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Community Plans to Address Domestic Violence: An Overview of Domestic Violence within the Context of Family and Community Violence

Rhonda Vickery Impink, PHD, MSW

I. Introduction

The purpose of this article is to review the various conceptual components of the issue of domestic violence by first explicating the numerous challenges to understanding the complexity of this issue. The societal costs from domestic violence within the broader purview of sexual assault, family violence and other violence in the community are described, as well as the challenges of developing community collaboration initiatives to comprehensively address family violence. Highlights are presented from a process evaluation from one community's efforts to develop a community plan for a comprehensive and collaborative family violence approach that encompasses governmental, for-profit and nonprofit sectors. There are three essential components of community system development that are emphasized in addition to sufficient funding levels. They include the need for one specific organization to lead the collaborative effort and the dedication of the leaders of both that organization and other leaders within the community. Also, a cultural shift in attitudes is required from an organizational to a community focus for all persons involved with the effort.

II. Definitions and Misunderstandings

Domestic violence is defined in various ways and it is considered to be part of two broader terms. The first one is intimate partner violence (IPV), defined by Barnett, Miller-Perrin and Perrin as "violence . . . that occur[s] between adult partners who are at least 18

years old, sexually intimate, married or unmarried, and currently or formerly living together.”¹ IPV also includes dating violence, stalking and sexual assault.² An alternate definition for domestic violence involves “incidents of both mild and severe violence by one intimate adult partner with another.”³ In addition, domestic violence is also part of the broader context of family violence that includes child abuse and neglect, as well as any form of maltreatment of children, and elder or vulnerable adult abuse. However, Barnett, Miller-Perrin, and Perrin contend that “[t]here is no consensus about the precise meaning of terms such as violence, abuse, assault, rape, sexual assault and sexual coercion.”⁴ The lack of consistent coordination and official connections between community practice organizations – especially misunderstandings from basic legal and operational definitions – complicates the issue even further. Statutes vary from one state to another and their application can vary even within a state. Inconsistent ways of interpreting laws between law enforcement organizations, prosecuting attorneys, courts and numerous other governmental and nonprofit organizations add further opportunities for not only confusion, but instances where misinformation can jeopardize the safety of community residents.

III. Historical Factors

Violence in families has been an accepted practice in this country from a historical perspective and remains so in other parts of the world.⁵ In some countries, for instance,

¹ OLA BARNETT ET AL., FAMILY VIOLENCE ACROSS THE LIFE SPAN, AN INTRODUCTION 251 (2d ed. 2005).

² *Id.* at 224-25.

³ Sandra Graham-Bermann & Hilda M. Halabu, *Fostering Resilient Coping in Children Exposed to Domestic Violence: Cultural Considerations*, in PROTECTING CHILDREN FROM DOMESTIC VIOLENCE: STRATEGIES FOR COMMUNITY INTERVENTION 71, 72 (Peter G. Jaffe et al. eds., 2004).

⁴ BARNETT, *supra* note 1, at 252 (emphasis in original).

⁵ See CANDACE KRUTTSCHNITT ET AL., ADVANCING THE RESEARCH AGENDA ON VIOLENCE AGAINST WOMEN 1-8 (2004).

“honor killings are practiced with little if any sanction.”⁶ Violence in families has only been officially recognized as an American societal problem since the 1960’s when the “battered child” concept began to receive national attention.⁷ Starting in the 1970’s, organizations were established to provide temporary shelter and supportive services to what were then referred to as “battered women.” During this time period, child and adult protection systems were established and/or formalized within most communities.⁸ Dealing with domestic and family violence in general emanates from past misperceptions and distortions presented by some mental health practitioners and other professionals. Due to the negative misperceptions, it was necessary to transform belief patterns from a stance that blamed victims for their own abuse to one that recognizes that the abuse is illegal.⁹

The illegality of abuse has not been supported by various interpretations of religious writings and teachings. Historically, it has been a relatively short time since the concept of ownership of wives and children by a male head-of-household was the norm codified in many statutes and an integral part of gender socialization practices.¹⁰ One example of a positive program to alter the previous negative socialization patterns is the “Coaching Boys into Men” program started by the Family Violence Prevention Fund, which teaches young men to not use violence against girls and women.¹¹

⁶ Linda L. Baker et al., *Future Directions in Ending Domestic Violence in the Lives of Children*, in PROTECTING CHILDREN FROM DOMESTIC VIOLENCE: STRATEGIES FOR COMMUNITY INTERVENTION 221, 228 (Peter G. Jaffe et al. eds., 2004).

⁷ See generally C. Henry Kempe et al., *The Battered Child Syndrome*, 181 J. OF THE AM. MEDICAL ASS’N 17-24 (1962).

⁸ See generally RICHARD J. GELLES, FAMILY VIOLENCE (1979); SUSAN SCHECTER & JEFFREY L. EDELSON, EFFECTIVE INTERVENTION IN DOMESTIC VIOLENCE AND CHILD MALTREATMENT CASES: GUIDELINES FOR POLICY AND PRACTICE, MINNESOTA CENTER AGAINST VIOLENCE AND ABUSE (June 1999), <http://www.vaw.umn.edu/documents/executvi/executvi.html>; AMERICAN HUMANE ASS’N, *The Link Between Child Abuse and Domestic Violence*, CHILD PROTECTION LEADER 1-2 (Sept. 1994).

⁹ SCHECTER & EDELSON, *supra* note 8.

¹⁰ See BARNETT ET AL., *supra* note 1, at 4-7.

¹¹ Family Violence Prevention Fund, *Coaching Boys Into Men*, <http://www.endabuse.org/cbim/> (last visited Feb. 12, 2006).

IV. Domestic Violence or IPV as Part of the Broader Family Violence Context

Family violence, including IPV, cannot be viewed separately. It needs to be viewed as connected to, or as a concurrent causal factor with, other forms of violence within the family, household,¹² or society.¹³ Violence stems from a sociological, sometimes neurological and/or societal maladaptive, behavior that is manifested with the use of force.¹⁴ It is most often accompanied by psychological or emotional abuse.¹⁵ Far too often the victims tolerate the abuse because they see few alternatives to escape it and blame themselves for it or rationalize that it is a temporary or an isolated incident that the abusive person now regrets. Children, elders or other vulnerable adults cannot defend themselves from it when they witness or experience it within the household. The true impact of this violence is just beginning to be understood by more people in American society.

V. Incidence of Violence

In 1997, Joy D. Osofsky stated that “[t]he United States is the most violent country in the industrialized world, with violence having reached epidemic proportions.”¹⁶ In a 2001 study of bullying behavior, “54 percent of students say they have sexually harassed someone

¹² See, e.g., NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL, CDC RESEARCH AGENDA 49-50 (2002), http://www.cdc.gov/ncipc/pub-res/research_agenda/Research%20Agenda.pdf [hereinafter INJURY RESEARCH].

¹³ See, e.g., SHARON MIHALIC ET AL., U.S. DEPT. OF JUSTICE, OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION, BLUE PRINTS FOR VIOLENCE PREVENTION, JUVENILE JUSTICE BULLETIN (July 2001), <http://www.ncjrs.org/pdffiles1/ojdp/187079.pdf>; Sarah M. Buel, *Effective Assistance of Counsel for Battered Women Defendants: A Normative Construct*, 26 HARV. WOMEN'S L.J. 217 at *2 (2003).

¹⁴ See generally Bruce D. Perry, *Incubated in Terror: Neurodevelopmental Factors in the Cycle of Violence, in* CHILDREN IN A VIOLENT SOCIETY 124, (Osofsky ed., 1997); National Violence Against Women Prevention Research Center, *Prevalence Estimates: Intimate Partner and Domestic Violence*, <http://www.ojp.usdoj.gov/ovc/assist/nvaa99/chap8.htm> (last visited January 26, 2006) [hereinafter Violence Against Women].

¹⁵ See generally BARNETT ET AL., *supra* note 1; SCHECTER & EDELSON, *supra* note 8; U.S. DEPT. OF JUSTICE, OFFICE FOR VICTIMS OF CRIME, NATIONAL VICTIM ASSISTANCE ACADEMY: FOUNDATIONS IN VICTIMOLOGY AND VICTIMS' RIGHTS AND SERVICES, <http://www.ojp.usdoj.gov/ovc/assist/nvaa2000/academy> (last updated Dec. 28, 2004) [hereinafter OFFICE FOR VICTIMS OF CRIME]; Violence Against Women, *supra* note 14.

¹⁶ Joy D. Osofsky, *Children and Youth Violence: An Overview of the Issue, in* CHILDREN IN A VIOLENT SOCIETY 3, 3 (Osofsky ed., 1997).

during their school lives.”¹⁷ This same report showed that this number had actually improved “from 1993, when six in ten students . . . said they had sexually harassed someone.”¹⁸ When the issue of domestic violence or IPV is addressed, the data regarding related and/or causal violence is integral to both understanding it and developing strategies to eradicate it. For example, “being abused or neglected as a child increased the likelihood of arrest as a juvenile by 59 percent, as an adult by 28 percent, and for a violent crime by 30 percent.”¹⁹

The following key statistics indicate the need to see the linkages between various forms of violence. These connections need to be clearly understood by all professionals working with possible family violence victims and the general public as well:

- “As of 1995, approximately 1.8 million adolescents ages 12 to 17 had been sexually assaulted and 3.9 million had been severely assaulted”;²⁰
- “Another 2.1 million had been punished by physical abuse”;²¹
- “[V]ictimization by witnessing violence . . . [included] 8.8 million youths . . . [who] had seen someone else being shot, stabbed, sexually assaulted, physically assaulted, or threatened with a weapon”;²²
- “[74 percent of youth who reported assaults indicated] the assault was committed by someone they knew well”;²³
- “Of all physical assaults, 65 percent were never reported [to authorities]”;²⁴

¹⁷AM. ASS’N. OF UNIV. WOMEN EDUC. FOUND., *HOSTILE HALLWAYS: BULLYING, TEASING AND SEXUAL HARASSMENT IN SCHOOL 5* (2001), http://www.aauw.org/member_center/publications/HostileHallways/hostilehallways.pdf.

¹⁸ *Id.*

¹⁹ CATHY C. WIDOM & MICHAEL G. MAXFIELD, U.S. DEPT. OF JUSTICE, *AN UPDATE ON THE CYCLE OF VIOLENCE*, NAT’L INST. OF JUST. RESEARCH IN BRIEF 1 (Feb. 2001), <http://www.ncjrs.org/pdffiles1/nij/184894.pdf>.

²⁰ DEAN G. KILPATRICK ET AL., U.S. DEPT. OF JUSTICE, *YOUTH VICTIMIZATION: PREVALENCE AND IMPLICATIONS*, NAT’L INST. OF JUST. RESEARCH IN BRIEF 1 (Apr. 2003), <http://www.ncjrs.org/pdffiles1/nij/194972.pdf>.

²¹ *Id.*

²² *Id.*

²³ *Id.* at 5.

²⁴ *Id.* at 6.

- “The lifetime prevalence of PTSD [Post Traumatic Stress Disorder] was 8.1 percent, indicating that, as of 1995, approximately 1.8 million adolescents had met the criteria for PTSD at some point during their lifetime. . . . [Thus] more than one in eight 17 year-olds has had PTSD at some point in his or her lifetime.”²⁵

Osofsky reports that “[h]omicide is the second leading cause of death among all 15- to 24- year-olds, and is now the third leading cause of death among elementary school children, ages 5 – 14.”²⁶ For women, the connection between abuse as a child and predisposition to later victimization has been described as a part of the “cycle of violence,” as there is evidence of repeated episodes of violence throughout women’s lives.²⁷ Research indicates that

[o]ne in every six women has experienced an attempted or completed rape as a child and/or adult. . . . The Bureau of Justice Statistics reports that between 1976 and 1999, murders of women accounted for 24 percent of total homicides in the United States. Approximately one-third of these victims were killed by a spouse, boyfriend, or other family member.²⁸

Recent research on the murder of pregnant teens and women has produced unanticipated conclusions. For example, according to a recent Washington Post article quoting Horon and Cheng’s 2001 Journal of the American Medical Association study, “a pregnant or recently pregnant woman is more likely to be a victim of homicide than to die of any other cause [in Maryland].”²⁹ There, an Assistant U.S. Attorney concludes that these murders are committed for money—that is, the men who committed the murders did not want to pay child support.³⁰ The story not only reported on studies, but it also emphasized the

²⁵ *Id.* at 7-8.

²⁶ Osofsky, *supra* note 16, at 3.

²⁷ WIDOM ET AL., *supra* note 19, at 1.

²⁸ KRUTTSCHNITT, *supra* note 5, at 9.

²⁹ Donna St. George, *Many New or Expectant Mothers Die Violent Deaths*, WASH. POST, Dec. 19, 2004, at A1.

³⁰ *Id.*

deficiencies with data collection practices at all levels of society.³¹ The dilemma remains that a problem needs to be recognized as important in order for it to be documented.³²

For elders and persons with disabilities, the issue of abuse includes many of the same dimensions as other forms of family violence.³³ The emotional effects of denial, rationalization and minimizing are common reactions to all forms of violence especially within the family and often even with violence from strangers.

As is the case with unrecognized murder rates of pregnant women, the mistreatment of older adults and persons with disabilities is significantly “underreported.”³⁴ The National Center on Elder Abuse documented a total of 472,813 reports in their study of adult-protective-services.³⁵ The Center for Disease Control and Prevention estimated “that nearly 450,000 people ages 60 and older experienced abuse [and] . . . only 16 percent (nearly 71,000) were reported to and substantiated by Adult Protective Services (APS) agencies; the remaining 379,000 were either not reported to APS or not substantiated.”³⁶ In addition, determining the prevalence of elder abuse is confounded by numerous variables, such as the presence of active adult protective services, various governmental reporting protocols, and all of the challenges indicated for IPV and child maltreatment. This area has not received a comparable level of research compared to other forms of family violence,³⁷ and this is clearly indicated by the “the low autopsy rate for elder deaths, less than 1% in recent years.”³⁸ The

³¹ *Id.*

³² *Id.*

³³ See BARNETT ET AL., *supra* note 1, at 346; ROBERT C. DAVIS & JAUNJO MEDINA-ARIZA, U.S. DEPT. OF JUSTICE, RESULTS FROM AN ELDER ABUSE PREVENTION EXPERIMENT IN NEW YORK CITY, NAT’L INST. OF JUSTICE RESEARCH IN BRIEF (Sept. 2001), <http://www.ncjrs.org/pdffiles1/nij/188675.pdf>; OFFICE FOR VICTIMS OF CRIME, *supra* note 15.

³⁴ BARNETT ET AL., *supra* note 1, at 352.

³⁵ PAMELA B. TEASTER, NATIONAL CENTER ON ELDER ABUSE, A RESPONSE TO THE ABUSE OF VULNERABLE ADULTS: THE 2000 SURVEY OF STATE ADULT PROTECTIVE SERVICES 21 (2000), <http://www.elderabusecenter.org/pdf/research/apsreport030703.pdf>.

³⁶ INJURY RESEARCH, *supra* note 12, at 21.

³⁷ DAVIS & MEDINA-ARIZA, *supra* note 33, at 1.

³⁸ BARNETT ET AL., *supra* note 1, at 352.

etiology of the aging process within American society compounds the situation further due to the natural aging process that too often reduces the independence of elders thus causing frustration, depression that is not diagnosed, and isolation, which reduces detection and reporting of maltreatment.

VI. Consequences of Violence within the Family – What are the Costs to Society?

The costs can be divided between direct financial costs of the violence and those costs that cannot be quantified, but nevertheless cause considerable harm. The Center for Disease Control and Prevention has estimated that the annual cost of IPV for American society is \$5.8 billion each year in the United States, including \$4.1 billion for direct medical and mental health care services and nearly \$1.8 billion for productivity losses.³⁹ In addition, there are costs for emergency housing, and related social services, and criminal justice system processing that are more difficult to calculate.⁴⁰

For children in their homes, schools, and neighborhoods, the cumulative impact of witnessing and even only hearing violence has severe emotional consequences. “[V]iewing or hearing violent acts may often have the same lasting effects on children as being a direct victim of violence. These dangers are greatest for the youngest children”⁴¹

It is necessary to consolidate estimates of the costs of violence within families to clearly document its societal impact in terms of direct costs, as well as the emotional impacts that contribute to the negative cycle of violence within families. In addition, this information

³⁹ CENTER FOR DISEASE CONTROL AND PREVENTION, COSTS OF INTIMATE PARTNER VIOLENCE AGAINST WOMEN IN THE UNITED STATES 2 (2003), http://www.cdc.gov/ncipc/pub-res/ipv_cost/IPVBook-Final-Feb18.pdf [hereinafter COSTS OF IPV].

⁴⁰ *Id.*

⁴¹ KRISTEN KRACKE, U.S. DEPT. OF JUSTICE, CHILDREN’S EXPOSURE TO VIOLENCE: THE SAFE START INITIATIVE, 13 OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION FACT SHEET No.13 (April 2001), <http://www.ncjrs.org/pdffiles1/ojdp/fs200113.pdf>.

can provide the basis for further predictions and investigations about deaths that were not clearly attributed to violence. With only 1% of elder deaths autopsied⁴² and the calls for both child⁴³ and domestic violence fatality review teams,⁴⁴ a case could be made to advocate for fatality review teams for all unexpected and violent deaths. These teams use reviews to assess community systems to determine if any procedures and/or training need to be altered to prevent future harm.

Almost on a daily basis within each community, the rapid, and dedicated responses from a professional person, volunteer or caring neighbor, friend, or relative are all that stand in the way of even more tragedies involving violence between family members. Children and vulnerable adults are caught in the middle of the violence. Elderly parents are forced to helplessly witness the abuse of their children and grandchildren. When tragedies do happen, professionals and elected officials gather round to report on how they did their job. They are often quoted as saying that this outcome just could not be predicted or prevented. Sometimes that is the case. However, other times another organization or official is blamed in a never-ending cycle of recriminations. In reality the entire community has failed, and rarely should one individual or office be blamed for the tragedy.

Community system failure occurs when children and parents are harmed or killed and there were signs that were missed or were not acted upon by persons in one or numerous parts of the community system. Sometimes no matter what many people do to protect a family, there will be events that could not be clearly predicted. However, communities are collectively responsible to find ways to bring the parts of the system (the various social services and governmental agencies) together to share information and coordinate their actions and services

⁴² BARNETT, *supra* note 1, at 352.

⁴³ NAT'L CLEARINGHOUSE ON CHILD ABUSE & NEGLECT INFORMATION, CHILD ABUSE AND NEGLECT FATALITIES: STATISTICS AND INTERVENTIONS (2004), <http://nccanch.acf.hhs.gov/pubs/factsheets/fatality.pdf>; JOHN LANGSTAFF & TISH SLEEPER, U.S. DEPT. OF JUSTICE, THE NATIONAL CENTER ON CHILD FATALITY REVIEW, 12 OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION FACT SHEET No.12 (April 2001), <http://www.ncjrs.org/pdffiles1/ojjdp/fs200112.pdf>.

⁴⁴ Neil Websdale, *Reviewing Domestic Violence Deaths*, 250 NAT'L INST. OF JUST. J. 26, 27 (2003), available at <http://ncjrs.org/pdffiles1/jr000250g.pdf>.

and thereby increase the protective resources made available to vulnerable persons.⁴⁵

VII. Causal Factors for Violence—Why Do Victims Stay, or More Accurately, Why Do They Return?

Domestic violence or IPV cannot be viewed separately from other related or sequential acts of violence within families and the community. There is a common origin of violence that is endemic to this society. Prevention of violence needs to involve the entire community, including professionals, employers, and elected and appointed officials as well as the medical, educational and religious communities.⁴⁶ Intervention after the violence occurs to reduce the negative impact of the violence and prevent its reoccurrence is currently split into a plethora of entities – all of them with different agendas and mandates, professional education and ethical standards, and operational guidelines.⁴⁷ This fact compounds the trauma of the event not only for the victims, but also for their friends, relatives, neighbors and employers who attempt to assist them, help to keep them safe, and enable them to support themselves and their children after leaving an abusive partner.

The community system interferes with the ability of victims to choose to leave abusive relationships, the ability of children to begin to emotionally heal, and the ability of those who attempt to assist them to believe that there is a way to provide resolution of cases. For victims to be safe, the community system needs to be substantially reconfigured to provide consistent procedures to protect all persons who have been negatively impacted by violence, including services for the perpetrator, prior to and during, and/or after incarceration. There is evidence that women who too often are blamed for staying in abusive relationships do leave; however,

⁴⁵ Rhonda Impink, *Leadership Dimensions, The Critical Link for the Evolution of Collaboration*, 3 Soc.Pol'y J. 39, 40-41 (2004).

⁴⁶ See *id.* at 40; BARNETT ET AL., *supra* note 1, at 309-310.

⁴⁷ See, e.g., BARNETT, *supra* note 1, at 309.

they leave and return an average of “five or more times before they can leave for good.”⁴⁸

“Three-quarters of homicide victims and 85 percent of women who had experienced severe but nonfatal violence had left or tried to leave in the past year.”⁴⁹ There are also far too many cases of women being “charged with domestic violence crimes when they seek to defend themselves or protect children.”⁵⁰

Not having a sufficient source of income, however, is the primary reason for women returning.⁵¹ With the passage of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), the entitlement Aid to Families with Dependent Children (AFDC) was replaced with a much more limited program: Temporary Assistance to Needy Families (TANF).⁵² The lifetime limit for TANF is a maximum of five years,⁵³ and the misperceptions on the part of financial assistance workers and potential recipients alike have restricted a potential source of assistance for women leaving abusive relationships. The Wellstone/Murray Amendment to the PRWORA was passed to provide a greater level of flexibility to states in order to set aside specific work requirements for qualifying victims of domestic violence.⁵⁴ However, this option is not mandated: it is up to each state to apply for the waiver.⁵⁵ Smith criticizes the emphasis on the work requirement when women may have to choose between remaining safe and going to work. In addition, current and proposed

⁴⁸ BARNETT ET AL., *supra* note 1, at 296.

⁴⁹ Carolyn Rebecca Block, *How Can Practitioners Help An Abused Woman Lower Her Risk of Death?* 250 NAT'L INST. OF JUST. J. 4, 6 (2003), <http://www.ncjrs.gov/pdffiles1/jr000250c.pdf>.

⁵⁰ Billie Lee Dunford-Jackson, *The Role of Family Court in Domestic Violence*, in PROTECTING CHILDREN FROM DOMESTIC VIOLENCE: STRATEGIES FOR COMMUNITY INTERVENTION 188, 193 (Peter G. Jaffe et al. eds., 2004).

⁵¹ Susan E. Smith, *A Wolf in Sheep's Clothes? How Welfare Reform May Threaten Domestic Violence Service*, 16 J. OF WOMEN AND SOC'L WORK 432, 433 (2001).

⁵² JILL DAVIES, NAT'L RESOURCE CTR. ON DOMESTIC VIOLENCE, *THE NEW WELFARE LAW: IMPLICATIONS FOR BATTERED WOMEN* (Oct. 1996), <http://www.vawnet.org/NRCDVPublications/BCSDV/WelfareDVTAPapers/WELpoll1.php>.

⁵³ *Id.*

⁵⁴ *Id.*

⁵⁵ Smith, *supra* note 52, at 434.

reductions in the availability of housing vouchers can play a critical role in helping to reduce families' exposure to violence.⁵⁶

Compounding these problems is the issue of custody of children, as threats of losing custody are often used to control the behavior of victims.⁵⁷ Lack of knowledge about the availability of aid and cultural acceptance of asking for financial assistance are among the many major factors that influence persons attempting to leave an abusive situation.⁵⁸

VIII. Community Systems or the Lack Thereof

The community has reluctantly and somewhat slowly begun to see that violence in the family is unacceptable. Ultimately, the violence has been made illegal. However, changing the behavior of the perpetrators and those legally responsible for arresting, prosecuting and presiding over judicial processes is an ongoing challenge. There is great variability not only among law enforcement agencies, but also in individual officers, some of whom often refuse to recognize IPV and who may commit or witness those violations in their own homes. Law enforcement agencies have, in some cases, established separate protocols for dealing with allegations of abuse by their officers. For example, Barnett, Miller-Perrin, and Perrin describe a series of studies about Los Angeles Police Department and various issues related to violence by police officers.⁵⁹ Their concluding statement exemplifies the basic societal effect of violence that damages many families: "male privilege in some settings is still a powerful force exerting control over women's lives."⁶⁰

⁵⁶ See, e.g., LAURA DUGAN ET AL., U.S. DEPT. OF JUSTICE, DO DOMESTIC VIOLENCE SERVICES SAVE LIVES?, 250 NAT'L INST. OF JUST. 20, 22 (2003), <http://www.ncjrs.gov/pdffiles1/jr000250f.pdf> at *3.

⁵⁷ See, e.g., Sarah M. Buel, *Fifty Obstacles to Leaving*, a.k.a. *Why Abuse Victims Stay*, 28 THE COLORADO LAWYER 19, 20 (1999).

⁵⁸ *Id.* Buel identifies fifty factors, which she concedes is "abbreviated" list. *Id.* at 19.

⁵⁹ BARNETT ET AL., *supra* note 1, at 324.

⁶⁰ *Id.*

For each group recognized as needing protection, various organizations were established, specific statutes were passed and various policies and protocols were developed to protect vulnerable persons and penalize the perpetrators. The bureaucratic interrelationships between those to be protected and those to be punished are beginning to be understood, but unless personally involved with a case, it is challenging to understand and clearly see how hidden and insidious these connections truly are. It is also critical to see how intractable it is to attempt to take care of one part without encountering an endless number of confounding issues that impact the presenting issue. For example, Dugan et. al. point out that “[p]olicies and services designed to help victims . . . appear to have two possible and opposing effects: either they decrease the abuse and risk of homicide, or they have the unintended consequences of increasing them.”⁶¹ Even harder to comprehend are the actions necessary to decrease the incidence of violence in the home. For example, one case can potentially involve a host of organizations to help the victims – who are primarily, but not exclusively women – as well as the children, and other vulnerable adults within a household. There are shelters for women, child protection services for children and adult protection services. It is conceivable that all three organizations can or should be involved with one case that includes several victims and one perpetrator. That one case can also involve law enforcement, court and judicial services, and even animal cruelty programs. Linking all of these organizations in such a way as to protect victims and hold the perpetrator accountable is the overwhelming challenge for all communities.

⁶¹ DUGAN ET AL., *supra* note 56, at 21.

Each community has a host of differing response systems and protocols, but unless specifically mandated each allegation of maltreatment is handled separately, both legally and operationally. The reporting of the various levels of maltreatment is dependent on state statutes, various protocols, and the personal dedication of each responding individual and the amount of time that they can devote to any one case.

In addition to the victims of violence and their children and other family members, there are a host of other persons and organizations that attempt to assist the victims. Attorneys and others who volunteer to help families in crisis encounter a complex labyrinth of private and governmental organizations that can often work at cross-purposes with one another. There is an increasing recognition that there needs to be coordination between governmental and nonprofit service providers including the medical community, law enforcement, the courts and many others.⁶² In all communities a direct line of accountability is missing due to overlapping and often conflicting mandates, jurisdictions, professional training and ethical requirements.

Definitions of violence vary in statutes and funding organizations from one organization to another. Therefore, data collection is hampered by differing definitions, inadequate funding for training, the lack of quality assurance efforts to implement and effectively monitor data collection processes, protocol development and training, and monitoring of consistency with actual response behavior. The preceding factors are hampered even more by incessant changes caused by newly elected officials who tend to restructure law enforcement, prosecution, and court systems. In private nonprofit organizations there is also a

⁶² See, e.g., BARNETT, *supra* note 1, at 31; Denise Gamache & Mary Asmus, *Enhancing Networking Among Service Providers: Elements of Successful Coordination Strategies*, in COORDINATING COMMUNITY RESPONSES TO DOMESTIC VIOLENCE 65 (Melanie F. Shepard & Ellen L. Pence, eds., 1999); MIHALIC ET AL., *supra* note 13, at 14; Elizabeth A. Mulroy, *Theoretical Perspectives to Guide Management and Community Practice: An Organization-in-Environment Approach*, 28 ADMIN'N IN SOC. WORK 77, 93 (2004); Osofsky, *supra* note 16, at 7.

severe problem with continuous staff turnover from the administrative level to the front-line workers who provide direct care for traumatized victims. Staff turnover rates range from twenty- to fifty percent or higher.⁶³ Thus, each time there is staff turnover, the collective knowledge and established contacts with other parts of the community system are jeopardized if not entirely lost.

IX. Implementation of a Family Violence Community-Wide Plan

A process evaluation in one community has identified several findings during Phase I of the community-wide plan to address family violence. The most significant finding is what has been described for community partners as

a shift from one that emphasizes an organizational and programmatic focus to a system that places the outcomes for citizens experiencing family violence first. After many false starts . . . there is evidence of and hope that this significant shift in focus will continue⁶⁴

Mattessich, Murray-Close and Monsey developed a collaborative inventory providing an objective assessment or scoring method to identify strengths, areas needing attention and areas of concern.⁶⁵ The administration of this instrument for this project has shown seven critical strengths, six additional measures that are acceptable for a baseline measure, seven areas needing additional attention and no areas of concern.⁶⁶ The strengths identified included a unique approach of the collaborative, a favorable political and social climate, participants

⁶³ THE CENTER FOR THE STUDY OF SOCIAL POLICY, IMPROVING THE QUALITY OF HUMAN SERVICES THROUGH RESULTS-ORIENTED HUMAN RESOURCE MANAGEMENT 7, 8 (June, 2002), http://www.cssp.org/uploadFiles/2431_CSSP_book1_FINAL.pdf.

⁶⁴ Rhonda Impink, Evaluation Report for the Family Violence Community-Wide Plan: Phase I 7 (2004) (unpublished document) (on file with Indiana State University) [hereinafter Evaluation].

⁶⁵ PAUL W. MATTESSICH ET AL., COLLABORATION: WHAT MAKES IT WORK 35 (2d ed. 2001).

⁶⁶ Evaluation, *supra* note 64, at 9-10.

believing that their organizations would benefit from involvement in the collaborative, skilled leadership, flexibility, concrete, attainable goals and objectives; and shared vision.⁶⁷

This cultural shift is the most significant factor when promoting the development of a community planning effort. Peter Senge describes the challenges of promoting change efforts in individual organizations.⁶⁸ When the idea of promoting change across a multitude of organizations is considered, the challenge becomes exponentially more formidable. That is why it is essential to document the process of the community evolutionary effort, including both the analysis of what happens and how attitudes toward the collaborative process are altered, in addition to changes in protocols, procedures and training and the collection baseline data.

Paranteau and Stark recommended that communities should “start with one to two easily attainable goals”⁶⁹ in order to bring success that begins to build the pivotal “collaborative culture.”⁷⁰ The experiences of this project have clearly substantiated that assertion.

Some of the most significant successes of the Phase I time period included innovations that did not require substantial financial investments other than the cost of staff time to plan and implement these operational strategies. The mission of the Family Violence Community-wide Plan during Phase I was to “create and implement a coordinated[,] comprehensive, and culturally competent system of response that promotes prevention and effective intervention

⁶⁷ *Id.*

⁶⁸ See Peter Senge, *The Life Cycle of Typical Change Initiatives*, in *THE DANCE OF CHANGE: THE CHALLENGES OF SUSTAINING MOMENTUM IN LEARNING ORGANIZATIONS* 5-10 (1999); Peter Senge, *The Leadership of Profound Change: Toward an Ecology of Leadership*, in *THE DANCE OF CHANGE: THE CHALLENGES TO SUSTAINING MOMENTUM IN LEARNING ORGANIZATIONS* 10, 10-21 (1999).

⁶⁹ Kate Paranteau & Evan Stark, *Doing the Work*, in *FAMILY VIOLENCE: BUILDING A COORDINATED RESPONSE* 21, 22 (Am. Med. Assoc'n, ed., 1996).

⁷⁰ BARNETT ET AL., *supra* note 1, at 31.

to keep family members of all ages safe from family violence.”⁷¹ There were eight key strategies identified in the plan, they included: creating a coordinated response, supporting current efforts, implementing general education and training, ensuring research ability, establishing cultural competency, having an effect on public policy, establishing a coordinating body, and creating a transition plan.”⁷²

The main accomplishments during Phase I of this community-wide plan included the identification of one organization, the Domestic Violence Network (DVN) as the entity for leading and monitoring the implementation of the plan.⁷³ The DVN in conjunction with an advisory committee developed the criteria for the bidding process to establish a “navigation hub” so that domestic violence victims can call one number and after a brief assessment be connected to the most appropriate organization(s) to meet their specific needs.⁷⁴ This is not only easier for victims, but it also allows for the collection of consistent intake data about the needs in the community and provides one number for professionals who need guidance with referrals that they can provide to their clients, employees, and patients or for family members or friends.

An innovative and effective plan to address emergency bed space as shelters fill up was the second accomplishment to recognize.⁷⁵ This plan is simplistic, but has resulted in a highly effective approach that uses existing technology. One organization was identified to collect daily occupancy rates for all of the shelters in the community and then distribute that information to all organizations that might need to make referrals to the shelters.⁷⁶ This plan

⁷¹ STRATEGIES FOR TOMORROW, INC., FAMILY VIOLENCE COMMUNITY-WIDE PLAN: STRATEGIC PLAN xiv (2001).

⁷² DOMESTIC VIOLENCE NETWORK OF GREATER INDIANAPOLIS, PHASE ONE PROGRESS REPORT 3 (2003), <http://www.domesticviolencenetwork.org/index.asp?p=5> (on file with author).

⁷³ *See id.* at 2.

⁷⁴ *See id.* at 4.

⁷⁵ *See id.*

⁷⁶ *See id.* at 7.

has proven over the first two years that additional shelter beds are not necessary at this point in time.⁷⁷ The contracting agency that manages the program has access to overflow-shelter space as it is needed. In addition to the fact that this plan has avoided the much more expensive building of a new shelter or additions to existing shelters, it has also provided data to show the flow of requests for emergency housing and the types needed.⁷⁸ For advocates and other emergency and social service personnel it has substantially reduced the time that was previously spent attempting to locate shelter for emergency situations.⁷⁹

The third major accomplishment was the Fire Station Haven Project that allows for a safe and easily accessible place for victims to go after leaving an abusive experience.⁸⁰ This plan does not require new hiring costs because it is set up to utilize only existing personnel who are already on duty. Training of all related personnel and the production of a video to explain the service clearly demonstrated the value of coordination between all of the appropriate organizations because the focus is on the needs of the victim. The fourth major innovation during Phase I was the use of collaborative public relations campaigns to advertise the navigation hub phone number, information about the Fire Station Haven Project and provide general education about basic rights and dispute domestic violence myths with facts.⁸¹ These campaigns are conducted in collaboration with various news organizations and have included billboards and ad space on buses, the distribution of safety planning cards, and an award winning video about the dynamics of domestic violence and the community planning process.⁸²

⁷⁷ *See id.* at 6.

⁷⁸ *See id.* at 7.

⁷⁹ *See id.*

⁸⁰ *See id.* at 3.

⁸¹ *See id.* at 8.

⁸² *See id.* at 8-10.

The process evaluation of the first phase of the community-wide plan highlights these projects, but specifically focuses on how these projects developed and the dynamics of the collaboration between the leadership organization and the various community partners. The implementation phase of the project has been possible due to the increasing collaborative culture that has developed between the members of the Advocates Group.⁸³ This group includes representatives from over sixty different organizations including private nonprofits, governmental groups, and a few representatives from private organizations who are also members of the Employers Against Domestic Violence group, which meets quarterly for educational programs on workplace safety and how to assist their employees impacted by family violence.⁸⁴

The Advocates Group meets monthly and uses committees to monitor the community-wide plan's implementation.⁸⁵ It has also identified additional initiatives such as the need for a transportation fund and a new curriculum committee, which has developed a training curriculum to share with community organizations. The Domestic Violence Network has provided the administrative support such as preparation of meeting minutes, reports, fiscal services and a common point for contracts, including funding contracts for the various efforts listed above and for evaluation. They provide leadership to monitor the implementation process, seek out additional funding, and promote the collaborative process that has supported the various successful projects. This organization, whose sole mission is to support the development of a collaborative community system, has developed an organizational capacity to provide the critical long-term investment in the community process. They are looked to as

⁸³ *See id.* at 3.

⁸⁴ *See id.*

⁸⁵ *See id.*

the entity to convene the necessary persons to address key issues and provide a voice for the advocates and various community stakeholders.

At this point in time preparations are being made to convene the second phase of the community-wide planning process since the initial goals have been mostly achieved. The community structural components have been set in place for continuing public education, evaluation and input to the public policy process. During Phase II, it is expected that connections to children's services and vulnerable adults will be increased.

X. Moving towards Community Systems

Nationally, there have been numerous attempts at pulling services and resources together. The Duluth Abuse Intervention Project (DAIP) has focused on "institutional ethnography"⁸⁶ and the promotion of "uniformity within the criminal justice system."⁸⁷ In Denver⁸⁸ as well as New York state⁸⁹ the focus has been on an integrated data collection systems. The six projects funded by the "Green Book" initiative to promote greater collaboration between domestic violence and child abuse services and many other projects are all experimenting with various strategies to move from individual agency or programmatic responses to various levels of integration, coordination and collaboration.⁹⁰ Connections with adult protection agencies are much less prevalent. Although there is an increased recognition of the need to integrate services for the three levels - domestic violence (and IPV), child and

⁸⁶ Shepard & Pence, *supra* note 62, at 4.

⁸⁷ *Id.* at 22.

⁸⁸ See generally Victim Services Network 2000, <http://www.vs2000.org> (last visited Jan. 31, 2006).

⁸⁹ See generally PAMELA YOUNG, CTR. FOR COURT INNOVATION, AN INFORMED RESPONSE: AN OVERVIEW OF THE DOMESTIC VIOLENCE COURT TECHNOLOGY APPLICATION AND RESOURCES LINK (2001), http://www.courtinnovation.org/_uploads/documents/Informed%20Response1.pdf.

⁹⁰ See GREENBOOK NATIONAL EVALUATION TEAM, THE GREENBOOK DEMONSTRATION INITIATIVE: PROCESS EVALUATION REPORT: PHASE I (JANUARY 2001- JUNE 2002) 50 (2004), http://www.thegreenbook.info/documents/Caliber_Greenbook_Report.pdf.

vulnerable adult maltreatment - achieving this goal is much more difficult than it appears to be on any one level.

From the initial findings of numerous authors, reports, and the results of the case study, there are three critical factors that appear to be imperative for community collaborative efforts to effectively target the three levels of family violence. First is the need for a leading organization to be identified for the community that has as its primary mission to continually monitor the community's progress towards achieving the stated community outcomes and that tracks a community line of accountability.

The second pivotal factor is the need for dedicated and effective leadership in the organization that is recognized as the entity to lead the process by the community's elected officials (without aligning with a specific political party) and the officials of governmental agencies including law enforcement, prosecuting, and judicial officials. The larger relevant organizations, including governmental and private child protection agencies, domestic violence intervention groups, adult protection agencies, and their respective funding organizations, also need to recognize this leadership.

The final factor is the development of a culture of collaboration that evolves at three levels: the front-line workers, their supervisors and mid-level managers, and the elected and executive levels. This culture develops slowly and requires an extensive amount of time to be "nurtured" by community leaders so that it can evolve into an integrated community system. It can be derailed very easily. The loss of only one key person in one organization during the initial stages of development can jeopardize the project. To sustain momentum the collaborative must clearly educate all new members, especially newly elected and appointed

officials, about the nature of the collaborative culture that continually focuses on the community's mission with stated long-term outcomes.

It is absolutely essential for funding organizations that require coordination and community accountability to understand and continue the provision of necessary funding. Beginning and maintaining a continuous and diverse collaborative culture requires innumerable meetings to work through and analyze a myriad of details to avoid unintended negative consequences as the integration takes place.

XI. Conclusion

The issue of domestic violence needs to be addressed within the context of family violence and broader violence within society by developing community plans that recognize the specific nature of each locale and build on the efforts of current leadership and organizational structures already in place whenever possible. This requires a cultural shift in attitudes to move from an organizational to a community context. The development of logic models to guide the process towards achieving the desired long-term outcomes is also required. Community plans should follow a series of phases that need to be developed to outline specific strategies based on local needs, leadership, and existing partnerships. Strategies need to be developed for public education and professional cross-training about violence prevention and intervention. Additionally, a continual auditing of all the processes and protocols used to keep victims safe is necessary, as is holding perpetrators accountable, and promoting services that meet the needs of a diverse population.

The key factors to support this paradigm shift include the provision of continuous leadership despite constant political and organizational leadership changes, and fluctuations in

federal, state, and local funding. Support from local community leaders for the leadership organization is absolutely essential. This process requires a long and committed time period to change the course in communities. “Many of the most pressing problems communities face took years, even decades, to develop.”⁹¹ These problems cannot be solved quickly. The leadership also needs to educate the public about investing in prevention and effective intervention programs instead of building prisons and paying more for law enforcement, prosecuting attorneys, and all of the concomitant costs of the judicial and penal systems that are currently rising at exponential rates. In order to break the cycle of violence in families and society it is essential to understand that “community failures” can only be significantly reduced by collective action and a shared acceptance of responsibility.

⁹¹ PAUL FREEDMAN, *WHAT MAKES A SOLUTION? LESSONS AND FINDINGS FROM SOLUTIONS FOR AMERICA* 47 (2003), http://www.pew-partnership.org/pdf/what_makes_a_solution.pdf.

