

**North Carolina Division of Social Services**

**Family Support and Child Welfare**

**Domestic Violence**

**Resources for Enhanced Practice**

## Background and Resource Information

Efforts to begin the process of making safety and stability a priority when child well being is impacted by domestic violence were guided in North Carolina through the development of the Child Well Being and Domestic Violence Task Force. The mission of this task force was to design a strategy for North Carolina to adopt policies and practice recommendations and an implementation plan that maximizes the safety of all family members, empowers victims, and holds perpetrators of domestic violence and child maltreatment accountable. The members of this task force included a multidisciplinary representation ranging from child advocates, domestic violence advocates, courts, law enforcement, public health, public instruction, human services representatives, victims, judges, legislators, researchers, and citizens. The task force formed subcommittees to further develop policy and protocol around the following areas:

- funding,
- courts and law enforcement,
- community-based services,
- and child protective services.

“Intimate partner violence is primarily a crime against women. In 2001, women accounted for 85% of the victims of intimate partner violence and men accounted for approximately 15% of the victims.”<sup>1</sup> This is not to say that women never batter or that men cannot be victims of domestic violence; there are some incidents in which women abuse men. In addition, domestic violence also occurs in same sex relationships.

### Prevalence

#### Adult Domestic Violence

- 3 million women are physically abused by their husbands or boyfriends per year.<sup>2</sup>
- Nearly one-third of American women (31%) report being physically or sexually abused by a husband or boyfriend as some point in their lives, according to a 1998 Commonwealth Fund survey.<sup>3</sup>
- Women of all races are about equally vulnerable to violence by an intimate.<sup>4</sup>
- Thirty-seven percent of women who sought treatment in emergency rooms for violence-related injuries in 1994 were injured by a current or former spouse, boyfriend or girlfriend.<sup>5</sup>
- Women are much more likely than men to be killed by an intimate partner. In 2000, intimate partner homicides accounted for 33.5 percent of the murders of women and less than 4 percent of the murders of men.<sup>6</sup>

#### Children and Domestic Violence

<sup>1</sup> Bureau of Justice Statistics Crime Data Brief, Intimate Partner Violence, 1993-2001, February 2003.

<sup>2</sup> The Commonwealth Fund, Health Concerns Across a Woman’s Lifespan: 1998 Survey of Women’s Health, May 1999.

<sup>3</sup> Ibid.

<sup>4</sup> US Department of Justice, Bureau of Justice Statistics, Violence Against Women: Estimates from the Redesignated Survey, August 1995.

<sup>5</sup> US Department of Justice, Bureau of Justice, Violence Related Injuries Treated in Hospital Emergency Departments, August 1997.

<sup>6</sup> Bureau of Justice Statistics Crime Data Brief, Intimate Partner Violence, 1993-2001, February 2003.

- The US Advisory Board on Child Abuse suggests that domestic violence may be the single major precursor to child abuse and neglect fatalities in this country.<sup>7</sup>
- Studies suggest that between 3.3 and 10 million children witness domestic violence annually.<sup>8</sup>
- Slightly more than half of female victims of intimate partner violence live in households with children under age 12.<sup>9</sup>
- Child abuse occurs in 30 – 60% of family violence cases that involve families with children.<sup>10</sup>
- In homes where partner abuse occurs, children are 1500 times more likely to be abused.<sup>11</sup>
- In a national survey of more than 6,000 American families, 50 percent of the men who frequently assaulted their wives also frequently abused their children.<sup>12</sup>
- In NC from July 1, 2004 – June 30, 2005, 6,143 children received services staying in their local domestic violence shelters.

### One Size Does Not Fit All

Domestic violence is an issue of power and control. While perpetrators of domestic violence may present as “angry” or describe “being out of control” when abusing their partners, the majority actually plan their attacks in advance rather than act in the “heat of the moment” out of anger. Many tactics used by perpetrators of domestic violence, including isolating the victim, psychologically and emotionally abusing the victim, and controlling finances, are more rooted in jealousy, a sense of entitlement, and are a deliberate attempt to gain and maintain control over their partners. Perpetrators are not necessarily unable to manage their anger, and rather do so quite well when systematically, deliberately and in a calculated manner by abusing their victims non-physically. Perpetrators of domestic violence are often very capable of controlling their anger with their employers, friends, neighbors, and professionals. Many perpetrators of domestic violence plan their violence, taking care to cause no injuries, or to place injuries on the victims’ bodies in areas typically concealed by clothing; they also commit acts of violence when there are no witnesses in an effort to conceal the violence and to avoid consequences. Perpetrators of domestic violence target their victims, and sometimes, their children while rationalizing that the victims instigated or provoked them to use violence. These rationalizations explain why many perpetrators present as victims themselves; rather than accepting responsibility for their beliefs and actions. They typically over-focus on the victims’ behaviors, actions, and “shortcomings”. **Blaming the non-offending parent for being abused is**

<sup>7</sup>US Advisory Board on Child Abuse and Neglect, US Department of Health and Human Services, *A Nation’s Shame: Fatal Child Abuse and Neglect in the United States: Fifth Report*, 1995.

<sup>8</sup> Carlson, Bonnie E. (1984). Children’s observations of interpersonal violence, pp. 147-167 in A.R. Roberts (Ed.) *Battered women and their families* (pp. 147-167). NY: Springer. Straus, M.A. (1992). Children as witnesses to marital violence: A risk factor for lifelong problems among a nationally representative sample of American men and women. *Report of the Twenty- Third Ross Roundtable*. Columbus, OH: Ross Laboratories.

<sup>9</sup> US Department of Justice, *Violence by Intimates: Analysis of Data on Crimes by Current or Former Spouses, Boyfriends and Girlfriends*, March 1998.

<sup>10</sup> “The overlap between child maltreatment and woman battering.” J. L. Edleson, *Violence Against Women*, February 1999.

<sup>11</sup> US Department of Justice, Bureau of Justice, 1993.

<sup>12</sup> Strauss, Murray A., Gelles, Richard J., and Smith, Christine. 1990. *Physical Violence in American Families: Risk Factors and Adaptations to Violence in 8,145 Families*. New Brunswick: Transaction Publishers.

<sup>17</sup> N.C. Council for Women and Domestic Violence Commission, FY 2004-2005 Domestic Violence Statistical Report, [DVSA-DRC: North Carolina](#).

**counterproductive.** The non-offending parent is not responsible for stopping the abuse; only the perpetrator can stop his or her behavior. The non-offending parent needs adequate support, resources and protection tailored to meet the safety needs of the child as well as his or her own. CPS is able to intervene to increase safety and stability for the children and non-offending parent/adult victim. When intervening in domestic violence situations, it is crucial to remember there is no one prescription to cure the violence. Tailoring the response to the family's individual needs in a culturally sensitive manner is a key.

### **Why Must Child Protective Services, Domestic Violence Advocates and Child Advocates Work Together to Keep Non-Offending Parents/Adult Victims and Their Children Safe?**

The interface between child protective services and domestic violence is a reality, at the same time, there has been a disconnection in service provision between child protective services social workers and domestic violence professionals. These two response systems were designed with differing mandates, funding and goals. Tensions emerge as service providers, courts and communities attempt to provide services to families where violence to non-offending parents/adult victims and children overlap. It will take a collaborative effort to protect non-offending parents/adult victims and their children. **At the core of work with families is the desire for safety for all family members.**<sup>13</sup>

*Last night Gina's boyfriend Mark came home drunk again. They started arguing about money and he slapped and punched Gina. Seven-year-old Sammy ran into the kitchen and started hitting Mark and yelling, "Stop hurting my Mommy!" Mark picked Sammy up by the seat of his pants and yelled, "Stay out of this, you little bastard, you are just like your Dad, a real loser." He then dropped Sammy, who crashed to the floor. Sammy started crying, and Gina yelled at him to get out of the kitchen. Gina and Mark's one-year-old daughter Jessie started crying in the other room. Mark told Gina, "Let her cry or she'll grow up to be a stupid baby like you." A neighbor called DSS and said she could hear fighting and the children crying and was concerned that the children were hurt.*

Unfortunately, Gina's situation is not unique to domestic violence advocates and child protection workers. A woman is being physically and verbally abused, and her safety as well as the safety and well-being of the children are being compromised.

It is a difficult concept for child protective services workers to identify that this parent may be as much as a victim as her children. The CPS system may see children in danger and immediately hold the non-offending parent/adult victim responsible for failure to protect. In the past, the non-offending parent/adult victim may have been told only to leave to ensure the children's safety, without a thorough assessment as to whether this option was feasible, and without consideration of his or her strengths, the actions taken to protect the children and the danger he or she was placing the children and himself or herself in by leaving perhaps without a comprehensive safety plan.

In order to effectively serve these families, it is crucial that child protective services and domestic violence advocates work collaboratively, coordinating safety assessments and interventions to include the non-offending parent/adult victim and children. This level of collaboration requires a willingness on all stakeholders' parts to be educated around issues that are not in their areas of expertise.

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<sup>13</sup> Building Bridges Between Domestic Violence Organizations and Child Protective Services

## Myths and Facts about Domestic Violence

There are some commonly held beliefs about domestic violence that are actually myths. Research indicates that many of these beliefs are erroneous and may influence the ways non-offending parents/adult victims, their friends and family, the professionals they encounter, and the general public reacts to specific instances of intimate partner abuse.

Myth: Domestic Violence is a private, family matter.

**Fact: While many acts of domestic violence often occur in private outside the presence of witnesses, domestic violence is a serious social and legal issue affecting as many as 50% of all US women.<sup>14</sup> Assaults that occur in the context of domestic violence are crimes, and nearly 25% of American women report being raped and/or physically assaulted by a current or former spouse, cohabiting partner, or date at some time in their lifetime.<sup>15</sup>**

Myth: Domestic violence does not affect children.

**Fact: Research findings from the past two decades have documented children's exposure to domestic violence as well as the impact of that exposure. From that research, what is clear is that while not every child exhibits symptoms of being impacted by exposure to domestic violence, a significant number of child witnesses are profoundly impacted producing short-term and long-term effects.**

**Children may be affected emotionally, psychologically, and physically by exposure to domestic violence. The exposure may produce both short-term and long-term effects. Some of the possible effects of witnessing domestic violence on children of varying developmental stages are as follows:**

### Psychological/Emotional/Physical

<b>INFANT</b>	<b>Developmental delays Problems with attachment or bonding</b>	<b>Failure to thrive Listlessness Excessive crying Erratic sleeping and eating patterns</b>
<b>TODDLERS</b>	<b>Developmental delays Impaired or delayed speech Lack of confidence, clingy Poor motor abilities General fearfulness, anxiety</b>	<b>Separation anxiety Stomachaches Erratic sleeping and eating patterns</b>
<b>PRE-SCHOOL</b>	<b>Anxiety, general fearfulness Impaired cognitive abilities Poor motor skills Aggressive acts or withdrawn</b>	<b>Cruelty to animals Separation anxiety Destruction of property</b>

<sup>14</sup> US Department of Justice, Bureau of Justice Statistics Crime Data Brief, Intimate Partner Violence, 1993-2001, February 2003.

<sup>15</sup> The Centers for Disease Control and Prevention and The National Institute of Justice, Extent, Nature, and Consequences of Intimate Partner Violence, July 2000.

<b>SCHOOL-AGED (5-12)</b>	<b>Low self-esteem depression, anxiety Poor social skills Disrespect of females/sex role Stereotypes</b>	<b>Bullying, aggression, destruction of property Poor academic Performance Bedwetting, ulcers Nightmares</b>
<b>SCHOOL-AGED (12-17)</b>	<b>Low self-esteem Poor judgment; immaturity Aggressive or withdrawn Suicide ideation Lacks communication skills Poor interpersonal, social skills</b>	<b>Dating violence Poor academic performance Truancy, absences Bullying, violent Runaway, delinquent</b>

Myth: Domestic violence is irrelevant to parental fitness of the perpetrator.

**Fact: The fact that children are affected emotionally, cognitively, behaviorally, and developmentally when living in a violent home, and that one study found that “the presence of children did not alter the nature or severity of incidents as measured by specific acts of aggression or violence” leading to the conclusion that perpetrators of domestic violence do not consider the presence of children either in deciding whether to assault their intimate partners nor in considering the severity injury caused by the assault,<sup>16</sup> indicates that domestic violence is relevant to parental fitness of the perpetrator.**

Myth: Domestic violence is not a problem in my community.

**Fact: From July 1, 2004 through June 30, 2005, North Carolina programs served 50,726 victims in person, and provided crisis or support call services to 104,063 callers.<sup>17</sup> This number represents the victims of domestic violence who received services from local domestic violence programs, and does not encompass the many victims who do not seek help nor the incidents of domestic violence that go unreported. Nationally, only one-seventh of all domestic violence assaults come to the attention of the police.<sup>18</sup>**

Myth: Domestic violence only happens to poor women and women of color.

**Fact: Persons of any class, culture, religion, sexual orientation, marital status, age, and sex can be non-offending parents/adult victims or perpetrators of domestic violence.**

Myth: Victims of domestic violence provoke their assailants.

**Fact: The only person responsible for the abuse is the abuser. Perpetrators of domestic violence are responsible for their feelings, their beliefs and their actions, including their decisions to use violence and abusive, controlling tactics. The myth of provocation is used by abusers to justify their behaviors and to blame the victims for being abused.**

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<sup>16</sup> Hutchinson, I. & Hirschel, D. “The Effects of Children’s Presence on Woman Abuse”, *Violence and Victims*, Vol. 16 No. 1 (2001): Springer Publishing Company.

<sup>17</sup> N.C. Council for Women and Domestic Violence Commission, FY 2004-2005 Domestic Violence Statistical Report, <http://www.doa.state.nc.us/cfw/docs/stats0405.doc>

<sup>18</sup> Florida Governor’s Task Force on Domestic and Sexual Violence, Florida Mortality Project, 1997, p.3.

Myth: Alcohol and drug abuse cause domestic violence.

**Fact: A domestic violence perpetrators' use or abuse of alcohol and/or drugs is not the cause of his or her decision to use abusive and controlling tactics against his or her intimate partner. While alcohol and drug abuse often coexists with domestic violence, and may exacerbate or contribute to an escalation in severity of violence, there is no direct causal association between drugs and alcohol and domestic violence. There are persons who abuse drugs and alcohol who are not abusive towards their partners, and there are very violent domestic violence perpetrators who do not use alcohol or drugs. Requiring perpetrators of domestic violence to attend substance abuse treatment programs without corresponding treatment for domestic violence will not effectively end the violence.**

Myth: Perpetrators of domestic violence abuse their partners or spouses because they are under a lot of stress or unemployed.

**Fact: While stress and unemployment may coexist with or exacerbate domestic violence, they do not cause perpetrators of domestic violence to abuse their partners. Domestic violence cuts across socioeconomic lines, and therefore, cannot be attributed to unemployment or poverty. Most perpetrators of domestic violence are able to refrain from assaulting their bosses and co-workers, indicating they are able to manage stress in the workplace. Many individuals experience stress and may experience unemployment, yet do not choose to abuse and assault their intimate partners as a result.**

### **“Why Does He or She Abuse?”**

Many people think, “If it’s that bad, someone would just leave,” or, “someone must be getting something out of it since he or she is staying.” Instead of asking why someone stays, the question to ask is **“Why does someone abuse?”** This requires a shift in thinking, moving away from victim-blaming and towards perpetrator of domestic violence accountability. Social work professionals should lead the way in the move away from a victim-blaming attitude towards a systemic approach that holds perpetrators accountable for their violent actions and behaviors. This can be accomplished through engaging the family using family-centered principles of practice and involvement with the family. It will manifest itself in the way families are spoken to and approached by the social worker.

It is never the adult victim’s fault that he or she is being abused. The adult victim may experience “low self esteem” or be physically, emotionally and/or financially dependent on his or her abuser as a result of the domestic violence rather than these factors causing or creating his or her victimization. Rather than being abused because they have poor self esteem, adult victims may experience poor self esteem as a result of being targets of systematic, deliberate and constant emotional and psychological abuse aimed at stripping them of their sense of self worth; additionally, abusers are strategic in isolating their victims, ensuring that their emotional and psychological abuse will go unnoticed and unchallenged by people who care about and support their partners.

An adult victim may decide to stay in an abusive relationship for a variety of reasons. Focusing on the “shortcomings” or “character flaws” of an adult victim may be unproductive in the context of assessing for and addressing safety issues; and, an inappropriate focus or over-focusing on the adult victim may support the perpetrator of domestic violence in his or her efforts to deflect attention from himself or herself, and subsequently, avoid consequences, escape accountability, and maintain his or her level of abusive power and control.

Domestic violence is complex and, as such, requires a thoughtful and thorough assessment and response aimed at considering the many factors that influence the abusive dynamics and the impact on adult victims, children and families. A serious situation and complex decision may be trivialized with the need to explain it through the assignment of character flaws on an adult victim's part. Instead, it is important to recognize that there are safety risks with staying as well as with leaving, to help adult victims assess those risks, and to assist them in their efforts to make informed decisions regarding their safety and the safety of the children.

In some cases of domestic violence, there is a "cycle of violence" in which there is an initial "Tension Phase", followed by the "Acute Abuse Phase" which is followed by a "Loving Contrition or Honeymoon Phase". In these cases, typically, there is an escalation in severity and frequency of violence over time.<sup>19</sup> This suggests that for some cases of domestic violence, over time, the violence will become more severe and more frequent, and that staying in the abusive relationships is dangerous.

Additionally, leaving an abusive relationship can also be dangerous for victims of domestic violence. Research suggests that the initial period of time after a victim has left his or her abuser is an especially dangerous time, and that as many as 75% of domestic violence victims who are killed are murdered during the separation.<sup>20</sup> If the abuser has all of the economic and social status, leaving can cause additional problems. Leaving can mean living in fear, losing child custody, losing financial support, and experiencing harassment at work. Adult victims experience shame, embarrassment and isolation. An adult victim may not leave immediately because:

- He or she realistically fears that the violence will escalate, possibly even become fatal if he or she attempts to leave.
- Friends and family may not support his or her leaving.
- He or she knows the difficulties of single parenting in reduced financial circumstances.
- There exists a mixture of good times, love and hope along with intimidation, fear and manipulation.
- He or she may not know about or have access to safety and support.

The reality is that most adult victims do not stay in abusive relationships without attempting to leave. As with many significant life changes, leaving is a process. On average, victims leave and return 5 to 7 times before they make a final break with their abusive partner. In the past, child protective services workers have required that adult victims leave in order to ensure their children's safety. While leaving may be a viable option for some victims, other victims may decide to stay in the abusive relationship. If the victim chooses to leave, it is a potentially violent time and these cases must be handled carefully. Leaving a domestic violence relationship requires thoughtful, detailed safety planning in which the adult victim identifies what he or she needs to keep him/her safe. It is also important to recognize that while leaving and returning is a part of the overall process of escaping domestic violence, this can produce negative consequences for the child. The instability that results can negatively impact the child, it is important to look for any changes in the child's functioning at home and school. Perpetrators of domestic violence may cause harm to children not only by exposing them to abuse and violence, but also by displacing them and creating the need for constant transition.

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<sup>19</sup> Lenore Walker, "The Domestic Violence Cycle of Abuse".

<sup>20</sup> Barbara Hart, National Coalition Against Domestic Violence, 1988.

## Barriers to Leaving a Violent Relationship

There are real barriers to leaving a violent relationship, and there are no simple, easy solutions. In addition to a lack of resources, there are institutional responses and traditional ideology that is systemic in nature and have historically required individuals to question and re-formulate their core values regarding relationships. Some of the barriers to leaving a violent relationship, as identified by materials produced by the National Coalition Against Domestic Violence ([www.ncadv.org](http://www.ncadv.org)) include:

- **Lack of Resources:**

- Most adult victims have at least one dependent child.
- Many adult victims are not employed outside of the home.
- Many adult victims have no property that is solely theirs.
- Some adult victims lack access to cash or bank accounts or financial information.
- Adult victims who leave fear being charged with desertion, and losing children and joint assets.
- An adult victim may face a decline in living standards for herself and her children.

- **Institutional Responses:**

- Clergy and secular counselors are often trained to see only the goal of "saving" the marriage at all costs, rather than the goal of stopping the violence.
- Some police officers treat acts of violence as a "dispute," instead of a crime.
- Police may not arrest or may try to dissuade adult victims from filing charges.
- Prosecutors are often reluctant to prosecute cases or are not willing to go forward without the victim's cooperation even when other evidence is available to proceed.
- Judges rarely levy the maximum sentence upon convicted abusers. Probation or a fine is much more common.
- Violations of restraining orders are often not taken seriously by law enforcement and the court system.
- There are not enough shelters to keep adult victims safe. In fiscal year 2002-03, 761 victims were referred to other shelters due to lack of space.<sup>21</sup>

- **Traditional Ideology:**

- Many adult victims do not believe divorce is a viable alternative.
- Many adult victims believe that a single parent family is unacceptable, and that even a violent partner is better than no partner at all.
- Many adult victims are socialized to believe that they are responsible for making their marriage work. Failure to maintain the marriage equals failure as a person.
- Many adult victims become isolated from friends and families, either by the jealous and possessive abuser, or to hide signs of the abuse from the outside world.
- Many adult victims rationalize their abuser's behavior by blaming stress, alcohol, problems at work, unemployment or other factors.
- Many adult victims are taught that their identity and worth are contingent upon getting and keeping a partner.

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<sup>21</sup> NC Council for Women and Domestic Violence Commission, FY 2002-2003 Domestic Violence Statistical Report.

- The abuser rarely beats the adult victim all the time. During the non-violent phases, he or she may fulfill the partner's dream of romantic love. He or she believes that he is basically a "good partner." If he or she believes that he or she should hold onto a "good partner," this reinforces his or her decision to stay. She may also rationalize that the abuser is basically good until something bad happens to him/her and he or she has to "let off steam."<sup>22</sup>

### Why Does a Person Batter?

According to materials obtained from the National Coalition Against Domestic Violence ([www.ncadv.org](http://www.ncadv.org)), the perpetrator of domestic violence begins and continues his or her behavior because violence and perceived violence, both physical and nonphysical are effective methods for gaining and keeping control over another person, and because he or she usually does not suffer adverse consequences as a result of the behavior. Historically, violence against women has not been treated as a real crime. The National Coalition Against Domestic Violence suggests that this is evident in the lack of severe consequences, such as incarceration or economic penalties for those guilty of battering their partners. Perpetrators of domestic violence are rarely ostracized in their own community, as people continue to hold the view that what happens in the family stays in the family and that outsiders have no right to intervene. Although perpetrators of domestic violence come from all groups and backgrounds, some common characteristics include:

- A perpetrator of domestic violence objectifies women/victims. He or she does not see women/victims as people. He or she does not respect women/victims as a group. Overall, he or she sees women/victims as property or sexual objects.\*
- A perpetrator of domestic violence has low self-esteem and feels powerless in the world. To others he or she may appear successful, but inside he or she feels inadequate.
- A perpetrator of domestic violence externalizes the causes of his or her behavior; blaming a bad day at work his or her partner's behavior, alcohol, etc.
- A perpetrator of domestic violence may be pleasant, even charming between periods of violence and is perceived by others as a nice person.
- Behavioral warning signs of a perpetrator of domestic violence include: extreme jealousy, possessiveness, a bad temper, unpredictability, and cruelty to animals.

\*While both women and men can be victims of domestic violence, perpetrators of domestic violence are often gender specific in their abuse. In other words, male and female victims are often criticized for being "feminine"; perpetrators often rationalize their abusive and violent behaviors against male and female victims, and utilize abusive behaviors aimed at punishing their victims for being "all of the things they associate with femininity.... weakness, irrationality, stupidity, vulnerability, and inferiority" claiming that their actions are merely efforts to "toughen up" their partners or "not allow them to manipulate situations by using "feminine tactics" such as crying or becoming emotional". Male and female children are especially susceptible to these messages and rationalizations for abuse against their parents and against them.

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<sup>22</sup> National Coalition Against Domestic Violence. [DVSA-DRC: North Carolina](#)

## PRACTICE INFORMATION

### CPS Intake

Whenever possible, reports involving domestic violence as part of the allegation(s) should be screened with a domestic violence consultant if the DSS has such a staff person available “in-house” (a member of the DSS staff).

The DSS may develop a Memorandum of Agreement (MOA) with domestic violence programs to assist in screening CPS reports that contain domestic violence allegations. The DSS may also collaborate with community domestic violence programs to develop supplemental “screening criteria” for domestic violence related reports. These may serve as community guidelines for the agency to use during its screening of CPS reports, and may be helpful in efforts to collect similar data across systems.

### Interviewing and Working with Children

**Children are not responsible for their own safety, and are not to be made responsible for planning.**

Information from the interview with the children should usually be shared with the non-offending parent/adult victim to help him or her understand the effects of domestic violence on the children. Share this information with him or her in a nonjudgmental, caring manner, as this information may be painful and difficult to hear. There may be times when sharing information from the interview with the children could place them at risk of harm or retaliation. It is important to respect the children’s courage in sharing information and to weigh the risks/benefits in sharing pieces of that information with the non-offending parent/adult victim.

The following issues are important to any discussion of domestic violence with children:

- Assess and assure the safety of the children.
- Reassure the children that the violence and abuse are not their fault, and that they are not responsible for starting or stopping the violence..
- Let them know it is okay to tell adults they trust about the violence, and that it is okay if they don’t feel safe to tell anyone.
- Develop safety plans with them (as appropriate and safe for the child) with the input of their non-offending parent/adult victim (if the child’s safety is not compromised in doing so).
- With the approval of at least one parent, provide or offer access to educational, support or treatment services to help address the impact of domestic violence.

Children can be physically injured as a direct result of the domestic violence. Perpetrators of domestic violence sometimes intentionally injure children to intimidate and control the non-offending parent/adult victim. Children are injured, intentionally and accidentally during attacks on the non-offending parents/adult victims. A young child being held by the non-offending parent/adult victim while the perpetrator of domestic violence is attacking him or her can be hurt. An older child can be hurt while trying to intervene to stop the violence.

Domestic violence has a real impact on children. Many parents believe they are hiding the violence from their children, when in fact the children are well aware of what is happening in the

home. Even when they don't see the actual beating, they hear screams and see the evidence of the abuse on the non-offending parent/adult victim.<sup>23</sup>

Seeing the beating, hearing the screams or later learning about the non-offending parent/adult victim's injuries threatens the sense of stability and security that children need within their family.

Exposure to domestic violence may cause some children to experience increased behavioral and emotional difficulties. It is normal for children in violent situations to experience ambivalent feelings towards their violent parent; feelings of love and attachment become mixed up with feelings of disappointment and resentment.<sup>24</sup>

The following questions may assist in assessing whether and to what degree the children have been exposed to or involved in domestic violence:

- What kinds of things do mom and dad (boyfriend, partner) fight about?
- What happens when there is fighting?
- Who does the yelling?
- Who does the hitting? If there is hitting, how does this happen (by hand, object)?
- What happens before the hitting usually starts?
- What do you do when this is happening?
- Have you ever been hit or hurt when the fighting is happening? If so, what happened?
- What happens after the fighting ends?

Exposure to domestic violence affects children differently and an assessment of the effect on each child is needed. Many times, the non-offending parent/adult victim believes that the child is not being affected and sharing information about the negative impact on the child can be helpful, but also very painful for the non-offending parent/adult victim. Often, non-offending parents/adult victims of domestic violence make decisions in consideration of what they believe to be in the best interest of their children. While hearing about the effects of domestic violence may be painful for them to hear, receiving this information may also serve as the catalyst for seeking and accessing help.

Following are some questions to assess how exposure to violence is impacting the child:

- Do you think about the fighting a lot?
- Do you think about it when you're at school or when you're playing?
- Do you ever have trouble sleeping at night?
- Are you afraid to be at home? If so, tell about it.
- Are you afraid to leave home? If so, tell about it.
- What makes you afraid?
- Why do you think there is so much fighting?
- How does the fighting make you feel?
- What would you like to see happen to make it better?
- What do you do when there is fighting?

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<sup>23</sup> Carter & Schechter, *Child Abuse and Domestic Violence: Creating Community Partnerships for Safe Families*, 1997.

<sup>24</sup> Osofsky, J.D. & Fitzgerald, H.E. *Infants and Violence: Prevention, intervention and treatment*. WAIMH Handbook of Infant Mental Health, V4, New York, NY (2000).

- Stay in the same room the fight is in
- Leave/hide
- Run out/get someone
- Go to older or younger sibling
- Ask for it to stop
- Try to stop fighting
- Call 911
- Other
- Have you talked to any other adults about this situation?

When interviewing the child and assessing the impact of the violence, the following topics are may be addressed:

- The child's story of the event, through play or drawings, if not verbally, as some children will not discuss their experiences due to their age or developmental delays, or out of fear and confusion.
- The meaning the child attaches to the event (what was the worst part of the experience for the child).
- How the child is coping with the violent episode.
- The child's strengths.

The assessment should indicate the following:

- Whether the child needs immediate clinical intervention and trauma debriefing, and what immediate services the child needs.
- Whether the child needs short and long-term psycho-educational and support services and which services.
- Determine whether visitation with the alleged perpetrator should be supervised or curtailed (if the assessment indicates that continued visitation endangers the child physically or emotionally). It will be important to review and consider any existing court orders, including any Domestic Violence Protection Orders, which may include provisions related to child custody and visitation..

### **Validating the Child's Reality**

Domestic violence is a complex issue and the effects on children will not manifest uniformly. Acknowledge any feelings the child may have about the violence in the home, and CPS involvement. Recognize that based on the child's age and developmental stage you will have to use various interviewing techniques. Reinforce to the child that the violence is not their fault and that they have done nothing wrong.

Treatment options for the child vary based on the child's age, severity of the trauma, and services available in the community. The local domestic violence agency provides an array of services for children, including emergency shelter services, individual counseling, psycho educational support groups, and/or prevention and early intervention programs.

Most domestic violence programs offer psycho-educational support groups to children who witness domestic violence. While the group sessions and topics may vary depending on whether the group is shelter based, facilitated at a local school, etc., there are some common

themes and goals in working with these children. Some of the goals of group therapy with children who witness domestic violence:

- providing children with an opportunity to discuss their exposure to violence;
- dispelling myths about family violence;
- safety planning;
- teaching nonviolence;
- practicing respectful ways of interacting with others;
- improving self-esteem;
- learning about helpful community resources;
- preventing sexual abuse and dating violence;
- decreasing emotional and behavioral problems in children;
- breaking the intergenerational cycle of violence.<sup>25</sup>

Encourage the parents to allow the children to express their thoughts and feelings about the violence; it should not be a taboo topic. Allow the children to set the pace in regards to disclosure, some children will readily discuss the violence that occurred in the home, while others will be reluctant or will avoid the discussion of family violence altogether.

For children who have witnessed domestic violence, talking with a professional in the context of a safe relationship in a therapeutic space can be empowering. Reviewing their feelings in a safe place affords the child the opportunity to master feelings of terror, guilt, and anxiety.<sup>26</sup>

Living in a violent home limits children in establishing relationships with peers, for fear of bringing friends home into a violent situation or disclosing information about the violence. It is also quite possible the alleged perpetrator isolated the children to prevent the development of relationships as a form of control. This is of particular importance to kids in middle childhood, as peer relationships gain greater importance.<sup>27</sup>

**Children are not responsible for their own safety, and are not to be made responsible for planning.**

## **Interviewing and Working with Non-Offending Parents/Adult Victims**

It is important to recognize the steps the non-offending parent/adult victim has taken to protect the children, recognize his or her strengths and understand the danger he or she may be putting himself or herself and the children in by leaving. Tools that may assist the social worker in this recognition are the:

- The 4 Structured Decision Making Tools: (Safety Assessment, Family Risk Assessment of Abuse/Neglect, Family Strengths and Needs Assessment, NC Case Decision

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<sup>25</sup> Geffner, Robert et al. "Evaluation of the London (Ontario) Community Group Treatment Programme for Children Who Have Witnessed Woman Abuse." *Children Exposed to Domestic Violence: Current Issues in Research, Prevention, Intervention and Policy Development*, New York: The Hawthorn Press, Inc. 2000.

<sup>26</sup> Groves, Betsy McAlister. *Children Who See Too Much*. Boston: Beacon Press, 2002, 87.

<sup>27</sup> Pepler, Debra J. "Consider the Children: Research Informing Interventions for Children Exposed to Intimate Violence." *Children Exposed to Domestic Violence: Current Issues in Research, Prevention, Intervention and Policy Development*. New York: The Hawthorn Press, Inc. 2000.

Summary/Initial Case Plan). **The use of these tools and their inclusion in the case record is required by policy.**

- 3 Assessment Tools: (Non-Offending Parent/Adult Victim's Assessment Tool, Child's Assessment Tool, and the Alleged Perpetrator's Assessment Tool). **The use of these tools and their inclusion in the case record are optional.**

These tools may help the social worker to assess the non-offending parent/adult victim's reasoning and motivation in relation to his or her behavior toward the child.

The questions from the **Non-Offending Parent/Adult Victim's Assessment Tool** will help guide the assessment of patterns, frequency, and whether the victim is in danger. An affirmative answer to 4 or more indicates a pattern exists and that power and control are issues to be considered.

Has your partner ever:

- Prevented you from going to work/school/church?
- Prevented you from seeing friends or family?
- Listened in on your phone calls or violated your privacy in other ways?
- Followed you?
- Accused you of being unfaithful?
- Acted jealous or possessive?
- Controlled or stolen your money?
- Called you degrading names?
- Emotionally insulted you?
- Humiliated you at home? In public?
- Destroyed your possessions? (clothes, photographs)
- Broken furniture or smashed things?
- Pulled the telephone out of the wall or kept you from calling for help?
- Threatened to injure you, himself or herself, the children, or other family members?
- Threatened to or hurt your pets?
- Engaged in reckless behavior (drove too fast with you and the kids in the car)?
- Behaved violently towards you in public?
- Been arrested for violent crimes?
- Forced you to use drugs?

Female Adult Victims:

- Prevented you from using birth control?
- Withheld sex or affection?
- Hurt you during pregnancy?
- Forced you to engage in prostitution or pornography?
- Forced you to do things sexually?

Affirmative answers to the following questions indicate an increased risk of potential lethality.

Has your partner:

- Threatened to use a weapon or used a weapon?
- Threatened to harm or kidnap or did harm or kidnap the child(ren)?

- Threatened to kill you, the child(ren), and/or himself or herself ?
- Stalked you or the child(ren)?
- Hit, slapped, pushed, kicked, strangled, or burned you?
- Recently become more violent more often?
- Been abusing alcohol or other drugs?
- Forced you or the child(ren) to flee or runaway?
- Forced you to perform sexual acts?

The following questions will help in the assessment of the level of risk to the children.

Has your partner:

- Called your child degrading names?
- Threatened to take the children from your care?
- Called or threatened to call a child protection agency?
- Accused you of being an unfit parent?
- Threatened to hurt or kill your child?
- Touched your child in a way that made you feel uncomfortable?
- Assaulted you while you were holding your child?
- Assaulted your child when he or she tried to intervene to protect you?
- Asked your child to “spy on” you?
- Forced your child to participate in or watch his or her abuse of you?
- Withheld money for child’s food, medicine, health care?
- Threatened to harm or kidnap or did harm or kidnap the child(ren)?
- Threatened to kill you, the child(ren), and/or himself or herself?
- Violated a Domestic Violence Protection Order’s requirement to stay away from the children?

Has your child:

- Overheard the yelling and/or violence?
- Behaved in ways that remind you of your partner? Tell me about this.
- Physically hurt you, siblings, or other family members?
- Tried to protect you, siblings, or other family members?
- Tried to stop the violence?
- Threatened to or has hurt himself or herself ?
- Hurt pets?
- Been fearful of leaving you alone?
- Exhibited physical/behavioral problems at home/school/day care?

The following questions will give an understanding of the adult victim’s history of seeking help. This information is important in that it helps the social worker understand “where the adult victim is” in seeking and receiving help, and identify which types of services and resources are deemed most appropriate and helpful by the adult victim (e.g. some victims have called 911 while other victims have not, some victims have stayed at the DV shelter while others have not, etc.).

Have you:

- Told anyone about the abuse? What happened?
- Seen a professional? What happened?
- Left home as a result of the abuse? Where did you go? Did you take the children? Tell me about this.
- Called the police? What happened?
- Filed for an ex-parte or DVPO? Did you receive a 10-day order? A 1-year order? What happened?
- If you did receive an ex-parte or DVPO, did your partner violate the order?
- Accessed a battered women's shelter or domestic violence support group?
- Protected yourself/your children from the violence? What happened?
- What level of danger does your partner pose to you, your children, in general?
- What do you think your partner is capable of?
- Describe any injuries or health problems caused by current or past abuse?
- How has the relationship affected how you feel about yourself, your children, the future?
- How do you believe your children understand the violence?
- What do you believe would help keep you and your children safe?

Important issues to remember are to:

- Assess safety for the non-offending parent/adult victim and his or her children whether he or she is living with the alleged perpetrator or not.
- Reassure the non-offending parent/adult victim he or she is not responsible for the alleged perpetrator's violence and he or she is not responsible for stopping the alleged perpetrator from being violent.
- Help him/her develop safety plans for himself or herself and the children.
- Refer him/her to resources and help him/her access those resources.
- Work with him/her to carry out an intervention plan to promote safety and well-being for himself or herself and the children.
- Help him/her develop a long-term strategy to address any employment and housing difficulties.

#### Safety Planning with Non-Offending Parents/Adult Victims of Domestic Violence

Important questions to consider while discussing safety with the non-offending parent/adult victim include:

- What do you think/feel you need to be safe?
- What could I (and/or others) do to help you be safe?
- What particular concerns do you have about you and your children's safety?
- What have you tried in the past to protect yourself and your children? Did any of these strategies help? Will any of them help you now?
- Who in your support system might be able to help? How can they help? How can you involve them?

If the non-offending parent/adult victim has separated from the perpetrator of domestic violence, the following options may be evaluated with him or her:

- Obtaining a domestic violence protection order.
- Changing locks on doors and windows.

- Installing a better security system, window bars, locks, better lighting, smoke detectors and fire extinguishers.
- Teaching children to call the police, family or friends if they are abducted.
- Talking to schools and childcare providers about who has permission to pick up the children.
- Finding a lawyer knowledgeable about family violence to explore custody, visitation, and divorce provisions that protect the children and the non-offending parent/adult victim.
- In rural areas, where only the mailbox is visible from the street, covering the box with bright paper so that police can more easily locate the home.
- Telling neighbors that the perpetrator is gone and asking them to inform him or her if he or she returns to the area.
- Determining what he or she can do or is willing to do if the perpetrator returns.
- Obtaining a P.O. Box if he or she has moved, rather than using a street address (applying for the Address Confidentiality Program of the Attorney General's office).

If the non-offending parent/adult victim is planning to leave, the following may be discussed:

- How and when can he or she most safely leave? Where can he or she go? Does he or she have transportation? Money?
- Is the place he or she is going safe?
- Is he or she comfortable calling the police if needed?
- Who will he or she tell or should he or she not tell about leaving?
- Who in his or her support network does he or she trust to assist him or her and the children?
- What are the legal ramifications of leaving the perpetrator? Does he or she have a custody order?
- How will he or she travel safely to and from work or school and picking up children?
- Items to remember when leaving include: identification, birth certificates, marriage certificate, social security cards, money, bankbook, credit cards, keys to house/car/office, driver's license and registration, medications, children's favorite toys/blankets, school contact information, passport, green cards, work permits, lease/rental agreement, house deed, insurance papers, address book, picture of abuser, items of sentimental value.

If the non-offending parent/adult victim is staying with the alleged perpetrator, or leaving, reviewing the following may be helpful:

- In an emergency what works best to increase his or her and the children's safety?
- Who can he or she call in a crisis?
- Would he or she call the police if the violence started again? If not, why? How can this be remedied? Is there a phone in the house or can he or she work out a signal with a neighbor to call for help?
- If he or she needs to flee temporarily, where will he or she go? Help him or her create a list of safe places with phone numbers and addresses.
- If he or she needs to flee, what are the escape routes from the house?
- Identify dangerous locations in the house and advise him or her to try not to become trapped in these areas.
- Review the existence of weapons in the house. Is removal of the weapons an option with the assistance of law enforcement?

- Make a spare set of car keys and hide money in case of an emergency.<sup>28</sup>
- Who would you want to care for your children if you are temporarily unable? (for example, if you are hospitalized)

Informed non-offending parent/adult victims who are engaged with professionals in evaluating strategies to promote safety for themselves and their children are better able to make decisions. There is strong evidence that battered women's efforts to utilize community resources to end violence are greater when child abuse is present, demonstrating that battered women may be most likely to try and escape from the abuse when they realize it is crucial to protect their children from the risks of abuse. Research further reveals that child abuse, whether by fathers or mothers, is likely to diminish once the non-offending parent/adult victim has been able to access safety services and achieve separation from the violent partner.

When the non-offending parent/adult victim is not willing or able to work towards increasing the child's safety and the risk of harm to the child is so great, DSS may have to consider temporary placement. When making placement decisions it is critical to talk with relative/kinship placement providers regarding any history of domestic violence.

Every effort should be made to support the non-offending parent/adult victim as he or she makes progress towards goals identified in the Family Services Agreement. **One way that this can be accomplished is through the petition itself. While both partners' names must be listed at the top of any petition, the facts alleged in the body of the petition can clearly delineate that the non-offending parent/adult victim is not considered to be a perpetrator unless he or she actually abused or neglected the children. In such situations, the agency may ask the court to award legal custody to the non-offending parent/adult victim when there are no issues connecting his or her actions to the abuse or neglect of the child. Obviously, if the partner has participated in abusing or neglecting the child, both partners should be listed as perpetrators and the relevant facts incorporated in the petition. Each situation is different and requires careful assessment by the agency in making these decisions.**

### **Helping the Adult Victim to Regain Control over His or Her Own Life**

The social worker's goal is to help restore the non-offending parent's/adult victim's sense of control and dignity. The following points will assist that effort:

- Allow him or her to make decisions for himself or herself. Being coercive or mandating conditions for help is counter productive. Explore options and the consequences of her choices. If the social worker believes the non-offending parent's/adult victim's choice of staying with the partner endangers the children, share this information with him or her directly. If the social worker believes the children must be removed to ensure protection, share this information with him or her directly and try to help the non-offending parent/adult victim make choices that are safe for him or her and the children.
- Allow him or her to share good and bad feelings about the perpetrator. It is normal for non-offending parent/adult victims and children to waver in their feelings and views about the perpetrator. Problem resolution will occur partly through the recognition of the complexity of the issue of domestic violence. Abusers are not violent at all times; there may be times in which the abuser appears loving and remorseful, and the non-offending parent/adult victim has seen both personas.

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<sup>28</sup> Olmsted County, Minnesota Department of Human Services

- Accept that a non-offending parent/adult victim's opinions and ideas may change over time. With the acquisition of new information and help with safety planning, he or she may change his or her mind about staying with the perpetrator, or using the legal remedies for protection.
- Always check in with him or her and ask questions, such as, "In what way can I or others be helpful to you? What do you want to do?" Listen carefully to his or her responses and try to respond to them accordingly.

### **Validating the Non-Offending Parent/Adult Victim's Reality**

Some non-offending parents/adult victims of domestic violence do not recognize their experiences as abusive, and may be in denial about the intent and effects of their abusive partners' behaviors. As such, some may not identify with terms such as "battered" or "victim". Regardless of how he or she sees himself or herself and interprets his or her experience, there are safety issues that must be considered. When communicating with non-offending parents/adult victims of domestic violence, consider the following:

- Use affective language, such as, "It sounds painful and scary."
- Share the concerns with him or her about the danger the perpetrator of domestic violence presents or poses.
- Talk with him or her about manipulation and control and help him or her see what the perpetrator of domestic violence is doing.
- Interview him or her in the language he or she communicates in most comfortably. Avoid using labeling or blaming language. If the non-offending parent/adult victim needs an interpreter, a discussion must be held with the interpreter regarding confidentiality issues. It is not acceptable to use children or other family members as interpreters.
- Use active listening skills, identifying information that suggests controlling and/or violent behaviors.
- Empathize with him or her and validate his or her feelings. Many non-offending parent/adult victims fear that they will not be believed, as the perpetrator has denied, minimized and blamed them for the violence.
- Take a stand against the violence and communicate to the non-offending parent/adult victim a clear set of beliefs about violence, such as "No one deserves to be abused". Ensure the non-offending parent/adult victim that he or she is not responsible for the violence, no matter what he or she does, even if he or she strikes back, drinks or takes drugs. The perpetrator is responsible for making the decision to use violence and the resulting effects. Communicate that staying with an abusive partner may not always be best for him or her nor the children, and that they deserve a safe environment.
- Support him or her in overcoming isolation, in connecting with family and friends (if safe and helpful), or in joining groups where he or she can receive support and validation (e.g. a domestic violence support group).

### **Interviewing and Working with Alleged Perpetrators of Domestic Violence**

The following are indicators of an abusive or violent personality type:

- Constant blaming of everyone except self
- Obsessive behavior – jealous, accusatory
- Threatening – suicide, violence, kidnapping, harming those who attempt to help
- Stalking

- Presents like a victim
- Vengeful – making a CPS report on the non-offending parent/adult victim
- Powerful – may report having friends in positions of power
- Paranoid/hypersensitive
- Criminal record of violent offenses
- Belligerent toward authority figures
- Current alcohol and drug use
- Access to weapons; training in martial arts or boxing

If a determination is made from the interview with the non-offending parent/adult victim and children that it is safe to proceed with the interview of the alleged perpetrator, the following are some questions that may be asked to determine his or her perception of the problem:

- Tell me about your relationship with your partner. How do you communicate with each other? How and what do you argue about?
- How do you, your partner and your child handle conflict?
- What kinds of things do you expect from your partner/family?
- What happens when you don't get what you expected?
- How did your family handle arguments? (family of origin)
- Did you ever see violence in your home when you were a child? Please explain.

The following questions help assess the level of abuse:

- Has anyone ever told you your temper was a problem for you?
- Have you been so angry you wanted to physically hurt someone?
- When was the last time you became physical with someone in your family? What happened?
- How many times have the police come to your home? Why? Who called? What happened?
- Have you put your partner down or called him/her names?
- If yes, have you done so repeatedly?
- Have you made your partner feel bad about himself or herself, made your partner think he or she was crazy, or played mind games?
- If yes, have you done so repeatedly?
- Has there ever been a time when you hit, slapped, pushed, kicked, strangled, or burned your partner?
- If yes, have you done so repeatedly?
- Have you ever forced your partner to perform sexual acts?
- If yes, have you done so repeatedly?

The following questions help assess risk to the children:

- Tell me about your children.
- How do you discipline your children?
- What do you expect from your children?
- Tell me about how your children are affected by hearing/seeing fighting in your home.

While certain indicators are linked with potential lethality, all perpetrators of domestic violence are potentially lethal, and therefore, safety is always an issue with every case. The following characteristics are relevant to assessing the potential lethality of the alleged perpetrator:

- Threats/attempts of homicide or suicide
- Fantasies of homicide/suicide (seen as the only solution...“if I can’t have him/her, no one will”)
- Depression (especially if loss of the partner represents total loss of hope for future)
- Use, threat of use, possession, or access to weapons
- Criminal activity/violation of domestic violence protection order
- History of violence with partner/children/pets (the longer, more frequent, and/or severe, the higher the risk)
- Status of the relationship (Most life-endangering violence erupts when the perpetrator believes the victim has just left or is about to leave)
- Drug or alcohol consumption
- Assaults with serious injuries: broken bones, internal injuries, biting, assaults during pregnancy...attempted strangulation is a specific predictor of lethality
- Obsessiveness and paranoia about partner or family (to the point of recording partner’s calls, interrogating children, removing all telephones from the house)
- Possessiveness and jealousy used to monitor, isolate and control the victim
- Can not tolerate separation from the victim
- Inflicts severe pain or torture without apparent warning or provocation
- Derives pleasure from creating pain
- Takes offense easily (a mild attempt at setting limits can trigger a violent response)
- Criminal history of violence
- Conflicted and belligerent relationships with authority figures

Important issues to remember are to:

- Work with law enforcement to hold the alleged perpetrator of domestic violence accountable and support the application of appropriate sanctions.
- Hold the alleged perpetrator of domestic violence responsible for choosing to be violent and controlling.
- Develop a plan of intervention with the alleged perpetrator of domestic violence whenever possible.
- Provide a referral to an appropriate, approved abuser treatment program.
- Facilitate a long-term strategy to promote the use of non-violent interaction in personal relationships.<sup>29</sup>

### **Holding the Alleged Perpetrator Accountable**

It is crucial to hold the abusive partner accountable for his or her actions. When documenting the decision to substantiate or find a family in need of services, it is important to remember to accurately identify the perpetrator of domestic violence and explain the context of the abuse or violence. Blaming/Shaming the non-offending parent/adult victim is not acceptable, and every effort to hold the alleged perpetrator accountable should occur.

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<sup>29</sup> Olmsted County Community Services, Domestic Violence Protocol Child and Family Services Intervention In Cases of Child Maltreatment With Adult Partner Abuse, Rochester, MN, August 2001.

There are many reasons that make it difficult to hold domestic violence perpetrators accountable. The domestic violence perpetrator is not always living in the home at the time of CPS involvement, and at times the alleged perpetrator is not the legal or biological parent of the children, he or she may be an inconsistent presence in the family, and he or she can make the social worker feel unsafe. While the accountability issue is difficult, it is crucial to the cessation of violence and maintenance of child safety and well-being.

Hold the alleged perpetrator accountable by:

- Expecting the alleged perpetrator to acknowledge and address the impact of his or her behavior on the children and demonstrate nonviolent parenting.
- Supporting legal/criminal actions that hold the alleged perpetrator accountable.
- Ensuring that custody/visitation is consistent with the safety and well being needs of the children (Review any existing domestic violence protection orders when considering child custody and visitation decisions.)

Develop a separate Family Services Case Plan which includes:

- Ending verbal, emotional, physical and sexual abuse of all family members.
- No interference with his or her partner's efforts to parent children safely.
- Comply with protection orders and other court ordered mandates, including those imposed by probation, parole and abuser treatment programs.
- Attend culturally responsive, state licensed or approved education and counseling programs for perpetrator of domestic violence.<sup>30</sup>

A list of state-approved abuser treatment programs can be accessed at:

<http://www.doa.state.nc.us/cfw/programs/displayprograms.asp?id=onslow>

Anger management interventions are not sufficient to address the dynamics of domestic violence. Services must be directed towards holding the alleged domestic violence perpetrator responsible for eliminating abusive behavior in all family relationships. If the alleged perpetrator of domestic violence pursues traditional treatment options, such as psychotherapy, it is crucial that he authorizes the release of information to child protective services staff and that the therapist agrees to discuss treatment outcomes.

Communicate clearly with the alleged perpetrator what behaviors are acceptable when he or she is visiting the children. Many perpetrators of domestic violence will try to sabotage the relationship between the children and non-offending parent/adult victim. Every effort should be made to support the non-offending parent/adult victim as he or she makes progress towards goals identified in the Family Services Agreement. **One way that this can be accomplished is through the petition itself. While both partners' names must be listed at the top of any petition, the facts alleged in the body of the petition can clearly delineate that the non-offending parent/adult victim is not considered to be a perpetrator unless he or she actually abused or neglected the children. In such situations, the agency may ask the court to award legal custody to the non-offending parent/adult victim when there are no issues connecting his or her actions to the abuse or neglect of the child. Obviously, if the partner has participated in abusing or neglecting the child, both partners should be**

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<sup>30</sup> Effective Intervention in Domestic Violence & Child Maltreatment Cases: Guidelines for Policy and Practice, Recommendations from the National Council of Juvenile & Family Court Judges Family Violence Department, 1998.

**listed as perpetrators and the relevant facts incorporated in the petition. Each situation is different and requires careful assessment by the agency in making these decisions.**

### **Assessing a Domestic Violence Perpetrator's Progress**

The following are questions to ask in the assessment of the perpetrator's progress:

- Has he or she stopped all use of physical force against the non-offending parent/adult victim and his or her property?
- Has he or she stopped all use of threats of physical force against the non-offending parent/adult victim and his or her property?
- Has he or she stopped threatening to abduct or harm the children?
- Has he or she stopped other acts of intimidation (reckless driving, display of weapons)?
- Has he or she stopped monitoring, harassing, or stalking the victim?
- Does he or she support the victim's friendships and activities outside the family?
- Does he or she support the victim's parenting?
- When he or she's angry, does he or she act in ways to reassure the victim that he or she will not be abusive (taking time-outs, discussing conflict)?
- Does he or she respect his or her partner's right to place limits and to say "no" to him or her?

### **Potential Lethality Assessment**

A potential lethality assessment looks at danger for the adult victim and children. Potential lethality is assessed through the completion of the Structured Decision Making Assessment Tools combined with any information gathered from use of the Non-Offending Parent/Adult Victim's Assessment Tool, Child's Assessment Tool, and Alleged Perpetrator's Assessment Tool.

- The level of danger
- The immediacy of danger
- Victim strengths, resources and support system; and,
- What the non-offending parent/adult victim and children want

Whenever possible, consult a trained domestic violence advocate to complete a comprehensive assessment of potential lethality. There may be situations that necessitate the social worker to complete an initial potential lethality assessment. An interview with the non-offending parent/adult victim is the first step in completing a potential lethality assessment. If the potential lethality assessment with the non-offending parent/adult victim suggests extreme risk and interviewing the perpetrator of domestic violence is not in the best interests of the child, postpone that interview. Document the rationale for postponing the interview in the case record. Once safety is assured, the interview must be completed. If the interview with the non-offending parent/adult victim does not suggest extreme risk, continue the assessment by interviewing the children. After interviewing the adult victim and children, continue the potential lethality assessment by interviewing the perpetrator of domestic violence.

When determining risk level, the following factors raise the risk to the non-offending parent/adult victim and the children:

- physical injuries to adult or child due to domestic violence,

- severe or frequent assaults or recent escalation of abuse,
- display or use of weapons during incidents of domestic violence,
- threats to kill or seriously harm the child or non-offending parent/adult victim,
- stalking of the non-offending parent/adult victim or children,
- menacing conduct with implications of harming or kidnapping the children,
- alcohol or other drug abuse problem in the family,
- non-offending parent/adult victim and children are forced to flee,
- non-offending parent/adult victim's ability to care for children is seriously impaired due to severity of recent violent assault or series of assaults,
- alleged perpetrator has ongoing, unsupervised regular access to the children and/or the non-offending parent/adult victim.

**The safety of children is closely linked to the safety of the non-offending parent/adult victim.** The approach taken by CPS means a great deal and being able to engage the family respectfully can go a long way towards attempts to deescalate the situation. The assessment of risk and factors influencing the child's and non-offending parent/adult victim's safety is a continuous, ongoing process that should include the impact of domestic violence on children. The potential lethality assessment indicates the level and urgency of danger, and therefore provides information as to the next steps. There are specific domestic violence assessment tools to use with the non-offending parent/adult victim, children, and alleged perpetrator. These interview tools in conjunction with the Structured Decision Making Assessment Tools enhance CPS capacity to make case decisions on complex domestic violence situations. The Domestic Violence Assessment Tools may be used as a companion to the Safety Assessment, Risk Assessment, Family Strengths and Needs Assessment and Initial Case Plan.

### **CPS In-Home Services Issues**

- Securing safe housing – in the adult victim and children's home when possible or with family or friends, in subsidized housing, or in a shelter.
- Offering support to adult victims in a respectful manner that does not label them as neglectful.
- Offering support and services to children to address any behavioral/mental health needs as a result of the domestic violence.
- Referring perpetrators of domestic violence to state approved abuser treatment programs, and monitoring attendance and compliance with court and program requirements. Referrals to anger management programs are not appropriate – the perpetrator is usually able to control his or her anger, domestic violence is a power and control issue specifically related to his or her relationship with the adult victim.
- Referring adult victims to services that will aid in securing cash assistance, child and employment support services.
- Referring adult victims to voluntary supportive counseling, groups or community based advocacy services, and to job training, parenting, substance abuse treatment, and immigration specialists in programs trained to respond to domestic violence and their children.
- Keeping safety plans updated for himself or herself and the children.

Adult victims of domestic violence often share common feelings and reactions which may include: fear, denial, anger, guilt/shame, shock, powerlessness, despair/depression, ambivalence, betrayal and confusion. Additionally, domestic violence victims may suffer from eating disorders, substance abuse, and isolation. Sometimes, domestic violence victims may

refuse to participate with authorities, may lie or be inconsistent with CPS and/or the police, and/or may minimize the domestic violence. All of these feelings and responses may be a result of the violence and attempts to survive the abuse. Domestic violence victims often realize that they are caught in a trap in which information that they do or do not share will be used against them by the abuser. Domestic violence victims learn that looking their abusers in the eyes may result in being battered, that agreeing with everything their abusers say (regardless of whether they actually agree) may postpone their abuse, and that making promises (that are ultimately broken) in the “heat of the moment” might help pacify their batterers temporarily. When adult victims exhibit these behaviors with social workers, they can be difficult to work with. It is certainly easier to work with “cooperative” victims who make progress on the Family Services Case Plan.

Many adult victims will not be “cooperative” clients because of years of victimization. Do not take their behaviors personally. Many of these behaviors will decrease once the victim and children are safe. For many victims, the one constant, reliable force in their lives has been their abusers; it will probably take time for them to trust their social workers, as doing so could equate to placing their lives in someone (other than the batterer’s) hands.

**No matter how they behave, victims have the right to be free from violence.**

CPS workers may find themselves in a double bind:

- Their first responsibility is to protect the children.
- At the same time, the non-offending parent/adult victim is also a victim and if he or she is not safe it is unlikely the children will be safe.

CPS has often failed to recognize steps that the non-offending parent/adult victim may have taken to protect the children. This is a difficult area to understand, because some of the protective behaviors may not appear protective at first glance.

**It is important to remember that the non-offending parent’s/adult victim’s motivations and thoughts are not to be accepted as valid excuses for his or her abusive or neglectful behavior.**

A non-offending parent/adult victim who abuses alcohol and/or drugs may be thinking:

- “If I drink/drug with him or her, he or she won’t get mad and hit me or the kids.”
- “He or she might pass out.”
- “He or she only acts this way when he or she’s drinking/drugging.”

A non-offending parent/adult victim who minimizes/denies the violence may be thinking:

- “If I don’t tell them anything, I and the children will not be abused.”
- “If I tell them that I fell down the stairs, they won’t take my children away.”

A non-offending parent/adult victim who wants to protect his or her children may be thinking:

- “If I send the children outside, they won’t see me get hurt and get upset.”
- “I’ll drop the DVPO so that the children won’t get harmed during visitation.”

Non-offending parents/adult victims make choices that help them cope with the perpetrator of domestic violence and protect the children. An effort should be made to praise the non-offending parent/adult victim for his or her efforts in maintaining his or her children's safety thus far. This does not mean that the focus is not on the children's safety. Situations where the non-offending parent/adult victim is abusing or neglecting the children must be addressed; however, it is important to address his or her behaviors in the context of the violent relationship. Oftentimes, the abusive or neglectful behaviors may be resolved by addressing the domestic violence and assisting the non-offending parent/adult victim in his or her efforts to protect the children.

### **Social Worker Safety**

Extreme caution should be used when intervening with a family. A range of supports can be used to safely intervene:

- conducting interviews with law enforcement,
- cellular telephones, pagers; and,
- working in pairs.

Intervening in domestic violence situations can be traumatic, and the opportunity for debriefing with a supervisor provides the capacity to deal with some of the stress incurred from the social worker's interaction with the family. CPS involvement may increase the risk to the family and the social worker, due to the threat it poses to the abuser's control of the situation. The following are indicators of an abusive or violent personality type:

- Constant blaming of everyone except self
- Obsessive behavior – jealous, accusatory
- Threatening – suicide, violence, kidnapping, harming those who attempt to help
- Stalking
- Presents like a victim
- Vengeful – making a CPS report on the non-offending parent/adult victim
- Powerful – may report having friends in positions of power (police, wealthy friends/family)
- Paranoid/Hypersensitive
- Criminal record of violent offenses
- Belligerent toward authority figures
- Current alcohol and drug use
- Access to weapons; training in martial arts or boxing

If the alleged perpetrator of domestic violence exhibits behaviors that suggest heightened risk, it is not advisable for a home visit to be made until the following guidelines have been considered:

- Consult the social work supervisor/domestic violence consultant about the concerns and begin safety planning.
- Consider taking law enforcement or a co-worker to the home.
- If the abuser has a violent criminal record or is on probation, a probation officer should be contacted and accompany you to the home.
- When interviewing the family, be aware of triggers that may cause the individual to respond in a violent manner. (Triggers are outlined below)

### **Triggers that may Cause a Violent Confrontation**

- Non-offending parent/adult victim is preparing to leave or has recently left.
- Abuser's degree of access to the adult victim changes.
- Children are going to be removed.
- Abuser has just been released from jail or is facing criminal charges and possible incarceration.
- Allegations are made directly at the abuser regarding domestic violence/child maltreatment.
- Abuser is seeking information regarding family's location.
- Permanency Planning goal changes to adoption.

### **Guidelines for Working in High Risk Situations**

- Contact law enforcement if there is a criminal record of violent offenses.
- It is highly recommended that the social worker never meet with the abuser alone. When possible, visit at the office or take a co-worker to the home.
- Notify a co-worker that a potentially dangerous client is coming in to meet and when and where the meeting will be held.
- Whenever possible, have multiple exits in the meeting room, in case of the need to leave quickly.
- If possible have security nearby; know the agency's procedures in emergency situations.
- Consider that depending on the abuser's interpretation of the social worker's role, he or she may attempt to manipulate the situation by "charming" the social worker or denying, minimizing, rationalizing and/or blaming the victim.

### **Threatening Situations**

- Trust personal instincts, if the situation feels unsafe it probably is.
- Stay calm. The abuser will try to test limits. Do not engage in a confrontation.
- End the visit if the abuser's anger can not be deescalated by efforts to calm him or her down.
- Always notify the non-offending parent/adult victim prior to a visit with the perpetrator.
- Always notify the non-offending parent/adult victim of escalation in the abuser's anger and risk to the children or him or her.<sup>31</sup>

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<sup>31</sup> Olmsted County Community Services



**Using intimidation:** making him or her afraid by using looks, actions, gestures, smashing things, destroying property, abusing pets, displaying weapons.

**Using emotional abuse:** putting him or her down, making him or her feel bad about himself or herself, calling him or her names, making him or her think he or she's crazy, playing mind games, humiliating him or her, making him or her feel guilty.

**Using isolation:** controlling what he or she does, who he or she sees and talks to, what he or she reads, where he or she goes, limiting his or her outside involvement, using jealousy to justify actions.

**Minimizing, denying, and blaming:** making light of the abuse and not taking his or her concerns about it seriously, saying the abuse didn't happen, shifting responsibility for abusive behavior, saying he or she caused it.

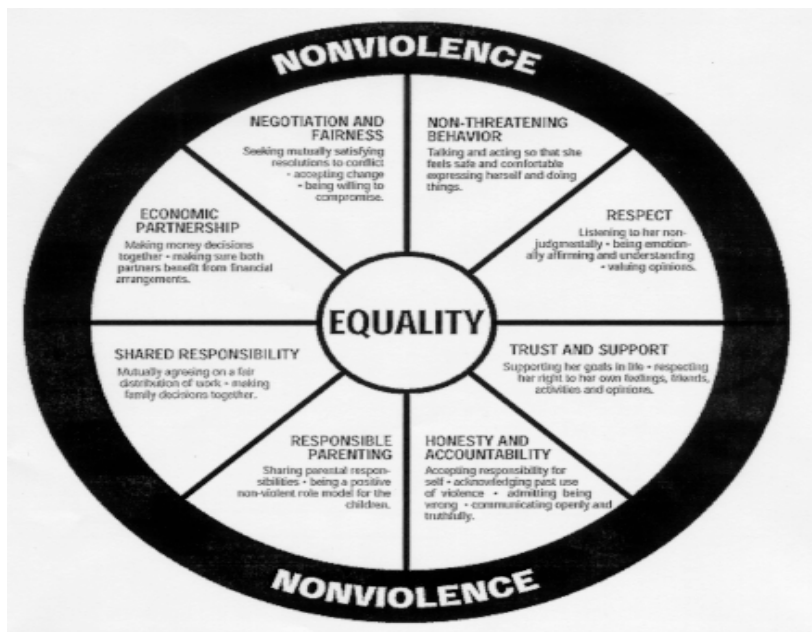
**Using children:** making him or her feel guilty about the children, using the children to relay messages, using visitation to harass him or her, threatening to take children away.

**Using male privilege:** treating him or her like a servant, making all the big decisions, acting like the "master of the castle", being the one to define men's and women's roles.

**Using economic abuse:** preventing him or her from getting or keeping a job, making him or her ask for money, giving him or her an allowance, taking his or her money, not letting him or her know about or have access to family income.

**Using coercion and threats:** making and/or carrying out threats to hurt him or her, threatening to leave him or her, to commit suicide, to report him or her to welfare, making him or her drop charges, making him or her do illegal things.<sup>32</sup>

<sup>32</sup><http://www.duluth-model.org/daippce.htm> Developed by the Domestic Abuse Intervention Project, 202 East Superior Street, Duluth Minnesota 55802 USA.



**Non-threatening behavior** – talking and acting so that he or she feels safe and comfortable expressing himself or herself and doing things.

**Respect** – listening to him or her non-judgmentally, being emotionally affirming and understanding, valuing opinions.

**Trust and Support** – supporting his or her goals in life, respecting his or her right to his or her own feelings, friends, activities, and opinions.

**Honesty and Accountability** – accepting responsibility for self, acknowledging past use of violence, admitting being wrong, communicating openly and truthfully.

**Responsible Parenting** – sharing parental responsibilities, being a positive non-violent role model for the children.

**Shared Responsibility** – mutually agreeing on a fair distribution of work, making family decisions together.

**Economic Partnership** – Making money decisions together, making sure both partners benefit from financial arrangements.

**Negotiation and Fairness** – seeking mutual satisfying resolutions to conflict, accepting change, and being willing to compromise.<sup>33</sup>

<sup>33</sup> <http://www.duluth-model.org/daippce.htm>

The following web site provides information on resources for children, non-offending parent/adult victims, alleged perpetrators and professionals:

NC Coalition Against Domestic Violence  
(919) 956-9124  
[www.nccadv.org](http://www.nccadv.org)

**For additional information about domestic violence and child maltreatment:**

**The American Bar Association**  
[www.abanet.org/domviol/home.html](http://www.abanet.org/domviol/home.html)

**The Family Violence Prevention Fund**  
[www.fvpf.org](http://www.fvpf.org)

**The National Coalition Against Domestic Violence**  
[www.ncadv.org](http://www.ncadv.org)

**The National Council on Juvenile and Family Court Judges**  
<http://www.ncjfcj.org/>

**The Office of Justice Programs**  
[www.ojp.usdoj.gov/bjs](http://www.ojp.usdoj.gov/bjs)

**US Department of Justice: Bureau of Justice Statistics**  
[www.ojp.usdoj.gov/bjs](http://www.ojp.usdoj.gov/bjs)

**Office of Juvenile Justice and Delinquency Prevention**  
<http://www.ojjdp.gov/>

**The Administration of Child Welfare**  
<http://www.acf.hhs.gov/>

**NC Department of Health and Human Services / Division of Social Services**  
[www.dhhs.state.nc.us/dss/](http://www.dhhs.state.nc.us/dss/)

**NC Association of County Directors of Social Services**  
[www.ncacdss.org](http://www.ncacdss.org)

**NC Coalition Against Domestic Violence**  
[www.nccadv.org](http://www.nccadv.org)

**NC Council for Women and Domestic Violence Commission**  
<http://www.councilforwomen.nc.gov/>

**National Resource Center on Domestic Violence**  
(800) 537-2238

**The National Domestic Violence Hotline**  
**1 – 800 – 799 – SAFE (7233)**