New Mexico Domestic Violence Offender Treatment/Intervention

Program Standards 2013

Developed by the New Mexico Coalition Against Domestic Violence and Partners
March 6, 2013

As the Executive Director of the New Mexico Coalition against Domestic Violence (NMCADV), it is my pleasure to release the final draft of the New Mexico Domestic Violence Offender Treatment and Intervention (DVOTI) Standards.

The purpose of this document is to provide best practices and guidelines for programs helping men to end their violence across the state. This document is the product of nearly 3 years of research and meetings and we believe it represents the best thinking in the field at present. As advances in the field occur, we will revise these standards to reflect those improvements.

I want to thank the many programs and individuals from all over New Mexico who participated in the creation of these standards. Private, governmental, for-profit, and not-for-profit groups have all been working collaboratively since 2009 to produce a document that fairly and accurately captures the intent, philosophy, and approach of New Mexico providers.

Special thanks go to the Children Youth and Families Department (CYFD) Domestic Violence Unit for their continuous involvement and leadership in the process.

I also want to thank the states with already published standards from which we borrowed in the creation of ours. By reviewing the work of others, we are confident that our efforts are in keeping with overall best practices across the country. I also want to extend a deeply felt acknowledgment to David Garvin and the Batterers Intervention Services Coalition of Michigan (BISCMI) for their continued help and encouragement.

It is our hope that this document will serve as an important guide and support for our all of New Mexico providers now and in the future.

With gratitude and appreciation,

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I. **PURPOSE OF STANDARDS**

The purpose of the New Mexico Domestic Violence Offender Treatment Intervention (DVOTI) Program Standards is to set forth minimum expectations for programs that provide domestic violence offender services and to identify best practices as they are currently known and accepted. It is expected that as knowledge increases in the field, these standards will be revised to reflect those advances.

The standards in the document are designed for males who perpetrate violence against females in intimate relationships. There will be separate standards and expectations of programs that serve a female population and those serving people in same-sex relationships.

II. **GOALS OF STANDARDS**

1. To ensure the safety and rights of victims and their children
2. To reduce and prevent domestic violence through effective intervention programs
3. To ensure that perpetrators receive services that are effective
4. To ensure that perpetrators are held accountable for their abusive behavior
5. To provide recognition of current, appropriate intervention methods
6. To inform the public about the nature of services and standards of DVOTI
7. To encourage statewide communication and interaction among service providers and related agencies working towards the goal of ending domestic violence

III. **GUIDING PRINCIPLES**

The following are the guiding principles that support the DVOTI program standards:

1. The safety and rights of victims/survivors must be the highest priority.
2. The primary goal is cessation of domestic violence.
3. Domestic violence offenders are a separate category of violent offenders requiring a specialized approach.
4. Abuse can never be condoned under any circumstances.
5. Offenders are responsible for their violent and abusive behavior.
6. Offenders must be held accountable for their abusive behavior; consequences for engaging in violent behavior include arrest and punishment for criminal acts. The community should strive to make offenders aware of the full emotional, social and economic costs of their behavior.
7. Offenders can change their behavior.
8. One principal cause for the high prevalence of domestic violence is the offender’s belief that men are superior to women and have the right to dominate them. To the extent that communities support this belief, offenders are encouraged to be abusive.
9. DVOTI must provide separate services for male, female, and same sex offenders to ensure safety and address victim/perpetrator issues.
10. DVOTI must not focus on saving relationships but on ending violence and abuse.
11. DVOTI must support community efforts to enable victims of domestic violence to leave abusive relationships if they choose.
12. Victims of domestic violence undergo tremendous turmoil and fear as a result of the violence inflicted. Their feelings and the potential for further harm to them must always be of utmost consideration when making program decisions.
13. DVOTI must not discriminate on the basis of race, color, religion, gender, national origin, ancestry, age, physical or mental disabilities, sexual orientation or economic circumstances. DVOTI should strive to reflect the cultural diversity of the communities they serve.
14. DVOTI must respect the individual differences and rights of participants.
15. Offenders with chemical dependency and/or mental health concerns should receive services targeted to those areas; such services must be separate from DVOTI and not offered in lieu of a specific batterer’s intervention program.
16. The offenders’ rehabilitation, confidentiality, and furtherance of legal causes are secondary to the victim’s safety and wellbeing.

IV. DVOTI PROGRAM GOALS

The goals of DVOTI are:

1. Cessation of physical and emotional violence.
2. To encourage the offender to become accountable to those he has abused, to take whatever actions are necessary to comply with the safety needs of his partner, and to make restitution for the effects of the abuse.
3. To assist the offender in understanding that his acts of violence, abuse, and use of power and privilege are a means of controlling the victim’s actions, thoughts and feelings.
4. To encourage the offender to acknowledge that his abusive behavior is a choice and to accept responsibility for its impact on his victims and others.
5. To expand the offenders understanding of the cause of his violence and abuse by examining the cultural, social, and personal factors that influence his choice to be violence and abuse.
6. To teach the offender practical skills for non-controlling and non-violent ways of relating to his partner.

V. PROGRAM REQUIREMENTS

A. PROGRAM LENGTH

1. By New Mexico statute, the program shall be a minimum of 52 weeks.
2. Each session shall be a minimum of 1.5 hours in length.

The length of the program requirement is a minimum; programs are encouraged to increase requirements for program involvement as resources permit. Often, more than the minimum time set here is necessary for offenders to change their abusive and controlling behavior.
B. CONTENT

Programs may use diverse intervention methods and techniques to accomplish the primary goal of ending offenders’ use of violence and abuse. The curriculum of the educational component shall, at a minimum, include:

1. Identification and confrontation of abusive and controlling behaviors to victims including partners and children.
2. Identification and discussion of the effects of violence and abuse on victims, including child witnesses. Both the short and long term effects of abuse shall be reviewed. The program staff shall understand, present, and attempt to teach offenders to see the perspectives of the victim and children.
3. Promotion of accountability. Programs will promote the idea that abuse is the sole choice and responsibility of the offender and strive to confront the offender’s excuses for abusive behavior.
4. Identification of cultural and social influences that contribute to the choice to use abusive behavior. Cultural and social influences do not justify or excuse violence.
5. Identification and practice of non-threatening and non-abusive forms of behavior. Batterers are expected to learn and be able to implement non-abusive behaviors in their relationships.

C. GROUP COMPOSITION

1. Group intervention shall be the primary modality. Individual sessions may be provided for intake and assessment purposes and may augment group intervention. Individual sessions shall not be substituted for group sessions except in special cases where individual have medical or mental impairment, acute psychiatric disorder(s), or significant language barriers which interfere with group participation.
2. To promote quality service and maximum interaction, optimum group size is between 5–10 participants. However, in groups with one facilitator, the maximum number of participants is twelve (12). In groups staffed by two facilitators, the maximum allowable number of participants is twenty (20).
3. For the purpose of modeling healthy egalitarian relationships and to monitor the group process, co-facilitation by one male and one female facilitator, when practical, is a best practice.
4. To most effectively deal with issues of gender and violence, groups for offenders must not include women as participants. Mixed groups might place women participants in danger or disadvantage them, as they may be also dealing with issues of victimization by male partners.

D. INAPPROPRIATE MODELS AND APPROACHES

DVOTI is not intended to be or replace psychotherapy. The following educational approaches are either inappropriate for DVOTI or inappropriate as the primary modality.
1. Anger Management: Anger management shall not be the primary educational approach. The program shall challenge the belief that anger is the cause of violence.

2. Victim Blaming: Any approach that blames the victim, alleges victim responsibility, or places the victim in danger is prohibited. There is no behavior on the part of the victim that causes or excuses abuse. Offenders bear sole responsibility for their actions.

3. Victim Coercion or Mandates: Any approach that coerces, mandates, or encourages involuntary participation of the victim is inappropriate.

4. Couples Therapy, Marriage Therapy or Family Therapy: Such therapy shall not be a component of an approved domestic violence offender program.

5. Family Systems Approach: Any approach that minimizes the responsibility of the perpetrator and places responsibility for the violence upon the victim or child witness is prohibited.

6. Any counseling models which identify the violence as an addiction and the victim and children as enabling or co-dependent in the violence are prohibited.

7. Psychopathology: Any approach that identifies psychopathology on the part of either party as a primary cause of violence is prohibited. Initial and ongoing assessment for psychopathology as a primary cause of violence will occur and appropriate referrals will be made.

E. COMPLETION STANDARDS

Programs shall have a written policy that establishes the criteria for completion. Completion of all 52 weeks is the minimum standard for completion. Programs may additionally apply any of the following criteria to determine completion:

1. There have been no reported incidents of violence. Sources of information may include police reports, victim reports, self reports, or information provided by other official entities.

2. The offender appears to have ceased threatening, harassing and/or stalking the victim and has not initiated any unwanted and/or prohibited contact with the victim. The offender acknowledges that he assaulted, abused, and controlled the victim and/or children by choosing to use patterns of coercive control to gain advantage. The offender acknowledges that he was NOT out of control and that it is his responsibility to be aware of, and stop, his battering.

3. The offender has participated in the intervention sessions by processing personal behaviors.

4. The offender has complied with other services required as a part of the DVOTI program.

5. The offender has met the financial agreements of the program.

6. The Program will notify the referral source that contractual discharge is not an assurance that the batterer will not re-offend.

F. CRITERIA FOR TERMINATION

The program shall adopt a policy covering termination. Many factors may lead to the decision to terminate a participant from the program based on noncompliance. Examples include, but are not limited to:
1. Continued domestic violence, including physical, emotional, sexual and other forms of abuse;
2. Failure to make appropriate use of the intervention service;
3. Failure to comply with other intervention conditions or provisions which are a part of the offenders contract, such as involvement in a treatment program for alcohol/drug problems, failure to continue involvement with mental health treatment, etc.;
4. Violation of program policies or group rules;
5. Violation of any provisions of a court order, particularly when the offender is court mandated to intervention;
6. Criminal behavior;
7. Failure to pay fees, where the collection of fees is allowable.

G. CONFIDENTIALITY AND REPORTING

1. The DVOTI shall not disclose, without the written consent of the participant, any confidential communications made by the participant to the program during the course of intervention; nor shall a DVOTI program employee, volunteer or associate, whether clerical or professional, disclose any confidential information acquired through that individual’s work capacity; nor shall any person who has participated in service delivery under the supervision of a DVOTI provider, including, but not limited to, group sessions, disclose any knowledge gained during the course of such intervention without consent. The Duty to Warn and reporting of child abuse and neglect are firm exceptions to confidentiality. In addition, NMAC 8.8.7.10 J requires that CYFD-approved DVOTI programs submit monthly written reports to the presiding judge or the offender’s probation/parole officer regarding the following:
   a. Proof of enrollment in the DVOTI program
   b. Progress reports that address the offender’s attendance, fee payments, and compliance with other program requirements; and
   c. Evaluations of progress made by the offender and recommendations as to whether or not to require the offender’s further participation in the program
2. DVOTI staff shall comply with all legally mandated reporting requirements regarding suspected child abuse and neglect and the duty to warn third parties. Nothing in this document shall be construed to expand or limit a legally created obligation to report.
3. The DVOTI program must educate itself about the duty to warn and other mandatory reporting obligations such as child abuse and neglect designed to protect children from violence and submission of progress reports to courts, probation, and parole. The DVOTI program is advised to obtain legal advice on this complex and critically important issue.
4. The DVOTI program shall have a written policy, which includes a provision that ensures any potential victim of an offender enrolled in the program is warned regarding any threats to his/her life immediately. If the victim cannot be contacted, the program shall provide written documentation that all reasonable avenues to contact the victim have been exhausted. The program shall also notify law enforcement.
5. DVOTI staff should report to probation, the court and/or Child Protective Services any criminal behavior or violation of court order relating to domestic violence that is relayed by the offender during the course of service.
6. DVOTI staff shall not voluntarily testify on behalf of the offender in any criminal or civil legal proceedings. If program staff is compelled to testify, staff shall limit testimony to interactions and material observed and used in session.

H. VICTIM CONTACTS

Each program is encouraged to provide the following information to partners as appropriate:

1. Explain the purpose of the program.
2. Explain services available to victims as well as referrals to victim’s advocacy and treatment.
3. Explain the procedure for reporting further offenses.
4. Explain the limitations of the program.
5. To provide information regarding safety plan and encourage further services with victim services programs.
6. To provide resource (referral) information regarding victim services, including protection orders.
7. Explain the possibility of the offender’s dismissal from group and the danger this may present to the victim.

I. INTAKE/ASSESSMENT

A comprehensive intake will be administered to all individuals seeking services. It will include: personal and family history, medical history, violence history, criminal history, lethality evaluation, drug and alcohol use screening, and mental health screening.

LETHALITY AND DANGEROUSNESS

All offenders are dangerous. Some are more likely to kill than others, and some are likely to kill at specific times. It is very possible that an offender may be lethal without demonstrating any of the usual indicators. Indicators of increased lethality risk shall be included in a lethality evaluation. Evaluations of lethality and dangerousness must not be limited to intake but should be ongoing throughout their participation in DVOTI services.

LETHALITY INDICATORS

Degree of ownership the offender expresses regarding the victim;

1. Threats of homicide;
2. Threats of suicide;
3. Possession of or access to weapons;
4. Rage;
5. History of past abuse;
6. Fantasy of homicide or suicide;
7. Obsessiveness about victim (or the victim’s family/friends);
8. Centrality of victim to batterer;
9. History of stalking;
10. History of holding victim captive;
11. History of pet abuse;
12. Victim making plans to leave or has already left;
13. Drug and/or alcohol usage;
14. Access to the victim and her family;
15. Frequency of police calls
16. High Level of risk-taking by the batterer;
17. Acute mental health problems;
18. History of depression;
19. History of anti-social behavior; and
20. Violence in the family of origin.

**Eligibility Criteria**

1. DVOTI programs must determine whether an individual can benefit from services during the initial assessment. The assessment may be revised based on additional information.
2. Eligible participants, under these standards are adult, male, heterosexuals using violence and abuse in an intimate relationship.
3. Offenders may be court ordered, other agency referred or voluntary.
4. Offenders shall be held to the same standards regardless of referral source.
5. Female offenders, juvenile offenders, and offenders under the age of 18 who have been tried as adults can be enrolled in intervention groups so long as they are separate from adult male groups.

**Exclusion Criteria**

1. Individuals who cannot benefit from the services must be referred for appropriate treatment but are not precluded from re-entering the DVOTI program at a later time if eligibility changes. Examples of individuals that may not benefit from services include generally violent or highly lethal individuals, individuals whose psychiatric symptoms prevent their full participation, and those for whom a medical condition is the primary cause of the violence.
2. DVOTI programs are encouraged to exclude individuals who are likely to disrupt group functioning.
3. Individuals identified through assessment as victims of domestic violence must be referred to a victim services program. That referral should be conducted in a way that will not result in victimization of the participant.
4. When denying admission to any participant, the reasons for that denial must be documented and reported to the referring agency consistent with relevant laws, and these standards.
5. The DVOTI program shall have the ultimate authority in the selection of participants and the development of intervention plans for those referred to their programs. If a prospective
participant is not appropriate for services, the program must make an alternate recommendation to the court.

6. The program has the responsibility to set reasonable conditions on the offender’s participation as it deems appropriate.

7. The program shall attempt to make reasonable accommodations for linguistic and other special needs of offenders in accordance with relevant laws.

J. PAYMENT

Payment is an indicator of responsibility. Programs may require that offenders assume financial responsibility for the intervention. In cases of financial hardship, programs may make provisions for indigent offenders. Serving all offenders, regardless of ability to pay is a part of the work of accountable and effective programs. Therefore programs should, whenever possible, make such provisions. A sliding scale fee structure is one example of such a provision.

K. REFERRAL PROCESS

1. DVOTI programs shall provide treatment and/or appropriate referral and follow-up for offenders who have concurrent alcohol/drug, medical or mental health problems.

2. Treatment for drug/alcohol, medical or mental health problems shall not be substituted for DVOTI services.

3. DVOTI program staff shall document the referral in the file.

L. COMMUNITY COORDINATION

The consensus in the field of batterer intervention strongly supports the use of multiple, coordinated interventions to respond most effectively to domestic violence. The DVOTI program shall encourage and participate in coordinated community responses to domestic violence. The DVOTI program should actively participate in community education and domestic violence prevention.

VICTIMS SERVICES COORDINATION

The DVOTI program must seek to establish cooperative, accountable relationships with local domestic violence programs. Sample activities may include soliciting victim service providers’ input on policy decisions; participating on committees and workgroups convened by victim service providers; providing training to and receiving training from victim services providers and their staff to DVOTI staff meetings and other planning events. DVOTI programs shall additionally make an effort to involve their local victim service program in the development of any public relation’s material. Documented requests for review of material or invitations to development meetings are examples of effort.
CRIMINAL JUSTICE SYSTEM

DVOTI programs should promote offender accountability through the criminal justice system and in other ways an appropriate and seek to educate the court system about DVOTI and victim safety. Sample activities include participation on task forces and on CCRC’s, meeting and providing training to district attorneys, defense attorneys, judges, probation and court staff.

M. STAFFING AND SUPERVISION REQUIREMENTS

QUALIFICATIONS

1. Facilitators employed by the DVOTI program shall, to the best ability known to the program, be violence free in their own lives and not be in a violent or abusive relationship.

2. No program shall knowingly hire an individual who has been an offender of domestic violence or abuse, unless the program director is satisfied that the (potential) staff member has successfully completed a certified intervention program, remained violence free for at least three (3) years, is free from any criminal convictions in his/her life for at least three (3) years, and has a clear and present view of the focus of the program and expectations of staff.

3. No program shall knowingly hire an individual who has been a victim of domestic violence, unless the program director is satisfied that the potential employee has dealt with issues related to the violence and abuse.

4. Potential facilitators must comply with CYFD background check requirements.

5. The DVOTI program shall have a policy which seeks to ensure that staff employed by the program shall not abuse alcohol, use illicit drugs or abuse prescription drugs and never allow alcohol or drugs to impair their individual ability to function in a responsible and professional manner.

6. The DVOTI program shall have a written ethics policy either in an employee handbook or separate notification to employees including but not limited to, prohibiting sexual or intimate relationships with current program participants or their family members, and victims of DVOTI program participants. The program shall also have a written ethics policy covering conflict of interest, racism, sexism, homophobia, and discrimination and criminal activity.

7. The program shall attempt to have staff reflective of the ethnic diversity of the community.

TRAINING

1. DVOTI facilitators are required to receive forty (40) hours of initial domestic violence training (Please reference NMAC 8.8.7.10 N).

2. Facilitators are also required to receive twenty (20) additional hours specific to batterer intervention.

3. Facilitators must act as co-facilitators for at least six (6) sessions before facilitating a group alone.

4. Facilitators have six (6) months to comply with these training standards from date of hire. Facilitators without the requisite training may not facilitate a group alone.
5. Facilitators are required to receive at least eight (8) hours of ongoing domestic violence related continuing education annually.

SUPervision

DVOTI program supervisors must ensure that facilitator’s receive regular and ongoing supervision. The following are additional requirements:

1. The supervisor must have received the initial sixty (60) hours of domestic violence training and at least eight (8) hours of ongoing continuing education annually regarding domestic violence.
2. DVOTI program supervisors shall have Bachelor’s Degree with four (4) years relevant experience with domestic violence populations or a minimum of a High School/GED with six (6) years experience with the target population.

N. Performance Standards

Programs are encouraged to evaluate the effectiveness of their program for quality assurance. Programs shall set their own performance standards based upon community needs and challenges. The following are suggestions that offender intervention programs may use in the effort to evaluate their programs:

1. Post program completion records of arrests for acts of domestic violence and/or subsequent convictions for acts of domestic violence.
2. Issuance of protection orders after completion of program.
3. Revocation of probation due to re-offense with present or future partners.
4. Offender’s anonymous evaluation of the program.
5. Percentage of offenders who complete the program and the percentage who are dismissed or who fail to complete to the program.
6. Assessment instruments given before and after program completion measuring progress while in the program which may include but not be limited to: The Propensity for Abusiveness Scale, The Abusive Behavior Inventory, and other suitable assessment instruments.

Effectiveness of program can also be measured on the degree to which a DVOTI program establishes a cooperative and accountable working relationship with the local domestic violence programs for the purpose of networking, information-sharing, and mutual support.

O. Maintenance of Data

1. Case files shall be kept by the DVOTI program and include the following information:
   a. Communications with the court(s),
   b. communications with the offender,
   c. documentation of reasoning for program completion, discharge, and/or intervention(s),
   d. attendance and participation information,
e. payment information,
f. contracts,
g. release forms, and
h. intake information.

2. Any record of communications with the offender’s victim must be kept in a separate file.
VI. APPENDIX: SAMPLE INTAKE QUESTIONS

I. PRESENTING PROBLEM AND RELATED HISTORY (The following is to be elicited by the offender as a self report)
   A. Reasons for referral, precipitating events, previous episodes, duration of violence
   B. Any previous enrollment in an offender intervention program
   C. Outcome of enrollment in previous batterer intervention program enrolled in

II. CURRENT LIVING SITUATION
   A. Current work or employment
   B. Finance
   C. Relationship status

III. RELATIONSHIP HISTORY
   A. Amount of time together and current relationship status (married, separated, divorced)
   B. Children and custody arrangements, if any. Child support arrangements (how much does offender pay in child support?).
   C. Addresses and physical location of any children.
   D. Referrals or active involvement with CYFD
   E. If children were present during incidents of violence
   F. If children have ever been removed from the home for any reason and why

IV. MENTAL HEALTH HISTORY
   A. Previous counseling for mental health condition.
   B. Any mental health diagnosis
   C. Current medications for mental health diagnosis
   D. Outcomes of previous or current counseling

V. SUICIDE OR HOMICIDE SCREEN, including but not limited to:
   A. History of suicide or homicidal behaviors
   B. Current plan
   C. Motivation
   D. Means available
   E. Willingness to develop alternative plan

VI. MEDICAL CONDITION
   A. Health history
   B. Medication and what the medication is being taken for
   C. Hospitalizations
   D. Head injury; if this is answered positive, what type of head injury (probe for traumatic brain injury)
   E. Allergy information and emergency information

VII. CHEMICAL AND ALCOHOL USE AND ABUSE HISTORY
   A. Types of drugs/alcohol use
   B. History of driving under the influence
   C. Probe if there are any drugs or alcohol used during the incident
   D. Self admission of any substance use/abuse concerns
   E. Has offender ever sought help for drugs or alcohol abuse?
VIII. G. FAMILY HISTORY
   A. History of domestic violence witnessed as a child
   B. History of abuse batterer experienced as a child
IX. H. CIVIL/CRIMINAL COURT INVOLVEMENT
   A. Orders of protection, criminal history, current and past charges,
   B. History of incarceration including charges and length of time incarcerated
   C. Is the offender on probation or parole and if so list reporting officer information
   D. Referral source
   E. Who is the offender’s compliance monitor?
   F. Any existing or past court orders or restraining orders including against whom and for how long
X. L. CHECKLIST OF ABUSIVE BEHAVIORS
   A. Probe for current ownership of guns or access to weapons.
   B. Probe for animal cruelty
   C. Probe for abuse during pregnancy
   D. Probe for sexual force
   E. Probe for control of money
   F. Probe if offender made threats to keep relationship intact (either suicide or taking children)