



# WORKING WITH FAMILIES CHILD WELFARE AND DOMESTIC VIOLENCE

# Promising approaches

## About Us

The Massachusetts Department of Children and Families (DCF) primary responsibility is to protect children who have been abused or neglected in a family setting, and to ensure that each child has a safe, nurturing and permanent home.

The DCF Domestic Violence Unit is a statewide initiative designed to enhance the Department's ability to protect children experiencing family violence. The DCF Domestic Violence Unit works with DCF Regional and Area office staff to strategize how to best integrate this knowledge and also consults with social workers and managers on cases to assist staff in designing safe interventions, that decrease risk and keep children with the non-abusive parent, when it is possible.

## Purpose

- To provide a framework for mandated reporters to create family centered approaches when domestic violence is identified.
- To offer guidelines to assist mandated reporters to assess, accurately and sympathetically, the impact of domestic violence on children and their families.

## What is Domestic Violence?

Domestic violence is defined as a pattern of coercive controlling behaviors that one person exercises over another in an intimate relationship.

## Promising Approaches

Currently when some mandated reporters learn of domestic violence in families, they file a child abuse and neglect report without an assessment of the risk posed to the child(ren). Assessments of risk frequently cite a single factor, such as whether the child was in the room when the incident occurred, rather than examining the entire pattern of abuse. Mandated reporters are encouraged to carefully review each family's situation and to consider thoughtfully whether or not to file a report with the Department of Children and Families.

## Framework for a mandated reporter:

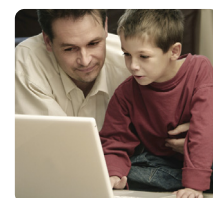
Mandated reporters should be aware that every circumstance involving domestic violence does not always merit intervention by the child protection system. Often, the caretaker is overwhelmed by the complexity of the home conditions, and is unable to take action. Filing in these circumstances can inadvertently penalize the caretaker for a perceived inability to keep the children safe.

Frequently, the fearful environment created by a perpetrator undermines the ability of the caretaker, and the caretaker's family and friends, to intervene to protect the children. Prior to filing a report the mandated reporter should assess:

- Child's current functioning
- Changes in the child's behavior
- Changes in child's functioning as a result of offender's actions.

## Approaches to Documentation

Mandated reporters should give due consideration to the family environment and to the negative impact of the violence on the child, and file a report on behalf of the child, naming the offending caretaker as the perpetrator of the violence.



### Approaches to Assessing Safety and Risk:

Risk factors may not always be present. There are circumstances which may indicate a mandated report is not appropriate. Mandated reporters are encouraged to assess carefully the caretaker's and child's conditions, and to evaluate whether community services and support will strengthen the caretaker's resolve and ability to safeguard the child. Connecting the family to social services, school, counseling services, faith organizations, battered women's programs or concerned family and/or friends may provide the support and encouragement needed to assist the victim and keep the children safe. When considering whether or not to file a report of concern please refer to the factors below to help you make your decision.

- Is there access to weapons? Has there been a threat to use weapons?
- Have "everyday objects" been used as tools of abuse or to instill fear?
- Is the violence escalating? Has the severity of the violence increased?
- Does the perpetrator stalk or harass the caretaker, and is there an impact on the children?
- Does it appear as if the caretaker is increasingly isolated or restrained from obtaining help?
- Is there a support system which helps the family maintain safety?
- Is the child isolated from responsible adults who might recognize domestic violence's damaging impact; e.g., is the child in day care, in school, regularly seeing a doctor?
- Have the caretaker and/or others made prior attempts to seek safety? What were the results?
- Is substance abuse present in the home, and what is the impact on the caretaker and children?
- Is there mental illness present in either the perpetrator or the caretaker? What is the impact on the caretaker and children?
- Does the caretaker appear to have the ability to evaluate or to address the negative impact on the child?
- Does the perpetrator allow the caretaker parent to address the impact on the children and to meet their needs?
- Has there been a restraining order issued against the perpetrator? What happened? When?

Has the child exhibited changes in behavior:

- Constant worry about possible danger (hypervigilance)
- Very high activity level (hyperactivity)
- Changes in play habits
- Sleep troubles including nightmares, trouble waking up and fear of falling asleep (sleep disturbances)
- Increase in aggressive behavior and angry feelings
- Forgets how to do things that he/she has already learned, such as potty training. Loss of other previously mastered skills
- Withdrawal from friends and activities
- Increased clinginess (separation anxiety)

- Moody for no obvious reason
- Emotional numbing (acts as if nothing bothers them)
- Repeated risk taking that pushes the limits of safety
- Excess worry about the safety of loved ones
- Trouble concentrating
- Somatic complaints

These problems may occur at home or in school when a child sees or hears violence. If a mandated reporter observes some of the changes in behavior listed above, careful consideration should be given as to whether or not witnessing violence is a cause.

Derived from Child Witness to Violence Project, Boston Medical Center, Boston, MA

### A report is mandatory if the following circumstances are current concerns:

- The perpetrator threatened to kill the caretaker, children, and/or self and caretaker fears for their safety
- The perpetrator physically injured the child in an incident where the caretaker was the target
- The perpetrator coerced the child to participate in or witness the abuse of the caretaker
- The perpetrator used a weapon, made threats to use a weapon, and the caretaker believed that the perpetrator intended or has the ability to cause harm.

### Approaches to filing safely include:

A report may create additional risks for the caretaker and children in a family. Often, a perpetrator will respond to DCF intervention by blaming the caretaker or children, and will demand that the caretaker prevent DCF from intervening. This may result in the caretaker's ambivalence toward DCF, and substantial fear of perpetrator retaliation.

It is critical that mandated reporters carefully assess the perpetrator's pattern of power over and control of the caretaker and the family.

- Reporters should when appropriate:
  - Consider filing in concert with the caretaker
  - Inform the caretaker about the reason for the filing
  - Assist caretaker to prepare a safety plan to anticipate possible perpetrator retaliation
  - Determine whether informing the perpetrator is the safest course
  - Determine whether informing the children is the safest course



# Promising approaches

### How to file safely:

- Discuss the possibility of filing a report of concern with the caretaker, if possible
- Explore the safety concerns of filing a report by interviewing the caretaker
- Explore with the caretaker if it will be safe to inform the perpetrator about the report
- Explore with the caretaker if it will be safe to inform the children about the report
- Consider filing in concert with the caretaker
- Offer a safe place for the initial DCF visit with the caretaker, a reporter's office or other identified location
- Address safety planning with the caretaker
- File on behalf of the children
- Name the identified perpetrator of the domestic violence

Reporters should provide identifying information to elicit a safe DCF intervention

- The location of the perpetrator:
  - Living in the home
  - A frequent visitor to the home
  - Incarcerated
- The perpetrator's employment situation:
  - Currently employed
  - Work hours/days
  - Location
- The family's support system:
  - Community
  - Family
  - Agencies
  - Institutional



### In order to file, DCF will need the following:

- Names, dates of birth, addresses of the children present in the home at the time of the incident
- Names, dates of birth, phone numbers, addresses of the caretaker and perpetrator
- Phone numbers and names of involved individuals (such as family, friends, therapists, nurses, doctors, probation, police officers and other individuals who are supportive) whom DCF should contact

### Approaches for intervening safely when a report is not filed:

- Encourage caretaker to express family's immediate needs
- Seek the support of a community domestic violence advocate
- Connect caretaker and family to services which meet their immediate needs
- Connect the family to longer term supportive services where needed
- Assist the adult victim in developing a safety plan
- Consult with the DCF Domestic Violence Unit

It is important for a provider to share with DCF their knowledge and understanding of the reported incident, and of the family, and provide details of their relationship with the children. This information will assist DCF in the assessment of power and control issues in the home. DCF will evaluate these issues during both their safety and service planning processes.



### RESOURCES

#### • **Child-At-Risk Hotline** **1-800-792-5200**

DCF Offices are staffed between 9 am and 5 pm, Monday through Friday. To make a report at another time, after 5 pm and on weekends, and holidays, please call the **Child-At-Risk Hotline**.

#### • **Safe Link** **1-877-785-2020**

Safe Link is the Massachusetts statewide domestic violence hotline. Safe Link is answered by trained advocates 24 hours a day in English, Spanish, Portuguese and TTY (1-877-521-2601). It also has the capacity to provide multilingual translation in more than 140 languages.

#### • **DCF Domestic Violence Unit** For more information about the Domestic Violence Unit please call **617-748-2000**

Created through a collaborative effort involving community members, mandated reporters and the Massachusetts Department of Children & Families, Domestic Violence Unit.