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2013

Research Report

Exploring Reasonable Efforts in Child Welfare Cases That Include Domestic Violence in Princeton, WV

National Council of Juvenile and Family Court Judges

Juvenile Law Programs

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Executive Summary

Many families involved in child abuse and neglect cases have been profoundly affected by domestic violence (DV). It is important for judges to recognize the unique issues these families often face and to incorporate this knowledge into their decisions. Yet, little research has been conducted to explore how courts respond to child abuse and neglect cases involving DV. The current study examined 1) How child abuse and neglect cases with co-occurring domestic violence are treated and 2) Whether this treatment differs from cases without domestic violence. Using a structured case file review instrument, researchers examined descriptive case information on 20 child abuse and neglect cases with DV and 30 comparison cases (with no indication of DV) on site at a West Virginia court. Information collected included petition language regarding domestic violence, specific allegations, court orders, reasonable efforts, and services to all parties.

Key Findings

- ***Efforts are being made to hold perpetrators accountable and minimize victim blaming in DV cases.***
  - **Child abuse and neglect cases with co-occurring DV were more likely to be in the father's name than non-DV cases**
  - **Primary allegations against the mother were significantly less common in DV cases**
  - **Petitions identified the perpetrator in 100% of DV cases**
  - **Despite having the opportunity to co-petition, only two mothers in DV cases did so**

- ***Presenting problems and service referrals differed in DV and non-DV cases.***
  - **Substance abuse was more frequently identified as a presenting problem for mothers in non-DV cases than for mothers in DV cases.**
  - **Mothers in non-DV cases were more likely to be referred to substance abuse-related services**
  - **Fathers in DV cases were more likely to receive referrals for parenting classes and psychological evaluations**
  - **There was little documentation of DV-specific service referrals**

- ***There was no evidence that DV advocates were involved in cases with co-occurring DV or present at any of the hearings.***

- ***Reunification was more common in DV cases than in non-DV cases.***

These findings are based on a limited sample, and not all initial objectives of this study could be met due to lack of available case information. Future research should explore more overarching themes in child abuse and neglect cases involving DV, such as whether efforts are made to keep victims and children safe and together. The relatively low incidence of co-petitions in DV cases also merits further investigation. Doing so may yield a more thorough understanding of the extent to which courts are recognizing and addressing the needs of families in child welfare cases affected by DV, which may in turn encourage positive changes in systems and practice.

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Introduction

Domestic violence—a pattern of assaultive and coercive behavior that may operate on a physical, psychological, emotional, sexual, or economic level—in the home and child abuse or neglect often co-occur. The precise extent to which this happens is often hard to estimate. Earlier studies have indicated overlaps ranging from 30% to 60%[1], but exact numbers are scarce. National datasets that collect information on child abuse and neglect, such as the Adoption and Foster Care Reporting System, do not identify the occurrence of domestic violence (DV) in the case, making it even more difficult to track. Further, if DV is not listed on the original petition, it may be overlooked in the case.

When DV is identified, either as part of petition allegations against a parent or at a later point during the case, it is important that judges respond to this information in a way that holds the perpetrator of the violence accountable, keeps the victim and children safe, and helps to prevent future violence. Children exposed to DV are at risk for a host of negative social, developmental, and psychological outcomes. For example, childhood exposure to DV has been linked to a reduction in IQ scores,[2] juvenile delinquency,[3] and decreased social competence.[4] In addition, children who witness DV are significantly more likely to develop depression, anxiety, and Post-traumatic Stress Disorder than non-witnesses.[5]

Understanding that such issues exist, there has been an increased awareness regarding the need for training in DV. For example, the Violence Against Women Act of 1994 (VAWA) was re-authorized in 2013. Included in VAWA is funding for DV-related training for criminal and civil judges and court staff[6]; however, the extent to which such training will reach family court judges is unknown. In addition to VAWA, the National Council of Juvenile and Family Court Judges (NCJFCJ) developed the *Reasonable Efforts Checklist for Dependency Cases Involving Domestic Violence* (hereafter *Reasonable Efforts Checklist*) and the *Checklist to Promote Perpetrator Accountability in Dependency Cases Involving Domestic Violence* (hereafter *Accountability Checklist*). These checklists provide information and tools for judges to help facilitate accountability and safety of families involved in child welfare. While tools such as these may be helpful to the courts, little research has been conducted that examines how the

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[1] Osofsky, J. D. (2003). Prevalence of children's exposure to domestic violence and child maltreatment: Implications for prevention and intervention. *Clinical Child and Family Psychology Review*, *6*, 161-170.

[2] Koenen, K. C., Moffitt, T. E., Caspi, A., Taylor, A., & Purcell, S. (2003). Domestic violence is associated with environmental suppression of IQ in young children. *Development and Psychopathology*, *15*, 297-311.

[3] Justice Policy Institute (2010, July). *Healing invisible wounds: Why investing in trauma-informed care for children makes sense*. Retrieved from http://www.justicepolicy.org/images/upload/10-07_REP_HealingInvisibleWounds_JJ-PS.pdf

[4] Kernic, M. A., Wolf, M. E., Holt, V. L., McKnight, B., Huebner, C. E., & Rivara, F. P. (2003). Behavioral problems among children whose mothers are abused by an intimate partner. *Child Abuse and Neglect, 22*, 319-330.

[5] Margolin, G., & Vickerman, K. A. (2007). Post-traumatic stress in children and adolescents exposed to family violence : I. Overview and issues. *Professional Psychology: Research and Practice, 38*, 613-619.

[6] U.S. Department of Justice (2013). *Office on Violence Against Women (OVW) VAWA 2013 summary: Changes to OVW-administered grant programs.* Retrieved from http://www.ovw.usdoj.gov/docs/vawa-2013-sum.pdf

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courts treat cases when there is DV, or whether this treatment differs from how non-DV cases are treated.

Study Overview and Research Questions

Princeton, West Virginia, was selected as the study site because of the unique work in West Virginia, including their petition practice, which allows a parent to co-petition with child welfare against a perpetrator of domestic violence. The current study explores how courts respond to child abuse and neglect cases with co-occurring domestic violence in comparison with cases that have no indication of domestic violence.

This study was exploratory and primarily descriptive in nature. Two questions were addressed:

1) How are child abuse and neglect cases with co-occurring domestic violence treated?

2) Does this treatment differ from cases without domestic violence?

Method

Sample

A stratafied sample of cases were selected. To be included in the sample, cases had to have a child abuse and neglect petition filed in 2010. It was originally stipulated that half of the cases had to include an allegation of domestic violence against any party; however, the number of DV cases did not reach half of the current cases. Therefore, researchers requested all DV cases from that year and a random selection of other child abuse and neglect cases. The final sample included 20 domestic violence (DV) and 30 non-domestic violence (non-DV) cases.

Data Collection Procedures

One researcher from NCJFCJ collected data on-site through extensive case file review of court documents. Case-level data were recorded on a standardized instrument. The instrument included topics such as the age of the parents and child; the presence of parties at each hearing; allegations and presenting problems; and services offered to the parents and child. Most importantly, the instrument included several topics prescribed by the *Reasonable Efforts Checklist* and *Accountability Checklist* as relevant to domestic violence cases:

- Whether the petition identifies the perpetrator and the victim
- Whether the perpetrator was removed from the home
- Services related to domestic violence (e.g., domestic violence counseling, batterer intervention, and checking into domestic violence shelter)

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- Efforts taken by the court or agency (e.g., developing a safety plan, referring the domestic violence victim to legal assistance, and referring parties to services) prior to the shelter care and permanency planning hearings
- Reasonable efforts findings (prevent removal, reunification, and not required) at each hearing

Data Analysis

Analysis primarily involved calculating basic frequencies, percentages, and means to describe cases and compare those in the DV sample with those in the non-DV sample. Though some statistical tests were conducted in comparing DV and non-DV cases on various aspects, it should be noted that these tests become less sensitive with decreasing sample size. Because the sample size of cases in this study is relatively low, most statistical comparisons of DV cases and non-DV cases will not yield "significant" differences although differences may exist. Rather, most differences emerging between DV and non-DV cases in this study are illustrated using descriptive data.

Results

Case Demographics

Ages of the child on the petition ranged from 7 days to 17 years, with an average age of 7.3 years. The number of other children involved in each case ranged from 0-3, with an average of 1.2 across cases. Data regarding whether the child was removed from the home was available for 44 cases. In the majority of these 44 cases (88.0%; n = 33), the child on the petition was removed from the home. The number of other children on the petition was higher in DV cases (M = 1.58) than in non-DV cases (M = 1.00), and t-tests indicated that this difference was statistically significant, $p < .05$.[7] Other basic case demographics did not differ according to case type.

Co-petitions were rare, filed in only 8.0% (n =4) of cases in the overall sample. Two of these cases involved DV, and the other two did not. Though most cases (64.0%; n = 39) opened by Child Protective Services (CPS) were in the mother's name, over one-third (34.0%; n =17) were in the father's name. This differs from many other jurisdictions, where CPS opens the vast majority of cases (i.e., 95% or greater) in the mother's name. The higher rate of cases opened in the father's name suggest that efforts are being made in this jurisdiction to consider the allegations rather than automatically opening the case against the mother. Indeed, half (50%; n = 10) of all DV cases were in the father's name, as compared to 23.0%

[7] Again, the likelihood of finding statistical significance decreases in small sample sizes. For some comparisons, however, the difference may be large enough to reach significance at the .05 level (as in this instance).

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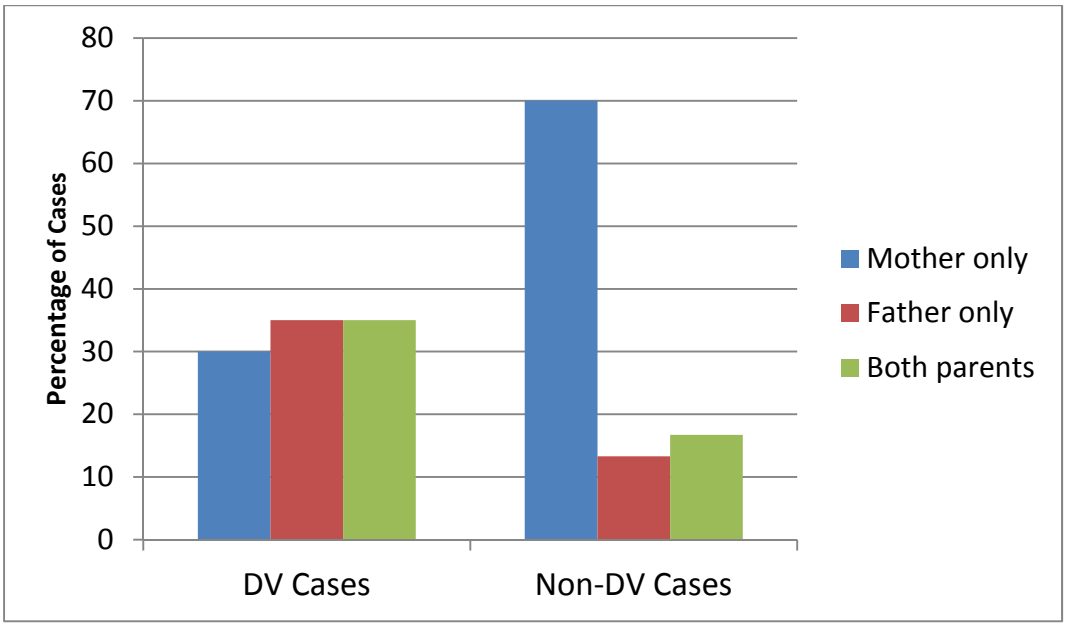
(n = 7) of the non-DV cases.[8] Chi-square tests[9] indicated that this difference approached statistical significance, p = .051.

On the petition, primary allegations were against the mother only in 50.4% of cases, against the father only in 22.0% (n = 11) of cases, and against both the mother and the father in 24.0% (n = 12) of cases. The extent to which primary allegations were made against parents varied according to case type. As shown in Figure 1, primary allegations were more evenly split between parents in DV cases with allegations against the mother only in 30% (n = 6) of cases, allegations against the father only in 35.0% (n = 7) of cases, and primary allegations against both parents in 35.0% (n = 7) of DV cases. In seven DV cases, there were no allegations against the mother. It should be noted that co-petitions were *not* filed in five of these seven cases. Primary allegations against the mother only were much more common in non-DV cases, occurring in 70% (n = 21) of cases in this sample. Primary allegations were against the father in only 13.3% (n = 4) of non-DV cases and against both parents in 16.7% (n =5) of these cases.

Figure 1. Frequency of Primary Allegations against Parents by Case Type



In the overall sample, the average total number of allegations was 1.5 for mothers and 1.2 for fathers. The average number of allegations was slightly higher for fathers in DV cases (M = 1.4) than for fathers in non-DV cases (M = 1.1, see Figure 2). The average number of allegations against mothers, however was significantly higher in non-DV cases (M = 1.7) than in DV cases (M = 1.0), $p < .05$.

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[8] The sample of DV cases (n = 20) was smaller than the sample of non-DV cases (n = 30). In comparing DV and non-DV cases, the numbers of cases may be similar but the percentage of DV cases represented will be substantially higher than the percentage of non-DV cases.

[9] A chi-square test indicates whether there is an association between categorical variables and the direction of this association.

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Figure 2. Mean Number of Allegations against Parents by Case Type

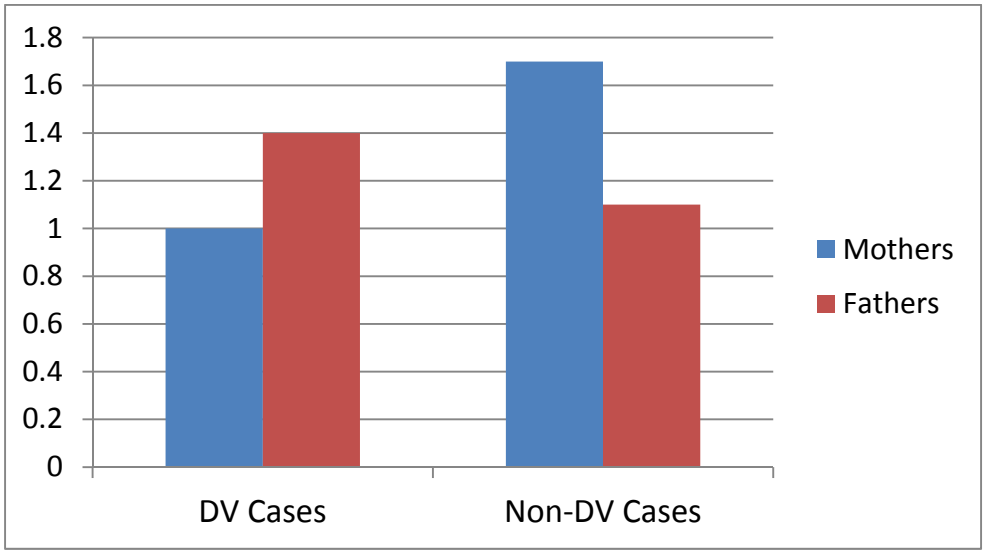

Table 1 displays the frequencies of specific allegations against mothers, fathers, and "Other" parties in the entire sample of cases as noted in the petition. The most common allegation was neglect/abandonment, made against mothers in 72.0% (*n*= 36) of cases and against fathers in 48.0% (*n* = 24) of cases. Table 2 displays the breakdown of specific allegations against parents in DV and non-DV cases. A greater proportion of DV cases included allegations of neglect/abandonment against the fathers (60.0%; *n* = 12) compared to non-DV cases (40.0%). Not surprisingly, allegations of physical abuse were more common among fathers in DV cases (20.0%; *n* = 4) with no physical abuse allegations against fathers in non-DV cases. Though percentage comparisons indicate some slight differences in allegations against mothers in DV and non-DV cases, these are based on a very small sample of cases. For instance, allegations of physical abuse were made against the mother in one DV case, which is 5.0% of the sample of DV cases. In comparison, five non-DV cases included allegations of physical abuse against the mother, which is 16.7% of the sample of non-DV cases.

Table 1. Frequencies of Specific Allegations in Overall Sample

Allegation	Percentage of Cases (*N* = 50)		
	Mother	Father	Other
Neglect/Abandonment	72.0%	48.0%	8.0%
Other/Risk of harm	10.0%	14.0%	2.0%
Physical abuse	12.0%	8.1%	14.0%
Emotional abuse	4.0%	4.0%	2.0%
Sexual abuse	0	2.0%	2.0%

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Table 2. Frequencies of Specific Allegations against Parents in DV and Non-DV Cases

Allegation	Percentage of Cases			
	DV Cases (*n* = 20)		Non-DV Cases (*n* = 30)	
	Mother	Father	Mother	Father
Neglect/Abandonment	65.0%	60.0%	76.7%	40.0%
Other/Risk of harm	10.0%	5.0%	10.0%	20.0%
Physical abuse	5.0%	20.0%	16.7%	0
Emotional abuse	5.0%	10.0%	3.3%	0
Sexual abuse	0	0	0	3.3%

In this jurisdiction, petitions typically only identified one primary presenting problem related to the allegations. The frequencies of these presenting problems for both mothers and fathers in the overall sample of cases are displayed in Table 3. Substance abuse was the most common specific problem, noted on the petition for mothers in 32.0% (*n* =16) of cases and for fathers in 18.0% (*n* = 9) cases. Many of the presenting problems noted were unique and categorized as "Other". This occurred in 18.0% (*n* =9) of cases for mothers and in 16.0% (*n* = 8) of cases for fathers. Examples of such problems included prior TPRs and relinquishments, physical and sexual abuse of the siblings of the child on the petition (noted for father), and allowing sex offenders into the home (noted for mother).

Table 3. Presenting Problems for Parents in Overall Sample

Presenting Problem	Percentage of Cases (*N* = 50)	
	Mothers	Fathers
Substance Abuse	32.0%	18.0%
Unfit Home	8.0%	2.0%
Incarceration	4.0%	8.0%
Homeless	6.0%	4.0%
Mental Health Issues	2.0%	0
Child Behavior	2.0%	0
Whereabouts Unknown	2.0%	0
Other	18.0%	16.0%

There were few differences in presenting problems for parents in DV and non-DV cases, likely because the frequencies of most problems were low overall. Substance abuse was more frequently noted as a

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presenting problem for mothers in non-DV cases (40.0%; *n* = 12) than for mothers in DV cases (20.0%; *n* = 4). In addition, all presenting problems classified as "Other" for fathers occurred in non-DV cases. Again, these frequencies represent the presenting problems *as noted on the petition*. It is quite possible that many more parents experienced these problems, though they were not officially cited.

The average total number of hearings for all cases was 5.9. A percentage score was calculated for parents in each case to represent how often they were present across hearings. On average, mothers attended hearings 83.7% of the time, and fathers attended 59.7 % of the time. Parent attendance at hearings did not differ between DV and non-DV cases.

Characteristics of Cases Involving Domestic Violence

Though there were a total of 20 cases involving DV, there were no indications of DV on the petition in three of these cases. Rather, DV was brought to the court's attention later. This occurred during Adjudication in one of the cases and at the Disposition hearing in the other two cases. Petition language in the 17 cases initially identified as involving DV was further explored to get a better understanding of the nature and prevalence of DV-related allegations against parents. This may include children witnessing acts of domestic violence, general accusations of DV incidents in the home, or "failure to protect." "Failure to protect" allegations can be made against non-violent victims on the grounds that they allowed their child to be exposed to DV. In this West Virginia jurisdiction, the term "failure to protect" is generally avoided and is replaced with "willingly allowed" (a child to witness or be exposed to violence), which is intended to help minimize victim blaming.

Among these 17 cases, the top three allegations against both mothers and fathers were having a child witness domestic violence, having a history of domestic violence (either as victims or perpetrators), and the general occurrence of domestic violence in the home. Such allegations occurred at an equal rate for mothers, with each noted on 35.3% (*n* = 6) of the 17 petitions. Having a child witness domestic violence and a history of domestic violence were equally common among fathers, with each noted on 58.8% (*n* = 10) of the 17 petitions. In 47.1 % (*n* = 7) of these cases, allegations of domestic violence occurring in the home were made against fathers. In addition, allegations of DV in the home and of having a child witness DV were made against an "Other" party (e.g., stepparent, mother's boyfriend) in 23.5% (*n* = 4) and 17.6% (*n* =3) of cases, respectively.

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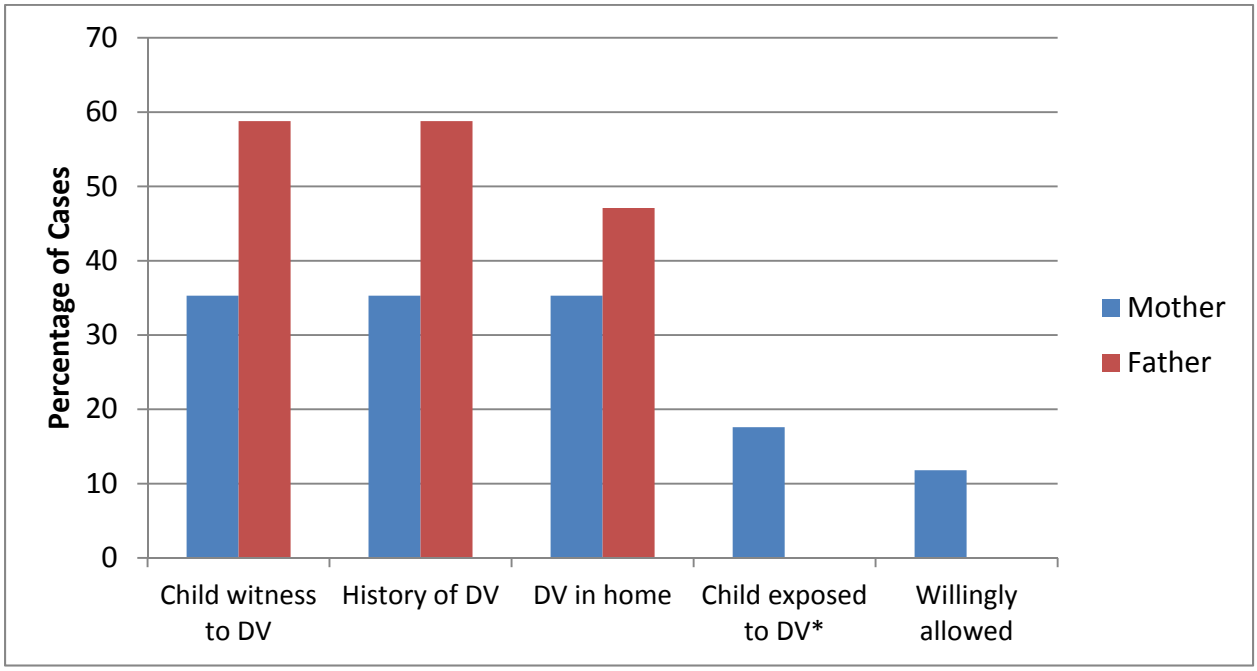
Figure 4. Parent Allegations Specific to Domestic Violence Cases



**Note:* "Child exposed to DV" refers to situations in which a child did not directly witness acts of domestic violence but were exposed to the violence in other ways (e.g., hearing an altercation, seeing their parents' injuries, etc.). Petitions must specifically use the term "exposed" for this to be recorded as an allegation.

The petition identified the perpetrator(s) in all of the 17 cases with initial indications of DV. The father was identified as a perpetrator most of the time (82.4%; *n* = 14), followed by the mother (35.3%; *n* =6), and "Other" (23.5%; *n* = 4).[10] Importantly, those identified as perpetrators were alleged to have committed acts of domestic violence but may not have always been the instigator. More than one perpetrator was identified in 6 (35.3%) of these cases, and the mother was identified as the sole perpetrator in only one case.

The victim(s) was identified on the petition in 76.5 % (*n* = 13) of cases. In 92.3% (*n* = 12) of these 13 cases, the mother was identified as a victim. The father was identified as a victim in 23.1% (*n* = 3) of these cases. Again, more than one person could be identified as a victim on the petition, and both mothers and fathers were identified as victims in two cases. There was not enough information in the case file for the researchers to reliably determine whether the perpetrator had been removed from the home. However, petitions for a Temporary Protective Order were filed in 25.0% (*n* =5) of all DV cases.

There were no indications that a DV advocate was present at any of the hearings across all 20 cases involving DV. It is possible that DV advocates were sometimes present but not properly identified in the

[10] Because more than one perpetrator can be identified in the petition, these percentages may exceed 100.

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court record, or that advocates were otherwise involved but not present at the hearings. If DV advocates were involved in the case, there was no information in the court file to reflect this.

Reasonable Efforts

Reasonable efforts findings to prevent removal and reunify were examined across all hearings in the entire sample of cases. In nearly half of the sample (48.0%; *n* = 24) the court determined that reasonable efforts were not required, typically due to an emergency removal where social services did not have an opportunity to provide reasonable efforts (e.g., police removed child). Most findings of reasonable efforts not required occurred at the Preliminary hearing or were included in the order on the petition (44.0%; *n* = 22) and likely pertained to preventing removal, though the case files did not specify this. The percentage of cases with findings that reasonable efforts were not required was similar in the DV (50.0%; *n* = 10) and non-DV (46.7%; *n* = 14) case samples.

Reasonable efforts findings to prevent removal were made in 61.5% (*n* = 16) of the remaining sample of 26 cases. These findings were typically made at the Preliminary hearing and/or included in the order on the petition and did not substantially differ between DV and non-DV cases. Only two case files included documentation that reasonable efforts to reunify were made. In addition, there was little information regarding specific agency efforts to prevent removal and reunify.

Services

Service plans were examined both for the entire sample of cases and separately for DV and non-DV cases. The frequencies of service referrals for mothers and fathers in the overall sample (*N* = 50) are displayed in Figure 5. In all cases, the most common referrals for mothers were for parenting skills/mentoring classes (46.0%; *n* = 23), Adult Life Skills classes (28.0%; *n* = 14), and individual counseling (28.0%; *n* = 14). Service referrals were made less frequently for fathers than for mothers, as they were less likely to be involved in the cases or in their child's life more generally. Top service referrals for fathers included parenting skills/mentoring classes (24.0%; *n* = 12), random drug tests/UAs (18.0%; *n* = 9), and psychological evaluations (18.0%, *n* = 9).

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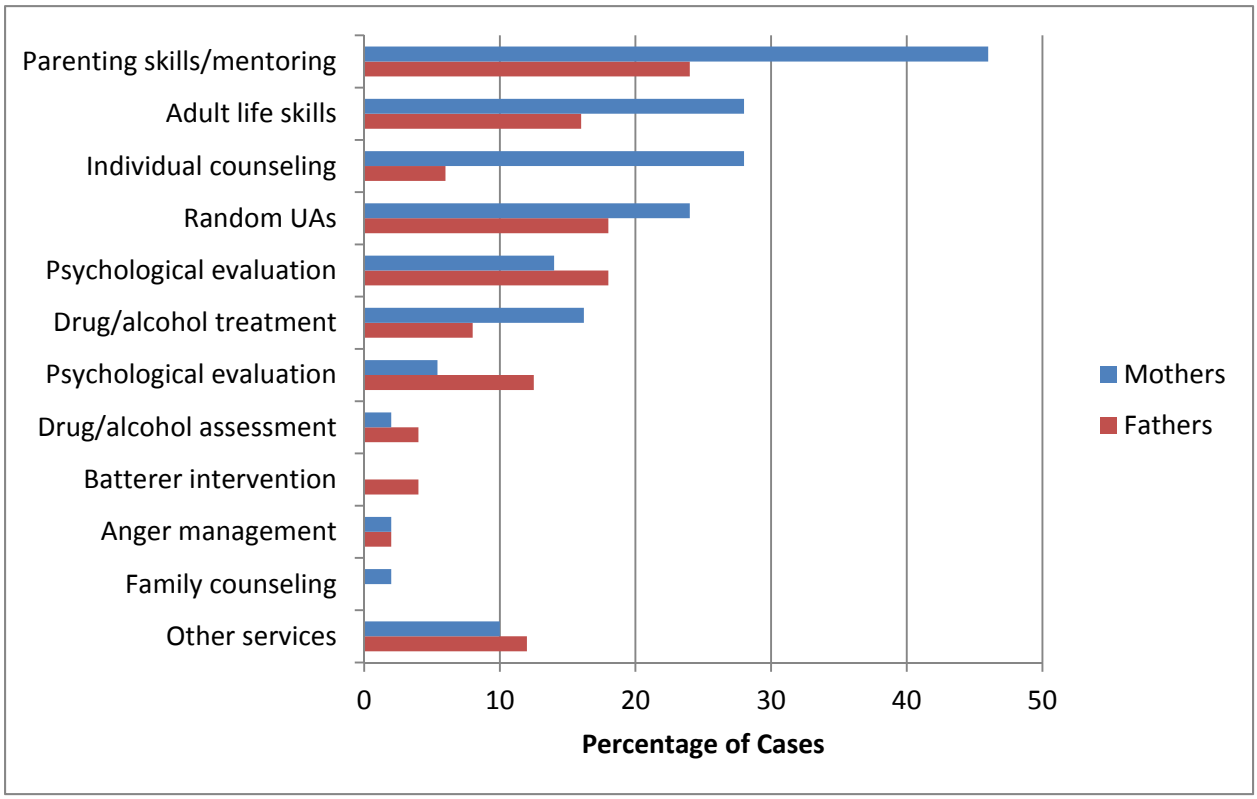
Figure 5. Service Referrals for Mothers and Fathers in Overall Sample



Sample sizes were too small to conduct valid statistical tests comparing services ordered for parents in DV and non-DV cases. However, basic frequency data and percentages were examined and did indicate some small differences. For instance, mothers in non-DV cases were more likely to be referred to drug and alcohol-related services than mothers in DV cases. Specifically, 30.0% (n = 9) of non-DV cases included referrals for random drug tests/UAs for mothers, as compared to 15.0% (n =3) of DV cases. Further, mothers were referred to drug/alcohol treatment in 16.0% (n = 8) of non-DV cases but only in one DV case. These differences are consistent with the increased identification of substance abuse as a primary problem (in the petition) for mothers in non-DV cases. There were no other substantial differences in service referrals for mothers in DV and non-DV cases.

Two DV cases in which the perpetrator was identified as a party other than the father were excluded when comparing service referrals for fathers in DV and non-DV cases, as DV-related referrals would not be expected for fathers not involved in the domestic violence. A larger proportion of fathers in these remaining 18 DV were referred to parenting skills/mentoring classes (38.9%; n =7) compared to fathers in non-DV cases (16.7%; n =5). Referrals for psychological evaluations also were more common for fathers in DV cases (33.3%; n = 6) than for fathers in non-DV cases (10.0%; n =3). There was documentation of referrals to batterer intervention programs in only two DV cases in which the father was a perpetrator.

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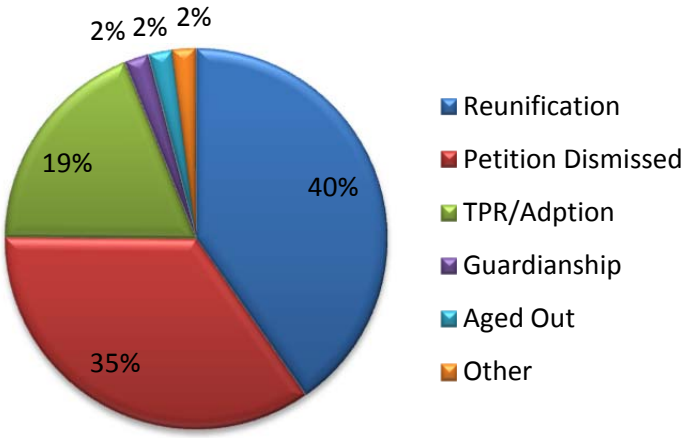
Service referrals for children were rare. The most common referral was for individual counseling, which was made in a total of five cases. Three of these cases included allegations of domestic violence and the other two did not.

It should be noted that the comparisons between service referrals in DV and non-DV cases were based on a limited sample. Thus, the findings highlighted above may not reflect the overall trends in this jurisdiction. In addition, these findings were based on case file review only. Parents and children may have been referred to additional services, but these referrals were not documented in the case file.

Case Timeliness, Placement, and Outcomes

Over three-quarters (76%, *n* = 38) of all 50 cases examined had closed. Reunification was the most common outcome, occurring in 39.5% (*n* = 15) of the cases that had closed (see Figure 6). In over one-third of closed cases (34.2%; *n* =13), the petition was dismissed. Seven closed cases (18.4%) resulted in TPR or adoption. Less common case outcomes included Guardianship, Aging Out, and Other, with each of these occurring in one case.

Figure 6. Outcomes of Closed Cases



Case closure was equally likely for DV (75%; *n* = 15) and non-DV cases (76.7%; *n* =23); however, there were some small differences in case outcomes. Among cases that had closed, DV cases were more likely to end with reunification (60%; *n* = 9) than non-DV cases (26.1%; *n* =6). Conversely, petitions were more commonly dismissed in closed non-DV cases (47.8%; *n* = 11) than in closed DV cases (13.3%; *n* = 2). This may be partly because six pre-adjudicatory adjustment periods were granted in non-DV cases, which resulted in dismissed petitions in four of these cases. Only two pre-adjudicatory adjustment periods were granted in DV cases, one of which resulted in a dismissed petition.

The average time from petition date to adjudication was 70.8 days, and the average time from petition date to case closure was 329.7 days. There were no substantial differences in timeliness between DV and non-DV cases.

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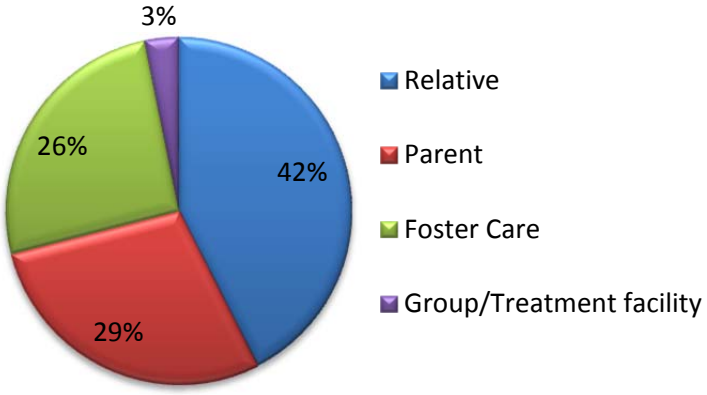
The average total number of child placements for all cases was .98. An aggregate case percentage of placements was obtained by summing and averaging placement settings across all hearings (see Figure 7). Children were most frequently placed with a relative (42.5%), followed by with a parent (28.5%) and in foster care (25.8%). There were no differences in either number or type of placements between DV and non-DV cases. Most notably, children in DV cases were not returned to non-offending parents any earlier than children in non-DV cases.

Figure 7. Average Percentage of Placement Settings Across all Hearings



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Discussion

Child abuse and neglect and domestic violence in the home frequently co-occur. Based on prior research, it is likely that at least 25% of families involved in child abuse and neglect cases have been affected by DV, and this figure may be closer to 50%. Thus, it is important that courts and agencies work to target the unique issues and needs of children and families in such cases. This exploratory study sought to obtain an initial understanding of how child abuse and neglect cases with co-occurring DV are treated and how these cases compare to those with no indication of DV. Current findings are based on a limited sample of cases as well as on the information available from case files; thus, the extent to which they reflect the typical practices in this jurisdiction cannot be reliably determined.

Examinations of basic frequency data and some statistical comparisons of cases in Princeton, WV suggest that efforts are being made to promote accountability among perpetrators in child abuse and neglect cases involving domestic violence. For instance, in many jurisdictions, CPS automatically opens child abuse and neglect cases in the mothers' name even if primary allegations are not against the mother. In this West Virginia jurisdiction, over one-third of cases were in the fathers' name. This practice appears to be tied to allegations, as a greater proportion of DV cases as compared to non-DV cases were in the father's name. Though the name attached to a case may not influence related decisions or outcomes, opening cases in the father's name as allegations deem appropriate is an important step in minimizing blame against mothers who have been victimized. In addition, all petitions including allegations of domestic violence identified the perpetrator(s), and children involved in DV cases were more likely to be reunified with their parent(s) than those in non-DV cases.

In West Virginia, co-petitions may be filed in child abuse and neglect cases on behalf of the non-offending parent. This is a unique practice that may be especially beneficial for victims of domestic violence. The opportunity to co-petition can empower non-offending parents and help minimize victim blaming, as well as the stress and trauma experienced throughout child welfare proceedings. Despite these potential benefits, few cases in the current sample included a co-petitioner. Co-petitions were filed in two DV cases, in which no allegations were made against the mother. However, no allegations were made against mothers in five additional DV cases. Co-petitions may have been appropriate in some of these cases, though this could not be ascertained from case file review.

In the jurisdiction in the current study, only one presenting problem related to the allegation(s) is typically identified on the petition. Service referrals appeared to target these primary problems noted in samples of DV and non-DV cases. For instance, substance abuse was more frequently identified as a primary presenting problem for mothers in non-DV cases than for mothers in DV cases, and mothers in non-DV cases also were more likely to receive referrals for drug/alcohol testing and treatment. Fathers in cases involving allegations of domestic violence were more likely to receive referrals for parenting classes and psychological evaluations than fathers in non-DV cases. Though limiting the number of presenting problems in the petition is useful in isolating the main reasons underlying allegations, researchers could not determine the extent to which families in the current sample faced other serious

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issues that should be addressed. For instance, prior research indicates that both perpetrators and victims of domestic violence are significantly more likely than their counterparts to experience substance abuse[11] and mental health[12] issues.

Case file review indicated referrals to DV-specific services in only two cases. In these cases, the father (who was identified as a perpetrator) was referred to a batterer intervention program. There was no evidence that DV advocates were present at any of the hearings in cases with DV allegations. Perhaps DV advocates did not attend hearings but were otherwise involved in some cases. For example, they may have attended multidisciplinary team meetings or provided legal assistance and support. However, such involvement could not be discerned from the case files. There also was not enough information in the case files to explore efforts made by agencies to prevent removal and reunify. It is possible that numerous specific agency efforts were made and that families received additional services that were not documented in the case files. Alternatively, there may not be adequate services and resources in this rural jurisdiction to address the needs of families affected by domestic violence.

There are several limitations to this exploratory study. There were plans to explore other topics highlighted in the *Reasonable Efforts Checklist*, such as whether there was a separate case plan for each parent and whether there was a focus on keeping the victim and child safe and together. In most cases, there was not enough information to answer these questions. Further, current findings are based on a limited sample of cases. Future research could expand on these initial findings to provide a more comprehensive understanding of court responses to child abuse and neglect cases with co-occurring domestic violence.

Conclusion

As child abuse and neglect and domestic violence in the home often co-occur, it is critical that courts recognize and respond to domestic violence in child welfare cases appropriately. The current research examined a sample of child abuse and neglect cases including allegations of DV and compared them to cases with no indication of DV. Though sample sizes were relatively small, findings indicate that efforts are being made in this jurisdiction to promote accountability among perpetrators of DV and to minimize blame among victims or non-offending parents. Yet, co-petitions were rare in both DV and non-DV cases.

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[11] Cunradi, C. B., Caetano, R., & Schafer, J. (2002). Alcohol-related problems, drug use, and male intimate partner violence severity among US couples. *Alcoholism: Clinical and Experimental Research, 26*, 493-500.

[12] Domestic Violence and Mental Health Policy Initiative (2003). *Domestic violence, mental health & trauma: Research highlights.* Available at: http://www.vawnet.org/Assoc_Files_VAWnet/MentalHealthResearch.pdf

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Service referrals were consistent with the primary presenting problem(s) listed on the petition underlying the reasons for removal. Families may have been experiencing other serious issues that were not documented in the petition or elsewhere in the case file, the extent to which appropriate service orders and/or referrals were made could not be determined. Aside from two cases in which the perpetrator was referred to batterer intervention, there was no indication of DV-specific service orders or referrals in the case files. Again, families may have received such referrals but this was not evident from case file review.

Though this study provides an initial understanding of court responses to child abuse and neglect cases involving DV, it is exploratory and findings are based on a limited sample. Further research using varying methodologies is needed to develop a more comprehensive picture of how child abuse and neglect cases with co-occurring DV are treated compared to cases without DV. In addition, more research is needed to determine the extent to which court responses in child welfare cases with co-occurring DV promote family safety and well-being.

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