

Minnesota Department Of **Human Services**

Guidelines for Responding
To the Co-occurrence of
Child Maltreatment and
Domestic Violence

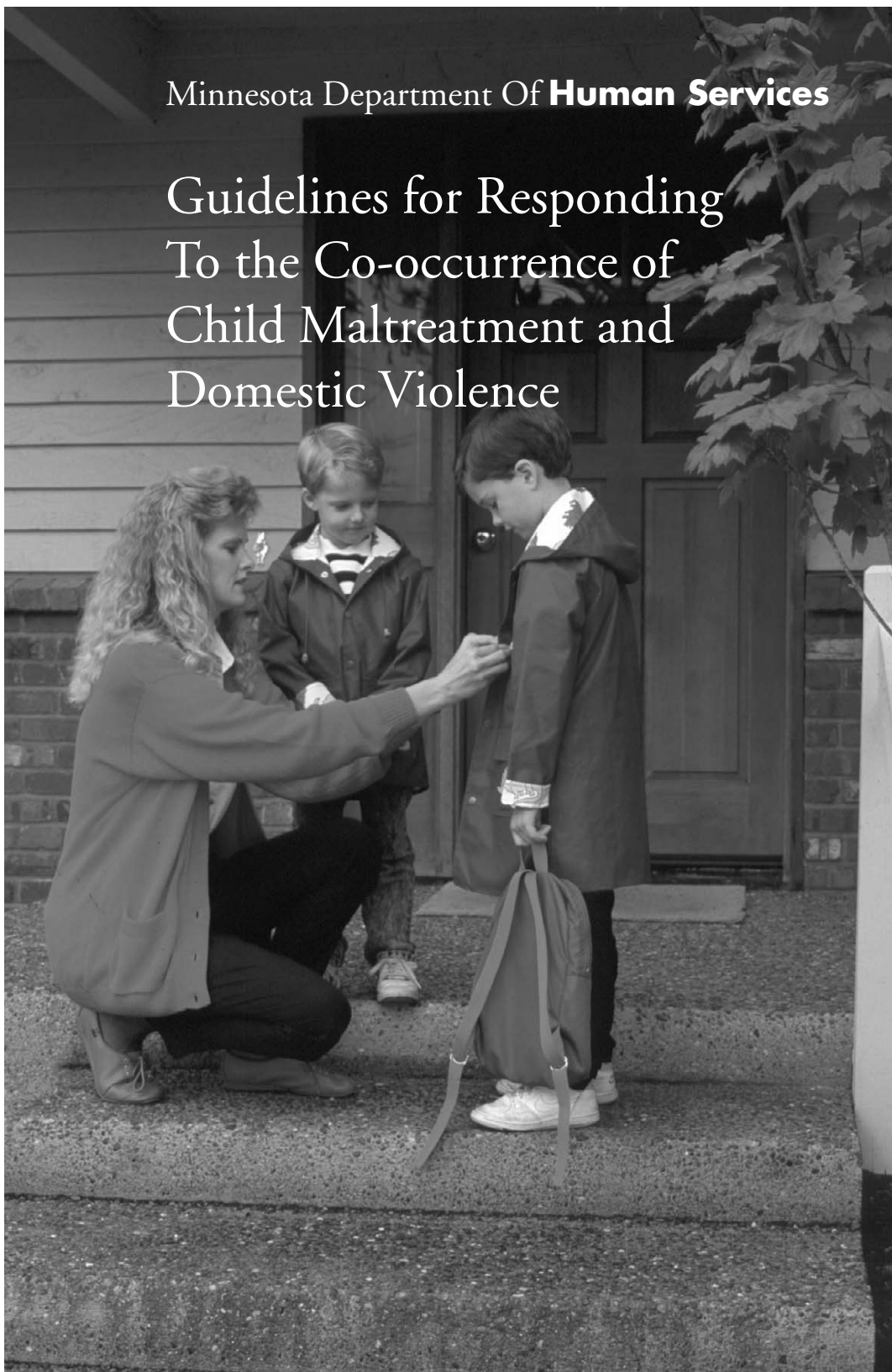




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Introduction

There is growing evidence of the co-occurrence of adult domestic violence and child maltreatment. Child protective services must begin to develop protocols that formally address both of these issues. Best practice in the intervention and treatment of child maltreatment should address the co-occurrence of domestic violence. The purpose of these guidelines is to provide direction to child protection staff when responding to situations in which child maltreatment and domestic violence are both occurring.

Definition

Domestic violence is the establishment of 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.

Facts You Should Know

Violence against women is consistent across all racial and ethnic groups (*Bachman & Saltzman, 1995*).

One-third of homicides of women were committed by a current or former intimate partner whereas only four percent of homicides of men were committed by intimate partners (Fox & Zawitz, 2000). The percent of female homicide victims of an intimate partner has remained almost the same over two decades. The percent of male homicide victims of intimate partners has decreased dramatically over the same period (*Rennison & Welchans, 2000*).

Most families involved in child fatalities were two-person caretaker situations where a majority of the perpetrators were the father of the child or the boyfriend of the mother (*Pecora et al., 1992*).

Adult domestic violence was found in 41 percent of the families experiencing critical injuries or deaths of children due to child abuse and neglect (*Oregon Children's Services Division, 1993*).

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 percent (Appel & Holden, 1998) and the majority of studies reveal an overlap of 30 percent to 60 percent depending on the families studied (*Edleson, 1999a*).

Many children exposed to adult domestic violence also exhibit behavioral, emotional and cognitive problems (Edleson, 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 (*Edleson, 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*).

Half of the husbands who batter their wives three or more times during a year were also reported to have physically abused their children. Battered mothers were twice as likely to maltreat their children as were mothers who were not being battered (*Straus & Gelles, 1990*).

A major reason reported by battered mothers for both staying with and leaving an abusive partner is for the safety and welfare of their children (*Hilton, 1992; Humphreys, 1995; Sullivan et al., 2000*).

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 in learning 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 caretakers.
- The incidence of child maltreatment co-occurring with domestic violence will be reduced.

Target Population

- Children and adolescents at risk of child maltreatment where domestic violence is reported or a risk of repeated domestic violence exists.
- The adult victim of domestic violence who is the primary source of care and support for a child or adolescent.
- The abusive partner who remains a risk to the safety of the children and the adult caretaker of the children.

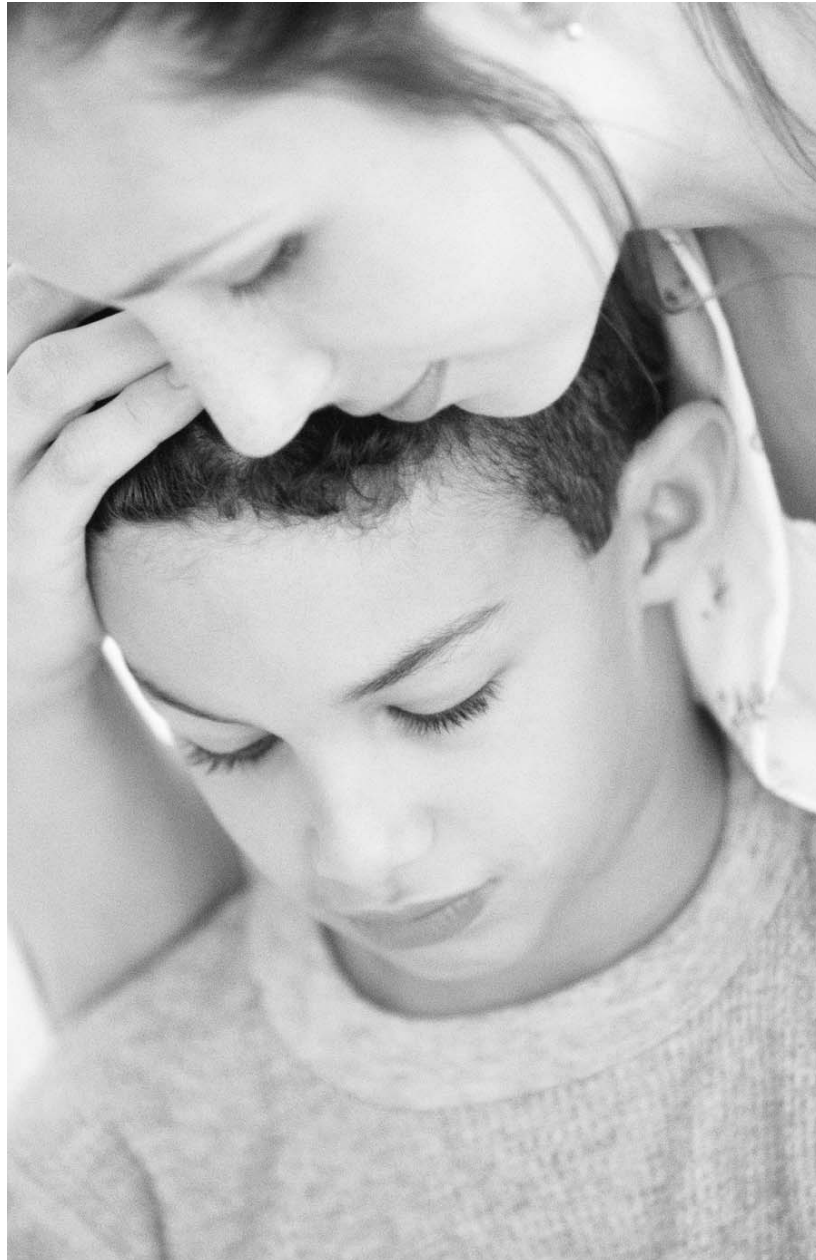
Additional Considerations

Although the guidelines make a distinction between screening, assessment and services, assessment is a continuous process and services may be delivered at any time during an intervention with the family.

The following guidelines are written from the perspective that the non-abusive parent is a voluntary client. Interventions and services may need to be more directive when working with involuntary clients. Input from family members should be considered in determining agency actions.

Gender specific language is used in these guidelines because women are disproportionately represented as victims of adult domestic violence.





Screening

- Routinely screen for possible domestic violence when receiving reports of child maltreatment. Screening should be ongoing since violence could occur at any point during an assessment or intervention.
- Obtain information from law enforcement about past and current incidents when domestic violence is part of a report of child maltreatment. Consultation with law enforcement concerning factors that may threaten social worker safety and adult victim safety should occur regularly.
- Screen for eligibility for Alternative Response (DHS Bulletin # 00-68-4, April 4, 2000). Offer Alternative Response as an intervention option to the adult victim when eligibility exists.
- Give information about domestic violence resources to reporters of child maltreatment when reports alleging domestic violence are not accepted for a child maltreatment assessment.

Screening Tool

Screening Questions

Sample questions for any case include:

- Has anyone else in the family been hurt or assaulted?
- Has anyone made threats to hurt or kill another family member or himself?
- Do you know if weapons have been used to threaten or harm anyone?
- Have the police ever been called to the house? Have arrests been made?
- Has anyone threatened to run off with the children?
- Has any family member stalked another family member? Has anyone taken a family member hostage?
- Do you know who is protecting the children right now?

When the call is specifically about domestic violence, sample questions include:

- What violence occurred?
- Are there recent injuries or accidents?
- Are/were police involved?
- Where were the children during the violence?
- Has anyone made threats to hurt or kill family members or pets?
- Are there weapons in the home?
- Are family members using drugs or alcohol?
- Does the victim have contact with other family or community members?
- Has the batterer threatened to leave with the children?
- What assistance has the victim sought?
- What assistance have other people or agencies provided?
- How have you seen the domestic violence affect the children?

Reprinted from Draft Practice Guidelines for Cases with Domestic Violence second edition November 23, 1999- Oregon State Office for Services to Children and Families.



Assessment

- Determine worker safety needs throughout the assessment.
- Assess for domestic violence through routine direct inquiry of the presence of domestic violence in a manner respectful of victim safety. Conduct separate interviews with adult victim, child and abusive partner.
- Coordinate assessment efforts with law enforcement, domestic violence services and the court system.
- Assess the safety of the adult victim as well as the children.
- Consult with the adult victim about her protective behaviors that may reduce the risk of harm to the adult victim and children. The family assessment should balance the issues of safety and risk with the strengths and protective capacity of the adult victim.
- Assess the adult victim's capacity to protect herself and her children. Consideration should be given to the confidence the adult victim has in the system's ability to keep her and her children safe and provide necessary resources.
- Assess whether the adult victim poses a maltreatment threat to the children not related to the domestic violence.
- Assess lethality of the abusive partner's violent behaviors to determine the level of danger to the victim, children and themselves and the level of intervention needed.

Assessment Tools

Guidelines for Interviewing

Families about Domestic Violence

- Safety for the child and the adult victim is the priority when child protective service workers conduct domestic violence interviews.
- Routinely inquire about domestic violence during the initial

reports and in assessment interviews with every adult family member, whether or not there are allegations of domestic violence, and whether or not an adult male lives in the household. Interview adult victims and perpetrators separately when inquiring about domestic violence. Explain calmly that Child Protection Services (CPS) routinely asks questions about domestic violence with all families on the caseload.

- Whenever possible, children, friends, and other relatives should not be present during assessment interviews because of the need to inquire about domestic violence.
- When domestic violence is revealed, the worker should immediately make a safety plan for the adult and child victims.
- Tell adult victims about their confidentiality rights, as well as limits to those rights. Explain that information shared by adult domestic violence victims will not be shared with the domestic violence perpetrator unless a court requires disclosure. Give adult victims contact numbers for victim advocacy services where victims can discuss domestic violence issues confidentially. However, also explain to adult victims that CPS is required to protect children from harm and that victim disclosures will be used to plan for the children's safety.
- When domestic violence is suspected or known, interview family members in the following order if possible. First, interview the adult victim (if the worker believes that this will cause risk to child victims begin with the children). Next, interview the children. End by interviewing the domestic violence perpetrator.
- If domestic violence is disclosed during a session with other family members present, acknowledge concern for family members' safety. Try to determine if persons are at immediate risk and plan for their safety. If there is no immediate safety concern, explore the disclosure in separate, individual sessions with family members.
- Adult victims may be reluctant to talk with CPS because of fears of losing their children and of being punished by

the batterers. By focusing on the safety concerns, the worker can build an alliance with the adult victim. Also, some adult victims minimize and/or deny the violence as a way to survive the abuse. Make stronger connections with adult victims by informing them that they do not deserve the abuse, that they and the children are in danger, and that the CPS worker will try to help the woman protect herself and her children.

- In interviews with the adult victims and older children, explain any CPS requirements about interviewing the domestic violence perpetrators. Ask adult victims if they will feel endangered by worker interviews of the perpetrators. If the worker already knows about the domestic violence through police, CPS and other agency reports, explain to the adult victim that only information received from these sources will be shared with the perpetrator. Tell an adult victim how and when the worker will conduct an interview with the domestic violence perpetrator. Ask the victims about possible consequences to them and the children of such interviews with the perpetrator. Plan for victim safety. If it appears that an interview about domestic violence with the alleged perpetrator will endanger adult victims or the children, delay it until their safety is secured.
- Interview the domestic violence perpetrator in a way that encourages him to disclose his own abusive conduct. Do not confront the domestic violence perpetrator with information provided by a victim. While workers can sometimes use police reports or other agency reports about the domestic violence in the interviews with perpetrators, do not use any information from a victim's statements.
- If an identified perpetrator denies domestic violence, do not try to force disclosure, but move on to other subjects. Angry confrontations with the domestic violence perpetrators often result in retaliation against the child or adult victims. The worker does not need the perpetrator's disclosure to confirm that domestic violence occurred. Such confirmation comes from adult and child victim statements, worker observations and other agency reports.

- If the domestic violence perpetrator reveals information that indicates imminent danger or harm to a known victim, then the worker is in a duty-to-warn situation; the adult victim and appropriate authorities must be notified. Workers should notify their supervisors and follow their agency's policies and procedures.

Reprinted from Anne L. Ganeley & Susan Schechter, Domestic Violence: A National Curriculum for Children's Protective Services (CPS), Family Violence Prevention Fund (1996)

Safety Assessment Questions

Interview of the Mother

Ask mother the following questions:

- Tell me about your relationship.
- How are decisions made in your relationship?
- Do you feel free to do, think, and believe what you want?
- Does your partner ever act jealous or possessive? If yes, tell me more about that.
- Have you ever felt afraid of your partner? In what ways?
- Has your partner ever physically used force on you (e.g., pushed, pulled, slapped, punched or kicked you)?
- Have you ever been afraid for the safety of your children?

Through this line of questioning, and careful listening, you should be able to get a feel for the tone of the relationship. If you ascertain that violence and/or severe control is or may be present in the family, you should then begin an assessment of severity. These questions will help you determine if the pattern of incidents is changing, if the abuse is escalating in frequency, and if the victim is in danger.

Has your partner:

- prevented you from going to work/school/church?
- prevented you from seeing friends or family?
- listened in on your phone calls or violated your privacy in other ways?
- followed you?
- accused you of being unfaithful?
- acted jealous?
- controlled your money?
- stolen your money?

The following questions will help you identify patterns of verbal, emotional, physical and sexual abuse.

Has your partner:

- called you degrading names?
- emotionally insulted you?
- humiliated you at home? in public?
- destroyed your possessions (e.g., clothes, photographs)?
- broken furniture?
- pulled the telephone out?
- threatened to injure you, himself, your children, or other family members?
- hit, slapped, pushed, kicked, choked, or burned you?
- threatened to use a weapon or used a weapon?
- threatened to kill you?
- hurt your pets?
- engaged in reckless behavior (e.g., drove too fast with you and the kids in the car)?

- behaved violently in public?
- been arrested for violent crimes?
- forced you to perform sexual acts that made you feel uncomfortable?
- prevented you from using birth control?
- withheld sex?
- hurt you during pregnancy?
- forced you to engage in prostitution or pornography?
- forced you to use drugs?

The next group of questions will help you assess the level of risk to the children.

Has your partner:

- called your child degrading names (e.g., “stupid”)?
- threatened to take the children from your care?
- called, or threatened to call, a child protection agency?
- accused you of being an unfit parent?
- threatened to hurt or kill your child?
- hurt you in front of the children?
- hit your child with belts, straps or other objects?
- touched your child in a way that made you feel uncomfortable?
- assaulted you while you were holding your child?
- asked your child to tell him what you do during the day?
- treated one child significantly different from another?
- forced your children to participate in or watch his abuse of you?

Has your child:

- overheard the yelling and/or violence?
- behaved in ways that remind you of your partner?
- physically hurt you or other family members?
- tried to protect you?
- tried to stop the violence?
- hurt him/herself?
- hurt pets?
- been fearful of leaving you alone?
- exhibited physical/behavioral problems at home/school/day care?

The last section of questions will help you to understand the woman's history of seeking help.

Have you:

- told anyone about the abuse? what happened?
- seen a counselor? what happened?
- left home as a result of the abuse? where did you go? did you take the children? if not, why?
- called the police? what happened?
- pressed criminal charges? what happened?
- filed a restraining order? what happened (e.g., did your partner respect the order)?
- used a battered women's group or shelter? was it helpful?
- fought back? what happened?

General questions:

- How dangerous do you think your partner is?
- What do you think he's capable of?

- Do you have any current injuries or health problems?
- How has this relationship affected how you feel about yourself, your children, the future?
- How do you explain the violence to yourself?
- How do you believe your children understand the violence?
- What do you believe would help keep you and/or your children safe?

Once the mother's interview is complete, you should have an understanding of the power structure within the family. If there is extreme danger for the woman, and her children have learned to survive by identifying with the offender (e.g., cannot keep confidentiality from the offender), then direct questioning of children may be postponed until safety can be achieved. This same thinking applies to interviewing offenders. If a woman is fearful of the consequences of questioning the offender, then it should not be done until safety can be achieved. Safety always comes first.

Interview of the Children

Questions in this section will focus on three areas:

- the children's account of what they saw and how they understand the violence
- the impact of witnessing violence
- the child's worries about safety.

Child's Account of What They Saw

Worker: Sometimes when parents fight they get angry, maybe too angry and they may start to yell at each other or even hit each other. We know this is scary for children. I want to ask you a few questions about when your parents fight and what you think about it.

Note: Older children are more likely to minimize reports of parental fighting out of loyalty to parents. They will protect parents.

Younger children may be more spontaneous and less guarded with their reports.

Questions:

- What kinds of things do Mom and Dad (boyfriend, partner) fight about?
- What happens when they fight?
- Do they yell at each other?
- Do they hit each other?
- How does the hitting usually start?
- What do you do when this is going on?
- What do you think about when this is happening?
- Do you ever get hit or hurt when Mom and Dad are fighting?

Assessment of Impact of Exposure

- Do you find that you think about your parents fighting a lot?
- When do you think about it?
- What do you think about?
- Do these thoughts ever come in school or while you are playing?
- Do you ever have trouble sleeping at night? Do you have nightmares?
- Why do you think Mom and Dad (boyfriend, partner) fight so much?
- What would you like them to do to make it better?

Child's Worries about Safety

- What do you do when Mom and Dad (boyfriend, partner) are fighting?

_____ stay in the same room

_____ go to older sibling

_____ leave/hide

_____ ask parents to stop

_____ phone someone

_____ run out/get someone

_____ other

- When Mom and Dad are fighting, what do you worry about the most?
 - Have you talked to any other grown ups about this problem?
 - In an emergency, who would you call?
 - Their phone number is: _____.
 - What would you say:
-

If children don't have some idea of whom to call, the social worker should give them basic information or help Mom think where they could go if their parents are fighting or engaged in assaultive behavior. Could they go to another room? A neighbor's house? Information gathered from this interview should always be shared with the mother to help her understand the effects of domestic violence on her children, as long as the children's safety will not be compromised.

Reprinted from Domestic Violence Initiative for Child Protective Services, Massachusetts Department of Social Services

Lethality Assessment Tool

Lethality Assessment Questions

Assessing the dangerousness of offenders is important in order to protect you and to lessen the risk for children and their mothers. Lessening the risk for yourself and for a battered woman and her children will mean safety planning. (See Safety Plan Tool). If you obtain information that indicates an interview with the offender is too dangerous for you *or* the woman and children, consult with your supervisor before you proceed. If you decide not to interview the offender, as it is not in the best interest of the child, document your reasons in the case record. Third party reports are critical in these instances. If you determine from your interview of mother and/or children, that the offender can be safely interviewed, proceed with the following preliminary line of questioning to determine the offender's perception of the problem.

- Tell me about your relationship.
- How does your family handle conflict?
- What kinds of things do you expect from your partner/family?
- What do you do when you don't get your own way?
- Have you ever been so angry that you wanted to physically hurt someone?
- Can you think of any times in your life that you have been emotionally abusive?
- If yes, do you think you have a pattern of being emotionally abusive?
- Can you think of any times in your life that you have been verbally abusive?
- If yes, do you think you have a pattern of being verbally abusive?
- Can you think of any times in your life that you have been physically abusive?

- If yes, do you think you have a pattern of being physically abusive?
- Can you think of any times in your life that you have been sexually abusive?
- If yes, do you think you have a pattern of being sexually abusive?

Reprinted from Domestic Violence Initiative for Child Protective Services, Massachusetts Department of Social Services and from Couple Conflict Inventory used by Wilder Community Assistance Program

Batterer Lethality Indicators

All batterers are potentially lethal. The following is a list of indicators to assess a batterer's potential to kill:

- Threats/attempts of homicide or suicide
- Fantasies of homicide/suicide (seen as the only solution)
- Depression (especially if loss of the partner represents total loss of hope for a positive future)
- Use, threat of use, possession, or access to weapons
- Criminal activity/violation of Temporary Restraining Order (TRO) – (may indicate little concern for consequence of arrest/jail time; hostile towards authority)
- History of violence with partner/children/pets – evaluate severity, frequency, duration (the longer, more frequent, and/or severe, the higher the risk)
- Status of the relationship. Most life-endangering rage erupts when the batterer believes the victim has just left the relationship or is about to leave
- Drug or alcohol consumption (risk of lethality may increase).

Batterer characteristics relevant to lethality:

- Obsessiveness about partner or family (e.g., to the point of monitoring the partner's calls, questioning the children)

- Possessiveness and jealousy used to monitor, control, and isolate the victim, harbors fear of losing the victim: “If I can’t have you, no one will.”
- Cannot tolerate separation from the victim
- Inflicts severe pain or torture (such as burning, starving, or beating her for hours) without warning or apparent provocation
- Derives pleasure out of creating pain
- Takes offense easily – a look, a question, or even reasonable/mild attempt at limit setting by others can trigger a violent response
- Has criminal history of violence
- Generally violent personality
- Conflicted and belligerent relationships with authority figures

Reprinted from the Domestic Violence Protocol, County of San Diego, Department of Social Services, Children’s Services Bureau, October 1996

Services

Child/Adolescent

- Assist the non-abusive caretaker to develop and implement a safety plan for the child/adolescent at risk of child maltreatment.
- Help the non-abusive caretaker refer her children/adolescents for services. Appropriate services include support groups and individual counseling. Services should provide education and support concerning the dynamics of domestic abuse.
- Use out-of-home care to protect children/adolescents when safety planning with the adult victim and/or criminal intervention with the abusive partner does not provide for the children/adolescents’ safety.

- If out-of-home care is used, ensure that the provider is aware of the family violence and will cooperate with plans to protect the child/adolescent and the adult victim.

Adult Victim

- Consult with the adult victim about the impact of the intervention on her safety and the safety of her children.
- Assist the adult victim to develop and implement a safety plan for herself and her children. If preventive services or criminal interventions cannot maintain the safety of the non-abusive parent and her children, then she should be assisted to enter an emergency shelter or another safe living situation with her children.
- Address identified child maltreatment concerns related to the adult victim's behavior with appropriate interventions, recognizing the effects of domestic violence on the adult victim's parenting.
- Refer the adult victim to domestic violence services, when appropriate and consistent with the victim's wishes, such as individual counseling, advocacy services and victim support groups. Interventions should include education and support concerning the dynamics of domestic abuse. Interventions such as couples counseling and mediation that may victimize the abused partner should not be offered.
- Help the adult victim make child visitation arrangements that ensure the safety of the child and the adult victim.
- Help the adult victim to access agency or community resources to replace the loss of income, home, belongings, transportation, childcare, and other basic needs and services if the victim separates from the abusive partner.
- Thoroughly document all reports of abusive and controlling behavior.
- Manage information concerning the adult victim to prevent the abusive partner from making unwanted contact or using information to continue the pattern of abuse and control.

Safety Plan Tool

Reminder to Workers: Whenever possible safety planning should be done with the woman. This safety plan may not be appropriate for all women to take home because the information it contains may increase risk to the family if the abuser becomes aware of the plan.

My Safety Plan Safety as I Prepare to Leave

- Keep important phone numbers near the phone and teach the children when and how to use them.
- Tell my neighbors about the violence and instruct them to contact the police if they see or hear anything suspicious.
- Make a list of safe places to go in case of emergency: family, shelter, police department, friends.
- Remember my list of important things when leaving the house.
- Try to put money aside: for phone calls, to open a separate savings account (in a different bank if you have a joint account).
- Create a code word for the children or my friends so they can call for help.
- Keep copies of important documents or keys in a safe place outside the home.

Items to Remember:

- Identification
- Mine and my children's birth certificates
- Social Security cards
- School and medical records
- Money, bankbooks, credit cards

- Keys to house/car/office
- Driver's license and registration
- Medications
- Children's favorite toys and/or blankets
- Welfare (Public Assistance)
- Passports(s), green cards, work permits
- Divorce papers
- Lease/rental agreement, house deed
- Insurance papers
- Address book/picture of abuser
- Items of sentimental value, jewelry

Safety Plan for When the Relationship is Over

- Plan to change locks, install security system, or an outdoor lighting system. Install smoke detectors.
- Inform people my partner no longer lives here and to notify me or police if he is seen in the area.
- Tell people who take care of my children who has permission to pick them up. Supply them with copies of any court papers ordering the abuser to stay away.
- Avoid locations where I may run into my batterer: bank, stores, and restaurants.
- Obtain a protective order from _____ court, keep it with me at all times, put an additional copy in a safe place or with someone, and notify police of violations.
- Make a plan to contact someone for support, such as a friend or family member. Call a hotline and/or attend a support group if I feel down or ready to return to a potentially abusive situation.

Important Phone Numbers

Police _____

Local Battered Women's Program _____

Local Child Protection Agency _____

Friends _____

This safety tool is an excerpt from the Domestic Violence Initiative for Child Protective Services, Massachusetts Department of Social Services

Abusive Partner

- Hold the abusive partner accountable by:
 - expecting the abusive partner to acknowledge and address the impact of his behavior on the children and demonstrate nonviolent parenting
 - creating a separate child protection case plan specific to the abusive partner's behavior and responsibilities (abusive partners should not be included in case plans for victims)
 - supporting legal/criminal actions that hold the abusive partner accountable
 - supporting orders in family court that make detailed findings explaining how a custody or visitation award is consistent with the well-being and physical safety of the child and nonabusive parent
 - considering a petition alleging the abusive partner is contributing to the need for protection status of a child (Minnesota Statute 260C.335).
- Coordinate services with law enforcement, court services and adult corrections.
- Refer the abusive partner to services such as Men's Domestic Violence Treatment Programs, Domestic Violence Education Groups, and Fathering after Violence Classes, where indicated or requested.

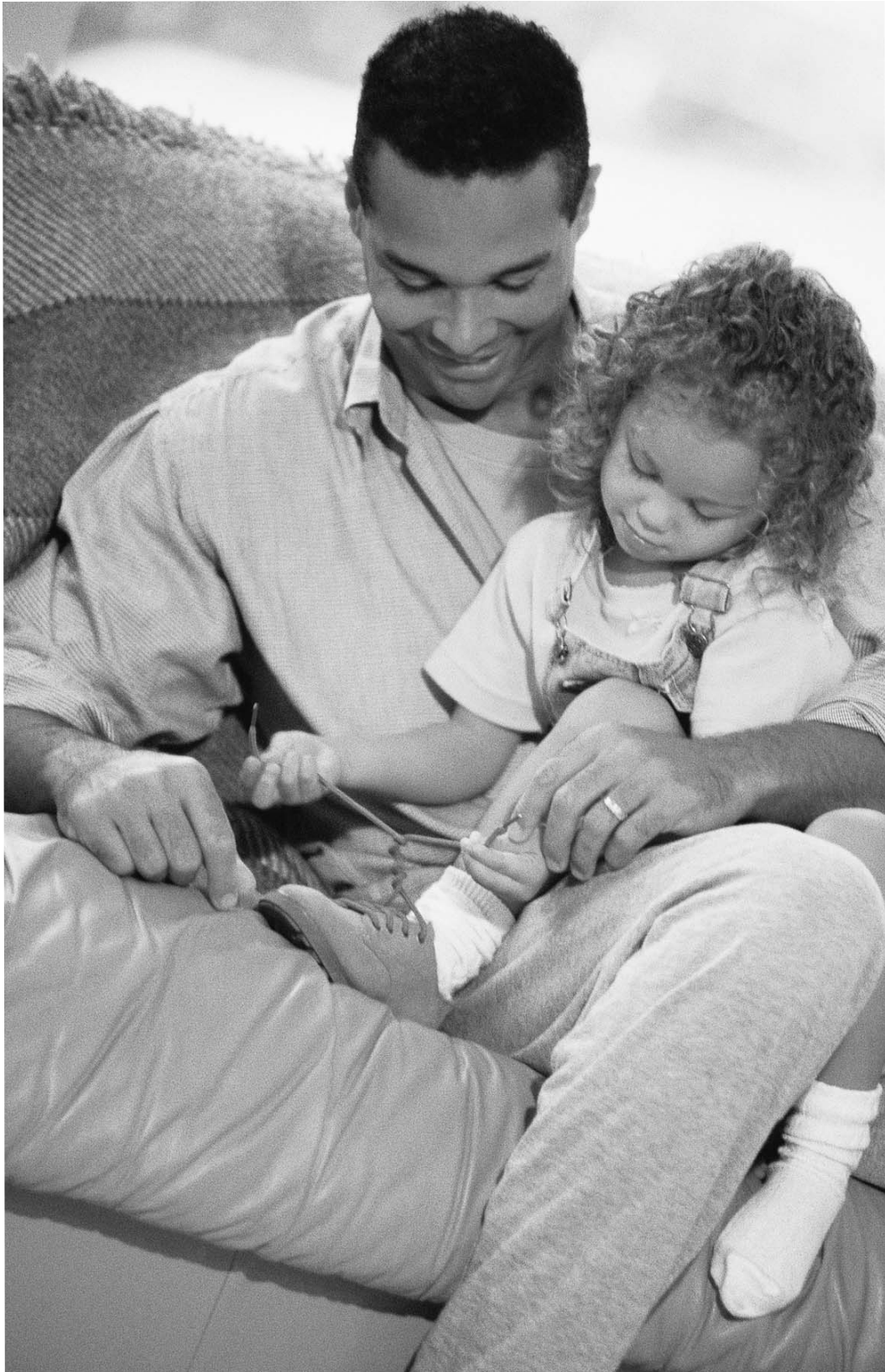
NOTE: Anger management interventions are not sufficient to address the dynamics of domestic violence. Services must be directed towards holding the abusive partner responsible for his behavior and eliminating his abusive behavior in all family relationships. When traditional psychotherapy is used as a treatment option, it should be under the conditions that the abusive partner authorizes release of pertinent information and waives confidentiality to child protection, and the psychotherapist agrees to notify child protection of the treatment outcomes.

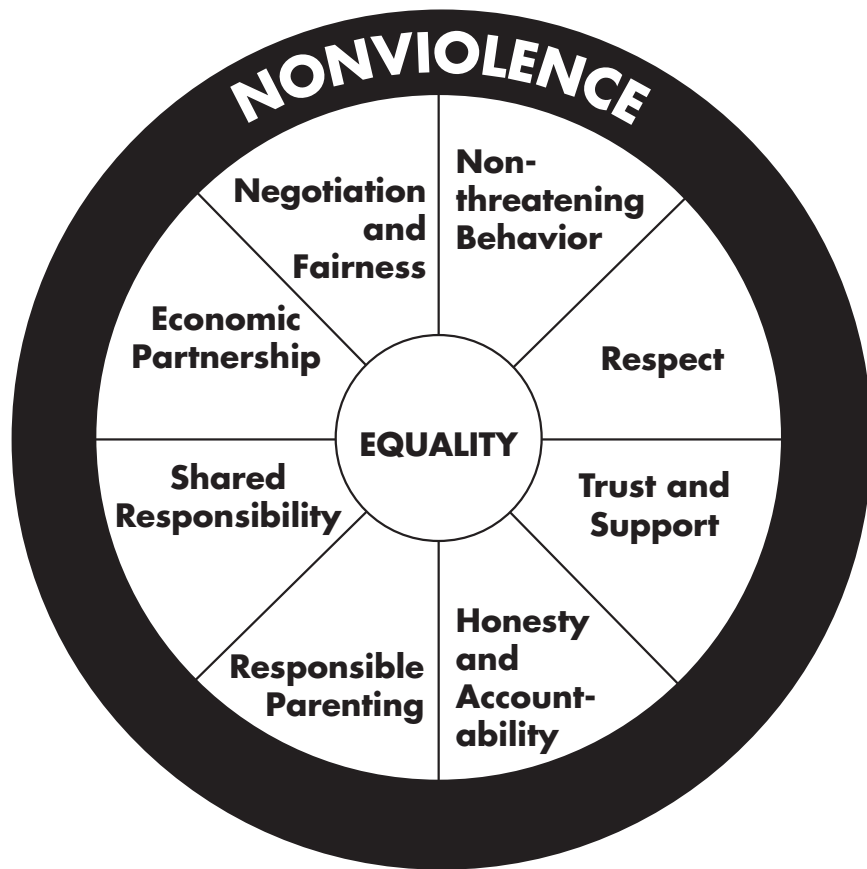
Although chemical abuse may be a contributing factor to domestic violence, chemical dependency treatment alone is not sufficient to address domestic violence.

Case Closing

- Assess whether the abusive partner has completed treatment and the degree to which the risk of domestic abuse and child maltreatment has been lessened to the adult victim and child.
- Consider the safety of adult and child victims when closing the case. When the risk of child maltreatment remains high, services should continue until the risk is lowered or removed. The period of time in which there has been a reduction in risk should be of sufficient duration to suggest that safety has been well established.
- Engage informal supports and/or offer community referrals to address any ongoing safety needs or concerns.







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This information is available in other forms to people with disabilities by calling 651-282-5329, or contact us through the Minnesota Relay Service at 800-627-3529 (TTY) or 877-627-3848 (speech-to-speech relay service).



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