

# Promising Practices with Children Exposed

## ***Child Development-Community Policing***

**Primary partners:** Patrol police officers and child mental health specialists.

**Background:** The City of New Haven and the Yale Child Study Center developed a partnership to intervene with children exposed to any form of violence. The initial success of the Yale/New Haven program, commonly called “Child Development-Community Policing” (CDCP), led the federal government to fund the development of similar “Safe from the Start” initiatives in numerous cities around the country. Five years of funding for this first wave has now ended. Spokane, Washington, was one of the first sites. A new wave of 14 communities has just received funding to initiate five-year projects of their own.

**What they do:** CDCP sites have several basic features. First, policing in the community includes what is often referred to as “community policing” in which individual officers are assigned a geographic area and are to become deeply familiar with the families in this area. These community-based police officers work closely with local child development specialists to develop an emergency response to children who have been exposed to violence. The child development specialists often join police officers immediately on the scene and work with the children during the crisis, freeing the officers to focus on law enforcement activities. Consultations between the police and child specialists occur during the crisis and continue in the aftermath regarding a plan of interventions for police and child development specialists to assure on-going safety. Specialists are available for additional trauma treatment as well as helping the family make use of other mental health, legal and social services. Another innovative aspect of this project is that police are offered short fellowships at the Yale Child Study Center to learn more about child development and the impact of violence on children and, in the reverse, child development specialists are offered fellowships to work with police on their daily patrols so as to gain an important insight in the work of law enforcement.

**Pros and cons:** CDCP models provide families with mental health specialists at and after the crisis and support police in their law enforcement role. These models require new resources devoted to upgrading the capacity of police and mental health agencies, staffing focused on inter-agency coordination, and mental health staff to follow-up with families. In New Haven, only a small percentage of families actually take advantage of services after the crisis incident raising questions about the overall impact of follow-up services.

### **Where to go for more information:**

- Child Development-Community Policing “Safe from the Start”, Yale-New Haven <http://www.nceev.org>
- Baker, L. L., Jaffe, P. G., Berkowitz, S. J., & Berkman, M. (2002). Children exposed to violence: a handbook for police trainers to increase understanding and improve community responses. London, Ontario, Canada: Centre for Children and Families in the Justice System of the London Family Court Clinic, Inc. (100 pages) <http://www.lfcc.on.ca/police-us.PDF>

*Developed by Jeffrey L. Edleson, Ph.D. for the South King County Community Network (2005)*

# Promising Practices with Children Exposed to Domestic Violence

## *Parent-Child Trauma Therapy*

**Primary partners:** Child mental health specialists.

**Background:** Several hospitals around the country have developed specialized clinics that provide trauma therapy for parent-child dyads to work through the impact of domestic violence on the children. These programs, often called Child Witness to Violence (CWV) projects, work primarily with battered mothers and their children within an adult or child medical center. The best known are the Child Witness to Violence Project at the Boston Medical Center directed by Betsy McAlister Groves and the Child Trauma Research Project at San Francisco General Hospital directed by Dr. Alicia Lieberman.

**What they do:** CWV projects focus their intervention on parent-child pairs, usually involving a battered mother with her child but sometimes working with father-child dyads. These interventions focus on helping the parent interact with his or her child regarding the violence experienced in their lives and to work through a healing process regarding the trauma. Extensive assessments are performed with both the child and parent. The therapy usually involves parent-child meetings where violence and safety in the family's life are openly discussed. This structure speaks to several key goals that Groves (2002) outlines in her book entitled *Children Who See Too Much*. These include: (1) the importance of supporting a safe and caring relationship between the child and an adult in his or her life; (2) giving children permission to talk about their experiences with violence; and (3) helping families find a safe environment. The work usually begins after the child's mother has had an opportunity to work through her own healing and stabilize her family's life in the aftermath of violence. In San Francisco, mothers and children meet weekly with a therapist for up to a year. Meetings take place at the clinic or in homes.

More recently these programs have begun to experiment with including, in selected cases, men who batter in work with their children. Men are included only when it is deemed advantageous to the child's progress and both mother and child agree. Boston's project is particularly well coordinated with local battered women's services.

**Pros and cons:** These projects provide a much needed resource in the voluntary services sector that provide in-depth assessments and trauma therapy. Child welfare, law enforcement and other public and private agencies welcome this added resource when it is available. The length of intervention is seldom set and can be expensive to provide. The number of children served can be relatively small if resources are limited.

### **Where to go for more information:**

- Child Witness to Violence Project, Boston Medical Center  
<http://www.bmc.org/pediatrics/special/CWTV/overview.html>
- Groves, B. M. (1999). Mental health services for children who witness domestic violence. *Future of Children*, 9, 122–132. Online at <http://www.futureofchildren.org>.
- Lieberman, A.F. & Van Horn, P. (2005). *Don't Hit My Mommy! A manual for child-parent psychotherapy with young witnesses of family violence*. Washington, DC: Zero to Three Press.

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# Promising Practices with Children Exposed to Domestic Violence

## *Small Group Work with Children*

**Primary partners:** Domestic violence service organizations and/or mental health agencies.

**Background:** The predominant intervention with exposed children is small, psycho-educational groups. From the earliest days of the battered women's shelter movement in the 1970s children have been present with their mothers. Shelters, and later mental health agencies, have long sought to provide support and education to children living in battered women's shelters. There are a number of published and unpublished curricula for children's groups that all focus on providing some type of support and education to these children. There are a growing number of formats and locations at which such services are provided.

**What they do:** Four to 10 children meet once or twice a week with one or two adult facilitators; the adults often being an advocate or counselor who is also working with their mother. The groups typically meet weekly for one to two hour sessions over eight to twelve weeks. The curricula for these programs focus on defining the violence, developing safety plans and learning to express a range of feelings in a non-abusive manner. This approach has been developed by Honore Hughes at St. Louis University, Sandra Graham-Bermann at the University of Michigan, Cris Sullivan at Michigan State University and detailed extensively by Einat Peled and Diane Davis (1995) in a book about the program at the Domestic Abuse Project in Minneapolis. These groups are often offered concurrently with a parenting group program attended by mothers and sometimes the parent and child groups are merged for all or part of some sessions, to involve mothers in their children's programming.

Studies of this approach are promising. For example, Sullivan, Bybee and Allen (2002) reported a study of 80 mothers and their children. In their study, the mother-child dyads were randomly assigned to receive either (1) an experimental intervention that consisted of advocacy services for both mothers and children plus a 10-week child support and education group or (2) a no-treatment control group. Mothers and children receiving the advocacy and small group intervention improved more than others on several measures and these improvements persisted over a four-month follow-up. In another study, Graham-Bermann (in press) randomly assigned 6-12 year old children and their mothers to one of three conditions: (1) child small group intervention only; (2) child plus parent intervention and (3) a control condition of services "as usual." She found that intervention produced lasting reductions in child problems both after intervention and at an eight-month follow-up. The impact of intervention was the greatest when mothers were involved in intervention with the child.

**Pros and cons:** Groups are very cost and time efficient and offer children opportunities for connection with others in similar situations. One persistent problem is group attendance and attrition that calls for a careful examination of the barriers to participation.

**Where to go for more information:**

- Peled, E. & Davis, D. (1995). *Groupwork with children of battered women*. Thousand Oaks, CA: Sage.
- Sullivan, C.M., Bybee, D.I. & Allen, N.E. (2002). Findings from a community based program for battered women and their children. *Journal of Interpersonal Violence*, 17, 915-936.

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# Promising Practices with Children Exposed to Domestic Violence

## *Child Protection and Domestic Violence*

**Primary partners:** Public child welfare agencies and domestic violence organizations.

**Background:** Decades of mounting tension between battered women's advocates and child protection workers resulted in a new effort in the early 1990s to find common ground between them. Funded by the Ford Foundation, Susan Schechter convened a select group of women's advocacy, child protection and family preservation experts at a meeting in June 1994. Soon thereafter the National Council of Juvenile and Family Court Judges, with funding from the David & Lucile Packard Foundation, convened a larger national working group of juvenile and family court, child welfare and battered women's advocacy leaders for meetings over two years that resulted in *Effective Intervention in Domestic Violence & Child Maltreatment Cases: Guidelines for Policy and Practice*, its green cover generated its nickname, the *Greenbook*. Published in 1999, the *Greenbook's* extensive reform recommendations have been widely applied and the subject of six federal demonstration projects as well as a national evaluation.

**What they do:** The *Greenbook* calls for collaborative leadership by judges, CPS administrators and battered women's advocates to improve the safety, stability and well-being of *all* victims of family violence and to hold batterers accountable. The book is divided into five chapters, the first two devoted to a guiding framework and common principles and then one chapter on suggested reforms for each of the three target systems (CPS, DV agencies, and the courts). The expectation is that child maltreatment, child exposure and adult domestic violence will be consistently assessed and, once identified, changes in response to families where these co-occur will be made within all three systems. The 67 recommendations suggest that children remain with non-abusive parents and that each system take steps to maximize safety resources for both adult and child victims. This implies that child protection and the juvenile courts will be concerned not only with the best interests of the child but also the safety concerns of adult victims in the same families. Also implied is that domestic violence service organizations make changes to recognize and intervene with abused children in their client populations. Many recommendations refer to cross-training, safety in sharing of information, supervision as well as direct practices.

**Pros and cons:** The *Greenbook* provides an excellent starting point that highlights many issues any community will confront as it approaches new collaborations between the courts, child welfare and domestic violence agencies. Implementing the recommendations requires significant coordination, training and supervisory resources. It is a compromise document with some inconsistencies. Some critics believe the *Greenbook* recommendations will lead to the cooptation of advocates and to greater screening of child welfare cases for domestic violence. As more mothers are "screened into" child protection there is a fear that reforms beyond identification will not be implemented and battered mothers will be harshly treated and misunderstood.

**Where to go for more information:**

- Federally-supported Greenbook Website <http://www.thegreenbook.info>

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# Promising Practices with Children Exposed to Domestic Violence

## ***DVERT: Domestic Violence Enhanced Response Team***

**Primary partners:** Police-centered with criminal justice and social service agencies.

**Background:** Police were often frustrated that after they have intervened at a home where domestic violence has occurred that other parts of the criminal justice and social service system seldom followed through. In 1987, the City of Colorado Springs was one of several communities around the country selected by the National Institute of Justice to replicate an earlier experiment in Minneapolis where police responded to domestic violence incidents with one of several alternative actions, one being the then novel idea of arresting the perpetrator. Out of this early start grew a series of community initiatives that have drawn in an ever widening group of collaborative agencies.

**What they do:** The DVERT Team is an interdisciplinary group of professionals from 11 agencies who are co-located in a common space and coordinate their agencies' response to cases of domestic violence. Agencies contributing staff include probation, a battered women's program, two police and one sheriff's departments, the Humane Society, and legal services. The Team has been expanded to include professionals working with children exposed to violence, including local child protective services and the CASA program.

The Team maintains several levels of intervention. Referrals are received from a variety of sources and the first level of intervention involves a confidential intake conducted by a victim advocate who is assigned to work with the victim from beginning to end. Cases moving beyond intake are also assigned a law enforcement detective who works with the victim and the advocate to insure safety over time. Another level of intervention involves *Problem Oriented Policing* in which officers visit the victim's home to provide additional information and support in the community. Finally, the DVERT Team coordinates a variety of community resources in support of the adult and child victims' safety.

**Pros and Cons:** DVERT is a model of a law-enforcement centered but multi-agency collaboration focused on improving the community responses to domestic violence incidents. Colorado Springs has been creative in leveraging federal grants as well as non-traditional sources, such as excess TANF funds, to provide support for common space and the time required for effective collaboration.

### **Where to go for more information:**

- DVERT maintains an informative website at <http://www.dvert.org> that includes extensive, detailed material on the operation of the DVERT Team in Colorado Springs. They have also created a two-DVD training resource.

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## Promising Practices with Children Exposed to Domestic Violence

### *Legislative Responses I: Criminal Prosecution and Exposure*

**Primary partners:** State legislatures working closely with child and woman advocates.

**Background:** A wide range of new legislation has been proposed and some passed as policy makers and others have become more concerned about the potential impact of domestic violence exposure on children's development. In the past decade a great deal of change has occurred in regard to laws regarding child exposure to domestic violence. These laws focus most often on one of three areas: (1) criminal prosecution of violent assaults; (2) custody and visitation decision-making and (3) the child welfare system's response (Lemon, 1999; Mathews, 1999; Weithorn, 2001).

**What are the responses in criminal prosecution?** There are several examples of recent legislative changes in criminal statutes that directly respond to concerns about the presence of children during domestic violence assaults (see Dunford-Jackson, 2004; Weithorn, 2001). In a number of states, laws have been changed to permit misdemeanor level domestic assaults to be raised to a felony level charge. In Oregon, a domestic violence assailant can now be charged with a felony assault if a minor was present during the assault. "Presence" is defined in Oregon as in the immediate presence of or witnessed by the child.

Another example of changes in criminal prosecution is legislation allowing more severe sanctions to be imposed on a convicted domestic violence assailant when minors are present during the attack. At least 18 states now permit increased sanctions when minors were present during a domestic assault. Assaults committed in the presence of a minor are considered as only one factor that may influence the sanctions imposed in most of the states. Some states add sentencing points when minors have been present, one other state doubles whatever penalty would have been given without minors present and still another adds jail time and requires the convicted perpetrator pay for the child's counseling needs. The definitions of when a child is present is left vague by most states but some define it as "in the presence of" or when the perpetrator knew the minors were present and may be exposed to the violence. At least one state defines presence as within 30 feet of the child's residence regardless of the child's exposure to the violence (B.L. Dunford-Jackson, personal communication, March 2, 2004).

Utah and at least two other states have taken a more unique approach by defining the presence of a minor during a domestic violence assault as cause for a separate criminal charge. For example, under Utah law (UCA §76-5-109.1) originally passed in 1997, the presence of a minor two or more times during a

domestic assault was cause for separately charging an assailant with a Class A misdemeanor under this statute. If the assault included a homicide, attempted homicide or aggravated assault the law permitted charging a third degree felony on the first such assault. In 2002 the state amended this statute so that a Class B misdemeanor charge could be brought on the first - rather than repeated - instance of a minor's exposure.

**Pros and cons:** On the one hand these new laws are likely to increase the attention of the police, prosecutors, and courts to children's exposure to domestic violence. Greater sanctions are likely to be imposed when it is perceived that there is more than one victim of the adult domestic assault. On the other hand there is concern about these changes on a number of levels (Dunford-Jackson, 2004). First, given the increasingly scarce resources of police agencies and prosecutors' offices, there is a concern that attention will focus primarily on cases where children are present because of the likelihood that this factor will increase convictions or guilty pleas. One resulting fear often voiced is that children will be brought into court more often to testify in such cases. Another fear is that battered women without children will receive less attention to their cases because police and prosecutors will see them as weaker cases. Many battered women's advocates argue that if *current* criminal statutes were enforced more consistently there would not be a need for these additional laws focused on children. That is, if perpetrators were consistently arrested, prosecuted and monitored for the adult domestic assaults they have committed, children in these families would be just as protected without the addition of these new laws and the potential unintended consequences they may create.

Finally, a particular concern about Utah's legislation is that it may be used against battered mothers for "failing to protect" their children from an assailant. The Utah attorney general at the time of this law's passage argued that the wording of the law was such that it focused only on perpetrators of assaults. While some have suggested that this law might be used against battered mothers for exposing their children to domestic violence, the Utah Attorney General's office has not seen this happen. In most cases, it appears that the separate charge is used as a plea bargain and prompts the judge and police to be more sensitive to the presence of children (K. Knowlton, personal communication, March 3, 2004).

In one of the few studies of these laws, Whitcomb (2000) provides some interesting data from prosecutors on the very concerns raised above. Whitcomb surveyed 128 prosecutors in 93 jurisdictions across the US by telephone regarding their work with children exposed to violence and the impact of new laws regarding them. She also conducted face-to-face interviews in five jurisdictions to shed more light on the telephone surveys. She found that: (1)

none of the jurisdictions had protocols governing the prosecution of domestic violence and child maltreatment in the same families; (2) prosecutors in jurisdictions in which laws were in place regarding children's exposure to domestic violence were more likely to report domestic violence cases to child protection agencies but no more likely to prosecute mothers for "failure to protect;" (3) prosecutors were seeking enhanced penalties in domestic violence cases when children were also present, even in jurisdictions where no new laws regarding children exposed to domestic violence were in place; and (4) 75% of the prosecutors interviewed said they would not report or prosecute a mother for failing to protect her children from exposure to her own victimization, and the remaining prosecutors said they would only do so when there were additional factors indicating extreme danger to the child. Whitcomb's research is clearly a starting point for additional studies with the multiple actors in the complex system of social responses to children and their families.

**Where to go for more information:**

- Website on children exposed to domestic violence at <http://www.mincava.umn.edu/link>
- Dunford-Jackson, B.L. (2004). The role of family courts in domestic violence: The US experience. In Jaffe, P.G., Baker, L.L. and Cunningham, A. (Eds.) *Ending Domestic Violence in the Lives of Children and Parents: Promising Practices for Safety, Healing, and Prevention* (pp. 188-199). New York, NY: Guilford Press.
- Edleson, J.L. (2006). A response system for children exposed to domestic violence: Public policy in support of best practices. In Feerick, M. & Silverman, G.B. (Eds.). *Children Exposed to Violence*. Baltimore, MD: Brookes.

Following three papers are online at <http://www.futureofchildren.org>:

- Lemon, N.K.D. (1999). The legal system's response to children exposed to domestic violence. *The Future of Children*, 9, 67-83.
- Mathews, M.A. (1999). The impact of federal and state laws on children exposed to domestic violence. *The Future of Children*, 9, 50-66.
- Weithorn, L.A. (2001). Protecting children from exposure to domestic violence: The use and abuse of child maltreatment. *Hastings Law Review*, 53(1), 1-156.

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## Promising Practices with Children Exposed to Domestic Violence

### *Legislative Responses II: Custody & Visitation*

**Primary partners:** State legislatures working closely with child and woman advocates.

**Background:** A wide range of new legislation has been proposed and some passed as policy makers and others have become more concerned about the potential impact of domestic violence exposure on children's development. In the past decade a great deal of change has occurred in regard to laws regarding child exposure to domestic violence. These laws focus most often on one of three areas: (1) criminal prosecution of violent assaults; (2) custody and visitation decision-making and (3) the child welfare system's response (Lemon, 1999; Mathews, 1999; Weithorn, 2001).

**What are the responses in custody and visitation disputes?** Most states now include the "presence of domestic violence" as a criterion that judges may use to determine custody and visitation arrangements when disputed. In most jurisdictions here and in other Western countries there has been an assumption that both parents have the right and ability to share custody and visitation of their children (Eriksson and Hester, 2001). In approximately 23 states, however, this presumption has been reversed in what are commonly referred to as "rebuttable presumption" statutes. Rebuttable presumption statutes generally state that when domestic violence is present it is against the best interests of the child for the documented perpetrator to be awarded custody until his or her safety with the child is assured. California Family Code is an example of a rebuttable presumption statute. Under section 3044 "there is a rebuttable presumption that an award of sole or joint physical or legal custody of a child to a person who has perpetrated domestic violence is detrimental to the best interest of the child." California's code outlines six factors to consider in assessing whether a perpetrator of domestic violence has overcome this presumption:

1. Whether the perpetrator of domestic violence has demonstrated that giving sole or joint physical or legal custody of a child to the perpetrator is in the best interest of the child;
2. Whether the perpetrator has satisfactorily completed a batterer's treatment program that meets the criteria outlined in subdivision (c) of Section 1203.097 of the Penal Code;
3. Whether the perpetrator has successfully completed a program of alcohol or drug abuse counseling if the court determines that counseling is appropriate;
4. Whether the perpetrator has successfully completed a parenting class if the court determines the class to be appropriate;

5. If the perpetrator is on probation or parole, whether he or she is restrained by a protective order granted after a hearing, and whether he or she has complied with its terms and conditions; and
6. Whether the perpetrator of domestic violence has committed any further acts of domestic violence” (California Family Code, § 3044).

Morrill et al. (2005) recently reported a study of 393 custody cases in states where rebuttable presumption laws exist. They found that judges in these cases generally awarded legal and physical custody to battered mothers and restricted father’s access to their children.

**Pros and cons:** One difficulty in applying rebuttable presumption statutes is defining what evidence of domestic violence will be admitted as part of the custody and visitation decision-making process. Is it a past or present arrest or restraining order? Should it be a prior conviction or guilty plea? These are just some of the ways violence perpetration may be proven. Perhaps Wisconsin’s solution is an example of how to resolve this definitional issue. In a rebuttable presumption statute passed by the State of Wisconsin’s Legislature and signed into law by Governor Doyle in February of 2004, *guardians ad litem* are given the responsibility for investigating all accusations of domestic violence and reporting their conclusions to the judge. The new law instructs judges to make domestic violence their top priority by stating that “if the courts find...that a parent has engaged in a pattern or serious incident of interspousal battery [as described in statutes], or domestic abuse, the safety and well-being of the child and the safety of the parent who was the victim of the battery or abuse shall be the paramount concerns in determining legal custody and periods of physical placement” (Wisconsin Act 130, §25, 767.24(5)). The new law also requires training of all *guardians ad litem* and custody mediators in assessing domestic violence and its impact on adult victims and children and lays out new procedures for safe mediation.

While legislative developments such as rebuttable presumption laws appear to be positive there is little or no evaluation of their impact on children’s and non-abusive parents’ safety. There are also a number of other critical issues that remain mostly unattended in custody and visitation decisions that involve domestic violence. Part of the problem is that many battered mothers are self-represented in disputed custody cases. For example, in California study 30% of parents entering required custody mediation were concerned about domestic violence and 55% had records indicating current or former domestic violence restraining orders. In addition, over half of the families (53%) involved in child custody mediation had at least one parent who was not represented by legal counsel (*pro per*) and in 28% of the families neither parent was represented (see Center for Families, Children and the Courts, 2000). These findings raise

concerns about both safety for the adult victims and the degree to which they are well represented in court processes.

Poor representation for adult victims may compound a number of other outcomes that can disadvantage her in court proceedings. These include: (1) the abuser or his legal counsel accusing the mother of purposefully alienating her children from him using empirically questionable concepts such as Parental Alienation Syndrome (Faller, 1998); (2) using “friendly parent” provisions of custody statutes to accuse a mother concerned about her and her children’s safety of being uncooperative; (3) minimizing the impact of adult domestic violence exposure on children’s safety and well-being; (4) inappropriately using standardized psychological tests that have not been developed to assess domestic violence to question the veracity of battered women’s testimony or her parenting abilities; and (5) appointing custody evaluators or mediators, *guardians ad litem* and court appointed special advocates (CASAs) who have little or no training on issues of domestic violence to assess and provide advice to the court on custody and visitation arrangements. Each of these issues present unique policy challenges for the future and policy research opportunities as new policies are implemented.

**Where to go for more information:**

- Website on children exposed to domestic violence at <http://www.mincava.umn.edu/link>
- Dunford-Jackson, B.L. (2004). The role of family courts in domestic violence: The US experience. In Jaffe, P.G., Baker, L.L. and Cunningham, A. (Eds.) *Ending Domestic Violence in the Lives of Children and Parents: Promising Practices for Safety, Healing, and Prevention* (pp. 188-199). New York, NY: Guilford Press.
- Edleson, J.L. (2006). A response system for children exposed to domestic violence: Public policy in support of best practices. In Feerick, M. & Silverman, G.B. (Eds.). *Children Exposed to Violence*. Baltimore, MD: Brookes.
- Morrill, A.C., Dai, J., Dunn, S., Sung, I. and Smith, K. (2005). Child custody and visitation decisions when the father has perpetrated violence against the mother. *Violence Against Women*, 11, 1076-1107.

Following three papers are online at <http://www.futureofchildren.org>:

- Lemon, N.K.D. (1999). The legal system’s response to children exposed to domestic violence. *The Future of Children*, 9, 67-83.
- Mathews, M.A. (1999). The impact of federal and state laws on children exposed to domestic violence. *The Future of Children*, 9, 50-66.
- Weithorn, L.A. (2001). Protecting children from exposure to domestic violence: The use and abuse of child maltreatment. *Hastings Law Review*, 53(1), 1-156.

## Promising Practices with Children Exposed to Domestic Violence

### *Legislative Responses III: Child Welfare Regulations*

**Primary partners:** State legislatures working closely with child and woman advocates.

**Background:** A wide range of new legislation has been proposed and some passed as policy makers and others have become more concerned about the potential impact of domestic violence exposure on children's development. In the past decade a great deal of change has occurred in regard to laws regarding child exposure to domestic violence. These laws focus most often on one of three areas: (1) criminal prosecution of violent assaults; (2) custody and visitation decision-making and (3) the child welfare system's response (Lemon, 1999; Mathews, 1999; Weithorn, 2001).

**What are the responses in child welfare regulations?** Some states have approached this issue by expanding the definitions of child maltreatment to include children who have witnessed domestic violence. For example, in 1999, the Minnesota State Legislature expanded the definition of child neglect in the Maltreatment of Minors Reporting Act to include exposure to adult domestic violence as a specific type of neglect (Minn. State Ann. §626.556, see Minnesota Department of Human Services, 1999; see Edleson, Gassman-Pines and Hill, in press).

Exposure to adult domestic violence is commonly used as one component of an operational definition of child neglect in many child protection agencies. The change in Minnesota acknowledged what had long been believed to be the practice in many county child protection agencies across the state - accepting certain reports of children's exposure to adult domestic violence as child neglect.

Minnesota was not alone in including such families in its neglect caseloads. Exposure to domestic violence has been commonly included in published definitions of child neglect (see English, 1998; Kalichman, 1999). The U.S. Office of Child Abuse and Neglect suggests that operational definitions of child emotional neglect includes "exposure to extreme or chronic spouse abuse or other domestic violence in the child's presence" (Goldman et al., 2003, p. 18) and this definition is found internationally as well. For example, most Canadian provinces already include exposure to domestic violence in their definitions of child maltreatment (Weithorn, 2001). The Australian province of New South Wales passed the Children and Young Persons (Care and Protection) Act of 1998 that defines reportable forms of child risk as a child or young person "living in a household where there have been incidents of domestic violence and, as a consequence, the child or young person is at risk of serious physical or psychological harm" (New South Wales, 1998, Sec. 23d).

The change in Minnesota's Reporting Act definition of child neglect to include children exposed to domestic violence meant that the state was suddenly mandating that a range of professionals report every child they suspected had witnessed adult domestic violence. A survey of 52 Minnesota counties estimated that the language change would generate 9,101 new domestic violence exposure reports to be screened by child protection agencies each year (Minnesota Association of County Social Service Administrators, 2000). Minnesota responds to a total of approximately 17,000 reports of child maltreatment annually (<http://www.dhs.mn.us/>). If all of these new reports were accepted it would have represented more than a 50% increase statewide, with some counties experiencing much higher increases.

While exact figures are not available, the change in definition resulted in rapidly rising child maltreatment reports across Minnesota. By adding a large new category of children to those who were neglected according, the legislators had unknowingly increased the numbers of children who would be subject to mandatory reporting. This relatively simple change resulted in dramatically increasing workloads in most Minnesota county child protection agencies. Though the legislators thought that the language change would merely clarify existing practices, many county agencies suddenly faced huge numbers of newly defined neglected children being reported to them.

**Pros and cons:** The increase in child maltreatment reports created significant problems for many county agencies. There were two parts to this change that raised particular concerns among county social service administrators. First, current Minnesota law required an immediate response to all child maltreatment reports. Second, there was no specific funding appropriated to implement this change. The Minnesota Association of County Social Service Administrators (2000) estimated it would cost over \$10 million to screen, assess and provide services to referred children and their families, \$19 million for the purchase of adequate community-based services, and another \$1.4 million to train law enforcement and county attorneys about the new law. This bill came to over \$30 million if all of these newly reported children were to be appropriately served.

Social service administrators argued that the change represented an "unfunded mandate" by the Legislature. Child protection workers already felt their agencies were inadequately supported and the large increase of reports threatened to stretch some counties beyond their capacity to respond. County agencies and the field as a whole did not yet have adequate strategies to differentiate those factors in exposure to adult domestic violence that created more or less risk for a child. Administrators and workers alike also began to fear that due to the large increase in reports being screened and investigated that they would have inadequate resources left to properly serve the families of children experiencing

more severe forms of physical and sexual maltreatment. In essence, many more children not requiring the full force of the child protection agency would be screened and investigated but fewer needing the county's services would receive them. As current and former child protection workers explained, there was a wide range of children that were swept up by the legislation, some of whom were in need of child protective services, and others who needed voluntary services.

The expanded reporting requirements also raised concerns among advocates for battered women who feared, that as a result of the new definition, child protective services would utilize methods that would blame more mothers for their male partners' violent behavior toward her by substantiating her for "failure to protect" (see Magen, 1999). In fact, in the midst of implementing the reporting requirements one county began to use per diem reimbursement requests from local shelters to identify women entering local shelters with children and then referred these mothers to the local child protection agency for fuller screening and investigation. This county action went well beyond what was envisioned by the definitional change and began to create fear among women that going to a shelter would result in removal of their children from their custody. While only a small percentage of reports to child protective services result in removal of children from their parents' custody (English, Edleson and Herrick, 2005; Kohl, Edleson, English and Barth, 2005), many mothers and community members believe otherwise.

Minnesota's story really had two endings, both of which were frustrating. In the first ending, the community responded to the expanded definition of neglect by reporting many thousands of Minnesota children exposed to domestic violence. Many of these children were unlikely to have been identified previously. Unfortunately, the capacity of child protective services to respond was greatly strained resulting in more identification and screening but probably fewer services to those most in need. In the second ending, almost all Minnesota counties decided to drop the requirement for reporting exposed children to child protective services after the Legislature repealed the change. The sad outcome in this ending is that many thousands of children who were earlier identified were no longer visible in our systems and also not likely to receive needed services. Clearly, well meaning policy changes can have far reaching and unforeseen impacts that require careful advance testing (see Edleson, Gassman-Pines and Hill, in press, for a more complete discussion of Minnesota's experience).

**Where to go for more information:**

- Website on children exposed to domestic violence at <http://www.mincava.umn.edu/link>
- Edleson, J.L., Gassman-Pines, J. and Hill, M.B. (In press). Defining child exposure to domestic violence as neglect: Minnesota's difficult experience. Social Work.
- Weithorn, L.A. (2001). Protecting children from exposure to domestic violence: The use and abuse of child maltreatment. *Hastings Law Review*, 53(1), 1-156.

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## Promising Practices with Children Exposed to Domestic Violence

### *Support for Children/Skills and Advocacy for Parents*

**Primary partners:** Mental health and advocacy service providers.

**Background:** This intervention draws on promising practices with children exposed to violence, advocacy for battered women and empirically supported strategies for both home visiting and parent training. It is a unique, multi-method approach that is strongly research based and focused on exposed children with conduct problems.

**What they do:** Jouriles and his colleagues have developed a theory-based intervention for battered mothers of children with specific conduct disorders. They have drawn on some of the early work with children exposed to violence, advocacy for battered women as well as the extensive work of Patterson and his colleagues at the Oregon Learning Center on the issue of child-management training for parents.

They have completed several controlled studies of their intervention in recent years. Mother-child dyads were an intervention that included home-visits to provide support, education and child-management skill training for mothers as well as a mentoring intervention for children that consisted of support and education. A two-member team, consisting of a therapist/advocate who worked primarily with the mother and an undergraduate trained to work with the children, visited the family home for one to one and a half hours a week for up to eight months after the mother and her child(ren) left a battered women's shelter. Mothers and children were compared to others who received existing services and, when contacted monthly by the research team, were encouraged to seek services.

The combination of advocacy, parent child-management training and child support through home-visits resulted in more rapid decreases in conduct problems of children and greater improvement for mothers in parenting skills when compared to those in the comparison condition.

**Pros and cons:** Jouriles, McDonald and their colleagues in Texas have carefully developed and evaluated their intervention over a number of years. Jouriles is one of the most competent intervention researchers working in this area. This model draws on the best current theory and research. To mount a similar intervention that includes a two-member team making weekly home visits for many months may, however, be an expensive option for local programs to replicate. Still, creative use of volunteers or, as in Jouriles' case trained undergraduate students, may provide a mechanism for developing such a program that is less costly.

**Where to go for more information:**

- Ezell, E., McDonald, R., & Jouriles, E. N. (2000). Helping children of battered women: A review of research, sampling of programs, and presentation of Project SUPPORT. In J. Vincent & E. Jouriles (Eds.), *Domestic violence: Guidelines for research-informed practice* (pp. 144-170). London: Kingsley Publishers.
- Jouriles, E., McDonald, R., Spiller, L.C., Norwood, W., Swank, P.R., Stephens, N., Ware, H. and Buzy, W.M. (2001). Reducing conduct problems among children of battered women. *Journal of Consulting and Clinical Psychology, 69*, 774-785.
- Jouriles, E. N., McDonald, R., Stephens, N., Norwood, W., Spiller, L. C., & Ware, H. S. (1998). Breaking the cycle of violence: Helping families departing from battered women's shelters. In G. Holden, R. Geffner, & E. N. Jouriles (Eds.), *Children exposed to marital violence: Theory, research, and applied issues* (pp. 185-221). Washington, DC: American Psychological Association.

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# Promising Practices with Children Exposed to Domestic Violence

## *Working with Boys and Young Men*

**Primary partners:** Secondary school educators, college staff and youth workers of many kinds.

**Background:** As the anti-domestic violence movement has matured more attention is being paid to both primary prevention and to promoting healthy, non-violent relationships with both boys and young men. Leaders in this area of work are the Family Violence Prevention Fund and Mentors for Violence Prevention among others.

**What they do:** Most work with boys and young men is focused on primary prevention. Berkowitz (2004a) argues that most of these prevention programs focused assume that: (a) men must take responsibility for men's violence against women; (b) men need to be approached as partners in violence prevention and work in collaboration with women doing similar work; (c) men should be encouraged to actively promote healthy, non-violent behavior among peers; and (d) efforts that engage men in sharing experiences, beliefs and feelings in the safety of other men will be most effective. Berkowitz's (2004b) review of the literature also suggests "effective (prevention) prevention programs are comprehensive, intensive, relevant to the audience, and deliver positive messages" (p. 1). These programs generally aim to: (a) promote discussions among men of social norms that support violence against girls and women; (b) foster empathy for victims; and (c) move beyond empathy by directly teaching new individual responses, especially for bystanders.

There are several model programs that reflect the practices and assumptions described above. One such program is *Mentors for Violence Prevention (MVP)* that was originally developed at Northeastern University in 1993, this program seeks to increase awareness and promote new thinking, dialogue and leadership on the issue of interpersonal violence. It features a bystander approach that encourages young men and women to take non-violent action rather than be passive when violence is occurring. An *MVP Playbook* has been developed for guiding training sessions in high schools and colleges. The Family Violence Prevention Fund has also developed several projects targeted at boys and young men. One of the Fund's projects is *Coaching Boys into Men (CBIM)*. CBIM is a multi-media effort to encourage men to coach boys about non-violent, healthy relationships. Using the tag line "teach early," the Fund has developed excellent print and visual media for this campaign. They have also developed a playbook and extensive training program for coaches.

**Pros and cons:** Primary prevention efforts that engage boys and young men in the anti-violence movement are badly needed. MVP and CBIM are both excellent examples of sophisticated efforts aimed at boys and men. Both of these programs use sports metaphors (e.g. playbook) and have often initially aimed their efforts at male athletes. Expanding beyond student athletes is needed and may require a revised language and approach.

**Where to go for more information:**

- Berkowitz, A.D. (2004a). *Working with men to prevent violence against women: An overview (Part One)*. Harrisburg, PA: VAWnet (available online at <http://www.vawnet.org>)
- Berkowitz, A.D. (2004b). *Working with men to prevent violence against women: Program modalities and formats (Part Two)*. Harrisburg, PA: VAWnet (available online at <http://www.vawnet.org>)
- Family Violence Prevention Fund “Coaching Boys Into Men” project <http://endabuse.org/cbim>
- Jackson Katz’s website <http://www.jacksonkatz.com>
- Northeastern University MVP website <http://www.sportinsociety.org/mvp>

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# Promising Practices with Children Exposed to Domestic Violence

## *Parent-Child Interaction Therapy (PCIT)*

**Primary partners:** Child mental health practitioners.

**Background:** PCIT is a short-term form of parent training that focuses on teaching parents specific child management skills so as to alter negative interactions between them and their children for the better. PCIT has been widely tested and is considered an empirically supported intervention. Little research has been conducted specifically with children exposed to domestic violence and their parents.

**What they do:** PCIT is generally provided in clinical settings to individual parent-child dyads with young children, most often between two and six or seven years of age. Changes in parent-child interactions are expected to create change in child behavior. Chaffin and his colleagues have recently reported a study that provided PCIT with physically abusive parents and their children. According to Chaffin et al. (2004), PCIT is most often delivered in two phases; work on strengthening child directed interactions followed by strengthening parent directed interactions. Each of the two phases starts with a didactic session followed by a five or six parent-child dyadic sessions in the presence of a therapist acting as a coach. In the child directed phase emphasis is on promoting positive child-parenting interactions. In the parent directed phase emphasis is on parent management of child conduct.

Chaffin et al. (2004) added several components to the standard PCIT model. First, all parents attended a motivation enhancement module before beginning PCIT and participated in a third phase consisting of a four-session group program that helped parents implement what they learned earlier in PCIT. Finally, some parents received enhanced individualized services (EPCIT) focused on parental substance abuse, depression and family problems including domestic violence. Enhanced individualized services included home visits.

In their study of 110 physically abusive parents, Chaffin and his colleagues found that 19% of the parent-child dyads receiving PCIT has subsequent reports of physical abuse compared to 49% among a comparison group randomly assigned to receive standard services. Those randomly assigned to receive PCIT plus enhanced services showed no additional gains over the traditional PCIT approach.

**Pros and cons:** PCIT is a highly structured model of changing interactions between children and their parents. It has been shown to improve both child conduct, and in the case of physically abusive parents, lower their repeat use of violence. It has yet to be widely tested with children exposed to domestic violence. In most forms PCIT is a clinic-based intervention focused only on a parent and one child. Innovative adaptations have broadened this experience to include group sessions as well as home visits.

**Where to go for more information:**

- University of Florida PCIT website <http://www.pcit.org>. (This site has a great set of online reprints from a variety of journals.)
- Chaffin, M. et al. (2004). Parent-child interaction therapy with physically abusive parents: Efficacy for reducing future abuse reports. *Journal of Consulting and Clinical Psychology*, 2004, 72, 500–510.
- Herschell, A., Calzada, E., Eyberg, S.M., & McNeil, C.B. (2002). Parent-child interaction therapy: New directions in research. *Cognitive and Behavioral Practice*, 9, 9-16 (online at <http://www.pcit.org>).

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