

CHILD WELFARE PRACTICES

for cases with
domestic violence

OREGON Department of Human Services

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CHILD WELFARE PRACTICE

for cases with
domestic violence

This is the revised third edition of *Child Welfare Practice for Cases with Domestic Violence*, developed as part of an overall effort to increase the safety of adults and children through collaboration of domestic violence services and child protective services. It includes final policy references.

The initial efforts included creation of a domestic violence and child protective services work group, training for both child protection staff and domestic violence advocates, and development of a community self-study manual. These were funded by a grant from the Office of Community Services, Administration for Children and Families, U.S. Department of Health and Human Services.

Additional funding from U.S. Department of Justice offered continued support for the work group and funded four pilot partnership sites between local domestic violence service providers and child welfare branch offices. Similar projects are also occurring through other agency and federal funding in additional branches.

The mission of the Oregon Department of Human Services (DHS) is to help people become independent, healthy and safe. Assisting victims of domestic violence fits all three. Financial assistance, help with gaining and maintaining employment, screening for domestic violence at local health clinics, and other DHS services provide necessary safety and support to adult victims of domestic violence and their children.

The work group of child protection staff and domestic violence advocates guided these efforts, including the development of these practice guidelines. The third edition benefitted from the considerable assistance of:

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INTRODUCTION

Within DHS, both adult protective services and child protective services may be needed in some instances of domestic violence. This document describes child welfare practice for those domestic violence cases.

The primary responsibility of child welfare/child protective services is the protection of children. We believe the best way to achieve that is to engage families to provide safety within the family. These guidelines overlay dynamics of domestic violence onto child protection. They do not replace existing policies or practices, but build on them. These guidelines are based on the belief that achieving safety for adult victims increases safety for children.

One key to effective intervention in cases with domestic violence is forming collaborative relationships. Together, DHS staff, domestic violence service providers, courts, law enforcement, parole/probation, and community partners can establish a coordinated response and effective services. On-going discussion and consultation on specific cases, protocol and practice issues is a valuable resource.

These guidelines follow the stages of a referral to child protective services. Because the majority of adult victims are women, and the majority of domestic violence perpetrators are men, those pronouns will be used throughout this document. However, domestic violence does occur with the woman as the perpetrator and in same-sex relationships. The guidelines can be adapted to meet those situations.





VIOLENCE
ENDANGERS
CHILDREN IN
MULTIPLE WAYS

The role of child welfare in domestic violence cases

There is a high co-occurrence of domestic violence in child abuse and neglect cases. Appropriate safety and service plans in those cases rely on ongoing assessment of domestic violence and its impact on both children and parents. For example, a woman may seem uncooperative with the service plan, but this may be a survival strategy to protect herself and her children from the perpetrator. Recognizing her survival strategies and developing safety and service plans that build on those strategies as well as plans that hold the batterer accountable for the violence will increase the likelihood of success for protecting children.

This does not mean that all families experiencing domestic violence should be referred to child protective services nor does it mean child protective services will respond to all reports of domestic violence. Domestic violence is a risk factor for children. Child protective services intervention is warranted when the risk factor presents a safety threat to the child. **A careful child safety assessment is necessary.**

Dr. Anne Ganley and Susan Schechter, in their introduction to the Family Violence Prevention Fund's *Domestic Violence: A National Curriculum for Children's Protective Services* state that domestic violence endangers children in multiple ways:

- Domestic violence perpetrators not only harm their intimate partners but may also physically abuse their children. Their escalating violence against an intimate partner also physically endangers children.
- Domestic violence perpetrators may sexually abuse their children or the children of intimate partners.
- Domestic violence perpetrators may endanger children through neglect. Some domestic violence perpetrators focus so much attention on controlling and abusing their intimate partners that they neglect the needs of children.
- Sometimes a perpetrator's violence against the intimate partner prevents the adult victim from caring for the children. This can be misidentified as intentional neglect on the part of the adult victim.
- Domestic violence perpetrators may harm children by coercing them to participate in the abuse of their mothers or other adult caretakers.

- Domestic violence perpetrators may harm or endanger children by creating an environment where the children witness domestic violence.
- Finally, domestic violence perpetrators may endanger children by undermining the ability of CPS and community agencies to intervene and protect children.

Recent review of research literature shows that the children most impacted are those that both witness domestic violence and suffer physical abuse themselves.

One of the dilemmas of domestic violence and child abuse cases is how to keep children safe without penalizing the non-offending parent. Although there are times when child protective services must file petitions in juvenile court or place children away from their mother, the following actions all continue to keep power away from the adult victim:

- Labeling the adult victim as the perpetrator through “failure to protect;”
- Telling the victim the children will be removed if the violence happens again;
- Placing children away from their mother;
- Mandating restraining orders;
- Mandating services that could be voluntary; and/or
- Filing petitions in juvenile court.

These actions reinforce the perpetrator’s message to the victim that she is at fault and a bad mother. Our message to victims should be that we can work together to help her protect herself and her children.

When possible, the goal of child protective services is to keep children in their own homes with their family members. Only when the child cannot remain home safely is placement of children out of their homes considered.

Therefore, child welfare’s role in working with children is to:

- Assess and assure their safety;
- Reassure them they are not responsible for the violence;
- Reassure them it’s ok to tell adults about the violence;
- Reassure them it’s not their fault if they did not tell anyone;



**WHEN POSSIBLE,
WE WANT TO KEEP
CHILDREN IN THEIR
OWN HOMES WITH
THEIR FAMILY
MEMBERS**



**HOLD THE
PERPETRATOR
ACCOUNTABLE
FOR CHOOSING TO
BE VIOLENT AND
CONTROLLING**

- Discuss with them ways they can be safe; and
- Maintain their bond with the non-offending parent.

Child welfare's role in working with the non-offending parent is to:

- Reassure the woman she is not responsible for the perpetrator's violence and it is not her responsibility to stop violent behavior;
- Determine the non-offending parent's capacity for protecting the children;
- Assist her to plan for her safety and the safety of her children;
- Refer her to a domestic violence advocate for domestic violence safety planning, (*See section on domestic violence safety planning*); and
- Refer her to and help her access resources (domestic violence shelters and support services, Temporary Assistance for Needy Families, other DHS services, housing, financial assistance, drug & alcohol treatment, etc)..

Child welfare's role with the perpetrator is to:

- Work with law enforcement and corrections to hold the perpetrator accountable and support the application of appropriate sanctions;
- Hold him responsible for choosing to be violent and controlling;
- Assess his ability to remain safely involved in the family whether in the home or through visitation;
- Look for strengths and commitment to his family that support him in being accountable; and
- Make appropriate referrals for batterer intervention and follow-up to monitor compliance (*Refer to section on batterer intervention*).

HOW TO

USE THESE GUIDELINES

There are four sections:

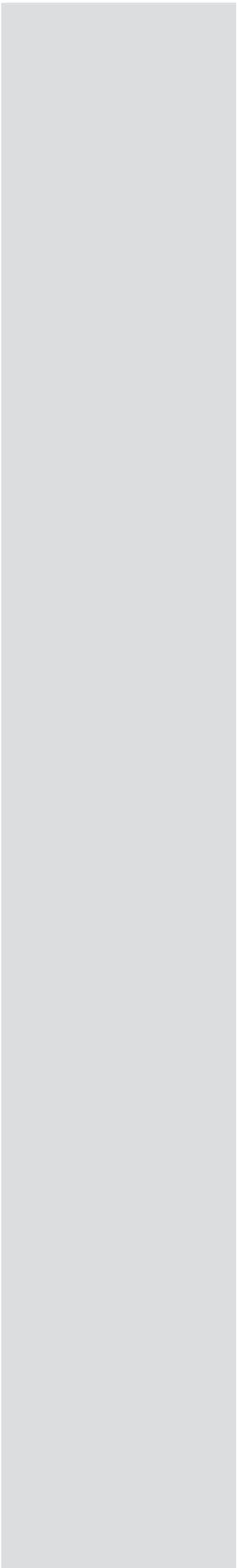
1 Definitions

2 Policy references

3 Practice applications

4 Resource information

- 1** The **definitions** include an operating definition for domestic violence as well as child protective services definitions.
- 2** The **policy references** list those places in child welfare policy where domestic violence is specifically cited.
- 3** The **practice applications** are guidelines and suggestions for child welfare staff to assist them in recognizing domestic violence and applying best practices in those cases.
- 4** The **resource information** includes sample questions for screening and assessment, information on criminal sanctions, an overview of protective orders, other resources and support services available, an overview of batterer intervention programs and a list of useful Web pages.



DEFINITIONS



1

Domestic violence — a pattern of assaultive and/or coercive behaviors including physical, sexual and emotional abuses, as well as economic coercion that adults use against their intimate partners to gain power and control in that relationship.

Domestic violence is more than the physical assault. The controlling tactics perpetrators use are reinforced by societal and cultural stereotypes and institutions that overall give more status and power to men. Cultural norms stress the importance of women staying in the relationship, regardless of the consequences.

Domestic violence is present in all cultures, socio-economic classes, communities of faith, etc. It is important to understand, however, how beliefs impact the perception and reaction to domestic violence and seeking of services.

Safe — There is an absence of safety threats or there is sufficient protective capacity to manage the existing safety threats.

Safety threats — Behavior, conditions or circumstances that are likely to result in harm to a child.

Harm — Impairment, damage, detriment, or injury to a child's physical, sexual, emotional or mental development or functioning.

Substantial harm — Immobilizing impairment, life threatening damage, or significant or acute injury to a child's physical, sexual, psychological or mental development or functioning.

Threat of harm — All activities, conditions and circumstances that place the child at threat of substantial harm of physical or sexual abuse, neglect or mental injury or other maltreatment.

Protective capacity — A parent's or caregiver's strengths or abilities to manage existing safety threats, prevent additional safety threats from arising, or stop risk influences from creating a safety threat.

Risk influences — Those circumstances and situations that contribute to the severity of identified safety threats and that are considered by the CPS worker when a safety plan is developed.

Impending safety threats — Behavior, conditions or circumstances that are not presently beyond the parent's or caregiver's ability to manage but are likely to become so within the near future or are likely to result in harm to a child.

Immediate safety threats — Behavior, conditions or circumstances that are presently beyond the parent's or caregiver's current ability to manage and are likely to result in harm to a child.

Child safety plan — A documented set of actions or interventions that describe how a child's safety is achieved by eliminating or managing a safety threat. (*Child Welfare has primary responsibility for the plan that may be developed through a Team Decision Meeting*).

POLICY REFERENCES



2

The following lists where domestic violence issues are cited specifically in agency policy. For more detail on practice applications, see the guidelines sections listed in the parentheses.

SCREENING (page 13)

Screening for domestic violence risk influences is included in the guided assessment process.

ASSESSMENT (page 17)

1. Assess for domestic violence in all referrals, whether the allegation is about domestic violence, as part of the safety assessment.

Reference: Interviewing Policy I-AB.7. OAR 413-015-0710.

2. When domestic violence is alleged, structure the assessment carefully to address safety concerns for both the adult and child victim. Interview each caregiver separately. Interview the non-offending caregiver prior to interviewing the parent or caregiver alleged to be the abuser.

Reference: Interviewing Policy I-AB.7. OAR 413-015-0725.

3. Ask questions about domestic violence only in separate interviews.

Reference: Interviewing Policy I-AB.7. OAR 413-015-0725.

4. If an interview of a non-custodial parent would increase the risk of harm to a child or adult victim, a CPS supervisor may authorize an exception to the requirement to conduct an interview based on documented risk.

Reference: Interviewing Policy I-AB.7. OAR 413-015-0725

TYPES OF ABUSE (page 28)

1. In cases of children exposed to domestic violence, consider a “founded” disposition under threat of harm for domestic violence when you have reasonable cause to believe
 - Child is used by the perpetrator in a way that could cause “substantial harm” (e.g. physically threatened, restrained from leaving during the violent incident);
 - Child is held during the violence, increasing the likelihood of injury;
 - Child is actively intervening in an incidence of domestic violence;
 - Child is exposed to domestic violence that is increasing in frequency (in a limited time frame) or severity; and/or
 - Child is exposed to domestic violence which involves the use of weapons; believable threats of suicide or homicide, animal abuse, or resulted in substantial harm to any person present.

Reference: Assessment Dispositions I-AB.10 Staff Guidelines: Threat of Harm Dispositional Guide

2. Found the batterer as the perpetrator for threat of harm for domestic violence, not the adult victim.

Reference: Assessment Dispositions I-AB.10 Staff Guidelines: Threat of Harm Dispositional Guide

NOTIFYING PARENTS OF ASSESSMENT DISPOSITIONS

The CPS worker must notify the child’s parents, including a non-custodial legal parent, and caregivers of all CPS assessment dispositions (unfounded, unable to determine, or founded). If providing notice would increase the risk of harm to a child or adult victim, an exception to notification may be made with CPS supervisor approval based on documentation of risk.

Reference: CPS Assessment I-AB.4 OAR 413-015-0405

NOTICE AND REVIEW OF FOUNDED DISPOSITION (page 29)

The method or process for providing notice of a CPS founded disposition when domestic violence has been identified should maximize the safety of the child, the adult victim, and Department employees. The Department will not use the adult victim to deliver the notice.

If domestic violence has been identified and if providing the notice would increase the risk of harm to a child, adult victim, or Department employee. This exception may be made with Department management approval based on documentation of risk.

*Reference: Notice and Review of Founded Disposition I-A.6.
(OAR 413-010-0715)*

FAMILY DECISION MEETINGS (page 38)

Plan Family Decision Meetings around the safety needs of both the adult and child victims. The policy states:

The located family members may attend the Oregon Family Decision Meeting unless the other participants determine that the family member may threaten or place other participants at risk. A family member who is violent, unpredictable or abusive or is an alleged perpetrator of sexual abuse, domestic violence, or severe physical assaults is an example of who may be excluded from the OFDM. Family members who are not allowed to participate may address the subjects of the Family Decision Meeting, including concerns regarding the placement of the child(ren), a permanent plan, concurrent plan and services, by submitting their concerns and interests in writing to the family's social service worker prior to the scheduled Family Decision Meeting.

Reference: Service Planning Policy I-B.3.1- 4.e. OAR 413-040-0031.

VISITATION

When developing a child-family contact plan, consider measures that will meet the safety needs of the child and non-offending parent in domestic violence circumstances. When necessary, measures shall include, but are not limited to, arranging different visiting schedules, supervised visitation, a safe drop-off/pick-up location, and safety plan in case the batterer unexpectedly appears.

*Reference: Visitation Child-Family Contact Policy I-E.3.5
OAR 413-070-0860.*

PRACTICE APPLICATIONS

SCREENING

Screen for domestic violence whenever possible in any referral for child abuse and neglect. Look for issues of power and control, isolation, intimidation, threats of homicide or suicide, stalking, weapons, violence increasing in frequency or severity, as well as other types of abuse. See sample questions in the Resource Section page 49).

- Make collateral contacts for information on the perpetrator's access to the child and adult victims and current safety threats. Information can include:
 - police reports,
 - court information on no contact orders,
 - restraining order and stalking order filings,
 - probation and/or parole involvement,
 - criminal records checks,
 - Self-sufficiency involvement.
- Not all domestic violence referrals will generate an in-person assessment.

Determining child safety threats

As with other reports to child protective services, the first decision in the screening process is whether a child safety threat exists because of child physical abuse, sexual abuse, neglect mental injury or threat of harm (child is — or in the case of a newborn **will be** — made to endure conditions or activities which are likely to result in “substantial harm” due to physical abuse, sexual abuse, neglect or mental injury).



3

PRACTICE
APPLICATIONS



If the report is on domestic violence and the situation does not constitute abuse or neglect, log the report. Circumstances that may lead to the decision to log include historical reports of domestic violence without current information, less severe situations, or successful resolution of the situation through other interventions.

If the domestic violence situation constitutes child abuse or neglect but screener determines that no current safety threat exists, the report may be closed at screening. Document that child is currently safe. Decide whether other services are appropriate and make referrals.

Criteria for determining response

Use the following criteria when there are current child safety threats to determine the required response.

ASSIGN FOR ASSESSMENT

Assign for assessment those cases of children exposed to domestic violence in which there is reasonable cause to believe there is current domestic violence or the perpetrator has a history of domestic violence AND:

- There is reason to believe the child is intervening or will intervene, placing him or her at risk of injury.
- The child is likely to be injured during the violence (e.g., being held during violence, physically restrained from leaving).
- The alleged perpetrator does not allow the woman and children access to basic needs impacting their health or safety.
- The alleged perpetrator has killed, substantially harmed, or is making a believable threat to do so to anyone in the family, including extended family members and pets.
- The child's ability to function on a daily basis is substantially impaired.

CONSIDER ASSIGNING FOR ASSESSMENT

Consider assigning for field assessment if the report of domestic violence is current and the child is (or in the case of a newborn **will be**) made to endure conditions or activities which are likely to result in

“substantial harm” due to physical abuse, sexual abuse, neglect or mental injury through any of the following:

- Serious injury to the non-offending parent (including, but not limited to, broken bones, internal bleeding or injury, extensive bruising or lacerations, poisoning, suffocating, strangling, shooting or severe malnourishment).
- Violence increasing in either frequency or severity.
- Stalking behaviors.
- Weapons were used or threatened.
- Threats of kidnapping, hostage taking, suicide or homicide.

OTHER FACTORS TO DETERMINE RESPONSE

Other factors to consider in conjunction with the above include:

- Isolated victims with little support.
- Interaction with other risk factors including substance abuse or mental illness.
- Previous referrals to child protective services or LEA with the same or other child or adult victims.
- Previous convictions for crimes against persons or serious drug offenses.
- Violations of restraining orders.
- Lack of other community responses or resources.

Typically in child abuse cases, the younger the children, the higher the risk; therefore, the more likely a face-to-face contact is warranted. However, in domestic violence cases, older children may intervene to protect the victim and may be at even greater risk for injury than younger children.

While we consider previous reports in the screening decision, this is not a determining factor. We can clearly respond to a first report. Reports do not need to be verified first through police reports or other official sources.

Close at screening

The decision to close at screening is not intended to minimize the seriousness of domestic violence. However, other agencies may be more appropriate to respond to support the victim and/or hold the perpetrator accountable. Document the report, including the



perpetrator's name. Either refer the caller or make referrals to community partners, including:

- Domestic violence service providers.
- Safety Net.
- Victim's advocates through police departments or district attorneys' offices.
- Voluntary services within the Department of Human Services including Temporary Assistance for Domestic Violence Survivors (TA-DVS).
- School counselors.
- Law enforcement.
- Probation or adult community justice programs.
- Batterer intervention programs.

PRACTICE APPLICATIONS

ASSESSMENT PROCESS



The dynamics of domestic violence are based on the perpetrator maintaining power and control over his partner. Challenges to that power and control, including a CPS assessment, may increase the likelihood of escalating violence. In addition, the risk of being seriously harmed or killed increases when a woman leaves her perpetrator.

Given this dynamic, plan your assessment carefully when domestic violence is known to be an issue, and always take into consideration the assessment may increase the risk to the child and adult victim.

Assess for domestic violence as part of the safety and risk assessment process, whether or not it is part of the allegation.

- Assess for domestic violence by looking for the pattern of power, control and intimidation in addition to the physical violence.
- Assess the impact of the violence on both adults and children.
- Assess protective factors and family strengths that support safety.

Early identification of the dominant aggressor/perpetrator

Occasionally, the report leaves some doubt as to which adult is the dominant perpetrator in the domestic violence. For example, a woman might be arrested for a domestic violence crime, but it might be her partner who has established a pattern of power and control over her. Under these guidelines, her partner would be considered the dominant perpetrator. Likewise, if there is an allegation of child abuse or neglect against one parent, she may still be considered the adult victim of the domestic violence.

To work as safely as possible with the family, the worker may need to identify the dominant perpetrator before the assessment is complete. Use screening information or collateral contacts and look

for indications of power and control. (See the section on identifying the domestic violence perpetrator). This early identification can then be refined over time to incorporate new information.

Batterer's risk to children

In determining the batterer's risk to the children assess:

- The level of physical danger to adult victim he presents.
- The history of physical abuse to the children.
- The history of sexual abuse to the children.
- The level of psychological cruelty to mother and/or child.
- The level of coercive or manipulative control.
- The sense of entitlement and self-centeredness of the batterer.
- Unreasonable demands of the batterer.
- Signs of viewing adult victim and children as possessions.

See the section in “Interviewing the alleged perpetrator” and sample questions in the resource section, page 54.

(The above information was taken from an article by Lundy Bancroft, “Assessing Risk to Children from Contact with Batterers” in the April/May 2002 edition of the *Domestic Violence Report*).

Setting up the assessment

Policy requires interviews with both caregivers. If it is believed that an interview with the alleged perpetrator will create a substantial risk to any family member, consult with a supervisor to request an exception.

Factors to consider include LEA criminal investigation and/or the alleged safety threat to the child, non-offending parent or worker. If the alleged perpetrator is not interviewed and an assessment concludes that the report is “founded,” plan how to safely deliver the “Notice of a Founded Disposition.”

- If immediately available, gather collateral information to help determine the history of assault and pattern of power and control.
- Determine if the alleged perpetrator is in jail.



- Explore how to do the assessment when the alleged perpetrator is not home. If possible, call first to determine who is at home and how safe it is to go out.
- Find out the alleged perpetrator's work schedule. Consider meeting at school or other neutral settings.
- Develop an alternate plan if you are unable to interview the adults separately.
- If you have to make contact when the alleged perpetrator is present, take two workers or a police officer so the partners can be interviewed separately. An inability to arrange separate interviews with adults may be an indication of domestic violence and the perpetrator's control.
- If available, request a domestic violence advocate to assist with the interview.



Structure the interviews

- Interview the adult victim first without the alleged perpetrator present.
- Consider delaying the interview with the children until a safety plan can be developed with the adult victim.
- Consider not interviewing the alleged perpetrator if it poses a substantial risk to the adult victim or child.

Interviewing the alleged adult victim

(See sample questions on page 50)

- Never ask the alleged victim about domestic violence in front of her partner. She will not be safe to disclose if he is in the vicinity.
- Use strategies to build rapport, encourage conversation and support the victim.
- Ask about other issues before asking about domestic violence. Ask about their relationship, including positive aspects. Begin with more general questions then follow up with more specific and detailed ones.
- Ask open-ended questions about her well-being to start the conversation. However, express concerns and ask questions about bruises or other injuries.

- Ask questions about the coercive tactics the perpetrator may use. These tactics range from very overt — such as physically preventing someone from leaving the house — to subtle ones, such as isolating a woman from her family by complaining about their treatment of him.
- The adult and child victims may express positive feelings toward the perpetrator. In discussion, focus on the abuser's violence and controlling behaviors, not on his personality.
- Affirm to the victim she does not deserve to be abused and that the abuse is not her fault.
- Express concerns for her safety and the safety of her children. Tell her domestic violence often increases in frequency and/or severity.
- Identify what she has done to keep herself and her children safe.
- Consider how her actions have been survival strategies. For example, staying with the perpetrator may be safer than leaving.
- Recognize that because many battered women lack access to financial resources or other housing options, she may believe it is better for her and the children to stay with the perpetrator.
- If there are allegations that the violence is mutual, look at the history of who has been the dominant aggressor. (*See page 28*).
- Give the alleged victim information about domestic violence. If you know the alleged perpetrator has prior convictions, tell the woman.
- Discuss with the alleged victim what will happen with the information gathered. Include which information will be disclosed to the alleged perpetrator. Make referrals for safety.
- Offer information and referrals to address other immediate needs of adult and child victims, including financial assistance and health care.
- When ending the interview, ask the victim about safe times and ways to contact her again.
- Let her know what you will be asking and telling the perpetrator.

Interviewing children

- If children are old enough, ask them questions about what happens during the violence or about the violence.
- Interview the children separately if possible.

- Beware that a child may take responsibility for the abuse or side with the perpetrator. Assure the child that the violence is not his/her fault or the mother's.
- Acknowledge the perpetrator's positive strengths as well as asking about abusive behavior.
- Be aware how sharing what the child says with either parent will affect him or her.
- Tell the child what you will be sharing.
- Talk to the child about ways to stay safe.
(See page 33).



Interviewing the alleged perpetrator

- The perpetrator is not a reliable source of information about his violent behavior or his use of power and control tactics. Better sources of information include the adult and child victims, police reports and collateral contacts.
- Do not ask the alleged perpetrator about domestic violence in front of his partner.
- Interview the adults separately first. An inability to arrange separate interviews may be an indication of domestic violence and the perpetrator's control.
- Don't tell the alleged perpetrator information given by the victim. Use corroborating reports such as police, neighbors and medical.
- Don't tell the alleged perpetrator information given by the child until a safety plan is in place.
- Ask about other issues first before asking about domestic violence. Ask about their relationship, including positive aspects. Begin with more general questions then follow up with more specific and detailed ones.
- Ask questions to assess for power and control tactics.
- Assess the perpetrator's willingness to take responsibility for the violence.
- Assess what steps will he take to create safety.

GUIDANCE FROM AN EXPERT

A nationally recognized expert on batterer intervention, Fernando Mederos, Ed. D., gave guidance to child protection workers in a February 2000 article. When interviewing the alleged perpetrator in the assessment, he recommends workers:

- Establish an initial working relationship which includes providing some education about domestic violence and its effects.
- See if he can admit some of his physically abusive behavior.
- See if he is willing to get help, such as attending a batterer intervention program and, if necessary, substance abuse treatment.

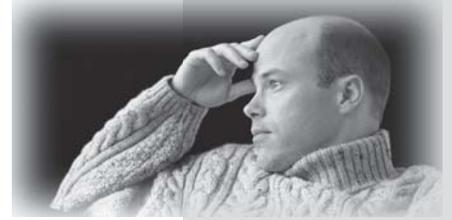
BEWARE OF PERPETRATOR'S TACTICS

However, when assessing the alleged perpetrator's answers, be aware of tactics common to perpetrators to deflect attention away from them. Perpetrators will try to enlist you to collude with them against the victim. Tactics include:

- Presenting himself as the victim.
- Using statements of remorse or guilt as a way to avoid consequences.
- Describing protective actions the victim has taken (leaving or calling police) as ways to hurt him.
- Presenting himself as the more stable and calm partner.
- Denying or minimizing abuse (she bruises easily, I just pushed her a little).
- Blaming his partner for the abuse (she knew she wasn't supposed to do that).
- Avoiding responsibility by blaming alcohol or other substances, stress, etc.
- Alleging drug or alcohol abuse by partner.
- Alleging the partner has mental illness.
- Presenting her behavior in a negative way to get you to side with him.

**BEHAVIORS THAT SUPPORT
ACCOUNTABILITY, RESPONSIBILITY AND SAFETY
INCLUDE:**

- Accepting responsibility for his choice to be violent.
- Actively participating in appropriate intervention.
- Complying with no-contact and restraining orders.
- Agreeing to and following through with safe levels of contact.
- Understanding the effect of his domestic violence on the children.
- Continuing financial support without using it as manipulation or bargaining tool.



PRACTICE

APPLICATIONS

ASSESSMENT DECISIONS

The following are decisions workers need to make based on the information obtained in the assessment. Assess for domestic violence in all allegations of child abuse and neglect, in order to make appropriate safety decisions. Throughout this process, support the safety needs of the adult victim.

- **The child safety decision:** determine whether there is a “Safety Threat” present.
- **The disposition decision:** determine whether there is reasonable cause to believe that child abuse or neglect has occurred.
- **On-going services:** Determine whether a family will receive continued child welfare services.

Child “safety threat” decision and planning

The first decision is whether there is an immediate or impending child safety threat.



No Threat

If no child safety threat is present, explore options with the mother for her safety. Refer her to domestic violence service providers and other resources, and provide information about domestic violence, when appropriate.

Threat

If a child safety threat is present, the first priority is to develop a child safety plan in partnership with the mother and safe family members when possible, in accordance with the Child Safety Assessment and Safety Planning policy. Build on her strategies and family strengths.

FACTORS: CHILD REMAINING SAFE WITH FAMILY

Factors which together can lead to a child safely remaining with the family or non-offending parent include:

- Non-offending caregiver acknowledges risk to children and demonstrates protective capacities.
- Non-offending parent and children are in a shelter or other safe location.
- Perpetrator's access or activities are restricted (e.g., in jail, complying with restraining order or no-contact order).
- Perpetrator demonstrating responsibility for his behavior and actively engaging in intervention programs.
- Children show minimal behavioral or emotional effects.
- Children have a supportive adult.
- An older child(ren) has a plan to be safe and the ability to carry out the plan.
- Violence is not escalating and perpetrator's prior history does not include known serious violence.
- Other issues (A&D, mental health, etc). do not pose safety threats.
- Non-offending caregiver has supportive extended family or community ties.



OPTIONS

Discuss with the mother her options for separation from the perpetrator. It is imperative that these options be fully explored, as either staying or leaving may increase the risk to her or her children. A restraining order may or may not be appropriate or lead to greater safety. If the woman believes it is not safe to get a restraining order or leave, this may be protective and does not indicate “failure to protect.”

PLACEMENT

Whenever possible, keeping children at home is preferable. However, there are situations in which removal of children is the only way to assure child safety.

When it is likely that a child may be placed, hold a Team Decision Meeting. Safety concerns for both the adult and child victims need to be addressed. (*See the section on “Family Meetings,” page 38*).

The safety plan may include placement with a relative, possibly with an agreement between the mother and relative, a voluntary placement agreement with child protective services or a placement with juvenile court involvement.

FACTORS: CHILD NEEDS OUT-OF-HOME PLACEMENT

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

- No other workable plan can be put in place.
- Other types of child abuse create safety threats.
- Perpetrator continues to expose children to serious violence despite intervention.
- Perpetrator continues to have unauthorized contact with child which presents safety threats..
- Perpetrator’s history includes known serious domestic violence.
- Child has reduced ability to manage circumstances or has conditions that increase vulnerability.
- Adult abuse of alcohol or other drugs presents safety threats.

PLACEMENT WITH RELATIVE

The safety plan may include placement with a relative. When considering relatives, assess for domestic violence in their relationships. Determine:

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

Case opening

As with any situation, the decision to provide on-going child welfare services is based on consideration of the current threats to child safety, risk factors, needs of the child(ren), family strengths and protective factors. Consider opening a case plan when:

- Violence is increasing in either frequency or severity.
- Ideation, plans or past attempts of suicide or homicide exist.
- Perpetrator is not allowing adults and children access to basic needs.
- Children are exhibiting observable effects of the domestic violence, causing substantial impairment.
- The family requests assistance.
- Other risk factors impact the care of the child.

Factors which may mitigate the need for opening a case plan include:

- Supervised or no access by the perpetrator to the children.
- Adequate safety plan in place for the children.
- Support services in place for the victim and children which help the victim provide safety for herself and her child(ren).
- Active involvement with the perpetrator by the criminal justice system and an appropriate intervention program.



When a case is closed at assessment, refer to the local domestic violence service providers and other community resources for services. Talk to the adult victim and the children about domestic violence safety planning.

Founding a threat of harm allegation

A report should be considered “founded” for threat of harm (refer to threat of harm guidelines) when a child has been exposed to domestic violence AND there is reasonable cause to believe that:

- A child is used by the perpetrator in a way that could cause substantial harm (physically threatened, restrained from leaving, etc.).
- A child is held by parent during the violence, increasing the likelihood of injury (other than circumstantial).
- A child is actively intervening in an incidence of domestic violence,
- A child is exposed to domestic violence that is increasing in frequency (within a limited time frame) or in severity.
- A child is exposed to domestic violence which involves the use of weapons, believable threats of suicide or homicide, animal abuse, or which resulted in substantial harm to any person present.

A non-offending parent should not be considered a perpetrator for domestic violence under “threat of harm.”

Founding a child abuse or neglect allegation

Use “founded” when an assessment concludes that harm has occurred to a child due to physical abuse, sexual abuse, mental injury and/or neglect. There are situations in which the adult victim of domestic violence may be a perpetrator of child abuse or neglect. During the assessment and service planning process, consider the impact of the domestic violence and develop case plans to address it.

Identifying the domestic violence perpetrator

- Assess for patterns of power and control in allegations of domestic violence that appear to be mutual violence, or when victim is arrested by LEA.

- Look at whether injuries are defensive wounds (bite marks, scratches etc)., who is afraid of the other, the intent and level of the violence (was it self defense or to punish/retaliate), the impact of the violence, the ability to inflict harm, the likelihood of future injury, and the history of who has been the dominant aggressor regardless of who was the first aggressor in that incident.
- It is common for the victim to claim responsibility for the violence.
- The non-offending parent may be doing everything possible within her resources to minimize the risks and protect the children.



Notification of founded disposition

Child welfare policy requires that perpetrators of “founded” child abuse or neglect allegation receive written notification of their right to contest the finding. In domestic violence situations, the method of delivering the notice should maximize safety of all involved, the child, adult victim, and caseworker. The safety of the victim may be impacted whether the perpetrator is in the home or living elsewhere. An exception to the notification may be made with management approval and documentation of risk.

Safety should be a primary consideration in choosing to either hand deliver or mail the “Notice”. Inform the victim of our requirement to deliver the “Notice” and engage the victim in planning for her safety. LEA assistance may be helpful.

Hand delivery directly to the perpetrator or other methods that do not place the victim in the position of delivering the notice are recommended. If mailing the “Notice” is necessary:

- Inform the victim of the need to deliver the “Notice.”
- Engage the victim in planning a safe delivery.
- Encourage the victim not to accept delivery for the perpetrator.
- Explain the “Notice” to the perpetrator.
- Inform the perpetrator that the “Notice” will be sent and that it is appropriate for them to sign for it.



PRACTICE APPLICATIONS

DOMESTIC VIOLENCE SAFETY PLANS

This section discusses the plan that a non-offending parent can make for her own safety and the safety of her children. This section offers tips the children can use to increase their safety in case they witness domestic violence in the future. (See page 24 for a discussion of child safety planning by child welfare.)

For the adult victim, the ideal practice is to invite her to discuss her situation with a domestic violence advocate outside child welfare. A thorough safety plan can take 1-2 hours or more, and it is usually easier in person. There are several reasons for a domestic violence service provider to do the domestic violence safety plan:

- A domestic violence advocate has the specialized expertise and knowledge to build a thorough, realistic plan.
- The victim may be willing to share more details with an advocate outside the child welfare system, leading to a more specific plan.
- With a skilled independent advocate, the woman may feel less pressure to do what she thinks someone wants her to do and more empowered to make her own choices. This will lead to a stronger plan and contribute to the victim's healing process.
- The relationship with a domestic violence service provider may be useful to her in the future.
- There is a risk that an inexperienced person may not be able to help the woman form a plan that is sustainable over time.

YOU MAY MAKE AN INTERIM PLAN

Sometimes you will need to make an interim safety plan with the adult victim. This could address the following issues:

- What will happen after you leave.
- Safety for her and the children until she can meet with an advocate.
- Referrals to domestic violence programs, other DHS programs including financial assistance, and other community services. (See pages 41 and 64).

If your community does not have a domestic violence program that can do safety planning, check with the SDA domestic violence point person. Obtain specialized training on safety planning. The following are points to keep in mind.

Domestic violence safety planning can occur in all situations, including:

- When the victim remains with the perpetrator.
- When the victim leaves the home.
- When the perpetrator leaves the home.

SAFETY PLANNING MUST BE INDIVIDUALIZED

Domestic violence safety planning must be individualized. The adult victim can best assess which options may increase her safety or increase the risks to her safety. For example, for some perpetrators, obtaining a Temporary Restraining Order presents such a challenge to his control, he will violate the order and may seriously assault or kill her. (Refer to section on Temporary Restraining Orders, page 60).

How to protect the victim. Safety planning when the victim remains with the perpetrator includes looking at ways the victim can best protect herself during a violent incident such as which rooms in the house are safest, whom the victim can call for help, and/or how to safely leave the house. It also can include establishing a support system and enhancing her financial resources.



Using the criminal justice system and courts. Effective safety planning may include the use of the criminal justice and civil court systems to hold the perpetrator accountable. The victim's safety and that of her children may be enhanced by involvement of the criminal justice system. (Refer to the later section on **criminal sanctions for the perpetrator**, page 57).

Talk to the victim about the options for prosecution. The local domestic violence service providers can offer court advocacy and assistance through this process. If no law enforcement report has been filed and she wants police involvement, suggest she contact law enforcement. If a report has been filed and if she wants prosecution, put her in contact with the district attorney's office.

Coordinate with police to photograph injuries, especially if evidence-based prosecution is a possibility.

If the perpetrator is on probation or parole, notify the judge or parole officer of the domestic violence. Encourage conditions that decrease his access to the victim and children. Recommend an increased level of supervision and/or transfer to a domestic violence unit, if available.

Risks to the victim don't end when she leaves the perpetrator.

Domestic violence homicide or serious assault is actually more likely to occur when the victim is in the process of leaving the perpetrator or has left the perpetrator. Indicators of greater danger from the abuse include:

- Believable threats or fantasies to kill himself or others.
- Fascination with weapons, especially guns.
- Abuse of weapons in prior abusive acts.
- A plan to hurt himself or others and a means to carry out the plan.
- Excessive use of alcohol and/or other drugs.
- Stalking behaviors.
- History of hostage taking.
- Abuse of pets.
- Obsessions about partner or family.
- The perpetrator has easy access to the victim or children.
- Disregard for authority.

- The perpetrator's feelings that he has nothing left to lose.
- Whether the victim believes the perpetrator is capable of killing her.

If the perpetrator is out of the home but still harassing the victim, her safety plan may include obtaining a restraining order; notifying neighbors, her work place or other places she frequents what the perpetrator looks like and/or what car he drives; how to call police, etc. Again, the plan must be individualized and based on what the victim believes will work.

Children need their own safety plans. Children are aware of violence in their home, and they are aware of the child welfare involvement. A discussion at the child's level is appropriate. Child welfare workers should discuss safety with the child at the first contact and should continue throughout the life of the case. The worker should also encourage the non-offending parent to discuss the violence and safety planning with the child. Even the perpetrator can play a role by affirming that the violence is not the child's fault (or by stopping all abusive behavior).

Talking to children about domestic violence. The following tips on talking with children about domestic violence are based on a handout by Community Advocates in Portland:

- What do they do/where do they go when the violence happens? Help them think of a couple of safe places if they don't already have one (e.g., neighbor, manager's unit, back yard, bedroom, head under a pillow, focus on the TV).
- Be sure they know it's not safe to try to stop the violence, even though they might really want to.
- Do they have access to a phone, and do they know about 911? Do they feel safe calling 911 if needed? Is there anyone else they can call?
- It's not their fault; it's not the fault of the parent being hurt.
- Try not to pass judgment on the perpetrator. Kids often love him. They just want the violence to stop.
- Is there someone they can talk to again about the problem if they need to (e.g., from family, school, faith community, sports team, summer program)? Help them think of two or three people. Try to get each child connected to an ongoing support system outside of the home.



PRACTICE APPLICATIONS

CONFIDENTIALITY AND INFORMATION SHARING

Legal and policy framework

CHILD PROTECTIVE SERVICES

Child welfare cases with domestic violence present follow standard confidentiality policy requirements.

In child welfare cases, case information is confidential and has some protections, including prohibiting release of personal information to another person such as the domestic violence perpetrator. Information provided to the court can be viewed by the other party in a case, including the perpetrator. When making decisions about information sharing, consider safety concerns for both child and adult victims.

Oregon law provides the support and guidance for making such decisions. ORS 419B.035 authorizes DHS Child Welfare to disclose reports and records compiled under the child abuse reporting law without a signed authorization if:

- A) Disclosure is in the best interests of the child who is the subject of the report AND disclosure is necessary for DHS to administer its child welfare services; or
- B) Disclosure is necessary to investigate, prevent or treat child abuse and neglect or to protect children from abuse and neglect.

DHS may release information necessary to complete the child abuse assessment. When appropriate, these disclosures may occur during screening staffing as part of the CPS assessment process or in preparation for or during a Team Decision Meeting.

Disclosure allows for better assessment by sharing information with domestic violence service providers and other key partners. Only the minimum necessary information to accomplish the intended purpose should be disclosed. Consider the potential impact on safety for both the child and adult victim.

When the CPS assessment process is over and a disposition is determined, DHS Child welfare must obtain signed authorizations to release additional information.

DOMESTIC VIOLENCE

Funding statutes and regulations for both state and federal funding for domestic violence shelter and related services require funded agencies to keep client information confidential. Information can only be released with consent of the client. Safety concerns may over-ride that in the case of reporting child abuse or neglect. While domestic violence programs are not cited in the statute as mandatory reporters, they do make reports of child abuse and neglect. They can release only the information necessary for that report. Domestic violence programs must obtain consent from clients to release further information.

MULTI-DISCIPLINARY TEAM MEETINGS

Child abuse multi-disciplinary teams and other formal collaborations have written protocols covering release of information. Within the MDT setting, child protective services workers may share information when disclosure is necessary to investigate, prevent or treat child abuse. Law enforcement may also share investigation information. Information shared within the MDT is confidential and cannot be released beyond that framework. Any information law enforcement discloses on an active investigation cannot be released.

WRITTEN INFORMATION

Consider using sensitive case designation when necessary to protect the safety of both adult and child victims, especially if the perpetrator is an employee of DHS, law enforcement or a community partner.

Inform victims which of their information will be included in the case file and what will be part of the court record that the perpetrator may access. The narrative report form (147) allows for keeping addresses confidential.

COURT INFORMATION

Do not include addresses in the court report if there is a safety concern. Service and safety plans can be described in general terms as to not disclose specific information to the perpetrator. If the situation requires sharing sensitive information which may impact safety, request in chambers meeting with the Juvenile Court Judge to disclose that.

Practice principles: Confidentiality and safety concerns

For both child welfare and domestic violence advocates, maintaining confidentiality is an essential part of building trust with our clients. However, too often domestic violence and child abuse are hidden secrets within families. Breaking that isolation and secrecy may assist victims in achieving safety.

Staff in both agencies should obtain signed release of information consent forms. The release should specify to whom the information will be released and the type of information. Before obtaining signed consent, discuss with the adult victim what information may be shared and what might happen with that information, including what could be included in a court document that the perpetrator may access. Explain the victim's confidentiality rights as well as the limits to those rights. Safety concerns may take precedent over confidentiality.

PRACTICE APPLICATIONS

INTERVENTION & CASE PLANNING

As with any child abuse cases, case plans and service agreements are developed based on the individual family's safety concerns, strengths and needs. The family should be involved in this process. Coordinate with other DHS staff, service providers and agencies involved with the family.

When writing case plans and service agreements, discuss what will be included in any court order. Use optional or voluntary services for the adult victim to the extent possible.

- Write individual case plans and service goals that strengthen the autonomy of the adult victim and hold the domestic violence perpetrator, not the victim, responsible for the abusive behavior and for stopping it.
- For perpetrators, it is important for them first to stop being violent, begin taking responsibility for the violence, and reduce their use of power and control tactics before their partner or children can safely participate in other services with them.
- Service goals for the perpetrator should focus on cessation of all forms of physical and verbal abuse; cessation of interference with the partner's efforts to parent; compliance with restraining and other court orders; and completion of a batterer intervention program.
- Follow-up to ensure the perpetrator is complying with required services.
- Family or couples counseling or other services with joint contact are not appropriate unless the criteria listed in the paragraph above are met.
- Use a juvenile court restraining order to limit or prohibit the perpetrator's contact with children if they have been physically or sexually abused and a petition has been filed (see page 62).



PRACTICE
APPLICATIONS



- Refer the perpetrator to a batterer intervention program that addresses power and control issues, not “anger management.” *(Please refer to a following section on batterer intervention, page 66).*
- Schedule individual meeting(s) with the victim without the perpetrator present to develop the case plan with her.
- Sequence services to focus first on “barrier” issues that must be dealt with before family members can benefit from other services. For example, people with substance abuse problems may need to establish initial recovery or a parent with an acute and untreated mental illness may need to be stabilized on medication.
- Develop a logical and achievable service plan for the family and its members by prioritizing service needs. For example, if an abused woman with three small children and no automobile is encouraged to attend a support group, get two of her children to counseling appointments, see an individual counselor herself, come to a weekly parenting class and attend twelve-step meetings, all at the same time, she may not realistically be able to do so.
- Focus on the concrete supports victims need (housing, financial assistance, legal protection) as well as support that counteracts coercive tactics used by the perpetrator. Identify with her specific tactics used by the perpetrator such as isolation or humiliation to help identify the support services she needs.
- Recommend specific services that are appropriate, rather than more general “support group.”
- Refer to culturally competent or cultural specific programs. Arrange interpreters or other assistance if needed.

Indian Child Welfare Act

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

Family meetings in service planning

Child welfare is committed to family involvement in service planning. Family meetings include Team Decision Meetings, Family Decision Meetings and System of Care Meetings.

Team Decision Meetings occur when considering placement decisions including:

- When a child may be placed outside of the home, and
- At placement changes, significant changes in family circumstances, and visitation plan changes.

Refer to the Child Safety Assessment and Safety Planning policy.

Family Decision Meetings are used in developing case plans and service agreements, as well as at other times during the case.

- Plan family meetings carefully. Develop safety plans for before, during and after the meetings.
- Conduct separate early safety planning meetings with adult victims.
- Arrange for support people for both adult and child victims.
- Ask a domestic violence service provider to give information about domestic violence to the participants.
- Begin with the assumption that the perpetrator will be excluded from being physically present at the meeting. He can be represented through a letter, or a separate meeting can be held with him.
- If the victim wants the perpetrator present, ensure there are people there (probation, law enforcement, other family members) who will clearly hold him responsible and interrupt any intimidating behavior. Again, develop safety plans for before, during and after the meetings.
- Service agreements may be developed through Family Decision Meetings. Clarify with the victim what will become part of the court order.

Please refer to the Oregon Child Protective Family Decision Meeting Guide.

Alcohol and other drugs

Child welfare workers are likely to work with families with multiple issues. Domestic violence frequently co-exists with alcohol and/or drug abuse. However, these are separate issues, and both must be addressed. Consult with chemical dependency treatment specialists and domestic violence advocates to develop interventions.



**CASE PLANS
AND SERVICE
AGREEMENTS
ARE
DEVELOPED
BASED ON THE
INDIVIDUAL
FAMILY'S
SAFETY
CONCERNS,
STRENGTHS
AND NEEDS**



**PRACTICE
APPLICATIONS**

For the perpetrator who is using, refer to both batterer intervention programs and chemical dependency programs. Use chemical dependency programs that understand the dynamics of power and control and work cooperatively with batterer intervention and domestic violence service providers.

For the victim who is using, refer to both domestic violence service providers and chemical dependency programs. Keep her safety needs foremost, especially if her perpetrator is also her supplier. Use chemical dependency programs that understand the dynamics of domestic violence and victimization. Many treatment and twelve-step programs offer women only treatment and groups. Do not have the victim go to the same program as the perpetrator.

PRACTICE APPLICATIONS

OTHER DHS SERVICES

DHS has many programs that may be accessed by survivors of domestic violence. These programs include:

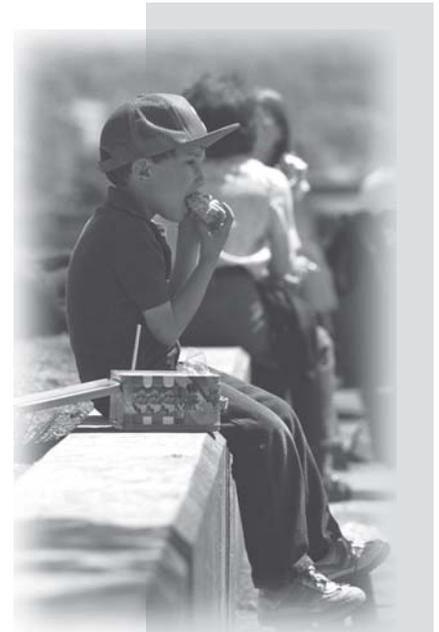
- Cash assistance through Temporary Assistance for Needy Families (TANF).
- Temporary Assistance for Domestic Violence Survivors (TA-DVS) to help victims of domestic violence achieve safety.
- Medical assistance through Oregon Health Plan (OHP), including chemical dependency and mental health treatment.
- Other contracted chemical dependency and mental health treatment.
- Food stamps (issued through the Oregon Trail Card).
- Employment-related day care.
- The JOBS program and self sufficiency services.
- Services for seniors and people with disabilities.

TANF

Most requirements for cash assistance or TANF (Temporary Assistance for Needy Families) can be waived if they put a client at risk for domestic violence or maintain the existing risk of domestic violence. This includes citizenship requirements for battered immigrant women.

Requirements that cannot be waived include:

- Being pregnant or having a minor child. However, the requirement that the pregnancy must be in the last month may be waived.
- The child doesn't have to be in the home if it's expected that the child be returned in a "reasonable" period of time. There is no specific time frame defined as "reasonable," However, it is recommended that field staff consult with a supervisor if the time limit is longer than 90 days.



- The income standard, but in many situations they may not have to count all the income. For example, income controlled by the perpetrator is not counted.

Please refer clients for eligibility determination.

TA-DVS

“Temporary Assistance for Domestic Violence Survivors” (TA-DVS) is designed to provide temporary financial assistance and support services to families impacted by domestic violence during crisis or emergent situations. Most often this is when the domestic violence survivor and her children are fleeing domestic violence or at risk of returning to a battering situation. DHS self-sufficiency staff will work with the client to identify safety concerns and appropriate resources.

- Up to \$1,200.00 is available to meet the needs of families fleeing abuse or to assist families in remaining free from abuse.
- Program benefits include housing related payments (rent, mortgage payments, utilities); payments related to setting up a household (furniture, household items, etc.); payments to increase safety (locks, post office boxes, etc). and payments to replace personal items that had to be left behind when fleeing abuse (clothes for survivor and children, etc)., if such items are not available from other sources.

The program is opened for 90 days to allow time for the adult survivor and her children to stabilize their living situation and address immediate safety concerns.

- Participants may receive services more than once a year based upon current safety issues.
- Payments are generally made directly to landlords or to specific providers.

Women facing additional barriers

Victims of domestic violence may face additional barriers in accessing services if they are members of a group typically under-served by traditional agencies. Social service organizations and civil and legal systems have not been as responsive to women whose primary language is not English, women with disabilities, lesbians, gays, bi-sexuals, transsexuals, and trans-gendered people, and women

from diverse cultural and/or faith groups. Identifying culturally appropriate services and accessible services are key parts of service planning.

Use of interpreters

Use professional interpreters who have an understanding of domestic violence and will not blame the victim. Use of family or friends is not recommended, especially when they may side with the perpetrator. Do not use children. If the interpreter is known to the victim, ask the victim if that interpreter is acceptable to her.

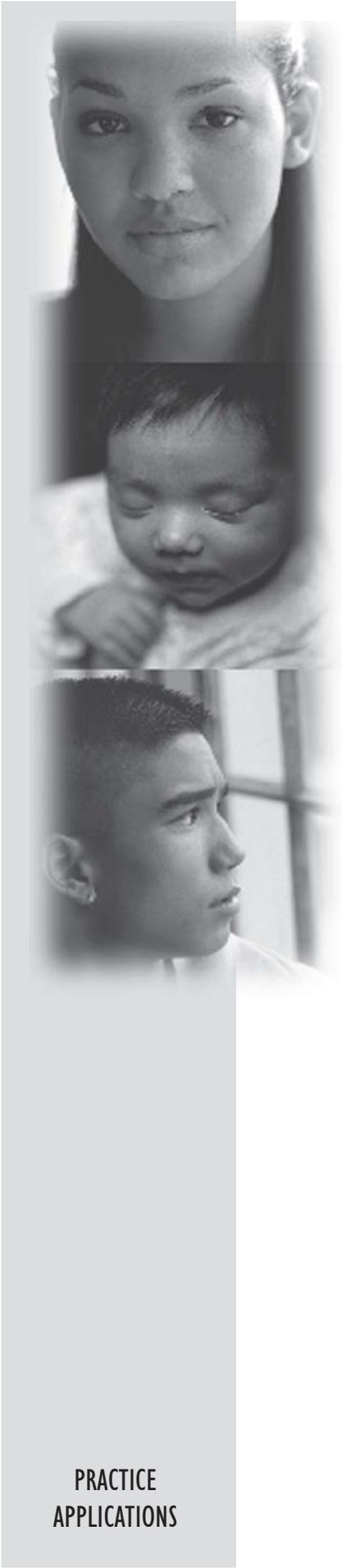
Services for children

Include the children's unique needs and strengths in service planning. There may be a lack of services for child witnesses of domestic violence. If a child and mother are living in a shelter, there will be individual support for the child, and there may be a children's group. Some domestic violence service providers, other community agencies and private therapists also offer voluntary groups for children in the community. The immediate goals with children are to:

- Assess safety threats to them and develop ways for them to be safer.
- Assure children the violence and intervention are not their fault.
- Identify and heal the effects of the violence.
- Maintain their bond with the non-offending parent.

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





PRACTICE APPLICATIONS

JUVENILE COURT INVOLVEMENT

Juvenile court jurisdiction and wardship may be a way to help the adult victim protect her child. The petition may move the perpetrator's focus from the victim to the court. The judge then becomes the one to say the violence cannot continue and to hold the perpetrator, not the victim, responsible for stopping it. Discuss with the woman what part of any service plan will become part of the court order (see service planning section).

Juvenile Courts do have authority to restrict visitation (ORS 419.331). They also can order a parent into "treatment or training" (ORS 419B.387) which can be a way to get a perpetrator into an intervention program when there are no criminal charges pending.

- File juvenile court petitions on domestic violence when there are substantial safety risks to the children caused by domestic violence, the safety risks cannot be reduced by voluntary intervention, and the adult victim does not have the necessary supports available to protect the children without such intervention.
- Petition language for the perpetrator can include "the father has subjected the mother of the children to domestic violence, endangering the child's welfare" or "the father has a pattern of assaultive or aggressive behavior towards family members which poses a continuing threat to the child's welfare."
- Write juvenile court petition allegations in language that is not victim-blaming. For example, petition allegations can say "the child was exposed to domestic violence" as an endangering condition or circumstance. Use the phrase

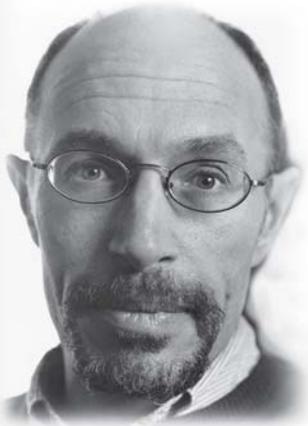
“the mother is unable to protect” instead of “the mother has failed to protect” to reduce the blame placed on the victim.

- Document any possible behavioral signs of the domestic violence in the children, especially statements that they are afraid of the perpetrator.
- Use reports and other documentation to make the case for protection of the children. Avoid asking the mother to jeopardize herself by talking in court in front of the perpetrator about him and his violence. This follows the principles of evidence-based prosecution in criminal courts which has been successful in several jurisdictions. In those cases, charges are pressed in court against the perpetrator without the victim testifying for the prosecution. Remember, a victim recanting allegations of abuse may actually be a protective measure and may be due to ongoing control by the perpetrator.
- Ask the court to place appropriate restrictions on the perpetrator’s visitation with the children and order the perpetrator to complete services, including batterer intervention, if he has legal standing.
- Juvenile courts should not mandate the adult victim obtain a restraining order.
- Whenever possible to do so without compromising the safety of the children, advocate that the court not mandate specific services for the adult victim. However, there are situations in which it may be best to recommend that services for the victim be written into the court order, with her consent. This allows the victim to pursue services which may keep her safer without openly challenging his control. (*See service planning section, page 37*).

In a juvenile court case consolidated with a domestic relations case, advocate for professionals with domestic violence expertise to conduct the child custody study. Recommend that the court follow recognized guidelines on domestic violence cases when considering mediation (e.g., those of the National Council of Juvenile and Family Court Judges, free by calling 1-800-527-3223, or the Family Violence Prevention Fund).

PRACTICE APPLICATIONS

ABSENT FATHERS



When searching for absent fathers in any case, ask about any history of domestic violence in that relationship. Check police records, restraining order information and other sources. If the woman is concealing her whereabouts from him for safety reasons, discuss safety planning with her and take necessary precautions when preparing written information and court documents.

It may be appropriate to enter a claim of “Good Cause” for failure to pursue child support on behalf of the child.

PRACTICE APPLICATIONS

VISITATION PLANNING



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

- Start with the assumption that visits between the perpetrator and the children, if they occur, should be supervised by child protective services staff.
- Check on possible restraining orders, no-contact orders or conditions of probation or parole that would impact visitation.
- Arrange visits carefully to ensure the safety of the children and the adult victim. Schedule separate visits when possible both to increase the safety and to allow the victim uninterrupted parenting time with the children.



PRACTICE APPLICATIONS

CASE CLOSURE

Child factors that lead to case closure include:

- Children are safe and likely to remain safe over time,
- Children are exhibiting fewer behavioral effects of violence than before intervention, or
- Children are in counseling, or connected with other resources.

Non-offending caregiver factors leading to case closure include:

- Safety plan and ability to carry it out,
- Ability to protect children,
- Ability to access resources or support, and
- Other case issues are addressed or are not affecting parenting ability.

Perpetrator factors leading to case closure include:

- Perpetrator is out of home and has with no contact with children, or
- Perpetrator is accepting responsibility for his behavior and not using physical violence or control tactics, and
- Perpetrator is complying with parole or probation supervision and any ordered intervention program, and
- Other case issues (drug or alcohol abuse, etc). are resolved or not affecting parenting ability.

RESOURCE INFORMATION



SAMPLE QUESTIONS

4

These questions can be adapted to fit your interviewing style. Start with open-ended questions first, then ask follow-up questions.

Screening any call

Sample questions to ask a caller reporting child abuse or neglect in any case include the following. If the caller reveals information about domestic violence, move into the more specific questions in the next section.

- Who is in the household? How are they related to each other?
- Tell me about the relationship between the adults.
- Tell me if anyone else in the family has been hurt.
- Have the police ever been called to the house? If yes, tell me about that. How many times? Was anyone arrested?

Screening domestic violence allegations

Sample questions include:

- Describe the violence. Has the violence changed or increased over time? How often does it happen?
- Tell me about any recent injuries or accidents.
- If the police are or were involved, what happened?
- Where were the children during the violence? Describe what the children do during the violence.

- Tell me about any threats to hurt or kill family members or pets.
- Most people think of weapons as guns or knives, but other objects can be used to hurt someone. Has anyone used a weapon to threaten or harm someone in the family? If yes, tell me about that. Describe what, if any, weapons are in the house.
- Has any family member stalked (harassed, followed, tracked, menaced) another family member? Has anyone taken a family member as a hostage? If yes, tell me about that.
- Has the abuser threatened to leave with the children? If so, tell me about that.
- Tell me about any family members using drugs or alcohol.
- Describe any effects of the domestic violence on the children.
- Who is protecting the children now?
- Describe any contacts the victim has with family members or community members.
- Tell me about any assistance the victim has tried to access.
- Describe any assistance that has been given by people or agencies.(e.g., family members, friends, church, social service agencies).
- Tell me what you think will happen if we contact the family. Do you think contacting the family will be safe? What you think will happen if we go out with law enforcement?

Assessment of physical factors at the home

Look for physical signs of domestic violence and ask family members to talk about them. Include:

- Visible injuries or injured areas hidden.
- Flinching or signs of anxiety.
- Use of dominating or intimidating body language.
- Weapons.
- Holes in walls, broken furniture, or doors and windows that do not latch.
- Telephone is broken, disconnected or missing.
- Home not adequately accessible for family member's disabilities.

- Guard animals, especially if family members exhibit fear of them.
- Home is in isolated location.

Assessment questions for the adult victim: General domestic violence

The following are sample questions to ask the victim. Adapt these to your style and the situation.

- Tell me about your relationship.
- How do decisions get made?
- What happens when you and your partner disagree?
- What happens when your partner feels jealous or possessive?
- Have you ever felt afraid of your partner? Tell me about that.
- Has your partner ever threatened you or your children? Tell me about that.
- Most people think of weapons as guns or knives, but other objects can be used to hurt someone. Has anyone used a weapon to threaten or harm someone in the family? If yes, tell me about that.
- How does your partner treat your pets? Your property?
- Has your partner pressured you or forced you to have sex? Tell me about that.
- How often does your partner drink or use drugs? What happens then?
- Has your partner ever used force against you? Pushed? Shoved? Hit? Strangled?
- If so, tell me about the worst episode. What was the most recent episode?
- How frequently does this happen?
- Does your partner do reckless things that scare you, such as driving too fast with the children in the car? Tell me about that.
- How often do you get hurt by accident?
- On a scale from 1-10, how safe do you feel?

Assessment questions for the adult victim: Power and control

Questions designed to look at issues of control tactics and isolation include:

- What do you do during the day? Has your partner prevented you from going to work/school/church? Tell me about that.
- Who are your friends and family? How much contact do you have with them? Is your partner usually there? Has your partner prevented you from seeing friends or family?
- Does your partner listen in to your phone calls or otherwise monitor your communication? Tell me about that.
- Does your partner call you names, insult you or scream at you?
- How do you and your partner make decisions about money? Can you spend money when you want to? Whose name is on the accounts?
- How do you and your partner divide up household responsibilities?
- If you could change one thing about your partner, what would it be?

Assessment questions for the adult victim: Impact on the children

Additional questions to assess the impact of the violence on the children include:

- Have the children ever been hurt, either accidentally or on purpose? Tell me about this.
- Where are the children when the fighting happens?
- Describe how the children respond to the violence. Have you noticed any effects?
- On a scale from 1-10, how safe are your children? How safe do they feel? How safe do they think you are?
- Describe any problems your child has in school or with friends.
- Describe activities or groups your child is involved with.
- How often have you had to move or change the child's school?
- How do all the things we've talked about today affect the way you can care for your child?

- Is your partner able to take care of the child and keep the child safe? Does he make decisions that are best for the child?
- Describe how your partner supports your parenting and how he interferes with your parenting.
- Describe how your partner disciplines the child.
- Does your partner call your children names, insult them, or yell at them?
- Have you ever suspected that your partner may be sexually inappropriate with your child?
- Does your partner ask the child to pass messages to you or ask the child to tell him what you do during the day?
- If your child has visits with your partner, how has that been going? What does the child say about the visits? What happens at drop-off and pick-up times?



Assessment questions for the adult victim: Strengths

It is also important to assess strengths and protective factors in the family and the strategies the victim has used to keep her children and herself safe. Ask:

- Describe what you do to keep yourself and your children safe.
- Whom have you asked for help?
- Have you ever left the situation? Where did you go? What happened?
- Who are friends and family members you can talk to?
- What has your partner done to stop being abusive?
- What do you think needs to happen for you and your children to be safe?

Wrapping up with the adult victim

Use the following information to begin building a plan focused on the victim's and her children's immediate safety (see page 28). Based on the information you gather, you may decide to postpone the next step of your assessment until she and the children are in a safe place.

- How dangerous do you think your partner is? What do you think he is capable of? What is the worst-case scenario?



- What do you think will happen when I leave?
- How do you think he will react when he finds out we talked to you?
- How do you think he will react when he finds out we talked to the children?
- How do you think he will react when he receives the disposition?

Assessment questions for the children

Adapt your questioning to the developmental age of the child. If children are old enough, questions can also be asked of them, including the following. At this time, talk to them about ways to stay safer. As in any child interview, start with questions to develop rapport, and use the child's language.

Ask general questions first.

- Who lives or stays in your home (including pets)? Who visits?
- What things do you do with your mom? What things do you do with your dad?
- What do you like about your mom? What do you not like about your mom?
- What do you like about your dad? What do you not like about your dad?

If the child(ren) discloses violence, follow-up with clarifying questions to define terms and determine what happened.

- Does anyone hit, shove, push, or throw things? Who does that?
- Tell me about the last time that happened.
- Has anyone gotten hurt? Who was there? What happened next? (Follow-up with specifics about police, doctors, etc).
- When this happened what did you do? What did other family members do (including pets)?
- How does it make you feel?
- Has anyone asked you not to talk about this?

When ending the interview, ask:

- Do you have anyone you can talk to if you don't feel safe.... when you are worried....when you are hurt? Who do you talk to when you don't feel safe....are worried....when hurt?
- What would you like to see happen? If you could have three wishes, what would they be?

Talk to the child about what will happen next.

Assessment questions for the abuser: General domestic violence

The following are sample questions to ask the alleged abuser. You may want to reassure him that the domestic violence questions are a routine part of any family assessment. These questions can also be used to screen for domestic violence when it was not part of the allegation.

- Tell me about your relationship.
- How do decisions get made?
- What happens when you and your partner disagree?
- What do you do when you feel jealous or possessive?
- Does your partner ever seem afraid of you?
- Do you or your partner use alcohol or drugs? How often?
- Has your partner been hurt during an argument? What happened?
- Have you ever used force against your partner? Pushed her? Shoved her? Hit her? Choked her?
- If so, tell me about the worst episode. What was the most recent episode?
- How frequently does this happen?
- Have the children ever been hurt? Where are they when this happens?
- On a scale from 1-10, how safe do you feel in your family? How safe do you think your partner feels? Your children?





Assessment questions for the abuser: Power and control

Questions on coercive tactics can include:

- What does your partner do during the day?
- Who are her friends or family? How often does she see or talk with them?
- Do you listen in to your partner's phone calls?
- Do you call your partner names, insult her or scream at her?
- How do you make decisions about money? Whose name is on the accounts?
- Describe how you discipline your children. How does your partner?
- How do you divide up household responsibilities?

Assessment questions for the abuser: Impact on the children

Additional questions to assess the impact of the violence on the children include:

- Describe any problems your child has in school or with friends.
- Describe activities or groups your child is involved in.
- How often have you had to move or change your child's school?
- How does the violence interfere with the care of your child?
- Describe how your partner disciplines the child.
- If your child visits you, how has that been going? How much time do you spend together? Who, if anyone, helps care for your child on visits?

Assessment questions for the abuser: Strengths

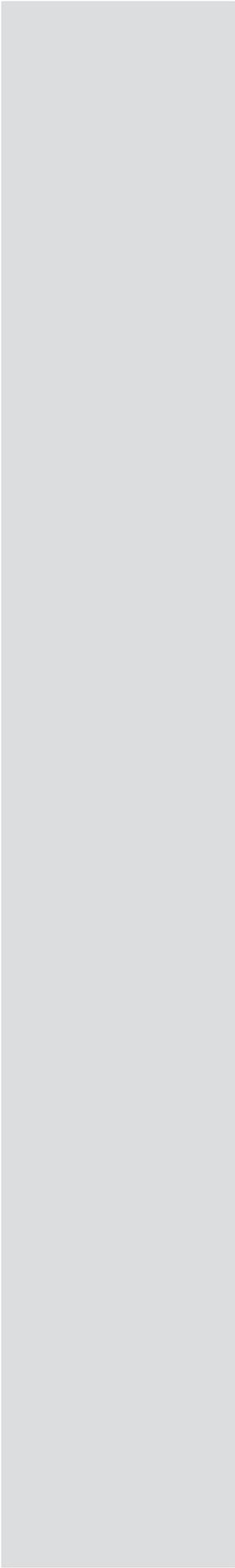
It is also important to assess strengths and protective factors in the family. Ask:

- What have you done to stop the violence?
- Whom have you asked for help?
- What happened when you asked?
- Who are friends and family members you can talk to?

Assessment questions for the abuser: Encouraging access

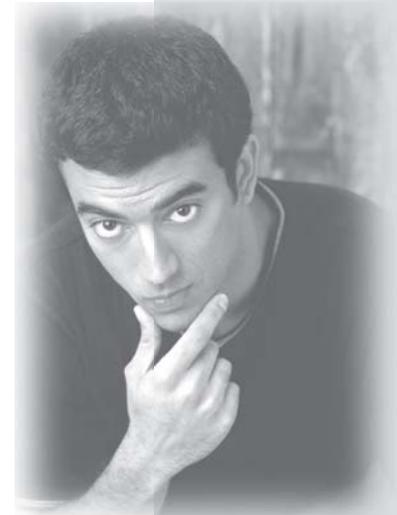
If an abuser tends to identify his partner or children as the problem instead of his own behavior, he might allow them to access services. The worker can then use this as an opportunity to work with the victim and children. However, this can also be seen as colluding with the batterer and reinforcing his control.

- If you could change one thing about your partner, what would it be?
- Are there any services or information you or your partner might want to help strengthen your family? To make one or both of you better parents?
- Are there any services or information your children need?



RESOURCE INFORMATION

CRIMINAL SANCTIONS AGAINST THE PERPETRATOR



Oregon has a “mandatory arrest” statute. Police are required to arrest when responding to a domestic violence call if they have probable cause to believe that an assault has occurred between family or household members, or to believe that one such person has placed the other in fear of imminent serious physical injury (ORS 133.055). Police are also directed they should not arrest both parties, but determine who is the primary assailant.

If arrested, a perpetrator can be issued a “no-contact order” when released from jail pending prosecution. The “no-contact order” can prohibit the perpetrator from having any contact with the victim. Violation of the no-contact order is cause for re-arrest.

Most domestic violence assaults have been charged as misdemeanors. However, **Assault IVs can be charged as felonies if:**

- The person has previously been convicted of assaulting the same victim.
- The person has previously been convicted at least three times under this section or under equivalent laws of another jurisdiction and all assaults involve domestic violence.
- The assault is committed in the presence of, or is witnessed by the person’s or the victim’s minor child or stepchild or a minor child residing within the household of the person or victim.

The 1999 Legislature clarified that for purposes of this statute, an assault is witnessed if the assault is seen or directly perceived in any other manner by the child. (ORS 163.160).

Some district attorneys are now proceeding with criminal cases against the perpetrator even without the victim’s cooperation. These

cases can be successfully prosecuted if law enforcement documented the assault and gathered adequate evidence. This type of “evidence-based prosecution” can be dis-empowering to the victim if she does not want the perpetrator to be prosecuted. On the other hand, prosecution without the victim’s consent can help increase her safety by turning the perpetrator’s focus onto the system and the court. It can reduce the intimidation the perpetrator typically uses to get the victim to drop the charge.

RESOURCE INFORMATION

PROTECTION ORDERS



The information below is intended to be an overview. It is taken from *Decoding the Family Abuse Prevention Act: an Annotated Guide to Oregon Domestic Violence Prevention Statutes* by Legal Aid Services of Oregon. Court personnel or legal advocates can provide more detailed, specific information. Protection or restraining orders can be valid options for battered women, especially because there are legal sanctions and arrest if the perpetrator violates the order.

However, for some victims, seeking a restraining order could increase the risk. It is an option to be explored, but not mandated. While safety planning with the victim, consider her experience with and knowledge of the perpetrator. She knows best the risk a restraining order presents.

- Is he a person who respects authority and will abide by the order?
- Will he see the order as a restriction or as a loss of his power and control over his family?
- Will he believe he now has nothing left to lose and thus become a lethal threat to the adult victim, the children, and/or to others?

With the assistance of a domestic violence advocate trained in the areas of restraining orders and power and control dynamics, the victim can weigh the risks and benefits of obtaining an order. The advocate can facilitate a discussion of other options available for her safety (shelter, relocation, stalking order, etc).

Family Abuse Prevention Act

There are temporary restraining orders (TROs) that are available to victims if they meet the requirements of those orders. The most commonly used is the “Family Abuse Prevention Act” (FAPA) through the adult court system (ORS 107.700-730).

The FAPA order or TRO is a civil restraining order available to victims on a self-help basis. Victims do not need to have attorneys. Many local domestic violence service providers and/or victim

assistance programs have advocates that can assist victims. Contact your local domestic violence service providers for information on what assistance is available to victims, when judges will sign orders, and other local procedures.

An adult (the “petitioner”) can qualify for a restraining order if there has been at least one act of abuse or threatened abuse to her within the last six months by:

- The spouse.
- Ex-spouse.
- Intimate co-habitant or former intimate co-habitant.
- Adult in-laws or relatives.
- Someone with whom she had a sexually intimate relationship within the last two years.
- The other parent of her minor child.

The victim must also be in danger of further abuse by this person (the “respondent”) at the present time.

RESTRICTIONS ON PERPETRATOR

The restraining order can prohibit the perpetrator from intimidating, molesting, interfering with or menacing the victim. The victim may have her home, work and other places listed as restricted. The order can require the perpetrator to move out of the victim’s home or a jointly-owned home. A federal law prohibits most perpetrators from possessing firearms while the restraining order is in effect.

TEMPORARY CUSTODY OF CHILDREN

The restraining order can grant temporary custody of the children to the victim, and it can limit visitation by the perpetrator. It can also grant visitation to the perpetrator. In those cases, victims who then leave the area could be held in contempt of court if the visitation is not allowed.

OBTAINING A RESTRAINING ORDER

Restraining order forms are available at the clerk's office in every county courthouse. Restraining orders are usually signed in court without the respondent present (ex parte hearings). The restraining order is not valid until it is served on the respondent and entered into the statewide restraining order computer system.

COURT ACTION

The respondent may request a hearing to contest the order within 30 days of being served. Hearings are then held within 21 days unless custody of children is involved, in which case the hearing will be scheduled within five (5) working days. It is critical that the victim provide the court with a valid address where she can be notified in case of a hearing. If the court orders a hearing and the petitioner does not appear, the court may dismiss the order. The court can provide a form that will keep the petitioner's address confidential.

Restraining orders automatically expire after one year. However, they can often be renewed if the petitioner applies before the expiration date of the order.

If a woman is planning on leaving the state, she may still obtain a restraining order. The "Full Faith and Credit" provisions of the Violence Against Women Act require courts to recognize and enforce other state orders. She may be able to use a contact address in proceedings. Again, consult with an experienced advocate or attorney.

WHAT A RESTRAINING ORDER DOES NOT DO

The restraining order is not a guarantee of physical protection, but does give the victim the advantage of a court order. The law states police shall arrest if the perpetrator violates the order.

The restraining order can be a useful part of a safety plan. However, child protective services workers should not require restraining orders. It is an option to be explored, but not mandated. The FAPA restraining order also does not cover cases of child abuse where the adult has not herself been abused or threatened within the last six months. Those situations may be covered through a juvenile court restraining order.



Tribal restraining orders

Tribal courts can issue restraining orders for domestic violence committed on the reservation or if the victim resides on the reservation. Federal law states that other jurisdictions must give “full faith and credit” to tribal restraining orders and vice versa. Check with the victim’s tribal court.

Juvenile court restraining order

In cases where the child is a victim of child abuse or neglect, Oregon Revised Statutes 419B.845 allows the Juvenile Court to issue a restraining order. It reads:

When a petition has been filed alleging that the child has been physically or sexually abused, the court may enter an order restraining the alleged perpetrator of the abuse from having contact with the child or attempting to contact the child and requiring the alleged perpetrator to move from the household in which the child resides. The court may issue a restraining order only if the court finds that:

- A) There is probable cause to believe the abuse occurred and that the person to be restrained committed the abuse; and
- B) The order is in the best interest of the child.

Upon finding that to do so would aid in protecting the victim of the alleged abuse, the court may enter, in addition to a restraining order described in paragraph (a) of this subsection, other appropriate orders including, but not limited to, orders that control contact between the alleged abuser and other children in the household.

Stalking orders

A stalking order can be issued when a victim (the “petitioner”) has been subjected to repeated, unwelcome contact and it is reasonable for her to be alarmed for her own safety and/or the safety of her family. The standard used is that any person in the victim’s position would be reasonably alarmed by the behavior of the stalker (the “respondent”).

Stalking orders were designed in part to help those victims who are being harassed by someone they may not know or may not have a relationship with, such as a famous person being stalked by a “fan.” However, a stalking order may be issued when there has been a relationship. A parent may also file on behalf of her children.

Victims can obtain a stalking order by petitioning the court or by making a complaint to law enforcement. The court can issue a citation or the police can arrest. Like a FAPA order, the stalking order is free and does not require an attorney. Both parties must appear at all hearings on the matter.

The order can limit the respondent from contact in much the same way as a FAPA restraining order. The court can also order a mental health evaluation on the stalker. Just like a FAPA order, it is not valid until it has been served. Some orders are permanent; others require a hearing to be extended. Violation of the order is cause for arrest.

No-contact orders

When a perpetrator is arrested for a domestic violence crime, a no-contact order is often a condition of his release. Violators are held in contempt of court and may have to return to jail until the case is resolved. To report a no-contact order violation, call the police. They will have to verify the order by calling the jail or the district attorney's office before they arrest.



RESOURCE INFORMATION

SUPPORT SERVICES

Domestic violence service providers

Local domestic violence service providers offer a range of services, including emergency shelter, information and referral, peer support and advocacy. Shelter services may be provided through a shelter facility, volunteer safe homes or vouchering into motels. Peer support may be provided individually and in groups. A number of programs also have transitional housing programs and services for children. Services through domestic violence service providers are voluntary, confidential and free.

Contact your local program for more information of what services are available and how to refer. If you need a resource in another county, the Web pages for both the Oregon Coalition Against Domestic and Sexual Violence (OCADSV) and DHS Domestic Violence page have links to the list of programs statewide. The Web address for OCADSV is www.ocadsv.com. Local domestic violence programs have a nationwide referral book for victims leaving Oregon.

The National Domestic Violence hotline also has other state resources. Their number is 1-800-799-7233 (1-800-799-SAFE).

Substance abuse and mental health services

Other common referrals are to substance abuse programs and mental health services. When making these referrals, check to see what training and understanding they have of domestic violence. Victims may need domestic violence support groups as well.

When making referrals, the first priority for services are those that will provide the most safety. Services may be provided concurrently or may need to be consecutive. If both the victim and the perpetrator need services, they should be referred to separate groups and/or separate agencies. Talk with your local domestic violence service providers for recommendations.

Victims' assistance

Each district attorney's office operates a victims assistance program. Victim assistance programs offer crisis counseling, follow-up contact, information and referral, criminal justice support and advocacy, notification of court dates and related information, assistance in filing for Crime Victim Compensation and personal advocacy. Crime Victim Compensation can assist victims of crime who have no other resources with costs related to counseling, medical expenses, funeral expenses, loss of earnings and physical rehabilitation. Children who have witnessed domestic violence are eligible for compensation until they reach age 18. In addition, compensation is a valuable resource for the adult victims for up to three years after the incident.

Services for immigrant or refugee women

Child welfare services, TA-DVS and temporary restraining orders are available to all clients regardless of legal immigration status.

Married victims of domestic violence whose legal status in this country is dependent on their husbands may be able to obtain legal residency for themselves and/or their children through provisions enacted in the Violence Against Women Act (VAWA). They can "self-petition" for residency or can request "cancellation of removal" if they are in the process of a deportation. Some women and/or their children may qualify for the "U-visa" or political asylum. Please refer them to an immigration attorney or agency who assists clients with immigration issues. Your local domestic violence service providers may recommend agencies knowledgeable about the VAWA provisions. The National Lawyers Guild offers technical assistance and training through their Immigration Project.



RESOURCE INFORMATION

BATTERER'S INTERVENTION

More communities are developing batterer intervention programs. These programs may receive mandated clients through the court system. Your local domestic violence council may have existing standards or protocols. The Oregon Attorney General convened a task force to develop Oregon Administrative Rules for batterer intervention programs (OAR 137-087-0000). Final rules will be available in 2005. Check with your local domestic violence service provider on recommendations for specific programs.

The following information is based on a presentation by Vivien Bliss, of *Solutions: Domestic Violence Intervention Program* in Salem and materials from Mid-Valley Women's Crisis Service.

Programs must emphasize that violence is a choice perpetrators make to control their partners. Any explanation or theory must hold perpetrators accountable and responsible for their behavior and not allow them to excuse it. For example, an inappropriate theory is the "tension building/explosion/honeymoon cycle" which implies that violence is a response to tension, not a chosen behavior. Similarly, "anger management" or programs that emphasize tools to control anger are not appropriate referrals. Dealing only with feelings or increasing self-esteem also do not address the choices or power issues.

Look for batterer intervention programs that:

- Work well with the local domestic violence service providers.
- Are part of a coordinated community response.

- Have accountability built into the program through methods including attendance policies, reporting restraining order and no-contact order violations to the court, and making perpetrators pay the cost of the intervention program.
- Allow professionals to sit in and observe the functioning of the groups.
- Include education on oppression theory in their program.
- Are willing to testify in court.
- Do not compete for funding with victims services.

Perpetrators may also have co-existing problems of substance abuse or mental illness. However, both the co-existing problem and the battering need to be addressed directly. Substance abuse and mental health screening should be included in a batterer intervention intake process.

Just because a perpetrator attends an intervention program, does not mean he will change his beliefs and behaviors. Just stopping the physical violence is not enough if the threat is still there. Listen to how the perpetrator talks about his actions and his partner. Talk to the adult victim, the children, or others who know the family. Indications that he is changing include:

- He is no longer being physically violent or threatening.
- He acknowledges his abusive behavior is wrong.
- He is not using other forms of power and control such as economic abuse (withholding money, child support, etc)..
- He doesn't humiliate or degrade his partner.
- He accepts responsibility and does not blame his partner.
- The victim is able to disagree with him.
- The victim is able to make independent decisions and be involved in activities without him.
- He acknowledges he is not "cured" and change is a lifelong process.

RESOURCE
INFORMATION

RESOURCE INFORMATION

DOMESTIC VIOLENCE WEB PAGES

Making the Link: Promoting Safety of Battered Women and Children Exposed to Domestic Violence:

<http://www.mincaava.umn.edu/link/>

Minnesota Center Against Violence and Abuse: *<http://www.mincaava.umn.edu/>*

Family Violence Prevention Fund:

<http://endabuse.org/>

National Council of Juvenile and Family Court Judges Family Violence Department:

<http://www.nationalcouncilfvd.org/>

Substance Abuse and Mental Health Services Administration, Dept. of Health and Human Services, Center for Substance Abuse Treatment's Treatment Improvement Protocol #25 Substance Abuse Treatment and Domestic Violence. Go to the web page and select "Treatment Improvement Protocols" under SAMHSA publications:

<http://www.samhsa.gov/centers/csat/csat.html>

Oregon Department of Human Services domestic violence pages in the Abuse and Neglect section: links to a list of domestic violence service providers in Oregon:

<http://www.dhs.state.or.us/abuse/>

Oregon Coalition Against Domestic and Sexual Violence: *<http://www.ocadsv.com/>*

Oregon Family Law Resources through Oregon Judicial Department:

<http://www.ojd.state.or.us/family>

Washington Coalition Against Domestic Violence publications:

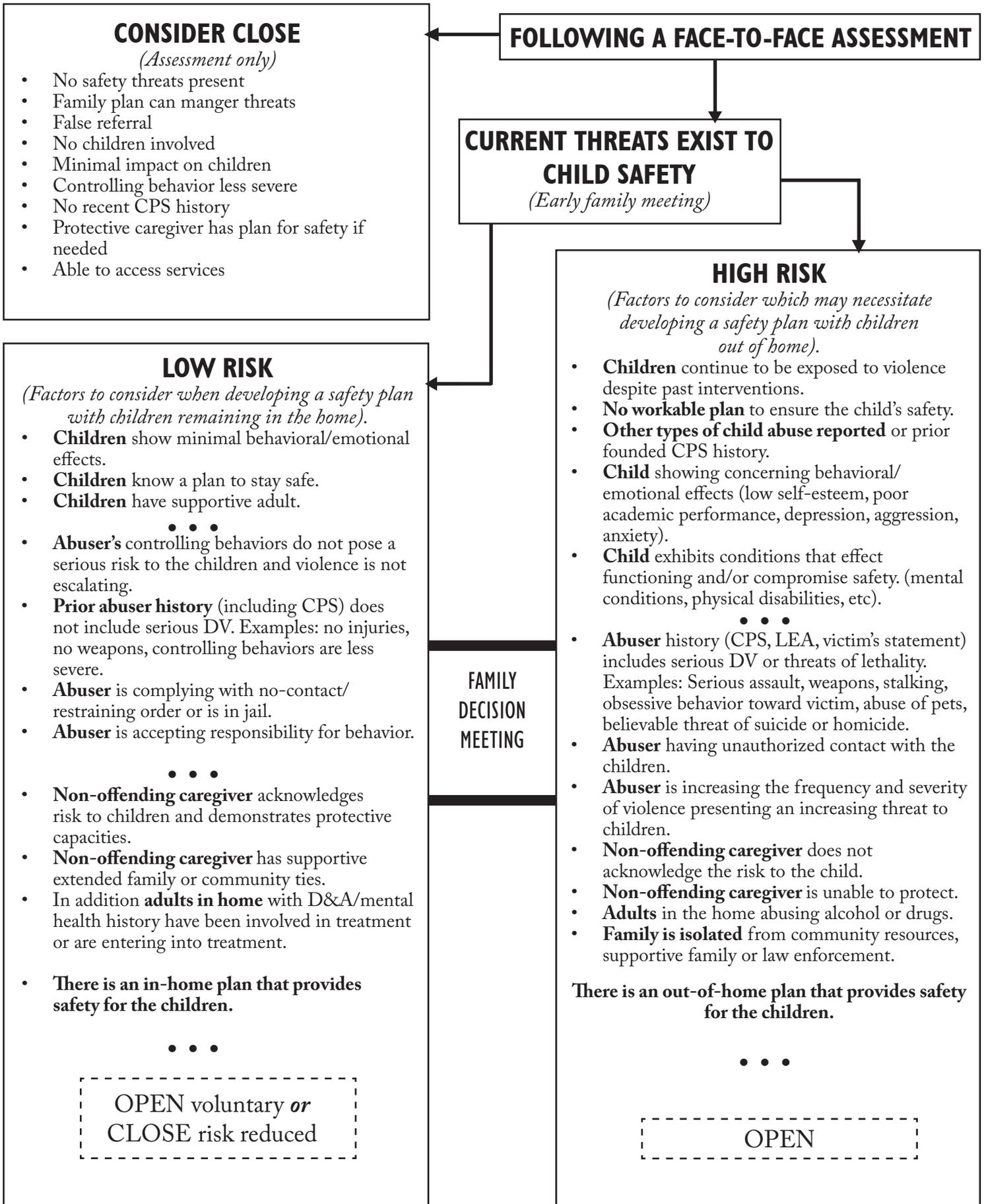
<http://www.wscadv.org/publications/index.htm>

Domestic violence and sexual assault materials in English, Spanish, Vietnamese and Russian are available at Mid-Valley Women's Crisis Service Web page: <http://www.mvwcs.com>.

These documents are also available in large print and on audio tape.

Many other local domestic violence service providers have Web pages. Search under the program's name.

CHILD PROTECTIVE SERVICES — Domestic violence intervention flow chart



CONSIDER CLOSE

(Assessment only)

- No safety threats present
- Family plan can manage threats
- False referral
- No children involved
- Minimal impact on children
- Controlling behavior less severe
- No recent CPS history
- Protective caregiver has plan for safety if needed
- Able to access services

FOLLOWING A FACE-TO-FACE ASSESSMENT

CURRENT THREATS EXIST TO CHILD SAFETY

(Early family meeting)

LOW RISK

(Factors to consider when developing a safety plan with children remaining in the home).

- **Children** show minimal behavioral/emotional effects.
- **Children** know a plan to stay safe.
- **Children** have supportive adult.
- **Abuser's** controlling behaviors do not pose a serious risk to the children and violence is not escalating.
- **Prior abuser history** (including CPS) does not include serious DV. Examples: no injuries, no weapons, controlling behaviors are less severe.
- **Abuser** is complying with no-contact/restraining order or is in jail.
- **Abuser** is accepting responsibility for behavior.
- **Non-offending caregiver** acknowledges risk to children and demonstrates protective capacities.
- **Non-offending caregiver** has supportive extended family or community ties.
- In addition **adults in home** with D&A/mental health history have been involved in treatment or are entering into treatment.
- **There is an in-home plan that provides safety for the children.**

OPEN voluntary *or*
CLOSE risk reduced

HIGH RISK

(Factors to consider which may necessitate developing a safety plan with children out of home).

- **Children** continue to be exposed to violence despite past interventions.
- **No workable plan** to ensure the child's safety.
- **Other types of child abuse reported** or prior founded CPS history.
- **Child** showing concerning behavioral/emotional effects (low self-esteem, poor academic performance, depression, aggression, anxiety).
- **Child** exhibits conditions that effect functioning and/or compromise safety. (mental conditions, physical disabilities, etc).
- **Abuser** history (CPS, LEA, victim's statement) includes serious DV or threats of lethality. Examples: Serious assault, weapons, stalking, obsessive behavior toward victim, abuse of pets, believable threat of suicide or homicide.
- **Abuser** having unauthorized contact with the children.
- **Abuser** is increasing the frequency and severity of violence presenting an increasing threat to children.
- **Non-offending caregiver** does not acknowledge the risk to the child.
- **Non-offending caregiver** is unable to protect.
- **Adults** in the home abusing alcohol or drugs.
- **Family is isolated** from community resources, supportive family or law enforcement.

There is an out-of-home plan that provides safety for the children.

OPEN

FAMILY DECISION MEETING

OPEN FOR SERVICES



CHILD SAFETY PLAN



SERVICE PLANNING



Consider petition

- Potential services include:
- Foster or kinship care
 - Victim's counseling (Couples counseling not appropriate at this stage).
 - Safe visitation
 - Protective orders
 - Transportation
 - TANF/TA-DVS-JOBS, cash, childcare
 - Family Decision Meeting
 - DV advocacy - support
 - Culturally specific services
 - Batterer's intervention program



Review of child safety
(On-going as well as at critical junctures).



- Consider case closure**
- **Non-offending caregiver:**
-has safety plan
-understands the effects on children
-can access support
-is protecting children.
 - **Children** exhibiting less behavioral effects of violence.
 - **Children** adequately protected.
 - **Children** re-interviewed.
 - **Children** in counseling if appropriate.
 - **Abuser** out of home or not using physical violence and control tactics. Accepting and demonstrating responsibility for behavior.
 - **Abuser** engaged in intervention program or complying with probation supervision.
 - **D&A** issues not affecting parenting ability.

**FAMILY
DECISION
MEETING**

- Continue open case**
- **Children** continue to exhibit behaviors and statements indicating ongoing violence.
 - **No-contact order/restraining order** is not effective.
 - **Caregivers** in home not engaged in recommended D&A/Mental health treatment.
 - Unstable living environment.
 - Ongoing DV.
 - Psychological evaluation indicates **caregivers** inability to protect children.
 - **Abuser** continues to expose children to DV.

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