Child Safety Alert

From Commissioner John B. Mattingly and Executive Deputy Commissioner Zeinab Chahine

#12 REISSUE
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Working with Parents Experiencing Domestic Violence: Child Safety Depends on Careful Assessment and Intervention

(Please note that this is a reissue of Child Safety Alert #12. The original version included attachments that contained serious errors.)

When child abuse or neglect occurs in a family, domestic violence is a factor 30 to 50% of the time, according to national research. Domestic violence poses particular challenges for child welfare staff, and requires diligent assessment, safety planning and service delivery. Collaboration with clinical consultants and domestic violence service providers is essential. This safety alert provides a review of case practice expectations in the area of domestic violence. For further guidance, child protective staff is urged to refer to the Domestic Violence Protocol, appropriate sections of the Casework Practice Guide and domestic violence training materials distributed by Satterwhite Academy and the Office of Domestic Violence Policy and Planning, attached. Domestic Violence Consultants in the field offices are an important resource for this work, and should be consulted on cases involving allegations of domestic violence.

Assess for Safety and Risk in Domestic Violence Cases

- Child protective specialists are expected to conduct universal domestic violence screening for all CPS investigations regardless of allegations, as described in the Case Practice Recording Template. Domestic violence screening should be conducted in private – never in the presence of the caregiver’s partner or other family members. Assessment for domestic violence or other safety factors must be ongoing and not limited to the initial investigation.

- If screening suggests that domestic violence may be present, or if domestic violence is alleged or suspected, the Domestic Violence Protocol should be used as an interviewing tool with both the suspected victim and the suspected abuser. It is important to complete all sections of the protocol including Part 1: Interviewing the Survivor; Part 2: History of Survivor’s Help-Seeking Behaviors; Part 3: Suspected Abusive Partner (Suspected Batterer’s) Interview. Always interview family members separately.

- When interviewing abusive partners, it is important to plan ahead regarding the victim’s safety. The victim’s statements should not be revealed to the abuser, and there should be a safety plan in place for the victim and children prior to the abusive partner’s interview.

- When interviewing clients with limited English proficiency regarding domestic violence, as in all child welfare work, it is important to use qualified, professional interpreters. Family members, friends or other members of the family’s network should never be used to interpret child welfare interviews.

- Exposure to domestic violence does not, in and of itself, constitute abuse or neglect. Rather, we must assess and document whether domestic violence in the home has led to actual harm or specific risk of harm to the child(ren). For more, see Frequently Asked Questions, attached.

- In assessing safety and risk, the following behaviors by abusive partners should be considered
indicators of heightened risk to both the adult victim and the child(ren):
  o Use of or threats with a weapon
  o Access to or possession of a gun
  o Threats to kill the survivor or children
  o Stalking behavior including following the victim(s), telephone harassment, pursuit or surveillance.
  o Control of most or all of the survivor’s daily activities
  o Unemployment (While unemployment is unlikely to cause abuse in someone who was not previously abusive, it may make a batterer more dangerous because he/she has less to lose.)
  o Causing serious physical injury
  o Choking or strangling the survivor, or attempting to do so
  o Sexual assault
  o Drug use
  o Frequent and/or heavy drinking
  o Abuse during pregnancy
  o Violent or extreme jealousy
  o Suicide threats or attempts
  o Violence outside the home
  o Injuries to children
  o Serious acts of violence in front of child(ren)

In Addition, the Impact of Domestic Violence on the Children Must Be Assessed:
  o Are the children showing signs of serious emotional distress that appear to be connected to domestic violence? For example, did symptoms such as bedwetting or behavioral problems begin or escalate following a violent incident?
  o Has domestic violence contributed to neglect of the child by either parent (e.g., missing school, lack of supervision, inadequate food or clothing, etc.)?
  o As part of the assessment, be sure to obtain any Domestic Incident Reports from the NYPD, and obtain copies of any Orders of Protection from the survivor.

Engage the Survivor and the Abusive Partner

- Focus on engaging the survivor as well as the abusive partner and work collaboratively with each partner to keep the children safe.
- Create (an) individualized safety plan(s) for survivor(s). Remember, new safety planning is required when there is a change in danger and/or risk. Please note that survivors face increased danger of harm and retaliation when leaving an abusive relationship.
- Elevated Risk Conferences are an important tool for establishing appropriate safety interventions for the family. Always hold separate Family Team Conferences for the survivor and abusive partner when domestic violence is suspected or identified. Domestic violence consultants are available to assist in preparation for such conferences, as well as to participate in the conferences directly.

Focus on Batterer Accountability

- Engage the abusive partner in services, as he/she must be held responsible for violent behavior. Reinforce that the abusive partner’s behavior has a significant impact on children’s
well-being, and only he/she can stop the violence.

- **Send a clear message to abusive partners** that they are responsible for their violent behavior and that such behavior can place children at risk. Reinforce that violence against family members is unacceptable and wrong. Seek to hold the batterer accountable through the Family Court, and through collaboration with the police and District Attorneys' offices wherever possible and appropriate.

- **Refer abusive partners to batterer intervention programs.** Referrals to anger management, mediation or couples counseling will not address abusive partners’ violent and coercive tactics and are therefore inappropriate. While some abusive partners may need mental health treatment, this is not a substitute for an accountability-oriented batterer intervention program, but may be provided in conjunction with such a program. Domestic violence consultants can be helpful in making appropriate referrals.

- **Precisely document who is responsible for the violence in the home, and any resulting harm to children.** Name the specific coercive, controlling behaviors that the abusive partner has exhibited, and describe how these actions have affected the children. Document any specific and present danger(s) to children that may result from the domestic violence. Indication decisions and narratives should reflect an emphasis on batterer accountability; the victim must not be held accountable for the abuser’s behavior.

- **Preserve the victim’s confidentiality.** Use the utmost care to avoid revealing information that may endanger the victim, such as a domestic violence shelter location or other confidential addresses, details of his or her safety plan, timing of child visits or the identity of the victim’s domestic violence advocate/counselor. When such information is requested in court proceedings, work with the Family Court attorney to inform the Court that revealing such information may pose a threat to the victim and/or children. When confidential information must be included in the case record make sure to identify it as such by writing clearly in the record “Confidential Information Due to Domestic Violence – Do Not Share.”

- **Explore the continuum of safety interventions to increase safety.** There are many different resources available to assist survivors of domestic violence and their children, including services that help protect families in their own homes. Always consult with supervisor(s). In domestic violence cases involving one or more of the risk factors listed above, seek a domestic violence consultation for assistance with safety and service planning for all members of the family.

Collaborate with:

- **Clinical Consultation Teams** and **Family Court Legal Services** when appropriate.
- The Children’s Services **Office of Domestic Violence Policy and Planning (212/341-0408 or 0409)** for additional support including access to the **Domestic Violence Emergency Fund** and/or assistance in finding **immediate shelter** for families.
- **Instant Response Team Coordinators** and the **NYPD Domestic Violence Prevention Officers**, to obtain Domestic Incident Reports and address safety needs of the family.
- **The 24 hour Domestic Violence Hotline: 800/621-HOPE (4673).**

Remember – if the survivor, children and/or you are in immediate danger, always call 911.