
Aitkin County Domestic Abuse/Child Maltreatment Protocol

Aitkin County Health and Human Services (ACHHS)

Advocates Against Domestic Abuse (AADA)

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Mission Statement

- To work collaboratively for the safety of domestic violence victims and maltreated children.
- To promote legal accountability for the batterer while preserving and recognizing the dignity of the family.

Target Population

Children and adolescents at risk of child maltreatment where domestic violence is reported or a risk of repeated domestic violence exists.

Statistics

- Women and children in the same families are often both maltreated. Studies over the past 25 years show a median co-occurrence of woman abuse and child maltreatment of 41% (Appel and Holden, 1998) and the majority of studies reveal an overlap of 30% to 60% depending on the families studied (Edelson, 1999a).
- Many children exposed to adult domestic violence also exhibit behavioral, emotional, and cognitive problems (Edelson, 1999b).
- The impact of exposure varies by the level of violence in a home, the degree of a child's exposure and the presence of other risk and protective factors (Edelson, 2001).
- Exposure to violence in the home has been found to be one of the most significant predictors of an adolescent's later use of violence in the community (Singer, et al., 1998).
- Women are 7-14 times more likely than men to report suffering severe physical assaults by an intimate partner (NIJCDC Report, 1998).

Guiding Principles

The primary focus of child protection intervention in domestic violence cases is the ongoing safety of children. The preferred way to protect children in most domestic violence cases is to join with the adult victim in safety planning and to hold the abusive partner accountable. It is important to

work closely with battered women's programs, the criminal justice system and the batterer's treatment providers, while protecting the privacy of all involved individuals as required by law.

Goals

- All family members will be safe from harm.
- Abused parents will receive assistance through non-coercive and supportive interventions to protect themselves and their children.
- The abusive partner, not the adult victim, will be held responsible for stopping the abusive behavior.
- Children will have safe and stable relationships with nurturing parents or caregivers.
- The incidence of child maltreatment co-occurring with domestic violence will be reduced.

Definition of Domestic Violence

Domestic violence is the establishment of systematic control and fear in a relationship through the use of violence and other forms of abuse. The adult committing domestic violence may use physical abuse, emotional abuse, sexual abuse, economic oppression, isolation, threats, intimidation and maltreatment of children to control the other person. Relationships involving domestic violence may differ in terms of the severity or pattern of abuse but control is the primary goal of all abusive partners. Note: This is a common practice definition of domestic violence and does not fully parallel Minnesota Statute.

Case Review, Consultation, Information Sharing, and Confidentiality between Advocates Against Domestic Abuse and Aitkin County Health and Human Services

1. Procedures will comply with state statutes and case law governing what information child protection and domestic violence can share and with whom.
2. Information regarding particular cases will only be shared when there has been a request or permission granted by the battered woman, there is a signed release, and the information shared is strictly relevant to the case.
3. For AADA, identifying information will be shared only to make a mandatory report or at the adult victim's request, in which case releases will be secured. Anytime releases are used, information to be shared will be explicit, have direct relevance to the case and include Tennessee warnings. AADA will act according to their written policy.

Aitkin County Health and Human Services-Child Protection Services (CPS) will:

Screening

1. If the reporter is a third party or the adult victim, the screener will use questions from page nine (9) of the MN Department of Human Services (DHS), Guidelines for the Co-occurrence of Child Maltreatment and Domestic Violence, to screen most referrals for domestic violence.
2. Even if a call is not referred for assessment, the caller will be advised of specific options and resources for domestic violence such as Advocates Against Domestic Abuse or the Mille Lacs Band Women's Project, shelters and police.
3. At the screening stage the worker will contact law enforcement to determine whether previous incidents of domestic violence have been documented.

Assessment

1. Using selected questions from page fourteen (14) of the (DHS), Guidelines for Responding to the Co-occurrence of Child Maltreatment and Domestic Violence, every referral will be assessed for domestic violence.
2. Every attempt possible will be made to ensure victims are provided culturally appropriate resources, referral and services.
3. All phases of involvement with a family will include a domestic violence assessment to determine if rehabilitation and/or reunification would jeopardize the safety of the children and/or the adult victim. If safety cannot be assured, every attempt will be made to provide services, alternatives, options, etc. to the adult victim.
4. In determining whether or not a case will be opened following assessment, CPS workers will follow the guidance presented in MN statute 626.5552 (see attached).

Interviewing the Adult Victim

1. The worker will interview the adult victim without the abusive partner's knowledge and outside of his presence in order to assess the level of dangerousness to the adult victim if specific questions about domestic violence are asked.
2. Caseworkers who experience difficulty in interviewing the adult victim alone will recognize this as a signal of the level of control of the abusive partner.
3. Before the interview, the CPS worker will inform the adult victim that information she shares will only be shared if it's needed for a court case. Documentation will clearly outline incidences of violent, controlling behaviors, who is the victim and who is the abusive partner, making it clear that the abusive partner is responsible.
4. CPS workers will use questions from the DHS 2002 Guidelines for Responding to the Co-occurrence of Child Maltreatment and Domestic Violence when interviewing the adult victim, documenting responses. General relationship questions will be asked first including:

- a. Questions about the controlling behaviors and the victim's freedom to act independently;
- b. Questions to determine the level of verbal, emotional, physical or sexual abuse;
- c. Questions to assess risk to children in domestic violence situations;
- d. Questions to assess the victim's help-seeking history and current willingness to seek help.

Interviewing the Children

1. CPS workers will use questions from the DHS 2002 Guidelines for Responding to the Co-occurrence of Child Maltreatment and Domestic Violence to consider:
 - a. when to interview children,
 - b. what to ask about what they saw,
 - c. assess how they understand the violence,
 - d. assess the impact of witnessing violence, and
 - e. determine the child's worries about safety.

Interviewing the Abusive Partner

1. The worker will decide whether or not to interview the abusive partner based on secondary information and information gathered from interviewing the adult victim and children.
2. The worker will consider his/her own safety as well as that of adult victim and children.
3. The worker will use questions from the list of questions and the offender lethality assessment on page twenty-one (21) of the DHS 2002 Guidelines for Responding to the Co-occurrence of Child Maltreatment and Domestic Violence.

Safety Planning

1. The worker will begin safety planning for both the adult victim and child immediately, once the allegations are supported, or refer adult victims to AADA or the Mille Lacs Band Women's Project.
2. The worker will support the adult victim in selecting the safety option that works best for her.
3. The worker will support effective safety strategies used in the past and inform the victim of her legal options.

Services for the Adult Victim and Children

1. Case plans will include separate goals for each family member.

2. Service plan tasks and specific services will be available to the adult victim, the children and the abuser as long as the options meet the needs of the children.
3. During all phases of contact with CPS, the following specified services or referrals will be offered to victims if appropriate:
 - a. Individual or group support counseling
 - b. Referrals to legal representation or legal representation if CPS takes the case to court
 - c. Housing assistance
 - d. Emergency financial assistance
 - e. Supervised visitation services for the children
 - f. Specialized assessment for domestic violence effects on children and adult victims
 - g. Based on eligibility, day care for children while victim seeks assistance and employment
 - h. Education regarding the dynamics of abuse and the effects of domestic violence on herself and her children.
 - i. Parenting support groups that focus on dynamics of abuse including power and control tactics used to instill and maintain fear, safety planning, effects of violence on children, behaviors exhibited by children exposed to violence, parenting in a crisis, non-violent discipline.
4. Referrals for victims to AADA or other domestic violence programs will not be mandatory.
5. CPS will make every effort to assist the adult victim in securing safety for oneself and children before coercive measures such as citing for failure to protect are considered. Such measures will be used as a last resort after all interventions aimed at holding the abusive partner accountable for stopping the violence have been implemented and all efforts to protect the child and the adult victim from the abuser have been exhausted. If a failure to protect determination is substantiated against the adult victim, the abusive partner will also be cited for endangering the children (in cases where child protection has jurisdiction over the abusive partner).
6. Couples counseling, mediation, family group counseling, and anger management programs for the abusive partner can increase the level of danger to the adult victim and children. CPS will seriously consider the adult victim's opinion that any service option will increase the danger to the victim and the children and is, therefore, inappropriate.
7. Adult victim and children will be offered services regardless of whether the adult victim chooses to remain with the abusive partner.
8. Safety planning will include an analysis and assessment of both batterer-generated and life-generated risks.

Service Plan Tasks for the Abusive Partner

1. Where the child protection system has jurisdiction over the abusive partner, case dispositions will include ways of holding the perpetrator accountable for stopping the violence towards the adult victim and/or the children.
2. Where possible, CPS will substantiate cases against the abusive partner for physical endangerment and/or neglect of children including the fact that the abuser's controlling behaviors impact the protective strategies the adult victim uses to keep herself and her children out of harm's way.
3. Where possible, CPS will substantiate cases against the abusive partner for emotional maltreatment for exposing children to domestic violence.
4. Where possible, CPS will substantiate cases against non-residing abusive partners (intimate partners) of adult victims in the same way as cases against any other caretaker of the children could be substantiated.
5. Service plan tasks for the abusive partner may include:
 - a. Leaving the home
 - b. Attending a batterer's program, following all recommendations, completing and paying for the program. In the case of juvenile court involvement, CPS will monitor completion.
 - c. Not behaving in a manner that is verbally, emotionally, sexually, or physically abusive toward partner and/or children.
 - d. Not involving the children in attempts to control his/her partner or force children to witness or participate in abusive tactics.
 - e. Participating in education regarding the effects their violent behavior on children, learned behaviors and non-violent discipline techniques.
 - f. Following all conditions of court orders and probation.
6. Specified services to which the abusive partner will be referred may include:
 - a. Approved batterer's treatment program, which lasts at least six months, with progress and completion monitored and documented through development of a working collaboration with the treatment program staff.
 - b. Specialized classes on parenting which emphasize the effects of domestic violence on children, responsibility to parent non-violently, and skills to do so.
 - c. Substance abuse services
 - d. Visitation center services

- e. Cooperation with police and probation, when involved.

Note: It is the position of ACHHS-CPS that if preventive services cannot effectively curtail domestic violence within the household the abusive partner will be removed from the home by the police, or the non-abusive parent will be assisted in entering emergency shelter or another safe living situation with the child. When safety planning with the non-abusive parent and/or criminal justice intervention does not reasonably provide for children's safety in the context of domestic violence, appropriate safety interventions, including temporary foster care placement, will be made.

Advocates Against Domestic Abuse will:

1. Expand expertise and provide advocacy to women involved in child protection system
2. Explain rights and legal issues to women involved in the child protection system
3. Provide information to battered women regarding availability of advocacy throughout the duration of the case including:
 - a. Education regarding the process,
 - b. Advocate attendance at meetings and court hearings regarding the child protection case, at her request
 - c. Provide safety-planning options for battered women and their children.
4. Inform women of services that are available, including:
 - a. Individual and group support and education for children and women
 - b. Parenting education and support specific to the needs of a battered women (I.E.: skills related to behaviors exhibited by children exposed and skills to discipline without re-victimizing or perpetuating the cycles of abuse)
 - c. Legal advocacy
 - d. Emergency housing
 - e. Crisis intervention
 - f. Assistance with filing an OFP
 - g. Safety planning
 - h. Single parenting issues: loneliness, lack of resources, dating, budgeting, child care, safety planning specific to being a single parent etc.
 - i. Other services to help prevent out of home placement

5. Where appropriate, assist battered woman in seeing a situation as an opportunity to receive services that might benefit the entire family.
6. Where requested by the woman, and with a release of information, provide input to child protection regarding assessment, investigation, service and case planning.
7. Consult with the county, at the woman's request, when a particular course of action they advise would be dangerous. For example, where CPS requirements create a hardship or in cases where petitioning for an OFP may increase risk, and make other recommendations on a case when requested by the woman.
8. Assist a woman in determining whether she and/children are eligible for services. For example, mental health or developmental disability services for children with behavior problems.
9. Inform parent of the risks and benefits of agreeing to voluntary placement.
10. If Aitkin County Health and Human Services adopts Alternative Response, inform women of the risks and benefits and let them determine the best way to proceed.
11. Assist with making concrete changes, like changing locks on doors, windows, food and safe shelter.
12. If an out-of-home placement is necessary, help find relatives or family friends who may take the child on a temporary basis to prevent juvenile court involvement.
13. If child is removed in an emergency, help parent enforce their right to visitation with their child. Stress importance of complying with case plans such as visitation schedule, if the adult victim recognizes a problem, attend meeting with CPS worker and adult victim.
14. Assist a battered woman in asking for a re-determination of finding of maltreatment or if that fails, advise/assist them with seeking counsel to appeal a decision.
15. Help Native American women determine if their children are enrolled or if they are eligible for enrollment in an Indian tribe. If so, the advocate will contact the Indian Child Welfare worker assigned to that tribe to determine what help is available.
16. Contact ombudsperson authorized to investigate concerns involving African American, American Indian, Asian-Pacific Islander, and Chicano/Latino children when there are complaints regarding child protection and those communities.
17. Contact Compliance Review Team established to investigate complaints of non-compliance with ICWA and MN Indian Family Preservation Act.
18. Develop internal policies regarding cases where there is suspected maltreatment of children, and train personnel accordingly, including:

- a. Creating supportive interventions for battered women who maltreat their children via abuse or neglect.
 - b. Consulting with child protection liaison or other child protection expert who has in depth understanding of the multiple and complex problems that arise in families where there is suspected overlap to answer questions regarding a particular case, while adhering to strict confidentiality requirements.
 - c. Utilizing auxiliary forms, which provide context for battered women's experience when making mandatory reports to child protection (see Advocate Report Form attached).
19. Provide information to battered women about the effects of violent behavior on children and what constitutes child maltreatment.
20. Develop and improve child-friendly environments, child-welcoming atmosphere and child-friendly policies.
21. Reexamine the needs of battered women and children over the age of 12 and develop programming accordingly.
22. Connect families with community resources, including mental health and substance abuse services, child visitation centers, parenting groups. Offer training to such groups on the dynamics of domestic violence.
23. Collaborate with ICWA workers regarding cases of overlap involving American Indian women and children.
24. Develop and make available to child protection brochures/information packets regarding available services for battered women involved in the child protection system for distribution to battered women.
25. Maintain agency autonomy in order to enhance safety and security for women and their children.
26. If Aitkin County Health and Human Services adopts Alternative Response, work with them to ensure that offered services are appropriate and promote the safety of both a battered adult victim and her child.
27. Currently, AADA does not sit on the County's mandated Child Protection Team. If and when they do, the purpose of their involvement would be limited sharing of information regarding the identity of individuals, and to maintain a focus on class and systems advocacy.
28. If Aitkin County CPS or law enforcement asks the whereabouts of an adult victim ADA or MBWP is working with, they will inform the caller that, if they see or hear from the adult victim sought, they will be told advocates will relay the message.

The Aitkin County HHS Child Protection Supervisor, and the AADA Community Advocacy Director and Criminal Justice Director together will serve as liaisons to the other agencies in order to:

1. Increase knowledge of services provided by Advocates Against Domestic Abuse, child protection philosophies and practices across systems to become a resource for your own and other collaborators regarding cases of overlap between domestic violence and child maltreatment.
2. Use available resources to learn about model initiatives for collaboration between child welfare and domestic violence agencies.
3. Respond to complaints and requests for general information and information regarding specific cases, from collaborators while adhering to confidentiality requirements.
4. Regularly review confidentiality requirements with existing and new staff and volunteers.
5. Participate in interagency networking sessions/meetings and coordinate agency activities regarding collaborative effort.
6. Provide updates and coordinate training activities as needed for collaborators.

Training

1. Protocol participants will provide annual cross-training on:
 - a. Child maltreatment and mandatory reporting laws
 - b. Child protection practices, assessment, intervention
 - c. Information on dynamics of domestic violence
 - d. Assessment intervention
 - e. This protocol
 - f. Other relevant information
2. The training team will be comprised of Aitkin County Health and Human Services child protection staff, AADA staff and outside resources as available.
3. Between annual training events, AADA, MBWP and Aitkin County Child Protection Agency staff will provide training for new staff and volunteers.
4. Training opportunities and outreach and education materials will be offered to service providers in private practice.

Networking/Ongoing Meetings

1. Participants in the collaboration will meet every-other third Thursday beginning in February, 2003 to:
 - a. Maintain relationships
 - b. Discuss philosophical and practical similarities and differences
 - c. Develop broader understanding of the other's roles and purpose
 - d. Discuss philosophical foundations
 - e. Commitment to the synthesis of new and creative ideas
 - f. Personal commitment to the elimination of ineffective responses based on outmoded and out-dated thinking
2. Define and clarify confidentiality issues that will arise as a result of collaboration
3. Review and update guidelines for conflict resolution
4. Identify and plan for individual agency as well as joint training needs, and community education and outreach efforts.
5. Continue to clarify and implement the referral and reporting policies of each agency.
6. Share information regarding individual services, joint efforts and new initiatives and innovations being tried locally and elsewhere.
7. Identify and define on an ongoing basis, safety issues and intervention strategies that meet the safety and security needs of adult victims and abused children from all cultural and ethnic backgrounds, and each agency.
8. Examine criminal and civil legal remedies available for holding abusive partners accountable in child protection and domestic violence cases, the effectiveness of their application locally and county wide, and strategies for removal of local, county and state barriers to their effective utilization.
9. Review institutional responses that harmed adult victims and their children, identify the source of the problem(s) and institutionalize changes that would prevent similar occurrences in the future.
10. Identify joint goals for creating institutional changes, audit existing community resources, and expand collaboration to other community professionals to enhance safety for adult victims, hold offenders accountable, and create a general deterrent in the community.
11. Review, evaluate, and update the protocol.

We, the undersigned agencies, agree to follow the concepts addressed in this protocol.

Aitkin County Health and Human Services Date

Advocates Against Domestic Abuse Date