



Making the Connection Between
Domestic Violence and Child Abuse

Co-occurrence of Domestic Violence & Child Abuse

5

Security, 9,833 victims were able to access emergency and transitional shelter in FY 2013.⁵ Still, there were 5,681 unmet requests for shelter.⁶

Co-occurrence of Domestic Violence and Child Abuse

Though child protection agencies and domestic violence service providers share the common goal of protecting victims of violence and abuse, they have historically tried to reach that goal through widely different means. These divergent approaches have led to a lack of mutual understanding between the two groups about the other's approach and mission.⁷ The mission or purpose of child protection agencies is usually legally defined, whereas domestic violence providers are freer to define themselves outside of a formal political process. For years, the purpose of CPS in Arizona has been "to protect children by investigating allegations of abuse and neglect, promoting the well-being of the child in a permanent home and coordinating services to strengthen the family and prevent, intervene in and treat abuse and neglect of children."⁸ The "primary purpose" of the Department of Child Safety, the successor agency to CPS, "is to protect children."⁹ To this end, the Department will "focus equally" on the following:

1. Investigate reports of abuse and neglect.
2. Assess, promote and support the safety of a child in a safe and stable family or other appropriate placement in response to allegations of abuse or neglect.
3. Work cooperatively with law enforcement regarding reports that include criminal conduct allegations.
4. Without compromising child safety, coordinate services to achieve and maintain permanency on behalf of the child, strengthen the family and provide prevention, intervention and treatment services pursuant to this chapter.¹⁰

Despite differing approaches among those seeking to address the issues of child abuse and domestic violence, these problems are often co-occurring within households. Research has shown that between 10% and 20% of children witness domestic violence every year.¹¹ Another study points out that child abuse occurs in 30% to 60% of families where domestic violence is also present.¹² The overwhelming majority of these children can give detailed accounts of the violence they see and hear.¹³

⁵ Arizona Department of Economic Security. (2014). Domestic Violence Data. Retrieved May 5, 2014, from <https://www.azdes.gov/daas/community/dvinfo/>

⁶ Arizona Department of Economic Security. (2014). Domestic Violence Data. Retrieved May 5, 2014, from <https://www.azdes.gov/daas/community/dvinfo/>

⁷ Bragg, H. (2003). Child Protection in Families Experiencing Domestic Violence. Office on Child Abuse and Neglect, United States Department of Health and Human Services.

⁸ Ariz. Rev. Stat. §8-800 (Repealed 2014)

⁹ Ariz. Rev. Stat. §8-451

¹⁰ Ariz. Rev. Stat. §8-451

¹¹ Carlson, B. (2000) Children Exposed to Intimate Partner Violence: Research Findings and Implications for Intervention, Trauma, Violence, & Abuse, 321-342.

¹² Edleson, J. (1999) The Overlap Between Child Maltreatment and Woman Battering. Violence Against Women, 134-154.

¹³ Dayne, S. E., Bowermaster, J. M., Meloy, J. R., Dutton, D., Jaffe, P., Temko, S., & Moses, P. (1999). Custody disputes involving domestic violence: Making children's needs a priority. *Juvenile and Family Court Journal*, 50(2), 1-12; Jaffe, P., et al. (1990)

- These abuses co-occur in 30-60% of cases
- 10-20% of children witness DV every year
- Historical lack of cooperation

Early Identification

8

present.²⁵ Though these protocols vary in scope and level of detail, they all serve to coordinate a community intervention in co-occurrence cases. An examination of these protocols reveals that they contain many common components, such as:

Early Identification

Several protocols include a procedure for identifying domestic violence during the initial screening.²⁶ Identifying domestic violence at an early stage is an important step in ensuring a safe outcome for children and non-offending parents.²⁷ In many states, hotline operators are required to ask the caller if he or she is aware of any domestic violence occurring within the family.²⁸ Some model protocols even include specific questions for initial screeners to ask.²⁹ By identifying "red flags"³⁰ or specific behaviors for initial screeners to watch out for, co-occurrence cases can be more easily identified, even when reporters may not have a nuanced understanding of domestic violence. When one or more of these red flags, which typically identify coercive controlling behaviors, is identified, the initial screener will probe for more information regarding domestic violence within the household. The initial screener will inquire about things such as:

- If a parent is being hit, threatened, or coerced
- The whereabouts of child(ren) during incidences
- The child(ren)'s behaviors and responses due to witnessing domestic violence
- If the child(ren) or parent have been injured
- The frequency and severity of incidences
- If weapons were involved
- The presence of weapons in the home
- The presence or use of alcohol and/or other drugs
- The alleged batterer's access to the adult victim and child(ren)
- The steps taken to ensure safety for both child(ren) and the adult victim
- Measures taken to minimize the impact of child(ren)'s exposure to domestic violence³¹

Identifying the presence of domestic violence at an early stage allows caseworkers to appropriately adjust their approach when working with the family, ensuring the safety of both child

²⁵ Colorado (<http://www.colorado.gov/cs/ContentDelivery?CID=5-ChildYouth&am=CRON/7251588167351>); Connecticut (http://www.vawnet.org/Assoc_Files_VAWnet/SafeTogetherReport2008.pdf); Massachusetts (<http://www.hhs.gov/HSP/typical/fnl8.htm>); New Hampshire (<http://www.doh.nh.gov/criminal/victim-assistance/protocols.htm>); New York (http://www.oah.state.ny.us/main/du/child_welfare.asp) Oregon (<http://www.state.or.us/serms/Service/cr200.pdf>)
(List not exhaustive)

²⁶ State of New Hampshire. (2009). Domestic Violence Protocol. Concord, NH. Governor's Commission of Sexual and Domestic Violence.

²⁷ Magen, R. H., & Conroy, K. (1997). Domestic violence in child welfare preventative services: Results from an intake-screening questionnaire. Paper presented at the 5th International Family Violence Research. Conference, University of New Hampshire, Durham, NH

²⁸ State of New Hampshire. (2009). Domestic Violence Protocol. Concord, NH. Governor's Commission of Sexual and Domestic Violence. Page 8; CO page 43

²⁹ Office on Child Abuse and Neglect, Children's Bureau, Caliber Associates. Bragg, H. Lien. 2003

³⁰ State of New Hampshire. (2009). Domestic Violence Protocol. Concord, NH. Governor's Commission of Sexual and Domestic Violence. Pages 7-8.

³¹ State of New Hampshire. (2009). Domestic Violence Protocol. Concord, NH. Governor's Commission of Sexual and Domestic Violence. Page 8.

- Important for safe outcomes
- Allows caseworkers to adjust their approach

Domestic Violence Specialists

9

and adult victims. When an initial screener determines a case does not meet criteria for child abuse and neglect, but does find domestic violence to be present, the screener should refer callers to available resources, including the local domestic violence hotline number.

Domestic Violence Specialists

The inclusion of domestic violence specialists on staff is a best practice which enables child protective systems to provide more comprehensive services. These specialists can coordinate services for families and provide resources and ongoing training for staff.³² States have approached this practice in different ways. Some states employ domestic violence specialists directly on staff, sometimes as part of a multidisciplinary team.³³ Other states have created innovative partnerships with the local domestic violence programs to share staff, allowing child protection agencies to retain these specialized employees in an efficient way.³⁴ States have found ways to fund these positions in different ways, including the use of federal funds.³⁵ These specialists can serve many purposes within the agency. Three important functions that have been identified are client support and advocacy, systems change, and batterers' compliance.³⁶

Specialists can provide client support and advocacy both through interaction with caseworkers, as well as through direct contact with families. Caseworkers receive little domestic violence training under current policies, and may not be aware of all services available to victims of domestic violence. Having a specialist on staff with extensive knowledge of these services will enable caseworkers to develop more comprehensive, holistic case plans for their clients. Specialists can also visit with clients independently to help them understand the services available, create safety plans, and even provide support at court proceedings. By working with both caseworkers and clients, specialists can ensure that victims receive the support they need.

Specialists can also work on systems change. In order to constantly improve not only the way DCS responds to cases involving domestic violence, but also the various systems that DCS clients interact with, specialists can provide trainings for caseworkers on the more nuanced aspects of domestic violence. Specialists can also collect data and provide feedback to periodically refine and improve the Department's domestic violence protocol, allowing it to adjust to community needs. The involvement of domestic violence specialists on these cases will help to ensure that a clear and consistent message is being delivered system-wide.

It is beneficial for specialists to work not only with victims, but with the offending parent. By coordinating services for the perpetrator, the specialist is able to ensure accountability, while at the

- Resource for caseworkers
- Direct service to survivors
- Work with perpetrators
- Training

³² Rosewater, A. (2008) Building Capacity in Child Welfare Systems: Domestic Violence Specialized Positions. National Council of Juvenile and Family Court Judges and Family Violence Prevention Fund. 2008.

³³ The state of Vermont employs this model. Available at: <http://promising.futureswithouthatviolence.org/files/2012/10/VT-Coalition-By-and-For-Child-Protection-Teams.pdf>

³⁴ For an example of such an agreement, see State of New Hampshire. (2009). Domestic Violence Protocol. Concord, NH. Governor's Commission of Sexual and Domestic Violence. Appendices E & F available at <https://www.doj.nh.gov/criminal/victim-assistance/documents/Dev-Crptocol.pdf>

³⁵ Rosewater, Anne. Building Capacity in Child Welfare Systems: Domestic Violence Specialized Positions. National Council of Juvenile and Family Court Judges and Family Violence Prevention Fund. 2008.

³⁶ Rosewater, Anne. Building Capacity in Child Welfare Systems: Domestic Violence Specialized Positions. National Council of Juvenile and Family Court Judges and Family Violence Prevention Fund. 2008; To see a job description of a domestic violence specialist who works in these identified areas, see NH DV Protocol Appendix F.

Safe and Together™

10

same time promoting the safety of victims. The specialist can monitor perpetrator compliance, and maintain the data in a manner which can later be used to evaluate the services provided to the offending parent. In criminal cases, domestic violence offenders are often required to participate in domestic violence offender treatment programs. Requiring offending parents in these cases to complete this treatment is one way to promote accountability. Because as few as 25% of the men referred to these programs actually complete them, having a specialist to ensure compliance is a great resource.³⁷ Beyond treatment for violence, the offending parents often need to learn to be nurturing parents, not just non-violent parents.³⁸ This type of education is something that is typically not addressed in offender treatment.

One area of concern for these specialists is confidentiality. These concerns require policies to be clear about the specialist's role within the agency. In Arizona, the communication between a victim and a person who qualifies as a domestic violence victim advocate is privileged.³⁹ Victim advocates are, however, mandatory reporters.⁴⁰ States define the role and responsibility of domestic violence specialists differently, which impacts the nature of the confidential relationship between specialist and client.⁴¹ The expectation of confidentiality is often important for the rapport between advocates and victims. Therefore, when developing a specialist position, confidentiality must be thoroughly contemplated.

Training

Training on domestic violence is currently a part of the curriculum for child protection workers. It is recommended that DCS increase their training on domestic violence from the current amount of training that is being given. Also, it is recommended that training on domestic violence be expanded to all workers, including supervisors, and not just included during the Core Training that workers get when they are first hired. Since domestic violence occurs at such high rates in the cases that intersect with the child welfare system, training on domestic violence must also be ongoing in order for child welfare staff to stay current on best practices. Also, in order to fully expand knowledge on domestic violence and how domestic violence intersects with child welfare it is recommended that DCS look at available best practice models such as Safe and Together™.

Safe and Together™

The Safe and Together Model™, developed by David Mandel and Associates, is designed for the specific purpose of promoting safety, permanency, and the well-being of children.⁴² This model is child centered with a focus on the victim parents' strengths and the perpetrators' pattern of abuse.⁴³ The model was initially developed for the child welfare system, but can be utilized by domestic

³⁷ Goodmark, Leigh. Achieving Batterer Accountability in the Child Protection System. 93 Ky. L.J. 613, 644 (2004).

³⁸ Goodmark, Leigh. 93 Ky. L.J. 613, 653 (2004).

³⁹ ARS 12-2239A; It is unclear if a domestic violence specialist would qualify as a domestic violence victim advocate, and would likely depend on the specialist's status as an employee and the duties performed by the specialist.

⁴⁰ ARS 12-2239D

⁴¹ Rosewater, Anne. Building Capacity in Child Welfare Systems: Domestic Violence Specialized Positions. National Council of Juvenile and Family Court Judges and Family Violence Prevention Fund. 2008

⁴² David Mandel and Associates. Safe & Together. See generally <http://endingviolence.com/our-programs/safe-together/safe-together-overview/assumptions-principles-critical-components/>

⁴³ David Mandel and Associates. Safe & Together. See generally <http://endingviolence.com/our-programs/safe-together/safe-together-overview/assumptions-principles-critical-components/>

- Evidence-based model used in several states
- Reduces out-of-home placements
- Model designed to focus on non-offending parent's strengths

Questions?