

*Key Points from the
Domestic Violence (DV) Practice Guide
April 2009*

BACKGROUND

The new DV policies provide a framework for consistent practice when responding to families experiencing domestic violence. Because DV can have a significant impact on our work with families, it is important social workers know how to:

- Identify when DV is present.
- Assess the danger the DV poses to children (and others).
- Offer services to families that help increase safety for all.

The new policies are based on recommendations from:

- The DV Leadership Network chaired by Supreme Court Justice Bobbe Bridge.
- A statewide project team convened by CA that included representatives from each region and HQ, the WA State Coalition Against Domestic Violence (WSCADV), and national experts on co-occurring DV and child maltreatment.

Even though Domestic Violence is not an allegation of child abuse or neglect (RCW 26.44.020), it is important for CA workers to address DV in their work with families because research shows:

- DV and child maltreatment often go hand in hand.
- DV poses a risk not only to the adult victim of the violence, but can also pose a danger to any children present in the family.
- Children may suffer negative effects even if they are not the direct victims of the violence.
- DV can impact the safety of others who may be involved with the family, including the social worker.

In addition, the presence of DV can undermine the effectiveness of service plans and case decisions.

The DV Practice Guide was written to support workers in implementing the DV-specific policies and improve their response to families experiencing DV.

The guide addresses the following four important things workers can do to improve their response to families experiencing DV.

- Recognize DV when they see or hear it.
- Understand the impact of the identified DV.
- Partner with non-offending parents and engage with DV perpetrators to increase safety for children.
- Collaborate with community partners to remove the risks posed by DV perpetrators and increase safety for adult DV victims and children.

RECOGNIZING DV

How can workers identify DV?

1. **Universal screening** for DV starts at Intake and should continue throughout the life of a case.
2. The DV screen identifies the presence of DV, as well as who is the adult DV victim and perpetrator.
3. Once DV is identified, a **specialized assessment of the identified DV** (see below) helps workers determine risks to the child and impact on the family.

What is DV?

Domestic violence (DV) is a *pattern of assaultive and coercive behaviors*, including physical, sexual, and psychological attacks, as well as economic coercion, that adults or adolescents use against their intimate partners. (This behavioral definition is most useful to the safety tasks of CA.)

- Perpetrating DV is a chosen, learned behavior, based in a belief system that leads the DV perpetrator to feel entitled to certain behaviors from their partners and children.
- DV perpetrators feel justified in using violence or coercion to obtain these behaviors, and punish their partner or child when they fail to produce them.

Some tactics DV perpetrators use to control their victims include:

- *Physical abuse (pushing, hitting, biting, restraining, hitting with objects, slapping, choking, strangulation).*
- *Sexual abuse.*
- *Intimidation and threats (using threats of violence against the victim, children, others, or property, threatening with weapons).*
- *Physically and/or psychologically isolating the victim.*
- *Emotional abuse (systematic attacks on the victim's self-image and sense of competence).*
- *Economic abuse (controlling the family funds and resources, sabotaging efforts to work or gain education, ruining credit, stealing/misusing money).*
- *Using the children to control the adult victim.*
- *Using victim's fear of losing custody of child via the child welfare system.*
- *Surveillance (tracking movement with GPS system, calling the victim numerous times per day, monitoring e-mail and telephone use, stalking).*

It is important to distinguish between a *pattern* of assaultive and coercive behaviors and other violent incidents when assessing for the presence of DV.

- Social workers should not automatically consider all physical force between intimate partners to be DV.
- Not all assaults are part of an ongoing pattern of behavior that results in gaining power and control over a partner.
- A DV victim may engage in the use of physical force (in self-defense, or in retaliation) without engaging in a pattern of assaultive and controlling behavior against the DV perpetrator. Some violent acts may be defensive.

When it appears both partners use physical force in some form against each other, it is critical to ask:

- *Whose use of physical force creates fear in other members of the family?*
- *What is the **intent** of each person's physical force? (i.e., physical self defense or intimidation?)*
- *Who suffers the most serious consequences as a result of being a target of violence in terms of injuries, impact on daily routines, isolation?*
- *Who is exerting control through other coercive tactics: finances, manipulation of children, sabotage of work, family relationships?*
- *Is one partner more vulnerable to coercion due to her or his cultural status, language access, residency status or other disadvantages?*

Culture's role in DV

DV is present in all cultures, social or economic classes, and communities of faith. Differences in culture can impact:

- How people perceive and react to DV.
- How a DV victims or perpetrators seek services related to the DV.
- How the DV perpetrator carries out the abuse. DV perpetrators often misuse cultural norms to maintain their power and control over their victim. They also may justify their abuse in cultural or religious terms if they think doing so will be effective.

However, in the same way all cultures hold values that support the protection and nurturance of children, all cultures also hold values that support peaceful, mutually respectful intimate relationships.

UNDERSTANDING HOW DV CAN IMPACT CA'S WORK WITH FAMILIES

Workers should carefully assess the identified DV to determine: *Does the DV perpetrator's abusive behavior toward the adult DV victim place children at imminent risk of serious harm?*

Whether or not the DV itself is the immediate threat to the child, it is important to understand the *nature* of the DV in order to help the family keep the children safe.

At each stage of their work with a family, social workers should consider the following:

- *How does the DV perpetrator's behavior toward the adult victim impact the ability of the family to address issues of concern for the children?*
- *How can CA work with the family to minimize the DV perpetrator's ability and choice to control and abuse their intimate partner?*
- *How can CA help increase the capacity of the DV victim to create safety for them and their children?*

To help answer these questions, workers should complete the **Specialized DV Assessment**.

- This assessment is a process (not a tool) which gathers information from the universal DV screening question, DV questions in the Safety Assessment, Structured Decision Making and, if applicable, Family Assessment.
- The Specialized DV Assessment helps workers determine safety risks to the child, as well as develop case decisions and services with families to keep children safe.

The elements of the Specialized DV Assessment include:

1. *A detailed description of the DV perpetrator's pattern of assaultive and coercive tactics against the adult victim.*
2. *Impact of DV tactics on the adult victim.*
3. *Impact of DV on child.*
4. *Protective factors in child, adult victim, community, and DV perpetrator that mitigate risk to child posed by the DV.*
5. *Assessment of the lethality of the DV.*

PARTNERING WITH NON-OFFENDING PARENTS AND ENGAGING WITH DV PERPETRATORS TO INCREASE SAFETY FOR CHILDREN

Partnering with non-offending parents to increase safety for children

Supporting DV victims to be safe can increase safety, well-being, and permanency for children.

DV advocacy organizations can be essential resources for families affected by DV. These victims' assistance programs typically offer all or most of the following:

- Emergency shelter and/or transitional (longer term) shelter
- Advocacy-based counseling
- Legal advocacy (support and assistance with obtaining a civil protective order)
- Support groups
- Programs for children, including groups or individual support/counseling

Connecting a DV victim to a DV advocacy organization may be very helpful to the victim. DV advocates can help adult DV victims:

- Understand their rights.
- Become aware of community resources.
- Provide support and assistance with safety planning.

Service planning in DV cases

Social workers should work with families to develop service plans that:

- Mitigate danger posed by the DV perpetrator by increasing the perpetrator's accountability and reducing their ability to use abusive/controlling tactics.
- Increase children's safety by increasing the adult DV victim's safety.
- Promote children's resilience.
- Support/rebuild the bond between the DV victim, child and siblings.
- Are culturally appropriate

Service plans should:

- Be based upon information from the specialized DV assessment, such as:
 - the DV perpetrator's tactics for gaining power and control,
 - the impact of those tactics on the adult DV victim and the children,
 - outcomes of prior help seeking, the potential lethality of the DV perpetrator, and
 - the DV specific protective factors of the adult DV victim, the child, the DV perpetrator, and the community.
- Take into account all the family's strengths, resources and sources of support.
- Identify the DV perpetrator's most prominent tactics of coercive control.

Monitoring and documentation of service plans for families with DV

1. **Closely monitor a DV perpetrator's case plans.**

This requires keeping lines of communication open with the DV victim, probation officers, batterers' treatment, and others, and reviewing court records.

2. **Ask DV perpetrators how they have actively supported the DV victim's parenting.**

Can they tell examples of times they told children their other parent was right, or deferred to the other parent? This can be a quick gauge of changes in attitude and action.

3. **Document in a way that places responsibility for abuse and its effects upon the person perpetrating the abuse, not the victim.**

For example, regardless of the victim's behavior, it is up to the DV perpetrator to avoid violating a protective order.

4. **Note changes in behavior, not simply compliance with plans.**

Compliance does not equal success or increased safety; changed behavior does. Assess the degree of actual change resulting from the service plan.

5. **Document the perpetrator's attempts to sabotage the child protective services process.**

Note any manipulative or coercive behaviors toward the adult victim, children, and CA worker.

Accountability and engagement with DV perpetrators

Child protection workers have a unique opportunity to engage DV perpetrators in planning for their children's well-being, while also being accountable for their violence.

- Strength-based approaches can support this work by helping workers identify the DV perpetrators' resources, supports and motivation to change.
- A focus on strengths does not mean that you should ignore or minimize the perpetrators' deficits, such as the choice to use violence and control.

Successful engagement of DV perpetrators requires social workers to connect with DV perpetrators, as well as hold them accountable for being a safe and responsible parent.

- Perpetrators may range from neglectful to rigid and/or authoritarian.
- Some may see their children and partners as extensions of themselves or objects they own, as opposed to vulnerable, individual people who are deserving of care and dignity in their own right.
- Worker may engage a DV perpetrator through their desire to be a better parent.
- Workers should always assess the parenting capacities of DV perpetrators, specifically in light of their pattern of abuse.

Some DV perpetrators cannot be a safe part of their children's lives. If engagement efforts fail, and it appears the DV perpetrator will not end violent and coercive behaviors, CA's work with the "family" (the DV victim and their children) should focus on:

1. Supporting the adult victim in protecting the victim and children from the DV perpetrator's coercive tactics.
2. Supporting the child's relationship with the non offending parent.
3. Documenting the DV perpetrators unwillingness or incapacity to change.

Collaborating with Community Partners to Respond to DV

Responding to DV, assisting DV victims and their children to increase their safety, and holding DV perpetrators accountable for their actions is complex work that involves multiple institutions.

CA can help make this safety possible by collaborating with other social service, civil and criminal justice agencies in responding to DV. Below are some tips for successful collaborations.

- *Understand the particular role of each agency in the community with regard to reporting, responding to, and intervening in DV and child maltreatment.*
- *Respect each agency's legal and ethical obligations regarding confidentiality and release of information.*
- *Work to improve how the systems respond to families generally versus focusing exclusively on particular cases.*

- *Keep a positive attitude. Focus on strengths and possibilities – what you have done together and what you can do together – while understanding limitations that may exist. Avoid being cynical – don't decide in advance that nothing can work.*
- *Be willing to create a recommendation, agreement, and/or plan of action with the other parties involved.*
- *Look for connections rather than differences – the “fit,” meeting your needs and others' needs.*

Safety Considerations

DV is potentially very dangerous to children, adult DV victims, DV perpetrators, and to CA workers.

When CA works with a family, by invitation or by mandate, a social worker may or may not know if DV is an issue.

- For those families where there is DV, the DV perpetrator may perceive contact with the system as a loss of control over their family, and increase their assaultive and coercive behaviors to regain control over the adult victim.
- Whenever workers at intake, investigation, service planning and case monitoring screen, assess, and respond to DV, they should use approaches that increase safety for all.

SUMMARY

What should be CA's role in working with children, victims and DV perpetrators?

CA's role in working with **children** affected by maltreatment and DV is to:

- Assess and assure their safety.
- Discuss with them ways they can be safe.
- Maintain their bond with the non-offending parent/ DV victim.
- Increase their well-being through referrals to services that support children exposed to DV.
- Build children's resiliency.

CA's role in working with **adult DV victims** is to:

- Approach them in a compassionate and non-judgmental manner.
- Reassure them they are not responsible for the DV perpetrator's violence and that it is not their responsibility to stop the perpetrator's violent behavior.
- Recognize their protective strategies and support them to increase their capacity for protecting the children.
- Assist them to meet with their DV violence advocate for DV safety planning and support.
- Provide resources that reduce the DV perpetrator's power and control, and enhance the victim's resistance and resilience.
- Refer them to, and help them access resources, such as DV shelters and support services, Temporary Assistance for Needy Families (TANF), other DSHS services, housing, financial assistance, and drug & alcohol treatment.

CA's role in working with **DV perpetrators** is to:

- Assess how they inflict harm on the child.
- Assess DV perpetrators' ability to remain safely involved in the family whether residing in the home or through visitation.
- Engage DV perpetrators throughout the course of the case: investigation, case plans, case review, and documenting efforts in the file.
- Look for DV perpetrators' strengths and commitment to their families that support them in changing their abusive behavior.
- Develop service plans that offer batterer's intervention and use other strategies to decrease the DV perpetrators' tendency and opportunity to abuse.
- Work with law enforcement, courts, and corrections to hold DV perpetrators accountable and support the application of appropriate sanctions.

RESOURCE INFORMATION

Toll Free Domestic Violence Hotlines

- **Washington State Domestic Violence Hotline** - 1-800-562-6025
- **National Domestic Violence Hotline** - 1-800-799-7233, 1-800-787-3224 (TTY) 24 hour hotline providing services in more than 140 languages.

Domestic Violence Services in Washington State:

- **The Washington Violence Against Women Network (WAVAWnet)** – www.wavanet.org *DV and sexual assault programs within Washington.*
- **State of Washington** - DSHS Children's Administration - <http://www1.dshs.wa.gov/ca/dvservices/index.asp> – Information about DV shelter and community services for DV victims, and certification of DV perpetrator treatment programs in Washington. *Includes lists of contracted DV shelter programs, programs serving DV victims from marginalized populations, and certified DV perpetrator treatment programs.*

Internet Links to Resources on Domestic Violence

- **Washington State Coalition Against Domestic Violence (WSCADV)** www.wscadv.org
Non-profit network of member programs serving victims of DV in rural, urban and Indian Country communities of Washington. Includes resources to help advocates, communities, and systems understand/respond to issues of DV.
- **National Coalition Against Domestic Violence (NCADV)** – www.ncadv.org
Resources, public policy, and community response to DV.
- **Multi-Lingual Access Project** – www.map-seattle.org
Washington and King County resources for serving immigrants and refugees.
- **Family Violence Prevention Fund (FVPPF)** – www.endabuse.org
National organization with numerous violence-related programs including DV, dating violence, child welfare, immigrants, and judiciary.
- **Minnesota Center Against Violence and Abuse (MINCAVA)** - www.mincava.umn.edu
Electronic clearinghouse for research, education, and violence-related resources. Includes information on child abuse, DV, and sexual assault.
- **National Teen Dating Abuse Helpline** - 1-866-331-9474, 1-866-331-8453 (TTY) - www.loveisrespect.org 24-hour, national web-based and telephone helpline created to help teens