



October 2009

## Domestic Violence and the Child Welfare System

Domestic violence is a devastating social problem that affects every segment of the population. It is critical for child welfare professionals and other providers who work with maltreated children to understand the relationship between domestic violence and child maltreatment, as many families experiencing domestic violence also come to the attention of the child welfare system. Families with co-occurring domestic violence and child maltreatment often have high levels of cumulative risk, and children in families with the highest level of cumulative risk are 10 times more likely to be placed into foster care than children in families assessed with low levels of risk (Kohl, Edleson, English, and Barth, 2005).

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Child Welfare Information Gateway Children's Bureau/ACYF 1250 Maryland Avenue, SW Eighth Floor Washington, DC 20024 800.394.3366 Email: info@childwelfare.gov www.childwelfare.gov While system responses are targeted primarily toward adult victims of abuse, child welfare professionals, domestic violence advocates, courts, and other community stakeholders increasingly are working together to address the impact of domestic violence on children.

This bulletin discusses the extent of the overlap between domestic violence and child maltreatment, some of the effects of family violence on child witnesses, and the trend toward a more collaborative, communitywide response to the issue. It also features promising practices from States and local communities. For specific information about addressing the co-occurrence of domestic violence and child maltreatment in State Program Improvement Plans, see also Child and Family Service Review Outcomes: Strategies to Improve Domestic Violence Responses in CFSR Program Improvement Plans, developed by the National Council of Juvenile and Family Judges in partnership with the Family Violence Prevention Fund and the National Resource Center for Child Protective Services: www.nrccps.org/resources/featured\_ resources.php

## **Scope of the Problem**

Estimates of the number of children who have been exposed to domestic violence each year vary. The Bureau of Justice Statistics (2007) estimates that, on average, between 2001 and 2005, children lived in at least 35 percent—and as many as 50 percent—of the households experiencing intimate partner violence.

As a result, large numbers of children come in contact with domestic violence service providers each year. According to the National Network to End Domestic Violence, one-half to two-thirds of the residents in domestic violence shelters are children. It reports: "On one day in 2007, 13,485 children were living in domestic violence shelters or transitional housing [facilities]. Another 5,526 sought services at non-residential programs" (National Network to End Domestic Violence, n.d.).

Exposure to intimate partner violence is in itself traumatic for children; the co-occurrence of maltreatment and domestic violence can be devastating. A literature review found that a median of 40 percent of families who experience domestic violence also experience some form of child maltreatment (Appel & Holden, 1998). It's important to note that a more recent study (Hartley, 2004) found higher rates of neglect (specifically lack of supervision) and lower rates of physical abuse in families experiencing severe domestic violence, when compared to families experiencing less severe domestic violence or child maltreatment alone.

# Impact of Domestic Violence on Children

A growing body of literature shows that children who have been exposed to domestic violence are more likely than their peers to experience a wide range of difficulties. These difficulties fall into three main categories:

 Behavioral, social, and emotional problems. Children in families experiencing domestic violence are more likely than other children to exhibit aggressive and antisocial behavior or to be depressed and anxious (Brown & Bzostek, 2003). Other researchers have found higher levels of anger, hostility, oppositional behavior, and disobedience; fear and withdrawal; poor peer, sibling, and social relationships; and low self-esteem.

- Cognitive and attitudinal problems.
  - Children exposed to domestic violence are more likely to experience difficulties in school and score lower on assessments of verbal, motor, and cognitive skills. Slower cognitive development, lack of conflict resolution skills, limited problem solving skills, pro-violence attitudes, and belief in rigid gender stereotypes and male privilege are other issues identified in the research (Brown & Bzostek, 2003; Edleson, 2006).
- Long-term problems. Research indicates that males exposed to domestic violence as children are more likely to engage in domestic violence as adults; similarly, females are more likely to be victims (Brown & Bzostek, 2003). Higher levels of adult depression and trauma symptoms also have been found (Silvern et al., 1995). Exposure to domestic violence is also one of several adverse childhood experiences (ACEs) that have been shown to contribute to premature death, as well as risk factors for many of the most common causes of death in the United States. (For more information, visit the Adverse Childhood Experiences (ACE) Study website: www.acestudy.org)

Despite these sobering findings, not all children exposed to domestic violence will experience such negative effects. Children's risk levels and reactions to domestic violence exist on a continuum; some children demonstrate enormous resiliency, while others show signs of significant maladaptive adjustment. Protective factors such as social

competence, intelligence, high self-esteem, outgoing temperament, strong sibling and peer relationships, and a supportive relationship with an adult (especially a nonabusive parent) can help protect children from the adverse effects of exposure to domestic violence (Edleson, 2004; Hughes, Graham-Bermann, & Gruber, 2001; Carlson, 2000).

Additional factors that influence the impact of domestic violence on children include:

- Nature of the violence. Children who
  witness frequent and severe forms of
  violence or fail to observe their caretakers
  resolving conflict may undergo more
  distress than children who witness fewer
  incidences of physical violence and
  experience positive interactions between
  their caregivers.
- Age of the child. Younger children appear
  to exhibit higher levels of emotional
  and psychological distress than older
  children. Age-related differences might
  result from older children's more fully
  developed cognitive abilities to understand
  the violence and select various coping
  strategies to alleviate upsetting symptoms.
- Elapsed time since exposure. Children
  often have heightened levels of anxiety
  and fear immediately after a violent
  event. Fewer observable effects are seen
  in children as time passes after the violent
  event.
- Gender. In general, boys exhibit more externalized behaviors (e.g., aggression and acting out) while girls exhibit more internalized behaviors (e.g., withdrawal and depression).

 Presence of child physical or sexual abuse. Children who witness domestic violence and are physically abused are at higher risk for emotional and psychological maladjustment than children who witness violence and are not abused (Rosewater & Goodmark, 2007; Edleson, 2004).

Comprehensive assessment regarding children's experiences and trauma symptoms, as well as the protective factors present, should inform decision-making regarding the types of services and interventions needed for individual children and families living with violence.

## Responding to Domestic Violence

### **Challenges**

Although adult and child victims often are found in the same families, child welfare and domestic violence programs traditionally responded separately to victims. Because each system was focused primarily on the safety and protection of one victim, conflicts sometimes arose. For example, some child welfare advocates were concerned that domestic violence service providers were dismissing or ignoring the safety needs of children by focusing solely on the adult victim. Similarly, some domestic violence advocates felt child protective services caseworkers "re-victimized" adult victims by blaming them for the violence, removing their children, and/or charging them with "failure to protect." These conflicting responses arose from differences in the systems' philosophies, mandates, policies, and practices, which had been developed in isolation from one another.

As a result, both systems sometimes failed to communicate and coordinate with one another, to the detriment of the families they were attempting to serve (Carter & Schechter, 1997).

In addition, some States have passed legislation that broadened the definition of child neglect to include children who witness domestic violence. Approximately 21 States and Puerto Rico now address in their statutes the issue of children who witness domestic violence in their homes (Child Welfare Information Gateway, 2008). However, some researchers feel that expanding the legal definition of child maltreatment may not be the most effective method to address the needs of children who have been exposed to domestic violence. Because effects of domestic violence vary from one child to another, child welfare professionals are cautioned against assuming that witnessing domestic violence, on its own, constitutes child maltreatment or warrants child protective services intervention (Edleson, 2004; Hughes, Graham-Bermann, & Gruber, 2001).

Despite their differences, child welfare advocates and domestic violence service providers share significant goals that can help bridge the gap between them. These include:

- Ending violence against adults and children
- Ensuring children's safety
- Protecting adult victims so their children are not harmed by violence
- Promoting parents' strengths
- Deferring child protection services intervention—as long as child safety is preserved—and referring adult and child victims to community-based services

## Integrating Differential Response Into Domestic Violence Intervention

Some experts in the field assert that families and their children who show minimal evidence of harm resulting from exposure to domestic violence, and who have other protective factors present in their lives, may benefit more from voluntary services in the community (Edleson, 2006). An emerging child welfare practice—differential response—reflects this approach.

Differential response allows child welfare agencies to approach the issue of domestic violence in a family-centered, nonthreatening way. A modified differential response intervention helps ensure the safety and well-being of the children as well as the adult victim. It allows the child welfare agency to assess whether the family can be helped by the provision of services and supports outside of the context of the child welfare system and dependency courts.

This type of intervention requires that the social worker meet with the adult victim first, separate from the alleged abuser, to establish a safety plan for the adult victim and her children (Sawyer & Lohrbach, 2005b). The alleged abuser is then contacted, with a focus on concerns about the children being exposed to violence. Safety plans are developed with the adults with the intent of reducing the risk and/or recurrence of physical or emotional harm to the children. Families are referred to community-based agencies that can provide them with the assistance they need to address the violence, with the hope of preventing further governmental intervention (Sawyer & Lohrbach, 2005b).

While not every case is appropriate for differential response, this approach allows child welfare professionals to devise solutions outside the child welfare system that could help communities better define which cases are appropriate to address within that system. Olmstead County, Minnesota, initiated a countywide differential response system in 1999, called Critical Pathways for Child Protection Services. Its organizational design provides a choice of responses to a community member's concern about a child's safety and well-being. Olmstead County uses a team approach to review, evaluate, and direct cases accepted through screening and intake for consideration as valid reports of child maltreatment that require agency response (Sawyer & Lohrbach, 2005a).

A differential response approach maintains that protecting at-risk children should be the child welfare system's highest priority, but it also acknowledges the need for a rich network of community-based institutions offering additional support services to families. This "safety and resource-sensitive reasoned approach" (Edleson, 2004) also recognizes that not all children exposed to domestic violence will exhibit problems to an extent that requires clinical intervention. Children and families at low risk may benefit from voluntary community services instead of traditional child protection services. However, children who are at high risk or in imminent danger should be referred to the child welfare system for additional protective services. Each family's needs could be assessed using protocols and/ or screening instruments that identify children at greatest risk of harm.

The National Resource Center for Family Centered Practice and Permanency Planning (Toussaint, 2006) suggests the following policies to align efforts of child abuse and domestic violence practitioners:

- Identify and assess domestic violence in all child welfare cases
- Provide services to families where domestic violence has been identified (even if child abuse has not been substantiated), including helping abused women protect themselves and their children using noncoercive, supportive, and empowering interventions whenever possible
- Hold perpetrators of domestic violence accountable for stopping the violent behavior in order to protect children

### **Collaborative Approaches**

In recent years, increased awareness of the co-occurrence of domestic violence and child abuse has compelled both child welfare systems and domestic violence programs to reevaluate their interventions with families experiencing both forms of violence.

Many professionals now acknowledge that communities can serve families better by allocating resources to build partnerships among domestic violence service providers, child protective service providers, and an array of informal and formal systems within the community, and by offering a continuum of individualized services based on the levels of risk present (Edleson, 2004; Edleson, 1999).

National, State, and local initiatives are demonstrating that a collective ownership and intolerance for abuse against adults and children alike can form the foundation of a coordinated and comprehensive approach to ending child abuse and domestic violence. For example, an initiative of the Edna McConnell Clark Foundation, Community Partnerships

for Protecting Children, coordinated broadbased community partnerships that included public child welfare agencies in four pilot communities. These initiatives quickly realized they needed to address domestic violence (along with other challenges facing vulnerable families) to be successful in their goal of creating a shared sense of responsibility for protecting abused and neglected children among community-based organizations and neighborhood residents (Rosewater & Goodmark, 2007).

Institutional and societal changes can begin to eliminate family violence only when service providers integrate their expertise, resources, and services into an expansive network. New practices are enhancing cross-system understanding and interactions between agencies and communities. Child welfare agencies and dependency courts are creating specialized positions for experts who understand and who can advocate for adult and child victims. New protocols are institutionalizing change and ensuring that child welfare workers and domestic violence advocates benefit from the lessons learned by their predecessors and colleagues.

A collaborative approach to working with families that experience the co-occurrence of domestic violence and child maltreatment has a number of potential benefits: families receive more comprehensive and coordinated services, while avoiding redundant interviews and program requirements; agencies can effectively identify and provide appropriate services; caseworkers can minimize blaming of the adult victim, hold batterers accountable, and advocate on behalf of all family members (Banks, Dutch, & Wang, 2008). To improve collaboration within and among systems, and to engage new community partners in keeping

families safe, organizations must have certain strategies. These include:

- Collaborative learning and practice as a prelude to new policies
- New strategies to address issues of race, culture, and gender
- Greater participation by survivor mothers and children
- Greater investment in community
- Differential responses for families based on risk
- Therapeutic and other services and supports for mothers and children
- Greater accountability for men who batter and greater attention to the roles they continue to play as fathers and providers
- Broad, meaningful engagement of men as allies in protecting children (Rosewater & Goodmark, 2007)

### **Promising Practices**

The following are examples of strategies communities have used to support more effective collaboration between domestic violence services and child welfare systems.

### Collocating Domestic Violence Advocates in Child Welfare Offices for Case Consultation and Supportive Services

**Safe Start (Portland, OR).** Domestic violence advocates within the Oregon Department of Human Services assist

with safety planning; provide referrals to and advocacy for other needed services; and accompany victims to court, team decision meetings, and other child welfare meetings. They also provide consultation and technical assistance to child welfare workers and others involved in the child protective service system for domestic violence issues and system responses. Domestic violence and child welfare staff work together to develop collaborative case plans that jointly address domestic violence and child abuse and neglect issues. For more information: http:// www.multco.us/staticfiles/Resources/DV/ safe%20start%20brochure%203-2008.pdf

# Developing Cross-System Protocols and Partnerships to Ensure Coordinated Services and Responses to Families

Rural Project for Women and Child Safety (Minnesota). A grant-funded project of the Minnesota Coalition for Battered Women and Minnesota Crime Victim Services, a division of the Minnesota Department of Public Safety, this project began in March 2000 to develop statewide protocols and collaborative training for cases in which domestic violence and child abuse overlap. The involvement of trainers from both disciplines in the protocol development helped enhance understanding and relationships between child protection and domestic violence programs. This collaboration among State agencies prompted the Department of Human Services to convene a diverse group of agencies and individuals to develop best practice guidelines for child protection workers when domestic

violence and child maltreatment co-occur. For more information: www.mincava.umn. edu/rural

Family Service of Rhode Island (Providence). The Providence Police Go-Team, which has been trained in the Child Development-Community Policing program, provides around-the-clock crisis intervention to children and families. The program, a national model of collaborative alliances among law enforcement, the juvenile justice system, medical and mental health professionals, child welfare agencies, schools, and other community groups, includes cross-training, follow-up home visits, and short- and long-term clinic-based treatment interventions held in homes, neighborhoods, and schools. For more information: www.familyserviceri. org/partner\_police\_help.asp

The San Diego Family Justice Center (San Diego, CA). The Family Justice Center was launched by the City of San Diego to assist victims of family violence. It was the first comprehensive "one-stop shop" in the nation for victims of family violence and their children. More than 25 agencies under one roof provide coordinated legal, social, and health services to women, men, children, and families in need. There, victims of family violence can talk to an advocate, get a restraining order, plan for their safety, talk to a police officer, meet with a prosecutor, receive medical assistance, receive information on shelter, and get help with transportation. For more information: www. sandiegofjc.org

# Instituting Family Court Models That Address Overlapping Domestic Violence and Child Abuse Cases

Family Violence Court (Ada County, Idaho). The State of Idaho piloted a program in Ada County in 2002 to address challenges the courts face in managing domestic violence cases. The program uses a "one family, one judge" approach to focus on strengthening families that are facing multiple issues. A single judge is assigned to handle domestic violence cases involving children, along with the family's related divorce, child support, and custody issues. This helps the court provide a safe environment for families at risk, allows the judge to support a coordinated response that addresses each family's unique needs, and guarantees continued, close judicial supervision of the children's safety and well-being. To read an evaluation report on this program by the Rocky Mountain Quality Improvement Center, see: www.isc.idaho. gov/Eval\_72506.pdf

Dependency Court Intervention
Program for Family Violence (DCIPFV)
(Miami-Dade County, Florida). Located
in the 11th Judicial Circuit Court of
Florida, DCIPFV was the first national
demonstration project to develop a
coordinated approach to victims and
children involved in child protection and
dependency court proceedings. The
judiciary, along with other key systems,
employs a dual approach to enhance
the safety and well-being of children
and victims who are involved with child
protective services and experiencing
domestic violence. DCIPFV locates staff

at juvenile court proceedings where domestic violence service workers are available for assessment and referral. They also provide support to victims and their children. DCIPFV staff assist victims in navigating the child welfare and juvenile court systems and help them obtain civil protection orders (Toussaint, 2006). For more information: http://www.ncjfcj.org/images/stories/dept/ppcd/pdf/miamidadedvfulldoc.pdf

## **Cross Training Domestic Violence** and Child Welfare Advocates

Families First (Michigan). Families First is an intensive, short-term crisis intervention and family education services program—a core service of the Michigan Department of Human Services for the State's 83 counties. In 1993, Families First asked the governor's Domestic Violence Prevention and Treatment Board (DVPTB) to provide domestic violence in-service training seminars for family preservation workers. Families First and DVPTB worked together to develop extensive cross training, and in 1995, Michigan became the first State to institutionalize mandatory domestic violence training for family preservation workers and supervisors (Greenbook Initiative, 2008). For more information: http://www.michigan.gov/dhs/0,1607,7-124-5452\_7124\_7210-15373--,00.html

## Creating Domestic Violence Units in Child Welfare Agencies

Massachusetts Department of Social Services (DSS) Domestic Violence Unit. The nation's first systemwide effort within a child protection agency to bring domestic violence expertise to child protection decision-making was based on the belief that the best interests of children in families experiencing domestic violence cannot be separated from the best interests of their mothers. The process began in 1987 with joint planning between DSS and advocates for battered women. The first domestic violence advocate was hired at DSS 3 years later; in 1993, a separate domestic violence unit was created within DSS. The resulting agencywide protocol has increased recognition of domestic violence by DSS staff, reduced unnecessary out-of-home placement of children, and increased cooperation among child protection workers and advocates for battered women. For more information: http://aspe.hhs.gov/HSP/cyp/dv/pt4.htm

# Using the Temporary Assistance for Needy Families Family Violence Option

Missouri. By adopting the Federal Family Violence Option (FVO) as part of its State Temporary Assistance for Needy Families (TANF) program, county agencies in Missouri can offer victims of domestic violence needs assessments, referrals to community service providers, and exemptions from cooperation with child support enforcement and other TANF requirements. Procedures to implement FVO provisions were developed and tested as part of a demonstration project in Jackson County, Missouri, before they were adopted statewide. The project's main activities included refining agency procedures to assist victims of domestic violence, creating domestic violence screening and assessment protocols,

training county staff on new procedures and the dynamics of domestic violence, using automated information systems to protect confidentiality, and cultivating relationships with domestic violence service providers (Stieglitz & Johnson, 2001).

**Oregon.** The State implemented new child support and domestic violence policies in response to provisions of 1996 Federal welfare reform legislation. State policymakers created House Bill 3112, and domestic violence advocates, particularly the Oregon Coalition Against Domestic and Sexual Violence, helped implement the legislation. This legislation requires the Department of Human Services Adult and Family Services Division to identify public assistance applicants and recipients who are victims of domestic violence and offer them individualized case management, referrals to community services, and waivers from cooperation with child support enforcement and other TANF requirements (Stieglitz & Johnson, 2001).

### **Summary**

The co-occurrence of domestic violence and child maltreatment is a serious and pervasive social problem. The adverse effects of family violence on children can include behavioral, social, emotional, and cognitive problems that may last into adulthood. A review of literature reveals general agreement that the most effective approach to reducing family violence is based on comprehensive partnerships within and among child- and family-serving systems. Only in cooperation with one another can these systems ensure the safety and well-being of children and families. States and

communities are moving in this direction, but more work is needed.

# Resources for Further Information

# Child and Family Service Review Outcomes: Strategies to Improve Domestic Violence Responses in CFSR Program Improvement Plans

Guides State stakeholders in developing effective Program Improvement Plans (PIPs) for achieving safety, permanency, and well-being in domestic violence cases, and in identifying or anticipating related technical assistance needs. Developed by the National Council of Juvenile and Family Court Judges, Family Violence Prevention Fund, and the National Resource Center for Child Protective Services.

www.nrccps.org/resources/featured\_resources.php

## Child Parent Psychotherapy for Family Violence

Integrates psychodynamic, attachment, trauma, cognitive-behavioral, and social-learning theories into a dyadic treatment approach. Designed to restore the child-parent relationship and the child's mental health and developmental progression that were damaged by the experience of domestic violence.

www.childtrends.org/Lifecourse/programs/cppfv.htm

# Child Protection in Families Experience Domestic Violence: User Manual Series

Provides basic information about domestic violence and addresses the overlap between child maltreatment and domestic violence, how to modify child protection practice with families experiencing domestic violence, ways to enhance caseworker safety and support in these cases, and collaborative responses for families experiencing domestic violence. Developed by the Office on Child Abuse and Neglect, Children's Bureau, U.S. Department of Health and Human Services. www.childwelfare.gov/pubs/usermanuals/domesticviolence/domesticviolence.pdf

## Children's Exposure to Violence: A Comprehensive National Survey

Discusses the National Survey of Children's Exposure to Violence, the most comprehensive nationwide survey of the incidence and prevalence of children's exposure to violence to date, sponsored by the Office of Juvenile Justice and Delinquency Prevention and supported by the Centers for Disease Control and Prevention. www.ncjrs. gov/pdffiles1/ojjdp/227744.pdf

### The Child Witness to Violence Project

Focuses on counseling, advocacy, and outreach for the growing number of young children who witness community and domestic violence.

http://www.childwitnesstoviolence.org/

## **Connect: Supporting Children Exposed to Domestic Violence**

Provides curriculum, a PowerPoint presentation, and related tools from the Family Violence Prevention Fund. Intended for use with foster parents, kin caregivers, and adoptive parents caring for children who have been exposed to domestic violence. Includes information on the dynamics of domestic violence, the effects of exposure to domestic violence on children, and strategies for supporting children who have been exposed to violence.

http://endabuse.org/content/features/detail/1314

## **Domestic Abuse Intervention Programs**

Offers domestic violence training and resources to help community activists, domestic violence workers, practitioners in the criminal and civil justice systems, human services providers, and community leaders make a direct impact on domestic violence.

www.theduluthmodel.org

## Domestic Violence Home Visit Intervention

Provides enhanced law enforcement, community-based advocacy, and mental health services to families affected by domestic violence. A joint project of the Yale Child Study Center and the New Haven Police Department, its goal is to increase children's safety and decrease negative psychological effects of exposure to domestic violence. www.childstudycenter.yale.edu/services/violence.html

## Domestic Violence and Its Role in Child Welfare

Examines the intersection of domestic violence and child welfare and supplies effective practices that combine knowledge from both fields. From the National Resource Center for Family-Centered Practice and Permanency Planning.

www.hunter.cunv.edu/socwork/nrcfcpp/

www.hunter.cuny.edu/socwork/nrcfcpp/downloads/information\_packets/domestic\_violence.pdf

### Family Violence Department, National Council of Juvenile and Family Court Judges

Provides training and technical assistance, through the Resource Center on Domestic Violence: Child Protection and Custody, to professionals seeking to improve outcomes on child protection and child custody cases that involve domestic violence, while engaging in policy reform in those areas.

www.ncjfcj.org/dept/fvd

### The Greenbook Initiative

Provides resources and information regarding the six federally funded communities implementing the National Council of Juvenile and Family Court Judges guidelines, Effective Intervention in Domestic Violence & Child Maltreatment Cases: Guidelines for Policy and Practice.

www.thegreenbook.info/init.htm

### The Link Research Project

Offers information and findings from a series of studies that seek to understand how domestic violence and child maltreatment co-occur in families and how informal and formal social systems respond. The goal of this multiphase project is to help develop new evidence-based interventions.

www.mincava.umn.edu/link

#### **Safe Start Center**

Aims to broaden the scope of knowledge and resources for responding to the needs of children exposed to violence and their families.

www.safestartcenter.org

### Safe and Together Model

Centers on five critical building blocks to improve case practice and decision making in domestic violence cases where children are the focus.

http://www.vawnet.org/Assoc\_Files\_VAWnet/ SafeTogetherReport2008.pdf

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