



Domestic Violence and the Child Welfare Professional: General Practice Tips

With an estimated 30 million children in the United States exposed to family violence before the age of 17, child welfare agencies are shifting responses to target the impact of domestic battering on children (Child Welfare Information Gateway [Information Gateway], 2014). National, state, and local initiatives are reevaluating interventions and forming coordinated responses due to a growing awareness of the intersection between child maltreatment and domestic abuse (Lyon, Perilla, & Menard, 2016). The recognition of this overlap underscores a critical need for child welfare professionals to understand the dynamics of family violence (Information Gateway, 2014).

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 first in the series—supplies foundational information for child welfare professionals addressing the crossover between domestic violence and child maltreatment. The tips in this series are based on a compilation of research and promising practices.

This series uses terminology from the domestic violence field. Exhibit 1 defines common terms. Terminology varies across agencies.

General Practices: Groundwork for Effective Decision-Making

A child welfare agency's response to domestic violence relies on an understanding of the complex realities of intimate partner abuse (Ganley, 2016). The tips for general practice offer a framework for improving agency interventions, guiding caseworkers in understanding contexts of abuse, and developing plans for effective casework. Foundational practices for screening, documenting, and assessing domestic violence include three key considerations: (1) recording descriptions of abuse with language that considers the impact on safety, minimizes trauma, and holds perpetrators accountable; (2) collaborating with and acknowledging survivors' judgment on what increases danger or supports safety; and (3) evaluating differing levels of threat posed by perpetrators (Arizona Department of Child Safety, 2016; National Center on Domestic Violence, Trauma & Mental Health, 2012; 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.

Terminology:

Domestic violence: A pattern of coercively controlling behaviors perpetrated by one intimate partner against another (Schechter & Edleson, 1999; Domestic violence, n.d.)

Perpetrator: The person who commits a pattern of intimate partner violence and coercive control (Abuser, 2009; Washington State Department of Social and Health Services, 2010)

Survivor: The perpetrator's target, adult or child, of domestic violence, including emotional, physical, verbal, sexual, and coercive control and children who also witness domestic violence (Survivor, 2009; Washington State Department of Social and Health Services, 2010)



General Practice Tips

1. Screen for all types of domestic violence, not just physical incidents, and assess patterns of perpetrators' behavior. Include controlling behaviors as well as the impact of what the child has witnessed.
2. Never assume children or survivors are safer because the survivor and perpetrator are no longer in a relationship, don't live together, or have an order of protection in place. Separation often increases danger.
3. Never interview a survivor or child when a perpetrator is present. It is unsafe to assess domestic violence when the perpetrator is with survivors.
4. Assess all of survivors' protective factors, efforts, and strengths; remember that most survivors have plans for their safety and the safety of their children.
5. Don't assume that perpetrators are the same; all are different and pose different levels of threat to survivors.
6. Keep children with survivors whenever safe and possible to do so. To determine if it's safe, assess the capacity of the survivor's parenting skills and potential risk or safety threats posed by perpetrators.
7. Remember to assess the impact of witnessing all forms of domestic violence and controlling behaviors on children. Learn about what helps them feel safer.
8. Don't put plans into place that require the survivor to be responsible for the perpetrator's behaviors or for ending the violence.
9. Hold perpetrators accountable by clearly defining behavioral expectations and by assessing and documenting their parenting capacity and abusive behavior.
10. Be specific in documentation. Provide concrete examples that demonstrate either what happened or how children were or are harmed. Use detailed language and avoid jargon such as "a domestic," or "This couple has a history of domestic violence."

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