

Enhancing Child Welfare Domestic Violence Practice

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For the past 16 years I have worked with child welfare and related systems to improve their response to families being impacted by domestic violence perpetrator behavior. During that time, I have seen significant and important shifts in practice, training, and policy. More attention has been placed on domestic violence as a child safety and well being issue. There is more focus on holding the perpetrators accountable and less on finding the victim responsible for the perpetrator's actions. Despite these significant advances, systems change has not reached the level that would allow survivors to see the child welfare system as a consistent and meaningful support.

Child welfare and domestic violence survivors are, in many ways, natural allies. In my experience, both survivors and child welfare workers indicate that their top priorities include the cessation of the abuse and good outcomes for the children. In order to unlock the potential positive partnership and outcomes latent in this shared interest, child welfare can incorporate certain approaches to domestic violence perpetrators into all aspects of its organization. It's this shift in the approach to perpetrators that holds the key to achieving the promise of greater assistance from child welfare for domestic violence survivors and their children.

The following are two steps critical to making this change:

Child welfare can adopt a more holistic, comprehensive understanding of perpetrator's behaviors and its impact on the family. When professionals working with families shift their understanding of domestic violence perpetrators from persons who are exclusively assaultive to another adult (with children as witnesses) to someone who engages in a broad pattern of behavior that directly or indirectly targets the adult and child victims in the family, it can more aptly hold perpetrators accountable while addressing the needs of the family. Many of the conversations about perpetrator's impact on children begin and end with a focus on whether the children were physically harmed, in the "zone of danger,"

or saw or heard an incident of physical violence directed at the perpetrator's partner. This lens captures an important, but very narrow, aspect of how perpetrators directly and indirectly harm their children.

Using the example of a perpetrator who assaults his¹ partner in the presence of their school age children (then gets arrested,) we can see other aspects of his choices that would impact his children. For instance, during conversations with his children after an arrest, he might blame his partner for being arrested and out of the home. He also might not continue to provide financial support for his own children's basic needs (food, clothing, shelter, medical care) as long as he's not living in the home. These actions are common decisions that are part of a pattern of coercive control and damaging parenting choices and are often ignored in the assessment of the perpetrator's impact on his children. When child welfare does not identify and address these behaviors, the perpetrator is given "permission" to use his children as a powerful weapon against his partner. Without this wider framework, child welfare professionals may become angry and blame the victim. They may not recognize her recantation or ongoing contact with the perpetrator as the result of his coercion involving the children (e.g. emotional pressure from her children) or her concerns for the children's well being resulting from the loss of housing or other financial support. A resulting negative reaction from child welfare can move that system away from a potential constructive partnership with the survivor around the safety and well being of her children.

Child welfare practice can focus on the perpetrator as 100% responsible for his choice to be abusive and its impact on the family. The key here is that child welfare *practice* should reflect this approach. This means that communication with the survivor should include the explicit message that child welfare sees the perpetrator's actions and their impact on the family as 100% his responsibility. The same message would, of course, be conveyed to the perpetrator. And this message would be explicitly or implicitly reflected in all communication, documentation and case planning. This means documentation would clearly describe the actions taken by the perpetrator to harm the children and neglect petitions related to domestic violence would, first and foremost, tell the story of how the perpetrator's behaviors have harmed the children. Language like the

“couple engages in domestic violence” or “the couple has a history of domestic violence” would be eliminated from the child welfare lexicon. So would case plan steps for survivors that expected her to control her partner’s choice to be violent or abusive. These and other practice steps can have a profound positive impact on the direction and outcome of a case.

Child welfare has come a long way in its response to domestic violence and continues to move in the right direction. The current systemic interest in improving practice with fathers and the implementation of family assessment offers opportunities to embed these and related approaches to domestic violence into the DNA of child welfare.

To read more about advancing child welfare practice in DV cases go to <http://safe-and-together.endingviolence.com/blog/>.

1 The language in this article reflects that male perpetrators and female survivors are the most common situation that child welfare will encounter and the history of differing expectations of mothers and fathers embedded in our social service systems. Domestic violence may also occur in same sex relationships and sometimes can involve female perpetrators and male survivors.

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http://www.opdv.ny.gov/public_awareness/bulletins/winter2013/winter2013_bulletin.pdf