):</u>	<u>#</u>	<u>%</u>
Husband/Wife.....	78	63%
Ex Husband/Ex Wife.....	15	12%
Boyfriend/Girlfriend.....	19	15%
Parent/Child.....	8	7%
Other.....	4	3%
Total	124	100%

Living Arrangements:

Together.....	57	46%
Separately.....	67	54%
Total	124	100%

Referral Source:

Public Defender.....	2	2%
Prosecutor.....	1	1%
Private Attorney.....	2	2%
Victims; Advocate Program.....	1	1%
Comprehensive Alcohol Program.....	1	1%
Police.....	22	18%
Safestreeets.....	13	10%
Safespace.....	9	7%
Health & Rehabilitative Services.....	3	2%
Paralegal Unit.....	28	22%
Self Referral.....	28	22%
Other.....	12	10%
Total	124	100%

Program Services (may be multiple):

In Program Counseling.....	111	90%
Family Life Center.....	18	14%
Child Abuse Treatment.....	3	2%
Safespace.....	4	3%
Comprehensive Alcohol Program.....	3	2%
Other (Legal Services, Housing, Police, etc.)...16		13%

1979 DATA

PRE-ARREST UNIT CLOSED CASES

Case Dispositions:

Case Descriptive Data

Voluntary Withdrawals.....	10	13%
Unsuccessful Terminations.....	8	11%
Successful Completions.....	57	76%
Total Case Dispositions	75	100%

Length of Program Participation:

Brief Service Cases:

0-1 Week.....	11	15%
1-2 Weeks.....	4	5%
2-3 Weeks.....	1	1%
3-4 Weeks.....	8	11%
Subtotal	24	32%

Long Term Service Case:

1-2 Months.....	11	15%
2-3 Months.....	14	19%
3-4 Months.....	14	19%
4-5 Months.....	8	11%
5-6 Months.....	1	1%
6-7 Months.....	1	1%
7-8 Months.....	2	3%
8-9 Months.....	0	0%
Over 9 Months.....	0	0%
Subtotal	51	68%

RECAP:

Brief Service Cases.....	24	32%
Long Term Service Cases.....	51	68%

SOUTH FLORIDA FAMILY VIOLENCE PROGRAM
SHORT TITLE: DOMESTIC INTERVENTION PROGRAM
PRE ARREST UNIT 1980 PARTICIPANTS

DEMOGRAPHIC DATA

SUBJECT:	#	%	VICTIM	#	%:
<u>Sex:</u>					
Male.....	333	91%		33	9%
Female.....	34	9%		334	91%
Total	367	100%		367	100%

Racial/Ethnic Group:

Black.....	180	49%		181	49%
White.....	104	28%		105	29%
Spanish.....	81	22%		77	21%
Other.....	2	1%		4	1%
Total	367	100%		367	100%

Age:

Less than 18...	11	3%		7	2%
18.....	3	1%		6	2%
19.....	4	1%		5	3%
20.....	10	3%		12	3%
21.....	4	1%		11	3%
22.....	8	2%		6	2%
23.....	16	4%		20	5%
24.....	10	3%		20	5%
25.....	19	5%		13	4%
26-30.....	95	26%		88	24%
31-40.....	102	28%		98	27%
41-50.....	57	15%		59	16%
51+.....	28	8%		22	6%
Total	367	100%		367	100%

Case Descriptive Data

Relationship Between Subject & Victim(s):	#	%
Husband/Wife.....	249	68%
Ex Husband/Ex Wife.....	19	5%
Boyfriend/Girlfriend.....	61	17%
Parent/Child.....	22	6%
Step Parent/Step Child	1	1%
Siblings.....	4	1%
Other.....	11	3%
Total	367	100%

Living Arrangements:

Together.....	178	49%
Separately.....	189	51%
Total	367	100%

Referral Source:

Public Defender.....	1	-
Prosecutor.....	53	14%
Private Attorney.....	2	1%
Court.....	18	5%
Police.....	91	25%
Safestreeets.....	0	0%
Victims; Advocate Program.....	11	3%
Safespace.....	0	0%
Comprehensive Alcohol Program.....	1	1%
Comprehensive Drug Program.....	1	1%
Citizen Dispute Settlement Program.....	4	1%
Health & Rehabilitative Services.....	6	2%
Paralegal Unit.....	16	4%
Self Referral.....	128	35%
Other.....	39	11%
Total	124	100%

PRE-ARREST UNIT CLOSED CASES

	#	%*
SUCCESSFUL COMPLETIONS.....	261	70%
UNSUCCESSFUL TERMINATIONS.....	48	12%
TECHNICAL TERMINATION.....	68	18%
		100%

Ineligible as per Program Criteria.....20
Withdrew before onset of Services.....41
Referral to More Appropriate Service Agency...7

* Per Cent of Case Dispositions

<u>Program Services Received by Closed Cases:</u> (may be multiple)	#	%
In Program Counseling.....	271	76%
Family Therapy.....	35	10%
Comprehensive Alcohol.....	5	1%
Comprehensive Drug Program.....	2	-%
HRS Child Abuse Referral.....	2	-%
Victim's Advocate Child Abuse Program.....	2	-%
Other (Referral for Legal Services, Housing, Welfare, etc.).....	40	11%
Information Only.....	28	8%
TRO's.....	73	21%

Length of Program Participation for Closed Cases:

Brief Service Cases:

0-1 Week.....	54	15%
1-2 Weeks.....	57	16%
2-3 Weeks.....	17	5%
3-4 Weeks.....	24	7%
Subtotal	152	43%

Long Term Service Cases:

1-2 Months.....	76	21%
2-3 Months.....	32	9%
3-4 Months.....	22	6%
4-5 Months.....	16	5%
5-6 Months.....	20	6%
6-7 Months.....	11	3%
7-8 Months.....	7	3%
8-9 Months.....	2	-%
Over 9 Months.....	18	-%
Subtotal	204	57%

RECAP:

Brief Service Cases.....	152	43%
Long Term Service Cases.....	204	57%
	356	100%

Post Arrest Component

In December, 1978, a subcontract was entered with the Pre-Trial Intervention Program for the purpose of establishing the Post Arrest Component of the Program. Absent the alternative of this Program Component, victims of domestic violence cases tend for a variety of reasons, to lose the initiative to prosecute at some point prior to trial. In all but the most serious cases, the prosecution generally defers to the victim's desires at the moment, i.e. nolle prosee of the pending charge. The cycle repeats itself; the violence escalates with no resolution forthcoming; the case repeats in the system with the same or perhaps more serious results.

A Diversion Program ideally offers the defendant and generally the victim an option to prosecution with the incentive of a dismissal of the charge upon completion of the diversion option. The diversion option in this case is specifically designed for defendants in domestic violence cases.

Utilizing the general framework provided by the well established Pre-Trial Intervention Program, this Component was established and procedurally refined to address the special nature of the defendant in domestic violence cases.

In common with Pre-Trial Intervention Program procedures, the State Attorney's Office agrees to defer prosecution of the domestic violence case while the offender and his or her family receives treatment through the Domestic Intervention Program Post Arrest Component. Where treatment is successful, the State Attorney then dismisses the pending charge. Unsuccessful participation results in the offender's case being returned to the Criminal Justice System to be prosecuted.

Domestic violence cases represent a specialized caseload requiring (a) intervention within hours of the arrest incident and (b) consideration of those offenders who may have a prior record. In these two areas, the referral mechanism and the eligibility criteria, Domestic Intervention Program referrals differ markedly from Pre-Trial Intervention Program referrals. Consequently, eligibility criteria specific to the Domestic Intervention Program were established in January, 1979, and an interviewing/screening procedure to be applied within 24 hours of the arrest was implemented at the Dade County Jail.

With respect to this referral system, an inter-agency agreement was entered with the Pre-Trial Release Program, Dade County Department of Corrections and Rehabilitation and represents the major referral source (68% of all 1979 referrals) for the Post-Arrest Component. A Domestic Intervention Program staff member in cooperation with the Pre-Trial

Release Program reviews all arrest affidavits and interviews all defendants in custody within 24 hours of the arrest incident. This jail interview procedure continues to represent the greatest impact upon defendants at a time when their motivation for behavioral change is at its peak.

Subsequent to the morning and afternoon jail interviews, the program staff member accompanies the eligible defendant to the Bond Hearing where, upon the the joint recommendation of Pre-Trial Release and the Domestic Intervention Program, the presiding judge releases the defendant with the condition that if he fails to follow through with Program participation in a satisfactory manner, his release under the Pre-Trial Release Program may be subject to revocation and he may once more be taken into custody.

It is to be stressed that no defendant is released in this manner without the consent of the victim. Between the time of the jail interview and the Bond Hearing, the Domestic Intervention Program contacts the victim via the information on the arrest affidavit. The victim is advised of the Program services which are available to both parties and is asked to give consent. The victim as well as the defendant is thus contacted by the Program generally within 24 hours of the incident.

The timely intervention at the jail coupled with the conditional release in cooperation with the Pre-trial

Release Program continues to represent the single most powerful deterrent to recurrence of the violence during a period of time (between arrest and trial) when traditionally no controls or services are available either for the defendant or the victim.

Considerable effort has been made with respect to educating the principal segments of the Criminal Justice System cooperating in this diversion process. All Circuit Court, County Court, and Magistrate level judges have been contacted personally by Domestic Intervention Program personnel. In addition, training sessions, in person or video taped, are conducted on a regular basis with the all Prosecutors and Public Defenders. Corrections and Rehabilitation Services personnel in Dade County Jail and the Women's Detention Center are aware of the daily operations of the Post-Arrest Component and Program efforts with respect to investigating potential domestic violence cases and securing the release of Program candidates.

In the Post-Arrest Component, the point of entry into the violent family is therefore the defendant in a domestic violence case. As in the Pre-Arrest Component, the approach to the provision of services is two-fold:

- A. the utilization of portions of the Justice System, primarily the Criminal System, to bring the violence under control such that

family therapy and/or counseling may be of benefit to the defendant and the victim in such cases;

- B. the provision of treatment for the batterer and whenever possible the victim via family therapy and/or counseling.

Intake for the Post Arrest Component of the Program was opened in January, 1979. During the initial days of operation, January 1 to December 31, 1979, a total of 280 referrals were made to the Post Arrest Unit. A total of 169 cases accepted or were accepted for participation in the Post Arrest Component during 1979, a reflection of considerable acceptance on the part of the components of the Criminal Justice System in accepting diversion as applied to domestic violence cases.

Below appears a summary of the Post-Arrest Component 1979-1980 case data for purposes of comparison.

Post-Arrest Unit Data

<u>Report Period</u>	<u>Description</u>	<u>Number of cases</u>
<u>1979</u> (January 1- December 31)	<u>Case Intake</u>	169
	<u>Case Dispositions</u>	64
	Unsuccessful Terminations	21
	Successful Completions	43
	<u>Active at the close of 1979</u>	105
<u>1980</u> (January 1 - December 31)	<u>Case Intake</u>	176
	<u>Case Dispositions</u>	196
	Voluntary withdrawals	4
	Unsuccessful Terminations	39
	Successful Completions	153
	<u>Active at the Close of 1980</u>	85

SOUTH FLORIDA FAMILY VIOLENCE PROJECT
SHORT TITLE: DOMESTIC INTERVENTION PROGRAM
POST ARREST UNIT 1979 PARTICIPANTS

Demographic Data

SUBJECT:

Sex:

Male.....	128.....	76%.....	45.....	26%
Female.....	41.....	24%.....	124.....	74%
Total	169	100%	169	100%

Racial/Ethnic Group:

Black.....	109.....	64%.....	109.....	64%
White.....	40.....	24%.....	42.....	25%
Spanish.....	20.....	12%.....	18.....	11%
Total	169	100%	169	100%

Age:

Less than 18....	0.....	-%.....	13.....	8%
18.....	5.....	3%.....	0.....	-%
19.....	5.....	3%.....	4.....	2%
20.....	6.....	4%.....	4.....	2%
21.....	6.....	4%.....	2.....	1%
22.....	5.....	3%.....	4.....	2%
23.....	3.....	2%.....	2.....	1%
24.....	12.....	7%.....	8.....	5%
25.....	7.....	4%.....	7.....	4%
26-30.....	29.....	17%.....	43.....	26%
31-40.....	48.....	28%.....	42.....	25%
41-50.....	32.....	19%.....	25.....	15%
51+.....	11.....	6%.....	15.....	9%
Total	169	100%	169	100%

Case Descriptive Data

Relationship Between Subject & Victim(s):

Husband/Wife.....	84.....	49%
Ex Husband/Ex Wife.....	6.....	4%
Boyfriend/Girlfriend.....	44.....	26%
Parent/Child.....	16.....	9%
Step Parent/Step Child	1.....	1%
Siblings.....	6.....	4%
Other.....	12.....	7%
Total	169	100%

Living Arrangements:

Together.....	103.....	61%
Separately.....	66.....	39%
Total	169	100%

Referral Source (may be multiple):

Assistant State Attorney.....	16.....	9%
Public Defender.....	2.....	1%
Private Attorney.....	1.....	-%
Court.....	17.....	10%
PTR/DIP Jail Interview.....	118.....	68%
Victims' Advocate Program.....	1.....	-%
Victim.....	2.....	1%
Self Referral.....	1.....	-%
Paralegal Unit.....	8.....	5%
Other.....	7.....	4%

Program Services (may be mutliple):

In Program Counseling.....	143.....	85%
Family Life Center Co-Counseling.....	19.....	11%
Comprehensive Alcohol Program.....	29.....	17%
Comprehensive Drug Program.....	1.....	-%
Child Abuse Program.....	2.....	1%
Other (Legal Services, Housing Welfare etc.).....	12.....	7%

* Percentage of clients receiving a service

Principal Charges Deferred By Program:

Assault.....	1	.....	-%
Battery.....	28	.....	17%
Assault & Battery.....	6	.....	4%
Aggravated Assault.....	43	.....	25%
Aggravated Battery.....	55	.....	33%
False Imprisonment.....	2	.....	1%
Child Abuse.....	8	.....	5%
Burglary.....	11	.....	7%
Battery on Police Officer.....	5	.....	3%
Assault on Police Officer.....	1	.....	-%
Disorderly Conduct.....	1	.....	-%
Possession of Shotgun.....	1	.....	-%
Worthless Check.....	1	.....	-%
Criminal Mischief.....	1	.....	-%
Resisting Arrest With Violence.....	1	.....	-%
Shooting Into Occupied Dwelling.....	1	.....	-%
Child Neglect.....	1	.....	-%
Lewd & Lascivious on Child.....	1	.....	-%
Trespassing.....	1	.....	-%
	169		100%

1979

POST ARREST UNIT CLOSED CASES

Case Dispositions:

Technical Terminations.....	1	.....	2%
(Victim dropped charges after onset of Program Services)			
Unsuccessful Terminations.....	12	.....	19%
Failure to follow Rules & Regulations.....8			
Rearrest due to Recurrence.....4			
Successful Completions.....	43	.....	67%
Voluntary Withdrawal.....	8		

**Per Cent of Total Case Dispositions (64)

Length of Program Participation:

Brief Service Cases:

0-1 Week.....	0	.....	-%
1-2 Weeks.....	1	.....	2%
2-3 Weeks.....	1	.....	2%
3-4 Weeks.....	3	.....	5%
Subtotal	5		9%

Long Term Service Case:

1-2 Months.....	15	.....	23%
2-3 Months.....	1	.....	2%
3-4 Months.....	16	.....	25%
4-5 Months.....	1	.....	2%
5-6 Months.....	10	.....	15%
6-7 Months.....	1	.....	2%
7-8 Months.....	9	.....	13%
8-9 Months.....	5	.....	7%
Over 9 Months.....	1	.....	2%
Subtotal	59		91%

RECAP:

Brief Service Cases.....	5	.....	9%
Long Term Service Cases.....	59	.....	91%

SOUTH FLORIDA FAMILY VIOLENCE PROJECT
SHORT TITLE: DOMESTIC INTERVENTION PROGRAM
POST ARREST UNIT 1980 PARTICIPANTS

Demographic Data

SUBJECT:			VICTIM:	
<u>Sex:</u>				
Male.....	181.....	81%.....	46.....	21%
Female.....	42.....	19%.....	177.....	79%
Total	223	100%	223	100%
<u>Racial/Ethnic Group:</u>				
Black.....	113.....	51%.....	112.....	50%
White.....	58.....	26%.....	60.....	27%
Spanish.....	49.....	22%.....	47.....	21%
Other.....	3.....	1%.....	4.....	2%
Total	223	100%	223	100%
<u>Age:</u>				
Less than 18....	2.....	1%.....	18.....	8%
18.....	8.....	4%.....	7.....	3%
19.....	3.....	1%.....	1.....	0%
20.....	10.....	5%.....	4.....	2%
21.....	7.....	3%.....	9.....	4%
22.....	5.....	2%.....	4.....	2%
23.....	12.....	5%.....	16.....	7%
24.....	2.....	1%.....	9.....	4%
25.....	7.....	3%.....	5.....	2%
26-30.....	47.....	21%.....	41.....	19%
31-40.....	66.....	30%.....	58.....	26%
41-50.....	30.....	13%.....	33.....	15%
51+.....	24.....	11%.....	18.....	8%
Total	223	100%	223	100%

Case Descriptive Data

Relationship Between Subject & Victim(s):

Husband/Wife.....	119.....	53%
Ex Husband/Ex Wife.....	14.....	6%
Boyfriend/Girlfriend.....	44.....	20%
Parent/Child.....	22.....	10%
Step Parent/Step Child	2.....	1%
Siblings.....	8.....	4%
Other.....	14.....	6%
Total	223	100%

Living Arrangements:

Together.....	104.....	47%
Separately.....	119.....	53%
Total	223	100%

Referral Source:

Public Defender.....	4.....	2%
Assistant State Attorney.....	33.....	15%
Private Attorney.....	7.....	3%
Court.....	77.....	35%
PTR/DIP Jail Interview.....	85.....	38%
Police.....	1.....	0%
Victims' Advocate Program.....	3.....	1%
Comprehensive Alcohol Program.....	0.....	0%
Comprehensive Drug Program.....	0.....	0%
Citizen Dispute Settlement Program.....	1.....	0%
Health & Rehabilitative Services.....	0.....	0%
Paralegal Unit.....	1.....	0%
Self Referral.....	6.....	3%
Victim.....	5.....	2%
Total	223	100%

Principal Charges Deferred By Program:

Assault & Battery.....	13.....	6%
Assault.....	11.....	5%
Battery.....	35.....	16%
Aggravated Assault.....	67.....	30%
Aggravated Battery.....	48.....	22%
Assault on Police Officer.....	1.....	0%
Battery on Police Officer.....	6.....	3%
Resisting Arrest With Violence.....	2.....	1%
Child Abuse.....	7.....	3%

Child Neglect.....	0	0%
Lewd & Lascivious on Child.....	0	0%
Burglary.....	12	5%
Trespassing.....	1	0%
Disorderly Conduct.....	3	1%
Criminal Mischief.....	1	0%
Other.....	16	7%
Total	223	100%

POST ARREST UNIT
1980
CASE DISPOSITIONS

SUCCESSFUL COMPLETIONS.....	153	80%
UNSUCCESSFUL TERMINATIONS.....	54	17%
Failure to Follow Rules & Regulations		
Recurrence of Violence.....	5	
Failure to Follow Rules & Regulations		
Other.....	22	
Rearrest Due to Recurrence of Violence.....	7	
TECHNICAL TERMINATIONS.....	5	3%
Victim Dropped Charge After Onset of Service....	4	
Court Disposed Without Program.....	0	
Other.....	1	
VOLUNTARY WITHDRAWALS.....	4	

Program Services Received by Closed Cases (may be multiple)

In Program Counseling.....	185.....	94%
Family Therapy.....	41.....	21%
Comprehensive Alcohol Program.....	6.....	3%
Comprehensive Drug Program.....	1.....	-%
HRS Child Abuse Referral.....	4.....	2%
Victims' Advocate Child Abuse Program.....	1.....	-%
Other (Referral for Legal Services, Housing, Welfare, etc.).....	34.....	17%
Information Only.....	0.....	-%

Length of Program Participation for Closed Cases:

Brief Service:

0-1 Week.....	1.....	5%
1-2 Weeks.....	2.....	1%
2-3 Weeks.....	1.....	5%
3-4 Weeks.....	3.....	2%
Subtotal	7	4%

Long Term Service:

1-2 Months.....	12.....	6%
2-3 Months.....	9.....	5%
3-4 Months.....	19.....	10%
4-5 Months.....	19.....	10%
5-6 Months.....	22.....	11%
6-7 Months.....	16.....	8%
7-8 Months.....	20.....	11%
8-9 Months.....	12.....	6%
Over 9 Months.....	56.....	29%
Subtotal	185	96%

RECAP:

Brief Service Cases.....	7.....	4%
Long Term Service Cases.....	185.....	96%
	192	100%

**Per Cent of Clients Receiving a Service

Program Data Summary

<u>Report Period</u>	<u>Description</u>	<u>Pre-Arrest Cases</u>	<u>Post Arrest Cases</u>	<u>Total Cases</u>
<u>1979</u>	<u>Case Intake</u>	124	169	293
	<u>Case Disposition</u>	75	64	139
	Unsuccessful Terminations	18	21	39
	Successful Completions	57	43	100
	<u>Active Cases at Close of 1979</u>	49	105	154
<u>1980</u>	<u>Case Intake</u>	347	176	523
	<u>Case Dispositions</u>	356	196	552
	Unsuccessful Terminations	95	39	134
	Successful Completions	261	153	414
	<u>Active Cases at Close of 1980</u>	37	85	122

Service Provision
Group Therapy

In addition to the individual, couples and/or family therapy which is offered to our clientele, two groups were initiated by Program staff during the first half of 1980. Originally initiated as a closure or follow-up group, the Co-Ed Group has become a subject of considerable interest on the part of other Family Violence Programs across the country. The concept is a new one: men who have battered and women who have been battered are members of the same ongoing group. These men and women do not comprise couples; they have not met prior to the group. Two Post Arrest Unit Counselors facilitate this group which is open to clients in both Program Components following an initial period of counseling. The original description and a more detailed description of this group appear in Appendix 2.

In addition to this group, a women's group is facilitated by one of the Family Therapists and a Post Arrest Unit Counselor. The women comprising this group have been selected according to the stage in the counseling process they are presently in. Women who are just starting recovery are grouped with others who are about to complete the counseling process. Intermediate steps along the recovery process are represented by the remainder of the group members.

The intent is to cycle participants in and out of this on-going group as they progress along the recovery cycle and move on to become a support network of recovered victims following Program participation.

Intake Component

In September, 1979 several major difficulties in the Program intake process were identified and resolved for both Program Components by the establishment of an Intake Unit and a Paralegal position.

The direct impact upon the counseling staff of walk-in clients represented a major obstacle to efficient client intake and daily operations. The very nature of family violence results in an atmosphere of intensity and crisis for the client at the time of Program entry. Counselors who experienced this intense impact directly and continually during the course of intake duties were generally drained and ill-equipped to complete their other considerable responsibilities. While Program Counselors were well trained in de-escalation and focusing techniques, the fact remained that a high level of energy was customarily consumed in bringing these techniques to bear on the new client while at the same time attempting to gain information for intake purposes.

An Intake Unit was therefore established to provide a buffer of workers trained to gain intake information while reserving the Counselor to gain control of client

dynamics in depth. The Unit serves both Program Components and is comprised of two CETA employees provided by the State Attorney's Office.

In addition to the need for a separation of basic intake duties from counselor responsibilities, a second specialist role was identified with respect to civil and criminal court related activities. Continued close cooperation with the Pre-Trial Release Program required the appointment of one staff member to act as the liaison for the jail interview and bond hearing procedure each morning and afternoon. At the same time, the development of the Temporary Restraining Order procedures required a similar liaison role with respect to the Family Court Division. To fulfill these considerable liaison responsibilities, the State Attorney's Office assigned a Paralegal to the Program on a full-time basis.

The establishment of the Intake Unit and the paralegal position without cost to the Program has considerably enhanced the intake capabilities of both Program Components. In addition, their establishment without cost to the Program represents the extent to which the community supports the continuation of the Domestic Intervention Program.

Evaluation Component

In February, 1979, the final subcontract providing for a local evaluation component was entered with David Fike & Associates. As the local evaluator, Fike & Associates conformed

their case management information forms to the U.R.S.A. formats for a smoother transition to the national evaluation system.

Two local evaluation reports have thus far been submitted:

- (1) An evaluation of staff training;
- (2) Evaluation of the achievement of case objectives by counselors during the initial phase (January through July, 1979) of case intake.

With respect to staff training, the evaluation concludes that from a global prospective, staff skills were significantly improved. With respect to the achievement of case objectives during this initial phase of intake, the evaluation reflects several conclusions:

- (1) counselor engagement of clients in a goal oriented counseling process was difficult;
- (2) in those cases where a commitment was made, counselors interrupted the pattern of violent behavior almost 90% of the time;
- (3) counselors were remarkably less successful in altering problematic patterns of alcohol abuse.

As a result of the latter findings regarding problematic patterns of alcohol abuse, an inter-agency agreement was entered into with the Dade County Comprehensive Alcohol Program. Under this agreement, all such cases are referred to the

Comprehensive Alcohol Program (CAP) for supportive treatment of the abuse problem.

To summarize, the Program has routinely deferred to existing community expertise in providing treatment for alcohol abuse. Undoubtedly, because alcohol abuse, itself, is a particularly difficult pattern to break, long term (one to two years) treatment is critical to eventual success. Nonetheless, a series of follow-up meetings were held with Comprehensive Alcohol Program officials to address mutual concerns. Additional non-CAP treatment resources have also been identified in an effort to provide alternative referral resources.

Training Component

As indicated above, the successful establishment of the two Program Components, pre-arrest prevention and post-arrest diversion, required the development of an effective treatment process. Critical to the development of this process was the selection of the two subcontractors for the provision of staff training, clinical supervision, and client treatment services.

In December, 1978, a subcontract providing for in-depth staff training was entered with the Counseling and Stress Control Center, an agency well-known for major training innovations in police crisis intervention and stress management

techniques. During this first year of operation, training activities occurred weekly and involved the Program counseling staff.

The training provided by Counseling and Stress Control was accomplished in three phases as follows:

Phase I: Eleven Modules (January-April)

1. Overview - domestic violence, crisis intervention, police work
2. Crises nature, counseling, resolution
3. Family Systems function & interaction
4. Family Systems stress, conflict, violence
5. Violence effects, victims, offenders, system response
6. Family Groups cultural differences, non-traditional groups
7. Calming & Diffusing techniques
8. Assessment
9. Meditation, advocacy, arbitration techniques
10. Suicide
11. Abnormal behavior

Phase II: Four Modules (May-July)

1. Counseling process & technique
2. Counseling deepening the process, use of confrontation
3. Counseling action, directionality, strategies
4. Counseling crisis

Phase III: Six Modules (August-December)

1. Stress management training
2. Relaxation training
3. Biofeedback training
4. Physical fitness
5. Nutrition
6. Individual consultation

Modalities of Instructors by Percentage

Lecture	30%
Films	5%
Literature	5%
Role playing (videotape)	20%
Practical exercises	10%
Discussion (Groups individual)	15%
Evaluation & feedback	15%

Also in December, 1978, a subcontract providing for clinical supervision and consultation and for client treatment services was entered with the Family Life Center at Biscayne College, an agency well-known for its innovative training in family therapy techniques utilizing the family systems approach.

Under this subcontract, the Family Life Center hired two Family Therapists to be assigned to the South Florida Family Violence Program. During the first year of operation, these therapists provided individual, couple, and family

therapy to the most severe Program cases (46), worked as co-therapists with Program Counselors, and provided case consultations and supervision on a weekly basis for both Program Units. In addition, the therapists, themselves, underwent all the training provided the larger staff both by Counseling and Stress Control and the Family Life Center, and an additional weekly series of supervision meetings with the clinical director of the Family Life Center. In January, 1980, at the close of the Family Life Center subcontract, both therapists became directly employed by the program.

For the purpose of placing the training within the context of family therapy and thereby applying the family systems approach to domestic violence, the second portion of the Family Life Center subcontract provided for clinical consultation and supervision services. On a weekly basis, two Family Life Center clinical supervisors conducted two groups, each comprised of a Family Therapist and the four Counselors within a Program Unit (Pre-Arrest or Post-Arrest). During this group, live clinical supervision was provided by means of case presentation, role-play, observation via one-way mirror, video-taping, evaluation, and feedback.

In September, 1979, a transitional phase of training was designed to prepare the two Family Therapists to join the Program staff and assume responsibilities for the continuation of training activities during the new grant year.

It is obvious that the Program design has been heavily weighted with respect to in-service training. But the dividends of such extensive and intensive training activities continue to accrue in the form of a most effective treatment process utilizing critical elements of the family systems approach and in the form of a Program staff which is exceedingly well qualified for their undertaking and capable of managing the tremendous stress involved in the nature of their work. Incorporation of the Family Therapists directly onto the staff as well as documentation of the training activities has provided for continuation of this high level of training.

Public Education:

In April, 1979, with the assistance of the Advisory Board, the Program obtained the volunteer services of an expert in public relations. A public education strategy was designed, and a plan of action was subsequently implemented by a public relations senior student intern at the University of Miami.

During the period between May and August, 1979, in-depth interviews were held with Program personnel on nine radio stations; public announcements continue to be broadcast around the clock on 21 radio stations in Dade County. During the same period of time, three television stations broadcast in-depth interviews on six separate occasions, each featuring the special services provided

by the Program. One such program was done in Spanish and featured the culture-specific services provided to the growing Latin community in Greater Miami. Two major newspaper articles were written about Program services and appeared in the Miami Herald. Standard press releases appeared in 20 local newspapers. A continuing series of lectures by Program personnel have been delivered at major civic group meetings - e.g. Kiwanis Club breakfast and luncheons, Rotary Club luncheons, H.U.D. residents' group meetings, B'nai Brith meetings, etc. In addition, each semester, Program personnel have been invited to address the University of Miami Law School class on Family Law.

In summary, with the assistance of a public relations intern, the Program has successfully conducted a media campaign which has tapped radio, television, newspaper, and civic group resources in an attempt to reach the public regarding the issues involved in domestic violence and the services provided by the Program. Program staff continue to be invited to address civic groups, professional groups, students, and conference participants, as specialists in family violence.

In addition to a media campaign, the Program undertook to design a Brochure which was to serve several purposes:

- A. Informational/Educational
 - for potential clients
 - for referral resources
- B. On-the-Scene Police Response
 - active referral via Brochure distribution in lieu of inaction
- C. Mini - Emergency Kit
 - for victims
 - for offenders

The resulting Brochure (Appendix 3) has enjoyed tremendous success within local law enforcement agencies. The Program consistently receives visits and telephone calls from police officers representing local municipalities and substations and requesting additional Brochures for their shifts or squads. Typically, a client comes into the Program office on a day-after basis, Brochure in hand and with a message from the responding officer on the back page. It is our feeling that such use of the Program Brochure enhances the officer's feelings of personal contact with the Program via the positive action of a referral and diminishes his frustration over inaction in response to a volatile but technically legal domestic incident.

Numerous requests for written information on the Domestic Intervention Program prompted us to develop and distribute a packet of materials on program design and services rendered. This information packet appears in Appendix 4.

Beyond the aforementioned methods of public education, two program staff wrote an article: "An Overview of Family Violence" which was published in the December, 1979, issue of the Conciliation Courts Review.

A copy of this article appears in Appendix 5.

Cooperating or Participating Agencies

As indicated above, the Domestic Intervention Program was designed on the basis of a Subcontract Mode. The Pre-Arrest Component was established by subcontract with the Dade County Victims Advocate Program, the parent agency under which Safespace Battered Women's Shelter and Advocates for Sexually Abused Children operate. The Director of Victims Advocate Program serves as consultant to the Program. In addition the Coordinator of Safespace attends case consultations with D.I.P. staff as referrals flow both ways between the Shelter and D.I.P.

The training and treatment subcontracts with the Family Life Center of Biscayne College and the Counseling and Stress Control Center have led to the development of the treatment process now employed by the Program staff.

The Program staff underwent extensive training with the Safe Streets Unit of the Dade County Public Safety Department and continue to provide assistance to police in responding to domestic disturbance calls. Program service provision takes on a new significance given the reduction

in Safe Streets personnel. Increased cross-training efforts via Roll Calls and team-riding on patrol have greatly enhanced Program relations with a number of police agencies.

With respect to the social service system, service agreements exist between D.I.P., the Single Intake Unit of H.R.S. Division of Child Abuse, the Dade County Comprehensive Alcohol Program, the Dade County Comprehensive Drug Program and Dade County Citizen Dispute Settlement Program. In addition, the Program is a member of the Dade County Inter Agency Task Force on Child Abuse comprised of 37 social services, medical service, education, and law enforcement agencies which share concerns in this area. This Program also has a liaison assigned to the Family Project, which services the community through emphasis upon the strong family unit within the Boy Scouts/Girl Scouts, YMCA/YWCA, Big Brothers/Big Sisters, and the Public School System.

Program/Police/Community Outreach Efforts

From the outset the Domestic Intervention Program Staff had received a good portion of their training from the Safe Streets Unit of the Dade County Public Safety Department. The cross-training and experimentation process has culminated in a special appreciation on both sides (police & social workers) of the complimentary roles which

can be played by police officer/social worker teams in effectively addressing domestic violence in Dade County.

Program Counselors have continued to undertake periodic team riding with police officers. Following the May riots, Domestic Intervention undertook a more intensive effort to reach on-line officers via roll-call training and team riding. The purposes of this effort may be outlined as follows:

1. To educate on-line officers regarding the alternative available to them in handling domestic violence cases via D.I.P and to expedite police referrals to the Program via a "red-flagging" system.
2. To provide crisis intervention cross training experience for officers & counselors.
3. To provide police officers under stress due to community conditions a means of responding to and handling domestic violence calls in particularly volatile neighborhoods.
4. To reach and engage in treatment those victims and defendants involved in domestic violence within the volatile areas and to provide immediate access to services via D.I.P.
5. By a team effort to communicate to community residents a willingness to utilize alternative means other than enforcement and prosecution to address violent families, hopefully to the mutual benefit of everyone concerned.

Program Intake suffered a dramatic drop during the weeks following the riots. Understandably, the client population which reflected the most severe drop was that of Blacks. Police officers were reluctant or unable to

respond to domestic calls given the extreme pressure to maintain civil order. The riots added an additional layer of barriers to the provision of protection and services to family violence victims within the black community. Understandably, Black citizens were reluctant to utilize police and the criminal justice system to obtain assistance in cases of domestic violence. In order to counteract this development, during the four month period from June through August, the Domestic Intervention Program staff conducted an intensive training and team riding effort with police agencies. Program staff attended the roll calls for all shifts at all six substations of the Public Safety Department, and the roll calls at the North Miami Beach, North Miami, and Miami Beach Police Departments. Subsequently, Program unit supervisors and counselors rode with selected shifts within each of these police agencies.

In August, during a meeting with the Commander of the Central District of Public Safety Department, Program staff were introduced to the special team of police officers newly assigned to the Scott-Carver Housing Projects, site of the July disturbances. That team as well as the Safe Streets Lieutenant requested that one Program Counselor in particular be assigned to work with them in the projects. The Counselor's field work within the community had become known to them and had earned considerable respect on the parts of both the officers and community residents alike. This Counselor was reassigned to cover that area and to coordinate his efforts with the police team.

Community Advocacy Project

On September 30, 1980, the Domestic Intervention Program received an award (#90CV905-01) from the department of Health and Human Services, Office on Domestic Violence. The Community Advocacy Project funded by this award is intended to function as an affirmative action effort to draw potential clients who live in the riot involved area of the central district into the Domestic Intervention Program for direct service provision. The orientation of the project is community-based outreach and grassroots self-help efforts in relation to family violence issues. The services to be provided are indirect in nature and include referral to Domestic Intervention for direct services and follow-up care. The personnel to be employed under this grant are distinct and different from those employed by the Domestic Intervention Program.

The Domestic Intervention Program Director will be involved in the start-up and the coordination with this new project; however, because it is an expressed objective to enhance client intake from the riot involved area into the Domestic Intervention Program via the operation of this new project, the grant represents a distinct resource for the Program. In addition, the grant period extends for one year only as a distinct effort to overcome the riot aftermath.

Future Finding

In September, the Dade-Miami Criminal Justice Council notified the Program that a request would be submitted to include the Domestic Intervention Program in the Special Response Package. In preparation for the new funding focus, the Program formed an outreach team to engage in community organization efforts within the central district (Scott-Carver and Brownsville areas) of Dade County. The team was comprised of two D.I.P. Counselors, well known and active within the target community, a D.I.P. Intake Worker, who resides in the Scott Housing Projects, and the Program Director.

The community organization efforts of the outreach team followed a three-pronged plan:

- A. the development of grassroots support and involvement in Program activities;
- B. linkage with existing community groups already networking within the area;
- C. acquisition of support commitments from key service providers within the target area.

This three-pronged community organizing effort was coordinated with the Program's implementation of the newly received H.H.S. advocacy grant. The objective was to install this new Program unit in the target community to function as an affirmative action effort drawing clients into the direct services of the Domestic Intervention.

On December 1, 1980, the Domestic Intervention Program received an award (80-SR-662-501) from LEAA-Special Response Package-in the amount of \$114,000. This new grant will enable the Program to continue operations through June, 1981.

Criminal Justice System Improvements

As a result of Program initiatives, many improvements have occurred within the components of the criminal justice system with respect to the handling of domestic violence cases. Such improvements have resulted from the impact of both Program Components (Pre-Arrest and Post-Arrest).

Police -

In those cases where no criminal violation has occurred, police officers responding to domestic incidents now have an alternative to inaction - i.e. referral to the Program on a day-after basis. During the first year of operation, the Program took the initiative of reviewing the domestic Incident Reports on a daily basis for follow-up purposes; in turn, police officers have learned to "red-flag" those cases which they feel belong in the Program. As a result of a cooperative police and Program effort in redefining the Pre-Arrest Counselor's role, police officers have learned to use the skills of these Counselors to provide

in-depth crises intervention and treatment which the demands of police work preclude. The dramatic increase in referrals to the Pre-Arrest Unit by police officers (35 cases during 1979 vs. 35 cases during the First Quarter of 1980 alone) attests to the increasing degree of Program acceptance on the part of police officers.

In those cases where a criminal violation has occurred as a result of a domestic incident, the arresting officer becomes involved in implementing the diversion process. Police officers are consulted regarding the circumstances of the arrest during the assessment prior to Program acceptance and diversion by the Post-Arrest Unit. In most cases, these defendants have been co-jointly released by the Program and the Pretrial Release Program via the jail interview process described above. At times, however, an eligible defendant avoids the jail interview by bonding out immediately. In these cases, the prosecutor contacts Program personnel to attend a Pre-Trial Conference in order to meet the arresting officer and the victim, to explain the Program, to offer services to the victim, and to gain consent for diversion of the defendant pending full assessment. Because police officers continue to have close contact with the Program at these critical points in the process, the Program enjoys a close working relationship with most local departments and substations. As a result, referrals are often noted

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on the Arrest Affidavit, itself. Such "red-flagging" assists Program personnel in obtaining a "hold" on potential participants such that immediate bond out is averted for a period of four hours, during which time Program personnel can get to the jail to interview the defendant. Consistent cooperation within one aspect of the Program thereby generates increased cooperation in effecting earlier intervention and reduces the number of the defendants who would traditionally slip through the cracks in the system. Because early intervention is critical in domestic violence cases, such a dividend in cooperation not only increases referrals but also increases the effectiveness of the referrals.

Prosecutors -

Originating in the State Attorney's Office, the Program has initiated considerable and obvious improvements with respect to the prosecutor's handling of family violence cases.

As indicated above, absent the alternative of the Post Arrest Unit diversion process, the victims of Domestic Violence cases tend, for a variety of reasons, to lose the initiative to prosecute at some point prior to trial. The prosecutor finds himself spending considerable time and energy in case preparation only to see a victim withdraw. In all but the most serious cases, the prosecutor generally defers to the victim's wishes. More than likely, the family violence will recur and, in many instances, escalate to impact upon the system once again.

The diversion option presented by the Post Arrest Component represents a much preferred alternative to the cycle described above. Because referral of the case is, for the most part, initiated by the Program within twenty-four hours of the arrest incident and before the case reaches the prosecutor, considerable time and energy is saved.

In those cases where the defendant has avoided the jail interview process, prosecutors have learned to invite Program personnel to attend Pre-Trial Conferences for the purpose of offering Program services and the diversion option to the victim and the arresting officer. Even when the diversion option is not accepted, prosecutors have learned to provide victim/witness support through the Program. Inasmuch as the domestic violence victim traditionally loses her initiative prior to trial, such support is an effective means of encouraging prosecution of such cases.

Judges -

As indicated above, at both the misdemeanor and felony court levels, Judges continue to recognize the diversion of domestic violence cases as a welcome variation on the deferred prosecution theme.

More indicative of the degree of acceptance earned by the Program within the judicial component of the criminal

justice system is the degree to which Judges turn to the Program for assessment purposes. In those cases where deferred prosecution is not acceptable by all parties concerned, Judges are increasingly turning to the Program to determine appropriate case dispositions and sentences. Assessment by the Program and, at times, incorporation of Program treatment into the conditions of probation satisfies several Program objectives:

- A. the encouragement of prosecution of Domestic Violence cases;
- B. the provision of appropriate supervision and treatment services for the offender in addition to the traditionally lax probation sentence;
- C. the effective intervention by the Program at critical points in the Criminal Justice Process when Program Services have the greatest potential for impact upon the offender.

Magistrates -

The well-developed jail interview and release procedure implemented in cooperation with the Pretrial Release Program, presents an effective means of incorporating supervision of the domestic situation as a condition of the offender's release from jail. Magistrates have readily accepted this type of a joint, conditional release as a welcome variation on the release reform theme.

Civil Justice System Improvements:

Temporary Restraining Orders - A major accomplishment largely attributable to the Program has been the enactment of legislation providing for the issuance of Temporary Restraining Orders in domestic violence cases (Florida Statute 741.30). In close coordination with the Education and Training Coordinator of the Administrative Office of the Courts, Program personnel assisted in the design of standard operating procedures for the preparation and judicial entry of restraining orders. Under these procedures, as implemented by the Program in conjunction with the State Attorney's Office, extensive documentation is prepared for each Temporary Restraining Order Petition. This extensive documentation is coupled with a strong provision in the restraining order providing for specific instructions to take the violator into custody and detain him for appearance before the judge of record within 72 hours of the violation incident.

Following negotiations with law enforcement agencies, police liability issues were clarified and eliminated. With these major issues resolved, the Public Safety Department has issued their own standard operating procedures which were incorporated into the Law Enforcement Handbook. In addition to Temporary Restraining Order enforcement, a direct reference is made to the Program as an alternative to inaction in a non-arrest situation and as a diversion

option in an arrest situation. In effect, incorporation of this specific reference to the Program within the Standard Operating Procedures for the Public Safety Department constitutes virtual institutionalization of the Program option.

A series of judicial, police, and Program consultation and training sessions have been conducted in order to refine and implement these procedures from the point of entry to the point of enforcement. By assignment of the Chief Judge, all matters concerning the issuance of temporary restraining orders are to be heard by the Family Court Division. As indicated above, a Paralegal has been assigned to the Program by the State Attorney's Office for preparation of affidavits, petitions and orders. The Paralegal and the Program Director are responsible for presentation of the case before the appropriate Family Court Judge.

With respect to Program procedures, applications for temporary restraining orders are approached as case referrals for Program services which may exceed the judicial entry of the restraining order. While the preparation and judicial entry of the order is handled as quickly as possible, the client's needs as a whole are prioritized with medical attention and immediate personal safety being paramount. The Program Paralegal coordinates the judicial procedures with the Case Counselor. A close working relationship with Legal Services of Miami has been established in order to expedite divorce proceedings following the T.R.O. procedure.

Consistent education of the client with respect to the T.R.O. process is accomplished on a step-by-step basis and is supported by victim information handouts for each phase of the process. It is the Program's experience that the applicant derives invaluable positive reinforcement for her legal action on her own behalf only if she is consistently educated as to what her rights are and what this legal action means. Clients who have undergone the process are considerably more focused and determined to change their circumstances for the better. This determination and focus, in turn, feeds into the counseling and support services provided concomitantly with the Temporary Restraining Order entry.

In reviewing the Program's experience with the temporary restraining order process, a series of meetings was held with the Education and Training Coordinator of the Administrative Office of the Courts for the purpose of amending State legislation across the board on domestic violence related matters. This first draft revision has been submitted to the appropriate Representative from the Dade County area and is under consideration at present.

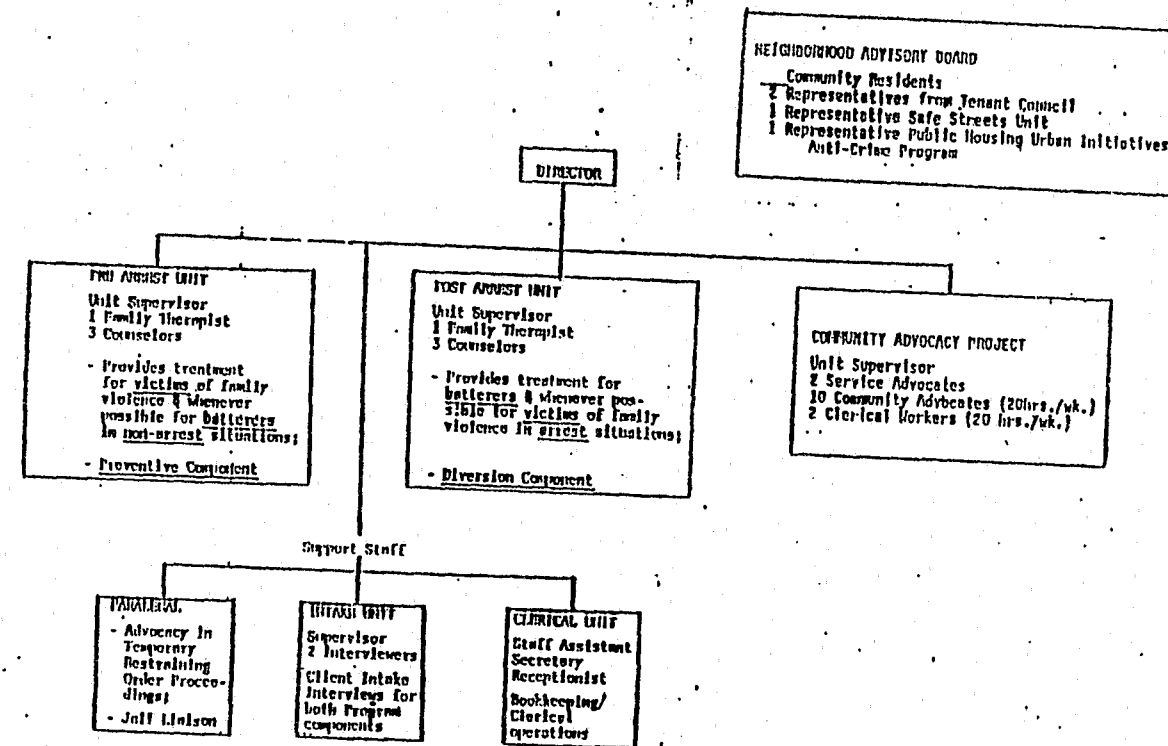
APPENDIX I

Organizational Chart
Comparative Overview of Program Components

*** REFERRALS ***

CONTACT

JOAN SVALDI FARR OR MARLENE SAMSON
547-5482



REFERRALS

CONTACT JOAN SVALDI FARR OR MARLENE SAMSON
547-5482

DOMESTIC INTERVENTION PROGRAM

COMPARATIVE OVERVIEW OF PROGRAM COMPONENTS

PRE ARREST UNIT

- Referrals are usually made by Police Officers as an alternative to a non-arrest domestic incident, by the Paralegal Department of the State Attorney's Office, by Victim's Advocate Program, by SAFESPACE Battered Women's Shelter, or on a self-referral basis;
- While no arrest has been made, the possibility of filing charges may be explored with the Paralegal Department of the State Attorney's Office as a means of gaining control over the violence. In such cases, Program staff act as advocates for the victim with the express purpose of engaging the alleged batterer in treatment through the Post Arrest Unit. This step is taken as a last resort when the batterer refuses Program participation on a voluntary basis and there is a solid basis for filing criminal charges.
- The point of entry into the violent family is the victim of abuse. The orientation is therefore often crisis intervention followed by the provision of basic services, e.g. medical attention referral, referral to Safespace Shelter, followed by more long-term service issues such as family counseling, survival skills, etc.
- Advocacy usually occurs in Family Court -- e.g. Temporary Restraining Order -- and the adjunct social service sector.
- Length of Service: No minimum; 70% receive services for 1 - 6 months.

POST ARREST UNIT

- Referrals are actively sought by Program personnel each morning & afternoon in the Cook County Jail. Within 24 hours of the arrest incident, all domestic-related Arrest Affidavits are reviewed & defendants are interviewed by Program staff. Program staff are on call over the weekends for incoming cases and are contacted by Pretrial Release Program staff in the event a domestic case appears at the Jail. Defendants are accompanied to Bond Hearings & recommended for release via a cooperative agreement with the Pretrial Release Program conditional upon their participation in the Domestic Intervention Program. The victim and arresting Officer are contacted for approval prior to release.
- Diversion of the criminal charges occurs at the time of Arraignment after the Program has had sufficient time (10 days) to assess the nature of the case. Program eligibility is determined by the following criteria: Defendant seeks help, has no severe mental illness or history of long-term psychiatric treatment, may have a prior record but is not severely violent in nature; Victim has suffered no permanent disability or critical injury & approves of the diversion of the case.
- The point of entry into the violent family is the alleged batterer. The orientation is therefore the use of the criminal justice system as leverage in gaining control over the violence such that counseling/therapy may be of benefit to the defendant & victim(s) in the case.
- Advocacy usually occurs in the Criminal Court and the adjunct social service sector.
- Length of Service: minimum of 6 months.

COMMUNITY ADVOCACY UNIT

- Referrals are actively sought by Unit staff who are residents of the target area and are geographically located within the riot-involved neighborhoods of the Central District.
- Ongoing, community sensitive guidance is provided by a Neighborhood Advisory Board comprised of community residents and representatives of the Scott and Brownsville Team Police.
- Unit staff locate isolated victims via concerted field work & high visibility within the neighborhoods -- specifically the James E. Scott & Annie M. Coleman Public Housing Projects.
- A portion of the Unit referrals is comprised of Safespace follow-up cases -- i.e. victims leaving the battered women's shelter to return to the community within Central District.
- While CAU cases may involve coordinating diversion services via the Post Arrest Unit of D.I.P., or family counseling/therapy services via the Pre-Arrest Unit of D.I.P., CAU emphasis is placed upon advocacy & affirmative action efforts to draw victims into the direct services of the parent agency, Safespace, or local service agencies.

APPENDIX 2

Co-Ed Group:
"The Batterer and the Battered
Share Group Process"

THE BATTERER AND THE BATTERED SHARE GROUP PROCESS BY FRANYE HECHT ALTON ANDREWS

Treating men who batter women is a relatively new phenomenon. A few men's groups have surfaced throughout the country ____ e.g. Emerge, Inc., in Boston, which provides group counseling services for men who have committed acts of violence against women. Many more women's groups consisting of battered women can be found particularly in connection with the women's shelters. In the Miami Domestic Intervention Project a unique group concept has been developed: men who have battered and women who have been battered are members of the same ongoing group. These men and women are not couples and have not met prior to the onset of the group.

A female from one couple, a male from another and several unattached individuals comprise this open-ended group. In addition to the benefits one usually derives from the Group Process, these men and women have the unique opportunity to hear from the opposite sex what it was like for them to experience violence in their relationships. Men who have battered can hear from women other than their own partners about the fear, confusion, self hate, self pity, and humiliation related to being battered. Women who have been victims of battering can hear from men other than their own partners about the frustration, anger, fear, self hate and humiliation related to battering. Each member gets a better perspective of their own mate or partner's feelings as well as finding another member to relate to.

CONCEPT

The group was originally intended as a one session follow-up group complying with Federal guidelines requiring a three month follow-up for clients of LEAA funded Family Violence Projects. Gathering a group of clients together for the purpose of follow-up has the advantages of (1) providing adequate coverage and (2) providing an effective process whereby clients could share their Program experience with each other and could determine for themselves how much progress has been made by each of them in terms of internal growth and adjustment.

The counselors in the Miami Project were asked to examine their caseloads to select members for this group using the following criteria for selection:

1. Had been involved either in individual or couples therapy;
2. Showed insight or awareness into his/her own problems;
3. Was willing to share experiences with others;
4. Was at termination stage in the Program.

It was decided that the group would be led by male and female co-facilitators so that each member would have a model to relate to at all times.

OUTCOME

The first meeting of the follow-up group consisted of the male and female co-facilitators and eight male and female group members. The facilitators introduced a group exercise fostering communication among members thereby enabling

them to form first impressions of each other. They all spoke of their experiences with domestic violence, their arrests, and subsequent involvement in the Domestic Intervention Program. They shared their present situations and found they could easily relate to one another. All the members expressed positive feelings about the group and agreed to meet again. Since that initial session, the group has been meeting every other week for one and a half hours and still retains six of the original members. New members have been added to the group; as each member is ready for termination, a new member joins. There are approximately ten group members at each group session.

The group members express how each has gained from the others. Those involved in relationships express new feelings of individuality. They can be who they want in this group without fear of ridicule by a partner or mate. They can try out new behaviors in the group and take home new ways of communicating. Those not presently involved in relationships add another dimension with their perceptions and have the opportunity to learn for themselves more about relationships. In addition to directing the therapeutic process, the male and female co-facilitators role model for the group positive ways of resolving conflict. Communication exercises are utilized, and relaxation techniques are taught. Thus, the one-session follow-up group has now evolved into a primary ongoing treatment approach for the Miami Domestic Intervention Program.

APPENDIX 3

Program Brochure



JANET RENO
STATE ATTORNEY

ELEVENTH JUDICIAL CIRCUIT OF FLORIDA

DOMESTIC INTERVENTION PROGRAM

JOAN SVALDI FARR
DIRECTOR

A PROGRAM DESIGNED TO ASSIST PEOPLE
WITH FAMILY DIFFICULTIES



FAMILY VIOLENCE

THE DOMESTIC INTERVENTION PROGRAM

IF YOU ARE A VICTIM

IF YOU HAVE BEEN ARRESTED

EMERGENCY & OTHER ASSISTANCE

APPENDIX 4

Information Packet

DOMESTIC INTERVENTION PROGRAM

SERVICES

COUNSELING/THERAPY

- Crisis Intervention Counseling - focusing upon giving the victim &/or alleged abuser a sense of control over themselves & their environment.
- Family Systems Approach to Counseling - focusing upon the interaction system within the family, giving insight into the dynamics of the family system, building family skills, readjusting the balance of power within the family towards a more positive balance.
- Family Therapy - providing clinical treatment for the most severe cases utilizing the family systems approach.
- Group Counseling - Women's Group: providing group counseling for the victims of abuse; creating a support network for victims;
Co-Educational Group: providing group counseling for a mixed group of victims and abusers (of others) utilizing the Gestalt model; a follow-up to the family counseling/therapy as a closure process.

ADVOCACY

- Police - providing an alternative to the non-arrest/no action situation, providing protection for the victim via coordination of services with police agencies;
Pilot Projects - North Miami Beach Police Dep't. & Carol City Substation of P.S.D., "Red-Flagging" domestic cases for arrest & team riding on patrol.
Cross training in crisis intervention & stress control.

Courts

- Criminal: Conditional release with the consent of the victim & Officer within 24 hours of arrest incident;
Diversion of the criminal charges pending successful completion of the Program;
Post dispositional voluntary treatment as a condition of Probation;
Victim/Witness support.
- Civil: Temporary Restraining Order Proceedings;
Family Court Proceedings;
Baker & Meyer Act Proceedings
- Administrative Office of the Courts:
Linkage with Education & Training Coordinator in design & implementation of TRO Procedure; training of Judges.

State Attorney's Office

- Participation in Pretrial Conferences for domestic-related cases;
Victim/Witness support; training of prosecutors.

Public Defender's Office

- Consultation; training; linkage with Social Service Department.

Social Service Agencies

- obtaining services e.g. welfare, housing, AFD, Job Training, legal services, etc.

Medical Service Agencies

- referral for emergency room treatment, Crisis Intervention, JNH, private physicians, Medicare/Medicaid, etc.

INFORMATION & REFERRAL

- Brief service clients are provided with basic information regarding manpower, welfare, daycare, legal services, etc.

COMMUNITY OUTREACH

- Pilot Projects: Outreach Liaison in cooperation with Family Project;
Linkage with Neighborhood Family Support & Task Groups;
Police Agencies receiving Roll Call training, team riding, & "Red-Flagging" of domestics for immediate pick-up by Program personnel at the Jail.

For the past two years the Domestic Intervention Program has assisted Dade County Police in responding to domestic disturbances with particular emphasis upon the Black community. The Program provides pre-arrest preventive services specifically designed for family violence cases requiring community crisis intervention as an alternative to a "non-action" Police response. Our Counselors are presently riding with Police Officers in the Central District, in North Miami Beach, Miami Beach, Carol City, Cutler Ridge, and Homestead. This effort is being made 1) to provide Police Officers with an alternative response to domestic disturbances when no arrest is possible and 2) to provide victims and batterers speedy access to services which can significantly reduce the potential for recurrence of the violence. Inasmuch as these "no-action" situations very frequently escalate and impact upon the system at a later and more violent point, this early intervention constitutes an effective preventive measure.

Secondly, the Program provides post arrest diversion services designed for defendants in domestic violence cases as an alternative to the traditional prosecution response. A Domestic Intervention Program staff member in cooperation with the Dade County Pretrial Release Program reviews all arrest affidavits and interviews all defendants in custody within 24 hours of an arrest incident which is domestic violence related. This jail interview procedure represents the greatest impact upon defendants at a time when their motivation for behavioral change is at its peak. The eligible defendant is then released via an agreement that if he fails to participate satisfactorily in the Domestic Intervention Program, his release via P.T.R. is subject to immediate revocation. The timely intervention at the Jail coupled with this conditional release represents the single most powerful deterrent to the recurrence of the violence during a period of time when traditionally no controls or services are available either to the defendant or the victim. The diversion option offers the defendant an alternative to prosecution with the incentive of a dismissal of the charge upon successful completion of Program participation. The victim receives full Program services and must also consent in order for the defendant to be diverted from prosecution.

It has been the experience of the Program during the past two years that when family violence occurs in the Black community, the police are more likely going to become involved. During 1979, fully 63% of the cases referred by the Police & the Courts both to the pre-arrest preventive and the post arrest diversion units of the Program were Black, while Blacks represent only 14.5% of the total population of Dade County. Within the Black community, police intervention in family violence situations occurs more often with arrest being used more frequently as the result. Blacks represented 64% of the defendants who were involved in domestic-related charges and were referred to the Post Arrest Unit of the Program during 1979.

In addition, it has been the Program's experience that family violence within the Latin community is increasingly impacting upon the Dade County criminal justice system. During 1979, 12% of the cases referred to the Program were Spanish. During the first half of 1980, Latins have represented 27% (more than a two-fold increase) of the Program participants.

It is apparent that a Program which offers preventive and interventive measures and which strives to work with the Police in developing reasonable and effective response to family violence in our community is a critical necessity.

It is our belief that we are having a positive impact in these areas of concern. It is our sincere hope that these efforts will not come to a close in July.

DOMESTIC INTERVENTION PROGRAM

SYNOPSIS

The Domestic Intervention Program began operation on January 1, 1979, funded by a Discretionary Law Enforcement Assistance Administration grant. The primary goal of the program is the reduction of domestic violence in Dade County via a two-pronged approach to service provision through:

- a. a service component specifically designed for victims of family violence cases requiring crisis intervention and advocacy;
- b. a diversion component specifically designed for defendants in domestic violence cases as an alternative to the traditional prosecution response.

During 1979, the program provided services for 300 families, defendants and victims, involved in domestic violence cases. Extensive training programs in cooperation with social service, treatment and police agencies culminated in the development of an effective program treatment process which addresses the victim, the abuser, and the family unit. The program consolidated its efforts during the beginning of 1980, providing services for as many families during the first half of the year as during all of 1979.

In May, 1980, in the wake of the riots, the program initiated additional community outreach efforts as a second phase. Its attention was focused upon the severely strained relations among the community, the police, and the criminal justice system. The program's relevance to the recovery effort became clear.

The program has established a Neighborhood Advisory Board comprised of representatives from the Tenant Councils of the projects and from the Safe Streets Unit, the Scott Team and Brownsville Team Police Units of the Dade County Public Safety Department. The Board has convened monthly at the Caleb Community Center for the purpose of providing community input and a forum for improving community/State Attorney's Office/police relationships with respect to family violence issues. With the implementation of these outreach efforts, the program has provided services for 525 additional families during 1980.

Even under normal circumstances, the potential for an escalation of violence is at its peak when police must intervene in a domestic disturbance and the family thereby faces involvement with the criminal justice system. The circumstances existing in Dade County have increased that potential immeasurably. It is apparent that a program which offers preventive and interventive measures and which strives to work with the police and the community in developing reasonable and effective responses to family violence in Dade County is a critical necessity. The Law Enforcement Assistance Administration has found this to be only program of its kind in the country that is operating successfully. It is being written up as a model for future programs. However, funding for our program will be ending in a few months. It is very important, in light of the service catchment area, for such a needed program to continue. The diffusion of tension within families and in the community is an aspiration that this grant is bringing to fruition.

APPENDIX 5

Publication: "An Overview of Family Violence"

MAR 26 1980

AN OVERVIEW OF FAMILY VIOLENCE

Andrew Kaplan and Joan Svaldi*

INTRODUCTION

In recent years, there has been a growing concern about the survival and future of the American family. The stress and strains of our rapidly evolving society have brought significant changes upon the character and function of the family institution, a fact not unrelated to the tremendous increase in the divorce rate during the last decade. One element within the matrix of family evolution is the growing awareness that families have historically helped perpetuate the physical abuse of the people who compose them. For example, in a national survey done by Straus and others, it was found annually that 16 of every 100 couples are involved in instances of "violent confrontation" with each other. Three out of every 100 children "are kicked, bitten or punched" by parents and over 30% of male and female siblings attack each other. Straus estimates as many as 8 million individuals are victims of family violence each year.¹

Clearly, these forms of intra-family behavior are destructive to our physical and mental health. Many cases of child and spouse abuse result in serious injury or death. Family relationships are damaged or destroyed and antisocial attitudes may be inculcated in the child-victims. Despite such consequences and epidemic proportions, however, social scientists have recognized family violence as a public health problem only in recent times. Prevention and treatment strategies have just begun to make an impact.

In addition to the psycho-social problems attendant to the physical abuse of people, family violence frequently becomes a matter for crimi-

nal justice agencies to deal with. Historically, the criminal justice system has paralleled the social service system in providing a woefully inadequate response to handling these non-stranger crimes. Many police agencies provide little problem-specific training for handling domestic disturbances, considered one of the most dangerous types of police calls. In state attorneys' offices, prosecutorial policies for domestic crimes have ignored the emotional and economic needs of the women and children who are the victims. Frightened, isolated and economically dependent, battered wives often reject prosecution as an answer and return to the violent home. Abused children are even less fortunate, for their dependence is even more complete. When removed from the home, their fates may become a matter for insensitive governmental bureaucracies and often inadequate foster care placements. Thus, despite the recent awareness about family violence it continues to need substantially increased national attention.

DEFINITION OF TERMS

A definition of terms is in order before proceeding further. By family, we mean to speak mainly about nuclear families: those composed of mother, father and children. However, we must also recognize extended families, which include other relations, such as grandparents; also included are families composed of unmarried people who consider each other "significant" and who live in daily, close proximity to each other. In this sense, the terms spouse abuse and wife abuse also apply to men and women who fulfill marital roles, but who are not necessarily legally married. The term family violence is defined as the use of physical force or sexual coercion between family members. Under this definition, family violence can range from a mild shove on the one hand to a homicidal beating on the other. In addition to degree of severity, family violence can also be categorized by type. For example, wife abuse, child abuse and child sexual abuse are types of family violence. Mild physical punishment of disobedient

children might be classified as an acceptable form of physical force, however, as discussed below, legitimate questions regarding potential psychological damage from physical punishment for any reason currently exists.

Although family violence is not limited to women and children, the results of theoretical and empirical investigation supports the hypothesis that wife abuse and child abuse are most endemic to the structure of family and society. For the purposes of this paper we shall direct our attention to these particular forms.

HISTORICAL FACTORS

Although family violence has become recognized as a serious international social problem only in recent years, an examination of history and culture reveals that the abuse of women and children has been a worldwide phenomenon since ancient times. Anthropologists tell us that these forms of physical violence are rooted in the traditions of patriarchal society. Although anthropological evidence suggests some early societies reflected matrilineal or matrilocal values, no society yet unearthed has proved an exception to the rule that civilization originated and evolved along a patriarchal structure.^{2,3}

It appears that sex differences are the primary reason for the character of our male-dominated social evolution. Biologically more aggressive and of greater size and strength, the males of primitive society banded together to provide food and protection for the social group; the child-bearing women assumed a more dependent social position. As societies evolved, established male dominance became an entrenched and accepted sociocultural reality.

In her classic work, *Sex and Temperament in Three Primitive Societies*,⁴ Mead documents exceptions to biologically based sex roles found among three New Guinea tribes. In one society, men and women both share aggressive and dominating "masculine" personality traits. In the second, Mead describes how both sexes enact the "feminine" character; in the third society, men and women reverse "ideal" masculine and feminine behavioral characteristics. Mead's work validates the possibility of structural social change. In the context of world history, however, her work also underscores the patriarchal foundation underlying worldwide social evolution.

In addition to the biological basis of our

social structure, authors have also noted two other factors which historically reinforced male dominance:⁵ First, economic conditions provided the foundation by which men remained the dominant sex. As ownership of production and property shifted from the primitive, communal organization to the private, family organization, individual men became "heads of the household" and were able to wield virtually complete control over the survival of the family unit. The second and perhaps most important support of the patriarchal structure, however, was religion. Jewish and Christian forms recognized man as the primary creation of God; women were condemned to dangerous weakness, born in the Garden of Eden, and responsible for the fall of man. According to biblical history, the patriarchal family was sanctioned by a masculine God.

Religion was in a preeminent position of socio-cultural influence during the Middle Ages and this was paralleled by the continued debasement of women and children.

By the Middle Ages, the status of women was so debased, that according to one writer, men were exhorted from the pulpit to beat their wives and wives to kiss the rod that beat them. The deliberate teaching of domestic violence, combined with the doctrine that women and children could have no human rights, had taken such hold by the Middle Ages, that men had come to treat their wives and children worse than their beasts.⁶

WIFE ABUSE

Legal reforms against wife abuse began to surface during the 19th century, but were not to appear in many "civilized" countries until much later. In discussing the sexual revolution, Millet describes women's progress during the 1830-1930 period as a difficult and slow-moving process.⁷ Societies' attitudes toward the "weaker" sex were reinforced by laws which continued to support the assertion that women and children were inferior to men. Under the legislative influence of Napoleon Bonaparte's Civil Code (1800-1804), French women's progress even took a step backward. Napoleon revoked the laws of equality which has been in operation during the French Revolution (1789-1799) and reduced women to a position where they were at the complete mercy of their

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husbands; men were literally encouraged to be abusive. Napoleon wrote no laws to prohibit or limit the abuse of women or children.

Resistance to substantive reforms for women bore little relationship to political or geographic boundaries, a fact aptly illustrated by the Russian experience. Having endured blatant and sanctioned abuse in 19th century Czarist Russia, women were initially granted social and sexual equality during the Communist Revolution of 1917. Soviet revolutionary ideals sanctioned a society free of discriminatory social divisions. Yet, despite the Marxist rhetoric, divisions of class and status subsequently reappeared in the Russian social order; this was paralleled by the re-emergence of traditional divisions of labor and responsibility in the Russian family. Soviet ideals were thus compromised by the return of the patriarchal family structure and the rejection of women as first-class citizens.

Some of the earliest changes in the status and treatment of women were made in England. In striking contrast to Napoleon's theory of the family dictatorship were the ideas of the English philosopher, John Stewart Mill (1806-1877). Mill wrote an 1869 protest against the abuse of women, wherein he asserted:

... the legal subordination of one sex to the other is wrong in itself and now one of the chief hindrances to human improvement...⁸

British women were first granted property rights in 1870.⁹ A legal reform (albeit weak) for abused women was passed in 1880. An 1885 measure prohibited men from selling wives and children into prostitution and the household imprisonment of wives by husbands was banned in 1891.¹⁰ Despite these 19th century measures, however, wife abuse remained a serious (and often hidden) social problem well into the 20th century. The extent of the problem was evidenced in 1971, when English feminist, Erin Pizzey, opened the first battered women's shelter. The response to her efforts was so dramatic that other shelters and an organized movement against spouse abuse rapidly emerged. Pizzey published *Scream Quietly or the Neighbors Will Hear*¹¹ in 1974 and the movement has received increasing attention since that time.

Based upon British common law, a young United States inherited a tradition which con-

doned the "chattel" theory of women and children. Common law provided that women underwent civil death upon marriage. As convicted felons do now, married women lost all basic human rights.¹² Relatively early progress was, however, evidenced in the United States. A milestone was reached with the first women's rights convention in 1848. The convention asserted that "all men and women are created equal" and called for equal, legal, educational and economic status with men.¹³ By 1871, such diverse states as Alabama and Massachusetts passed laws prohibiting wife beating.¹⁴ By 1894, North Carolina and Mississippi had followed suit.¹⁵ Notwithstanding states' reforms, however, the passage of such laws continued to be primarily the result of the women's rights movement. The recognition of wife beating as a distinct public health problem was yet to emerge. Thus, despite women's suffrage in 1920, wife beating continued as an unrecognized social phenomenon well into the 20th century. Sexual attitudes, the traditional sanctity of family affairs and the social sanction of male dominance left the battered spouse to fend for herself.

The general social indifference toward battered women was nowhere more aptly reflected than in absence of institutional resources. The mental health profession rarely recognized the problem for what it was and appropriate social services were virtually non-existent. Those women brave enough to file criminal charges against the batterer were met with a variety of institutional roadblocks to a successful prosecution. For example, despite criminal statutes not excluding domestic violence, spouse assault was frequently considered a "family problem," rather than a crime, by policy. This traditional attitude was reinforced by screening procedures in state attorneys' offices requiring victims to produce credible witnesses (usually only children were observers to an assault) and to generally bear the burden of proof in such cases.

We have noted how Erin Pizzey precipitated the 1971 English movement against spouse abuse. So dramatic was the reaction to her cause that domestic violence soon became an international issue. Reaction in the United States was swift. Davidson notes organized services for battered American women beginning in 1972, in St. Paul, Minnesota.¹⁶ In 1975,

the National Organization for Women identified domestic violence as a major national problem and formed a National Task Force on Battered Women and Household Violence. During the last four years, battered women's shelters and services have appeared across the country. In 1979, the National Association for Social Workers recognized domestic violence as a major national problem and issued a policy statement supporting the development of more services for battered women.

Despite the current trend toward recognition and acceptance of the problem, there remains a substantial inadequacy within our social service and criminal justice systems. Traditional social service agencies are typically prohibited from recognizing family violence as a distinct problem due to categorical funding characteristics. Many agencies are untrained and unable to respond effectively to the immediate and dangerous aspects of a family violence crisis; there is often a lack of supportive resources desperately needed by the battered woman. Safe houses for battered women and their children, for example, are a commonly identified need in many United States communities.

Although attitudes within some state attorneys' offices are beginning to change, researchers report that many prosecutorial agencies continue to ignore the criminal and dangerous aspects of family violence. The institutional roadblocks previously described continue to exist; in many agencies, the growing caseloads of prosecutors often results in a further downgrading regarding the handling of domestic crimes, and very few cases make their way into the courtroom. A more typical outcome is the issuance of a citation to the offender/husband requesting that he participate in a mediation hearing, and apply for help at a social service agency:

Clearly, prosecutors resist trying cases of marital violence unless they cannot avoid doing so. Citation hearings are cruel hoaxes, designed to distract a complainant from her original purpose and to make her believe something is being done while the (state) attorney disposes of his caseload. The future safety of the woman is not considered in the citation hearing.¹⁷

In cases where prosecution is pursued, the future of the victim can remain equally stressful,

dangerous and unpredictable. Under the "discovery rule," defense attorneys are entitled to know the whereabouts of the victim. Although procedural strategies can help a battered wife remain hidden from her violent husband, prosecutors often have neither the time nor the inclination to help her do so. Once the battering husband locates his wife, she may become subject to subtle or overt harassment and more physical abuse. Family members, friends and lawyers may exert direct or indirect pressure on her to drop charges and reconcile with her husband. In the courtroom, the victim is required to testify against her husband and otherwise assist the prosecution in achieving a guilty verdict. Even if a defendant is found not guilty, the abusive relationship will likely be further aggravated by the husband's angry reaction to courtroom procedures. If a guilty verdict is reached, the wife is often stigmatized for her action, and the family is affected by the loss of money through fines or incarceration of the breadwinner. The court action is thus unpredictable and rarely satisfactory in and of itself.

CHILD ABUSE

We have noted that both women and children have been viewed and treated as chattel since ancient times. The debasement of children, however, has taken the more extreme form. Early history indicates, for example, that infanticide, the socially-sanctioned killing of newborn infants, was accepted throughout civilization.

In Ancient times, infancy was a dangerous time of life. The child was not considered human until certain ceremonies were performed.¹⁸

Population control, illegitimacy, physical handicaps and superstition were factors frequently associated with infanticide. The practice was widely used into the 18th century but has been significantly reduced during the 19th and 20th centuries, particularly in the more advanced countries.

For those children fortunate enough to survive the neonatal period, nonfatal abuse was a frequent experience. In addition to their "chattel" status, a variety of other social justifications were used as a basis for their maltreatment.

Maltreatment of children has been justified

for many centuries by the belief that severe physical punishment was necessary either to maintain discipline, to transmit educational ideas, to please certain gods, or to expel evil spirits.¹⁹

Radbill cites a variety of child maltreatment laws which have been promulgated during the last 4,000 years, but provides ample evidence of the continuing widespread practice of child abuse throughout the world.²⁰

Along with the wife beating, child abuse was an early tradition in the United States:

The early colonial apprenticeship system under which children as young as four years of age were bound out to servitude, was responsible for many battered children. Thus, a master of Salem, Massachusetts in 1630, was tried for murdering his apprentice. The jury acquitted him because the boy was ill-disposed, although the master's correction was thought to be unreasonable in that the autopsy disclosed a fractured skull.²¹

Following trends set in France and England, the United States did recognize the child abuse problem during the latter half of the 19th century. Fontana cites the first recorded case of child abuse in the United States:

The first case of child abuse recorded in New York was that of a child named Mary Ellen . . . a church worker's effort to help Mary Ellen and remove her from her environment, after making contact with protection agencies, including the police and the state district attorney's office, proved useless. In desperation, this woman appealed to . . . the American Society for the Prevention of Cruelty to Animals. She pointed out that this child, for all practical purposes, was being treated as an animal and was certainly a member of the animal kingdom. The Society for the Prevention of Cruelty to Animals brought action resulting in this child's subsequent removal from the parents. . .²²

In describing the incident, the author notes the sad irony in the fact that it took an animal protection society to intervene in the first recorded case of child abuse. Nevertheless, this action did result in the 1875 formation of the New York Society for the Prevention of Cruelty to Children. By 1930, a White House Conference

on Child Health and Protection convened and recognized the right of children to be protected from abuse and neglect by provision of a full range of child welfare services.

Specific United States reforms against child abuse were precipitated in large measure because of the medical profession. John Caffey, a pediatric radiologist, probably was the first author to describe unexplained traumatic injuries to children.²³ Following Caffey's 1946 article, Silverman reported similar conclusions and "insisted on a traumatic basis for injuries of the type now known to occur in the battered child. . ."²⁴ Wooley and Evans conducted a re-

trospective investigation of radiographic findings and further reinforced the growing evidence associating child abuse with severe physical trauma. Subsequently, the identification and management of child abuse cases became an accepted medical necessity. In 1962, Dr. C. Henry Kemp and his colleagues introduced the term "battered child." In their classic article, "The Battered Child Syndrome," the authors documented the widespread occurrence of serious and fatal child abuse by parents.²⁵ A number of other substantiating studies were also completed during the early and middle 1960's. As a result of these medical investigations, other disciplines, notably social work and law, also began to focus on the problem. By 1967, all states had adopted laws sanctioning or mandating reporting of suspected child abuse cases.²⁶

Despite efforts to advance child abuse identification, a number of obstacles slowed effective intervention. Gil has identified four major problems which interfered with child abuse intervention during the 1960 to 1970 period:

- (1) Physicians were not adequately trained to identify the battered child or to implement appropriate action in cases which were discovered;
- (2) There was a lack of adequate child welfare services in many United States communities;
- (3) There was a legal question regarding the constitutional rights to due process for accused parents. In most states, child abuse laws neglected to insure adequate legal counsel, particularly for poor or indigent parents;
- (4) There was an inadequate set of laws and

procedures for "constructive, protective intervention" in most communities. Many mental health professionals desired nonreporting to law enforcement agencies. Utilizing social intervention was thought to provide a nonthreatening basis for working with abusive parents and abused families.²⁷

Underlying these problems was an inadequate knowledge base about effective child abuse intervention and treatment. In the face of a discouraging state of the art and wide differences of opinion on intervention, a substantial lack of coordinated action continued in the United States for several years. A more substantial response was, however, on the horizon:

By 1975, a mobilization of national resources had begun in the United States that exceeded all previous efforts to alleviate child abuse . . . evidence that violence inflicted on children was beginning to be viewed as a public health problem, which affected the entire society, not merely a medical and legal problem which affected individual parents and children . . .²⁸

Today, the child abuse problem is receiving better documentation and is well-accepted as a distinct public health problem. Federal, state and local governments have spent millions of dollars on reporting and treatment systems throughout the United States. Nevertheless, it would be dangerous and fallacious to conclude that we have made more than a well-intentioned beginning to tackle the problem. The problems that Gil had identified, particularly in regard to physician training, child welfare services and effective intervention procedures, continues in many United States communities today.

THE EPIDEMIOLOGY OF FAMILY VIOLENCE

In our historical overview, we have emphasized those cultural and organizational characteristics of civilization which perpetuate family violence. Our normative approach to the phenomenon is supported by a number of studies which indicate that family violence cuts across economic, ethnic, educational and social divisions. According to a survey conducted for the National Committee on the Causes and Prevention of Violence, the incidence and rates of phys-

ical violence was found to be equally common among all income groups and educational levels.²⁹ Roy reported on a recent Harris poll which indicated that 20% of all Americans approve of hitting a spouse on appropriate occasions; among the college educated group, the percentage was 25%.³⁰ Although police reports suggest that the poor commit more acts of domestic violence, this is probably because the poor are more likely to become police statistics. Middle and upper class families can more easily cover the problem by virtue of their social position and economic resources. Socioeconomic factors thus appear less related to cause than to concealment of the problem.

In discussing the causes of wife beating, Straus asserts that few cases arise from clearly individual determinants. Perhaps 3% of cases are caused by emotional disturbance alone; 4% to 5%, he speculates, are related to only cultural sanctioning and not more than 6% of spouse abuse cases can be attributed solely to social stresses, such as unemployment. Straus believes that a combination of factors account for the remaining 86% of spouse abuse cases.

I suggest that the causal situation which accounts for most wife beating is to be found in combinations of individual, cultural and social organizational factors, rather than any one of these by itself.³¹

Similar conclusions have been reached regarding causation in child abuse as well. Investigators' findings indicate, in fact, an association between child and spouse abuse within a significant number of families. In a recent survey of 150 spouse abuse cases, Roy found that children were also assaulted by 45% of the spouse abusers. In 95% of these cases, the abused wife did not report their husbands as child abusers.³² In other studies, it was found that parents of either sex were frequently involved as the abuser; with both parents present in the home, however, men are more likely to be the perpetrator.^{33, 34}

Consistent with the association between child and spouse abuse, investigators have concluded that a history of abuse as children is a common characteristic of adult abusers. This "intergenerational" factor has led investigators to advocate early intervention in family violence as a way to break the recurring cycle of learned

behavior and ultimately, to provide effective prevention for the next generation.

Investigators and clinicians report a number of conditions have been found to be associated with child and spouse abuse:

- (1) unemployment;
- (2) economic distress;
- (3) alcoholism and drug abuse;
- (4) unwanted pregnancies;
- (5) extramarital affairs;
- (6) children conceived out of wedlock;
- (7) religious and cultural differences between marriage partners; and
- (8) emotional disturbance.

In addition to citing some of the above factors, Roy also found seven variables which prevented abused spouses from leaving the situation. In order of importance, these "maintaining factors" were as follows:

- (1) hope that husband would reform;
- (2) no place to go;
- (3) fear of reprisals from husband;
- (4) children made it very difficult to find an alternative place to stay;
- (5) financial problems based upon unemployment and lack of money;
- (6) afraid of living alone; and
- (7) divorce is a shameful state—a stigma.³⁵

Roy noted that her study was an exploratory one and recognized some validity weaknesses, however, her findings did not deviate from conclusions commonly reached by those working in family violence programs. The study findings are also consistent with Straus' conclusions regarding the multifactor basis for the occurrence of spouse abuse.

It is evident that substantially more investigation must be done regarding cause-effect in family violence, however, some tentative conclusions can be made:

- (1) The majority of family violence cases are multifactor insofar as causation is concerned;
- (2) Family violence is intergenerational and appears to become normative to family behavior unless the generational cycle is stopped;
- (3) The occurrence of child and spouse abuse appears correlated within families;
- (4) Psychological stress (e.g., emotional disturbance, alcoholism) is associated with the occurrence of family violence;

(5) Social stress (e.g., high unemployment rates) is associated with the incidence and rates of violent family behavior;

(6) The incidence and prolongation of family violence is exacerbated by a lack of community resources (e.g., safehouses for endangered and economically dependent women);

(7) Socio-economic status is less related to cause than to concealment of the problem; and

(8) Our culture norms and social organization support the use of violence within family and society.

SOME PSYCHO-SOCIAL FACTORS

While acknowledging the probability that most cases of family violence are caused by multiple factors, it is also useful to look more closely at specific psycho-social characteristics which have been found to be associated with the problem.

In the preceding section, we indicated that a history of abuse as children was a common characteristic among adult abusers. Gelles has found that this intergenerational aggression was related to the effects of parental modeling on children; intra-family violence appears to be a learned behavior, incorporated into the child's behavioral repertoire during the formative years.³⁶ The wife beater has thus been socialized into his adult violence. This violent behavior is reinforced by cultural stereotypes which idealize toughness, aggressiveness and power as ideal "masculine" attributes.

Consistent with their unhealthy childhood experiences, adult abusers are reported by clinicians to reflect unhealthy personality traits. Frequently, the husband has a poor self-concept which is reinforced by a failure to function successfully in the adult world; adult abusers may be socially isolated, unemployed and immature. The low status and concomitant feelings of inadequacy and insecurity may provoke such men into violent, egocentric behavior in the home; such reactions are an attempt to maintain or achieve status in the one environment over which they have some control. Such individuals may also turn to alcohol or drugs in an attempt to numb their own emotional pain. This numbing exacerbates abuse by providing situations

where the violent behavior can be attributed to external forces, e.g., the effects of the alcohol.

The socialization process we have noted has its effects on the behavior of the battered woman as well. Parental modeling and social norms teach the female to accept emotional (and economic) dependence on her husband. Socially, the battered wife may fear she will not be accepted into the mainstream of society as a single parent. Sex-role conditioning makes the woman believe her primary source of satisfaction is the marriage. Subsequently, she may feel responsible and ashamed if her own marriage fails and will do anything, including enduring violent attacks, to save face.³⁷

In observing cases of spouse abuse, clinicians report typologies which incorporate a variety of male/female relationships. Faulk studied 23 cases of spouse abuse and categorized five types of offender-to-victim relationships:³⁸

- (1) The dependent passive husband who was provoked to violence by a "querulous and demanding" wife;
- (2) The dependent and suspicious husband whose jealousy and tension led to a violent attack;
- (3) The violent and bullying husband who attempted to solve many life-problems through violence;
- (4) The dominating husband who became violent when psychologically threatened by his wife; and
- (5) The stable and affectionate husband whose violence was related to an emotional disturbance.

Notwithstanding such typologies, certain dynamics have been reported to appear in abusive relationships with some consistency.

It may come as a surprise that the wife almost inevitably plays a part in her own assault. This is not to say that she is to blame for the assault. But in most marriages, the partners are in some way psychologically and emotionally on the "same level." People pick mates responsive to their own (unrecognized) neurotic needs.³⁹

Lion has pointed out that child abuse involves a different set of dynamics than spouse abuse; such differences, he notes, lie in the "complex, interlocking, hostile dependencies between two adult partners" as opposed to the more complete dependence presented by the

physically and psychologically weaker child. In the latter case, the child's helplessness taxes the parents' limited emotional capabilities, and reflects an immaturity and inability to fulfill the adult role.⁴⁰

Unmet needs for love and comfort are highly significant factors in the personality profile of people who abuse . . . these parents behave like children themselves and want their children to act like adults.⁴¹

In that child abuse can and does occur in one-parent homes, it is obvious that child abuse and spouse abuse are not inevitable concomitants of each other. Child abuse may never occur in two-parent homes where spouse abuse has existed for many years. However, it is emphasized that family violence frequently does involve adults and children, together.

Violence . . . feeds on itself. A climate of violence and physical abuse in a home permeates the relationships of all individuals involved . . . A man who beats or abuses his wife will do the same to his children. A wife who is abused will often turn to her children to express the rage that has been heaped upon her by a brutal spouse.⁴²

One factor which may be a significant link between child and spouse abuse lies in the occurrence of a "life crisis." Such a concept has previously been applied to child abuse cases by Justice and Justice.

A life crisis . . . consists of a series of situational events that are compressed together and sometimes accompanied by maturational crises, such as marriage, pregnancy, a son or daughter leaving home or retirement.⁴³

The authors conducted a study of abusive parents wherein they found the life crisis a predisposing factor to abuse.

It is the life crisis—the prolonged series of changes that predisposes (the parent) to abuse . . . many of the changes to which a person must adjust are related to interpersonal problems and losses rather than economic factors . . . the end state of the life crisis is exhaustion: a decreased ability to adjust and an increased risk of losing control.⁴⁴

The authors note that change as a predisposing factor to abuse has not been previously investigated insofar as child abuse. The need to more

fully investigate its association with all forms of family violence is noted here, as well.

Certain other characteristics may also be associated with abusive parents in the parental role. Abusers often demand an unreasonably high level of performance from the child. They may not know age-appropriate behavior for children. Many abusive parents are also ignorant of child care needs and alternative disciplining methods. One general pattern seems to be that a particular child is selected as the scapegoat. Once abuse has begun, there seems to be a tendency for the parent to repeatedly abuse the selected child.

Many battered children are labeled by their parents with such negative adjectives as "retarded," "bad," or "selfish." Because they incorporate parents' judgment into their self-concept, the children will themselves reflect later predispositions to become abusive parents.

Child sexual abuse is a form of violence which usually does not involve physical injury to the victim. The American Humane Association estimates that there are at least 50,000 cases of child sexual abuse each year.⁴⁵ Most instances of sexual abuse involve adults known to the child; the most common cases involve fathers and daughters. In such cases, sexual abuse may be categorized as a specific form of family violence.

Despite the rarity of physical injury to the victim, child sexual abusers are often described in terms similar to those who perpetrate physical abuse. The parents themselves may have experienced abuse as children. Fathers tend to be immature and inadequate. The sexual abuse is seen as an attempt to satisfy emotional deviations rather than to seek pleasure. The mother is usually depressed, isolated and withdrawn. She feels inadequate as a mother and a wife. The involved child may, over the course of time, displace her mother by becoming a sexual substitute. As in other forms of family violence, sexual abusers are often faced with other family related problems, such as financial stress and social incompetence.

Although the dynamics associated with family violence are complex and not fully understood, there seem to be certain themes which appear to occur with some regularity; these are summarized as follows:

1) Abusive adults tend to be immature and

- unable to fulfil the adult role satisfactorily;
2) People who abuse or are abused tend to have a low level of self-esteem;
3) People who abuse tend to have alcohol or drug problems.
4) Adult abusers have themselves been subject to and/or witnesses to abuse as children and have learned violent behavior through family socialization;
5) People who abuse or are abused have stereotyped attitudes about male and female sex roles;
6) Families may be predisposed to violence by a life crisis;
7) Family violence tends to permeate the home, involving both children and adults; and
8) Abused children serve as scapegoats, and are repetitively selected by abusive parents.

IMPACTING ON FAMILY VIOLENCE AS A PUBLIC HEALTH PROBLEM

While we have focused on violence in the family, it should be evident that the historical sanctioning of such behavior is not unrelated to the high level of violence we experienced and observe in other areas of societal functioning. Specifically, the effect of social learning on children from violent homes is not limited to family life. As the primary agent of socialization, the family teaches us how to behave as "civilized people." The result of the families' acceptance of violence is generalized to society-at-large, and reaches into every facet of human endeavor. Any effort to impact on the problem must be cognizant of this essential relationship to the structure and organization of society.

In light of our long tradition of social violence, it is reasonable to question the likelihood of our making any significant advances toward a more gentle way of living in the foreseeable future. Notwithstanding the magnitude of the problem, however, social changes can occur, given a national commitment and innovative approaches to the reduction of family violence. Attention to the following areas can result in mechanisms for change:

1) First and foremost, the needs of currently battered women and children need attention. Changing attitudes about family vio-

lence begins with the commitment of institutional resources to aid the immediate victims of any public health problem. Criminal justice or social service agencies can provide leadership by bringing agencies and professionals together to examine the needs and problems of the community in relation to the family violence problem. In Miami, Florida, for example, a Task Force on Child Abuse was initiated at the behest of the State Attorney. Such a strategy gives initial legitimacy to the problem and provides impetus for continued action. Such a group can promote the development of the following resources:

- (a) well-trained police who can provide effective assistance to victims by vigorously enforcing assault and child abuse laws, providing immediate protection to women and children and working cooperatively with social service agencies;
- (b) safehouses and shelters that provide temporary residence for battered women and children in danger of further assaults; also, foster care for battered children who cannot return to their homes or the homes of relatives;
- (c) crisis lines and information and referral services to battered women who need emotional support, and information to make important life decisions. Current laws in all 50 states require individuals to report suspected child abuse cases, usually within 24 hours of observation;
- (d) low cost legal aid to help women obtain restraining orders, financial and child custody rights and divorces;
- (e) other social services to provide women with financial assistance, housing and therapeutic and other supportive services. Child abuse treatment programs can provide advocacy and therapy services for children and their abusive families.

2) Community education is an essential concomitant to social change. By cooperative work with institutional settings, such as schools and churches, the community-at-large can be made aware of the problem, its consequences and solutions. Media resources (newspapers, radio and televi-

sion) are always looking for "hot" topics and can also provide a vehicle for community education and involvement. Such resources are particularly effective in reaching the various socio-economic levels and ethnic groups that exist in communities. Additionally, public speaking to professional groups (e.g., social workers, physicians, teachers) and community service groups (e.g., Kiwanis) may provide a method for reaching other important segments of the community.

3) Political action: Areas 1) and 2) above would be incomplete without an organized effort to bring about political change. Feminists and other advocacy groups can initiate court action, media events and public pressure to make public agencies and bureaucrats more responsive to the unmet needs of abused people. Lobbying before and during legislative sessions can assist in the passage of laws and the allocation of funds to provide needed services in communities. For example, the 1979 Florida Legislature was successfully lobbied by social workers and others to enact spouse abuse legislation, subsequently, a bill was passed by the Florida House which provides statutory support for the issuance of more easily secured restraining order and the development of spouse abuse centers.

CONCLUSION

One of the most important characteristics of family violence is its intrinsic relationship to the patriarchal structure and organization of society. As the primary unit of socialization in society, the patriarchal family functions to maintain and reinforce the use of violence as a means of adaptive behavior in all spheres of human activity. Insofar as families are concerned, women and children have historically been the primary victims of such behavior. The effects of social learning on children perpetuates normative attitudes about violence in each succeeding generation.

Despite the virtually unconscious acceptance of violent behavior in families and society, social scientists are beginning to understand the destructive consequences of such attitudes and, in recent years, have come to view spouse and

child abuse as a major public health problem. Despite this growing awareness, however, family violence will be reduced and eliminated only by a concerted effort which must be national in scope. Change must occur in many spheres of society, not the least of which is in our criminal justice system. Family violence must be recognized for what it is: contrary to the principles of democracy and the ideal laws of modern society.

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For more information on family violence and its prevention and treatment, the following organizations may be contacted:

1. Abused Women's Aid in Crisis (AWAIC, Inc.)
G.P.O. Box 1699
New York, New York 10001
2. American Human Association
5351 South Roslyn Street
Englewood, Colorado 80110
3. National Center on Child Abuse and Neglect (NCCAN)
P.O. Box 1182
Washington, D.C. 20013

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