

# Child Welfare Practices for Cases with Domestic Violence



# THE OREGON DEPARTMENT OF HUMAN SERVICES

## CHILD WELFARE PRACTICES FOR CASES WITH DOMESTIC VIOLENCE

This is the fifth edition of the practice guidelines. It is part of an overall effort to increase the safety of adults and children. Domestic violence services and the Oregon Department of Human Services, Child Welfare (“the Department”) collaborated to revise these guidelines.

### **Acknowledgements**

These guidelines borrow national experts’ ideas and work. The first editions included information from Susan Schechter’s and Anne Ganley’s pioneering work in “Domestic Violence Curriculum for Child Protection” for the Family Violence Prevention Fund; early editions also shared information from the Massachusetts Department of Social Services.

The fifth edition’s material on working with the batterer draws heavily from the following: Fernando Mederos in “Accountability and Connection with Abusive Men” for the Family Violence Prevention Fund ([www.endabuse.org](http://www.endabuse.org)); David Mandel from the Non-Violence Alliance ([www.endingviolence.com](http://www.endingviolence.com)); and Lundy Bancroft ([www.lundybancroft.com](http://www.lundybancroft.com)).

These guidelines also rely on work and ideas from Department staff in various roles, as well as domestic violence advocates throughout the state.

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# SECTION IV. CHILD WELFARE PRACTICE APPLICATIONS

## *The Department's role in domestic violence cases*

Domestic violence and child abuse frequently occur in the same families. This does not mean that all families experiencing domestic violence should be referred to child protective services nor does it mean child protective services will respond to all reports of domestic violence.

While domestic violence is always a risk factor for children, it is only when there is an allegation of child abuse or neglect that a child protective services intervention is warranted. When there is an allegation of child abuse or neglect related to domestic violence, a thoughtful, comprehensive CPS assessment must determine if the domestic violence presents an impending danger safety threat to the child. The Department's focus is not just on whether the child witnessed an act of violence, but on how the child is affected by the batterer's behavior.

Appropriate ongoing safety plans and case plans rely on a careful assessment of domestic violence and its impact on children and non-offending parents. For example, a non-offending parent may appear uncooperative, but this may be a survival strategy to protect himself or herself and children from the batterer. A worker is more likely to successfully protect children if the worker is able to recognize these survival strategies and develop plans that both build on the strategies and hold the batterer accountable for the violence.

Dr. Anne Ganley and Susan Schechter, in their introduction to "Domestic Violence: A National Curriculum for Children's Protective Services," state that domestic violence endangers children in many ways:

- Domestic violence batterers not only harm their intimate partners but may also physically abuse their children. Their escalating violence against an intimate partner also physically endangers children.
- Domestic violence batterers may sexually abuse their children or the children of intimate partners.

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- Domestic violence batterers may endanger children through neglect. Some domestic violence batterers focus so much attention on controlling and abusing their intimate partners that they neglect the needs of children.
  - Sometimes a batterer's violence against the intimate partner prevents the adult victim from caring for the children. This can be mistakenly identified as intentional neglect on the part of the adult victim.
  - Domestic violence batterers may harm children by coercing them to participate in the abuse of their other adult caretakers.
  - Domestic violence batterers may harm or endanger children by creating an environment where the children witness domestic violence.
  - Finally, domestic violence batterers may endanger children by undermining the ability of CPS and community agencies to intervene and protect children.

Research literature shows there is an increased impact for those children who both witness domestic violence and suffer physical abuse themselves.

One of the challenges of domestic violence within child abuse cases is how to keep children safe without penalizing the non-offending parent. The CPS worker conducting a comprehensive CPS assessment determines if the caregiver can or cannot or will or will not protect the child. Domestic violence victims use a variety of strategies, some that may seem from the outside to be counterproductive, to protect themselves and their children. Ask adult victims what they are currently doing to protect their children. Keep in mind that non-offending parents may be willing to protect their children, but they may not be able to due to the batterer's behavior.

Although child protective services must sometimes file petitions in juvenile court or place children, always use language that focuses on the batterer's role in creating harm or risk to the children. For example:

- "Despite the mother's efforts to protect the children, the perpetrator is creating conditions that are a threat to the children's safety."<sup>4</sup>

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<sup>4</sup> "Safe & Together Model" by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

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- The following are inappropriate and ineffective responses to domestic violence:
    - » Labeling the adult victim as the perpetrator of neglect due to a “failure to protect”;
    - » Telling the adult victim that the children will be removed if the violence happens again;
    - » Placing children away from the non-offending parent, except as a last resort;
    - » Restricting visitation of the non-offending parent;
    - » Mandating restraining orders; and/or
    - » Mandating services.

The above actions can reinforce the batterer’s message to the adult victim that the adult victim is at fault and a bad parent. The Department’s message to adult victims should be that we can work together to help them protect themselves and their children.

When working with children in the context of domestic violence it is important to:

Assess and assure their safety and well-being;

- Reassure children that they are not responsible for the violence;
- Reassure children that it’s not their fault if they did not tell anyone;
- Help children identify adults who are safe to tell about the violence;
- Discuss with children ways they can be safe;
- Maintain the children with the non-offending parent when possible;
- Establish ways to safely maintain the children’s healthy attachments with the parents if placement is necessary;
- Establish ways to maintain or develop healthy bonds between children and their parents.

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When working with the non-offending parent in the context of domestic violence it is important to document the full spectrum of the adult victim's efforts to promote the safety and well-being of the children.<sup>5</sup>

It is also optimal to:

- Reassure the non-offending parent that she or he is not responsible for the batterer's violence or for stopping the batterer's violent behavior;
- Determine the non-offending parent's ability to protect the children;
- Complete a comprehensive analysis of all identified present danger safety threats and impending danger safety threats;
- Help the non-offending parent to plan for his or her own safety, and the safety of their children;
- Refer the non-offending parent to a domestic violence advocate for domestic violence safety planning (see section on domestic violence safety planning);
- Help the non-offending parent access resources (domestic violence shelters and support services, Temporary Assistance for Needy Families, other DHS services, housing, financial assistance, drug and alcohol treatment, etc.).

Whether or not you are able to work directly with the batterer (who is a legal parent or who will continue to affect the household) in the context of domestic violence it is important to document:

- The batterer's pattern of coercive control;
- Actions taken by the batterer to harm the children;
- Adverse impact of the batterer's behavior on the children.<sup>6</sup>

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<sup>5</sup> Based on "Safe & Together Model" by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

<sup>6</sup> *Ibid*

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If you are able to work directly with the batterer, it is optimal to:

- Assess the batterer's ability and willingness to protect the children
- Assess the batterer's active engagement as a parent — is that individual meeting the children's basic physical and emotional needs, participating in the children's education, ensuring that the children have a stable and predictable home life, etc.?
- Assess the batterer's ability to remain safely involved in the family whether in the home or through visitation;
- Look for strengths and commitment to family that support the batterer in being accountable;
- Develop case plans that focus on stopping the batterer's use of power and control in ways that affect the children's safety;
- Develop case plans that involve specific steps and expectations for the batterer that address the individual's pattern of coercive control;
- Make sure that the batterer is being held equally accountable as a parent or parental figure for the safety and well-being of the children — this can include ensuring that the batterer makes adequate financial arrangements to support the family, so that the children have adequate food, housing, transportation and other basics;
- Work with community partners to hold the batterer accountable, including supporting the application of legal sanctions;
- Communicate in a manner that makes clear that the batterer's violent and controlling behaviors are the batterer's choice and responsibility;
- Engage the batterer in the change process;
- Assess the batterer's ability to remain safely involved in the family, whether in the home or through supervised visitation;
- Make appropriate referrals for batterer intervention and follow up to monitor compliance.

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## *Supervising caseworkers with domestic violence cases<sup>7</sup>*

Clear and thorough documentation is essential to strong casework and helps the caseworker's supervisor give helpful feedback. Examples of documentation recommendations are:

- Do not lump batterer and victim together. Avoid phrases like:
  - » “Couple engage in violence”;
  - » “Parents have a history of domestic violence”;
  - » “Parents both deny the violence”;
- Be precise and descriptive:
  - » Avoid euphemisms or vague terms like “argued” if what you mean is “hit.”
  - » Describe the pattern — e.g., “father has engaged in an escalating pattern of physical violence and intimidation that involved multiple incidents of physical assault, threats to kill the mother and her children.”
- Affirm the batterer's role in harming the children through his or her actions:
  - » E.g., “These behaviors have isolated the mother from her support system, the children from relatives, and led to them moving school systems and residences twice in the past year (as a result of evictions).”
- Avoid blaming the victim for the batterer's violence and abusive behavior.
- Avoid phrases like:
  - » “Dysfunctional” family;
  - » Mother “allows” or “enables” the violence;
  - » Mother “failed to protect” the children.
- Use language that focuses on the batterer's role in creating harm or risk to the children:
  - » E.g., “Despite the mother's efforts to protect the children, the batterer is creating conditions injurious and harmful to the children.”

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<sup>4</sup> Based on “Safe & Together Model” by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

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In the Resource Section at the end of this document, supervisors can find a domestic violence casework assessment tool. This tool will help them assess the efficacy of casework being performed by their employees. Caseworkers could also use it as a self-assessment tool.

There is also a “Critical Components Evaluation Form” created by Kids First Child Abuse Intervention Center in Lane County, Oregon, based on the work of David Mandel. It could be a useful training tool and help standardize the collection of essential information in domestic violence cases.

## *CPS screening*

In families where there is domestic violence, children may be harmed through:

- Physical assault even when they are not the intended target of the violence;
- Neglect when their basic needs are not being met; or
- Mental injury caused by controlling and abusive behavior.

Research reports that children exposed to domestic violence are at increased risk for behavioral and emotional problems. However, research also indicates that many children show no greater problems than children not exposed to domestic violence. There are a number of factors that mitigate a child’s risk including the relationship with the non-offending parent, the child’s resiliency, the presence of other protective adults in the child’s environment, and the severity and proximity of the violence.

Not all reports of domestic violence will lead to a CPS assessment. When determining if the report of domestic violence meets the statutory definition of abuse or neglect, consider whether:

- The children are intervening or are likely to intervene in the physical violence;
- The children are in close proximity to the physical violence;
- The alleged batterer shows disregard for the children’s safety;
- The child exhibits impairment in his or her ability to function as a result of the domestic violence.

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## **Gather and document CPS screening information**

Screen for domestic violence in all reports of child abuse and neglect, not just those in which domestic violence is the presenting issue. Screen for issues of power and control, isolation, intimidation, threats of homicide or suicide, stalking, weapons, violence increasing in frequency or severity, as well as other types of abuse.

Use multiple sources of information on the alleged batterer's access to the child and alleged adult victim and for information on the impact to the child. Information to gather may include:

- Police reports;
- No contact orders;
- Restraining order and stalking order filings;
- Probation and/or parole involvement;
- Criminal records checks;
- TANF or other Self Sufficiency involvement.

## **Gather information about child vulnerability**

Children are vulnerable in domestic violence cases in a variety of ways including but not limited to:

- Being held;
- Being unable to leave the situation;
- Intervening to protect the alleged adult victim;
- Being threatened and terrorized; and
- Experiencing symptoms of trauma.

## **Assign for CPS assessment**

In making a decision on whether or not to assign for assessment, the screener does not look just at whether or not the child “witnessed” or was in the same room as the domestic violence. The fact that the child was in the same room may increase the

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likelihood of negative consequences for the child, but a review of all the factors and the child's overall exposure to the violence is necessary.

The screener also must consider the alleged perpetrator's access to the alleged victim. Gather information about the alleged batterer's whereabouts and his or her access to the child.

The alleged batterer may be in jail or may have a current no-contact order. That might provide immediate safety, but does not guarantee it in the future. No-contact orders may be lifted or short-term. Batterers frequently are released from jail after a short stay.

Questions to ask about access may include:

- Is the alleged batterer a legal parent?
- Will the alleged batterer have continued access to the child?
- What sanctions are in place to maintain no or limited contact?
- What safety plan does the non-offending parent have in place?

A report involving children who are exposed to domestic violence should be assigned for CPS assessment if the report alleges that the domestic violence is current or that the alleged batterer has a history of domestic violence AND that:

- The child has been injured or is likely to be injured during the violence (e.g., being held during violence, physically restrained from leaving, child is intervening, etc.); or
- The alleged batterer does not allow the non-offending parent or children access to basic needs that affect their health or safety; or
- The alleged batterer has killed, severely harmed or is making a believable threat to do so to anyone in the family, including extended family members and pets; or
- The child's ability to function on a daily basis is substantially impaired; or
- Weapons were used or threatened to be used; or

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- The alleged batterer has made believable threats of kidnapping, hostage taking, suicide or homicide; or
  - The violence resulted in serious injury to the non-offending parent (including, but not limited to, broken bones, internal bleeding or injury, extensive bruising or lacerations, poisoning, suffocating, strangling, shooting or severe malnourishment).

Other factors to consider in conjunction with the above include:

- Victims are isolated with little support;
- Violence is increasing in either frequency or severity;
- There is interaction with other risk factors including substance abuse or mental illness;
- Previous referrals to child protective services or LEA with the same or other child or adult victims;
- Previous convictions for crimes against persons or serious drug offenses;
- Stalking behaviors;
- Violations of restraining orders; and
- Lack of other community responses or resources.

If there are previous reports, they should be considered in the screening decision; however, a first report can be assigned for CPS assessment. Similarly, while police reports and other official documents may support the need to assign, they are not necessary if the reported information meets the criteria for assigning outlined in Oregon Administrative Rule 413-015-0210.

### **Assign CPS assessment response timeline**

When an intentional delay to allow for a planned response would be less likely to compromise the safety of the child, Oregon Administrative Rules allow a response within five calendar days. This delay can be valuable in domestic violence referrals

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to allow for the initial contact to occur when the alleged batterer would be absent. For example, Self Sufficiency workers involved in with the family may know that the non-offending parent is in the process of leaving the household and a child protective services assessment could jeopardize safety planning.

### **Close at screening**

The decision to close at screening is not intended to minimize the seriousness of domestic violence. The information may describe family behaviors, conditions or circumstances that pose a risk to the child, but that do not constitute a report of child abuse or neglect as defined in ORS 419B.005.

When documenting a report that is to be closed at screening, include the alleged batterer's name. Depending on the reporter's identity and information, a referral to community partners may be appropriate. Some of these resources include:

- Domestic violence service providers;
- Family support and connections;
- Victims' advocates in police departments or district attorneys' offices;
- Voluntary DHS services including Temporary Assistance for Domestic
- Violence Survivors (TA-DVS);
- School counselors;
- Law enforcement;
- Probation or adult community justice programs; and
- Batterer intervention programs.

### ***CPS assessment***

The Oregon Safety Model requires a comprehensive child protective service assessment. This includes assessing not only the allegation, but the whole complexity of family dynamics. **In conducting a comprehensive CPS assessment, the CPS worker assesses for domestic violence, whether**

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**or not it is part of the initial report** and further identifies other family issues and their interplay with domestic violence (e.g., substance abuse and domestic violence, which are often both present in families assessed by Child Welfare).

Critical note: The dynamics of domestic violence are based on the batterer maintaining power and control over his or her partner. Challenges to that power and control, including a CPS assessment, may increase the likelihood of escalating violence. The risk of being seriously harmed or killed may increase when an adult victim leaves the batterer. **Given this dynamic, plan your assessment carefully when domestic violence is known to be an issue and always consider that the assessment may increase the risk to the child and the adult victim.**

The Oregon Safety Model outlines 16 impending danger safety threats. The one most frequently associated with domestic violence is: “One or both parents’ or caregivers’ behavior is violent and/or they are acting (behaving) dangerously.”

As part of determining whether the violence meets the safety threshold, workers assess if the violence is out of control. The term “out of control” has a specific definition within the Oregon Safety Model. It does not mean that the batterer’s behavior is out of control. It means that the family or the systems around it do not have the resources to hold the batterer accountable for the violence and provide safety for the child.

To ensure safety for the children and adult victim an assessment should document<sup>8</sup>:

- The batterer’s pattern of coercive control over the adult victim and family;
- The specific actions the batterer has taken to harm the children;
- The full spectrum of efforts made by the non-offending parent to protect the child;
- The adverse impact of the batterer’s behavior on the child; and
- The role of substance abuse, mental health, culture and other socioeconomic factors.

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<sup>8</sup> From a presentation by David Mandel of David Mandel and Associates at the National Conference on Child Abuse and Neglect in April 2007, and from his Connecticut Department of Children and Families Domestic Violence Consultant Initiative, March 2008.

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See the resource section for the Five Critical Components form. Sample assessment questions follow in Section V.

The batterer's pattern of coercive control could include:

- Financial control or withholding;
- Isolation from family and friends;
- Humiliation;
- Forced or impelled sexual intercourse;
- Abusive sexual acts;
- Sabotage of work and/or education;
- Impeding access to medical and mental health providers;
- Intimidation;
- Threats; and
- Violence, including using physical force to damage property, harm pets and/or hurt people.

Specific actions the batterer has taken to harm the children could include:

- Monopolizing the non-offending parent so that person cannot adequately tend to the needs of the children;
- Interfering with the normal development of the children;
- Ignoring the children's emotional needs;
- Exposing children to situations that are frightening or overwhelming for them;
- Creating a tense atmosphere that inhibits normal home life;
- Interfering with the children's interactions with their extended family;
- Isolating the children from the community and/or friends;
- Disrupting the children's normal routines;

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- Keeping the children up late or waking them with yelling and/or other abuse;
  - Exposing children to emergency response from police and/or EMTs;
  - Failing to meet the children's basic needs;
  - Recklessly causing physical harm to children as a result of the violence toward the non-offending parent.

The full spectrum of efforts made by the non-offending parent to protect the children could include:

- Keeping some routine for the children in the chaos caused by the batterer's behaviors;
- Redirecting the batterer's coercive behavior toward themselves and away from the children;
- Providing opportunities for developmentally appropriate play and learning;
- Enrolling the children in school and facilitating their participation in school activities;
- Ensuring that the children's basic needs are met;
- Removing the children from the vicinity of abusive behavior;
- Acquiescing to the batterer's demands, in order to shield the children;
- Safety planning with the children.

A non-offending parent who is being physically, emotionally and/or sexually abuse — but still maintains any semblance of normal home life for a child — is demonstrating strengths that should be documented and built upon in partnership to increase child safety.

*The adverse impact of the batterer's behavior on the children*

This impact could include, child is:

- Being neglected (i.e., basic needs are not being met);

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- Failing to thrive;
  - Not sleeping well;
  - Often sick;
  - Unusually fearful;
  - Anxious;
  - Supporting one parent over another, or feeling compelled to do so;
  - Defending one parent from another, or feeling compelled to do so;
  - Lonely;
  - Disconnected from family and/or friends;
  - Feeling pressured to keep secrets;
  - Over-obedient;
  - Overly anxious to please adults;
  - Overly concerned with adult matters;
  - Taking on parenting or protective role of younger children in the home;
  - Exhibiting trauma responses, such as hyper-vigilance, startle response;
  - Emotionally shut down;
  - Emotionally demanding;
  - Exhibiting signs of arrested development;
  - Reverting to previous development stages;
  - Acting out violent or abusive behavior toward other children or in play;
  - Bullying;
  - Excelling or doing poorly in school;
  - Overly distracted;
  - Overly forgetful;

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- Injured;
  - Exhibiting sexualized behaviors from witnessing sexual assault.

In determining if the batterer's behavior makes the child unsafe, document:<sup>9</sup>

- The level of physical danger the batterer presents to the adult victim;
- The history of physical abuse to the children;
- The history of sexual abuse to the children;
- The level of psychological cruelty to adult victim and/or child;
- The level of coercive or manipulative control;
- Reasonableness of demands and expectations the batterer has of the child; and
- Indication the batterer views the adult victim and/or child as possessions.

It is especially important to document the overall pattern of coercive behaviors when assessing for an impending danger safety threats to young, pre-verbal children.

See Section V. for advice on interviewing the alleged batterer and sample questions for all parties.

### **Before initial contact**

Steps to take when preparing for initial contact:

- If immediately available, gather collateral information to help determine the history of assault and pattern of power and control.
- Determine if the alleged batterer is in jail and, if so, for how long.
- Determine if there is a no-contact or restraining order against the alleged batterer.

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<sup>9</sup> "Assessing Risk to Children from Contact with Batterers" by Lundy Bancroft in the April/May 2002 edition of the *Domestic Violence Report*.

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- Explore how to do the assessment when the alleged batterer is not home. If possible, call first to determine who is at home and how safe it is to go to the home.
  - Find out the alleged batterer's work schedule. Consider meeting at a DHS Self-Sufficiency office, school or other neutral setting.
  - Develop an alternate plan in the event you are unable to interview the adults separately.
  - If you believe that an interview with the alleged batterer (or another family member) at initial contact will compromise safety of any family member, consult with a supervisor to request an exception to interviewing the alleged perpetrator at initial contact in order to allow for safety planning before the interview.
  - If you have to make contact when the alleged batterer is or may be present, take two workers, a police officer or parole/probation worker if assigned.
  - Responding with assistance promotes worker safety and can assist in conducting separate interviews.
  - Have information readily accessible on available domestic violence services and other emergency resources.

If possible, consult with domestic violence programs or batterer intervention specialists before responding. Advocates can offer in-depth domestic violence safety planning and information about resources and information about domestic violence dynamics. Please refer to the Resource Section for domestic violence safety planning and for information on batterer intervention programs.

### *People facing additional barriers*

Parents may face additional barriers to accessing services if they are members of a group typically underserved by traditional agencies. Social service organizations and civil and legal systems have not been as responsive to people whose primary language is not English, people with disabilities, lesbians, gays, bisexuals, transsexual and transgender persons, and people from diverse cultural and/or faith groups. Identifying culturally appropriate services and accessible services are key parts of planning.

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When interpretation services are necessary, use professional interpreters who understand domestic violence and will not blame an alleged adult victim. If the interpreter is known to the alleged adult victim, ask the alleged adult victim if that interpreter is acceptable.

## **Make the initial contact**

### **Observations**

Observe the home environment and family members for physical signs of domestic violence. Also inquire during interviews about observations others have made. Physical signs may include:

- Visible injuries or injuries that are hidden or attempted to be hidden;
- Flinching or signs of anxiety;
- Use of dominating or intimidating body language;
- Weapons;
- Holes in walls, broken furniture, broken doors and windows;
- Locks on the outsides of doors;
- Broken, disconnected or missing telephone;
- Home not adequately accessible for family member's disabilities;
- Guard animals, especially if family members exhibit fear of the animals;
- Home in an isolated location.

### **Interviews**

- Interview the alleged adult victim first, Whenever possible, interview that person without the alleged batterer being present or knowing about the interview.
- If the alleged batterer is present, do separate interviews out of earshot of the alleged batterer.

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- If you cannot separate the partners, focus on issues other than the domestic violence. Resistance to separate interviews with adults may be an indication of domestic violence and a batterer's control.
  - If you believe that an interview with the alleged batterer (or another family member) at initial contact will compromise safety of any family member, consult with a supervisor to request an exception to interviewing the alleged perpetrator at initial contact. This will allow for safety planning before the interview.
  - When interviewing the alleged adult victim, child and alleged batterer ask questions that will get to the duration, frequency, predictability and other factors that influence the domestic violence. This will help determine how it is uniquely occurring in this family.

#### *Interview the alleged adult victim*

- Immediately ask the alleged adult victim if it is safe to conduct an interview and, if not, ask what might be a safe way.
- Never ask the alleged adult victim about domestic violence in front of the alleged batterer. Disclosures may make the alleged adult victim unsafe if the alleged batterer is in the vicinity.
- Use strategies to build rapport, encourage conversation and support the alleged adult victim.
- Ask about other issues first before asking about domestic violence. Ask about the person's relationship, including positive aspects. Begin with more general questions; then follow up with more specific and detailed ones.
- Ask open-ended questions about well-being to start the conversation. However, express concerns and ask questions about bruises or other injuries.
- Ask questions to determine the severity and potential lethality of the alleged batterer's behavior. These include questions on whether there have been any:
  - » Signs of extreme jealousy;
  - » Threats of homicide or suicide;

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- » Threats or acts of strangulation, harm to animals or menacing of family members; and/or
  - » Access to weapons.
- Ask questions on the coercive tactics the alleged batterer may use. These tactics range from very overt — such as physically preventing someone from leaving the house — to subtle ones, such as isolating an adult victim from the family.
  - The alleged adult and child victims may express positive feelings toward the alleged batterer. When asking questions about the abuse, focus on the alleged batterer’s controlling and coercive behaviors, not personality.
  - Affirm to the alleged adult victim that the abuse is not deserved and not the fault of the alleged adult victim.
  - Express concerns for the safety of the alleged adult victim and children. Explain that domestic violence may increase in frequency and/or severity.
  - Identify what the alleged adult victim has done to stay safe and keep the children safe, and how well those actions have worked.
  - Consider that the adult victim’s actions have been survival strategies. For example, staying with the alleged batterer may be safer than leaving.
  - Recognize that because many adult victims lack access to financial resources or other housing options, the alleged adult victim may believe that it is better and even safer for the children, to stay with the alleged batterer.
  - If there are allegations that the violence is mutual, look at the context and intent of the violence. Determine which partner is afraid of the other, which partner is effectively exerting control and whether injuries are defensive wounds.
  - Give the alleged adult victim information about domestic violence. If you know the alleged batterer has previous convictions, share that information with the alleged adult victim.
  - Discuss with the alleged adult victim what will happen with the information gathered. This includes what information will be disclosed to the alleged batterer.

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- Offer information and referrals to address other immediate needs of adult and child victims, including financial assistance, health care, safety planning, etc.
  - When ending the interview, ask the alleged adult victim about safe times and ways to make contact in the future.

### *Interview children*

- Ask children questions about the violence and what happens during the violence.
- Ask children what they do during the violence, including if they have tried to intervene.
- Ask children how they feel about the violence and their home.
- Ask children what they do to take care of themselves and/or their siblings.
- Support the ways in which the child stays safe.
- Ask children who they talk to about their home.
- Be aware a child may take responsibility for the abuse or side with the alleged batterer. Assure the children that the violence is not their fault or the fault of the adult victim.
- Acknowledge the alleged batterer's positive traits as well as asking about abusive behavior.
- Tell the child what information you will be sharing with either parent.

### *Interview the alleged batterer*

- Batterers are not reliable sources of information about their own violent behavior or use of power and control tactics. Better sources of information include the alleged adult and child victims, police reports, parole and probation, court documents, and other persons or agencies known to the family.
- Do not ask the alleged batterer about domestic violence in front of the alleged victim.

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- Don't tell the alleged batterer information given by the alleged adult victim or child if other sources are available or until a safety plan is in place. Use corroborating reports such as police, neighbors, parole or probation, courts and medical.
  - Ask about other issues first before asking about domestic violence. Ask about the person's relationship, including positive aspects. Begin with more general questions then follow up with more specific and detailed ones. Delay asking specific questions if it will put the alleged adult victim or child in danger.
  - Ask questions to assess for power and control tactics (see Resource Section).
  - Ask questions about steps the batterer has taken or will take to accept responsibility for the violence and stop those behaviors,
  - Assess what steps the alleged batterer will take to create safety.
  - Ask about other issues including use of drugs or alcohol.

When assessing the alleged batterer's answers, be aware of tactics commonly used by batterers to deflect attention away from themselves. Batterers will try to enlist you to collude with them against the adult victim. Tactics include the batterer:

- Presenting as the victim;
- Using statements of remorse as a way to avoiding consequences;
- Describing protective efforts the alleged adult victim has taken (leaving or calling police) as ways to be hurtful to the alleged batterer;
- Presenting as the more stable and calm partner and better parent;
- Denying or minimizing abuse (e.g., "It is not my fault if someone bruises easily; I just pushed a little");
- Blaming the alleged adult victim for the abuse (one should know not to do that);
- Avoiding responsibility by blaming alcohol or other substances, stress, etc.;
- Alleging drug or alcohol abuse by partner;
- Alleging the partner has mental illness and/or is off medication; or

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- Presenting the alleged adult victim's behavior in a negative way to get you to side with the alleged batterer.

### Identifying the predominant domestic violence batterer

Sometimes there are allegations of domestic violence against both parents. Domestic violence victims may fight back and be charged with assault. Look beyond the initial incident to assess the dynamics in the family and to determine which party is the predominant aggressor.

Assess for patterns of power and control in allegations of domestic violence that appear to be mutual violence, or where the adult victim has been arrested. Specifically look for the following:

- Are injuries defensive wounds (bite marks, scratches etc.)?
- Who is afraid of the other?
- What was the intent and level of the violence (was it self-defense or to punish/retaliate)?
- Who is effectively exerting control over the other?
- What is the impact of the violence? and
- Who has historically been the dominant aggressor regardless of who the first aggressor was in the current incident?

It is important to remember that it is common for the adult victim to claim responsibility for the violence.

### **Determine if there is an impending danger safety threat**

It may be difficult to determine when or whether the batterer's behavior makes a child unsafe. The batterer's behavior may not be directly aimed at the child, but the child may still be negatively affected. Conversely, the presence of domestic violence may present a risk to the child, but the child can still be safe.

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## Apply the safety threshold criteria

There may be other impending danger safety threats present, but impending danger safety threat #2 is used to identify domestic violence: One or both parents' or caregivers' behavior is violent and/or they are acting (behaving) dangerously. Violence refers to aggression, fighting, brutality, cruelty and hostility. It may be immediately observable, regularly active or generally potentially active.

To meet the safety threshold, it is not enough to state that there is domestic violence. Document the specific behaviors of the batterer that severely harm or could reasonably cause severe harm to the child and how those behaviors affect the child.

First, the violence has to be out of control, meaning there are no outside or familial resources to adequately maintain the child's safety. The child could suffer severe harm as a result of the batterer's behavior. The threat of harm to the child has to be imminent, which means within a couple of days to a few weeks. The behaviors and impact have to be specific and observable. Finally, there has to be a vulnerable child.

Possible examples include:

- A parent uses violence when the baby is in extremely close physical proximity, causing a high likelihood of injury. In the most recent instance, one parent was holding the baby and almost dropped the baby when the other parent was hit. The baby could have been injured by being struck or by being dropped due to the violence.
- One parent has threatened to kill family members and has injured the other parent in front of the child. The child is extremely fearful and has regressed at school. The child's grades have significantly dropped due to inability to concentrate.
- Through threats of violence, the family is isolated to the extent that basic needs are not met. Family members are not allowed to leave the house without the threatening parent.

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If the domestic violence does not meet the safety threshold criteria, explore safe options with the non-offending parent. Make referrals to domestic violence service providers and other resources, and provide information about domestic violence, when appropriate.

### *Determine child vulnerability*

Domestic violence is a risk factor for children, both for potential physical abuse either directly by the parent or indirectly by being caught in the violence, and for emotional abuse caused by witnessing the batterer's violent and controlling behavior directed most often at their primary caretaker. However, research documents factors that mitigate the risk, including the child's resiliency, the child's relationship with the non-offending parent and the presence of other supportive adults. A child may have a plan, created with a safe caretaker, and the ability to carry it out to avoid any physical harm. A child's resiliency and support network also may mitigate the threat of emotional harm or mental injury.

Conversely, a child may be vulnerable if he or she:

- Is intervening or likely to intervene;
- Is unable to physically escape from the violence;
- Is isolated from other family members, friends or other social supports;
- Fears for himself or herself or the victimized parent;
- Blames himself or herself for the violence; or
- Does not have a good relationship with the non-offending parent.

Regardless of age, children who want to intervene to protect their parent are vulnerable.

Domestic violence coexists in families whose children experience physical, sexual and/or emotional abuse. Children who experience multiple types of abuse are at higher risk.

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*Determine if the parent or caregiver is unable to protect*

Domestic violence victims use a variety of strategies to protect themselves and their children. Ask what they currently are doing to promote the safety and well-being of the children and how those actions are working. Document the full spectrum of those behaviors and build on them whenever possible.

When documenting the non-offending parent's strengths and potential actions:<sup>10</sup>

- Do not rely on law enforcement, restraining orders, or forcing the batterer to leave the home/family;
- Avoid the double standard around mothers and fathers (mothering behaviors that we, as a culture, often take for granted are examples of the non-offending parent's promotion of the children's safety and well-being);
- Identify prior traditional and non-traditional safety planning;
- Identify day-to-day care of the children as part of promoting safety and well-being;
- Document the positive impact this day-to-day care has had on the children;
- Identify any additional efforts being made to mitigate the physical and/or emotional impact of the batterer's coercive control on the children;
- Identify strategies that can be supported and enhanced.

The challenge with domestic violence is that the adult victim may be doing everything possible to protect the children, but may not have the ability to protect due to the lack of family or community resources and sanctions to hold the batterer's behavior in check. It is critical to discuss how the caregiver is unable — rather than unwilling— to protect. This will facilitate entering into an alliance with the non-offending parent when establishing a protective action plan or initial safety plan.

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<sup>10</sup> Based on "Safe & Together Model" by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

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## **Establish a protective action plan or initial safety plan**

A protective action plan manages a present danger safety threat and an initial safety plan manages an impending danger safety threat. A protective action plan or initial safety plan can include all parties remaining in the home or one or more parties leaving.

In-home plans would include safety planning for the children and may include additional safety services and safety service providers providing the necessary support. It can include relatives maintaining frequent contact to monitor the situation while the assessment proceeds.

The protective action plan or initial safety plan can be the batterer leaving the home. Any plan for the batterer being out of the home must be monitored by someone other than the adult victim. Check for involvement of law enforcement, probation and parole, and supportive family members who will monitor the batterer's whereabouts and notify authorities.

## **Safety and domestic violence: strategies for increasing safety in Child Welfare cases involving a perpetrator of intimate partner violence**

Often, the focus of our safety planning efforts in cases of intimate partner violence is on creating expectations for the victim of that violence. This may actually increase the danger. When a victim struggles to set boundaries, an abusive partner will often see that as the victim attempting to take away the abuser's control of the family. This can "up the ante," and actually increase the likelihood that the abusive partner will take more extreme action.

Child Welfare workers are in a unique position to increase safety and the potential for positive change in families where one adult caregiver is intimidating the other. Child Welfare workers can engage the coercive and controlling person in support of the children and setting the necessary boundaries (always in consultation with the victim).

Batterer intervention programs report that many people who use abuse and violence against an intimate partner seem more responsive when given information

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on how their behavior affects their children. Child Welfare workers who give this key message can create an opportunity to increase safety and even lay the groundwork for change.

Caseworkers can try to enlist the cooperation of batterers by focusing on their role as a parent, because many batterers want to be “good parents.” Resistance to cooperation with a case plan may be reduced if the caseworker can identify, acknowledge and build on the battering parent’s strengths.

Child Welfare workers may get more cooperation by creating opportunities to educate and “assume good intentions.” Education may include statements like, “Unfortunately when children are aware of the abusive or violent behavior of a parent, research tells us that they are more likely to, e.g., have nightmares, be afraid or aggressive, use drugs, get pregnant, become homeless, act violently, get arrested, use abuse or be the target of abuse in their own relationships.” It can also be pivotal for them to understand that they cannot hurt their child’s parent without hurting their child.

Statements that “assume good intentions” could include, “I’m certain you want to do the best thing possible for your children,” “How do you want your children to remember you?” or “You can make a difference for your kids. They will carry what you do now forever. If you get help, it may make a big difference for both your boys and girls.” Using statements like these may help batterers focus on their role as a parent rather than being defensive about their abusive behavior.

Make it clear that the abusive partners’ behavior and cooperation will determine whether or not his or her children’s lives will be disrupted.

Also, research indicates that people using coercive and controlling tactics against their intimate partners are more likely to act in safer ways when coordinated and consistent accountability strategies are implemented by a network of partners. Consistent reinforcement and repeated contacts are keys to success. Caseworkers are well placed to orchestrate a coordinated response.

Child Welfare will be more successful creating a coordinated response to any specific incident of intimate partner violence if time has been invested in a proactive

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effort to engage community partners and problem-solve potential gaps and barriers in the system. Advance collaboration can enhance the lives of families and create a foundation for success.

In each case, safety will be increased if the Child Welfare worker can create a network of engaged people that is as large and diverse as possible. Then, connect routinely with this network to:

- Confirm cooperation;
- Check on the abusive partner's location, stability and state of mind;
- Ensure that uniform messages are being delivered; and,
- Make it clear to the abusive partner that everyone is working together to monitor them and their behavior.

This network of engaged people can include informal connections such as family, friends, neighbors, employers, coworkers, social contacts and members of religious institutions. Formal networks may include personnel at the children's school, the justice system and social service providers. Some of these connections may be useful as safety service providers.<sup>11</sup>

Routine follow-up is important because these can be volatile situations that change rapidly, with changing safety needs. This can be especially true when Child Welfare intervenes because an abusive person can become more dangerous if control over the partner is threatened. It is a sad fact that most murdered victims are killed after they leave the relationship.

To reiterate, safety will not necessarily be enhanced by creating expectations of the adult victim. We cannot legally limit contact between adults, and it may even increase danger. For example, an adult victim may know it will be safer if he or she seems compliant and maintains some contact with the abusive partner.

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<sup>11</sup> It is often best practice to obtain releases of information (ROIs) from the abusive partner or the survivor even though these releases are not required during the CPS assessment process. Once the case moves from assessment to ongoing, DHS staff must obtain ROIs before discussing case specifics with anyone.

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When developing safety plans, use a fresh approach to each situation because each family is unique. Devising achievable and creative ways of holding the batterer accountable, on as many fronts as possible, will increase safety. It will be important to use your own creativity, critical thinking skills, social work experience and local contacts to craft viable strategies for each unique situation. The suggestions below may help you start that process.<sup>12</sup>

### *Examples of strategies to increase safety*

Remember: Before trying to implement a strategy, always check with the victim of the intimate partner violence about any risks a strategy may create.

- Guns are the single most significant risk factor for murder in a domestic violence situation. Create a plan to address this safety risk. It may be for the abusive partner to turn over all guns to a safe party, such as a local law enforcement agency. Then check with the safe party to confirm that this has been done. Ensure the ammunition is removed from the weapons. (Make sure ahead of time that the safe party, i.e., the law enforcement agency, is prepared to take custody of guns and store them. This is a perfect example of how DHS Child Welfare can proactively create partnerships in the community that can make children safer.)

*Note:* If the victim chooses to seek a restraining order, the removal of weapons may be included in that court order. However, it is usually safer for DHS to seek an order of the court regarding removal of weapons as part of the dependency process, if needed.

- Request that the abusive partner move out of the family home to allow the children and non-offending parent to remain there. Always have a way to know where the abusive partner is living and how to confirm this. Include

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<sup>12</sup> It is vital to remember that, especially with a coordinated effort at monitoring accountability, an abusive person may seem to be compliant. This does not mean that the person has or will make long-term, self-directed changes in their abusive behavior. People who use coercive and controlling behaviors on their intimate partners can be experts at manipulation. People using abusive tactics can maintain appropriate behavior for significant periods of time, especially if it serves their purposes. Cooperation with safety strategies, such as the ones outlined here, does not constitute proof of change and does not make abusive partners safe to have unsupervised time or custody of their children. Some ideas for evaluating change and other resources can be found in the *Child Welfare Practices for Cases with Domestic Violence* at <https://apps.state.or.us/Forms/Served/ce9200.pdf> (Expected Outcomes ideas are on page 61.)

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things like unannounced visits, other non-scheduled contacts, and supervision by neighbors to ensure cooperation by the batterer with the separate living arrangements. While this strategy is often the best option for the victim and the children, it is an action required of the batterer and we should never imply that the victim should be in charge of the batterer's actions. Never rely on the victim to enforce, or even monitor, compliance with this request.

*Note:* DHS does not have the legal authority to require parents to leave their home.

- Restrict the abusive partner's contact with the children. Supervised parenting time is the safest strategy for contact with the children until the level of danger is clear. This should be in a neutral location, never one that is in the control of the abusive partner, with a safe plan for the arrival and departure of the children.

*Note:* DHS does not have the legal authority to restrict contact between a parent and child for an extended period of time without a court order.

- Encourage the abusive partner to make a commitment to contribute to the support of his or her children, i.e., paying child support, paying for child care, ensuring that there is a safe vehicle to transport the children in, ensuring that insurance is available, making house payments, contributing to the maintenance and upkeep of the children's place of residence, paying for education-related costs, etc. Explain how these choices and behaviors help demonstrate the abusive partner's commitment to the children.
- Follow-up routinely with the abusive partner in as many ways as possible to make sure that person understands and is complying with any restrictions or commitments. At these contacts, reinforce appropriate messages and make it clear that all partners are working together. For example, explain and/or reinforce with the batterer any protective order provisions that may be in place or reiterate the information being covered in the batterer's intervention group since your last meeting.

### **Create a network of people to keep tabs on the batterer**

Again, remember: ALWAYS check with the victim of the intimate partner violence

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about any risks making contacts like these might pose. Some partners to approach might be:

- Connect with the abusive partner's employer in the right situation. If appropriate, keep the employer informed and elicit information and support. For example, one employer agreed to report concerning behaviors of an employee and another provided mentoring on healthy masculinity to an employee.
- Speak with appropriate school personnel about the abusive partner's contact restrictions regarding the children. Check in routinely to be sure these limits are being respected. If there is a protective order of any kind, be sure the school has a copy.
- Connect with neighbors, family and friends of the abusive partner, gauging their ability to help create safety. If they will support safety for the family and accountability for the abusive partner, keep these people informed throughout the process and continue to elicit information from them about the abusive partner's state of mind, location, stability, compliance, etc.
- Connect with social supports for the abusive partner like churches, social clubs and sports teams. Gauge their ability to help create safety and accountability. If appropriate, keep these people informed and elicit ongoing information about the abusive partner's state of mind, location, stability, cooperation, etc.
- Ask the abusive partner to re-connect with service providers who have worked with him or her in the past. Enlist their support in creating safety and sending a unified message to the abusive partner.
- When the criminal justice system is involved, coordinate with court processes and probation officers. Understand what the court and/or probation department has ordered and reiterate those orders in your routine visits with the abusive partner.
- When the civil justice system is involved (protective and custody orders), coordinate with the court processes. Be sure to have copies of court orders. Review these orders in your routine visits with the abusive partner.
- Use safety service providers (who may be any of the people mentioned above) to help maintain contact with the abusive partner and track information about the abusive partner's state of mind, location, stability, compliance, etc.

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- Ensure all persons involved with the family are aware of the requirements of the protective action plan/initial safety plan/ongoing safety plan and all are encouraged to contact DHS with any concerns, e.g., violations by the abusive partner of the plan, signs of unpredictability, threats by abusive partner to take charge of the situation.
  - Document all commitments and restrictions in the protective action plan, initial safety plan, ongoing safety plan, case plan, action agreement, etc.

Finally, it is important to remember that these strategies only focus on safety related specifically to domestic violence. Plans should address all safety threats to the family that you are aware of: child sexual abuse, addiction, mental health, etc.

If the adult victim wants to separate from the batterer, discuss options for separation, including financial assistance. It is imperative, however, that these options are fully explored, because leaving may increase the adult victim's and children's risk of being murdered. . Offer a domestic violence advocate's help for safety planning.

Do not mandate obtaining a restraining order. While a restraining order can be a useful tool, it may not be appropriate or may not lead to greater safety in some situations. Restraining orders may only escalate the situation. Also, they are only effective if the batterer is likely to comply. An adult victim may not believe it is safe to get a restraining order. This may be a protective behavior and does not necessarily indicate an adult victim's inability to protect.

A protective action plan or initial safety plan may include the child being placed with relatives, shelter care or a family friend. Per Oregon Administrative Rules, "If the protective action plan or initial safety plan includes a parent or caregiver, who is the alleged perpetrator, consenting to leave the family home without their children or have their children leave the family home without them, the CPS worker must, in consultation with a supervisor, file a petition alleging the child is within the jurisdiction of the juvenile court pursuant to ORS 419B.100 within 10 calendar days of the date the parent or caregiver or their children leave the home if the plan is still necessary to assure child safety and will continue to be necessary for the immediate future."

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Domestic violence shelters are good referrals for an adult victim needing emergency shelter. However, domestic violence shelters cannot force someone to stay in shelter and can only release information with the consent of the adult victim. In those situations where there are concerns about the child's safety with the adult victim and a more structured setting is needed, a shelter may not be appropriate.

## **Determine the disposition of the CPS assessment**

### **Threat of harm: domestic violence**

Consider threat of harm: domestic violence (refer to "threat of harm" guidelines) as the type of abuse that occurred when a child has been exposed to domestic violence and there is reasonable cause to believe that:

- The battering behavior could result in severe harm to the child; and
- The child was present and in direct proximity to the violence (including but not limited to being held while partner is being assaulted, or being physically restrained from leaving); or
- The child was actively intervening or threatening to actively intervene in a violent act; or
- A child has been exposed to the battering behaviors of a parent/caregiver such as:
  - » Violence increasing in severity or frequency; and/or
  - » Repeated serious incidents of domestic violence; and/or
  - » Use of weapons; and/or
  - » Believable threats of suicide or homicide; or
  - » A single act of extreme violence.

Also consider founded for threat of harm if the parent/caregiver has caused the death of the child's other parent/caregiver and the behaviors, conditions or circumstances that caused that death have not improved or stopped.

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## **Physical abuse**

Consider physical abuse as the type of abuse that occurred when a child was injured during domestic violence.

The batterer, not the adult victim of domestic violence, is identified as the perpetrator of child abuse in the context of domestic violence.

There are situations, however, in which the adult victim of domestic violence may perpetrate another form of child abuse or neglect not connected to the batterer's pattern of coercive control.

## **Identify how the impending danger safety threat is occurring**

Understanding how the impending danger safety threats are occurring within the family is a critical component when analyzing safety-related information and establishing an initial safety plan or ongoing safety plan. Consider the length of time, frequency and predictability of the threats as well as the specific times that may require special attention, identified individual or family behaviors, and conditions or circumstances that prevent a parent from adequately functioning in a parenting role. When looking at those behaviors, conditions or circumstances, focus on the batterer's behaviors and how they present a threat to the child. The batterer, not the adult victim, is responsible for those behaviors.

## **Determine whether a child is safe**

Factors that may indicate a child is safe include:

- Ongoing supervised access or no access by the batterer to the children (if the batterer is a legal parent, a civil court order is in place to enforce restriction on access);
- Active involvement with the batterer by the criminal justice system and an appropriate intervention program with clear monitoring; or
- Support services in place for the adult victim and children that help the adult victim provide safety and mitigate the impact of the batterer's behavior.

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The above factors need to be sustained over time, as opposed to a short-term situation.

If you determine that a child is safe, whether or not a family has moderate to high needs, consider making referrals to the local domestic violence service providers and other community resources for services. Talk to the adult victim and the children about domestic violence safety planning.

### **Develop an ongoing safety plan**

If it is determined that a child is unsafe, an ongoing safety plan must be developed.

*Efficient, effective safety planning*<sup>13</sup>

- Requires knowledge about batterer's pattern of coercive control;
- Builds on victim's efforts to promote the safety and well-being of the children;
- Is developed in collaboration with the victim;
- May include a domestic violence shelter, police or protective order, but does not mandate or rely on these interventions;
- Includes informal resources (friends, family, employer);
- Attempts to account for other critical needs of the children, like stability;
- Is well documented.

Whenever possible, develop in-home safety plans for keeping the non-offending parent and children together. One of the key resiliency factors for children is their bond to the non-offending parent. Nurturing that bond by keeping them together may help mitigate the impact of the batterer's behavior. Additionally, national experts caution that for those children in homes where there is domestic violence, disruption of that bond may be even more traumatic than in situations where there is no domestic violence.<sup>14</sup>

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<sup>13</sup> "Safe & Together Model" by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

<sup>14</sup> Summary of Expert Testimony on the Impact of Children Witnessing Domestic Violence from the Decision of U.S. District Judge Jack Weinstein in *Nicholson v. Williams*, Case #00-CV2229, U.S. District Court, Eastern District of New York.

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A juvenile court petition must be filed or a civil court order must be in place in order for either parent's access to the children to be limited. A juvenile court order can limit a legal parent's contact. A juvenile court restraining order can limit or prohibit the batterer's contact with children if they have been physically or sexually abused and a petition has been filed.

When child protective services must file petitions in juvenile court or place children, use language that focuses on the batterer's role in creating harm or risk to the children. For example:

- "Despite the mother's efforts to protect the children, the perpetrator is creating conditions that are a threat to the children's safety."<sup>15</sup>

Factors that might determine whether child safety can be provided only through out-of-home placement:

- No other workable plan can be put in place;
- Other types of child abuse create additional present danger safety threats or impending danger safety threats that cannot be managed;
- The batterer continues to expose children to serious violence despite intervention;
- The child has reduced ability to manage circumstances or has conditions that increase vulnerability; or
- Adult abuse of alcohol or other drugs present threats to child safety.

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<sup>15</sup> Adapted from "Safe & Together Model" by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

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The ongoing safety plan may include placement with a non-custodial parent or another relative. When considering these placements, assess for domestic violence in their relationships. The placement may be suitable if you determine that:

- There is no history of a pattern of power and control by any person in the household;
- The relatives understand and acknowledge the risks presented by the batterer;
- The relatives do not blame the adult victim or children for the violence;
- The relatives understand or are willing to learn the effects of domestic violence on the children;
- The relatives can work with child protective services to provide continued safety; and
- Additional services and supports are needed.

### **Plan child safety meetings**

Be thoughtful and carefully plan child safety meetings. Ask the adult victim what will create a safe environment to allow for full participation. Put safety measures in place for before, during and after the meetings.

If the batterer is a legal parent, begin with the assumption that separate meetings will be held with the non-offending parent and the batterer.

If the adult victim wants the batterer present, ensure that there are people present (i.e., batterer intervention specialists, parole and probation or law enforcement) who will clearly hold the batterer responsible and interrupt any intimidating behavior. Make sure there aren't restraining orders or no contact orders that would prohibit joint meetings.

### **Establish conditions for return home**

Conditions for return are based on what it takes to establish or re-establish an in-home initial safety plan or in-home ongoing safety plan. The core of conditions for return is the four in-home safety plan criteria and, as a result, the conditions for

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return are developed around the in-home safety plan criteria that are missing. It is important, however, to continuously assess ALL four criteria, not just those that are the basis for the conditions for return; if family circumstances have changed since the conditions for return were developed, the conditions for return may need to be updated.

The in-home safety plan criteria are:

- There is a home-like setting where the parent and child live.
- The home is calm enough to allow safety service providers access and activities to occur.
- At least one parent is willing to cooperate with the plan.
- The necessary safety activities and resources are available to implement the plan.

### **Indian Child Welfare Act**

In addition to administering ICWA policies, tribal courts can issue tribal restraining orders and prosecute misdemeanor assaults committed on tribal lands while federal courts can prosecute the felony assaults. Tribes may have domestic violence specialists in their courts or social services. Check with the ICWA contact or the local domestic violence service provider.

### **Identify and notify legal parents of Department involvement**

When searching for absent parents, always ask about domestic violence history in that relationship. Check police records, restraining order information and other sources. If the case involves an adult victim concealing his or her own whereabouts for safety reasons, discuss safety planning and take necessary precautions when preparing written information and court documents.

There is no exception to notifying a legal parent if the child is placed in custody.

If you have concerns or questions about pursuing child support, contact the Children's Benefits Unit.

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## Arrange visitation

The batterer's relationship as a parent presents complex issues. The batterer may not have been physically abusive to the children. However, the climate of domestic violence is traumatic for both the adult victim and the children. In addition, the tactics of manipulation and control may be present in the batterer's relationship with the children.

- Start with the assumption that visits between the batterer and the children, if they occur, should be supervised.
- Check on possible restraining orders, no-contact orders or conditions of probation or parole that would affect visitation.
- Arrange visits carefully to ensure the safety of the children and the adult victim. Schedule separate visits when possible to increase safety and to allow the non-offending parent uninterrupted parenting time with the children.
- Give the visit supervisor adequate information on domestic violence and tactics of the specific batterer.
- Talk to the child and non-offending parent to identify any of the batterer's behaviors that cause discomfort or fear.
- Ask the non-offending parent and the child (if old enough) to identify subtle tactics the batterer uses to manipulate or threaten the child and watch for those in the visitation.
- Have a child use a code word if feeling unsafe.
- Reassure the child that it is the responsibility of the visit supervisor to intervene in the visit.
- Set limits on behaviors and conversation allowed in the visits.
- Do not allow the child to be used to exchange information, gifts or other property or tell the batterer about the non-offending parent.

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## **Mail or deliver notifications**

Department policy requires that perpetrators of child abuse or neglect receive written notification of their right to contest the finding. In domestic violence situations, the method of delivering the notice should maximize safety of all involved: the child, adult victim and caseworker. Safety may be affected whether the batterer is in the home or living elsewhere. If notification may make a child or adult unsafe, a CPS supervisor may authorize an exception to the requirement to provide notification based on documentation supporting that conclusion.

Safety should be a primary consideration in choosing whether to hand-deliver or mail the notice. Inform the adult victim of our requirement to deliver the notice and engage the adult victim in safety planning. Law enforcement assistance may be helpful.

Whenever possible, hand-deliver directly to the batterer or use other methods that do not place the adult victim in the position of delivering the notice. If mailing the notice is necessary:

- Inform the adult victim of the need to deliver the notice;
- Engage the adult victim in planning a safe delivery;
- Encourage the adult victim to not accept delivery for the batterer;
- Explain the notice to the batterer; and
- Inform the batterer that the notice will be sent and that it is appropriate for him or her to sign for it.

## *Permanency*

### **Perform protective capacity assessment (PCA)**

The CPS assessment concludes with a determination of whether a child is safe or unsafe. When it is determined the child is unsafe, at the conclusion of the assessment, an ongoing safety plan is developed and the case is opened for services. The next phase is assessing the protective capacity of the parents or legal guardians. The PCA is intended to be a process of mutual discovery between

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the parent(s) and the caseworker. It should reveal the cognitive, behavioral and emotional characteristics that are present (the enhanced protective capacities/strengths) and helpful in safely parenting, or not present (the diminished protective capacities/needs). The cognitive, behavioral and emotional characteristics should directly relate to the identified impending danger safety threats.

When the caseworker understands which protective capacities must be increased to regain child safety, the caseworker can develop expected outcomes that are measurable and clearly focused on child safety. The focus is not on the services a parent must complete, but rather on the changes that need to happen for the parent(s) to safely parent in a sustainable way.

The PCA looks at the impact of the batterer's pattern of coercive control, the parents' perspective on or awareness of the impending danger safety threats and the parents' motivation to make needed changes. The PCA then determines whether the parents and the Department can agree on what change is needed.

Domestic violence may not have been initially identified as a present danger safety threat or impending danger safety threat in the assessment process when other abuse and neglect issues were present. Building rapport with the adult victim during the PCA can facilitate the sharing of information about domestic violence. This discovery can lead to a change in the ongoing safety plan and in the conditions for return.

The following material relates to families for which domestic violence has specifically been identified as an impending danger safety threat; in other words, one or both parents' or caregivers' behavior is violent and/or they are acting (behaving) dangerously. Other impending danger safety threats and diminished protective capacities may also exist in families where domestic violence is present.

There are four stages in the initial PCA: preparation, introduction, exploration, and change strategy and case planning. The first stage is undertaken by the caseworker to thoughtfully prepare to engage the parents in the process. The second stage is intended to introduce the concepts of the PCA to the parents and to request their willingness to engage in the process. In the final two stages, which are combined in this discussion, you discover what needs to change and develop a case plan to bring about those changes.

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We need to engage with both parents to determine what they are already doing to protect the child and how we can build on that, both in terms of enhancing physical and emotional safety and well-being for the child.

It is important to continue interviewing and asking about domestic violence in ways that promote the adult victim's safety. Separate interviews and plans should be considered.

### **PCA with the batterer**

It is the batterer's violence and controlling behaviors that are making the child unsafe. Identify specific behaviors and document how those behaviors are affecting the child. Types of behaviors can include using the children as weapons against the other parent by controlling access; having the children tell the batterer what the other parent is doing; repeatedly reporting the non-offending parent to the Department; undermining the non-offending parent's parenting; and undermining the normalcy and stability that children need<sup>16</sup>. Examples include the following:

- The batterer has no history of protecting the children.
- The batterer uses violence when the child is in extremely close physical proximity, causing a high likelihood of injury.
- The batterer does not view violent and controlling behaviors as in direct conflict with his or her responsibilities as a parent. The children are at high risk of physical injury.
- The batterer does not display concern for the children and their experience.
- The batterer is not intent on emotionally protecting the children.
- The batterer denies violent behavior toward the adult victim and in the presence of the children.
- The batterer does not believe the behaviors are causing the child to be fearful and regress in school.

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<sup>16</sup> Connecticut Domestic Violence Consultant Initiative

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- The batterer continuously undermines the adult victim's relationship with the child.
  - The batterer has an inaccurate perception of reality. This does not mean that there is a psychiatric disorder. This means the batterer is using criminal thinking and has a sense of entitlement that the behavior is normal and acceptable.
  - The batterer feels entitled to use controlling tactics over the adult victim and children.
  - The batterer's self-perception is as the victim — blaming the adult victim, the children and the system for the need for intervention.

Don't use diminished protective capacities that focus on being self-aware or on meeting emotional needs. That may lead to action plans and services that emphasize mental health that will not address the battering behaviors. Similarly, psychological assessments will not identify whether someone is a batterer. Domestic violence is a behavioral problem based on the use of power and control, not a mental health issue. Use Batterer Intervention Programs for assessment.

It is very important to clearly document and discuss the batterer's pattern of coercive behavior, actions taken by the batterer to harm the children, and the adverse impact of the batterer's behavior on the children. Understanding these patterns and their impact will help set child-centered expectations for batterers.<sup>17</sup>

- Examine how the batterer interferes with the normal development of the children.
- Focus on the specific actions that affect the children.
- Avoid double standards around mothers and fathers. As a culture, we often normalize the lack of nurturing and child care performed by fathers. It is important that expectations around promoting the well-being of children be equitable.
- Connect the batterer's pattern of coercive behavior to the children's needs: either how the behavior has created needs or how the behavior has ignored or denied needs.

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<sup>17</sup> Based on "Safe & Together Model" by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

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- The batterer may lack knowledge about domestic violence and its impact on children.
  - The batterer may be facilitating the addictive behaviors of the non-offending parent.

Psychological and substance abuse assessments will identify if batterers have co-existing issues that also need to be addressed.

For the batterer who is a substance abuser, refer to both batterer intervention programs and chemical dependency programs. Substance abuse does not cause a batterer to exert power and control by battering. However, increasing substance abuse may make the battering more visible as the batterer may be less competent in covering up the battering. They still are separate issues, and both need to be addressed. Use chemical dependency programs that understand the dynamics of power and control and work cooperatively with batterer intervention and domestic violence service providers.

Do not have the batterer go to the same program as the non-offending parent. If this is not possible, make it clear to the batterer that he or she is responsible for avoiding contact with the non-offending parent.

Also identify the batterer's positive protective capacities. The batterer may take action and provide for the child's basic needs, including paying child support. The batterer may express love and concern for the child. Appropriate concern for the child may be determined by compliance with the safety plan and appropriate visitation. The batterer may support the non-offending parent's ability to parent and encourage that person's relationship with the child. These strengths can be built upon and used to engage the batterer in the change process.

An excellent resource on how to work with batterers is "Accountability and Connection with Abusive Men" by Fernando Mederos. It can be downloaded from [www.thegreenbook.info/documents/Accountability.pdf](http://www.thegreenbook.info/documents/Accountability.pdf). Strategies from that document include:

- Treating the batterer with respect but setting firm limits on behaviors in the interviews;

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- Keeping the focus on the impact on the children.

### **PCA with the adult victim**

The requirement for a protective capacity assessment with the victim does not mean that we are blaming the adult victim for the situation. The children's safety is the focus. Whenever a parent is unable to protect the children from a present danger safety threat or impending danger safety threat, the Department must be involved until the behavior, condition or circumstance is managed or no longer exists. The focus isn't on blaming the non-offending parent for not being protective; the focus is on identifying what can be done to increase the parental capacity to safely parent the child.

These capacities, once identified, are the basis of the protective capacities that will be used to effect change. In other words, we could document the full spectrum of the non-offending parent's efforts to promote the safety and well-being of the children. Document those as protective capacities and build on those actions. We can also identify and document what the batterer has done to interfere with the non-offending parent's ability to safely parent, and what needs to happen to remediate that interference and regain child safety.

When identifying the non-offending parent's strengths and potential actions:<sup>18</sup>

- Do not rely on law enforcement, restraining orders, or forcing the batterer to leave the home/family.
- Avoid the double standard around mothers and fathers. Mothering behaviors that we, as a culture, often take for granted are examples of the non-offending parent's promotion of the children's safety and well-being.
- Identify prior traditional and non-traditional safety planning.
- Identify day-to-day care of the children.
- Document the positive impact this day-to-day care has had on the children.

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<sup>17</sup> Based on "Safe & Together Model" by David Mandel at [www.endingviolence.com](http://www.endingviolence.com)

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It is very important to be specific about what is contributing to the adult victim's inability to adequately protect the child. The adult victim may have co-existing issues of substance abuse or mental health that could be due to the trauma experienced. It also may be that after repeatedly taking action and using available resources without success, the adult victim needs help overcoming the barriers that have prevented success in the past.

Some adult victims may have started abusing substances as a result of the domestic violence and/or other trauma, or may have been coerced by the person's batterer. Recent research on trauma recommends addressing the trauma during the treatment for substance abuse, rather than doing substance abuse treatment first, then dealing with the impact of the domestic violence. Consult with both domestic violence service providers and chemical dependency programs. Address additional safety needs when the batterer is also the adult victim's supplier.

Use chemical dependency programs that understand the dynamics of domestic violence and victimization. Many treatment and 12-step programs offer gender-specific treatment and support groups. Do not have the adult victim go to the same program as the batterer. If this is not possible, work with the program to maximize safety and support. Look at scheduling attendance on different days or times, attending different groups, etc.

Resist referring adult victims for mental health assessments. The effects of trauma do not constitute mental illness. General understanding of the effects of trauma is just beginning. If a mental health assessment is deemed necessary, carefully choose evaluators who have a good understanding of domestic violence, trauma and its effects on victims.

### **Establish expected outcomes**

Use what you learn about the impending danger safety threats and diminished protective capacities to determine the expected outcomes. Clearly identify the behavioral, emotional and/or knowledge changes that are necessary in order for the children to be safe and for the Department to close the case.

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For the batterer, the expected outcome can be that the batterer takes responsibility for the violence and ceases to expose the children to controlling and violent behavior. Examples of behaviors that support accountability, responsibility and safety include:

- Ceasing to use tactics of coercive control, including violence if that is part of the pattern;
- Accepting responsibility for the choice to use tactics of coercive control and/or to be violent and saying that clearly to the adult victim and children;
- Accepting the responsibility for choosing to expose the children to domestic violence;
- Agreeing to and following through with safe levels of contact;
- Supporting the non-offending parent's parenting and relationship with the child;
- Demonstrating an understanding of the effect the domestic violence has on the children by supporting their participation in counseling;
- Demonstrating equal responsibility for the children's safety and well-being;
- Meeting the children's basic needs, such as financial and emotional support, without manipulating them or using them as bargaining tools.

For the adult victim, determine expected outcomes that are realistic. For example, an expected outcome that the adult victim will live free of violence is not realistic as an outcome. The adult victim has no control over whether the batterer is violent.

We cannot limit contact between adults. Therefore, an outcome that requires the adult victim to have no contact with the batterer is not appropriate.

An outcome requiring that the non-offending parent not allow the batterer to have contact with the children also is not appropriate. The adult victim may not have any control over whether or not the batterer makes contact. Additionally, there may be civil court orders that give the batterer access to the children. The responsibility for safe and appropriate contact with the children lies with the batterer.

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Appropriate outcomes for the non-offending parent are those that demonstrate adequate skill in fulfilling caregiver responsibilities. Examples include that the non-offending parent will:

- Have an appropriate plan and arrangements for child safety if there is contact from the batterer;
- Access civil court resources that restrict contact, if appropriate; or
- Mitigate the impact of the batterer's violence on the child by involving the child in counseling.

### **Create action agreements**

Action agreements outline the actions, services and support needed to improve the behaviors, conditions or circumstances to increase child safety and enhance a parent's protective capacity.

#### **Action agreements for the batterer**

It is important for batterers to first stop being violent, begin taking responsibility for the violence, and reduce their use of power and control tactics. Only then may it be possible for the other parent or the children to safely participate in other services with them. Unless these criteria are met, family or couples counseling or other services with joint contact are not appropriate.

- Explore ways the batterer can meet the expected outcomes.
- Refer the batterer to a batterer intervention program that is in compliance with the state administrative rules creating batterer intervention standards. These can be accessed at [http://arcweb.sos.state.or.us/rules/OARS\\_100/OAR\\_137/137\\_087.html](http://arcweb.sos.state.or.us/rules/OARS_100/OAR_137/137_087.html).
- Do not refer batterers using a pattern of coercive control to an "anger management" program. (Refer to the following section on batterer intervention.)
- Coordinate with the criminal courts, batterer intervention programs, parole and probation, civil courts and other systems holding the batterer accountable.

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- Sequence action agreements and services to focus first on “barrier” issues that must be dealt with before family members can benefit from other services. For example, batterers with coexisting substance abuse problems may need to establish initial recovery; those with an acute and untreated mental illness may need to be stabilized on medication. However, it may be more effective to treat these issues concurrently. Consult with the batterer intervention program.
  - Refer to culturally competent or culture-specific programs.

### **Action agreements for the adult victim**

Schedule individual meeting(s) with the adult victim without the batterer present to develop the case plan.

Don't mandate a specific service or option; instead, explore choices with the adult victim to meet the expected outcomes.

- As with any Department case, develop action agreements that are realistic and focus on the most immediate issues first. The case plan can include multiple action agreements. Talk with the adult victim about other issues such as housing, court involvement or employment and coordinate planning so as to not overwhelm.
- For non-offending parents who also have substance abuse and/or mental illness, recent research stresses the importance of dealing with trauma in conjunction with dealing with the substance abuse/mental illness as opposed to dealing with one first.
- Focus on the concrete supports victims need (housing, financial assistance, legal protection) as well as support that counteracts coercive tactics used by the batterer.
- Continue to document the batterer's pattern of coercive control, including tactics such as isolation, taking away the adult victim's power to make decisions or humiliation. This will help to identify the support services needed. Empower the adult victim by building strengths and supporting decision making.
- Refer to culturally competent or culture-specific programs.

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## Services for children

Include the children's unique needs and strengths in service planning.

Your community may lack services for child witnesses of domestic violence. If a child is living with the non-offending parent in a shelter, there will be individual support for the child, and there may be a children's group. Some domestic violence service providers, other community agencies and private therapists also offer voluntary groups for children in the community.

The immediate goals with children are to:

- Assess threats to the children's safety and develop ways for them to be safer.
- Assure the children that the violence and intervention are not their fault.
- Identify and work toward healing the effects of the violence.
- Maintain the children's bond with their parents, as appropriate.

Longer-term goals are to assess the trauma to the child and determine if mental health and other support services are needed. Children may access mental health services through the Oregon Health Plan. In addition, children who witness domestic violence may be eligible to have counseling paid for by the Oregon Crime Victims Compensation Program. To do that, the adult victim must be eligible and file a claim. Prosecution of a case is not necessary in order to qualify for crime victim compensation or mental health services. The child's counseling can be paid as a benefit on the adult victim's claim. Check with your local crime victim assistance or crime victim compensation program for details.

If the children are living with ongoing domestic violence, they should have a plan to stay safe. The plan should include a "safety net" of supportive adults outside the home.

## Plan and facilitate family meetings

Be thoughtful and carefully plan family meetings. Ask the adult victim what will create a safe environment to allow for full participation. Put safety measures in place

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for before, during and after the meetings:

- Begin with the assumption that the batterer will be excluded from the meeting. The batterer's input can be included in other ways or at a separate meeting.
- Carefully plan family meetings. Develop safety plans for before, during and after the meetings.
- Arrange for support people for both adult and child victims.
- Ask a domestic violence service provider to give information about domestic violence to the participants, if it is safe to do so.
- If the adult victim wants the batterer present, ensure that there are people present who will clearly hold the batterer responsible and interrupt any intimidating behavior (e.g., Parole and Probation, law enforcement, or a domestic violence point person from the Department).

The following link identifies the current DV point person for each district: [www.oregon.gov/DHS/abuse/domestic/consumers.shtml](http://www.oregon.gov/DHS/abuse/domestic/consumers.shtml).

### *Ongoing safety monitoring*

As in any case, continue to monitor for safety as the case progresses. As the adult victim and children feel safer, they may make more disclosures about domestic violence.

The batterer may still be exercising power and control even if out of the home. The batterer may use visitation or court procedures to continue to intimidate the victims. Asking about safety throughout the case can help identify these tactics.

On an ongoing basis:

- Conduct individual interviews with parents and children to assess safety;
- Maintain regular contact with family members, safety service providers and support people identified by the parents; and
- Maintain regular contact with parole and probation, batterer intervention programs, and other service providers to assess safety and progress.

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## *Case closure*

As with any case, the case is closed when the expected outcomes are met and the child is safe.



# DHS

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