
In the Best Interests of Children and Mothers

A Proposed Child Welfare Response to Violence Against Women

Ontario Association of Interval and Transition Houses (OAITH)
March 2003

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This work is dedicated to children who are exposed to woman abuse, and to their mothers who strive to find a place of freedom from violence and protection for their children. It is particularly dedicated to those women and children who have been murdered by violent partners and fathers, often when they have attempted to escape.

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In the Best Interests of Children and Mothers: A Proposed Child Welfare Response to Violence Against Women

The following proposal is an outline for a differential response within child welfare practice where woman abuse is identified. In particular, this Response Model proposes a specific approach by child welfare in response to reports of child witnessing of woman abuse under the “emotional harm” section of the *Child and Family Services Act*. Although there are some particular suggested practices highlighted in the Model, much of the detailed development of practice, coordination and tools for implementation will require further development between the violence against women and child welfare sectors, in cooperation with local community partners who have expertise in specific responses to women from marginalized communities.

Herstory of protecting children in the violence against women sector

Over the last 25 to 30 years, women have designed and evolved a system of shelters, rape crisis centres, women’s centres and other community-based services and organizations to respond to violence against women.

This creation of feminist, woman-centred services rose out of the analysis that women as a group experience inequality and disadvantage as compared to men in society and that violence against women is both a mechanism and a manifestation of the power and control men continue to hold over women and their children. Women’s advocates recognized, therefore, that individual women are not to blame for the abusive actions and attitudes of their partners, and that abusers must be held solely responsible for their violence.

The creation of women’s services also arose out of the failure of mainstream and traditional support systems to acknowledge the extent and impact of violence experienced by women, the inequality and disadvantage of women as a group and, often, the reinforcement of these inequalities by traditional support systems themselves.

Woman-centred approach

As women have built their own services, they have also attempted to adopt a new approach to service provision that seeks to include women and children themselves in a shared, collaborative work to respond to the violence and to end it. In effect, this approach sees the woman as the expert on her own life.

The feminist approach requires that support workers start from the woman and child’s perspectives and goals and build response from there. Also critical is the identification and removal of barriers that impede achievement of these goals, increase the impact of violence, or limit women’s access to safety and equality. **In this approach, therefore, advocacy is a critical part of collaborative work with women and children.** It requires that support workers attempt to change not the woman and her children, but the context and material conditions in which she experiences the violence.

As a result of taking a woman-centred approach, woman abuse services have expanded their analysis and mandate over the years to respond to emerging needs. From meagre beginnings and little financial support, shelter advocates have built an impressive network of services for women and children and have been largely, and in some cases exclusively, responsible for the community-wide awareness of violence against women—as well as its impacts on children.

Leadership of women’s services

Women’s anti-violence advocates have promoted protocols and supports within all major community systems from police services, to social assistance policies to hospital protocols, to name only a sample. In addition, it is as a result of the public and professional education efforts of feminist anti-violence advocates that community systems can now boast of trained professionals and staff within their services.

Virtually all significant progress on both analysis of and response to violence against women in the past 25 years can be traced back to the work of grassroots women's advocates and woman abuse survivors, especially women from independent, community-based shelters and rape crisis centres.

Mothers as a disadvantaged group

One of the first emerging issues to be recognized by women's shelter advocates and survivors was the need to respond to the unique needs of children exposed to woman abuse and the needs of women as mothers. Inherent in this recognition is the acknowledgement that women who are mothers are further disadvantaged in society, in particular with regard to the impacts of poverty and lack of community supports such as childcare.

Such material disadvantages are often exacerbated, reinforced or justified by unrealistic social attitudes towards women as mothers, such as expectations of maternal perfection and self-sacrifice. As a result of sexist stereotyping and

role definitions in the family, women remain overwhelmingly the primary caregivers of children in Canada. As the primary caregivers, they are also often blamed for negative experiences and impacts on their children, regardless of how these impacts occur.

Advocating for both children and mothers

Woman abuse services, therefore, have created within their programs components of support and advocacy for both child witnesses individually, and for women as their mothers. Through a virtually unique residential experience within abused women's shelters during the past 15-20 years, women's advocates have gained a breadth of experience and expertise about the intersection of violence against women and child exposure to violence that is unparalleled in any other community system. Recognition and support of this experience and expertise is critical to protecting children who are exposed to violence against their mothers. We must take advantage of and build on this expertise.

Why violence against women must be a critical focus of any response to 'family' or 'domestic' violence

A feminist approach not only recognizes the inequality of women (and mothers) as a group, but also acknowledges additional power imbalances among women that compound the impact of violence against women and child exposure to violence.

The assigning of the role of primary caregiver of children to women extends beyond culturally constructed notions of motherhood and consequent mother blaming. Women's primary responsibility for the care of children also has a dramatic impact on women's accessibility to economic independence, education and training, adequate housing and a host of other advantages in the community.

Disparity of access to these advantages directly impacts on women's ability to escape from abusive situations.

Women's poverty and marginalization

First and foremost among barriers affecting

women and children leaving abusive situations is the growing level of poverty among women and children—and women as mothers. According to Campaign 2000, poverty among children in Canada has increased 21% since 1989 and one in six children now live in poverty.¹ They are poor largely because their mothers are poor.

Statistics Canada reports that women still earn much less than men. In 1997, for example, women earned an average of just over \$21,000 per year, or 64% of earnings by men.² Mothers who must leave an abusive male partner face almost double the rates of poverty of fathers raising children alone and over four times the rate of poverty of two-parent families.³

Aboriginal women, women of colour, disabled women, immigrant and refugee women and young women experience additional inequalities and barriers to escape that intensify the impact of violence on themselves and their children. Furthermore, because they are disadvantaged by discrimination, they experience higher levels of

the poverty that traps women and children in abusive relationships. Women are also disadvantaged by their sexuality and by their geographic location (eg. Northern and remote or rural communities).

Statistics clearly support the extent of the disparity of advantage among women. In 1995, for example, the poverty rate for working age women with a disability in Canada was twice that of women without a disability.⁴ In 1996, 43% of Aboriginal women over age 15 had incomes below the poverty line.

Women of colour are also twice as likely as other women to have low incomes and immigrant women also earn less for their work than other women, despite having higher educational qualifications. Almost 3 in 10 immigrant women

in Canada live below the poverty line.⁵

Intersections of violence and poverty

The disproportionate levels of poverty between women and men, and among groups of women, create severe barriers to escape from violence, especially for mothers who are largely the primary caregivers of children, both inside and outside their relationships with men.

This disparity of impact and vulnerability to violence makes it critical that we specifically address violence against **women** as our primary concern in framing a differential response to abuse within child welfare, as opposed to a gender-neutral notion that assumes parental conflict is “mutual” or makes violence against women invisible in definitions of “family” or “domestic” violence.

History of responding to woman abuse in child welfare

The history and mandate of child welfare would lead one to expect that this system would have been one of the first to recognize the impacts of woman abuse on children and to adopt differential responses. Yet this has not been so. While women are represented in very large numbers in both frontline staff and client groups within child welfare, the material conditions of women both as compared to men and among women themselves, have not been well addressed.

Need for structural analysis

Feminist critiques of child welfare history and practice have, in fact, highlighted the evolution of a child welfare approach that had not yet sufficiently incorporated responses to the social, political and economic inequality of women and children into its mission and practice.

While progressive elements and dedicated individuals exist within child welfare structures, as in all community systems, an analysis of social, political and economic inequality and power imbalances has not significantly informed the overall creation of child welfare policy, the training of workers or the interaction with women and children in daily practice.

Woman abuse and child witness advocates have

long worked for recognition in all community systems of the impacts of woman abuse on children and women as mothers. Yet it is only in the last several years that child welfare systems—with pressure from both within and outside—have begun to take the specific issue of child exposure to adult violence more seriously and to begin training frontline staff on a basic understanding of woman abuse. (For a brief chronology of women’s shelter and child welfare involvement in violence against women issues in Ontario, see Appendix A.)

Legislative change prompts new tools

Change has also been accelerated as a result of amendments to the *Child and Family Services Act (CFSA)*, proclaimed into law in Ontario in March of 2000, along with the creation of supporting risk assessment and eligibility criteria tools redesigned to include family violence as an indicator of risk and eligibility for protection.

Amendments to the child welfare mandate regarding “emotional harm” as defined in Section 37(2)(f) and (f1) of the *CFSA*, as well as directives and protocols within the community to report “domestic violence” have been responsible for enormous increases in child welfare reports regarding child exposure to woman abuse since

the passage of the legislation.

Stunning increase in reports

A 2002 comparison of data from both the 1993 and 1998 Ontario incidence studies of reported child abuse and neglect in Ontario found a stunning 870% increase in substantiated emotional maltreatment reports since 1993, largely as a result of exposure to domestic violence.⁶ The researchers noted: "...the dramatic increase in domestic violence investigations requires the development of services and inter-agency protocols designed to meet the needs of

these children without further compromising the victimized parent."⁷

Since passage of the *CFSA* amendments, a two-year process of joint basic training of child welfare and woman abuse advocates has occurred in which many, but not all, child welfare frontline staff have been provided with opportunities to receive education on violence against women and its impacts on children. The Ministry of Community, Family and Children's Services also requires that all violence against women and child welfare agencies engage in a process of community collaboration to create standard protocols, or CAS/VAW Collaboration Agreements, for interaction between the sectors.

OAITH work on the intersection of woman abuse and child welfare

OAITH has been working on issues arising from the new child welfare legislation and practice on "emotional harm," since before the legislation was passed. This work was driven by numerous concerns about impacts on women and children as shelters were asked to report women staying in their residences to child welfare. In particular, shelters were concerned about the chilling effect of reporting all mothers seeking shelter to a child protection agency and the potential that such reports could result in fewer women calling shelters for support.

Clarification of MCFCS policy

OAITH meetings with the Minister and officials within the Ministry of Community, Family and Children's Services (MCFCS) led to a Ministry directive for all VAW and CAS agencies clarifying that admission to a women's shelter did **not** require automatic reporting to child welfare. While this clarification reduced reports by shelters, reports by police and other community professionals continue to occur at increasing rates and OAITH shelter advocates continue to fear the long-term impacts of these reports.

To further respond to ongoing concerns being raised about the impact of legislative change and new child welfare practices, OAITH organized meetings with member and non-member shelters in the spring of 2000 to discuss shelter experiences with local child welfare agencies.

Some common themes and concerns

A canvass of shelters regarding their concerns elicited a number of common themes that warranted action:

- ❑ Shelters reported a variety of relationships between child welfare and violence against women sector agencies ranging from very positive to very challenging.
- ❑ Shelters also reported inconsistency of interpretation of the legislation as it applied to child exposure to violence, both between agencies and within agencies—and said this inconsistency was occurring in both child welfare and violence against women services.
- ❑ Shelter workers felt that child welfare workers often did not understand the complex nature of woman abuse dynamics.
- ❑ Shelters asserted that this lack of understanding was resulting in blaming of mothers for their victimization and the exposure of their children to violence, coupled with lack of accountability for the abusers. They expressed concern about the requirements placed on abused mothers to protect their children while supports and services to assist women and children were being continually eroded in Ontario.

- ❑ Shelters reported increases in the number of women and children being automatically reported to child welfare by police and identified serious issues with police and child welfare threatening abused women with child apprehension.

OAITH initiatives build on consultations

Out of the first meetings came two initiatives: a project to track some of the impacts of child welfare practices with women using shelters; and a project to develop a proposal for a model of child welfare response to woman abuse based on the unique and long-standing expertise and experience of shelter workers in protecting both women and child witnesses of violence.

In June of 2001, OAITH held a follow-up meeting with members to discuss these projects in more depth. OAITH provided information to members outlining, from a feminist perspective, the history and values on which current child welfare practice is founded in Canada.

We also presented research of some alternative practices in other jurisdictions, in particular the work of women’s advocates and child protection professionals in the United States. Lonna Davis, a

former shelter advocate who had helped to create a differential child welfare response to violence against women in Massachusetts, presented some of the experiences and arguments for including women’s advocates within child welfare response where violence against women is identified. Representatives of both The Ontario Association of Children’s Aid Societies (OACAS) and MCFCS attended the speakers’ presentations.

From discussions at this meeting and information from other jurisdictions, OAITH developed draft tracking tools and a first draft Response Model. The draft tracking tools and Response Model were then presented to OAITH members for further development. The tracking tools were introduced to participating shelters in January 2002 for a one-year period. A revised draft Response Model was provided for further review to meetings of shelters both in the spring of 2002 and in the fall of 2002 for final review.

OAITH has also participated with OACAS in a series of meetings to discuss sector interaction and training, and has initiated meetings with the Association to request a dialogue for development of a differential response. (For a brief chronology of OAITH work on a differential response to child exposure, see Appendix B.)

Information from current work in the United States

For the purposes of this proposal, OAITH scanned the literature regarding programs and projects in jurisdictions within the United States, where some efforts to respond to woman abuse in child welfare cases have been ongoing for the past five to ten years. (A list of some resources regarding work within child protection services in the U.S. is attached in Appendix C.)

Two innovative approaches

Two approaches OAITH has reviewed appear to bear similarities to the model outlined in this proposal: (1) The domestic violence “specialist” program within the Massachusetts Department of Social Services, which was initiated by child welfare and women’s anti-violence advocates in 1990, and (2) pilot programs established in 1995 by the Oregon State Office for Services to Children and Families, which places woman abuse advocates from women’s services, such as

shelters, into child welfare agencies to develop and assist child welfare responses.

In the Massachusetts program, full-time women’s advocates have been hired within child welfare to work with caseworkers primarily to provide extensive, ongoing training and support as well as technical assistance to individual case managers on issues of woman abuse in cases of child maltreatment. There is currently a network of these ‘specialists’ working across the State. In Oregon, women’s anti-violence advocates are contracted from local women’s shelter and community women’s anti-violence services to provide this training and assistance.

There are also a number of examples of specific services connected to child welfare (such as juvenile court or services intersecting with probation offices) where programs or protocols have been established to respond specifically to

‘domestic violence’ in cases of child abuse. In addition, there are a number of examples of service coordination projects such as case review teams where child protection workers can seek guidance and support from other community advocates regarding specific cases.

U.S. models initiated by child welfare

Most commonly, child welfare services in the U.S. initiated differential training, protocols and program management as a result of high levels of overlap between child maltreatment and violence against the child’s mother by her male partner.

In Oregon, for example, a 1993 annual review of child fatalities found evidence of mothers being abused by male partners in 41% of cases, even before there was any specific focus on screening for woman abuse. In Massachusetts, a similar review identified that in 43% of child fatalities the mother had disclosed abuse.⁸ Reviews of cases in Oregon also found that woman abuse was also a factor prevalent in severe child abuse cases.⁹ In cases with high or lethal levels of child endangerment, child welfare workers may also be at risk. One worker in the Oregon program reported that death threats against staff were unique to ‘domestic violence’ cases.

Work on identifying and responding to woman abuse with child protective services is relatively recent. The literature cautions that there is still much to be examined and evaluated before a definitive approach can claim to provide the best protection for children where woman abuse is present.

Important principles emerging

At the same time, some important principles, themes and practices are emerging from the U.S. experience as critical to protecting both woman abuse survivors and children exposed to violence, and to holding abusers accountable for child exposure to violence. These include:

- Particular caution is needed regarding the implications for reporting child witnessing of abuse against a mother (as distinct from direct child abuse). Most programs in the U.S. focus primarily on cases of direct child maltreatment in

which the child’s mother is also experiencing abuse. Where child exposure to woman abuse alone has been reportable to child protection agencies, services have been overwhelmed with cases. In Minnesota, after a law was introduced to equate child exposure with child abuse, reports increased by 50% to 100% and the law had to be repealed. The influx of cases has children’s and women’s advocates worried that it may lead to ineffective interventions that can put children and women at further risk.

Risk to child varies greatly

The degree of risk to children exposed to woman abuse varies greatly, according to their individual circumstances. According to Dr. Jeffrey Edleson of the Minnesota Center Against Violence and Abuse, University of Minnesota, “Large numbers of children studied show no greater problems than their peers who are not so exposed, but other children exhibit multiple problems at a level thought to require clinical intervention.”¹⁰

After studying the data on degrees of impact experienced by children exposed to woman abuse, Edleson recommends that careful screening is critical to ensure that children who are better referred to women’s and children’s community services are identified early and screened out of child welfare. Edleson further states: “(The) data argue strongly that we should not automatically define a child’s exposure to adult domestic violence as a form of child maltreatment.”¹¹

- Where cases do enter the child welfare system, response is not just an issue of safety, but one of providing supports and stability, to promoting the child’s well-being and to preventing separation of children from their abused mothers.
- Investigations, assessment and development of service plans for children exposed to violence must focus on methods that do not further isolate or victimize a mother who is in danger. For example, holding a mother responsible for the

child's exposure to violence or threatening to remove a child disempowers the mother, and does not support her efforts to escape the danger or hold the abuser responsible for his violence and its impact on the child.

- ❑ Successful programs are marked by high levels of understanding of woman abuse and motivation to change practices. Mere awareness and training on basic concepts, or even the existence of protocols is not enough.

In the Oregon program, for example, managers reported: "...awareness alone is not sufficient to change how (the child protection service) works with these families...on-site advocates were able to work with caseworkers to change how cases were being handled. By working on a case-by-case basis, the advocates could translate the training into changes in practice."¹²

Advocates critical to response

One important support provided by advocates was the ability to help child welfare professionals understand woman abuse as an issue of safety for both children and their mothers and not as a concern separate from their work to protect children.

In Massachusetts, for example, "team members learned from working together that children could be protected through safety planning with mothers. An open examination of conflicting approaches and differing philosophies built trust. This trust helped to dispel myths about the motives of the battered woman's advocate. She was

finally accepted as being concerned about mothers and their children, not simply mothers."¹³

- ❑ Workers need tools and resources to be safe and effective when they intervene in cases where there is woman abuse. In particular, workers need screening and assessment tools and safety planning protocols for both women and children and child welfare workers themselves. In particular, an appropriate screening mechanism that can assess levels of risk to child witnesses of exposure to abuse is a critical tool needed to identify those children at greatest risk and to refer others out of the child welfare caseload.
- ❑ Since child welfare is largely entering unfamiliar territory in response to woman abuse, it cannot make appropriate or effective change without major and ongoing collaboration with woman abuse shelters and women's community services.

Researchers reviewing various differential approaches in the United States have concluded: "To change policy and case practice around domestic violence safely and effectively, child protection services must consult with and involve battered women's advocates and other experts from the domestic violence community. Without the input of domestic violence specialists, child protection services are likely to make serious and potentially dangerous mistakes. This input must be sought despite the history of hostility and antagonism between child protection workers and domestic violence advocates in many communities."¹⁴

The Inquest into the death of Gillian Hadley

In June of 2000, Gillian Hadley was murdered by her estranged husband as horrified neighbours tried to rescue her and her baby. Her murder was eerily similar to the death of Arlene May, murdered in March of 1996 by her ex-boyfriend, who had also threatened her children. An inquest into the killing of Arlene May resulted in 213 recommendations for change, one of which was a recommendation for joint training of child welfare

and violence against women workers.

Jurors create a blueprint for change

As a result of Gillian Hadley's murder two years after the first inquest had theoretically resulted in needed changes, the Coroner of Ontario called for a second inquest into her death. The Hadley

inquest jury offered another 58 recommendations for change and called for the Government of Ontario to take primary responsibility for their implementation. In the opening statement to their recommendations, jurors said:

“We the jury offer our sincere condolences to the families and friends of Gillian and Ralph Hadley and our admiration to those neighbors who came to help. Despite the tragic end to the situation, we thank you.

The deaths of Gillian and Ralph will have a particularly distressing effect on their children and the additional publicity generated by this inquest will add to their grief. We are confident that the implementation of our recommendations will more than compensate for this distress by preventing similar tragedies in the future.

Domestic Violence is a crime that is different from other crimes in two ways:

- ❑ *The likelihood of repeat violence is common and at most times predictable,*
- ❑ *The victim is known in advance.*

With this knowledge society has an opportunity to use its expertise, resources and updated technologies to prevent this type of crime with the ultimate goal of a safer environment and the saving of lives.

This jury hopes that our recommendations will help achieve these goals.”

The Gillian Hadley inquest examined a breadth of issues affecting Gillian’s ability to escape woman abuse and the impact of the abuse on her children.

Context of a differential response to woman abuse within child welfare

Any practice model exists within a context and that context must be clearly acknowledged and addressed for any successful collaboration between sectors to occur. These elements of the context were highlighted repeatedly in our discussions with OAITH members during the

The jury recognized the need for the broad preventive approaches women’s shelter advocates had been promoting, including the need for increased financial support for women, housing, independent women’s advocacy, adequate funding for shelters, reforms in the criminal justice system and supports for children.

Included in their list of recommendations was one, suggested by OAITH, requesting that OAITH, OACAS and MCFCS together develop a specific response within child welfare to woman abuse and child exposure to violence. It reads:

40. *“We recommend that the Ontario Association of Interval and Transition Houses (OAITH) and Ontario Association of Children’s Aid Societies (OACAS), in collaboration with the Ministry of Community and Social Services develop a specific response within child protection services across the province to child welfare reports and cases in which child exposure to domestic violence has been identified; and further:*

- ❑ *That the Ministry of Community and Social Services ensure that appropriate and adequate funding is allocated to both the violence against women sector and the child welfare sector for training, implementation and ongoing operation of the specific response in cases of domestic violence.”*

This work by OAITH members on a proposed Response Model will form the foundation of our discussions with both OACAS and MCFCS on the need for a differential response. In April 2003, the Coroner is expected to report on progress made on implementation of the jury’s recommendations from the Hadley inquest.

development of our proposed model:

- ❑ The two systems that would have to interact in order to collaborate on a child welfare response to woman abuse have very different histories, philosophical

foundations, mandates and structures, as has been partly outlined above.

- The child welfare system has a **legislated** mandate, which both governs the work of child welfare and its relationship with the community and confers on the child welfare system powers and responsibilities that do not exist in the violence against women sector. The legislated mandate of child welfare results in an imbalance of power between the two systems that influences their interrelationships and ability to control outcomes; that is to say, child welfare has greater power to control the relationship and the roles/ outcomes within the violence against women sector and this puts the VAW sector at a disadvantage.
- Funding resources between the sectors are vastly different. A legislated mandate provides child welfare with increased ability to pressure government for resources, unlike the VAW sector, which has no such ability and remains seriously under funded, and even threatened as cuts and restructuring by the current government continue. The resources available to the two sectors are seriously out of balance. For example, in 1995, the Government of Ontario implemented a 5% cut to core budgets within all women's shelters in the province. It has never been restored and core funding has been frozen while costs—and demands for service—continue to rise.

According to the June 17, 2002 Ontario budget documents, however, allocations from the Government of Ontario for child abuse and neglect have increased 139% since 1995 to respond to the rising caseloads of child welfare. Between 1998/99 and 2000/2001, child welfare

expenditures in Ontario went from \$408.3 million to \$749.9 million, an increase of almost 85% in two fiscal years.¹⁵ Because VAW shelters form the primary referral system for child welfare agencies in cases arising from reports of 'domestic violence', the continuing funding imbalance between the sectors is a serious concern.

- While there is an imbalance of power and resources that is unfavourable to the violence against women sector, there is still at this time a deficit of analysis and expertise within child welfare with regard to appropriate practice and response to child exposure to woman abuse. Although initial basic training of child welfare workers has been underway, there are significant numbers of child welfare staff and supervisors who have not yet received training in appropriate response to woman abuse reports.

Initial training was mandatory, but the mandatory phase has now ended and training is provided on request only. There are no guarantees, therefore, that all child welfare staff will, in fact, be trained. The 25-year-long experience of the violence against women sector, therefore, will continue to be a critical assistance in creating safe and effective responses within child welfare systems to children exposed to violence.

- The amendments to the legislation, the development of a risk assessment and eligibility spectrum including family violence, as well as the current protocol development process will increase interaction between the two systems and the points at which the above imbalances come into play.

The Woman Abuse Coordination Model—Introduction

The following is an outline of a proposed practice model for response by child welfare agencies to child exposure to adult violence against women. The model encompasses the many contributions of counsellor advocates for both women and children within women’s shelters and our other partners across Ontario.

Guiding Principles of the Model

We would propose some guiding principles for a differential response model:

1. The safety and well-being of child witnesses of woman abuse is inextricably linked to the safety and well-being of their mothers and this must be the first consideration in evaluating any intervention.
2. Abusive partners must be held solely accountable for their actions and for the negative impacts of exposing children to their violence.
3. A feminist, anti-racist, anti-oppression perspective of practice is integral to the safety of both child witnesses and women who experience violence. This approach recognizes that women and children’s lives are constructed within a context of disadvantage both for women and children as a whole, women as mothers, and among specific groups of women and children. It also recognizes that such a perspective cannot be achieved unless specific communities of women participate in all processes from early stages of development.
4. No one agency can accomplish these goals.
5. Accurate screening and assessment of violence against women and appropriate, effective, non-blaming service provision to both child witnesses and their mothers can decrease risk and minimize the need for intrusive measures such as apprehension of children, supervision orders or other intrusive and non-supportive interventions. This should be a key goal.
6. Any model developed must have a specific response for First Nations women and children, which reflects and respects Aboriginal practices. Such a model would need to be developed by First Nations violence against women advocates.

Elements of the Woman Abuse Coordination Model

There are two main elements to the suggested approach:

1. The development of a support, education and monitoring program to coordinate a frontline differential response within child welfare practice with respect to violence against women.
2. The creation of a differential frontline staff response within child welfare specific to the intersection of violence against women with child abuse or child exposure to violence, including differential policy, procedures and practice to guide both frontline child welfare staff and their supervisors.

Development of a support and monitoring program to coordinate a child welfare differential response to violence against women

There are a number of mechanisms included in the coordination, education and monitoring aspect of the proposed Woman Abuse Coordination Model.

1. Introduction of a Woman Abuse Coordinator to enhance frontline child welfare practices

The Woman Abuse Coordinator would be sub-contracted, or seconded from the community-based violence against women sector to work with child welfare supervisory and frontline staff in implementing and monitoring the differential practice. The position would be recognized as equivalent to a supervisory level position within child welfare. The Woman Abuse Coordinator would be hired, trained and supervised, however, by a women's shelter or another women's community-based woman abuse service, where no shelter exists. Supervision of the Coordinator's work would be the primary responsibility of the shelter or women's service, but would include coordination between the supervisor and the supervisory staff within the child welfare service.

The introduction of a Woman Abuse Coordinator into child welfare practice is a proactive and preventative measure to ensure ongoing support and technical assistance for child welfare staff in responding to woman abuse and child witnessing of violence. The Coordinator brings critical expertise in the flexible and innovative approaches developed within women's community-based services, building from the experiences of women and child witnesses and the context of the disadvantages experienced by women as a group and as mothers with the community. The Coordinator would work as part of a team with frontline child welfare workers and community child witness and women's advocates involved with woman abuse cases.

2. Creating a Community Reference Group

The Reference Group is also a proactive mechanism to ensure positive and effective interventions that fit into overall community efforts to end woman abuse and exposure of children to violence. Group contributors would be identified with the input of both women and children's advocates and child welfare representatives but should include: survivors of woman abuse, children exposed to woman abuse (through periodic focus groups with child witnesses), child witness and women's advocates, representatives of child welfare, representatives reflecting the diversity of the community at least with regard to ethnicity, race, ability, sexuality, language and economic hardship. The purpose of the Reference Group would be to provide support and consultation to the Woman Abuse Coordinator and the differential response program, as well as to ensure accountability to a feminist, anti-racist, anti-oppressive framework responsive and accessible to the diversity of the local community.

3. Creation of a Case Review Team

A Case Review Team would include representatives of woman abuse and child welfare agencies, as well as other parties determined to be relevant to individual case practice. The Team would meet periodically to review specific non-identifying case information to ensure that a differential response is used consistently and appropriately and to examine those situations where changes to the differential child welfare response may be indicated.

The Case Review Team is a reactive aspect of the program intended to examine individual cases with a view to identifying systemic issues and opportunities to improve coordination and response for the benefit of women and children. Review teams have been used, with varying degrees of success, to examine criminal justice system response to violence against women and the best

practices of more successful efforts in this area, or within similar projects in other jurisdictions, should be examined before the team is assembled.

The Woman Abuse Coordinator Role

The role of the Woman Abuse Coordinator would be a difficult one requiring skills of diplomacy, analysis, advocacy and practical assistance. This role would at first be fluid, changing over time from establishment of new practice within child welfare to ongoing support and monitoring and introduction of improvements to response as needed. It is particularly important that the Woman Abuse Coordinator operate from a feminist, anti-racist, anti-oppression, culturally sensitive perspective of practice that can support child welfare workers to enhance and broaden an integrated knowledge of violence against women and its impacts on children. In particular, the Coordinator must be able to assist child welfare workers to integrate the safety and well-being of children exposed to violence with the safety and well-being of their mothers.

This model assumes and requires that a strong, community-based feminist women's advocate support system is in place to ensure that the work maintains a feminist, anti-racist, anti-oppressive, culturally sensitive perspective, and that the Coordinator does not become isolated in this challenging work.

Goals of the Woman Abuse Coordination Program

1. Provide motivation and technical assistance to the child welfare agency as it faces the new challenge of addressing woman abuse within its caseload.
2. Provide motivation, support and assistance to individual child welfare supervisors and frontline staff who are working with women experiencing violence within their child welfare caseload.
3. Promote more effective use of the violence against women sector by child welfare frontline staff in responding to abused women whose children are involved with the child welfare system.
4. Promote and build links and coordination within the local community to ensure that diverse perspectives are incorporated into differential frontline responses as well as any ongoing examination or review of the program.
5. Promote and develop advocacy role of child welfare in supporting children and women who experience woman abuse.

Woman Abuse Coordinator Job Description

1. ***Establish a Differential Response to Case Files where Woman Abuse is Identified***
 - a. Evaluate current practices, policies, procedures and knowledge base of child welfare agency with regard to files in which woman abuse has been identified in consultation with management, supervisory and frontline levels within child welfare as well as with community-based woman abuse and children's advocates.
 - b. Create internal procedures for the child welfare agency to respond to the identification of woman abuse in individual files. These would include the development of practices for creation of the Plan of Service for children, including for protection of their mothers, as well as development of a Plan of Intervention with the abusive partner. In other words, a separation of plans of service for child witnesses and their mothers, and plans for accountability by the abuser.

- c. Create tools for frontline and supervisory child welfare staff to use to process case files identified for woman abuse: for example, screening and assessment tools for child witnesses and their mothers to determine which cases are appropriate for ongoing intervention, safety planning tools, checklists for ensuring all steps are taken to protect child witnesses and their mothers, confidentiality policies for the file internally and externally to protect woman's information, training and information resources for frontline and supervisory staff of child welfare. These tools should initially be created in collaboration with community-based woman abuse advocates and advocates for child witnesses of violence.
- d. Ensure that the differential response addresses the compounding needs and issues facing individual women and child witnesses, and includes an advocacy response to issues affecting the ability of women and children to leave abusive situations, including issues such as housing, childcare, financial supports, education and training, health and access to community services, in addition to barriers of culture, religion and community values.
- e. Ensure that the differential response acknowledges and takes into account the potential impact of violence on parenting for women and requires that support mechanisms for women, rather than punitive measures, be implemented. Ensure also that the strategies, coping skills and strengths mothers often use to protect their children from the impacts of violence are recognized and supported within child welfare.
- f. Ensure, in collaboration with community women's advocates with specific expertise, that the differential response acknowledges and respects differences among women and children and community constituencies and responds to families of diverse racial and cultural backgrounds, lifestyles and abilities.

For example, the differential response must recognize the importance of language, religion, impacts of racism, impacts of stress and trauma from countries of origin, diverse perspectives regarding parenting roles, immigration issues, communication needs and so on. The response must also include efforts to provide appropriate practical supports, such as interpretation and translation of materials (such as forms, etc.) into formats and languages of comfort for women and children, as well as clear language within documents to explain legal requirements and systemic practices within child welfare.

- g. Promote the involvement of community-based woman abuse advocates and respect for their expertise on issues of violence against women within child welfare management and supervisory levels.
- h. Ensure that all child welfare staff members are aware of the Woman Abuse Coordinator program and the support and assistance available to frontline child welfare staff from the Coordinator and other woman abuse professionals in the community.
- i. Develop, in collaboration with child welfare workers and woman abuse advocates, the tools to gather data and statistics to evaluate the differential response and its impact on women and children exposed to violence.

2. Motivate Frontline Child Welfare Staff to Seek Assistance from the Woman Abuse Coordinator

- a. Conduct in-service training of frontline and supervisory staff on the support the Woman Abuse Coordination Program can bring to child welfare staff on individual cases where woman abuse is identified.
- b. Provide on-going "check-ins" with frontline and supervisory staff to give support, provide

assistance and build a trust relationship. Initially, the Woman Abuse Coordinator should focus particular attention on Intake staff and offer support and assistance at the first point of contact with abused women and children exposed to woman abuse.

- c. In particular, support child welfare staff with the development and ongoing monitoring of safety plans and risk assessments for women and child witnesses involved with child welfare.

3. *Support Women and Child Witnesses within Child Welfare System*

- a. Ensure that procedures, policies and protocols within the differential response program are followed.
- b. Ensure that women and children exposed to violence are referred to supports outside of the child welfare system, in particular community-based women and children's advocates in shelters and other women's and child witness services addressing woman abuse issues.
- c. Advocate for the woman and her children with frontline child welfare staff during the life of the file, in particular with regard to those issues that affect her safety and independence, such as financial support, housing, child care, legal remedies and ongoing counselling support, if needed.
- d. Advocate for women and children with regard to specific needs relevant to their diverse ethnic and racial backgrounds, religion, languages, ability, sexuality and age.
- e. Consult on an ongoing basis with frontline child advocate staff and women's advocates within shelters and the wider violence against women sector with regard to emerging issues for abused women and child witnesses of violence.
- f. Encourage and monitor consultation processes between frontline child welfare staff and women and children's advocates in the community.

4. *Support Child Welfare Frontline Staff*

- a. Provide technical assistance, support and advice to frontline staff on individual cases where woman abuse has been identified from the development of the investigation plan to the completion of the case. In particular, however, the Woman Abuse Coordination Program should focus support and assistance initially to the Intake staff and their practice to ensure that appropriate screening and effective management is applied from the first point of contact, and further, to ensure that cases better served within women's community-based supports and services do not overwhelm the child welfare system.
- b. Train and educate frontline and supervisory staff on issues of woman abuse and child witnessing of violence, both formally and informally within the child welfare agencies, including provision of information on the tactics abusers use to manipulate professionals and systems as an extension of their control over their partners and children.
- c. Coordinate necessary training from specific community advocates for frontline child welfare workers on issues of the differential impacts of violence against women and their children on diverse and disenfranchised constituencies in the community, for example, racialized women, immigrant and refugee women, women with disabilities and women living in poverty.
- d. Work with community-based woman abuse advocates, child witness advocates and frontline child welfare staff to encourage collaboration and understanding.

5. Monitor and Evaluate the Differential Response

- a. Review files in which woman abuse has been identified to assess whether procedures regarding violence against women are understood and followed and whether Plans of Service and other interventions include response to woman abuse issues, and to identify those areas where practical assistance and support is indicated.
- b. Examine and review individual woman abuse identified files with regard to effectiveness of response to compounding issues affecting women's and children safety and well-being, such as issues of race and ethnicity, religious practices, economic stability, housing issues, as well as issues of age, sexuality and ability.
- c. Gather reaction from women and children, where appropriate, to child welfare practice in the differential response to woman abuse cases. This could mean use of focus groups, anonymous service evaluation tools, individual interviews and so on, where women consent.
- d. Evaluate the tools and resources, protocols, policies and procedures within the child welfare agency in collaboration with child welfare supervisory and management staff, frontline staff and child witness and women's advocates from community-based women's services. Evaluation includes assessments of children and women's safety and the accountability of abusive partners, adherence to anti-racist, anti-oppression principles and women's equality rights.
- e. Monitor family court processes in which child welfare is involved regarding presentation of evidence before the court on issues of woman abuse and protection for child witnesses from the abuser, as well as recommendations regarding orders of the court for child protection.
- f. Liaise with community women's and child witness advocates regarding their experience with and reaction to the differential response.
- g. Gather data and statistics to evaluate the differential response within the child welfare agency.

6. Build Relationships with Community

- a. Establish the Reference Group of survivors, child witness and women's advocates to consult and to seek assistance, as well as to ensure accountability to a feminist, anti-racist, anti-oppressive framework for the Coordinator's work.
- b. Assist in consultation and collaboration between frontline child welfare staff and child witness/women's advocates in the community on individual cases using established and agreed upon VAW /CAS protocols.
- c. Provide information and training to community systems regarding the differential response and its goal of enhancing protection for both child witnesses and women, for example, with police and courts, schools, hospitals and community services, where possible.
- d. Attend community coordinating groups working on issues of violence against women and children.
- e. Assist with the Case Review Team problem-solving meetings regarding individual cases and work collaboratively to take forward opportunities identified for improvements to the differential response.
- f. Participate in community functions and events that will provide proactive relationship and trust

building with specific communities that may mistrust or fear child welfare involvement, eg. Young women, women from diverse cultural backgrounds.

Creation of a Frontline Differential Response within Child Welfare

The differential response of child welfare frontline practice begins at the moment child welfare has identified that woman abuse is present, or suspected, in both child abuse and child witnessing cases reported from any community source.

Goals of the differential response

1. To recognize that protection for women as the primary caregivers of children is essential to the welfare and protection of children exposed to violence.
2. To enhance protection and well-being for children exposed to violence by enhancing safety and autonomy for women experiencing woman abuse, and to recognize that advocacy for both women and children within all community systems is necessary for the well-being of children exposed to violence against their mothers.
3. To ensure that abusive partners are held accountable for child witnessing of the abuse, not women who experience woman abuse.
4. To recognize that compounding issues of systemic and historical inequalities within the community based on race, ethnic origin, economic hardship, language, ability, sexuality and age result in differential impacts of violence on specific communities of women and their children.
5. To ensure that frontline practice by child welfare staff addresses these compounding issues with specific practices, policies and procedures to increase access and equality of response and to promote respect for differences within the community.
6. To create or enhance collaboration between child welfare and violence against women services.
7. To prevent mother blaming, unnecessary apprehension of children, or other intrusive and non-supportive interventions with women experiencing violence and child witnesses. “Blaming a battered mother for being abused, for not leaving the domestic violence perpetrator, or for not stopping his violence is simply counterproductive. The battered woman cannot change or stop the perpetrator’s violence by herself. If she does not have adequate support, resources and protection, leaving him may simply make it worse for her children. The battered woman and her children need the community’s help.”¹⁶
8. To ensure that the principles of the overall model are entrenched in frontline practices.

Intake Worker Role—Some practice highlights

Entry point: A report is made to child welfare of child witnessing of woman abuse from any source. The file is flagged for a differential response stream using current legislation and eligibility spectrum tools as well as screening tools specifically designed by the Woman Abuse Coordinator Program for those cases indicating presence of woman abuse. The Woman Abuse Coordination Program should initially be particularly focussed on the Intake level to provide technical assistance at this entry point. Some further practice guidelines would include:

1. Ensure that safety-planning mechanisms are in place for women and child witnesses from the point of the first contact, both on the phone and in person.

2. Conduct interview with the mother, including gathering information about history of abuse against mother using screening mechanisms created within the differential response as above. In particular, ensure that any conversation with the woman or child witnesses is not conducted in the presence of the abusive partner and that no information from the interviews is shared with the abusive partner. The intake worker should consult with the Woman Abuse Coordinator or community-based child witness and women's advocates with regard to the investigation where woman abuse is identified in the report or in the course of interviewing the woman.

Offer the woman the option of having a support person or advocate of her choice present during interviews. Provide additional supports to allow the woman to engage in interviews fully—for example childcare and transportation, translation and cultural interpretation services or ASL.

3. Conduct assessment of harm created by the exposure to violence by child witnesses using comprehensive assessment tools created for the differential response program.
4. Conduct, in consultation with the Woman Abuse Coordination Program, a screening of reports of child exposure to ensure those cases better suited to community-based women's services are identified and referred. A large number of child witnesses of abuse do not show elevated levels of problems as a result of exposure to abuse and each child's response to exposure must be carefully examined before agencies determine the appropriate level of intervention. One size does not fit all.
5. Proactively identify the need for, and provide supports for language and cultural interpretation, ASL or other communication supports that respect women's differences and ensure that the woman is consulted about any additional supports and has approved the specific supports chosen. Ensure that all written materials, forms etc. are offered and provided in the woman's language or format of comfort.
6. Provide clear language information to mothers about the mandate and legislation of child welfare and the woman's rights regarding child welfare legislation, as well as family and criminal systems, including availability of Legal Aid (or alternatively to ensure that the woman has a referral to advocates outside of child welfare who can explain the woman's rights in these systems).
7. Conduct risk assessment for children using current risk assessment and eligibility tools. Assessing need for protection must also include, but not be limited to, assessment of factors/options of danger and protection for woman and children, including efforts the woman has made to protect her children in the abusive relationship and appropriateness of responses received, efforts to leave, whether or not they have yet been successful, and a woman's level of awareness regarding the impact of exposure to violence on her children.
8. Conduct woman abuse lethality and risk assessment for woman abuse using tools developed by the Woman Abuse Coordination program. Lethality and risk assessment should also include realistic assessment of the community systemic responses and supports available, e.g. Whether there is sufficient subsidized or affordable housing available to her, what financial supports are in place within the community and what level of advocacy will be required to ensure these supports are obtained, impact or influence with the woman from her cultural community, etc. In other words, lethality assessment should include assessment of **community systems** as well as the woman's individual circumstances and behaviour of her partner.
9. Provide referrals to shelters and community woman abuse and child witnessing support programs, as well as any other resources needed. Facilitate woman's contact with woman abuse services, e.g. Assist her to make the contact, not just provide referral numbers.
10. Provide referral to supports in the community for women that reflect their ethnicity and racial

diversity, their language, ability, age, and sexuality.

11. Provide initial safety planning and arrange, with consent, additional safety planning with community children's and women's advocates.
12. Provide basic information on woman abuse, as developed in conjunction with the Woman Abuse Coordinator and community women's advocates.
13. Based on assessment, 'close' file and make it accessible to Woman Abuse Coordinator for periodic review of information and procedures followed.
14. Compile checklist of completed procedures for inclusion in the file for Woman Abuse Coordinator periodic review.
15. If an ongoing file is opened, it is passed on to a Family/ Support Worker and made accessible to the Woman Abuse Coordinator simultaneously. Case practice/ management for child witnesses and their mothers should be conducted separately from that of the abusive partner, and provide a process wherein caseworkers can work as a team with woman abuse and child witness advocates responding to the family. Women experiencing violence and child witnesses should be assigned their own caseworker separate from the abuser throughout the life of the file.

Family/ Support Worker Role—Some practice highlights

1. Assumes responsibility for case if a file is opened. Informs supervisory level, including the Woman Abuse Coordinator, of case and consults with supervisory level on ongoing basis for decision-making as outlined in current child welfare practice. Further ongoing safety planning and lethality assessment is conducted in consultation with woman abuse advocates in the community and the Woman Abuse Coordinator, if necessary.
2. Develops Plan of Service for child witnesses and their mother as a family unit and a separate Plan of Intervention for the abusive partner. If both the woman and her partner are assigned separate caseworkers, a coordinated approach should be followed. In any case, no interviews are to be conducted with the woman and the abuser together or with child witnesses and the abuser together.

It is important that the woman leads the development of a Plan of Service for child witnesses and is consulted about the issues that are critical from her perspective. With permission from her, consultation with woman abuse advocates with whom she is working, if any, would be an automatic part of this procedure.

3. Provides copies of the Plan of Service for child witnesses and their mother and the Plan of Intervention for the abuser to the Woman Abuse Coordinator for review, discussion, technical support and advice.
4. Coordinates periodic case reviews involving the woman and any other service providers involved in her case to clarify roles and reach consensus with regard to service plans and directions.

Some Plan of Service Guidelines (Women and Child Witnesses)

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| a. The woman must be an integral participant in any proposed service plans since any plans may affect the safety and protection of herself and her children. Services plans for women who have or are experiencing abuse and child | witnesses must build on the efforts and strengths of mothers to protect their children.

Any service plans must be provided in the language or format of comfort to the |
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- woman and similarly, written materials within the plans must also be provided in accessible language and formats.
- b. Child witnesses should be consulted and informed, age appropriately, regarding service plans.
 - c. The woman must be offered the option of having a support person or advocate of her choice present during interviews.
 - d. The woman must be offered appropriate supports for language interpretation, ASL or other communication supports, where indicated during plan development and any ongoing interactions. Ensure interpretation support is acceptable to the woman.
 - e. Child witnesses and their mothers must have *voluntary* access to community-based women’s shelters, child witness and woman’s advocacy programs.
 - f. Consultation, with consent, must be provided with community child witness and women’s advocates working with the woman and/or her children.
 - g. Documentation should be scrutinized to ensure no information is transferred to the abuser through files, eg. Woman’s address or phone number or admission to any woman abuse shelter or counselling programs, or any information regarding the children’s and woman’s safety plans.
 - h. No interviews will be conducted with the woman and the abuser together, or the child witness and the abusive partner together.
 - i. Options for laying of criminal charges, obtaining restraining orders and sole possession of home, etc. should be explored with the woman, in particular if she does not wish to access the resource of woman abuse services. At the same time, however, it is critical that the woman be assured that she also has the right *not* to proceed with legal options. (Women may legitimately fear or know that such proceedings will escalate violence by the abuser. Women may also fear increased abuse towards their children or for example, abduction of the child to another country. Moreover, it is important that child welfare—along with all systems—resist the current fashion to evaluate women’s commitment to change based on their willingness to call police.)
 - j. The woman should be provided with support to access these options, including providing evidentiary or other documentary or testimonial support, if necessary, in legal proceedings such as family or criminal law cases or applications for legal aid with regard to family and criminal law issues.
 - k. Woman should be provided with proactive support and advocacy regarding applications for housing, social assistance, and other community supports, eg. Supportive letters or advocacy strategies. This is especially important if the woman does not choose to access a community women’s resource that could provide this advocacy.
 - l. No referrals should be made to services such as couple counselling, family case conferences, mediation or alternative dispute mechanisms, or any processes where the child witness(es) or woman is required to engage with the abuser.
 - m. The woman must be consulted and informed about the content of the Plan of Intervention for the abusive partner before such a Plan is enforced.
 - n. The woman must be kept informed in advance of any anticipated interactions by child welfare staff with the abuser and, if necessary, be provided with additional safety planning if necessary.
 - o. The woman must be warned of any “risk” behaviours or statements made by the abusive partner in any interactions with child welfare staff.
 - p. Consultation should be held with the Woman Abuse Coordinator at regular points during case management and at

any point at which the Plan of Service is not working as planned or agreed or if the woman challenges the Plan.

- q. Ongoing safety planning and assessment should be conducted with the child witnesses and their mother in consultation with children's and women's advocates as the case progresses in order to incorporate any changes in behaviour of the abuser or anticipated reactions of the abuser to decisions made by the

woman or her children.

- r. Once contacts and service plans are in place within woman abuse services for support of child witnesses and their mother, and intervention has been taken with the abuser, the case is closed unless there are other ongoing child protection issues requiring continuing intervention.
- s. The woman's name is not transferred to any Child Abuse Registry.

Some Plan of Intervention Guidelines (Abusive Partners)

- a. The abusive partner must be held accountable for the woman abuse and for child exposure to the abuse.
- b. A history of criminal activity related to woman abuse, child abuse and other crimes of violence must be sought as soon as possible and the caseworker must determine if there are any "no-contact" orders pertaining to contact between the abuser and his partner from any source, including family and criminal courts.
- c. The abusive partner must be informed of the consequences of continuing woman abuse and the impact of abusive behaviours and attitudes on his children, including criminal and family law interventions.
- d. The abusive partner must be informed of the mandate of child protection and his rights within that system.
- e. The abusive partner must be informed that his partner will be warned of any 'risk' behaviours during interactions with the child. A waiver of confidentiality should be signed similar to those used in partner abuse programs to ensure contact with the woman is possible regarding the abusive partner's supervision requirements related to woman abuse, or any 'risk' behaviours or statements.
- f. The abusive partner must be provided with appropriate supports for language interpretation, ASL or other communication supports, where indicated

during intervention plan development and ongoing interactions. Ensure interpretation support is acceptable to the *woman* to ensure confidentiality of the woman's information and her safety, particularly where her community (geographic, cultural, linguistic, ability, etc.) is small or close knit.

- g. The abusive partner should be first offered voluntary actions to take to prevent further harm to his children and their mother: eg. Leaving the home and her surrounding neighbourhood, entering partner abuse counselling and education program, voluntarily agreeing to a no-contact condition, etc.

Community-based programs to which the abuser is referred should reflect his ethno/ racial/ cultural life experience, ability, sexuality, language and age.

The caseworker will put in place monitoring methods to ensure reports of attendance and progress for any referrals to community services such as partner abuse programs or addiction services are obtained.

- h. No referrals should be made to services such as couple counselling, family case conferences, mediation or other alternative dispute mechanisms or any processes where the child witness or woman is required to engage with the abuser.
- i. The abusive partner who declines to voluntarily accept conditions set up to

protect both the children and their mother should receive appropriate supervision orders and legal limitations on his contact with the family, including actions such as removal from home, no contact orders, etc. Any supervised or unsupervised visitation arrangements with child witnesses arising from these mechanisms must ensure that they do not contradict existing no-contact orders from other sources.

- j. The Woman Abuse Coordinator should be consulted before implementation of the Plan of Intervention in difficult cases, or where the staff member is unsure of how best to protect the woman and her children.
- k. The Woman Abuse Coordinator should be consulted where there is any indication of resistance to intervention by the abusive partner, or where the partner has demonstrated “risk” behaviours and/or

statements regarding the woman and children.

- l. Counsellors who may be involved with the abusive partner should also be consulted in coordination with the Woman Abuse Coordinator or other women’s and children’s advocates working with the abused woman and her children, and be kept informed in case conferences of the progress or response to interventions by the abusive partner.
- m. Staff should document all ‘risk’ behaviours and/or statements of abusive partner towards both the children and their mother, as well as towards other partners he may have a relationship with, staff and other community members, including comments or behaviours observed in informal conversation.
- n. The name of the abusive partner should be placed on any Child Abuse Registry.

Supervisory and Management Role—Some suggested practice

The support of supervisory child welfare levels and management is critical to the success of the Woman Abuse Coordination Program and the differential response on the frontline. Supervisors and management of child welfare, working closely with the Woman Abuse Coordinator, can provide the necessary ongoing support and motivation to frontline staff to improve response and protection for child witnesses in cases where woman abuse has been identified. Their role includes:

1. Reviewing and signing off on Plans of Service and Plans of Intervention.
2. Regular consultation with the Woman Abuse Coordinator on cases. Follow through with the Woman Abuse Coordinator’s recommendations.
3. Performance supervision and problem-solving for frontline staff who are having difficulty incorporating safety for women and children as a family unit in cases of child witnessing or child abuse where woman abuse is identified. Support for the integration of response to abused women within staff complements to ensure that the Woman Abuse Coordinator has agency support at senior and supervisory levels and that this support is communicated clearly to all frontline workers. Thorough understanding of woman abuse and supportive response in cases where woman abuse is identified should be an element of work performance evaluation and a positive asset in hiring and promotion of child welfare staff. Supervisors would monitor for this capacity.
4. Participation in community outreach, public advocacy and coordination activities, especially with regard to outreach to marginalized communities of women and children, as well as the Case Review Team and the Community Reference Group. Particular attention should be paid to prevention outreach to communities of women who may be over-represented in child welfare caseloads.

5. Participation in training with community advocates and frontline child welfare staff in coordination with the Woman Abuse Coordinator.

Apprehension of Child Witnesses

Apprehension of child witnesses of woman abuse should not occur except as an extremely rare occurrence, taking place only after all other resources and avenues to protect both child witnesses and their mothers—and to hold abusers accountable—have been exhausted, including active advocacy by child welfare and children’s and women’s community advocates.

Guidelines needed

Within this context, child welfare guidelines for apprehending child witnesses of woman abuse must be developed with the consultation of the Woman Abuse Coordinator, as well as the review and consultation of local community woman abuse children’s and women’s advocates and advocates in the community working with diverse communities of women and children. Guidelines must specify the high level of risk at which apprehension may be necessary, as well as the efforts made by child welfare staff to protect both the child witnesses and their mother.

Foster placements

Foster placements must reflect the ethnic and culturally specific community in which the

children live and should be acceptable to the mother. Foster caregivers must be trained in issues of violence against women and its impact on children, as well as the compounding barriers to escape from violence for women and children, such as poverty, discrimination, disability, lack of services and supports and reduced access to services and supports for specific constituencies of women and children. All foster placements for child witnesses of violence should be thoroughly screened for history of woman abuse and exposure of children to abuse within the foster family.

No Crown wardship should ever be contemplated for child witnessing without consultation with the Woman Abuse Coordinator and appropriate community-based women and children’s advocates who may be involved with the family.

During apprehension periods, guidelines for access visitation for mothers and children must also be written for child witnesses in care that specifically include safety planning and procedures for visitations. Visitation personnel must be screened for capacity to maintain safety for child witnesses and their mothers before, during and after the visit.

Introduction of the Proposed Response Model

The proposed Response Model should be first introduced in several locations in a pilot project format, in particular taking into account the differences between Northern and Southern Ontario experience, urban and rural settings, as well as Aboriginal communities (once an appropriate model for Aboriginal women has been developed). It is also imperative that the pilot process provide for a program within a multi-racial and multi-ethnic community, as well as a program within a community with a large Francophone representation.

The pilot may be introduced in an entire child welfare agency, if manageable, or within a designated “unit” within an agency serving a large urban area, with the understanding that when fully

implemented larger communities may need more than one Woman Abuse Coordinator to effectively serve the community.

Pilots best placed in communities with strong woman abuse services

Initial pilot models should be introduced in areas where violence against women services are strong leaders within the community coordination processes and community representatives have experience and training in issues of violence against women. If such supports are not in place, they must be developed before the program is launched.

In addition, it is recommended that a pre-

condition for any pilot should be the positive development of work between the violence against women and child welfare sector on protocol development and joint training. Specifically, the pilots should be launched in communities where there is mutual respect between the two sectors. A successful working relationship is one that is already clearly supportive of women who experience violence in their relationship and committed to the principle that protection of children exposed to violence is inextricably connected to the safety and equality of their mothers.

Further intensive training should take place before the introduction of the pilot model with input from community-based women's and child witness advocates as well as other community partners involved in positive coordinating efforts to address violence against women.

Evaluation component

An evaluation component for tracking the practice and impact of the Woman Abuse Coordination Model must be developed collaboratively between the child welfare and violence against women sectors as well as the community reference group of advocates representative of women's

communities involved with child welfare. In addition, provision and funding must be provided to facilitate information sharing and meetings between program staff and community advocates from different pilots so that they can share experiences, provide support and discuss improvements to the response. In particular, evaluation should be geared to determining a 'best practice' model that does not overwhelm the program and is best suited to the community.

Funding must be committed to pilots

As recommended by the jury in the inquest into the death of Gillian Hadley, funding for the pilots should be provided by the Ministry of Family, Community and Children's Services (MCFCS) to both the woman abuse and child welfare agencies to fully cover the costs of all frontline practice, supervisory activities, outreach and community development work and evaluation processes. Development of any proposed response model, whether in a pilot form or otherwise, cannot succeed until funding disparities between the violence against women sectors and child welfare have been substantively addressed with respect to frontline supports for women and child witnesses of violence.

Appendix A: Women’s Shelter and Child Welfare Work on Child Exposure

- Mid-70s-1980 Survivors of woman abuse and feminist women’s advocates began the first shelters for abused women and their children in Ontario with project funding grants and volunteers. Shelters identified the need for programs within shelters, including specific programs for children exposed to woman abuse. By the 1980s, there was a patchwork of unstable funding available.
- 1982 Some shelters were providing specialized programs for child witnesses without funding support. Despite the uncertain funding, there were 35 women’s shelters in Ontario and 9 in development. Twenty-eight had municipal contracts for per diem funding. Over half of the residents staying in shelters were children.
- In the spring of 1982, the Standing Committee on Social Development held hearings at Queen’s Park on “wife battering”. Witnesses from women’s shelters and from OAITH appeared to speak of the need for services and supports to address woman abuse. One issue consistently raised as an emerging and critical one was support for children exposed to violence. Shelters called for dedicated funding support for child witnesses.
- At the hearings, Ministry of Community and Social Services witnesses with responsibility for oversight of child abuse reported that Children’s Aid Societies received calls from women looking everywhere for help, but referred all of these calls to women’s shelters. Although government child abuse officials had heard of links between child exposure to violence and woman abuse, they were not engaged in any work specific to the area.
- 1984-1986 As a result of the hearings in 1982 and subsequent funding instability in shelters, government reviewed shelter funding and recognized the need for expanding funded core programs within women’s shelters, including funding for child and youth advocate workers to specifically support children.
- 1988-1990 The Ontario government created a new “funding formula” for women’s shelters and began negotiation with OAITH regarding core services to be offered. OAITH strongly lobbied for increased support for child witnesses and their mothers through a specific Children’s Counselling and Support program intended to “provide crisis intervention, counselling and support to child witnesses and victims of domestic violence against women” and to “support the mother’s parental role and responsibility during her stay at the shelter.” OAITH identified the need for children to receive both individual and group counselling, assessment and intervention on all of the issues a child might face. The final funding formula plan supported one full-time child advocate worker for every 10 shelter beds in the province.
- 1997 The Ontario Child Mortality Task Force, a combined effort of the Ontario Association of Children’s Aid Societies and the Office of the Child Coroner,

published reports of its investigation of deaths of children. Six inquests into deaths of children on child welfare caseloads led to the creation of a Panel of Experts to review the *Child and Family Services Act*.

The Ontario Women's Directorate released its report *Prevention of Violence Against Women: It's Everyone's Responsibility*, in which it announced that the government would implement training of child welfare workers on violence against women.

1998

OAITH met with the chair of the Panel of Experts in February regarding issues of children exposed to woman abuse and explained some of the complexities and potential negative implications for women and children of including exposure to violence against women in specific child welfare legislation.

OAITH was represented on the MCFCS Advisory Committee developing the training, which had evolved into a joint training between violence against women and child welfare sector workers. OAITH also assisted in the hiring of trainers from the violence against women sector.

Child welfare agencies began using a new eligibility and risk assessment tool across the province, which included identifying family violence as a risk factor for child welfare intervention.

The jury in the inquest into the death of Arlene May released 213 recommendations in July, 1998 to prevent further femicides in Ontario, including a recommendation for joint training of violence against women and child welfare workers.

2000-2002

Amendments to the *Child and Family Services Act* were proclaimed into law in March, 2000 and included a broadened interpretation of "emotional harm" under which child exposure to violence could be included.

In February, 2000 OAITH met with both the Minister of Community and Social Services and staff of the Ministry to raise concerns regarding reporting responsibilities of women's shelters under the legislation. A subsequent letter was sent to all VAW and CAS agencies clarifying that admission to a woman's shelter did not automatically require a report to child welfare and that the purpose of the upcoming training was to support protection of child witnesses based on protection for their mothers and accountability for the abuser.

Joint trainings were implemented across the province between violence against women and child welfare sectors.

The Ministry of Community and Social Services (now called Ministry of Community, Family and Children's Services) was developing a province-wide protocol for interactions between the VAW and child welfare sectors.

In July, 2002 the jury in the inquest into the death of Gillian Hadley released 58 further recommendations to prevent femicides in Ontario, including a recommendation for development of a differential response within child welfare to child exposure to woman abuse.

2003

The Ministry of Community, Family and Children's Services introduced the mandatory VAW/CAS Collaboration Agreement process for implementation of a province-wide protocol for interaction between VAW and CAS sectors.

Appendix B: OAITH Work on a Proposed Differential Response

- 1999-2000
- OAITH received numerous calls to express concerns and seek information regarding new child welfare risk assessment tools identifying child exposure to family violence. Passage of the amendments to the *Child and Family Services Act* resulted in increased concerns regarding reporting of women and children to child welfare and the unintended negative consequences to women's and children's safety.
- Between March and May of 2000, OAITH held meetings with shelters in four centres to discuss concerns and seek direction for action. Meetings were held in Toronto, Ottawa, Thunder Bay and Sudbury. Members from approximately 47 shelters indicated that they would like OAITH to develop a model for a proposed response building on their concerns and discussions at the meeting.
- OAITH applied to the Status of Women Canada for a grant to do a two-year project to develop the model and to track some of the concerns within the network of OAITH members.
- 2001
- A day-long meeting of speakers and discussions to workshop elements of a differential response model was held in June, 2001. It was funded by the Canadian Women's Foundation. Sixty-seven shelter representatives participated. From the workshop contributions, OAITH fashioned a first draft response model.
- In October, the inquest into the death of Gillian Hadley began.
- In November, 2001 the first draft was presented to over 60 representatives of member shelters for further review and revision. A revised draft of the proposed model was then written.
- OAITH met with OACAS to indicate that we would be recommending to the Gillian Hadley inquest jury that a differential response to woman abuse be developed within child welfare.
- 2002
- In January, OAITH presented its recommendations to the Gillian Hadley inquest jury, including the recommendation for a differential response. In February, the jury released its recommendations, including support for a specific child welfare response to woman abuse.
- In April and May of 2002, OAITH again travelled around the province to gather responses to the second draft of the proposed model response developed by OAITH members. Revisions were made to the draft and a third version was produced.
- OAITH also requested that woman abuse experts outside of OAITH read the draft model for comment and revision.
- In November, a third revised draft was distributed to OAITH members at the Annual General Meeting, where over 75 shelter representatives were present.
- 2003
- Final revisions were made to the Response Model. OAITH met with both OACAS and MCFCS to inform them that OAITH would like to begin a process of discussion regarding the implementation of the Hadley jury recommendation for a differential response.

Appendix C: Resources

- ❑ Should Childhood Exposure to Adult Domestic Violence be Defined as Child Maltreatment under the Law? Jeffrey Edleson. www.mincava.umn.edu/link/shouldch.asp
- ❑ Child Abuse and Domestic Violence in Massachusetts: Can Practice be Integrated in a Public Child Welfare Setting? Pamela Whitney and Lonna Davis. <http://eon.law.harvard.edu/vaw/whitney.html>
- ❑ Efforts by Child Welfare Agencies to Address Domestic Violence: The Experience of Five Communities. Laudan Aron, Krista Olson. www.urban.org/welfare/aron3.htm
- ❑ Effective Intervention in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice
Can be *read only* at: www.vawnet.org/vnl/library/general/eftvintr-vl.pdf Summary of Guidelines can be downloaded at: www.fvpf.org/programs/display.php3?DocID=156
If you want to receive a complete copy of the document, call: 1-800-527-3223 or 775-784-6012 or mail your request to: The National Council of Juvenile and Family Court Judges, P.O. Box 8970, Reno, Nevada 89507.
- ❑ In the Best Interest of Women and Children: A Call for Collaboration Between Child Welfare and Domestic Violence Constituencies. Susan Schechter. www.mincava.umn.edu/papers/wingsp.htm
- ❑ Child Abuse and Domestic Violence: Creating Community Partnerships for Safe Families. Janet Carter and Susan Schechter. www.mincava.umn.edu/link/fvpf1.htm
- ❑ Rights of Abused Mothers vs. Best Interest of Abused Children: Courts' Termination of Battered Women's Parental Rights Due to Failure to Protect Their Children from Abuse. Amy Melner. <http://eon.law.harvard.edu/vaw/melner.html>
- ❑ Model Initiatives Linking Domestic Violence and Child Welfare. Susan Schechter. www.cssp.org/kd28.htm

Endnotes

- ¹ Campaign 2000, 2002 Report Card on Child and Family Poverty. 2002.
- ² *Women In Canada 2000: A Gender-Based Statistical Report*. Statistics Canada. Pg. 141.
- ³ Canadian Council on Social Development. 1997. Based on Statistics Canada Income Distributions by Size in Canada, 1995.
- ⁴ Gail Fawcett, *Living with a Disability in Canada: An Economic Portrait*. Ottawa, Minister of Supply and Services Canada. 1996.
- ⁵ *Women In Canada 2000: A Gender-Based Statistical Report*. Statistics Canada.
- ⁶ Nico Trocmé, Barbara Fallon, Bruce MacLaurin, Barbara Copp, *The Changing Face of Child Welfare Investigations in Ontario: Ontario Incidence Studies of Reported Child Abuse and Neglect (OIS 1993/1998)*, Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto, 2002, Page 10.
- ⁷ *Ibid.* Page 10.
- ⁸ Aron L., Olson K., *Efforts by Child Welfare Agencies to Address Domestic Violence: The Experiences of Five Communities*, The Urban Institute. Background and Overview, Page 3. At www.urban.org/welfare/aron3.htm
- ⁹ *Ibid.*, Chapter Five: Oregon Department of Human Services, Page 2.
- ¹⁰ Jeffrey Edleson, Ph.D., *Should Childhood Exposure to Adult Domestic Violence be Defined as Child Maltreatment under the Law?* Minnesota Center Against Violence and Abuse, School of Social Work, University of Minnesota, 2000, Page. 10.
- ¹¹ *Ibid.*, Page 10.
- ¹² Aron L., Olson K., *Efforts by Child Welfare Agencies to Address Domestic Violence: The Experiences of Five Communities*, The Urban Institute. Chapter Five, Page 11. Oregon Department of Human Services.
- ¹³ Pamela Whitney and Lonna Davis. *Child Abuse and Domestic Violence in Massachusetts: Can Practice be Integrated in a Public Child Welfare Setting?* At <http://eon.law.harvard.edu/vaw/whitney.html>
- ¹⁴ Aron L., Olson K., *Efforts by Child Welfare Agencies to Address Domestic Violence: The Experiences of Five Communities*, The Urban Institute. Chapter Six: Findings and Observations, Page 12.
- ¹⁵ Nico Trocmé, Barbara Fallon, Bruce MacLaurin, Barbara Copp, *The Changing Face of Child Welfare Investigations in Ontario: Ontario Incidence Studies of Reported Child Abuse and Neglect*, Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto, 2002, Page 4, footnote 13.
- ¹⁶ *Effective Intervention in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice*, The National Council of Juvenile and Family Court Judges, Family Violence Department. 1999. Page 19. Read only at: www.vawnet.org/vnl/library/general/eftvintr-v1.pdf