
WOMEN IN THE MIDDLE: THE INTERSECTION OF DOMESTIC VIOLENCE AND THE CHILD WELFARE SYSTEM

Elizabeth S. Brown

In families affected by domestic violence, women are typically both the battered party and the parent most likely to be responsible for the caretaking of children. Although the domestic violence and child welfare service systems both work towards ending family violence, conflicting goals reflect the historical tension between the woman-centered battered women's movement and the child-centered child welfare system. This article considers the overlap between the domestic violence and child welfare service systems and women's place at the intersection of these two spheres. Suggestions to improve policy and practice are made for social workers who serve battered women and children affected by family violence.

The overlap of domestic violence and child maltreatment is well established, with numerous studies showing that child abuse and partner abuse are often co-occurring forms of family violence (Edleson, 1999a). Less recognized, however, is the disproportionate burden women bear at the intersection of the child welfare system and battered women's services. Domestic violence (also called intimate partner violence) most frequently describes violence perpetrated by men against their female partners and ex-partners (Humphreys, 1999). As typically both the battered party and the primary caregiver (Maxwell, 2000), a mother in a family affected by domestic violence is often subject to the competing demands for keeping herself and her child safe. Surprisingly, given the rates of co-occurrence and populations served, the child welfare system and battered women's movement often operate in different spheres, emphasizing different values and philosophies. Although both are designed to protect women and children, the two systems at times work at cross-purposes, an opposition that further victimizes women. New policy and practice methods should consider the intersection of these two systems and develop ways to support women and children from a strengths-based, holistic perspective that does not ignore the gendered dynamic of both systems.

The Scope of the Problem

The number of children exposed to domestic violence each year is estimated at 3-10 million, and studies suggest that there are both child and adult victims in 30 to 60% of families affected by domestic violence (U.S. DHHS, 2003). Studies show that the long-term effects of domestic violence on children have serious implications on child development and well-being. Children who witness domestic violence are more likely to exhibit signs of social, cognitive, emotional and behavioral problems, and are at increased risk of drug abuse, suicide, and homelessness (Park, et al., 2004; Edleson, 1999b; Onyskiw, 2002; National Coalition Against Domestic Violence, 2005).

Despite progressive policies designed to differentiate between children witnessing and experiencing direct abuse, current child welfare practice often removes children from households with a recent history of domestic violence. If the child welfare system becomes involved with a family affected by domestic violence, women may be compelled to make difficult choices about housing, work arrangements, childcare, and child custody. For instance, a battered woman, by leaving her abuser and taking her children with her to live in a shelter or on the streets, may risk removal of her children by the foster care system because of a lack of appropriate housing options (Pearce, 1999). Predictably, many women choose to deny the presence of domestic violence in order to avoid its social and legal ramifications and to prevent the removal of her children into the foster care system.

Different Perspectives on Protecting Battered Women and Their Children

Child advocates and battered women advocates alike acknowledge the historical tension between their philosophies as reflected by the child-centered child welfare system and the woman-centered battered women's movement (Beeman, Hagemester, & Edleson, 1999). Although the two systems both work towards ending family violence, their goals are sometimes in conflict. Battered women's advocates criticize the child welfare system for turning a blind eye to domestic violence (Pennell & Burford, 2000) or, when the presence of domestic violence is evident, holding the woman and not the batterer responsible for the safety and well-being of the child (Saunders & Anderson, 2000). While some domestic violence service providers acknowledge the co-occurrence of abuse of women and children, many still view women as the primary victims and children as secondary victims (Pearce, 1999).

Grounded in a feminist perspective, some domestic violence service providers argue that empowering women ultimately benefits children and choose to serve women first and their children collaterally. Children's advocates hold that children have their own needs that are not always met by serving their mothers first or exclusively.

The differences between the two systems are echoed even in their outcome goals. Child welfare policy, along with the permanency planning required by the Adoption and Safe Families Act of 1997 (ASFA), uses practice language such as "family preservation" and "family reunification" (Pennell & Burford, 2000). On the other hand, the battered women's movement considers options for women that separate her from the batterer, whether psychologically (individual counseling), legally (via protective orders or divorce proceedings), or physically (alternative housing).

Battered Women in the Child Welfare System

A societal bias which views women as primarily responsible for the care of their children is reflected in the child welfare system. Socially and legally, women more often than men are blamed for the poor treatment of their children and are more harshly judged when their children are maltreated, regardless of who commits the maltreatment (Saunders & Anderson, 2000). While the legal and child welfare systems penalize women for failing to protect their children, these same systems are often criticized for neglecting to pursue punishment of or interventions for the batterer, instead focusing on what the mother's responsibilities are for keeping her child safe (Edleson, 1999a). As one study found, "women are held responsible for both their male partners' behavior and the protection of their children" (Pearce, 1999, p. 112). Another study of child protection workers and battered women's advocates found that Child Protective Service (CPS) workers rarely included the male perpetrator of violence in family service plans (Beeman, Hagemester, & Eldeson, 1999).

Although ASFA emphasizes adoption and permanency planning, which critics of the act contend interferes with family preservation efforts, procedures remain for removing children when doing so is deemed to be in the child's best interest or in order to keep the child safe (Postmus & Ortega, 2005; Saunders & Anderson, 2000). In some cases, if a woman does not leave her abuser, caseworkers may perceive a betrayal of a mother's inherent responsibility to protect her children and may hold the woman responsible for the abuse by removing the child from her care (Magen, 1999).

Women's advocates believe that removing a child from a mother's care is a second victimization, punishing the mother for her batterer's actions (Beeman, et al., 1999). A landmark New York court case, *Nicholson v. Scopetta*, 344 F.3d 154, 164 (2d Cir. 2003), alleged that the Administration for Children's Services was unduly removing New York City children, who were not otherwise abused, from their families in which domestic violence was taking place and charging their mothers with neglect (Postmus & Ortega, 2005). The court found that such practice was illegal and, in effect, penalized mothers for being battered. Not all states, however, have such a legal precedence and some child welfare practices continue to punish women for their batterer's abuse by placing their children into foster care. In fact, the law in this area of child as domestic violence witness continues to develop and carries important implications for women including potential legal responsibilities and consequences.

Children's Exposure to Domestic Violence

Battered women are repeatedly confronted with untenable choices. Some women feel emotionally trapped, physically threatened, financially constrained, and/or psychologically tethered to their batterer. Domestic violence advocates recognize the complexity of these choices and provide services that look to empower and support women. The effects of domestic violence on children, however, are not as well understood, and children's needs are often subjugated by legal systems that respond to adult demands. In some cases, children are witness to, but not the direct targets of, intimate partner violence. In other cases, children are hurt as bystanders. Research shows, however, a significant number of battered women's children have also been physically or sexually abused themselves (Humphreys, 1999), and the abuse may be perpetrated by any primary caretaker, whether male or female.

Edleson (1999b) found that children of battered women can experience a tangle of emotions as a result of their experiences and are not receiving the services they need to address these complicated psychosocial needs. For instance, children of battered women, in addition to coping with the effects of being witness or subject to violence, may be also struggling with having to move out of their home, separate from a parent and/or other family members, change schools, and reconcile their love for the batterer with their sense of betrayal. Child-centered advocates in the movement against domestic violence contend that children have needs that are not always addressed by protecting and empowering women (Beeman et al., 1999). Viewing children as individuals

with agency, they argue, demands that service systems be restructured to assess and address children's specific needs and not just those that derive from their mother.

Current Practice Methods

The lack of coordination between the child welfare system and battered women's movement reveals numerous missed opportunities to serve both women and children. For instance, New York state law does not require that CPS be notified in domestic violence cases (Bent-Goodley, 2004) despite the fact that CPS workers called to intervene in an at-risk family are in an excellent position to recommend or make referrals to domestic violence services. In fact, a study of battered women served by a New York City child welfare preventative service agency found that battered women want child welfare workers to ask them about current and past incidents of domestic violence (Magen, et al., 2000) so that appropriate services can be implemented. Additionally, women's shelters, the populations of which are primarily children, are a unique opportunity to provide children with counseling and other therapeutic services, which are not routinely in place (Magen, et al., 2000).

Studies have found that caseworker perception of domestic violence plays a large role in the services rendered to family members affected by the violence (Yoshihama & Mills, 2003; Postmus & Ortega, 2005). Consequently, understanding caseworker attitudes towards domestic violence is important to developing sensitive and effective interventions that protect both women and children. For example, Humphreys (1999) found that some child caseworkers believe that their guiding mandate is the best interests of the child and do not always perceive themselves to be advocates for battered women. In other cases, studies show that some child welfare workers blame the mother for failing to protect her child by remaining in the abusive household or maintaining a relationship with her batterer (Petrucci & Mills, 2002; Saunders & Anderson, 2000). To the contrary, evidence suggests that many women stay in abusive relationships in order to protect their children from potential abuse from the batterer (Schechter, & Edleson, n.d.).

Maxwell (2000) argued that corollary institutions serving battered women and their children, such as the courts and welfare programs, also need improved coordination. Women receiving welfare assistance may find that they are given competing advice from welfare and child welfare officials about, for instance, work requirements that conflict with the responsibilities a mother has to keeping

her children safe at home (Pearce, 1999). More research is needed to explore the interaction between related services that support battered women, including substance abuse services, social welfare programs, and the criminal and civil court systems, so that the provision of services is not in conflict.

Implications for Domestic Violence and Child Welfare Practice

Numerous studies point to the efficacy of educating child welfare caseworkers on domestic violence. Education and training programs have been found to be successful in changing child caseworker attitudes and in using assessments and interventions in domestic violence situations that do not further victimize women (Postmus & Ortega, 2005; Magen, et al., 2000; Saunders & Anderson, 2000). Petrucci & Mills (2002) study found that although most states have some procedures in place that integrate questions about domestic violence into child abuse risk assessment forms, most standardized instruments that screen for domestic violence do so only insofar as the violence affects the child. Additionally, battered women's advocacy organizations might benefit from training that highlights the need for child-centered assessments and interventions that do not ignore the specific effects of domestic violence on children.

Battered women may benefit from culturally-relevant education programs that address both the effects of family violence on children and resource availability (Schechter & Edleson, n.d.). Parenting classes, a standard part of family service plans instituted by child protection agencies, can assist women in developing a clear safety plan in a way that empowers women to direct their own choices. At the same time, family service plans should not ignore the batterer's responsibility to the plan if safe and appropriate (Schechter & Edleson, n.d.). Some battered women may be coping with feelings of guilt as a result of her perceived failure to protect her child from violence or from her child's removal into the foster care system. Other women, who feel powerless against her abuser, may see her role as a mother as one area over which she still has some control and pride. Effective parenting classes should be sensitive to such considerations by using a strengths-based perspective that is empowering to women.

To supplement caseworker training, implementing concrete protocols can help mitigate the effects of workers' own feelings about domestic violence on child abuse assessment and intervention. Other institutional changes include hiring domestic violence specialists at child welfare agencies (Saunders & Anderson, 2000). Additional promising practices include family group

conferencing, an intervention that brings together all members of the family affected by the abuse who collaboratively construct a plan to stop the maltreatment and keep all family members safe (Pennell & Burford, 2000). Finally, additional research is needed to explore the differential effects of race, culture, and ethnicity on child welfare assessments of family violence so that interventions and services are culturally competent.

Conclusion

Battered mothers negotiate the dual role of primary caretaker to their children and abuse victim, balancing at the fulcrum of two social service systems: family violence and child protection. New policy and practice methods that marry the efforts of child advocates and battered women's advocates support the idea that protecting women and children is not a zero-sum affair. Rather, it requires coordination on the part of multiple social service systems and a reframing of historically held philosophies that privilege the safety of either women or children over the other. Child welfare training should be sensitive to the complicated position of battered women, while the battered women's movement should resist considering children as secondary victims of domestic violence. Social workers at the confluence of these systems are in a unique position to assist battered women in creating a safety plan that addresses the woman's needs as well as the needs of her children. Through collaboration, women-centered and child-centered approaches can minimize the bias of the "failure to protect" clauses against mothers, hold batterers accountable, and help domestic violence survivors keep their children safe.

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ELIZABETH S. BROWN graduated from CUSSW in 2006 with a master's degree in social work specializing in children, youth, and family policy. While attending CUSSW, she served on the editorial board of the *Journal* for two years. She holds a bachelor's degree in Rhetoric from the University of California at Berkeley. Her email address is elizsbrown@gmail.com.

ELIZABETH S. BROWN