



Domestic Violence and the Child Welfare Professional: Tips on Documentation

Tip Sheet #3

The Domestic Violence and the Child Welfare Professional series supports caseworkers in responding to families experiencing domestic violence and child maltreatment. The series includes six tip sheets that provide core practice considerations. This tip sheet—the third in the series—supplies foundational information on the essential components of strong documentation. The tips in this series are based on a compilation of research and promising practices.

Documentation: The Language of Casework

Domestic violence documentation is critical to establishing a child welfare agency's position in court, holding perpetrators accountable for behavior, and promoting the safety and well-being of survivors (Massachusetts Department of Social Services, 2004; Washington State Department of Social and Health Services, 2010). Effective documentation contains accurate and detailed language and: (1) identifies abusive behavior, who is responsible, and how the caseworker came to this conclusion; (2) incorporates survivors' thoughts and feelings in their own words; and (3) excludes caseworker opinions (Arizona Department of Child Safety, 2014; DeBoard-Lucas, Wasserman, Groves, & Bair-Merritt, 2013; Washington State Department of Social and Health Services, 2010).

While the tips reflect research and practice knowledge from the field, caseworkers are advised to follow agency policies and protocols and the guidance of their supervisors in conducting casework.



Tips for Documentation

1. Avoid jargon, generalities, or buzzwords, such as "This couple has a history of domestic violence," or "There have been incidents of domestic violence."
2. Use specific and detailed language about physical violence. Include information about its frequency and severity. Connect the behavior to the impact on the children.

Documenting Physical Violence

"The perpetrator has assaulted his partner three times by punching her twice and strangling her once over the past 6 months. The violence is more frequent and has now occurred in front of the children. Prior to this time, the perpetrator assaulted the survivor by pushing her and slapping her on several occasions. The children stated that they've recently become afraid of the perpetrator."

3. Document controlling and other abusive behavior. Provide details and examples, and connect the behavior to its impact on the children.

Documenting Control Tactics

"For 3 years, the perpetrator has called the survivor names and told the children she's a bad mother. For the last year, the perpetrator has taken the survivor's bus pass and shown up at her job to monitor her. The child now calls her mother names and told her that she doesn't have to listen to her. In the past 4 months, the survivor tried to get a neighbor to drive her and her daughter to the doctor, and the perpetrator threatened to hurt the neighbor. For this reason, the child missed her follow-up medical appointments and refills for asthma medication.

4. Refrain from documenting domestic violence as a couple's issue.

Document Each Person's Behaviors Separately

Avoid phrasings such as "This couple engages in domestic violence," "They violated the restraining order," or "The parents have met the needs of the children despite the domestic violence." Specifically name each person's behaviors separately.

5. Use active language about the perpetrator's role in harming the children.

Document Specific Behaviors

"The perpetrator continues to engage in dangerous behaviors by showing up at the home—despite his restraining order—and threatening to take the children away. He also threatened to kill himself, and the children are afraid for their father's safety."

6. Document survivors' protective efforts.

Documenting Protective Actions

"The survivor continues to act protectively. She can identify her partner's signs of escalation and, at that time, she calls her mother to take the children. She has also brought the children to a neighbor when she felt there was not enough time to call her mother. She has taught the children to dial 911 if they feel they're in danger."

7. Demonstrate survivors' strengths and parenting efforts.

Documenting Survivor Actions

"The survivor continues to ensure the children are fed, attend school, complete their homework, and have opportunities to talk about what's happening. He's entered them into extracurricular activities and therapy to talk about the abuse they've witnessed. He works to provide for them and is the primary caretaker."

8. Focus on the impact on children in a developmentally appropriate manner.

Documenting Impact

"It was reported by the survivor that Sara, age 6 months, cries and cannot soothe herself since she witnessed the assault. The daycare provider reported that Sara has been crying more when the survivor leaves," or "Michael, age 14, has reported that he was afraid of the perpetrator but now he's gotten a baseball bat and he plans to protect himself and his mother. Michael has started skipping school to come home early when he thinks his mother may be in danger."

9. Consider confidentiality and safety. When possible, don't document survivors' addresses, safety plans, or confidential information on anything to which the perpetrator will have access.
10. Document perpetrators' parenting skills, relationship with the children, and motivators for change.

References

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