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Steps Toward Safety: Improving Systemic and Community Responses for Families Experiencing Domestic Violence

Leigh S. Goodmark

University of Maryland Francis King Carey School of Law, lgoodmark@law.umaryland.edu

Ann Rosewater

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Steps Toward Safety: Improving Systemic and Community Responses for Families Experiencing Domestic Violence



**Family Violence
Prevention Fund**

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Many people helped us learn lessons from a wide range of initiatives that seek to improve the safety of vulnerable families; they all helped make this report possible. Scores of individuals from around the country gave their time and thoughtful comments through confidential interviews or participation in a lively and rich National Roundtable on Domestic Violence and Child Welfare Reform Efforts.¹ Thousands more individuals have been a critical part of the initiatives we studied, and we are indebted to them for their efforts to forge new paths to protect abused women and their children.

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Finally, we want to remember the groundbreaking work of the late Susan Schechter. Her name was mentioned in nearly every conversation we held and every resource that we drew upon. Her spirit continues to guide this work; we feel fortunate to have considered her both a mentor and a friend.

Ann Rosewater and Leigh Goodmark

1 Roundtable participants are listed in Appendix 1.

2 Bringing the Greenbook to Life: A Resource Guide for Communities Developing Interventions for Families Experiencing Domestic Violence and Child Maltreatment. Anticipated Publication in 2007.

Steps Toward Safety: Improving Systemic and Community Responses for Families Experiencing Domestic Violence

Written by Ann Rosewater and Leigh Goodmark

**Family Violence
Prevention Fund**

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On a winter day in 1999, S.N., a 31-year-old employed mother and full-time college student, opened her apartment door to find her ex-boyfriend accompanied by two men she did not know. Without warning and in a “fit of jealousy,” he assaulted her violently and repeatedly, breaking her arm and fracturing her ribs and skull. When her ex-boyfriend left, S.N. called 911 to report the beating to the police and seek help. Meanwhile, her nine-month-old daughter slept in the next room; her five-year old son was at school. She knew she desperately needed to go to the hospital, so she took her children to her neighbor and asked her to watch over them. A cousin was also called to come get the children. S.N. was taken to the hospital emergency room.

Later that evening, the police came to the neighbor’s door and, with guns drawn, took the children away. The next morning, S.N., still in the hospital recovery room, received a call from the city’s Department of Children’s Services, reporting that the children had been seized and were going to be placed in foster care. She was ordered to report to court in five days because she had “engaged in domestic violence.” The public child welfare agency filed a neglect case against her. It took 21 days before S.N. was able to get her children back—an agonizing experience for her—doubly victimizing her for being abused, and traumatizing her children. It took nearly six months before the city withdrew the allegations of neglect against her, without removing her name on the state’s registry of child abuse and neglect.

This mother was lucky — her children came home, she found medical, emotional and legal support, and she now advocates for other abused women and their children. Many others are not so fortunate. But the courage of survivors and the wisdom of many others are changing the course of child welfare policy and practice.³

³ Her case, joined with 14 other mothers whose children were taken from them because they had been victims of domestic violence, became a landmark one, *Nicholson v. Scoppetta* 181 F Supp2d 182 (EDNY 2002); *Nicholson v. Scoppetta* 3 NY3d 357, 366 (2004). The judge found that the public child welfare agency had violated the substantive and due process rights of the mothers and children, and barred the agency from using such practices in the future.

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Executive Summary

What was once a hidden problem is now the subject of open discussion and widespread reform. Today there is broad agreement that domestic violence has grave consequences for women and children—and that, for generations, the systems that should help families experiencing violence have often failed them. This is particularly true for families facing the complex, but common, challenge of dealing with violence that affects both a mother and her children.

In the past 15 years, stakeholders, researchers and service providers have worked to improve the response to these fragile families, developing pioneering programs designed to address problems within and across systems. These new programs aim to support a child welfare system under severe strain, provide more comprehensive services to domestic violence survivors, create new roles for men who want to help families in crisis, address the many unmet needs of children who witness or experience family violence, and support prevention strategies that offer great promise to keep women and children safe.

They have achieved a tremendous amount, and are beginning to fundamentally alter the ways some systems interact with and support fragile families. They have heightened awareness and increased understanding and knowledge about the risks and disruptions children face when their caregivers are abused, the resiliency some children show in the face of violence, the ways abused parents strive to shield and protect their children, and the challenges facing courts, child welfare systems and domestic violence service providers who work to keep women and children safe and hold batterers accountable.

This report is designed to mine the lessons learned so far from this work. It finds real promise in some of the reforms instituted to date. Innovative new strategies are



improving relationships across child welfare and domestic violence agencies and dependency courts. New practices are enhancing cross-system understanding and interaction between agencies and communities. Some agency officials are beginning to recognize the persistent biases that affect their work. Child welfare agencies and dependency courts are creating specialized positions for experts who understand and advocate for battered women. New protocols are institutionalizing change and ensuring that workers benefit from the lessons learned by their predecessors and colleagues.

But change is a process with many stages, participants and influences, and it rarely comes without setbacks, missteps and false hope. Efforts to shift the way society, law and services handle complex and sensitive family issues are no exception.

A primary goal of the work to date has been to improve collaboration within and between systems, and to engage new community partners in keeping families safe. Collaboration is laudable, but it is not an end in itself and is only useful if it keeps women and children safe—and that measure is not always applied. And there is little consistency in terms of expectations and principles about “community,” or even the definition of what “involving community” should mean.

Biases based on race, ethnicity and gender continue to plague the systems that work to keep families safe, and these biases are often exacerbated by reluctance to talk forthrightly about sensitive issues and by a mismatch between those who provide the services and the families that consume them. Persistent biases also contribute to treating mothers, their partners and their children as victims, batterers or witnesses, respectively, without acknowledging that within each group are variations in experiences, individual needs, and the dynamics of relationships.

Nonetheless, the tools and resources, practices and policies developed to date have laid important groundwork that can support broad rethinking about how to support and protect abused adults and their children. To the extent they have been successful, they must move from being fledgling and localized to being adopted broadly—and many more resources are needed to make that happen. All of them must emphasize new roles for men and support prevention.

The next generation of innovation must build on the lessons learned by those who came before, and heighten attention and renew urgency in specific areas. These include:

- Collaborative learning and practice as a prelude to new policy
- New strategies to address race, culture and gender
- Greater participation by survivor mothers and children
- Greater investment in community
- Differential responses for families based on risk
- Therapeutic and other services and supports for mothers and children
- Greater accountability for men who batter and greater attention to the roles they continue to play as fathers and providers
- Broad, meaningful engagement of men as allies in protecting children.

In all our work, we need vastly greater attention to the kinds of prevention that can stop violence against women and children before it begins.

“15 years of work to reform systems has resulted in real progress that is making a difference for fragile families across the country. We have found some answers, but a lot more work lies ahead. We need to use what we have learned more effectively, refine our strategies and identify new solutions that will keep many more women and children safe.”

– Lonna Davis
Children’s Program Director,
Family Violence Prevention Fund

Many of the new programs are still in their infancy, and will need time to fully test and refine their approaches. The measures of their success are straightforward and relatively non-controversial: to reduce injuries and deaths of women and children; and to put many more protective, caring, consistent adults in positions to help children who have been exposed to violence. In the end, innovations succeed only if they help victims of family violence move on to safer and more stable situations.

The nation needs programs to succeed. Fifteen years into this work, we still pit mothers against children, demonize violent men, and fail families that desperately need help. While significant groundwork has been laid, vast work lies ahead. How quickly and effectively we adopt meaningful, effective reforms is—in the end—nothing less than a measure of our society’s commitment to healthy children, families and communities.

I. Introduction

This report speaks to the pioneering programs inspired by a growing appreciation of the pervasiveness, danger and consequences of domestic violence for women and their children. It provides a portrait of a quiet crisis brewing in the 1980s and 1990s as well as discussions among stakeholders, increasingly robust research, templates from new programs, and dissemination of information that has contributed to a new framework for aiding abused families. Now it is time to mine the lessons arising from these efforts, consider the practices and policies, and identify their implications for the future.

Through a series of interviews, document reviews and research focused on selected initiatives throughout the country, we identified common components of new practices by critical child- and family-serving agencies—principally child welfare, juvenile and family courts addressing dependency issues, and domestic violence service providers—as well as important learnings identified by key participants in these initiatives. A national roundtable brought together representatives from these and other efforts to broaden the perspectives and experiences upon which we could draw.⁴

We found many creative and committed administrators, advocates, workers and grassroots leaders building new relationships, new coalitions and new strategies to address the co-occurrence of domestic violence and child maltreatment. Collaborations, community organizing, public education campaigns and many other approaches have been formed in an effort to align sometimes competing or contradictory laws, policies



and practices across agencies and organizations that serve families.

Several themes surfaced in our inquiry:

- Despite strong missions and good will, the hazards for fragile families navigating public systems are steep
- Where safe and feasible, it is important for abused women to be able to find ways to avert unnecessary or inappropriate engagement with child welfare, law enforcement and judicial systems that may result in separating children from non-offending parents
- There continues to be a need for—and challenges inherent in—elevating community responsibility for supporting vulnerable families
- Barriers based on race, ethnicity and poverty continue to be common and difficult to overcome, compounding issues of communication, consistency and most of all, dignity, for traumatized families.

While there are a variety of different approaches that we could have taken to examine these issues, we have chosen

⁴ While the initiatives reviewed here were undertaken in a broad array of urban and rural communities and involved a range of racial and ethnic communities, none was undertaken on an Indian reservation or in an area in which large populations of Native Americans or Native Hawaiians resided. We hope this gap will be closed in future efforts.

to present them in three ways: first, to provide context for understanding why this change was difficult; second, to offer insight into some of the practical achievements of the projects; and lastly, to consider which issues a new generation of reformers of these systems will need to confront in the future. This report does not attempt to evaluate any of these projects; for some of them, evaluations have been conducted or are in process.⁵ Our report is designed to bring together the experiences, insights, challenges and accomplishments of these projects that provide the seeds to grow the next decade of dedication to stemming domestic violence.

A. A Snapshot of Emerging Crises

A confluence of trends in recent decades propelled advocates for women and children to try to prevent the trauma of intimate partner violence on families.⁶ While these trends may have played out slightly differently from state to state and community to community, taken together, they generated heightened concern and inspired efforts to implement early responses.

Child welfare system severely strained. In the 1990s, the child welfare system was experiencing increasing caseloads, rising from approximately 400,000 children in out-of-home care nationally in 1990 to 570,000 in 1999 (this number stabilized at approximately 523,000 in 2003). Children of color continue to

be disproportionately represented in foster care: in 2003, Black children accounted for 35 percent of all foster children, while they comprise only 16 percent of the nation's child population under age 18. By contrast, while 62 percent of the child population is non-Latino white, they accounted for only 39 percent of the foster care caseload. Latino children accounted for 17 percent of the foster care population, while in the general child population they make up 19 percent.⁷ While Latino children may be underrepresented in foster care nationally, they were overrepresented during 2003 in 22 states.⁸

As with most public systems, turnover in the child welfare system was high, and workers carried cases far exceeding recommended standards. While efforts were made to keep families together, few resources and practices were directed to the factors complicating family stability such as domestic violence, substance abuse, poverty, and depression and other mental health problems. In some instances, these “special” family circumstances and the lack of services to address them undermined the case planning that workers were required to conduct to keep children safe. In other instances, Child Protective Services received reports of children exposed to domestic violence but screened them out, without determining the nature of their exposure, the degree of trauma they may have been experiencing or the help they may have needed. And in the early 1990s, political pressures and legislative initiatives combined to shift the child welfare system's focus away from strengthening families of origin to promoting adoption. While

5 “Phase II Outcome Evaluation,” Chapin Hall Working Paper, Chapin Hall Center for Children at the University of Chicago, 2005. Barwinski, S. “Community Partnerships for Protecting Children: Lessons Learned From the Field—For the Field,” The Center for Community Partnerships in Child Welfare, Center for the Study of Social Policy, 2005.

http://www.thegreenbook.info/documents/GB_newsletter_1.pdf

http://www.thegreenbook.info/documents/Greenbook_Interim_Evaluation_Report_2_05.pdf

http://www.thegreenbook.info/documents/Caliber_Greenbook_Report.pdf

6 Throughout this document we refer to abused women or abused mothers, since repeated nationwide surveys report that women are the victims in the overwhelming majority of intimate partner violence incidents.

7 “Foster Care,” Child Trends DataBank, www.childtrendsdatbank.org.

8 Dougherty, S., “Practices that Mitigate the Effects of Racial/Ethnic Disproportionality in the Child Welfare System,” Seattle: Casey Family Programs (2003), pp. 1-2 as quoted in Family Violence Prevention Fund, *Activist Dialogues: How Domestic Violence and Child Welfare Systems Impact Women of Color and Their Communities*, 2005, p.11.

the child-safety focus of the Adoption and Safe Families Act was laudable, its legislative scheme necessarily meant child welfare systems had to shift their focus away from preserving families who were experiencing domestic violence to placing those children for adoption if strict timelines were not met.

Gaps in domestic violence policy and services for survivors.

In the 1980s and early 1990s, targeted resources and services for victims of domestic violence were relatively new, and were generally developed through the nonprofit sector with limited government support. Basic services were developed to aid adult victims of abuse (the vast majority of whom were women), new federal and state laws were designed to make domestic violence a crime, and new campaigns were launched to educate the public that violence against women is both illegal and unacceptable. The legal structures were evolving, as was public understanding of the scope of violence between intimate partners and its consequences. Policy frameworks and resources expanded in the mid-1990s with the Violence Against Women Act (VAWA).

Battered women's advocates had worked for years to enhance the criminal response to domestic violence; VAWA gave them and their allies—police and prosecutors—the resources to make responding to domestic violence a priority. The law, while focusing principally on expanding investment in law enforcement and the criminal justice system, also enhanced the capacity of statewide coalitions and local service providers to respond to the heightened need for their help.

As these services became more established, however, they also became more professionalized. While this was a notable advance, it also has had unintended consequences, including diminishing the voices and changing the role of survivors within battered women's service organizations.

Furthermore, having been conceived and crafted by primarily white and middle class survivors, most of the laws, resources and programs were designed with that constituency in mind. Yet domestic violence knows no bounds of color or culture—leaving women of color and immigrant and refugee women, and their children, with limited access to services or access to services which too often do not reflect their circumstances or needs.⁹

Strategies to address men's roles under-developed.

Only recently has another aspect of domestic violence been openly discussed: that the men who abuse women often remain in the lives of those they abuse. For years, the primary strategy to address the safety needs of battered women either through the criminal justice system or the shelter system was to encourage women to leave their abusers; but in many cases this is neither the women's desire nor is it economically or culturally feasible. In many instances, as well, mothers determine that leaving may be more dangerous than staying. With this increased understanding of the dynamics of battered women's lives and decisions, there has been growing interest in identifying new ways to work with men and to protect women and children in these circumstances.

Children's needs slow to be taken into account.

While it was evident that children were often in tow when battered women showed up at shelters, they were generally hidden from or not visible to law enforcement, and few specialized services were available to address the consequences of their exposure to their mothers' abuse. No specific resources were targeted to the potential impact of this violence on children. When emergency protective or restraining orders for families facing violence were issued by the court, it was rare to have the needs of the children taken into account, let alone referring them, when appropriate, to a child protection or family support agency.

9 Martinson, L. M., "An Analysis of Racism and Resources for African-American Female Victims of Domestic Violence in Wisconsin," Wisconsin Women's Law Journal, Fall 2001.

Throughout these years, another set of struggles was playing out in the courts. Far too often, battered women spoke out about losing their children in custody disputes, solely because the court assumed that because they were victims of domestic violence, they could not be good mothers.¹⁰ Another consequence of these disputes was that many court decisions related to custody and visitation effectively required women to stay in contact with the father of their children. Moreover, judges unfamiliar with the dynamics of domestic violence were forced to choose between sympathetic and conciliatory abusive fathers willing to share custody of their children with their spouses and frustrated, depressed or angry women seeking to shelter their children from abusive partners. Too often, the batterer simply looked like the better parent and as a result, was awarded custody.¹¹ In addition to efforts by some advocates to address the needs of children in shelters, battered women's advocates also sought to change custody laws to help non-offending women keep the children away from the abusive caregiver. To support these efforts, they began to use emerging research about children's potential harm from exposure to abuse to argue that batterers should not be granted custody without considering the possible consequences—[the rise in interest in these cases by child welfare professionals anxious to safeguard children from the negative effects of exposure to violence.]

Finally, throughout the 1990s, research and clinical experience were yielding an increasing body of evidence illustrating the range of consequences for children who witness persistent and serious domestic violence. Many factors contribute to whether or not, or how severely, children suffer by exposure to

violence in their family. These effects vary from one child to another, and may vary for a single child, depending on the child's age and gender, resilience, the frequency and nature of the exposure, the availability of safe and loving adults in the child's life, the protective strategies the mother is able to use to shield her children, and other factors. For those children who are scarred by the experience, research indicates that they may face some combination of social, emotional, health and learning problems. These stresses may be transitory, but for some, they may also extend into adulthood. Some children who are exposed to domestic violence may experience the same lasting effects as those who are direct victims of maltreatment: depression, continuing trauma, chronic health ailments and principally, the increased propensity to use violence in subsequent relationships.¹²

B. A Review of Early Responses

It is within this context that, about fifteen years ago, child welfare professionals, domestic violence advocates, courts and other community actors began convening to discuss how to better address what was then defined as the overlap of domestic violence and child maltreatment. Several programs have been particularly influential in the evolution of premises, practices and policies related to the intersection of family violence and children. These programs are coming to the attention of protective services.¹³

One of the earliest and most pioneering programs, Advocacy for Women and Kids in Emergencies (AWAKE), initiated at Boston Children's Hospital in

10 Joan S. Meier, "Domestic Violence, Child Custody and Child Protection: Understanding Judicial Resistance and Imagining the Solutions," 11 *American University Journal of Gender, Social Policy & the Law* 657 (2002).

11 Peter Jaffe, Nancy K.D. Lemon & Samantha Poisson, *Child Custody & Domestic Violence: A Call for Safety and Accountability* (2003).

12 Lois A. Weithorn, "Protecting Children from Exposure to Domestic Violence: The Use and Abuse of Child Maltreatment," 53 *Hastings Law Journal* 1 (2001).

13 See National Council of Juvenile and Family Court Judges, "Family Violence: Emerging Programs for Battered Women and their Children," 1998 for one overview of these and other programs. Many of these programs maintain current websites as well.

the mid-1980s, developed domestic violence services for the mothers of young abused patients. The first of its kind in a pediatric setting, these services were developed within the hospital's child protection program when some of the social workers realized they were not appropriately creating safety for children if they sent them home to situations in which their mothers were unsafe. This program was also one of the first to bring attention to the complications of protecting children exposed to family violence and developed the first strategy that tied the protection of mothers to the protection of children.

The experiences in the AWAKE program were shared with the Massachusetts Department of Social Services, with an eye to identifying additional strategies that child protection workers might use to aid victimized mothers and their children. The Department of Social Services was the first state agency to bring battered women's advocates into its child protection division. During the initial years of this experiment, the advocates consulted with the child protection workers on high-risk child abuse cases to identify how often domestic violence and child maltreatment were co-occurring. Once Social Services department officials realized that over half of their caseload involved domestic violence, the department established an entire domestic violence unit within the child welfare agency to expand their presence into every area office across the state and to develop system-wide best practices and policies.

A wide range of initiatives were built based on the need for greater community engagement and responsibility for children who were at risk of entering the child welfare system, and children whose mothers were being abused. Some of these initiatives joined these two concerns, while others, at least at first, addressed them separately. Some of these efforts were spearheaded by leaders in state child welfare agencies; others were catalyzed by national foundations. Some focused on neighborhood and community sites; others took the entire state as the arena of attention.



The Michigan Family Independence Agency began to incorporate its concern for children exposed to domestic violence into its family preservation program. This program attempted to stem entry into foster care by children who were at imminent risk of removal from their families. Workers assigned to these families carried low caseloads, and the protocol for interaction with the families involved availability on a 24-hour, seven-day-a-week basis. It was through this intensive relationship with families that the state began to recognize and specifically address the needs of abused mothers in conjunction with the prevention of their children's entry into substitute care.

A second hospital-based program, The Child Witness to Violence Project at Boston Medical Center, began in 1992. It involved therapeutic treatment for abused



women and their children together, in an attempt to understand the disruption created by their separation. This project also recognized that children were witnessing violence both at home and in the community, and sought to address the trauma regardless of what type of violence triggered it.

Other programs during the 1990s experimented with ways to reform the foster care and child protection systems, working at the neighborhood level and seeking to engage communities in assuming responsibility for vulnerable families. In 1992, the Annie E. Casey Foundation designed Family to Family (F2F), initially in a small number of cities and now active in 60 sites in 17 states, to stimulate child welfare system reform that would keep children removed from home in their own neighborhoods and continue to support and involve their

families. The Edna McConnell Clark Foundation, with later support from Casey, tested Community Partnerships for Protecting Children (CPPC) in four communities—Louisville, KY, Jacksonville, FL, Cedar Rapids, IA, and St. Louis, MO. This effort sought to shift the sole responsibility of protecting abused and neglected children from the public child protection agency to a partnership of the public agency and community-based organizations and neighborhood residents. The CPPC began to focus on domestic violence (as well as substance abuse and mental health) early in its development. From the CPPC's vantage point, preventing abuse and neglect and gaining community engagement required understanding that vulnerable families were often struggling with multiple, interrelated challenges.

One county sought to address the intersection of domestic violence and child protection in the context of the court system. Building on its development of a domestic violence division, in 1997 the Dade County, FL (Miami) courts were among the first to advance a way to help battered mothers whose children were in the dependency court. They sought to identify those mothers and, through special court-based advocates, help them address both pre-court child abuse investigations as well as any judicial actions taken in the cases. This model also had a special emphasis on assessing children's trauma in order to serve them more appropriately.

Learning from these examples and from input from a broad coalition—including judges, child welfare professionals, domestic violence advocates, academics, social science researchers and policymakers—the National Council of Juvenile and Family Court Judges (NCJFCJ) developed a set of principles and suggestions to address these cases. "Effective Intervention in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice," issued in 1998 and subsequently known as the Greenbook, has since stimulated considerable thinking and action on these issues. With assistance from the federal government, six counties—San Francisco and Santa Clara, CA, St. Louis, MO, Grafton, NH, Lane, OR, and

El Paso, CO—brought together their juvenile and family courts, child welfare agencies and domestic violence service providers to test these guidelines. Three national organizations—the American Public Human Services Association, the National Council of Juvenile and Family Court Judges and the Family Violence Prevention Fund—joined together to provide technical assistance to the Greenbook sites. In addition, this consortium conducted state-level leadership training to bring together, often for the first time, public child welfare systems and juvenile courts with state domestic violence coalitions to discuss how to address the co-occurrence of child abuse and domestic violence.

Finally, in 2004, litigation in New York City brought to a head the concerns that children of abused mothers were being placed into foster care solely because they had witnessed domestic violence. The child welfare agency based the removal on the notion that their mothers had failed to protect them, whether or not the child had been harmed or was at risk of harm. New York State’s highest court held that exposure of a child

to violence is not presumptively ground for removal of a child and that “in many instances removal may do more harm than good.” It directed the lower courts in deciding whether to remove a child to weigh whether reasonable efforts were made to avoid removal while decreasing risk and to assess factually the risk to the child against the harm that might result from removal. Battered women’s advocates and those seeking change in the child welfare system rallied around the case, hoping that New York City could show other jurisdictions how to improve their work with families experiencing domestic violence.

This wide array of efforts contributed to a fundamental framework shift in which the safety needs of mothers and children were viewed as interdependent. The underlying premise was this: to keep children safe one must keep their non-offending parent, usually the mother, safe. While some of these efforts have yet to reach their promise, each has provided valuable lessons for improving responses to battered mothers, men who abuse their partners, and their children.



II. Accomplishments: New Understanding, New Practices, New Collaborations

With many of these initiatives still in their infancy, it is notable that they have already generated promising new ideas, tools, resources, practices and policies. These, in turn, are laying the groundwork for broad rethinking about how to support and protect abused adults and their children. Among the most salient of the accomplishments are:

- Cross-system understanding
- New protocols
- New ways to share information safely
- New practices such as case consultation and group conferencing
- A new category of cross-system workers
- Bringing frontline work closer to where families live
- Collaborations across a wide range of agencies
- Involvement of new community partners

We discuss each of these in more detail below.

A. Learning About Each Other

As states and communities have sought to initiate changes in practice, they have had to address the historic distance, lack of knowledge and often misunderstanding about the roles, responsibilities, mandates and procedures that different agencies use. Often, if an advocate working with women and children has no experience or a bad experience with an agency, she develops suspicions and stereotypes that impair future relationships and un-

dermine the potential for positive outcomes for families. We examined several innovative strategies to improve relationships across child welfare, dependency court and domestic violence agencies. The following strategies have been used alone and in combination, and have been applied to strengthening connections across an array of professions, disciplines and experiences.

Shadowing. Several communities have fostered learning across systems by instituting opportunities for one individual, for example a domestic violence advocate, to walk in the steps of someone in a different discipline, such as a child protection supervisor, for up to several days at a time. Through this process, one can gain a deeper understanding of the responsibilities, functions and tasks of a colleague who works in a different environment governed by different mandates and expectations.

Training and cross-training. Many sites employ training of varied intensity and duration for diverse participants. This helps to create a common knowledge base and a shared approach to inaugurating experimental efforts. Training has been developed and instituted for new workers, seasoned staff, and frontline as well as supervisory and management staff. Each time a new protocol has been developed, widespread training to understand and implement the protocol has been essential. Some initiatives placed a premium on multi-site training, breaking down the isolation that pioneers often feel within their own community when stretching the boundaries of practice and policy.

Trust building. Effective collaboration depends on building strong, sustained relationships among individuals, organizations and institutions. These relationships are essential to generating a level of trust that can be drawn upon, especially when conflicts of role or practice occur, so that individuals can address the issues impartially and professionally rather than personally. Developing mutual trust involves getting to know more about why individuals hold the views or take the actions that they do in their work, as well as finding ways to make connections to interests and experiences outside of the

workplace. Often, dialogue and interaction led by a skilled facilitator can help build common understandings and enhance trust levels. Working together on common tasks can deepen relationships. When these tasks have successful results, a sense of shared responsibility also advances everyone's sense of trust.

Looking inward. Essential to building trust for individuals working in multi-organization collaborations involves recognizing how one's personal and professional position, perceptions, assumptions and experiences affect efforts to identify and work toward new strategies

“There are no short-cuts to relationship building.”

– Gail Patin
formerly with CPPC in Jacksonville

and common goals. Most participants in these initiatives carry long-held beliefs, unconscious stereotypes, and adherence to previously-established practices. Creating a new framework that may

appear counter to these philosophical and organizational ways of doing business may require deliberately unpacking how and why they developed in the first place. Recognizing and addressing assumptions about individuals or groups of individuals, especially those based on invidious distinctions such as income, gender or race/ethnicity, also demands hard personal work, candor, and opportunity for reflection in an emotionally safe environment. Creating these safe spaces is one of the most challenging aspects of collaboration.

Learning to collaborate. Having found a range of potential partners, the next challenge is to learn to listen to each other, hear and understand other points of view and experiences, and find ways to work together toward a common vision. The differing roles and levels of authority among partners also requires efforts to create a level playing field where all collaborators have an equal voice. This entails developing decision-making processes, ground rules for interaction, methods to ensure

representation from key constituencies, and other tools for working together. Sites have used facilitators and exercises, and, in some instances, have created governing structures to foster collaboration and share resources.

The work of collaboration is ongoing, not stagnant. Partners and players may change, requiring new orientation and altering the dynamics of a group. Sometimes, stimulating participation by new parties can generate new energy, offer new ways to move toward the vision, and reignite the commitment the collaboration was designed to inspire. Other times, the inclusion of new participants can send collaborations back to square one. Given the frequent turnover of personnel in public systems and nonprofit organizations, it is important to keep relationship and trust building a high priority, with focused efforts when new people enter the collaborative or attain positions of authority in the child welfare, domestic violence and dependency court systems.

B. Protocols

Before these efforts began, it was new for child welfare agencies and courts to pay systematic attention to abused mothers. As each of these systems committed to addressing domestic violence, they sought ways to institutionalize the change throughout their workforce. A system that develops protocols is demonstrating a commitment to the issue of domestic violence by providing consistent written guidance about how to incorporate these new issues into their practice.

Protocols instituted by the child welfare system and the courts provided value as well to the domestic violence community. They offered evidence that the child welfare system recognized the importance of working with battered women in new ways, and that it sought to change what it had been doing. Often local advocates who worked with victims of intimate partner violence provided assistance to the agencies in understanding and outlining these new procedures. Child welfare agencies

then articulated these screening and interviewing protocols for child protection workers and others to follow.

Further, with protocols in place, one has something against which to measure performance; it is possible to determine whether and how the agencies and their staff are complying with the protocols that they promulgate.

Agencies developed protocols to address a variety of issues involved in working with battered women, their children and the offenders. For example, some protocols laid out how to identify who these mothers are and how to interview them in a way that will ensure their safety. Other protocols focused on issues of safe contact between the adult victim and the abuser as well as with the children. Still others offered new investigation and assessment tools.

A key legal underpinning of the child protection system requires making “reasonable efforts” to keep children with their families or to reunify them if they have been placed in substitute care. This has traditionally been an arena open to considerable interpretation by local child welfare agencies and dependency court judges, even without considerations about domestic violence. One of the Greenbook pilot communities, Lane County, Oregon, developed a checklist delineating elements of “reasonable efforts” in the context of families with suspected or founded adult victimization.

Another set of protocols advanced new procedures for the courts. In some instances these protocols were intended to improve interaction between child protective services and dependency courts, especially when the families included an adult victim of abuse. In other cases, communities tested ways to improve coordination between criminal and civil intervention in domestic violence cases that involved children exposed to domestic violence.

Establishing protocols, however, cannot be an end in itself. At a minimum, they are only as good as their implementation. All too often, respondents noted that while protocols had been put in place, they were not uniformly

followed. In addition, sometimes the protocols offer a false sense that an agency has dealt with the problem. Yet they are only one of many mechanisms needed to address the needs of battered women and their children.

C. Information Sharing

Traditionally, there has been considerable mistrust among the various human services and judicial agencies, and keeping information within each system has been one of its manifestations. The unwillingness or inability to share information has, in addition, often created missteps or contradictory plans for a family, since the systems were unaware of one another’s involvement or action.

Both to overcome the distrust and to facilitate greater cooperation around the needs of specific families, people within systems have sought ways to get beyond their information silos and to find ways to share information safely.

Several states and communities have designed protocols to improve communication between child protection agencies and shelters for abused women; these protocols ensure appropriate confidentiality to protect battered women from further harm, while enabling the child welfare agency to take necessary steps to help women protect their children. Some information sharing has been designed specifically to ensure that the child welfare agency knows that the children taken into a shelter are in a safe place, thereby releasing the agency from having to further investigate or seek court involvement. In addition, some of the information-sharing protocols help domestic violence service providers understand more about their reporting responsibilities in the event that they are working with a mother who may be suspected of abusing or neglecting her child.

For example, in a Miami dependency court project that provides domestic violence specialists, one protocol enables the specialists to work with a mother without revealing to the judge whether or not the mother is a vic-

tim of abuse. This seeks to prevent the judge from making inappropriate assumptions either about the woman's capacity to handle her parenting responsibilities or about the safety of the child.

While in general the advances communities have made in sharing information have been well-received and have facilitated interagency cooperation, there are some associated risks. Some worry that through these new pro-

cedures, a battered woman's confidences will be betrayed, undermining her trust in the domestic violence service provider. Some domestic violence advocates fear that their shelters will be co-opted by the child welfare agency and the juvenile court. Others are concerned that by knowing more

details about their reporting obligations, they will need to confront the fact that some abused women themselves abuse or neglect their children, and that advocates will have to report these women to child protective services.

cases in which they are trying to develop accountability for abusive men and link them with services.

Multidisciplinary teams function somewhat more formally and usually involve more participants, including substance abuse and mental health counselors and other family support professionals who may engage with the family or their children in other settings. Using these practices has not only helped a range of professionals to pool their knowledge and best strategies on behalf of a family, but also helped them get to know each other's perspectives, build relationships with other agencies, and, working together, start constructing plans for families that are consistent rather than at cross-purposes.

Another significant practice advance—family team conferencing (FTC)—was employed as a core component in the Community Partnerships for Protecting Children sites and more recently picked up in other initiative communities. This strategy sought to bring family members and their allies (neighbors, advocates, clergy, and other service providers) much more closely and visibly into child welfare decision making. Recognizing that a substantial proportion of these families face compounding safety issues as a result of domestic violence, agencies developed guidelines to help workers determine when use of FTC is appropriate, and when the risks make it counterproductive or potentially dangerous. In addition to the safety issues, mothers often feel considerable shame and guilt associated with the violence; they may also face other challenges, such as substance abuse or other methods of self-medication, which need to be taken into consideration in planning for their safety and support. In these situations, group conferencing provides an arena in which to honor other aspects of the mother's life, such as the ways in which she struggles to protect her children, while addressing the underlying substance abuse or mental health problems she faces.

Nevertheless, in situations where FTCs are used, families can find not only a sense of self-efficacy through participating in the decisions that affect them and their children,

“These families need ‘disaster relief teams’—we need that level of urgency in dealing with this epidemic.”

— Patricia Castillo
Executive Director, P.E.A.C.E Initiative

D. Case Consultation and Family Conferencing

Multidisciplinary teams and case consultations are designed to bring together frontline child welfare workers with domestic violence advocates and other professionals working with a family. In case consultations, child protection workers call on experts in other disciplines for assistance in considering the information and options in a particular case. In the past decade, this approach has included drawing on domestic violence advocates to serve as consultants to a child protection team in reviewing

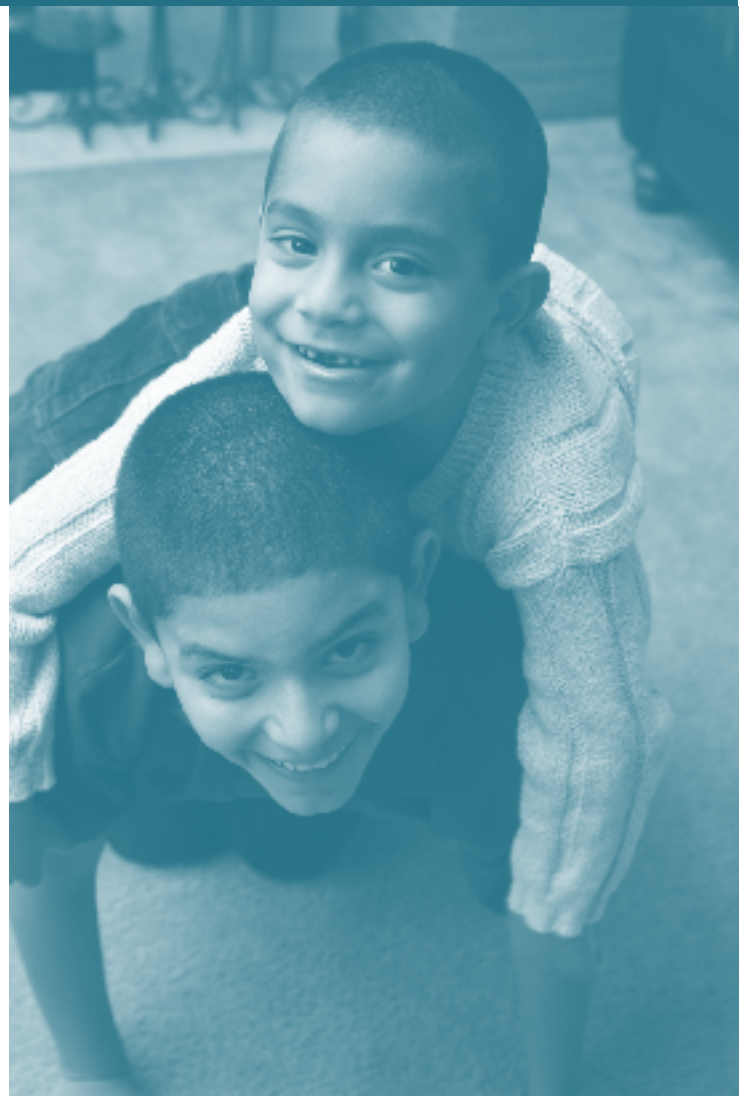
but also the opportunity to build support networks critical to maintaining safety. Among the essential elements that make FTCs work are trained facilitators, adequate time to ensure that the family brings allies, and careful homework to determine whether and how the abuser should participate. In some instances, it is more appropriate to hold a separate FTC with the perpetrator, using the same preparation, facilitation and follow-up. Family team conferences involving abusive fathers, when carefully conducted, offer a rare opportunity to increase a circle of accountability and support for his behavioral change.

Another version of group conferencing is called Team Decision Making (TDM) and is used by communities engaged in the Family to Family program catalyzed by the Annie E. Casey Foundation. These are used whenever a placement issue arises, so that all of the key participants, including the family and community partners, can be involved in the decisions. In contrast to FTCs, however, there is often less time available for preparation, elevating the importance of creating mechanisms to identify domestic violence prior to TDM meetings, whenever possible, which increases the likelihood of safe and positive meeting outcomes.

E. Domestic Violence Specialists

Another way that child welfare and the courts have sought to address the needs of battered women with institutional practice change has been to make sure that someone is available on a regular basis to provide guidance and expertise to caseworkers and judicial personnel. In dependency cases that are further complicated by the mother's victimization, workers need someone to turn to who is more familiar with the dynamics of domestic violence and who knows the resources available in the community.

As a result, many child welfare agencies and dependency courts have created new positions dedicated to understanding and advocating for the needs of battered women



and advising workers about safety planning, protection procedures, support and services. Given their prior experience as advocates, many specialists have been able to reach out to battered women differently than in the traditional relationship between social worker and client. In the latter approach, because the child welfare system has traditionally been focused on the child's situation, the social worker relates to the mother with the assumption that she is either abusive or neglectful. Domestic violence specialists have turned that relationship around by relating to the parent first as a victim of abuse herself, but also as someone who has strengths which she can draw upon. The domestic violence specialist is someone on the victim's side, with the experience and the resources to help her. The addition of domestic violence specialists to the child welfare system has helped the agency become



more sensitive to mothers as more than perpetrators of child abuse and neglect and to become more reflective of the framework that underlies the child welfare system—that it is designed to provide services for vulnerable families.

Specialized positions have developed in many different forms and settings, especially in child protection agencies and family courts and with varied responsibilities. In some instances, a position has been designed to influence systemic change and affect service delivery broadly rather than work with women case-by-case. In many communities, the individuals holding these specialized roles train child protection investigators, other front line workers and their supervisors about the legal, social and health related aspects of domestic violence and about resources in the community available to help women and their children remain safe. In other communities, individuals holding specialized domestic violence positions remain

focused primarily on individual case consultation, often missing the opportunity to take the learning from women’s experiences and apply it more extensively to other aspects of the agency’s functioning.

As noted earlier, some states have developed these positions in their state child welfare agencies while others have emerged at the county level. A few state agencies have expanded the specialized positions to serve throughout the state, in regional or local child welfare offices. New Hampshire, for example, has placed specialists statewide who serve as confidential liaisons between victims of domestic violence and the child protection agency. In this model, the specialists are employed by the domestic violence agency and located in local child protection agencies, thereby embedding an advocacy approach in the state system. With two separate systems working literally side-by-side, collaboration and trust-building can be taken to a new level.

El Paso County in Colorado has taken the idea of the domestic violence specialist a step further. In addition to supporting specialized positions within the child welfare system, El Paso County has also contracted for a specialized position at Legal Services. The lawyer represents women seeking protective orders and provides assistance with a variety of other civil legal and family safety issues, including housing, child support, divorce, custody and public benefits. In addition, the specialized attorney's role has been dedicated to serving not only extremely poor abused mothers but also the working poor.

One of the challenges with establishing specialized positions emerged early on in the pioneering Massachusetts experience. The state, which has a full unit of domestic violence specialists, has at various points recognized that by having resident experts within the agency, some of the child protection caseworkers and supervisors assume that they do not have to deal with the safety needs of mothers. Similarly, in some communities, the domestic violence service providers have let the child welfare agency serve as the advocates for these families, minimizing their own advocacy role. Finally, the inclusion of domestic violence specialists in an agency does not, by itself, institutionalize a change in overall policy; the work of the domestic violence specialists may exist in isolation if agency policy does not change to reflect support for the ideas and practices underlying their work. These specialists are again an important, but only one important, means of reframing policy to advance the needs of battered women and their children.

F. Co-located and Out-stationed Services

Another way that agencies have sought to reach out to vulnerable families, including those involving a battered mother, has been to set up services in places where families feel comfortable getting them. When parents feel a place is familiar, and the organization housing the services trustworthy, they are much more likely to use those services.

In general, child welfare agencies are not in the neighborhoods where families live; the agency is often either centrally located in a downtown facility, or increasingly, in a forbidding building set among other county agencies in a “government park” that is not close to either commercial or residential areas. Placing frontline staff in neighborhood centers or other places closer to where families live improves access to services as well as reduces the sense of having to traverse alien territory to reach an agency that may be misunderstood and feared.

The initiatives reviewed have experimented with many variations on out-stationing and co-location. One variation on the concept of specialized positions, for instance, involves placing child protection workers in shelters for battered women. Community Partnership sites frequently place child protection workers in partner agencies, including those providing mental health, domestic violence and substance abuse services. One state has placed its child protection caseworkers in full-service schools.

Having workers who are immediately available in these settings provides abused mothers and their children with quicker and more effective help in navigating the child welfare system. They can also aid shelter workers' and other providers' understanding of several aspects of the child protection process, including mandatory reporting, the investigation process and the relationship between child welfare and dependency court. At the same time, workers in collateral agencies can help frontline child protection caseworkers understand the complexities of information sharing. On the one hand, they can emphasize the need for heightened privacy and protective mechanisms to prevent revictimization for families, while on the other hand, they can help promote the need to forge new ways to communicate so that multiple agencies can work together toward common goals.

Several communities around the country have sought to improve police response to domestic violence calls, especially when children may be at home. In one approach

pioneered in New Haven, CT, mental health professionals are part of the team responding to the call, while others domestic violence advocates and/or child protection workers participate in the police response. One of the roles of the advocate may be to find a safe place to interview the victim and the child(ren) to assess their circumstances and immediate needs. The protocol established in Santa Clara County, CA, specifically outlines when and how information will be shared between law enforcement and the advocate or social worker, as well as how information generated from these crisis encounters is transmitted to domestic violence specialists at the courts and child welfare agency.

G. Agency Collaborations

Most of the agencies that work with very vulnerable families are caught up in responding to crises and have had inadequate time to work closely with other agencies and organizations that may work with the same families. In addition, the mandates and perspectives that each brings has historically placed some of these agencies at odds with one another about the guidance or services they provide to families. Yet few were pleased with the results they were getting when operating separately.

One important outcome of the initiatives we studied has been the establishment of deliberate connections and collaboration among these child and family serving agencies. Through many positive starts, and some false ones, most of the initiatives of the past fifteen years see collaboration as fundamental to success. Nevertheless, people have learned that collaboration takes patience, persistence and a lot of effort. Collaboration involves much more than sitting in a meeting room and reporting on what each agency does, though that is a critical element of reaching understanding. They have learned that collaboration involves cooperation, working together, compromising where necessary, and melding systems together where possible and appropriate.

Nevertheless, the context in which these collaborations take place is filled with imbalances in the power and authority held, or perceived, by different collaborators. These imbalances emerge in terms of people within systems' willingness and capacity to share information and recognize expertise outside their own sphere. They also include whether and how well they hear community voices and, in response, make changes in the way they operate. Public systems such as child welfare agencies and dependency courts are governed by many federal and state laws and are usually complex and bureaucratic organizations, thereby making it difficult for low-income communities and communities of color to penetrate and increasing the hurdles for outsiders seeking to collaborate with the very organizations that may exercise significant influence on their lives. At the same time, many families, especially in communities of color, may feel targeted by these government agencies and at a loss as to how to be heard and released from them.

Shelters and other organizations providing services to adult victims of violence, while much smaller and usually less bureaucratic, too often function as insular agencies. They also have been perceived as responding primarily to working and middle class white women, making it even less likely that families in marginalized communities and communities of color will look to them for help.

Some respondents report that the child welfare system, in some cases, persists in discounting domestic violence advocates because they are viewed as "having an agenda." At the same time, child welfare workers may be perceived by domestic violence advocates as telling non-offending mothers how to care for their children without hearing women's stories, and in too many cases, prepared to threaten to use their authority to remove children from their mother's care.

Judicial sector involvement in an initiative may intensify power differences. There continues to be significant deference to judges, which can stall communication and progress. As a result, other systems, especially domestic

violence service providers and community residents, can become disenfranchised and unable to articulate their needs in a productive way.

H. Outreach to other community partners

Collaboration however, does not end with the three principal systems (Judicial, domestic violence agencies, and Child Welfare) involved in these initiatives or even the other professional agencies working with families. Mainstream agencies have increasingly recognized the importance of reaching into communities and to finding nontraditional partners that reflect the concerns and cultures of the families with whom they work. In addition to the three principal systems involved in this work, some communities have included law enforcement, while Community Partnership sites have more consistently reached out to providers of mental health services and substance abuse treatment. Family to Family also incorporates outreach to community partners as one of its four core components.

Collaborations across these agencies has, at least for the individuals involved, improved communication in specific cases, and in some instances, inspired some of the new protocols and practices identified earlier. Other critical collaborators, sought out by some of these efforts, are the families themselves.

Several initiatives have been deliberate in seeking out other partners beyond professional agencies. While this has been challenging, initiatives have formed partnerships with grassroots organizations, individual residents, clergy and other faith-based groups, family support programs, schools, and the media. CPPC sites,

which were neighborhood based, often found nontraditional partners. In Jacksonville, FL, for example, apartment complexes and local neighbors became a source of participation and leadership, demonstrating that a wider community-based partnership could and should help protect children rather than leaving that responsibility solely to the public child welfare agency. Louisville, KY, based some of its work in Neighborhood Places, where out-stationed public agency workers are based along with Head Start, child care and other key family services.

As part of its Greenbook project, Santa Clara, CA, has undertaken an extensive and continuing effort to reach broadly to the community, involving diverse leaders from a very wide set of child- and family-serving agencies, faith organizations, legal services, law enforcement and local government. In a series of six community meetings, the community leaders asked key questions about the nature, understanding and local resources related to domestic violence, about the responsibilities of agencies and about emerging strategies to address family violence. Clusters of community leaders developed specific action plans for strengthening community awareness of domestic violence and for helping residents utilize resources to stay safe. Each action plan had its own focus, but together they employed a variety of techniques, including community surveys, neighborhood forums, and distribution of educational materials to venues where teens, adults and seniors congregate. All of these approaches were used to reach more deeply into neighborhoods, engage with residents in their own cultural context, and generate understanding and participation about ways that they could protect their families and their neighbors and demand accountability from the public systems responsible for serving them.

III. Challenges from Recent Efforts

There is much to learn from the last decade's efforts to assist families with children that are caught in the web of intimate partner violence. As with many efforts to shift the way society, law and services handle complex and sensitive family issues, learning is neither static nor absolute and is often filled with challenges. Social change is a process with many stages, participants and influences, and occurs in communities with unique attributes and contexts. The challenges we address below greatly inform our future work to stem violence in families and to help victims and their children heal and move on to safer and more stable situations.

A. Importance of “Community”

Various foundation and state-generated efforts to address family safety mean different things when they refer to “involving community.” The expectations and principles about “community” established by many of these efforts have not always reached the intended groups.

Community limited to other professionals and not neighborhood residents. In most instances, “involving community” has translated into involving other professionals and community-based agencies that work with similarly situated families. Some initiatives have sought to build networks of support specifically among community-based agencies; a few have sought to develop networks of support among neighbors. Even when an initiative focuses on a specific geographic area or neighborhood, few of these efforts have systematically engaged neighborhood residents in the work, and some have not considered involving residents a priority.

Challenges of engaging residents and grassroots organizations. While some initiatives identify development of neighborhood networks as a key element, implementation has been challenging and spotty. It is not uniformly a mandate of child welfare systems to reach out to the community, and neighborhood residents may resist involvement with a public agency often viewed with suspicion. Opportunities for involvement may not be easy to schedule for individuals who work many jobs, lack transportation and money, have child care needs and face other challenges. In addition, there are persistent underlying issues of race and power that impede both those reaching out to residents and residents' willingness to participate. Family courts and child protection agencies and domestic violence services are rarely located in the neighborhoods where the families who use them live, making them difficult to access. Most often, instead of coming to the tables of community members, these organizations have expected families to come to their tables—tables that are unfamiliar, speak a different language (both literally and figuratively), hard to reach, and sometimes threatening.

Furthermore, bureaucracies are usually slow and cumbersome, compounding their mystery and often impenetrability. Some system actors are not comfortable interacting with service consumers in this type of setting either; judges frequently cite the potential for ex parte contact with those with open cases in the child welfare or domestic violence systems as a reason for declining to participate in such efforts. As a result, even with a lot of good will, there is often a mismatch in the expectations between local residents and agency leaders.

Creative strategies: several examples. A few communities have succeeded in more deeply engaging neighborhood leaders, organizations and residents in addressing the needs of families caught up in the child welfare system who are also experiencing domestic violence. Neighborhood residents have been involved in each of the Community Partnership sites. Through block

groups, celebrations, town meetings and other vehicles, efforts have been made to engage the people who live in the specific areas in which the Partnerships focus to elevate concerns about violence and to promote better communication and relationships between residents and child protection agencies.

Louisville employed local radio campaigns and town meetings, reached out to local clergy to host congregation-based meetings and facilitated conversations based at neighborhood family support or other family-serving centers. The Partnership group in Louisville also reached out to young people to make them aware of the issues of intimate partner violence and to mobilize them to undertake anti-violence activities.

When the Jacksonville partners published the new protocol changing and improving the relationship between the child protection agency and the domestic violence shelter, they held a major celebration to release it. The event included a well-known speaker and prizes, and was designed to bring together domestic violence and child protection workers with members of the targeted communities that were conducting neighborhood mobilizations. Through this gathering, the Partnership hoped to encourage workers to view the protocol as not just another mandate, but as something exciting and worthy of celebrating. At another time in Jacksonville, the child welfare agency held a barbecue in the community, attended by an estimated 500 people. This festival, with food, music and speakers, was designed to elevate the importance of a community-based response to domestic violence and substance abuse. Since the child protective services agency hosted the event, their reputation as “the bad guys who take kids away” was minimized.

The El Paso County Greenbook Project took another route by establishing a Family Representative Advisory Council. Through this mechanism, they were in continuing touch with individuals who had had experiences with courts, child protection or law enforcement in a situation

which involved domestic violence and child maltreatment. The Council augmented the information available to the project’s steering group, which largely represented agencies and organizations. By creating a full advisory group comprised of consumers, this initiative has avoided tokenism. Other efforts to engage consumers or past consumers of agency services, such as “Mothers Off Meth” in Cedar Rapids, IA, have sought to create their own dialogues and have invited representatives of agencies to participate on the consumers’ turf rather than the agencies’ turf.

Broad community dialogues have served effectively in San Francisco to engage people in the Greenbook Project. San Francisco introduced “cross-dialogues” focused on specific issues, such as children witnessing domestic violence, or mandated services for victims of violence or race. Each system—child welfare, dependency courts, domestic violence service providers, community (which is represented by a specific community group)—takes time on its own to talk about the specific topic in a facilitated session and then prepares a position paper. The involved community group’s preparation includes reaching out through focus groups to particularly diverse populations and neighborhoods; their paper reflects the consumer voice on the specific topic. Then, after the papers are distributed across all the participating sectors, intensive multi-day meetings are conducted to share perspectives and plan for future strategic ac-

“We need to get moms to the table first. Which table? Systems are always trying to get women to their tables—but we have our own tables. If you want to know what we’re talking about, please come.”

– Judy Murphy
Moms Off Meth, Iowa

tivities and action. Depending on the topic, the process is tweaked to achieve the most effective exchange and movement to generate needed help and to ensure that the ideas and strategies generated are incorporated into the continuous cross-system work.

Three community-based organizations, CONNECT in New York City (*see box*), PEACE in San Antonio, TX, and The Dominican Women's Development Center in the Washington Heights neighborhood of New York City, use a community organizing model that is not linked to

any public agency. Their approach is based on the notion that the community must take the lead, must come to its own definition of violence and must design ways to address it. In so doing, grassroots groups and local leaders can bring concerns about violence to attention in ways that will resonate with residents and motivate more action to create safety within neighborhoods. While these community-based groups do take advantage of opportunities to collaborate on policy issues with official systems, they usually engage residents with official systems only as a last resort and where legally mandated.

CONNECT

Working in New York City's most underserved neighborhoods, CONNECT uses community organizing as its main mode of increasing awareness and understanding of family violence. CONNECT's main tools include research, documentation, data collection through street surveys, neighborhood assessments, focus groups and getting-to-know-you gatherings, peer education, community organizing and capacity building.

CONNECT's work is founded on the idea of helping grassroots groups incorporate a focus on family violence into their work with community members. CONNECT works with these groups to increase awareness about domestic violence by developing new community leaders, improving indigenous organizations' capacity to respond to their constituencies, identifying opportunities for prevention through community responses and averting, wherever possible, inappropriate interaction with criminal justice and child welfare agencies.

CONNECT conducts workshops on a range of issues including: understanding men who batter, child witness to violence, women's empowerment, parenting, and domestic violence and teens. Participants spend one full morning or afternoon weekly over a twelve-week training period to become peer leaders or peer educators. Participants range from clergy to coaches, community-based social service providers to neighborhood residents. Many participants go on to develop their own community-based, culturally appropriate responses to family violence. For example, some participants have started women's empowerment groups in their neighborhoods and faith communities. Others have created special parenting and child witness to violence groups for families.

Another aspect of CONNECT's program involves testing placement of domestic violence specialists with child-serving agencies in several parts of the city and experimenting with screening for domestic violence among families who use these agencies.

B. Systemic Biases: Race, Ethnicity and Gender

Regardless of the systems or neighborhoods involved, differences of race, ethnicity and culture are common aspects of the context in which all of these initiatives function.

Rigorous reviews of child welfare and court systems, for example, reveal that children of color are frequently treated differently at key decision points.¹⁴ Such differential treatment often snowballs into discrimination all along the pathway from screening and investigation to placement or reunification, in the case of child protection, or from screening and referral to shelter supports, referral or exclusion in the case of domestic violence service providers.

In many of these agencies, there is a mismatch between those who are providing service and the families who need their help. There may be little understanding of each other's cultural history and experience, creating distance, suspicion, unfamiliarity, fear and a range of other barriers to developing effective communication as well as appropriate plans for safety and stability. The combination of these factors may exacerbate notions within particular communities that these agencies are not places of trust and support, further limiting the communities' reliance on them.

Major urban settings in which the workforces in child welfare and courts include substantial numbers of people of color also have significant overrepresentation of children of color in their systems, however. This suggests that, in addition to cultural issues, there may be other complex systemic and institutional biases that require exploration.

Even in communities where initiatives have engendered practice and policy changes to improve family safety, there is a continued reluctance to talk forthrightly about how race and ethnicity affect perceptions and decision-making for abused women and their children. While some key informants acknowledged that racial and ethnic disparities are embedded in the child welfare, legal and domestic violence systems, few indicated that significant focus had

been given to understanding and addressing how these disparities impede provision of appropriate protection and supports for battered women and their children.

Gender bias also affects how abused women and their partners and children are treated. An underlying element of the framework of both child welfare and dependency courts is the focus on mothers. Mothers generally are the primary caretakers of their children and, as a result, are often the easiest parent to engage or punish. But there are also critical structural factors that contribute to this continuing bias. Cases are opened in the name of the mother, service plans identify responsibilities and tasks primarily for the mother, and it is mothers who are charged with failure

“It is difficult to address racism and white privilege without hurt, discomfort, possibly confrontation, and direct action.”

Bernadine Dohrn
Director, Children and Family
Violence Program, Northwestern
University Legal Clinic

14 Center for the Study of Social Policy. Dorothy Roberts, *Shattered Bonds: The Color of Child Welfare*, Basic Civitas Books, New York, NY (2002). “Places to Watch: Promising Practices to Address Racial Disproportionality in Child Welfare, The Center for Community Partnerships in Child Welfare of the Center for the Study of Social Policy, The Casey-CSSP Alliance for Racial Equity, December 2006. Hill, Robert B. PhD, “Disproportionality in Child Welfare: An Update,” The Center for Community Partnerships in Child Welfare of the Center for the Study of Social Policy, 2006.



to protect their children.¹⁵ Through these and other mechanisms that have long been built into these systems and their mandates, the role of the male partner, especially when he is not biologically related to the child, is discounted. This persistent attention to mothers, while useful if it involves listening to her and seeking to address her needs for safety, support

and services, too often turns into mother-blaming, extending the shame and guilt she may already feel as a victim of abuse. Furthermore, it has severely constrained the strategies available to reach the men involved in these families, to work with them and to call them to account appropriately.

The domestic violence movement was also developed with a focus on women, though its principles spoke to empowering women to achieve freedom from violence. These principles often dismissed men's roles as partners and fathers. Further, neither the legal structures that recognized domestic violence as a crime, nor the services that were developed to shelter, counsel and aid abused women to get back on their feet physically, emotionally, socially and economically took their roles as mothers, their interests in many cases in staying with their partners, or the needs of their children, into account. While it is crucial to hold abusive men accountable for their actions, as we discuss below, it is equally important not to reduce all abusive men to a stereotypical batterer to be excised from women's and children's lives.

These persistent biases have contributed to treating mothers, their partners and their children as victims, batterers or witnesses, respectively, without acknowledging within each group the variations in their experiences, their individual needs, and the dynamics of their relationships. Finding ways to overcome these categorizations, attend to the particular interests and needs of each family member, and safely foster family connections and continuity must be high priorities over the coming years.

15 The New York City Council, in the aftermath of the *Nicholson* case, amended the New York City charter to address some of the structural problems. The child welfare section of the charter now includes the following language: "No agency practice, including but not limited to any tracking system, record keeping or reporting system or data collection system or device, may prejudice the rights of, stigmatize or otherwise harm a person because of his or her relationship to a child or children involved in a child protective matter. To the extent that requirements of this section are subject to state approval, the agency will request permission to make any changes in policy necessary to comply with the provisions of this section within ninety days of the effective date of the local law that added this chapter. The agency shall promulgate such rules as are necessary for the purposes of implementing and carrying out the provisions of this section."

Activist Dialogues*

A National Policy Advisors Group was developed to advance and deepen the guidance offered in the National Council of Juvenile and Family Court Judges “Greenbook” on the co-occurrence of domestic violence and child maltreatment. They sought to broaden the perspectives brought to this subject, specifically recognizing that low-income, minority and marginalized communities may have had distinctive experiences. Working with six organizations representing communities of color, the Family Violence Prevention Fund undertook a unique exploration to expand the dialogue about the intersection of domestic violence and child welfare. The organizations include: Asian and Pacific Islander Institute on Domestic Violence, Incite! Women of Color Against Domestic Violence, Institute on Domestic Violence in the African American Community, National Latino Alliance for the Elimination of Domestic Violence (Alianza), National Network to End Violence Against Immigrant Women, and Women of Color Network.

Two broad questions provided the focus of the organizations’ individual investigations and of a collaborative meeting among the organizations:

- How can we better help battered women and their children who are involved with the child welfare system?
- What can be done to prevent more battered women and their children from becoming involved with the child welfare system?

To answer these questions, each participating organization went directly into its own community. Using a range of participatory research strategies, these groups heard directly from immigrants and refugees, Native Americans including Native Hawaiians, African-Americans and Africans in America, and diverse Latino and Asian communities. The rich cultural histories and current civic context informed the views that respondents shared with one another. Some of the stories they told were painful, others renewing. All were shared with pride and dignity and a desire to have similar opportunities on an ongoing basis.

Through this process, the organizational teams jointly developed recommendations. While recognizing that each community’s culture is neither monolithic nor without its own mores that may devalue women, the teams brought significant passion and commitment to improving how the child welfare system, juvenile and family courts and domestic violence service providers interact with and support families of color. While the recommendations are divided into five key areas, they are interrelated and overlapping. Multiple recommendations were made within each of the following areas:

- Addressing Discrimination, Improving Systems
- Contextualizing Culture, Increasing Competency
- Engaging Communities
- Enhancing Leadership of Women of Color
- Holistic Approaches to Helping Families

* To order free copies of the this publication, please visit: www.endabuse.org/store or email childrensteam@endabuse.org

IV. Looking to the Future: Learning from the Lessons of the Past

Future efforts to reduce the violence that continues to threaten hundreds of thousands of families annually must build on the struggles of those who have pioneered in the past. Any recommendations for the future, however, must be offered with the recognition that resources continue to be tight, and competition for these resources among agencies, programs and community groups persist.

The concept of developing a coordinated and comprehensive community response is not new. Yet the learning that has been gained through the past fifteen years demands that heightened attention and renewed urgency must be given to several specific areas. These include:

- Collaborative learning and practice as a prelude to new policy
- New strategies to address race and racism
- Greater involvement of survivor mothers and children
- Understanding of and investment in community
- Development of differential responses for families
- Therapeutic and other services for mothers and children
- Engagement of men

We discuss each of these in greater detail below.

A. Foster Collaborative Learning Processes and Practices as a Precursor to Policy and Institutional Change

While much has been accomplished by individuals, our review of these initiatives suggests that signifi-

cantly more work needs to be based on collaborations that promote common learning and collective practice among these individuals and their agencies. Neither individual learning nor personal relationships alone are sufficient to guarantee lasting change beyond those individuals' involvement in the initiative. Turnover hampers the development of the institutional knowledge needed to sustain reforms. When efforts and successes are personality-specific, changes in personnel can undermine hard-won changes in policy and practice. Focused efforts are required to extend change in individual practice throughout and across institutions and disciplines. Individual workers appear to internalize new approaches to their responsibilities and tasks most effectively through case-specific practice.

It appears from these initiatives that policy emerges more effectively from practice rather than the reverse. Still, even in many communities that have successfully implemented new practices, the policies needed to sustain and institutionalize the reforms have not been forthcoming. Institutionalizing change in policy and practice requires extensive experience with new practices from which needed policies can emerge, or if new policies are instituted first, it requires extensive communication, experimentation and experience among managers, supervisors and frontline workers.

Several approaches seem promising and should be expanded. Case consultations for families who are currently part of the child welfare caseload have helped participants understand the perspectives of different disciplines; provided a more comprehensive portrait of a family's circumstances, capacities and challenges; made it possible to better assess the risks and needs for different members of the family; and advanced a coherent plan that takes a wide array of factors into account.

Group conferencing, which involves not only the professionals involved with the family but also family members and key members of their support networks, has promise. Used extensively in neighborhoods and

communities testing Community Partnerships and Family to Family initiatives, these have understandably been used more cautiously with families in which there is domestic violence. When carefully prepared and implemented, however, these group meetings give non-offending adults an opportunity to tell their own stories, to be intimately involved in planning for their own and their children's safety, and to gain the commitment and support of neighbors, friends and other allies in moving forward with the safety plan. The plan is more likely to be carefully individualized rather than building only on the services an agency has available. Agency workers, advocates and other participants who listen to family members all hear the same information and can construct their support strategies together.

Two strategies that have been tested in some of the communities we studied review “cold” cases, or those that are no longer open. The first process, “administrative case reviews,” is not dissimilar to case consultation, and involves a range of professionals who seek to learn from what happened in each situation. By pulling closed files, it is possible to ask a series of questions about how the family's situation was handled and the outcomes that were achieved.

A deeper and more expansive version of this approach also involved reviewing a carefully developed sample of closed cases. However, this “institutional audit” process is designed to look at every decision point in the process and uncover both structural and procedural issues that may have affected the way each case was handled throughout its duration. This approach includes interviewing selected caseworkers, mapping the system and developing a series of recommendations that can significantly improve processes and generate more positive outcomes for families. Some communities draw cases from the child protection system, some draw cases from the dependency court, and yet others have considered drawing a sample of cases from the experience of local domestic violence service providers.

Increasing collaborative field experience and looking deeper at system trends will offer new information that can aid in continuous policy improvement of the major systems designed to protect children and families at the local level. This growing knowledge base also provides the platform on which state domestic violence coalitions, judicial monitoring groups and statewide child advocacy organizations can begin to work together with state policy leaders to advocate for significant statewide reform.

B. Develop New Strategies to Address Race and Culture

It is indisputable that race, ethnicity and culture are entwined with how child protection, domestic violence services, judicial systems, law enforcement and others interact with vulnerable families and children. The effects of discrimination based on these factors loom large, no matter how unintentional they may be. Some of these systems grew out of the notion of relief, embedding within them a judgmental bias that plays out in race and class assumptions. The effects of these long-held frameworks are things that systems have to intentionally strive to overcome. Yet facing these issues, understanding them, and creating a level playing field has been a very difficult undertaking. This has been no less true in the initiatives that we reviewed; respondents indicated that these issues were rarely addressed directly and more often avoided, renamed, pushed aside or danced around. Little recognition was given to the special needs of immigrant and refugee families for whom traditional cultural moorings may be lost, the history of violence and trauma may be longstanding, and the pathways to finding security and familiarity in a new country are rocky at best.

Future efforts to address the intersection of intimate partner violence and its consequences for children must address the issues of race and culture early and directly. One effective element of elevating these issues involves gathering data—on the under- and/or over-representation of children and families of color in each system,

Child Protective Services Institutional Safety and Accountability Audit

The Greenbook Project in El Paso County, Colorado, sought to answer three key questions about how the county handles cases in which there is both adult partner violence and children exposed to the violence. These questions were:

- How are decisions to provide on-going child protective services, either voluntarily or involuntarily, made on co-occurrence cases?
- How does the system define and balance the notion of trying not to re-victimize victims with the Child Protective Service's need to hold victims accountable for their potentially unsafe parenting behavior?
- How does the system hold batterers accountable for the safety and risk issues that their violence against the adult victim poses to the children?

To do so, the Greenbook project drew on the groundbreaking work by Ellen Pence, entitled *Duluth Safety and Accountability Audit: A Guide to Assessing Institutional Responses to Domestic Violence* (1998) and adapted it to focus on the child welfare agency. Using institutional ethnography to figure out how institutional structures influence and shape practice by individuals, this intensive approach excavates underlying, and often hidden, decision points and processes that may impede or advance the goals of various stakeholders.

El Paso County mapped the case flow in the child welfare agency and then reviewed law, regulations, policies and training materials that laid out the current framework within which child protection caseworkers function. With these as a foundation and context, the team steering this process, which comprised a wide range of agency external participants, identified caseworkers willing to participate.

Armed with this information and using volunteer participants, the team undertook an extensive evaluation in a two-step process. The first step involved pulling a sample of co-occurrence cases and interviewing caseworkers intensively about them. The next step sought to document caseworkers' observations through additional interviews with the adult victim and adult offender in the reported incident.

The results of these inquiries were organized in three categories: decision points, structured interviews, and conclusions and recommendations. The audit identified several practice issues that limit the child protection investigation and provided the basis to develop a plan of action to address these impediments.

Other Greenbook communities are using this process as well. In addition, the Community Partnerships for Protecting Children are working closely with Ellen Pence and Praxis International, Inc.¹⁶ to develop a blueprint for using the audit process in child welfare agencies, addressing not only co-occurrence cases, but all child protection cases.

16 Praxis International Inc, Integrating Theory and Practice. Website: www.praxisinternational.org, Ph: (218) 525-0487

“In the next 5 to 10 years, along with other human rights, civil rights, anti-poverty and welfare rights groups, we must begin to re-braid and strengthen the commitment to fighting oppression in all forms. We need to make a clear statement that we will actively work to understand the experience of people of color and bring those voices to the table.”

– Isa Woldegiorgis
Assistant Commissioner,
Practice and Policy,
Massachusetts Department of Social Services

and the availability of culturally relevant services for families of color. At a minimum, each system should review who is being served, who is in the system the longest, what services they are receiving, and the outcomes they are achieving. It is also important to look at the decision points in each of processes—screening, assessment and entry, duration of stay, standards of care, nature of placement, exit opportunities and follow-up, and identify if and how children and families from different groups are affected at each point. Hard information of this sort can be the catalyst for an important dialogue about why the data look the way they do, and how to create positive change.

Gathering, analyzing and sharing data may help open the conversations about race and ethnicity. However, a persistent theme that surfaced in the inquiry was that it is easier to talk about race than about racism because defining the conversation in that way obscures the notion of responsibility. This observation was one of the findings of the Activist Dialogues, which created opportunities for conversation among women of color experienced with the child welfare and domestic violence service systems.

One important finding of these dialogues is that holding difficult conversations about race and racism require safe space and time and a willingness to work through the uncomfortable feelings, perceptions and experiences across the spectrum of participants. Depending on what the data indicate and the conversations surface, an important follow-up step may involve placing priority on directing resources, organizing communities of color and supporting the work of people of color in their own neighborhoods.

C. Expand and Deepen Participation of Survivor Mothers and Children

Listening more closely to survivors—mothers and their children—must be an essential element of best practice. Far too often, plans are made for children and for non-offending parents without their participation. Yet survivors are experts on their own circumstances and can offer much information if asked for it. In addition, participation by children and non-offending parents in safety planning, in service planning and in key decisions about children offers opportunities for learning and empowerment.

Greater use of processes and structures that allow abused mothers to tell their stories and to be heard in safe environments can advance this critical objective. These structures are needed throughout the duration of a case: from the earliest contact with families; through the in-

“The best teachers and trainers for staff are the women and youth who have been in the system.”

– Judith Goodhand
Former Consultant,
Annie E. Casey Foundation

investigation, service and safety planning; and finally in decisions about placement of children. Service plans, for example, have traditionally been developed by a social

worker and imposed upon the mother. Yet effective service planning requires understanding the mother’s circumstances, struggles and aspirations—understandings which are reliant on open, respectful and safe interaction between mother and caseworker. Work-

ing in partnership with families traumatized by abuse therefore requires continuing communication because the circumstances of their daily lives can change rapidly.

As noted earlier, Family Team Conferencing and Team Decision Making are two new approaches that should be expanded. Making these approaches work more effectively, however, involves recognizing, at a minimum, that each is a process, not a single event. Useful ways to strengthen these processes involve: training for FTC and TDM facilitators, ensuring that the facilitator is someone other than the caseworker for that family, advance preparation to ensure that the non-offending parent (and the child, if she or he is also a participant) knows what to expect and has the opportunity to identify other neighbors and allies whom she wants to be present, and proper follow-up after the team meeting to make sure that safety plans or other decisions are actually implemented.

Processes of this sort also offer the opportunity for service providers to share with mothers the emerging knowledge about how violence may affect their children. Such information should include what is known about children’s resiliency as well as the nature of potentially harmful consequences of exposure to violence. These insights

from research can aid mothers in making decisions and may influence the way they consider their safety plans. In addition, it is critical that links to therapeutic or other supports that may be needed are given to the mother and her participating neighbors and allies, so that these services may also be incorporated into safety planning and other decisions with the family.

Survivors—both women and children—must also be central players in advancing new practices and policies. They can participate as trainers of judges and other court personnel, of child welfare workers and supervisors, of foster parents, as well as of those who provide services to other domestic violence victims. While survivor mothers are the ones who initially created the domestic violence movement and advocated for other abused women, we have recently neglected their voices and need to reassert the importance of hearing their experience more fully in advocating for their own needs and those of their sisters.

Another strategy worthy of consideration has been used in the criminal justice system. In that context, women have been writing their own victim impact statements and sharing those with judges. This approach has begun to be adapted in the juvenile and family courts through the work of Moms Off Meth in Iowa, where addicted mothers sought to share more directly with the courts what they had experienced in the child welfare system. Through these mechanisms, women are seeking to provide those in decision-making positions a fuller account of their experiences and expectations.

The voices of children, including adult children survivors, have been even less prominent than those of their mothers, but also promise to provide powerful testimony. Their voices can inspire new ways of preventing and responding to crises for vulnerable families. Inclusion of children in these processes is a sensitive matter that depends on age and maturity; however, when children are able to participate, their voices often have a way of garnering attention and presenting new factors to consider when weighing the options for safety, services and place-

ment. Graduates of the foster care system are increasingly organizing into groups and speaking out about what they believe will assist younger children coming through that system. Some are seeking to organize survivor children who were exposed to domestic violence.

D. Understand and Engage “Community” as Key Guides and Partners for Family Protection and Safety

Engaging “community” in protecting the safety of families is an underlying premise of most of the models we studied. Yet the notion of community has been relatively nonspecific. As we have noted, when initia-

tives incorporate “community” into the work, community tends to consist primarily of other professionals or organizations that work with vulnerable children and parents. The common understanding and operational definition of community, when it is focused on services, must expand to include all of those with a stake in the enterprise. This includes, at a minimum, courts, child welfare agencies, domestic violence service providers, substance abuse and mental health treatment programs, schools and early childhood programs, legal services, housing, immigration counseling and other groups that those affected by family violence require for safety, stability and economic viability.

While it is necessary to get all of these organizations, disciplines and professionals working in concert on be-

Voices of Children Exposed to Violence

Andy Wong is a young adult survivor from a family that experienced domestic violence. His mother was a victim of abuse who never interacted with domestic violence advocates or service providers. Andy never connected in any way to the child welfare or child protection system.

Based on his experience, Wong lauds the power of informal networks as protective factors both for abused women and for a child exposed to the mistreatment of his mother. For his mother, family friends, other family members and the waiters and waitresses with whom she worked provided the supports and buffers she needed.

School was where he thrived. Concentrating on his education and letting his teachers support his learning and distract him from the chaos at home helped him affirm his own value and distance himself from the disempowering experiences of watching his parents’ bruising relationship.

As a child of immigrant parents and as a young person navigating the discoveries of gay and lesbian youth, he felt especially disenfranchised. When he found willing ears to listen to his story, he not only felt valued and affirmed but it also it gave him the courage to continue.

In his role as a Susan Schechter Leadership Fellow with the Family Violence Prevention Fund, Wong calls for “reframing the paradigm so that we recognize that people in communities have the power to address their own needs.” Wong is mobilizing child survivors of domestic violence to tell their stories and provide strong voices for change.



half of families, it is far from sufficient. Building on the experience of several initiatives, it is critical to reach neighborhood residents, local clergy and other faith organizations, block organizations, tenants groups, civic associations and cultural groups and others that can represent or reach adults and children in the settings where they feel most comfortable, trusted and trusting. Community forums that offer opportunities for residents to share their stories, perceptions and experiences also can create a climate of engagement. These more expansive definitions of “community” and more creative strategies are beginning to bear fruit and must become standard elements of practice.

Throughout this work, there is continuing tension between the need to reform the basic, publicly supported and regulated systems of care and protection and the desire for communities to use their own informal networks of support to help their residents. Most families seek

help from relatives, friends and neighbors, health professionals and clergy before turning to public agencies for assistance. At the same time, courts, child welfare agencies and domestic violence service providers will, in all likelihood, continue to be overburdened, underfinanced and challenging to penetrate. Much more needs to be done to invest resources and build capacity to enable informal community resources to respond effectively. Consequently, we need to pursue a two-pronged strategy to assist abused mothers and their children: enhanced efforts to focus on communities and their natural helping capacity; and continued system reform to strengthen the ability of formal public agencies to exercise their responsibilities as effectively as possible.

One approach calls for broad and comprehensive campaigns designed to change societal norms about the acceptance and uses of violence. Multiple, consistent and culturally relevant messages need to be designed and disseminated that speak to the unacceptability of interpersonal violence at any age and in any setting. And the messages need to reflect our growing understanding of the consequences of children’s exposure to that violence. Using the latest communication techniques as well as more personalized efforts, these messages need to reach wide segments of the population—not just those who are at risk of violence or are assumed to be potential perpetrators.

Another critical strategy is one which supports, augments and deepens the capacity of indigenous organizations and institutions to recognize the undertow of violence that is pulling down already vulnerable communities. Whether employing community organizing or cross dialogues, borrowing strategies from other movements or creating approaches anew, intensive focus is called for within neighborhoods.

Families who are stressed often do not have a chance to spend time with each other; many rarely have time or ability to leave their neighborhoods. One helpful strategy calls for developing activities for stressed families that are not crisis-based, such as going camping or visiting

a cultural attraction. Another strategy involving renewing or creating vehicles which provide safe, familiar and culturally attuned places for mothers and children to tell their stories, to gain respite and relief from tense situations, and to be linked to help is essential.

E. Aid Systems in Developing Differential Responses

Just as child welfare systems have increasingly sought to improve their ability to distinguish different levels of risk of abuse and neglect of children, so too is it necessary to strengthen their capacity to differentiate between the nature and risk of adult violence and the nature of its risks for children who may be exposed to it. That a mother has been a victim of partner violence does not automatically indicate that she is compromised in her ability to take care of her child or children. Many factors contribute to an abused mother's interactions with and protection of her children, and these need to be considered, in conjunction with the mother, to determine what additional supports and services she may need.

There has been a continuing disconnection between the needs of non-offending mothers and the "individualized service plans" that are supposed to protect them. Too often, individualized plans are based not on the individual's own needs but on the services the agency has available. Those services may be inaccessible or inappropriate to the problems the mother faces, or the mother may be prevented from participating in services by her abusive partner, who may see such efforts as attempts to thwart his control. The expectation of cooperation with the plan may be frustrating to agencies as well as the mother because, if she does not comply, the authorities are likely to threaten to, or actually, take her children away from her purely on the basis of her noncompliance.

Reasonable efforts must be made to get both the non-offending parent and the child, preferably together, appropriate help to remain safe, heal and stay together before any consideration is given to removing the child from a non-offending parent. This approach requires much more understanding and appreciation of the strategies that a non-offending parent uses to protect her children, and it requires the recognition that helping the non-offending parent find safety may be the best way to secure safety for her children.¹⁷

Similarly, supports and services for children need to be individualized. The research demonstrates that children are not automatically "abused or neglected" as a result of their mother's victimization. Many children exposed to their mothers' abuse are resilient, while others may be deeply hurt in the short- and possibly the long-term. As a result, determinations about how best to help children may be sharpened if the underlying assumption is not one of harm but instead, that all children have needs that vary in nature and intensity at different times as they grow.

Several levels of differential response are called for. From the child welfare agency's perspective, the first threshold involves determining what degree of harm or risk of harm should trigger the agency's continuing involvement and what can be handled by community resources and the family outside the system. Santa Clara County, for example, developed new guidelines for mandated child abuse reporters to understand that child witnessing of adult domestic violence alone is not cause for reporting, but that reporting is required if the child is affected in specific ways, e.g., physically or emotionally harmed or at serious risk of physical or emotional harm. But communities have yet to develop definitions of "serious risk of harm," and without such guidance, that language could create an exception that swallows the rule of limited reporting. When it is determined

17 Goodmark, Leigh, JD, "Reasonable Efforts Checklist for Dependency Cases Involving Domestic Violence," National Council of Juvenile and Family Court Judges Family Violence Department. In press, set to be published in 2007.

that a child's exposure rises to the level of requiring a report to child welfare and the intervention of the court, then a systematic assessment and process need to be undertaken to assure the child receives the services he or she needs.

F. Strengthen the Availability and Quality of Therapeutic and Other Supports for Battered Mothers and Their Children

Ironically, once the child welfare system intervenes to protect children in families experiencing domestic violence, the system frequently has little to offer those children in terms of resources to address their needs. Nor has the domestic violence service system developed a deep bench of activities for children. When mothers and children need connections with ordinary community and family routines, substance abuse treatment, therapy, employment or training and other supports that address women's economic hardships, few agencies have systematic links to these resources.

Over two-thirds of mothers who come to the attention of the child welfare system have been involved with alcohol or drugs, and as we have discussed, many of these mothers are themselves abused. Mothers with these intersecting issues need support that addresses both circumstances, regardless of whether the substance use is a precursor to or a consequence of the victimization by a partner. While these are compounding problems, each one calls for focused attention in a safe environment. The Rebecca Project for Human Rights has documented the dearth of treatment options for low-income, marginalized, substance-abusing mothers and their families. This, then, is one of the key arenas in which additional services are critical if non-offending mothers and their children are to remain safely together.

Despite increased understanding of the needs of children exposed to violence and of the protective strategies that

“How can we make the next decade about reframing the conversation to be about healing, rather than just going through systems—healing for mother and child together, for the family as whole?”

– Malika Saada Saar
Founder, Executive Director,
Rebecca Project for Human Rights

may help them, there is little available through the child welfare system or in their communities. Some children, in the face of the violence, primarily need regular opportunities to undertake family activities safely; the chance to remain in the same school to ensure continuity with teachers and friends; and opportunities for participation in extracurricular activities and after-school programs that connect them to peers, mentors, coaches and other caring adults. Many communities need to develop these informal activities. In communities where these programs already exist, child welfare agencies, domestic violence service providers and family courts need to develop more systematic ways to link families to them.

For children experiencing the symptoms of trauma, additional services are needed. Few of the initiatives we studied were designed or financed to create services, especially intensive counseling and therapeutic supports. However, the heightened attention to abused adults with children in these communities has highlighted the deep gaps in what first responders are able to do, and where they can turn for additional and often longer-term support.



Few law enforcement agencies, for example, have yet incorporated the approaches pioneered in New Haven, CT. The New Haven model includes training of police by mental health professionals about what to do when responding to a violent incident when children are present, as well as a system to call upon mental health workers during and immediately after the crisis so that children's trauma is addressed very quickly.

And few communities have the types of child-parent psychotherapy services developed by Betsy McAlister Groves at Boston Hospital or Alicia Lieberman at San Francisco General Hospital. Both of these approaches involve working with the mother and young

children together, sometimes for an extended period of time; solid results indicate reductions in children's trauma and improvements in their behavior, as well as improvements in mothers' interactions with their children.¹⁸ Given the scarcity of this type of therapeutic services, there is a considerable need to develop them. Especially for young children, a premium should be placed on expanding intensive services for mother and child(ren) together.

While many shelters for battered women have developed children's programs in recent years, few link children to mainstream activities in their schools and neighborhoods, and few of them are able to provide clinical in-

18 Lieberman, A.F., Van Horn, P.J., and Ghosh Ippen, C., "Toward Evidence-based Trauma Treatment: Child-Parent Psychotherapy and Symptom Improvement in Preschoolers Exposed to Domestic Violence," Annual Meeting of the International Association of Traumatic Stress Studies, New Orleans, 2004.



G. Create Effective Accountability for Men Who Batter and Engage Men as Allies in Protecting Children

One of the major missed opportunities to prevent and respond to families facing domestic violence with children present is the engagement of men. The child welfare system has traditionally been oriented toward mothers; domestic violence service providers have focused on victims, usually women; and family courts have had limited legal support for reaching out to men who batter. Where attention has been given, it has been in the development of “batterers’ intervention programs,” a potpourri of programs that seek to counsel men and get them to change their behavior. Where these programs do exist, there has been little follow-up; generally the courts that have mandated men’s participation in the programs have no protocols or structures to determine much more than attendance at these programs. Furthermore, while increasing numbers of these programs address parenting, it has yet to become a standard element of the intervention.

interventions for more serious emotional or behavioral issues. Much of the current programming revolves around simple child care and, in some instances, group counseling; most of the counseling support is provided separate from that for mothers. Little of what is provided is based on therapeutic models, either the promising therapeutic group interventions for children such as those developed in Massachusetts,¹⁹ or those that are specifically designed to help mothers develop relationships with their young children. Moreover, whereas most of the women and children who come to shelters stay for relatively short periods of time, the stresses that may result from the violence and the disruption in daily life may persist for months and years.

Recognizing that changing the behavior of men with a history of violence is essential to preventing future violence, several communities are testing different mechanisms to promote greater accountability. The Domestic Violence Unit in Massachusetts DSS hired a batterer intervention expert early on in their program to help shift their thinking and practice with abusive men. After considerable testing, the state agency commissioned development of the first accountability tool for child welfare agencies to work with this new population.²⁰

Among the Greenbook pilot sites, some have developed policies, with protocols, designed to ensure better over-

19 Lennett, J. “Evaluation of Clinical Services for Children Affected by Domestic Violence: Lessons Learned and to be Learned,” prepared for the Massachusetts Department of Social Services, Domestic Violence Unit, June 2005.

20 Mederos, Fernando. “Accountability and Connection with Abusive Men: A New Child Protection Response to Increasing Family Safety.” Family Violence Prevention Fund., 2004. <http://fvpfstore.stores.yahoo.net/acandcowiabm.html>

sight of men assigned to intervention programs through the criminal system. Lane County's protocol ensures that offenders do not have contact with victims during the duration of the intervention programs, and give probation officers tools to identify when the "no contact" policy can shift to one of "no offensive contact." El Paso County developed a form to enable probation divisions to judge the engagement, understanding and responsiveness of participants in these programs, while St. Louis developed a Batterer's Compliance Project with an evaluation focusing on specific outcomes. The approach in Santa Clara involved identifying for each part of the judicial system—judges, probation officers and the intervention programs themselves—what information was required to ensure compliance by those men who batter who are required to participate in batterer intervention programs.

However, the evidence on the effectiveness of the tools we use to hold batterers accountable is mixed. Batterer intervention programs do not work for all men, and many have not addressed the particular issues of men of color, who, in many communities, are likely to be over-represented in these programs.

Similarly, the criminal response may not be effective for all men, but it constitutes the main tool in the arsenal of most systems seeking to hold violent men responsible for their actions. Because our tools are imperfect, they cannot provide child protective services with any certainty that even if batterers are held accountable in these ways, that children will be safe. Without such guarantees, child welfare systems will continue to place the responsibility for keeping children safe on battered mothers, relying on them to stop the violence against them. We must, then, develop strategies other than the imperfect ones we currently have to hold batterers accountable.

Some child welfare systems are also searching for ways to reach out to the men responsible for the abuse who come to their attention. Traditionally, when there has been a

male abuser, from the child welfare system's perspective, the mother has been deemed as responsible, and treatment plans, and safety plans, have generally focused primarily on actions expected of her. Men are simply classed as "abusers"; their individual circumstances, histories, and relationships with the children in their care ignored. Regardless of the biological or legal relationship, however, if there is a male abuser, the child welfare system is beginning to recognize a need to incorporate him in a treatment plan. The plans need to be individualized, and may or may not anticipate reunification of the family, but by developing expectations for the abuser, it becomes more possible to monitor families for protection and support.

Men, too, need and seek opportunities to tell their story, to understand the impact of their behavior, especially on children. In some communities, where programs or special advocates have been set up for mothers who have been abused, the partners have asked, "How can I get someone to help me understand the court process I have to go through and what is going to happen to my children?" In some programs designed for women, there are opportunities to "bring your partner in" to discuss "relationship issues." It is important in these programs to be aware of the risks, and to create time to speak separately with the men as well as time for the men and women to be together.

One of the more recent discoveries about how to reach non-abusive men has surfaced through polling and focus groups. Men are more likely to develop empathy around children's experiences, rather than around the experiences of the women with whom they are involved. As a result, new campaigns are developing to involve non-violent men as role models, teachers and coaches of boys and teenagers. Efforts are also being made to incorporate culturally sensitive information and strategies around nonviolent fathering into both batterers intervention programs and responsible fatherhood programs.

V. Conclusion

The past fifteen years have heightened awareness, understanding, knowledge and learning. Much more is known about the risks and disruptions children face when their caregivers are abused. Much more is known about the resiliency that some children show even in the face of this exposure. Much more is known about how abused parents strive to shield their children from harm. And much more is known about the challenges for courts, child welfare systems and domestic violence service providers who seek to keep safe those who are in jeopardy and to hold accountable those who offend against their partners.

The programs, practices and policies that have emerged as a result have been developed through the vision and commitment of key agency representatives, advocates, experts and grassroots leaders. Yet these efforts remain

fragile, fledgling and localized. Even in the communities where they have been tested, the resources are inadequate to achieve the scope, scale and quality required. Across the country, they reach only a small portion of the children and families affected by intimate partner violence. There are stubborn stereotypes and misperceptions that need to be discarded through dialogue and collaborative action based on data. The framework that supports the new knowledge and practices should become established policy at every level of government.

Much more needs to be done both by public systems, private individuals and local community allies to stem the tide of violence and its consequences. Although these efforts have yet to fully mature, they have been given a boost by the December 2005 reauthorization of the Violence Against Women Act, which invests in new collaborative opportunities and recognizes the importance of advancing attention and services for children. The lessons of the past decades offer hope and tangible tools so that across the nation children and families can be heard, can get help, and can heal.



Appendix 1*

Roundtable Participants

- MaryLee Allen, Children’s Defense Fund
- Juan Carlos Arean, Family Violence Prevention Fund
- Debi Cain, Michigan Domestic Violence Prevention and Treatment Board
- Janet Carter, Family Violence Prevention Fund
- Eve M. Castellanos, Domestic Violence Prevention Coordinator City of San Jose City Manager's Office
- Patricia S. Castillo, the P.E.A.C.E Initiative
- Elena Cohen, Center for the Study of Social Policy
- Michael Cohen, Maryland Network Against Domestic Violence
- Lonna Davis, Family Violence Prevention Fund
- Alisa Del Tufo, CONNECT, Inc.
- Bernadine Dohrn, Children and Family Justice Center Northeastern University School of Law
- Jewell Douglas, Community Partnerships for Protecting Children
- Pulani Enos, University of Manoa School of Social Work
- Judith Goodhand, Family to Family Initiative
- Leigh Goodmark, University Of Baltimore School of Law
- Shelia Hankins, Consultant
- Crystal Kelley, Family Violence Prevention Fund
- Marylouise Kelley, Office on Violence Against Women
- Leiana Kinnicutt, Family Violence Prevention Fund
- Lisa Lederer, PR Solutions, Inc.
- Beckie Masaki, Asian Women’s Shelter
- Grace Mattern, New Hampshire Coalition Against Domestic Violence and Sexual Assault
- Judy Murphy, Iowa Department of Human Services
- Lauren Nassikas, Office on Violence Against Women
- Sharwline Nicholson, Susan Schechter Leadership Development Fellow, For Angels in the Healing
- Islem Pardinias, Our Kids of Miami-Dade/Monroe, Inc.
- Eunice Pierre, US Department of Justice
- Radha Ramanathan, National Council of Juvenile and Family Court Judges
- Lynne Rosenthal, National Network to End Domestic Violence
- Ann Rosewater, Consultant
- Malika Saada Saar, The Rebecca Project for Human Rights
- Jennifer Segel, National Center on Addiction and Substance Abuse
- Maureen Sheeran, National Council of Juvenile & Family Court Judges
- Jerry Silverman, U.S Department of Health and Human Services
- Linda Spears, Child Welfare League of America
- Harry Spence, Massachusetts Department of Social Services (Virtual Interview)

- Carol Williams Spigner, University of Pennsylvania School of Social Work
- Judy Stafford, The Waitt Institute for Violence Prevention
- Gretchen Test, Annie E. Casey Foundation
- Joyce N. Thomas, Center for Child Protection and Family Support
- Olga Trujillo, ORT Solutions, Inc.
- Jessica F. Vasquez, Athena Strategic Council
- Sandi Waller, National Council of Juvenile & Family Court Judges
- Yolanda Webb, National Council of Juvenile & Family Court Judges
- Oliver Williams, Institute on Domestic Violence in the African American Community, University of Minnesota
- Isa M. Woldegiorguis, Massachusetts Department of Social Services
- Andy Wong, Susan Schechter Leadership Development Fellow
- Media Wright, National Council of Juvenile & Family Court Judges

* Names and positions as recorded at time of the meeting.

The Family Violence Prevention Fund works to prevent violence within the home, and in the community, to help those whose lives are devastated by violence because everyone has the right to live free of violence.

Family Violence Prevention Fund

383 Rhode Island Street, Suite 304

San Francisco, CA 94103-5133

TEL: 415.252.8900

TTY: 800.595.4889

FAX: 415.252.8991

www.endabuse.org

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