

A Review of the New Domestic Violence Policy



Participant Guide

OBJECTIVES

There are several "big picture" objectives that you'll achieve by participating in this informational seminar. By the end of the seminar you'll be able to:

- Identify the red flags that are sometimes indicative of domestic violence
- Demonstrate how to address issues in a non-victim blaming manner
- Determine when DCFS becomes involved in a domestic violence case

In order to achieve these objectives, there are "small picture" objectives that you'll accomplish along the way:

- Review objectives
- Verbalize current knowledge about domestic violence
- Discuss why the training is important
- Match the term to its definition
- Gather information to determine if a child is at risk
- Identify when a domestic violence screen must be completed
- Compare current and future domestic violence screen
- Identify case milestones when domestic violence screen is completed
- Identify significant indicators of domestic violence cases
- Determine when DCFS becomes involved in a case of domestic violence
- Determine the appropriateness of adult victim interview techniques
- Review the guidelines for interviewing children and the perpetrator about domestic violence
- Discuss additional interviewing considerations
- Determine appropriate safety alternatives
- Discuss considerations for worker safety
- Develop a domestic violence service plan
- Develop a flowchart for the domestic violence case process
- Review key concepts of training
- Measure accomplishment of objectives
- Draft a plan for application of ideas learned in this training

WHAT I ALREADY KNOW

Instructions: Think of some key points about domestic violence you've already learned either through other training sessions you've attended or your personal work experience and **write them in the box below.**

What I already know about domestic violence is:
1.
2.
3.
4.
5.

DEFINITIONS

Instructions: Here are eight terms used in the Domestic Violence Policy. **Write the letter of the term on the line next to the appropriate definition.**

Terms

- **A.** Domestic violence
- B. Illinois Domestic Violence Act
- **C.** Family or household members
- **D.** Physical abuse

- E. Harassment
- F. Intimidation of a dependent
- **H.** Interference with personal liberty
- I. Willful deprivation

Definitions

Subjecting a person who is dependent because of age, health, or disability to participation in, or to be witnesses of: physical force against another or physical confinement or restraint of another which constitutes physical abuse as defined in the Act regardless of whether the abused person is family or household member.
 Involves the establishment of power and control through a pattern of coercive behaviors that include physical, sexual, verbal, and emotional assaults perpetrated by one intimate partner against another.
 Willfully denying a person who because of age, health or disability requires medication, medical care, shelter, accessible shelter or services, food, therapeutic device, or other physical assistance, and thereby exposing that person to the risk of physical, mental or emotional harm.
 Knowing conduct which is not necessary to accomplish a purpose that is reasonable under the circumstances which would cause a reasonable person emotional distress and does not cause emotional distress to the petitioner.
 Defines domestic violence as a crime.
 Committing or threatening physical abuse, harassment, intimidation or willful deprivation so as to compel another to engage in conduct from which he/she has a right to abstain.
 Includes spouses, former spouses, parents, children, stepchildren, and other persons related by blood or by present or prior marriage; persons who share or formerly shared a common dwelling.
 Includes sexual abuse as well as knowing or reckless use of physical force, sleep deprivation, and/or conduct, which creates an immediate risk of physical harm.

CASE STUDY

	F	amily Members
Dick Walker	36 years old	Stepfather to Janet; biological father to Jack
Sue Walker	32 years old	Mother
Janet Walker	9 years old	Daughter
Jack Walker	4 years old	Son

Instructions: Read the case study written below and **underline or highlight** the symptoms that Janet displays that could be indicative of domestic violence.

The Agency received a call from the school nurse, Ms. Atkins, reporting possible domestic violence. Janet Walker has been attending the same school since the second grade; she is now in the fifth grade. Here are the facts as reported by her teacher:

- Janet has always been a little quiet, but friendly. A few months ago she started arguing with other children in her class.
- Until the beginning of the school year, Janet's schoolwork was above average; but in December, her grades started slipping and she was caught sleeping in class. She has also been absent from school at least once a week for the last month.
- Ms. Atkins called Mrs. Walker who stated that Janet was getting over a bad case of the flu and was having trouble sleeping at night.
- Janet's behavior in school continued to worsen and just yesterday she hit one of her classmates.
- Her grades have also continued to decline. She hasn't been completing her homework, and she failed a math test earlier in the week.
- A letter was sent to Mr. and Mrs. Walker with no response.
- Ms. Atkins called the Walker home and spoke with Mrs. Walker about Janet's aggressive behavior and poor grades. Mrs. Walker responded by saying that Janet would be transferred to a private school. The teacher told Mrs. Walker that Janet's behavior needs to be addressed no matter what school she attends. Mrs. Walker said she would talk with Janet about it.
- Since that conversation, Janet hasn't been attending school and there is no record of a transfer. Ms. Atkins is very concerned that there may be something going on in the home that's causing the changes in Janet's behavior.

TRAUMA SYMPTOMS SHOWN BY CHILDREN

Symptoms children display that **can be** indicative of being primary or secondary victims of domestic violence include:

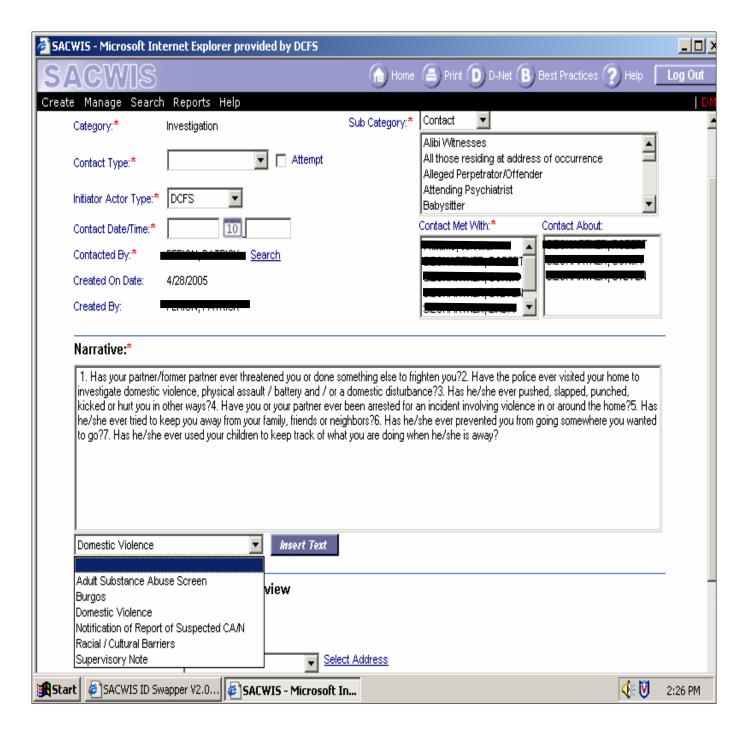
Eating and sleeping disorders
Guilt, when the child believes that he/she is the cause of the abuse
Becoming frightened easily, anxious, clingy or frequently crying (if child is under the age of five)
Adolescent alcohol and drug abuse
Teen dating violence (especially between ages of 16-24)

CIRCUMSTANCES REQUIRING DOMESTIC VIOLENCE SCREEN

The circumstances that require a domestic violence screen include:	

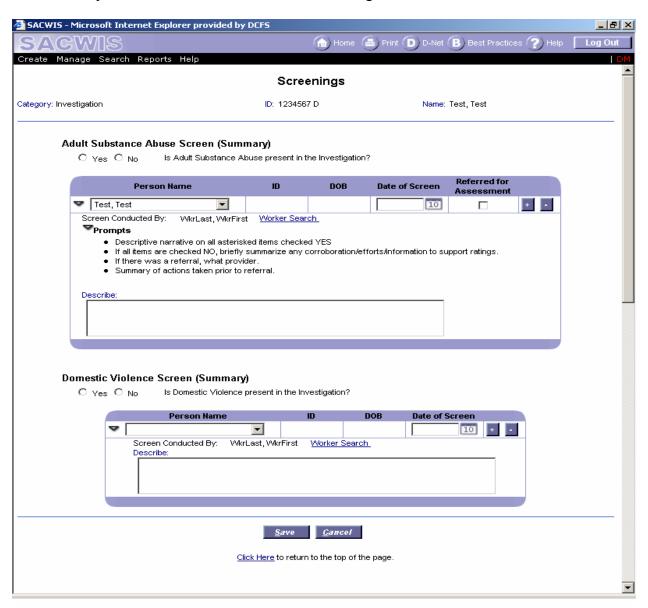
CURRENT SACWIS DOMESTIC VIOLENCE SCREEN PRINT

This screen print is currently only used by Child Protection Investigators.



FUTURE SACWIS SCREENING WINDOW FOR CHILD PROTECTION INVESTIGATOR:

This is a sample of the new domestic violence-screening window.



Instructions: Study both screens and **list below the major differences** between them.

Changes include:	 	

DOMESTIC VIOLENCE SCREEN MILESTONES CHILD WELFARE SPECIALIST/INTACT FAMILY SERVICE WORKERS

Instructions: Answer True or False to each of the statements about milestones for completing a domestic violence screen.

- T F 1. Within 7 days of case assignment.
- T F 2. As part of the 45-day assessment.
- T F 3. Prior to transferring the case to a new worker.
- T F 4. Every 3 months as part of the ongoing assessment.
- T F 5. Whenever domestic violence is suspected or identified.
- T F 6. Whenever considering screening the case with the State's Attorney.
- T F 7. Immediately after staffing the case for closure with the intact family supervisor.

DOMESTIC VIOLENCE SCREEN MILESTONES PERMANENCY WORKERS

Instructions: Answer True or False to each of the statements about milestones for completing a domestic violence screen.

- T F 1. Within 30 days after initial case assignment.
- T F 2. When considering the commencement of unsupervised visits in the home of the parent or guardian.
- T F 3. After an administrative case review when the child in care has a return home goal.
- T F 4. Within 36 hours prior to returning a child home.
- T F 5. Within 5 working days after a child is returned home and every month thereafter until the family case is closed.
- T F 6. When considering whether to close a reunification service case.
- T F 7. Whenever evidence or circumstances suggests presence of domestic violence that poses a risk or safety concern for the child.

DOMESTIC VIOLENCE SCREEN MILESTONES CHILD PROTECTIVE SERVICE WORKERS

Instructions: Answer True or False to each of the statements about milestones for completing a domestic violence screen.

T	F	1.	Within 5	5 days	of the	initial	investigation.

- T F 2. Prior to handoff staffing.
- T F 3. Whenever domestic violence is suspected or identified.
- T F 4. At the beginning of the investigation.
- F 5. Workers may recertify the domestic violence screen prior to the case handoff or at the close of the investigation when case circumstances have not changed.

DOMESTIC VIOLENCE INDICATORS

Based on the complaint made by Janet's teacher, you make a home visit to interview the family. Only Mrs. Walker and the children are home. Apparently Mr. Walker doesn't get home from work until later in the evening. You first interview Mrs. Walker while the children are out of the room.

- When you enter the home, you notice that it is rather unkempt and the walls of the living room have a few small holes.
- You also note that, in spite of the heat, Mrs. Walker is wearing a long sleeve blouse with a high collar. She appears to be very nervous about the interview.
- During your discussion with Mrs. Walker, you discover that Mr. Walker was in a bar fight five years earlier and arrested for assault. As it was a first offense, he served no time in jail but was sentenced three years probation and was required to attend an anger management class.
- Mr. Walker's first wife divorced him after he hit her hard enough to break her nose
- Mrs. Walker tells you that Mr. Walker strongly encouraged her to quit her job after Jack was born. She said that while she enjoyed being a stay-at-home mom, she misses the friends she had at work. Her friends used to call to ask her to go out with them, but since her husband wants her home to take care of him and the kids, she hasn't seen them since she quit work. Now they don't call anymore.
- She also stated that while her husband gives her enough money to run the household, she wishes she had her own money. She admits that she gets a little frustrated by having to ask her husband for every penny. Just last week she asked him if she could get a part-time job and he refused to allow it.
- While she says that like most married couples they occasional argue, she at first denies that her husband is abusive in any way towards her or the children. When pressed, she admits that sometimes his anger frightens her.
- Mrs. Walker denies that the children have ever heard them argue.
- In addition to Janet's problem in school, you discover that Jack is also having behavioral problems. He recently started having temper tantrums, screaming and crying when he doesn't get his own way. Most recently, he's started having nightmares.

Indicators include:	 	

INTERVIEW GUIDELINES

When domestic violence is a case issue, interviews much be conducted with the adult victim and children away from the perpetrator to assess level of risk and safety to the children. Interviews should only be conducted when it is safe to do so, and workers should follow the guidelines for conducting domestic violence interviews.

Safety is top priority				
Privacy				
Confidentiality				
Order of interview				
o Adult victim				
o Children				
o Perpetrator				
Build an alliance with victim				
Interview perpetrator in non-threatening manner				
If perpetrator denies, don't force the issue				
Duty-to-Warn situation				

INTERVIEWING THE ADULT VICTIM

The interview with the adult victim helps assess the level of risk to the children and caretaker, as well as the impact of domestic violence on the children. Because victims of domestic violence may be in denial about the effects of the violence on the children, questions regarding the children's safety need to be asked after the first few sets of general questions concerning domestic violence.

Instructions: Record your notes from the caseworkers interview with Mrs. Walker and document below what you think was effective and ineffective about the caseworkers interview.

Effective	Ineffective

INTERVIEWING A CHILD

Interviewing the child will help determine:

- The child's account of the violence
- The impact of witnessing the violence
- The child's concerns about safety

Instructions:	Read Pages 8-9 of Attachment B: Interview Tools for Assessing
	Domestic Violence, and be ready to answer the following questions in
	a group discussion.

1.	What is a good way to start the conversation?
2.	What might older children do to protect their parents?
3.	What are three questions you could ask to get the child's account of what he/she saw?
4.	What questions could you ask to assess the impact of the child's exposure to violence?
5.	What questions might illicit the child's concerns about safety?

INTERVIEWING THE PERPETRATOR

Instructions: Read Pages 10-12 of Attachment B: **Interview Tools for Assessing Domestic Violence**, and be ready to answer the following questions in a group discussion.

	a group discussion.
1.	What are five indicators of the perpetrator profile?
2.	What indicators are associated with increased danger in perpetrators?
3.	What factors must be considered when assessing potential lethality in families where there is domestic violence?
4.	What situations can trigger violence in batterers?
5.	What does the worker do if a perpetrator threatens or tries to intimidate her?
6.	What are two key considerations when interviewing the perpetrator?
7.	What is at least one question the worker might ask the perpetrator?

COLLATERAL CONTACTS

Collateral contacts must be made with individuals who can provide information concerning the safety and well-being of the children, parental functioning, home environment, as well as the relationship between the adults and children.

Instructions: Identify the individuals	- WIIO (
	_	
	-	
DOCH		
DOCU	WIE.	NTATION
	nent ar Detern	
Additional notes		

LEVEL OF INVOLVEMENT

The level of Department involvement is individualized and in correlation to the assessed safety and risk issues of the children:

•	When significant indicators of domestic violence exist based on Domestic Violence Screen
•	Two-pronged test
•	Offer domestic violence brochure
•	Refer to Domestic Violence Practice Guide
•	Involve your supervisor

SAFETY PLANNING

In order to reduce risk to the child, and to protect the child by protecting the mother, workers need to evaluate the immediacy and severity of potential violence and develop safety plans with both the adult victim and the children. There are five safety planning activities:

- 1. Safety planning when the perpetrator poses an immediate risk
- 2. Safety planning with the adult victim
- 3. Safety planning with adults for the children's protection
- 4. Safety planning directly with the children, as appropriate
- 5. Safety planning for the worker

Case Study

Once Mrs. Walker admitted that her husband hits her, it was as if a dam had broken. She stated that the abuse has been happening with increased frequency and that she is beginning to fear for her children. You interview both children who state that they started witnessing the abuse several months ago, which coincides with the start of their behavioral problems. But, they both deny that their father ever hits them. You've gotten corroborative information from several collateral contacts. Mrs. Walker states that she isn't yet ready to leave her husband, but she does want to feel safer. You help her set up a safety plan.

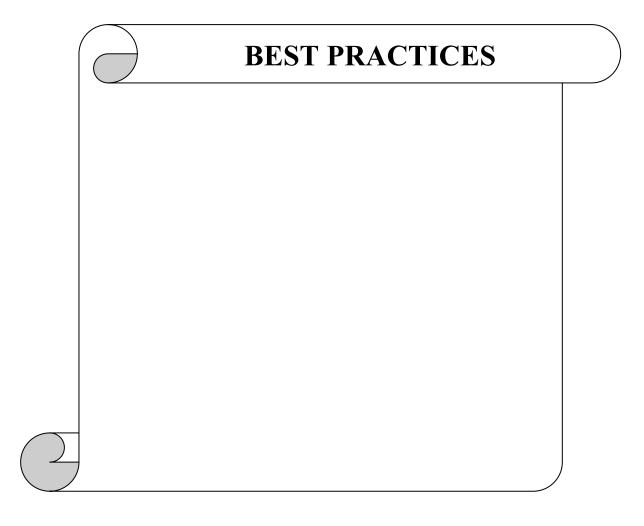
Instructions: Given the fact that Mrs. Walker isn't yet ready to leave her husband, what are some of the safety options she has available to her? Write the ideas generated by the group in the space below.

Options include:					

WORKER SAFETY

Learning to identify dangerous behavior and planning for your own protection is crucial when working with domestic violence. You need to use extreme caution when intervening in a family, because your involvement may increase the risk to the family and yourself due to the threat it poses to the perpetrator's control of the situation.

Instructions: What are some of the things you do to protect yourself? **Write your answers below.**



SERVICE PLANNING ACTIVITIES

ACTION PLAN

What am I going to do to implement something I learned in this training? By when?
How am I going to do it?
Who/what do I need to help me do it?
Who, what do I need to help the do it.
What are the obstacles that may prevent me from doing it? How will I overcome them?
them:

Attachment A Domestic Violence Practice Guide Path

	DCP INVESTIGATION					
	Activity	Requirements	Comments			
1a.	Determine if domestic violence is present and presents risk or safety issues to the child.	 1a. Complete CANTS 17A/DV,	At this stage of the investigation, engaging the adult victim is critical. Remember fear of judgment, victim blaming or the removal of children may obstruct disclosure. Before introducing the Domestic Violence Screen, the investigator should			
1b.	Domestic violence is present and CERAP indicates the child is unsafe,	Move immediately to Safety Planning. Give non-offending adult victim less intrusive options before taking protective custody.	summarize the Department's philosophy and intent regarding domestic violence.			
1c.	Domestic violence is present and CERAP indicates the child is safe.	1c. Complete the domestic violence interviews to determine if the risk is high based on the information available. Offer adult victim confidential referral to domestic violence services whether or not a case is opened.				
		Interview				
	Interview adult victim (Domestic Violence Interview Guidelines, Attachment B) to determine risk level to the child. Interview the child (Domestic Violence Children's Interview Guidelines,	 2a. The interview must be completed when the adult victim is alone. Continue to 2b if domestic violence is identified. Assess past and current child protective factors. Document in record. 	Use creativity if needed to talk alone, e.g. call adult victim at work, meet away from home, etc. If information indicates that interviewing the batterer will place you or the children and adult victim in danger, do not conduct the batterer interview until safety can be assured.			
2c.	Attachment B). Assess risk level of batterer	 completed when the child is alone. Document in record. 2c. Contact police to see if they	Assessment of batterer helps to determine the level of danger and potential lethality.			
	using the Domestic Batterer Interview Guidelines (Attachment B).	have responded to reports of domestic violence at victim's address. Document in record. Consult with your supervisor to determine whether it is safe to interview the batterer.	Do not confront batterer with statements made by the adult victim or children. Batterers often retaliate against adult victims or children for disclosing domestic violence. Use third party documentation such as police reports as much as possible.			

Deleted: ¶

Interview (Continued) Activity Requirements Comments				
2d. Assess level of risk to the child.	2d. Use the tools in this practice guide to help determine the level of risk to the child.			
	Review Results of Investigation			
3a. Review results of interviews and other contacts.	3a. Complete a review of the investigative file and consult with the supervisor if the report information is inconsistent. Document consultation in case record.	If there appears to be battering by both partners, examine the following elements to determine if one partner is the primary aggressor of the violence and the other is responding in self-defense: • Who holds control or power in the relationship? • Who has been injured? • Who has access to resources? Obtain court and police records to help determine this.		
3b. Non-abusing adult victim denies domestic violence or seems to resist services.	3b. Determine the reason for the resistance. Consult with your supervisor. Give the adult victim an accurate assessment of the available service options.	Consult with supervisor to help determine if adult victim is keeping silent for the following reasons: • Fear of retaliation from the batterer • Fear of children being removed • Ability to assess danger is impaired due to severe trauma or other factors such as mental illness, developmental disabilities, etc. Encourage the non-abusing adult victim to seek services for self and children. • Tell non-abusing adult victim that the violence is the choice of the batterer. • Repeatedly voice your concern for both their safety and the safety of their children.		
3c. Adult victim continues to decline to seek services and the level of risk to the involved children is high.	3c. Ensure protection of children through: In-home services; Wrap services; Voluntary placement with others; or Protective custody. Inform the non-abusing adult victim in advance of any plans by the Department.	Adult victims often blame themselves and can be greatly empowered toward seeking safety by the simple statements above. Often the adult victims who remain silent about the domestic violence are the ones who are in the greatest danger and are trying to protect the family by keeping silent.		

Review Results of Investigation (Continued)				
Activity	· · · · · · · · · · · · · · · · · · ·			
		Do not attempt to force a disclosure about domestic violence.		
		When planning interventions remember that batterers' violence often escalates when there is outside intervention and when the victim takes steps to leave. Make sure that a safety plan is in place.		
	Follow-Up			
A. a. Implement follow-up services for children and adult victim based on risk and service levels.	4.a. Service tasks for adult victims must include the following: • Integrate domestic violence issues in CERAP safety planning for self and children.	Do not inform batterer of adult victim's whereabouts or safety plans.		
	The appropriateness of the following services must be considered for all victims: • Counseling through a specialized domestic violence program; • Legal assistance including orders of protection; and • Shelter.	Services may include: Supportive counseling for self and children to process the effects of domestic violence Counseling to address personal safety issues in order to protect self and children from abusive partner Education on the effects of domestic violence on children Other services secured on behalf of the adult victims may include: Wrap services In-home services Parent support groups Medical services Transportation		
4b. Implement service tasks for batterer.	4b. Service tasks for batterers must include the following: • Will not behave in a manner that is verbally, emotionally, sexually, or physically abusive toward partner or children; • Will not force children to witness or participate in abusive behaviors;	Other possible service tasks for batterers include the following: • Will participate in a specialized DHS- approved partner abuse intervention program and follow all recommendations • Will be educated regarding the effects of domestic violence on children		

Follow-Up (Continued)					
Activity	Requirements	Comments			
	Will follow all conditions of court orders and Probation.				
4c. Interventions that are inappropriate	4c. Avoid the following interventions in cases of domestic violence: Couples therapy; Anger management groups and other non-DHS approved offender treatment options; Visitation arrangements that endanger adult victims or children; Options that the adult victim tells you will put the family in greater danger shall not be considered without supervisory consultation; Family therapy that includes the batterer; and Court mediation/divorce mediation.	In some areas throughout the state the court may mandate couples counseling even where an objection is voiced. In such circumstances, case documentation could be helpful for future advocacy. The worker should also be aware that some victims will insist on couples or family counseling. Should this occur, make sure that the victim is fully informed of the pros and cons.			
4d. Issues of confidentiality.	4d. Confidentiality guidelines must be followed: Confidential addresses of victims seeking safety should not be in record. Disclosures by adult victim or children regarding their safety should not be shared with the batterer. When information must be shared, such as in court proceedings, adult victims should be notified in advance so as to plan for their safety.	Workers that have questions concerning the legal use of confidential domestic violence information obtained from the family to provide appropriate child welfare intervention services should consult with their regional counsel or supervisor.			
Review and Monitoring					
5a. Measure the batterer's progress.	 5a. Measurement of batterer progress must consider if batterer: Has completed a DHS-approved partner abuse intervention program; Is in compliance with court orders; Stopped all physical force against the victim; 	Use treatment reports and drop-in visits, in-person contact or other concrete documentation to determine progress. Continue to use the SACWIS/CANTS 17A/DV, Domestic Violence Screen, to determine if domestic violence is present.			

Review and Monitoring (Continued)			
Activity	Requirements	Comments	
5b. Measures adult victim's progress.	 Stopped threats of violence; Stopped other acts of intimidation; Stopped monitoring, harassing or stalking of victim; Supports victim's friendships and other activities; Accepts victim's right to set limits or say no. 5b. Case management inquiry must consider: Ability to use a safety plan if one was developed; Ability and willingness to continue to work on safety issues with the worker; Level of motivation to seek help and support from community services. 		

Attachment B Interview Tools for Assessing Domestic Violence

Domestic Violence Interview Guidelines

This interview with the adult victim will help to assess the level of risk to the children and caretaker as well as the impact of domestic violence on the children. Because victims of domestic violence may be in denial about the effects of the violence on the children, questions regarding the children's safety need to be asked after the first few sets of general questions concerning domestic violence.

Tell the client that you will not tell the partner about anything said here. Also explain that you cannot grant anyone a guarantee of confidentiality for information that is essential for case planning, service delivery, court actions or Administrative Hearings.

Assure the client you are concerned about the caretaker's safety as well as the children's safety.

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

Listen carefully to the responses to get a sense of the tone of the relationship.

If you sense that violence or severe control is present from the responses to the above questions, proceed to the following questions. The following questions will help you assess if the victims are in danger.

The following question will help you identify the perpetrator's level of control and the amount of freedom the adult victim has in the relationship:

Has your partner ever tried to control what you do? (Probe using the following examples if the victim does not understand or is hesitant.)

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

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

Has your partner ever acted in a way that hurt you? (Probe using the following examples if the victim does not understand or is hesitant.)

- Has you partner called you degrading names, emotionally insulted you, humiliated you at home or in public, destroyed your possessions (e.g., clothes, photographs), broken furniture, pulled the telephone out?
- Has your partner threatened to injure you, him or herself, your children, or other family members? Has your partner hit, slapped, pushed, kicked, choked or burned you?
- Has he or she threatened to use a weapon or used a weapon?
- Has he or she threatened to kill you, hurt your pets or engaged in reckless behavior (e.g., drove too fast with you and the kids in the car)?
- Has your partner behaved violently in public or been arrested for violent crimes?
- Has he or she forced you to perform sexual acts that make you feel uncomfortable, prevented you from using birth control, withheld sex, hurt you during pregnancy; forced you to engage in prostitution or pornography?
- Has your partner forced you to use drugs?

The following question will help you to assess the level of risk to the children.

Have you been concerned with how your partner behaves toward the children? When you speak up on behalf of your children, how does your partner respond? (Probe using the following examples if the victim does not understand or is hesitant.)

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

Has your child:

- Overheard the yelling and/or violence?
- Behaved in ways that remind you of your partner?
- Physically hurt you or other family members?
- Tried to protect you?
- Tried to stop the violence?
- Hurt him/her?
- Been fearful of leaving you alone?

• Had problems at home, school or day care, such as aggressiveness, violent behaviors, bed-wetting, sleeping problems, nightmares, etc?

The following question will help you determine the history of seeking help.

Have you sought help in the past and if so what happened? (Probe using the following examples if the victim does not understand or is hesitant.)

- Have you told anyone about the abuse?
- Have you seen a counselor and/or left home as a result of violence? If you left home, where did you go and did you take your children with you?
- Have you called the police, made a criminal complaint, filed for an order of protection or used a battered women's group or shelter?
- Have you ever tried to fight back?

General questions:

- 1. How dangerous do you think your partner is?
- 2. What do you think your partner is capable of?
- 3. Do you have any current injuries or health problems?
- 4. How has this relationship affected how you feel about yourself, your children, the future?
- 5. How do you explain the violence to yourself?
- 6. How do you believe your children understand the violence?
- 7. What do you believe would help keep you and/or your children safe?

If the adult victim seems to be in great danger, then the children may be too. Postpone the Domestic Violence Interview of Children until safety is achieved for adult victim and children.

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

Domestic Violence Children's Interview Guidelines

This interview will help to determine:

- Children's account of the violence,
- Impact of witnessing the violence, and
- Children's concerns about safety.

Child's Account of What He/She Saw

Worker: "Sometimes when grown-ups fight they get angry, and we know this is very scary for children. I want to ask you a few questions about when your parents fight and what you think about it."

Note: Older children are more likely to try to protect parents by minimizing reports of parental fighting. Younger children may be more spontaneous and less guarded with their reports.

- 1. What kind of things does mom and dad (or name of partner) fight about?
- 2. What happens when they fight?
- 3. Do they yell at each other?
- 4. Do they hit each other?
- 5. What do you do when this is going on?
- 6. How do you feel when this is happening?
- 7. Do you ever get hit or hurt when mom and dad are fighting?

Assessment of Impact of Exposure to Violence

- 1. Do you find that you think about your parents fighting a lot?
 - a. When do you think about it?
 - b. What do you think about?
- 2. Do these thoughts when you are at school or while you are playing?
- 3. Do you ever have trouble sleeping at night?
 - a. Why?
 - b. Do you have nightmares?

Child's Worries About Safety

- 1. What do you do when mom and dad are fighting?
 - □ Stay in the same room
 - □ Go to older sibling
 - □ Leave/hide
 - □ Ask parents to stop
 - □ Phone someone
 - □ Other
 - □ Run out/get someone
- 2. When mom and dad are fighting, what do you worry about the most?
- 3. Have you talked to any other grown-ups about this problem?
- 4. Who would you call in an emergency?
- 5. What is their telephone number?
- 6. What would you say?

The permanency worker should help the children and adult victim decide where to go (e.g., another room or a neighbor's house) if there is domestic violence.

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

Domestic Violence Batterer Interview Guidelines

Identifying Batterers

Most batterers appear harmless to outside observers; in fact, they often appear charming or mild-mannered to those outside of their household. As you review case information, keep in mind the following indicators of the batterer profile:

- Constant blaming of everyone but self;
- Obsessive behavior (e.g., jealous, accusatory);
- Threatening (e.g., suicide, violence, kidnapping, harming those who attempt to help);
- Stalking;
- Presents like a victim (Tries to convince you that they are the real victims.);
- Vengeful (e.g., files an order of protection against the victim);
- Powerful (Batterer may be in a position of power or report having friends in positions of power through wealth, organized crime or professions such as law enforcement.);
- Paranoid/ hypersensitive;
- Criminal record of violent offenses (Check batterer's criminal record.);
- Belligerent toward authority figures, which may include you as a DCFS worker. However, the opposite may also be true. The Batterer may act harmless and even compliant to outsiders

Assessing Risk Level of Batterers

The following indicators are associated with increased danger in batterers:

- There is current alcohol or drug abuse. Never meet with batterers when they are under the influence of alcohol or drugs;
- The batterer has access to weapons; or
- The batterer has been trained in the martial arts or boxing.

The following factors must be considered when assessing potential lethality in families where there is domestic violence. The presence of any of these factors could increase risk of homicide committed by batterer, adult victim, or children and all interventions should be planned with this possibility in mind:

- The batterer's access to adult victim;
- Frequency and severity of abuse in current, concurrent or past relationships;
- The batter's use, presence or threats with weapons;
- Threats to kill self, adult victim, children, or family members;
- Adult victim says the batterer has weapons in the home (When this factor is present, the
 worker should confer with his or her supervisor and seek the assistance of law
 enforcement before proceeding.);
- Hostage taking (e.g., not allowing adult victim and children to leave);
- Stalking:
- Past criminal record;
- Violence toward partner in public;

- Obsession with victim;
- Ignoring negative consequences of violence (e.g. continuing violence in spite of being on probation, out on bail, or under Department's scrutiny);
- Depression or desperation;
- Psychosis, mental illness, or brain damage;
- Certain medications;
- Suicidal ideation of victim, children, or abuser;
- Adult victim's use of physical force;
- Children's use of violence;
- Past failures of systems to respond appropriately.

Certain situations can also trigger violence in batterers. The following situations can pose a risk of violent confrontation:

- Adult victim is preparing to leave (e.g., shelter, order of protection, separation or divorce);
- Children are going to be removed;
- Batterer has just been released from jail or is facing serious criminal charges and possible incarceration;
- Allegations are made directly to the batterer regarding either domestic violence or child abuse and neglect;
- Batterer is asking for information regarding the family's location after a separation;
- Permanency plan goal changes to adoption.

Any batterer is potentially very dangerous and only a small number of batterers fall into the categories below. However, the following three-batterer types create special cause for concern.

The Obsessed Batterer

- Very jealous
- Makes irrational accusations
- Cannot tolerate separation from partner
- Monitors partner's whereabouts through calls, questioning of children and others, checkup visits, etc.
- Makes threats to kill partner if partner leaves
- Says, "If I can't have you, no one will."

This type of batterer is the most likely to stalk, kill or injure the partner, even months or years after the partner has left or obtained an order of protection.

The Sadistic Batterer

- Inflicts severe pain or torture to partner such as burning, starving, beating for hours, etc.
- Violence has a bizarre, depersonalized character
- Profound lack of consideration of partner as a person, e.g., beating just after an operation

- Assault without any warning or provocation
- Terrorizes spouse through continuous degradation
- Likely to retaliate severely against partner even as acting accepting of what you say
- Frequently has no criminal record
- Usually employed, sometimes in a prestigious position

The Hyper-Violent Batterer

- Takes offense easily
- Even mild attempts at limit-setting can trigger violence
- Views many situations as challenges to courage and feels a need to always prove self
- Often has a long criminal record resulting from bar fights, brawling, assault and battery charges, etc.
- Generally violent
- Can be very dangerous to partner, especially if partner fights back
- Usually has very belligerent relationships with authority figures and may assault you if feeling challenged

It is extremely important to refuse to work with this type of batterer if they threaten you or try to intimidate you.

Interview With Batterer

Do not confront the batterer with statements made by the adult victim or children. This will put the victim and children at increased risk of harm. When referring to the batterer's behavior, use third party reports such as police reports.

Conduct this interview only if doing so does not put you or the adult victim and children at risk.

- 1. Tell me about your relationship.
- 2. Tell me three things you like about your partner and family.
- 3. How does your family handle conflict?
- 4. What kinds of things do you expect from your partner/family?
- 5. What do you do when you don't get your own way?
- 6. Have you ever been so angry that you wanted to physically hurt someone?
- 7. Have you ever forcefully touched anyone in your family? In what way?
- 8. Have you ever been told that violence is a problem for you? By whom?

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

Attachment C Domestic Violence Risk Factors

This risk factor list may be used as a tool in helping to determine the level of risk. It is only a reference guide and not needed for documentation.

- A child injured due to domestic violence.
- The batterer has struck the adult victim while victim was holding a child.
- The child at risk of injury while trying to intervene in an incident of domestic violence.
- Weapons are used in assault.
- Adult victim has a history of serious injuries.
- There is significant substance abuse that contributes to the domestic violence.
- Adult victim has had a major physical injury or hospitalization due to domestic violence.
- Adult victim has been injured during pregnancy.
- Batterer has made death threats or threats of serious injury.
- Batterer stalks adult victim and children.
- Batterer has committed sexual assault of adult victim.
- There are multiple family stressors.
- The batterer's whereabouts are unknown.
- There are frequent, chronic domestic violence assaults.
- The adult victim and children have significant fear of the batterer.
- The adult victim and children have no plan for protection from domestic violence.

Guidelines for Assessing the Impact of Domestic Violence on Children

The following questions for the adult victim of domestic violence can be used to help ascertain the physical, behavioral, emotional and social impact of domestic violence on the children.

Note: Victims may deny or minimize the effect of domestic violence on the children. The adult victim is more likely to answer these questions realistically if you ask them after you have asked the general domestic violence questions.

Physical

- Does your child have any medical problems?
- Does your child have injuries or other health issues due to domestic violence?
- Has your child had bruises, broken bones, black eyes, burns, or pain?
- Has your child suffered unconsciousness due to hitting or choking?
- Has your child been injured by weapons?
- Has your child's health changed in recent months?

Emotional

- Has your child had emotional changes?
- Is your child withdrawn, sad, exhibiting increased irritability, anxiety or having nightmares?
- Has your child had suicidal thoughts or acts?

Behavioral

- Is your child having behavior problems at home, school, or with peer relationships?
- Has your child used physical force or threats against you or others?
- Is your child dealing with anger in ways that disturb you?
- Is your child having problems eating, sleeping, running away, alcohol or drug abuse, sexual behavior, cutting themselves, harming animals or destroying toys?

Social

- Does your child have learning problems?
- Does your child have problems making friends?
- Has your child changed schools due to moves?
- Does your child get along with peers or adults?

Other

- Is your partner interfering with your ability to take care of your child, in considering the child's best interests or keeping your child safe?
- Do you feel supported in parenting your child by your partner?
- Is your partner able to take care of your child? To keep the child safe?
- Does your partner use your child to control you?
- Does your partner use physical force against your child?

Adapted from the Family Violence Prevention Fund's publication entitled Domestic Violence: A National Curriculum for Children's Protective Services, written by Anne Ganley & Susan Schecter

Protective Factors to Consider in Domestic Violence

The following protective factors may be considered as strengths in domestic violence interventions.

Perpetrator's Resources to Stop the Abuse

The batterer:

- Halts the abuse of the victim or children;
- Acknowledges abusive behavior as a problem;
- Acknowledges responsibility for stopping the abuse;
- Cooperates with current efforts to address abusive behavior;

- Is aware of the negative consequences of abusive behaviors on the victim, children, and the batterer's physical well-being, self-image, legal status, social relationships and employment;
- Cooperates during the interviews;
- Is committed to victim safety;
- Demonstrates ability to comply with court orders and case plans;
- Is respectful of limits set by victim and/or agencies;
- Supports parenting efforts of adult victim;
- Considers children's best interests over parental rights.

Victim Resources

The victim:

- Has the ability to plan for children's safety;
- Is willing to seek help.
- Has belief in children and self;
- Is resistance to the perpetrator's victim-blaming;
- Has work skills;
- Use of available money, time and material goods;
- Has parenting skills;
- Is knowledgeable of the abuser and the situation;
- Is healthy and has physical strength;
- Uses safety strategies for self and children;
- Has a support system.

Children's Resources

The children:

- Have the ability to follow safety plans:
- Have a positive relationship with the adult victim, siblings, other family members or neighbors;
- Are school age;
- Do not have developmental issues;
- Take appropriate actions during violence:
- Seek help during a domestic violence incident;
- Follow instructions from the adult victim about what to do during a domestic violence incident.

Community Resources

- Victim advocacy/support services
- Effective criminal justice response to domestic violence (e.g., police, prosecutors, courts, and corrections)
- Effective civil and family court response to domestic violence
- Welfare and social services

- Health care services
- Safe housing
- Spiritual services
- Family/friends of the victim
- DHS approved partner abuse intervention programs
- Substance abuse treatment

Adapted from the Family Violence Prevention Fund's publication entitled Domestic Violence: A National Curriculum for Children's Protective Services, written by Anne Ganley & Susan Schecter

Worker's Plan For Protection

Learning to identify dangerous behavior and planning for your own protection is crucial when working with domestic violence. You will need to use extreme caution when intervening in a family. Your involvement may increase the risk to the family and yourself due to the threat it poses to the batterer's control of the situation.

Do not go to a home until you have carefully considered the following guidelines if domestic violence is present and you believe your intervention may place you at risk.

- Consult with your supervisor about your concerns.
- Consider taking a co-worker or police officer to the home.
- When doing an assessment or interviews with the family, always be aware of triggers for violence outlined in the Batterer Assessment section (e.g., adult victim is preparing to leave).
- If the domestic violence perpetrator has a violent criminal record or is on probation, a probation officer should be contacted and perhaps accompany you to the home.
- Whenever possible, the worker should meet with the batterer in the office.

Plan accordingly when working in high-risk situations.

- Never meet with the batterer alone. Whenever possible meet at the office or take a colleague.
- Be careful when leaving the visit or your office. Park your vehicle in a safe place.
- Contact law enforcement if a LEADS check shows criminal record or violent offenses.
- Notify your colleagues that a potentially dangerous client is coming in to meet with you and where and when you will meet.
- Whenever possible chose a room to interview the batterer in that has multiple exits to facilitate your exit from the room if the need arises.
- If possible, have security nearby. Know your office's emergency procedures.

If you find yourself in a dangerous situation:

- Trust your instincts.
- If you feel afraid, you are probably unsafe.
- Stay calm.

- Know that the batterer will try to test your limits.
- Do not to engage in confrontation.
- If you feel anger directed at you, explain that you are there to help and end the visit.
- Always notify the adult victim to discuss safety options when you are aware of an escalation in the batterer's anger and/or in the risk to the adult victim and children.

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

Attachment D Domestic Violence Service Plans

Adult Victim Plan

The DCFS or purchase of service permanency worker assigned to the case will complete the service plan in accordance with **Procedures 305**, **Client Service Planning**. The input of all participants in the case must be sought in developing the service plan.

Note: Administrative case reviews shall be segmented to protect the confidentiality of the adult victim and children.

Safety When Preparing to Leave

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

Items to Remember

- Identification
- Mine and my children's birth certificates
- Social Security cards
- Order of Protection
- Custody orders
- School and medical records
- Money, bankbooks, credit cards
- Keys to house, car, office
- Driver's license and registration

- Medications
- Welfare
- Passports, green cards, work permits
- Divorce papers
- Lease/rental agreement, house deed
- Insurance papers
- Address book and picture of abuser
- Items of sentimental value (e.g., jewelry)
- Children's favorite toys and blankets

Safety When the Relationship Ends

- Plan to change the locks, install a security system, smoke detectors, and outdoor lighting system. If the victim is involved in a criminal case, check with the State's Attorney's Office for possible cash assistance to purchase any of the above items.
- Inform friends and neighbors that my partner no longer lives in my home and that they should notify the police or me if my ex-partner is seen in the area.

- I will provide school personnel and my children's caregivers with copies of my order of protection and a list of persons that I have authorized to pick up my children.
- I will avoid locations where I may run into my batterer (e.g., bank, stores, and restaurants).
- I can obtain an order of protection from the court in my county. I will keep the order with me at all times and place a copy of the order in a safe place or with someone that I trust. I will notify the police of any violations of the order of protection.
- I will make a plan to contact someone for support, such as a friend or family member. I will call a hotline and/or attend a support group if I feel down or ready to return to a potentially abusive situation.
- I will make a list of important telephone numbers that include my local police, friends, the domestic violence hotline (1.800.799.7233) and the child abuse hotline (1.800.25.ABUSE).

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

Domestic Violence Protection Planning With Children

Explore the following issues with the adult victim and the children.

- How the children can escape from the house if an assault is in progress. If they cannot escape, what room in the house is the safest for them?
- How the children can avoid getting in the middle of an assault.
- Where they can go in an emergency. Ask the children to explain what they will do, step by step.
- How to call the police. Have them practice what to say.
- How to call supportive family members, friends or community agencies for help. Have them practice what to say.

Domestic Violence Protection Planning with Adults for Their Children

Explore the following issues with the perpetrator.

- What do you intend to do to stop your violent behavior?
- Will you respect court orders by removing weapons from your home, car, and environment; stop using alcohol or drugs; leave the house (like using time outs); go to counseling to ensure that the abuse stops and your family is safe?

Explore the following issues with the adult victim

- In what way can we help you to protect your children? What can we do?
- What have you tried in the past to protect your children?
- What do you need now to protect your children?
- Do you feel that a shelter or a protection order would be helpful to your children?

- If yes, do you want to use these options now?
- If no, what other ideas do you have about ways to keep your children safe (e.g. their temporarily staying with relatives and friends)?

Adapted from the Family Violence Prevention Fund's publication entitled Domestic Violence: A National Curriculum for Children's Protective Services, written by Anne Ganley & Susan Schecter

Example Domestic Violence Service Plan Objectives

CHILDREN

Objective: The child will develop skills to cope with living in a home where there is violence.

Client and Service Tasks

- The child will participate in group or individual therapy sessions for children that have witnessed violence and/or who are victims of abuse.
- The permanency worker will provide the child's caregiver with a list of potential therapy resources and refer the child to the resources selected by the caregiver no later than the date established by the worker.

Evaluation of Progress Toward Achieving Objective

• The service provider will submit a report on child's attendance and progress to the family's permanency worker no later than the date established by the provider and worker.

Objective: The child will develop skills for self-protection that match the child's age and ability.

Client and Service Tasks

- The child will work with adult caregiver and caseworker to develop a domestic violence protection plan.
- The family's permanency worker will help the child and caregiver make a domestic violence protection plan, which will be complete by the date established by the caregiver and worker. The plan will be revised as needed to match the child's situation.

Evaluation of Progress Toward Achieving Objective

• The child will show that he or she knows the domestic violence protection plan by verbalizing it or acting it out.

Objective: The child will utilize non-violent problem-solving skills.

Client and Service Tasks

- The child will participate in group or individual sessions on alternatives to violence.
- The child's caregiver will be provided potential resources for these sessions and the
 permanency worker will make a referral for the service no later than the date established by
 the worker.

 The permanency worker will do joint case planning with the service provider whenever possible.

Evaluation of Progress Toward Achieving Objective

• The service provider will submit a report on child's attendance and progress to the family's permanency worker no later than the date established by the worker and provider. The permanency worker will also utilize reports from family members, teachers, or other persons having contact with the child.

ADULT VICTIM

Objective: The adult caregiver will develop the capacity and willingness to protect her/his children.

Client and Service Tasks

- The adult caregiver will help her/his child make a domestic violence protection plan with assistance from their permanency worker. The plan will be changed as needed to meet the child's needs. The permanency worker will help the caregiver and child practice the plan.
- The adult caregiver will make a domestic violence protection plan for self and child, which
 will include places to go for safe shelter. The permanency worker will assist the caregiver
 and provide referrals for shelter. The plan will be changed as needed to match the family's
 situation.
- The adult caregiver will identify community resources to implement the domestic violence protection plan. The permanency worker will provide services such as transportation and child care to enable the family to access services.
- The adult caregiver will sign a release of information form so that all involved agencies can share case information. The permanency worker will provide the caregiver a copy of the release of information to sign. The permanency worker will also provide an explanation for the need to coordinate services.
- The adult caregiver will take part in education or support groups for victims of domestic violence. The permanency worker will provide referrals for education and/or support group no later than the date established by the worker. The permanency worker will discuss the case with service provider and do joint case planning whenever possible.
- The adult caregiver will learn about the legal options available to victims of domestic violence. She or he will seek appropriate legal options for protection. The permanency worker will inform the adult that there are legal interventions to keep her/him and the children safe. The permanency worker will connect the adult caregiver with the domestic violence advocate based at children services or provide a referral to a local agency no later than the date established by the worker. The permanency worker will discuss the case with the service provider and do joint case planning whenever possible.
- The adult caregiver will look for employment or will attend education or job training programs that will lead to employment. The permanency worker will provide the adult caregiver with potential resources for assistance to obtain employment. The worker will make the referral no later than the date established by the worker.

Evaluation of Progress Toward Achieving Objective

- The child and adult will show that they now have a domestic violence protection plan by telling it to permanency worker or acting it out no later than the date established by the caregiver and worker.
- The adult caregiver will tell the domestic violence protection plan to the permanency worker no later than date established by the caregiver and worker.
- The adult caregiver will access community resources no later than the date established by the caregiver and worker.
- A signed consent for the release information will be placed in the case record.
- The service provider will submit a report on adult's attendance and cooperation to the permanency worker no later than the date established by the provider and worker.
- The adult caregiver will be able to discuss legal options with the permanency worker no later than date established by the caregiver and worker. The adult caregiver will provide the permanency worker with copies of police offense reports, petitions for orders of protection or orders of protection no later than the date established by the caregiver and worker.
- The adult caregiver will provide proof of employment or enrollment in a training program to the permanency worker no later than the date established by the caregiver and worker.

Objective: The adult caregiver will help children cope with and recover from the effects of the domestic violence.

Client and Service Tasks

- The adult caregiver will learn about the effects of domestic violence on children. The permanency worker will refer the adult caregiver to an education program no later than the date established by the worker. The permanency worker will discuss the case with the service provider and do joint case planning whenever possible.
- The adult caregiver will support the children's attendance at therapy sessions by providing or arranging for transportation to therapy sessions. If transportation is a problem, the permanency worker will arrange transportation for the child to attend therapy sessions no later than the date established by the worker.

Evaluation of Progress Toward Achieving Objective

- The adult caregiver will discuss the effects of domestic violence on the children with the permanency worker no later than the date established by the caregiver and worker.
- The service provider will provide the permanency worker with a report on the child's attendance and reasons for any absences no later than the date established by the provider and worker.

BATTERER

Objective: The offending adult will develop the capacity and willingness to protect the children by stopping all abusive behavior toward all family members. Abusive behavior includes physical abuse, sexual abuse, and emotional abuse, threatening and stalking.

Client and Service Tasks

• The offending adult will follow all court orders and probation conditions when those systems are involved. The permanency worker will inform the offending adult that he or she will

- report violations of court orders to the police and probation violations the offending adult's probation officer.
- The offending adult will sign a release of information form so that involved agencies can share information. The permanency worker will provide a release of information consent form that will be signed by the adult.
- The offending adult will actively participate in a DHS approved partner abuse intervention program. The permanency worker will provide the offending adult with referrals for intervention programs no later than the date established by the worker.

Evaluation of Progress Toward Achieving Objective

- The offending adult will not commit acts of violence and obey all court orders and conditions of probation. The permanency worker will obtain this information from law enforcement, the offending adult's probation officer, and interviews with the non-offending adult, children and the offending adult no later than the date established by the worker.
- The signed consent for release of information form will be placed in the case file.
- The DHS approved partner abuse intervention program provider will submit a report concerning the offending adult's attendance, cooperation and progress no later than the date established by the provider and worker.
- The offending adult will discuss with the permanency worker how he or she is stopping the abuse. The discussion will occur no later than the date established by the offender and worker.
- The offending adult's progress will be determined by whether he or she has stopped the violence, threats, intimidation, monitoring, stalking and harassment. Progress will also be determined by whether the offending adult supports the adult victim's parenting, friendships, activities and limit setting.

Objective: The offending adult will assist, not hinder, efforts to help the children cope with and recover from the effects of domestic violence.

Client and Service Tasks

- The offending adult will learn about the effects of domestic violence on children. The
 permanency worker will provide the offending adult with referrals to programs that provide
 information on the effect of domestic violence on children no later than the date established
 by the worker.
- The offending adult will not keep the children from attending therapy sessions; will not follow or go with the children to their therapy sessions; will not discuss or quiz the children on what they discussed with their therapist; will not interfere or undermine the non-offending adult's parenting; will not threaten or harass the non-offending adult or children; will not withhold or threaten to withhold child support; and will not question the children concerning the non-offending adult's activities. The permanency worker will inform the offending adult that he or she will follow the above list of instructions.

Evaluation of Progress Toward Achieving Objective

- The educational service provider will submit a report to the permanency worker on the adult offender's attendance and cooperation no later than the date established by the provider and worker.
- The permanency worker will determine if the offending adult violated any of the boundaries established by the "do not" list by reports from service providers, police reports or witnesses. The permanency worker will obtain reports no later than the date established by the worker.

Adapted from Shim, W. and Poertner, J. (1999). Best Practice: Domestic Violence and Child Abuse and Neglect. University of Illinois – Urbana-Champaign

Attachment E

Illinois Department of Human Services Domestic Violence Victim Services Partner Abuse Intervention Programs

Southern Region - First Judicial Circuit

Domestic Violence Victim Services Programs

The Women's Center, Inc.

610 S. Thompson

Carbondale, Illinois 62901

Camille Doris, Executive Director 618.549.4807 (Administration) 618.529.2324 or (Crisis) 800.344. 2094 or 618.997.2277 618.993.0803 (Sexual Assault)

Cairo Women's Shelter, Inc.

P.O. Box 911

Cairo, Illinois 62914

E. Jeannine Woods, Director 618.734.4357 (Office) 618.734.4357 (Crisis)

Domestic Violence Victim Services Programs

Anna Bixby Women's Center 213 South Shaw Street

Harrisburg, Illinois 62946

Barbara Wingo, Director 618.252.8380 (Office) 618.252.8389 or 800.421.8456 (Crisis)

Batterer Programs

Alternatives to Violence Anna Bixby Women's Center 213 South Shaw Street

Harrisburg, IL 62946

618.252.8380

Contact: April Brown or Myrna Reynolds

Southern Region - Second Judicial Circuit

Domestic Violence Victim Services Programs

• Anna Bixby Women's Center Carmi, Illinois

> Barbara Wingo, Director 618.384.2003 (Office) 618.252.8389 (Crisis)

The Women's Center, Inc.

Marion, Illinois

Kelly Cichy, Executive Director 618.997.0949 (Contact: Jan Trice) 800.234.3094 (Crisis)

Domestic Violence Victim Services Programs

Alice S. Snyder People Against Violent Environments (PAVE)

Mt. Vernon, Illinois

618.533.7233 (Office) 618.533.7233, 618.242.7233, or 800.924.8444 (Crisis)

Stopping Woman Abuse Now PO Box 176

Olney, Illinois 62450

Linda Bookwalter, Director 618.392.3556 (Office) 618.392.3556 or 888.715.6260 (Crisis)

Program services also available in Clay, Effingham & Jasper Counties

Southern Region - Third Judicial Circuit

Domestic Violence Victim Services Programs

Oasis Women's Center
 P.O. Box 981

Alton, Illinois 62002

Margarette Trushel, Director 618.465.1978 (Office) 618.465.1978 or 800.244.1978 (Crisis)

Phoenix Crisis Center, Inc.
 PO Box 1043 Nameoki Station
 Granite City, Illinois 62040
 Nancy Kelley, Executive Director 618.451.1118 (Office) 618.451.1008 (Crisis)

Batterer Programs

 Alternatives to Violence Anna Bixby Women's Center 213 South Shaw Street

Harrisburg, Illinois 62946

618.253.4324

Contact: Butch Davis

Batterer Programs

• Stopping Woman Abuse Now Intervention Program

PO Box 176

Olney, Illinois 62450

618.392.3556

Contact: Linda Bookwalter

 People Against Violent Environments (PAVE)

P.O. Box 342

Centralia, Illinois 62801

800.924.8444 or 618.533.7233

Contact: Kathy Donnelly

Program services available in Mt. Vernon

Southern Region - Forth Judicial Circuit

Domestic Violence Victim Services Programs

 People Against Violent Environments (PAVE)

P.O. Box 342

Centralia, Illinois 62801

Alice S. Snyder, Administrative Representative 618.533.7233 (Office) (Crisis) 618.533.7233, 618.242.7233, and 800.924.8444

Program services also available in Clinton, Washington and Jefferson Counties.

Domestic Violence Victim Services Programs

• Stopping Woman Abuse Now Box 176

Olney, Illinois

618.392.3556 (Office)

618.392.3556 or 888.715.6260 (Crisis)

Program services also available in Christian, Montgomery, Logan and Menard Counties.

 Sojourn Shelter & Service 1800 Westchester Blvd.

Springfield, Illinois 62704

Tami Silverman, Director 217.726.5100(Office) 217.726.5200 (Crisis)

Program services also available in Christian, Montgomery, Logan and Menard Counties.

Southern Region – Forth Judicial Circuit (Continued)

Domestic Violence Victim Services Programs

• Stopping Woman Abuse Now Box 176

Effingham, Illinois 62401

Linda Bookwalter, Director 217.342.4526 (Office) 888.715.6260 (Crisis)

Batterer Programs

 People Against Violent Environments (PAVE)
 P.O. Box 342

Centralia, IL 62801 800.924.8444 or 618.533.7233

Contact: Kathy Donnelly

Central Region - Fifth Judicial Circuit

Domestic Violence Victim Services Programs

 Coalition Against Domestic Violence P.O. Box 732

Charleston, Illinois 61920

James Walters, Director 217.348.5931 (Office) 888.345.3990 (Crisis)

 Youth Resource Connection/YWCA 201 North Hazel Street

Danville, Illinois 61832

Luan Horton, Executive Director 217.446.1217 (Office) 217.443.5566 (Crisis)

Services also available in Ridge Farm.

Batterer Programs

 Coles County Mental Health Center Rehabilitating Abusers Program (RAP) 845 18th Street

Charleston, Illinois 61920

217.348.7667 or 7666 (Office)

866.567.2400 (Crisis) Contact: Barbara Estes

Batterer Programs

 Danville YWCA Crossroads
 201 North Hazel Street
 Danville, Illinois 61832
 217.446.1217

Contact: Barbara Estes

 Coles County Mental Health Center Rehabilitating Abusers Program (RAP) 1300 Charleston Road

Mattoon, Illinois 61938

217.234.6405 (Office

866.567.2400

Contact: Barbara Estes

Central Region - Sixth Judicial Circuit

Domestic Violence Victim Services Programs

• Dove Domestic Violence Program 788 East Clay

Decatur, Illinois 62521

Teri Ducy, Director 217.428.6616 or 423.0950 (Office) 217.423.2238 (Crisis)

Dove DeWitt County Domestic Violence Program 111 South Quincy Clinton, Illinois 61727 Rita Etherton, Coordinator 217.935.6619 (Office)

• BETHS Place PO Box 462

Tuscola, Illinois 61953

217.935.6072 (Crisis)

Barbara Utterback, Executive Director 217.253.2555 (Office) 217.253.6721 (Crisis)

A Woman's Fund
 1304 E. Main Street
 Urbana, Illinois 61801
 Tami Tunnell, Executive Director
 217.384.4462 (Office)
 217.384.4390 (Crisis)

Batterer Programs

Dove, Inc. AIM Project 788 East Clay

Decatur, Illinois 62521

217.428.6616

Contact: Barbara Greene-Broadhacker

 Douglas County Mental Health & Family Counseling Association 114 West Houghton Tuscola, IL 61953

217.253.4731

Contact: Carol Davis

Central Region - Seventh Judicial Circuit

Domestic Violence Victim Services Programs

Oasis Women's Center
 Jerseyville, Illinois 62052
 Margarette Trushel, Director
 618.498.4341 or 800.244.1978 (Crisis)

Domestic Violence Victim Services Programs

Women's Crisis Center
 446 East State Street
 Jacksonville, Illinois 62650
 Dona Leonard, Director
 217.243.4357 (Office)
 877.243.5357 (Crisis)

Program services also provided in Greene & Scott Counties.

Central Region – Seventh Judicial Circuit (Continued)

Domestic Violence Victim Services Programs

 Sojourn Shelter and Service 1800 Westchester Blvd.

Springfield, Illinois 62704

Tami Silverman, Director 217.726.5100 (Office) 217.726.5200 or 866.435.7438 (Crisis)

Batterer Programs

 Preventing Abusive Relationships P.O. Box 9886
 Springfield, Illinois 62791

217.787.0315

Contact: Bernadette Jones

Central Region - Eighth Judicial Circuit

Domestic Violence Victim Services Programs

 Sojourn Shelter & Service's Menard County Family Violence Prevention 118 East Jackson

Petersburg, Illinois 62675

Tami Silverman, Director 217.467.6435 (Pager) 217.726.5200 (Crisis)

 Quanada 2707 Maine

Quincy, Illinois 62301

Marla Ferguson, Director 217.222.0069 (Office) 800.369.2287 (Crisis)

Program services also provided in Pike County

Batterer Programs

 Great River Recovery Resources 428 S. 36th Street Quincy, Illinois 62301 217.224.6300 (Office) 217.224.6300 (Crisis)

Contact: Yvonne Lohmeyer

Central Region – Ninth Judicial Circuit

Domestic Violence Victim Services Programs

• Fulton - Mason Crisis Service 1330 East Ash Street

Canton, Illinois 61520

Martha Daly, Director 309.647.6097 or 7487 (Office) 309.647.8311 (Crisis)

Program services also available in Mason County

Domestic Violence Victim Services Programs

 Safe Harbor Family Crisis Center P.O. Box 1558

Galesburg, Illinois 61401-1558

Kathy Richardson, Director 309.343.7233 (Office) 309.343.SAFE (7233) (Crisis)

Central Region – Ninth Judicial Circuit (Continued)

Domestic Violence Victim Services Programs

Western Illinois Regional Counsel Community Action Agency Victim Service 223 South Randolph Street Macomb, Illinois 61455

Diane Mayfield, Program Director 309.837.6622 (Office) 309.837.5555 (Crisis)

Safe Harbor Family Crisis Center P.O. Box 1558 Galesburg, Illinois 61401-1558 309.343.7233 (Office) 309.343.SAFE (7233) (Crisis)

Batterer Programs

Fulton-Mason Crisis Service Challenging Abusive Patterns 1330 East Ash Street Canton, Illinois 61520 309.647.2964 Contact: Bill Towery

Western Illinois Regional Council Community Action Agency 223 South Randolph Street Macomb, Illinois 61455 309.837.6622 (Office) 309.837.5555 (Crisis) Contact: Suzan Nash, Director

Central Region - Tenth Judicial Circuit

Domestic Violence Victim Services Programs

• WomenStrength P.O. Box 3855

Peoria, Illinois 61612-3855

309.691.0551 (Office) 800.559.7233 (Crisis)

Margaret Triplett, Program Director Program services also available in Tazwell & Woodford Counties

Freedom House 440 Elm Place

Princeton, Illinois 61356

815.872.0087 (Office) 800.474.6031 (Crisis)

Mary Carla Grube, Executive Director Program services also available in Marshall, Putnam & Stark Counties.

Batterer Programs

The Center for Prevention of Abuse Family Violence Intervention Project 235 Everett Street

East Peoria, Illinois 61611 309.698.2874

Contact: Ruth Anne Faught Program services also available in Peoria & Woodford Counties.

Central Region - Eleventh Judicial Circuit

Domestic Violence Victim Services Programs

- Sojourn Shelter & Service Outreach Logan County Courthouse Lincoln, Illinois 62656 Tami Silverman, Director 217.732.8988 (Office) 217.726.5200 (Crisis)
- CA/CDV Neville House
 923 East Grove Street
 Bloomington, Illinois 61701
 Paula Dapkus, Program Director
 309.828.8913 (Office)
 309.827.7070 (Crisis)
- ADV & SAS
 P.O. Box 593
 Streator, Illinois 61364
 815.673.1552 (Office)
 800.892.3375 (Crisis)
 Margaret Morrison, Director
 Program services also available in Livingston
 County.

Batterer Programs

AVERT

 (Accused Violators Early Response Team)
 200 West Front Street - Suite 400A

 Bloomington, Illinois 61701

309.828.2860 Contact: Cheryl Gaines or Julie Bozarth

- Tazwood Mental Health Center 109 E. Eureka Street
 Eureka, Illinois 61530 309.467.3770
 Contact: Eric Larson
- BroMenn's Domestic Abuse Program 403 West Virginia Ave.
 Normal, Illinois 61761-3666 309.827.4321 ext. 3517 or 3542 Contact: Cheri Miller; Brian Heatherton
- Chestnut Health Systems
 Invitation to Responsibility
 210 Landmark Dr. Suite B
 Normal, Illinois 61761
 309.451.8200
 Contact: Susan Bunting; Lisa Spaude or Roger Shaw

Central Region - Thirteenth Judicial Circuit

Domestic Violence Victim Services Programs

Freedom House 440 Elm Place

Princeton, Illinois 61356 815.872.0087 (Office) 800.474.6031 (Crisis)

Mary Carla Grube, Executive Director

Program services also available in Henry County.

Domestic Violence Victim Services Programs

ADV & SAS
 P.O. Box 593

Streator, Illinois 61364

815.673.1552 (Office) 800.892.3375 (Crisis)

Margaret Morrison, Executive Director

Central Region - Fourteenth Judicial Circuit

Domestic Violence Victim Services Programs

 Mercer County Family Crisis Center 110 N.W. Third Avenue Aledo, Illinois 61231

309.582.7233 (Office) 309.582.7233 (Crisis)

Marla V. Daymalda Dira

Marla K. Reynolds, Director

• Freedom House

P.O. Box 544

Princeton, Illinois 61356

815.872.0087 (Office)

800.474.6031 (Crisis)

Mary Carla Grube, Executive Director

Program services available in Henry County.

 Family Resources Domestic Violence Advocacy Program
 322 16th Street

Rock Island, Illinois 61201

319.322.1200 or 309.793.7729 (Office) 309.797.1777 or 563.322.9191 (Crisis) Patti Christiansen, Program Director

YWCA of the Sauk Valley
412 First Avenue
Sterling, Illinois 61081
815.625.0333 (Office)
815.626.7277 or 288.1011 (Crisis)
Carol Fitzgerald, Executive Director

Batterer Programs

• Robert Young Center
Partner Abuse Intervention Program
4600 3rd Street

Moline, Illinois 61265

309.779.2031

Contact: Bob Koupal

ACT (Abuse Changing Team)
 YWCA of the Sauk Valley
 412 First Avenue
 Sterling, Illinois 61081

815.625.0338

Contact: Fred Turk

Note: Site located in the Northern Region

Northern Region - Twelfth Judicial Circuit

Domestic Violence Victim Services Programs

• Groundwork

1550 Plainfield Road

Joliet, Illinois 60435

815.729.0930 (Office)

815.729.1228 (Crisis)

Rae Bramel, Director

Program services available in Grundy County.

Batterer Programs

 PARTNERS for Non-Violence 68 N. Chicago Street - Suite 211 Joliet, Illinois 60432 708.275.4380

Contact: Matthew G. Zatkalik

Northern Region – Twelfth Judicial Circuit (Continued) Batterer Programs PARTNERS for Non-Violence 5940 W. 159th Street Oak Forest, Illinois 60452 708.275.4380 Contact: Matthew G. Zatkalik

Northern Region - Fifteenth Judicial Circuit

Domestic Violence Victim Services Programs

- YWCA/Domestic Violence Program
 Dixon, Illinois
 815/625-0333 (Office)
 815.288.1011 (Crisis)
 Carol Fitzgerald, Director
- YWCA/VOICES Program
 641 West Stephenson Street
 Freeport, Illinois 61032
 815.235.1681 (Office)
 815.235.1641, 877.994.7233 (Crisis)
 Linda McCllenan-Wright Director
- CHOICES for Family/Peace and Justice
 PO Box 6166
 901 Spring Street
 Galena, Illinois 61036
 815.777.3681 (Office)
 815.777.3680 (Crisis)
 Carrie Altfillisch-Melton, Program
 Director
 Program services also available in Carroll and Joe Daviess Counties.
- H.O.P.E. of Rochelle
 P.O. Box 131
 Rochelle, Illinois 61068
 815.562.4323 (Office)
 815.562.8890 (Crisis)
 Connie Mershon, Executive Director

Batterer Programs

 YWCA of the Sauk Valley ACT (Abuse Changing Team) 412 First Avenue Sterling, Illinois 61081 815.625.0338 (Office) 815.626.7277 (Crisis) Contact: Roneta Hamman

Northern Region - Sixteenth Judicial Circuit

Domestic Violence Victim Services Programs

Mutual Ground, Inc.

P.O. Box 843

Aurora, Illinois 60507

630.897.8989 or 897.0084 (Office)

630.897.0080 (Crisis)

630.553.7445 (Kendall County Crisis)

Linda Healy, Executive Director

Safe Passage

P.O. Box 621

DeKalb, Illinois 60115

815.756.7930 (Office

815.756.5228 (Crisis)

Pam Wiseman, Executive Director

Program services also available in Sandwich

Community Crisis Center

P.O. Box 1390

Elgin, Illinois 60121

847.697.2380 (Office)

847.742.4182 (Crisis)

Gretchen Vapnar, Executive Director

Batterer Programs

Family Counseling Service

MARS Program

70 S. River Street

Aurora, IL 60506

630.844.2662 extension 118

Contact: Doug Stocker

• The IDS Group

The LIFE Program

1706 N. Farmsworth Ave.

Aurora, IL 60505

630.236.1264

Contact: David Ideran or Jim Fisher

Batterer Programs

• Sunrise Growth Center

10 East Wilson Street

Batavia, Illinois 60510

630.406.1164 Contact: Mary Noble

• DeKalb Co. Domestic Violence Abuse

Program

P.O. Box 621

DeKalb, Illinois 60115

815.756.5054

Contact: Pam Wiseman

• Community Crisis Center

Batterers' Program

P.O. Box 1390

Elgin, Illinois 60121

847.697.2380

Contact: Wendy DePatie

Northern Region - Seventeenth Judicial Circuit

Domestic Violence Victim Services Programs

 PHASE/WAVE, Inc. – Domestic Violence Program

319 South Church Street

Rockford, Illinois 61101-1316 Belvidere, Illinois 61008 815.966.1285 (Office)

815.962.6102 (Crisis)
Jared "Jeb" Kresge, President/CEO

Batterer Programs

• PHASE/WAVE

Partner Abuse Intervention Program 319 South Church Street

Rockford, Illinois 61101

815.962.6102 extension 243

Contact: Marti Kauppinen

• Community Counseling & Diagnostic

Center (CCDC) 610 E. State Street

Rockford, Illinois 61104

815.338.7749

Contact: Jeffrey Martin

Batterer Programs

• Logan Counseling Controlling Community Violence

22334 Charles Street

Rockford, Illinois 61104

815.484.0942

Contact: Michael Logan

PHASE/WAVE

Partner Abuse Intervention Program

319 South Church Street

Rockford, Illinois 61101

815.962.6102 extension 243

Contact: Marti Kauppinen

Northern Region - Eighteenth Judicial Circuit

Domestic Violence Victim Services Programs

• Family Shelter Service P.O. Box 3404

Wheaton, Illinois 60187

630.221.8290 (Office)

630.469.5650 (Crisis)

Karen H. Kuchar, Executive Director

Program services also available in Carol

Stream, Wheaton & Naperville

Domestic Violence Victim Services Programs

• Hamdard Center for Health & Human Services

(Peoples Alliance for Progress)

355 N. Wood Dale Rd.

Wood Dale, Illinois 60191

630.860.9122 (Office)

630.860.9122 (Crisis)

Farzana F. Hamid, Executive Director

Northern Region - Eighteenth Judicial Circuit (Continued)

Batterer Programs

 LifeLink/Bensenville Home Society Domestic Abuse Batterers' Program 331 S. York Road

Bensenville, Illinois 60106

630.521.8222

Contact: Eric Gurreo or Kenneth Martin-Ocasio

 DuPage County Domestic Violence Program
 Department of Human Resources
 Division of Psychological Services

421 N. County Farm Road Wheaton, Illinois 60187

630.682.7324

Contact: Thomas Sayers

Batterer Programs

Hamdard Center
 Health & Human Services

 139 Front Street

Wood Dale, Illinois 60191

630.860.9122

Contact: Farzana Hamid

Northern Region - Nineteenth Judicial Circuit

Domestic Violence Victim Services Programs

• A Safe Place/Lake County Crisis Center P.O. Box 1067

Waukegan, Illinois 60079

847.249.5147 (Office) 847.249.4450 (Crisis)

Phyllis A. DeMott, Executive Director

 Turning Point P.O. Box 723

Woodstock, Illinois 60098

815.338.8081 (Office) 800.892.8900 (Crisis)

Louisett M. Ness (Lou Ness), Director

Batterer Programs

The Counseling Center, Inc.
 735 E. McArdle Drive, Unit C

Crystal Lake, Illinois 60014

815.455.3400 or 815.477.7481

Contact: Ron Baer or Kathy Caflisch

Batterer Programs

 David L. Gates & Associates 501 Riverside Dr.
 Gurnee, Illinois 60031

847.625.0606

Contact: David L. Gates

• Dr. Dugo & Associates 26267 Lakeland Drive

Wauconda, Illinois 60084

847.635.2040

Contact: James Dugo, Ph.D.

• A Safe Place/Lake County Crisis Center Intervention Program for Domestic Abuse and Violence

P.O. Box 1067

Waukegan, Illinois 60079

847.249.0005

Contact: Mark Woodward

Northern Region - Nineteenth Judicial Circuit (Continued)

Batterer Programs

• Community Counseling & Diagnostic Center (CCDC) 666 Russel Court, Ste. 105

Woodstock, Illinois 60098

815.338.7749

Contact: Jeffrey Martin

Direct Counseling, Inc. 400 Russel Court

Woodstock, Illinois 60098

815.337.9030

Contact: William Blaul

Batterer Programs

Turning Point, Inc.

Men's Alternatives to Violence/Abuse P.O. Box 723

Woodstock, Illinois 60098

815.338.8081

Contact: Cathy Smith

Northern Region - Twentieth Judicial Circuit

Domestic Violence Victim Services Programs

• Violence Prevention Center of Southwestern Illinois P.O. Box 831

Belleville, Illinois 62222

618.236.2531 (Office)

618.235.0892 (Crisis) Jane Lee, Executive Director

#3 Executive Woods

• Provident Counseling

Batterer Programs

Swansea, Illinois 62226

314.968.2870 and 618.235.5656

Men Ending Domestic Violence

Contact: Steve Doherty

Northern Region – Twenty-first Judicial Circuit

Domestic Violence Victim Services Programs

Kankakee County Coalition Against Domestic Violence P.O. Box 1824

Kankakee, Illinois 60901

815.932.5814 (Office) 815.932.5800 (Crisis)

Robin Savage, Director

Program services also available in Iroquois County

Batterer Programs

Pathways

P.O. Box 1824

Kankakee, Illinois 60901

815.929.0383

Contact: Karen Zander

Cook Regions - Chicago

Domestic Violence Victim Services Programs

- Anixter Center 6610 N. Clark St.
 Chicago, Illinois 60626-4062 773.973.7900 extension 227 Stuart Ferst, Executive Director
- Apna Ghar
 4753 North Broadway, Suite 518
 Chicago, Illinois 60640
 773.334.0173 (Office)
 773.334.4663 (Crisis)
 K. Sujata, Director
- Family Rescue, Inc.
 P.O. Box 17528
 Chicago, Illinois 60617
 773.375.1918 (Office)
 773.375.8400 (Crisis)
 Audrey Williams, Program Director
- Friends of Battered Women & Their Children
 P.O. Box 608548
 Chicago, Illinois 60660
 773.274.5232 (Office)
 800.603.4357 (Crisis)
 Kathy Doherty, Executive Director

Domestic Violence Victim Services Programs

- Healthcare Alternative Systems 2755 W. Armitage Ave.
 Chicago, Illinois 60645 773.252.3100 (Office)
 Marco Jacome, Executive Director
- Howard Area Community Center 7648 N. Paulina
 Chicago, Illinois 60626 773.262.6622 (Office)
 Roberta Buchanan, Executive Director
- Howard Brown Health Center 4025 N. Sheridan Rd.
 Chicago, Illinois 60613 773.388.1600 (Office)
 Courtney Reid, Deputy Director
- Legal Assistance Foundation
 111 W. Jackson 3rd Floor
 Chicago, Illinois 60604
 312.341.1070 (Office)
 Sheldon Roodman, Executive Director
- Metropolitan Family Services 3843 West 63rd Street Chicago, Illinois 60629 773.884.2214 (Office) Ida Anger, Program Director
- Mujeres Latinas En Accion 1823 West 17th Street Chicago, Illinois 60608 312.226.1544 (Office) 312.738.5358 (Crisis) Elsa Castillo, Program Director
- Neopolitan Lighthouse
 P.O. Box 24709
 Chicago, Illinois 60624
 773.638.0228 (Office)
 773.722.0005 (Crisis)
 Crystal Bass-White, Executive Director

Cook Regions - Chicago

Domestic Violence Victim Services Programs

- New Hope Community Service 2701 West 79th Street Chicago, Illinois 60652 773.737.9555 (Office) Brenda Golden, Executive Director
- Polish American Association 3834 N. Cicero Ave.
 Chicago, Illinois 60641 773.282.8206 (Office)
 Karen Popowski, Executive Director
- Pro Bono Advocates/Legal Advocacy for Women 28 North Clark, Suite 630 Chicago, Illinois 60602 312.827.2420 (Office) Mary Trew, Executive Director
- Rainbow House/Arco Iris
 20 East Jackson Blvd. Suite 1550
 Chicago, Illinois 60604
 312.935.3430 (Office)
 773.762.6611 (Crisis)
 Deirdre Cutliffe, Executive Director
- Crisis Intervention Program
 Mt. Sinai Hospital Medical Center
 California Ave. at 15th Street, NR620
 Chicago, Illinois 60608
 773.257.6090 (Office)
- Women's Resource Center
 C/O Chicago Friends Meeting House
 10749 S. Artesian Ave.
 Chicago, Illinois 60655
 773.238.5411 (Office)
 Rita Ryan, Outreach Coordinator

Domestic Violence Victim Services Programs

- Southwest Women Working Together 4051 W. 63rd St.
 Chicago, Illinois 60629 773.582.0550 (Office) Shelley Crump, Executive Director
- Uptown Hull House/Women's Counseling Center
 4520 North Beacon
 Chicago, Illinois 60640
 773.561.3500 (Office)
 Maxine Florell, Director
- Uptown Hull House/Domestic Violence Court Advocacy Project
 1340 South Michigan - Chambers 202
 Chicago, Illinois 60605
 312.341.2883 (Office)
 Kristine Knoll, Director
- Wellspring
 PO Box 368800
 Chicago, Illinois 60636
 773.962.0784 (Office)
 Elouise Spencer, Executive Director
- YWCA of Metro Chicago
 5901 N. Milwaukee Avenue, Unit F
 Chicago, Illinois 60646
 773.763.4635 (Office)
 888.293.2080 (Crisis)
 Sung Sook Choi, Program Director

Cook Regions - Chicago

Batterer Programs

Avance
 2334 West Lawrence Avenue, Suite 205
 Chicago, Illinois 60625

773.293.1770

Contact: Ramon Nolasco

- Christine R. Call & Associates Skills for Nonviolent Living 2741 N. Spaulding Chicago, Illinois 60647 800.877.4181 or 773.862.5408 Contact: Christine Call
- Circuit Court of Cook County Social Service Department Domestic Violence Program 2650 S. California Avenue, 9th Floor Chicago, Illinois 60608 Court-mandated Clients Only* 773.869.6049 (Chicago) Contact: Heather Flett
- Healthcare Alternative Systems 2755 W. Armitage Avenue Chicago, Illinois 60647 773.252.3100 Contact: Paul Farina
- La Familia Unida 3047 W. Cermak Road Chicago, Illinois 60623 773.522.7798 Contact: Jose Luis Avila

Martin-Ocasio

 LifeLink/Bensenville Home Society Park Manor Office
 Domestic Abuse Batterers' Program 7006 S. Martin Luther King Drive Chicago, Illinois 60637 630.521.8222
 Contact: Eric Gurreo or Kenneth **Batterer Programs**

Polish American Association
 Partner Abuse Intervention Program

 3834 N. Cicero Avenue

 Chicago, Illinois 60641

 773.282.8206

Contact: Eva Huzior

- Polish American Family Intervention 6500 W. Archer Avenue Chicago, Illinois 60638 773.586.9511 Contact: Visia Fahrberger
- Polish American Family Services 5146 W. Belmont Chicago, Illinois 60641 773.777.7885 Contact: Anna Tym
- Universal Family Connection, Inc. 1350 West 103rd Street
 Chicago, Illinois 60643
 773.881.1711 extension 128
 Contact: Renee Rogers-Williams
- West Side Domestic Abuse Project
 Haymarket Center
 923 West Washington
 Chicago, Illinois 60607
 312.226.7984 extension 360
 Admissions, extension 480
 Contact: Charlie Stoops or Christine Call
- West Side Domestic Abuse Project 2714 N Spaulding Avenue Chicago, Illinois 60647 773.862.5408 Contact: Frances Brown or Vivian Gutierrez

Cook Regions - Chicago

Batterer Programs

• The Salvation Army Family Services Partner Abuse Intervention Program 4800 North Marine Drive

Chicago, Illinois 60640

773.275.6233 Contact: Janet Wilson

Cook Regions - Suburbs

Domestic Violence Victim Services Programs

• Lifespan

P.O. Box 445

Des Plaines, Illinois 60016

847.824.0382 (Office)

847.824.4454 (Crisis)

Denice Markham, Executive Director

 YWCA Evanston/North Shore Shelter for Battered Women and Children
 P.O. Box 5164
 Evanston Illinois 60204-5164

Evanston, Illinois 60204-5164 847.864.8445 (Office) 847.864.8780 (Crisis) Wendy Dickson, DV Program Director

 South Suburban Family Shelter, Inc. P.O. Box 937

Homewood, Illinois 60430

708.798.7737 (Office)

708.335.3028 (Crisis)

Diane L. Bedrosian, Director

Sarah's Inn

P.O. Box 1159

Oak Park, Illinois 60304

708.386.3305 (Office)

708.386.4225 (Crisis)

Mary Ruth Coffey, Director

Domestic Violence Victim Services Programs

- Constance Morris House
 The Pillars Community Services
 6120 South Archer Road, Box 10

 Summit, Illinois 60501
 708.485.0069 (Office)
 708.485.5254 (Crisis)
 Lynn Siegel, Program Director
- Crisis Center for South Suburbia 7700 Timber Drive
 Tinley Park, Illinois 60477 708.429.7255 (Office) 708.429.SAFE (Crisis)
 Patty Wilson, Executive Director

Batterer Programs

- LifeLink/Bensenville Home Society 4836 W. 13th Street Cicero, Illinois 60804 630.521.8222 Contact: Eric Gurreo or Kenneth Martin-Ocasio
- Pro-Health Advocates 5929 W. Roosevelt Road Cicero, Illinois 60804 708.652.7190

Contact: Judy Carlos or Lorena Delgado

Cook Regions - Suburbs

Batterer Programs

 Dr. Dugo and Associates 960 Rand Road - Suite 225
 Des Plaines, Illinois 60016 847.635.2040

Contact: James Dugo, Ph.D.

Pro Solutions, Inc.
 The Men's Program
 533 North Avenue
 Elmhurst, Illinois 60126
 708.906.2899

Contact: Gary Montino or Vito Scavo

Family Service of Glencoe
 675 Village Court
 Glencoe, Illinois 60022-1613
 847.835.5111

Contact: Nancy Melsheimer

 Community Crisis Center P.O. Box 1390

Elgin, Illinois 60121 847.697.2380

Contact: Wendy DePatie

 South Suburban Family Shelter Domestic Violence Intervention Project P.O. Box 937

Homewood, Illinois 60430

708.798.7737

Contact: Pedro Moncada

• Resurrection Health Care 1414 Main Street

Melrose Park, Illinois 60160

708.681.0073 extension 260 or 244 or 708.649.2130

Contact: Ruben Gonzalez or Marcial

Gomez

Batterer Programs

 PARTNERS for Non-Violence 5940 W. 159th Street
 Oak Forest, Illinois 60452 708.687.7911

Contact: Matthew Zatkalik

 Cook County Intervention Project PMB 140, 10300 S. Cicero Ave.
 Oak Lawn, Illinois 60453-4702 708.424.7085

700.424.7003

Contact: Joseph Passananti

Sarah's Inn
 Skills for Nonviolent Living
 P.O. Box 1159
 Oak Park, Illinois 60304
 708.386.3305 extension 246

Contact: Michelle Maldanado

 Associates in Human Development Counseling
 1500 Hicks Road, Ste. 300
 Rolling Meadows, Illinois 60008
 847.483.0800

Contact: David Finn

Community Crisis Center
 Batterers' Program (also see Hoffman Estates)
 P.O. Box 1390

Elgin, Illinois 60121 847.697.2380

Contact: Anna Meier

Zabin and Associates, P.C. 9701 North Knox Avenue, Ste. 214

Skokie, Illinois 60076

847.677.3055 Contact: Jerry Zabin

March 23, 2005 – PT 2005.

300. APPENDIX J - DOMESTIC VIOLENCE

a) Purpose

One of the critical areas of Department intervention is the assessment of risk to children, including the implementation of any required protective plans. The purpose of this appendix is to provide guidance to child protective service workers (CPSW) when assessing safety and risk to children in cases where domestic violence is present or suspected as an underlying condition of abuse and neglect.

b) Definitions

Domestic violence involves the establishment of power and control through a pattern of coercive behaviors that include physical, sexual, verbal, and emotional assaults perpetrated by one intimate partner against another (Ganley and Schechter, 1996).

The Illinois Domestic Violence Act defines domestic violence as a crime in which physical abuse, harassment, intimidation of a dependent, interference with personal liberty or willful deprivation is perpetrated by one family or household member against another.

"Family or household members" include spouses, former spouses, parents, children stepchildren and other persons related by blood or by present or prior marriage, persons who share or formerly shared a common dwelling, persons who have or allegedly have a child in common, persons who shared or allegedly share a blood relationship through a child, persons who have or have had a dating or engagement relationship, persons with disabilities and their personal assistants and caregivers as defined in paragraph (3) of subsection (b) of Section 12-21 of the Criminal Code of 1961.

"Physical abuse" includes sexual abuse and means any of the following:

- (i) knowing or reckless use of physical force, confinement or restraint;
- (ii) knowing, repeated and unnecessary sleep deprivation; or
- (iii) knowing or reckless conduct which creates an immediate risk of physical harm. [750 ILCS 60/103(14)]

"Harassment" means knowing conduct which is not necessary to accomplish a purpose that is reasonable under the circumstances; would cause a reasonable person emotional distress; and does cause emotional distress to the petitioner. Unless the presumption is rebutted by a preponderance of the evidence, the following types of conduct shall be presumed to cause emotional distress:

- (i) creating a disturbance at a petitioner's place of employment, home or residence;
- (ii) repeatedly telephoning petitioner's place of employment, home or residence;
- (iii) repeatedly following petitioners about in a public place or places;

Cook Regions - Suburbs

Batterer Programs

 The Pillars Community Services Options
 7666 W. 63rd Street, P.O. Box 10 Summit, Illinois 60501
 708.458.6920, 708.793.5550

Contact: James Edgren

 Crisis Center for South Suburbia Choices Men's Program PO Box 39

Tinley Park, Illinois 60477

708.429.7255

Contact: Janice Frykland

Batterer Programs

 Associates in Human Development Counseling
 710 S. Milwaukee Avenue
 Wheeling, Illinois 60090
 847.483.0800
 Contact: David Finn

Prevention Resource Development Project

PRD Project Main Office

Lori Fuller, Project Director Mary Potts, Officer Prevent Child Abuse Illinois 4617 North Prospect, #8 Peoria, Illinois 61614 309.688.6256 309.688.5744(f)

LANs 30, 31, 32 & 33

Peggy Carey 760 Peace Road DeKalb, Illinois 60115 815.787.5344 815.787.5349(f)

LANs 18, 20, 21, 27 & 29

Terry Liggitt 500 42nd Street Rock Island, Illinois 61201 309.794.3590 309.794.3511(f)

Local Area Networks (LANs) 34, 35 & 49

Joan Henchan 800 West Roosevelt Road, D-10 Glen Ellyn, IL 60137 630.790.6869 630.790.7806(f)

Cook North

Leah Wardak 4055 North Western, 3rd Floor Chicago, Illinois 60616 773.866.5768 773.866.5709(f)

Cook Central

Michelle Chalifoux 3518 West Division Chicago, Illinois 60651 773.292.7896 773.292.7712(f)

LANs 14, 22, 23, 23A, 24 & 25

Linda Henderson 401 Dinsmore Street Bloomington, Illinois 61701 309.828.0742 309.829.3302(f) Cook South

Kenya Jackson 15115 Dixie Highway, Room 109 Harvey, Illinois 60426 708.210.2830 708.210.3053(f)

Domestic Violence Services

Domestic Violence Victim Services

The Illinois Department of Human Services funds 67 victim programs across the state. Contract compliance requires that comprehensive programs have the provision of domestic violence services to adult victims and their children as the primary purpose. Eligible clients are victims of domestic violence and their children. The programs must refrain from charging fees for domestic violence services. Programs must submit monthly documentation of service hours to the Department of Human Services (DHS) and are regularly monitored through site visits by DHS for contract compliance. Victim programs fall into the categories of comprehensive and specialized.

Comprehensive residential and non-residential domestic violence programs must minimally provide the following crisis intervention and prevention services to victims and their children:

- 24-hour crisis hotline
- 24-hour on-site shelter or off-site shelter
- Individual and group domestic violence counseling
- Individual and group counseling for children
- Legal advocacy including assistance in obtaining orders of protection
- Information and referral
- Transportation
- Development of domestic violence protection plans for adult victims and children
- Outreach and prevention programs in the community

Specialized domestic violence programs provide a specific domestic violence service such as a hotline, counseling or legal advocacy and must have written agreements with comprehensive domestic violence programs to provide referrals to comprehensive programs as appropriate.

Counselors providing domestic violence assessments and interventions outside of certified domestic violence programs should be certified by the Illinois Board of Domestic Violence Professionals.

Domestic Violence Batterer Programs

The Illinois Department of Human Services monitors batterer programs by monitoring for compliance with the *Illinois Protocol for Partner Abuse Intervention Programs*. 79 programs comply with the protocol. To be found compliant they must meet DHS standards for appropriate

domestic violence intervention, specialized training for staff, and safety procedures for partners of clients, and linkages with victim services, criminal courts, probation, substance abuse services and mental health services. Programs generally use the group format for interventions. Partner abuse programs usually charge for services, generally with sliding scales, and are regularly monitored by DHS for protocol compliance. The Attorney General's Office and Administrative Office of Illinois Courts also recognize the list of DHS-approved programs.

Additional Domestic Violence Resources

City of Chicago Domestic Violence Help Line, 1-877-TO-END-DV Chicago Metropolitan Battered Women's Network, 312-360-1927 Illinois Coalition Against Domestic Violence, 217-789-2830



A Review of the New Domestic Violence Policy Interview Script

Instructions: Read the interview between the worker and Mrs. Walker. Take notes on what you think was effective/ineffective about the worker's interviewing technique and record those notes on page 12 (Interviewing the Adult Victim) of your Participant Guide When you are finished, decide whether or not a Domestic Violence Screen is warranted. Be prepared to discuss your findings.

Note: Mrs. Walker's responses are indicated in bold print.

It's important that you understand that I will not tell your husband about anything you say in the interview. It's also important to understand that I can't give you a guarantee of confidentiality for information that is essential for case planning, service delivery, court actions or Administrative Hearings. I understand
My biggest concern is for the safety of you and your children. Thank you.
Tell me about your relationship with your husband. We've been married for 6
years and it's a happy marriage.
How are decisions made in your relationship? We talk about things together
and then Dick makes the decision.
How do disagreements get resolved? Dick makes all the decisions.
Has your husband ever act jealous or possessive? (Mrs. Walker gets
uncomfortable) He likes to have me all to himself.
Tell me more about that. My husband believes that my place is in the home
taking care of him and the kids. Since he has a good job, I don't have to
work.
What do you think? I always enjoyed working because it gave me the
opportunity to make my own money and have my own friends. I miss the
adult contact.
Do you ever see your friends? They used to call, but since I can never go out
with them, they don't call anymore.
Why can't you go out with them?
My husband prefers me to be at home with him and the kids.
So you let him dictate who can be your friends? Well, he is my husband so that
does give him the right to tell me what to do.
So you agree that he has the right to control you? (She's very uncomfortable
now) Well, it's not really controlling.
How are the family finances handled? Dick handles all of that. He gives me the
money I need to run the household.
What do you do if you want to buy something for yourself? I ask Dick for the
money.
So you have to ask him for every penny? Well, it's really his money.
Have you ever been afraid of your husband? Sometimes I get a little frightened
when he's angry. He has a tendency to yell and throw things.



When does he get angry? He only gets angry when the kids or I make him
mad. But, he's under a lot of stress at work, so I can understand it.
How often does this happen? Not too often.
Has he ever used physically force on you in any way? For example, has he ever
pushed, slapped, punched, or kicked you? (In a very quiet voice) No.
Why are you wearing long sleeves in this heat? (No response.)
(Sounding exasperated) How did the holes get in the living room wall? I don't
remember.
Has your husband ever yelled at the children? Sometimes, but he never hits
them.
Have the children ever seen your husband hit you? He never hits me.
Do the children ever hear him yell at you? Sometimes.
What has happened over the last few months to cause the children's behavior to
change? Like I said, Dick's been under a lot of stress at work lately, so things
have been more tense at home than usual.
What do you mean by more tense? He's been drinking a little more to help deal
with the stress, and the yelling gets worse when he drinks.
Has he ever hit you or the children when he drinks? No, he never hits the
children.
What about you. Does he ever hit you when he drinks? (Mrs. Walker begins to
cry and whispers quietly) Yes, he does.

March 23, 2005 – PT 2005.

- (iv) repeatedly keeping petitioner under surveillance by remaining present outside her or his home, place of employment, vehicle or other place occupied by petitioner or peering in petitioner's windows;
- (v) improperly concealing a minor child from petitioner, repeatedly threatening to improperly remove a minor child of the petitioner's from the jurisdiction or from the physical care of petitioner, repeatedly threatening to conceal a minor child from the petitioner, or making a single such threat following an actual or attempted improper removal or concealment, unless respondent was fleeing an incident or patter of domestic violence; or
- (vi) threatening physical force, confinement or restraint on one or more occasions. [750 ILCS 60/103(7)]

"Intimidation of a dependent" means subjecting a person who is dependent because of age, health, disability to participation in or the witnessing of: physical force against another or physical confinement or restraint of another which constitutes physical abuse as defined in this Act, regardless of whether the abused person is family or household member. [750 ILCS 60/103(10)]

"Interference with personal liberty" means committing or threatening physical abuse, harassment, intimidation or willful deprivation so as to compel another to engage in conduct from which she or he has a right to abstain or refrain from conduct in which she or he has a right to engage. [750 ILCS 60/103(9)]

"Willful deprivation" means willfully denying a person who because of age, health or disability requires medication, medical care, shelter, accessible shelter or services, food, therapeutic device, or other physical assistance, and thereby exposing that person to the risk of physical, mental or emotional harm, except with regard and thereby exposing that person to the risk of physical, mental or emotional harm., except with regard to medical care or treatment when the dependent person has expressed an intent to forgo such medical care or treatment. [750 ILCS 60/103(15)]

c) Domestic Violence Research Findings

When children are primary victims, research connecting domestic violence and child maltreatment is strong.

- Child abuse is 15 times more likely to occur in families where domestic violence is present (The Family Secret, Boston, 1995)
- Perpetrators sometimes use physical, emotional or sexual abuse of children to maintain or establish power or control over the victim (Schechter and Carter, 1995)
- Domestic violence is often linked to severe and fatal cases of child abuse (Felix and McCarthy, 1994).

March 23, 2005 – PT 2005.

When children are secondary victims, research shows that exposure to trauma increases the risk of:

- Eating and sleep disorders;
- Verbally and physically aggressive behaviors;
- Guilt, when the child believes that he or she is the cause of the abuse;
- Poor academic performance;
- Becoming frightened easily, anxious, clingy or frequently cry if the child is under the age of five;
- Adolescent alcohol and drug abuse; or
- Teen dating violence (Research shows that youth age 16 − 24 are most at risk of domestic violence than any other age group.).

d) Identifying and Assessing Safety and Risk Related to Domestic Violence

- Assessment of safety and risk is the mechanism that workers must utilize throughout the life of the case to focus their decision-making on the level of interventions necessary to assure the safety of children. Workers are required to complete a SACWIS/CANTS 17A/DV, Domestic Violence Screen (Attachment):
 - A) During the course of a CA/N investigation in conjunction with the initial CFS 1441, Safety Determination Form, whenever domestic violence has been alleged by any credible source and prior to case determination in all formal investigations;
 - B) Whenever Law Enforcement Agencies Data System (LEADS) information indicates that children may be at risk due to domestic violence (e.g., existing orders of protection, domestic violence orders of protection);
 - C) Anytime circumstances suggest that a child's safety may be at risk due to domestic violence or severe controlling behaviors exhibited towards an adult in the home by an adult perpetrator of domestic violence; or
 - D) Whenever any source provides reliable information that indicates that the welfare of children may be at risk or that they are at risk of harm due to severe controlling behavior or domestic violence.
- When domestic violence or severe controlling behaviors are alleged, suspected or known that may pose a risk of harm or immediate threat to the safety of the children, a discussion concerning domestic violence shall occur between the CPSW and CPSW supervisor. A summary of the discussion shall be documented in a case note and placed in the case file. These discussions shall occur:

March 23, 2005 – PT 2005.

- A) During the case handoff between the CPSW and the permanency worker assuming casework responsibility; and
- B) Within five days of a case transfer/reassignment to a new worker of an existing child abuse or neglect investigation or open service case.

e) SACWIS/CANTS 17A/DV, Domestic Violence Screen

The SACWIS/CANTS 17A/DV, Domestic Violence Screen (Attachment I), consists of three sections: When to Use the Screen; Identifying Domestic Violence; Assessment; and Batterer/Victim Characteristics. If domestic violence is identified, workers must assess for safety and risk.

1) When to Complete the **Domestic Violence Screen**

The child protective service workers shall complete the **Domestic Violence** Screen:

- Within the first seven days of the initial investigation (Interviews should only be conducted when it is safe to do so and workers should follow the guidelines for conducting domestic violence interviews, which are included in the Domestic Violence Practice Guide.);
- Prior to the case handoff staffing;
- Whenever domestic violence is suspected or identified; and
- At the close of the investigation.

Workers may re-certify the initial **Domestic Violence Screen** prior to the case handoff or at the close of investigation when case circumstances have not changed and the worker has consulted with, and received approval from his or her supervisor to re-certify the screen.

2) Identifying Domestic Violence

Workers shall utilize the following lists of *significant* and *verbal indicators* to identify possible domestic violence case issues. When a worker determines that one or more of the indicators are present he or she shall conduct follow-up domestic violence interviews with alleged adult victim and children.

- A) Significant Indicators
 - Third party reports of domestic violence.

March 23, 2005 – PT 2005.

- Criminal history of assault or damage to property that has been verified through LEADS.
- Physical injuries to an adult, such as bruises, cuts, black eyes, marks on neck, etc.
- One partner seems to control everything (e.g., answers questions for the other partner).
- Observed damage to the home (e.g., phone ripped from the wall, holes in the walls, broken doors or furniture).
- Self-reported incident or incidents of domestic violence.
- One partner uses children to control what the other partner says, does or thinks.
- Prior or current police involvement for domestic violence.
- An existing order of protection.
- A history of receiving domestic violence services.

The screen is complete if none of the above indicators are present. Workers should continue with the second part of the screen (verbal indicators) when any of the significant indicators are present, and the facts or circumstances, if true, suggest the presence of domestic violence. Always interview the suspected or known adult victim separately from the suspected or known offender.

B) Verbal Indicators

- Has your partner ever tried to keep you away from your family, friends or neighbors?
- Has your partner ever threatened you or done something else that frightened you?
- Has your partner ever pushed, slapped, punched, kicked or hurt you in other ways?
- Has your partner ever threatened to use the children to control you in any way?

The presence of *significant indicators* and *verbal indicators* requires the worker to assess the risk and safety to the children.

3) Assessment (Level of Risk and Safety)

The presence of domestic violence may or may not warrant Department intervention. Workers must refer to the Risk Assessment, CERAP, allegation system and Domestic Violence Practice Guide to determine if the domestic violence rises to the level of abuse or neglect or poses a threat to the safety of the children. Interventions will be determined by assessed level of safety and risk to the children.

March 23, 2005 – PT 2005.

When assessing the level of risk to the children, workers shall consider whether reasonable cause has been established to believe:

• There is ongoing domestic violence and/or that the alleged batterer has a history of domestic violence;

AND

- The child or children are likely to be used as a shield or held or physically restrained from leaving during an incident of domestic violence; or
- The child or children will place themselves at substantial risk of harm by intervening during an incident of domestic violence; or
- The alleged batterer has committed assault or murder and has threatened to harm members of the immediate family, extended family and pets; or
- The child's or children's ability to function on a daily basis has been substantially impaired due to incidents of domestic violence; or
- The non-offending caregiver or alleged batterer describe the children in negative terms, act negatively towards the children or blame them for the incidents of domestic violence; or
- The alleged batterer has used or has threatened to use weapons.

Workers should also assess any strategies the adult victim has used in the past that can be supported or strengthened to protect the children.

f) Interviewing and interventions

1) Domestic Violence Interviews

When domestic violence is a case issue, domestic violence interviews must be conducted with the adult victim and children away from the perpetrator to assess level of risk and safety to the children. Interviews should only be conducted when it is safe to do so and workers should follow the guidelines for conducting domestic violence interviews, which are included in the Domestic Violence Practice Guide

2) Collateral Contacts

Collateral contacts must be made with individuals who can provide information concerning the safety and well being of the children, parental functioning, home environment, the relationship between the adults and between the adults and children (e.g., criminal justice personnel, child care providers, social service agencies, neighbors, school and medical personnel and extended family members with extensive/significant personal contact with the family).

March 23, 2005 – PT 2005.

3) Documentation

Information obtained from required domestic violence interviews, collateral contacts, as well as information relevant to safety assessment and protective actions must be documented in interview notes and the initial and any subsequent **Safety Determination Form**, **CFS 1441**, when evidence or circumstances suggest that a child's safety may be in jeopardy.

4) Level of Department Involvement

The level of Department involvement will be individualized and in correlation to the assessed safety and risk issues of the children. When significant indicators of domestic violence exist based on the administration of the **Domestic Violence Screen**, the Department must offer a domestic violence brochure to the adult who is a possible victim of domestic violence whether or not the level of risk to the child warrants any further involvement. Workers shall refer to the Domestic Violence Practice Guide and consult with their supervisor for further guidance on how to make confidential referrals for adult victims.

g) Safety Planning

When domestic violence has been observed or documented in LEADS or other official reports/records, workers shall utilize the Domestic Violence Practice Guide for safety planning. The guide provides alternatives that workers may pursue with the non-offending adult victim prior to taking protective custody, which include the following:

- 1) The batterer acknowledges responsibility for the domestic violence and leaves the home; or
- 2) A safety plan is established and the batterer moves out of the home. This may include steps such as assisting the victim of domestic violence in obtaining a domestic violence order of protection, arrest of the batterer, police involvement or court action; or
- A safety plan is established and the non-offending adult victim relocates with the children to a safe location. This location will be where the perpetrator will not have access, such as a relative's home, friend's home or domestic violence shelter. The adult victim is also assisted in obtaining domestic violence services; or

Note: Any safety plan developed that is dependent on a third party's cooperation, must include full releases from the family to permit sharing all relevant information with the third party.

March 23, 2005 – PT 2005.

- 4) The non-offending caretaker makes arrangements for the children to be in a safe environment; or
- 5) The children are taken into protective custody if their safety cannot be assured.

Adult victims may openly ask for help or may appear uncooperative or resistant. The demeanor of the adult victim may be misleading; the adult victim may seem uncooperative due to fear of the perpetrator or of service systems. Cultural beliefs or language barriers may exacerbate this seeming unwillingness to cooperate. However the adult victim appears, workers shall reiterate concern for the safety of both the children and the caretaker, and shall inform the adult victim of appropriate community resources. Referrals shall be offered to adult victims whether or not a case is opened.

h) Support

The Department will provide regional support to encourage effective interventions at the local level. Domestic violence specialists of the Division of Clinical Practices and Professional Development shall provide clinical consultation and technical assistance.

March 23, 2005 – PT 2005.

Section 302.260 DOMESTIC VIOLENCE

a) Purpose

One of the critical areas of Department intervention is the assessment of risk to children, including the implementation of any required protective plans. The purpose of this section is to provide guidance to permanency workers when assessing safety and risk to children in cases where domestic violence is present or suspected as an underlying condition of child abuse or neglect.

b) Definitions

Domestic violence involves the establishment of power and control through a pattern of coercive behaviors that include physical, sexual, verbal, and emotional assaults perpetrated by one intimate partner against another (Ganley and Schechter, 1996).

The Illinois Domestic Violence Act defines domestic violence as a crime in which physical abuse, harassment, intimidation of a dependent, interference with personal liberty or willful deprivation is perpetrated by one family or household member against another.

"Family or household members" include spouses, former spouses, parents, children stepchildren and other persons related by blood or by present or prior marriage, persons who share or formerly shared a common dwelling, persons who have or allegedly have a child in common, persons who shared or allegedly share a blood relationship through a child, persons who have or have had a dating or engagement relationship, persons with disabilities and their personal assistants and caregivers as defined in paragraph (3) of subsection (b) of Section 12-21 of the Criminal Code of 1961.

"Physical abuse" includes sexual abuse and means any of the following:

- (i) knowing or reckless use of physical force, confinement or restraint;
- (ii) knowing, repeated and unnecessary sleep deprivation; or
- (iii) knowing or reckless conduct which creates an immediate risk of physical harm. [750 ILCS 60/103(14)]

"Harassment" means knowing conduct which is not necessary to accomplish a purpose that is reasonable under the circumstances; would cause a reasonable person emotional distress; and does cause emotional distress to the petitioner. Unless the presumption is rebutted by a preponderance of the evidence, the following types of conduct shall be presumed to cause emotional distress:

- (i) creating a disturbance at a petitioner's place of employment, home or residence;
- (ii) repeatedly telephoning petitioner's place of employment, home or residence;
- (iii) repeatedly following petitioners about in a public place or places;

March 23, 2005 – PT 2005.

- (iv) repeatedly keeping petitioner under surveillance by remaining present outside her or his home, place of employment, vehicle or other place occupied by petitioner or peering in petitioner's windows;
- (v) improperly concealing a minor child from petitioner, repeatedly threatening to improperly remove a minor child of the petitioner's from the jurisdiction or from the physical care of petitioner, repeatedly threatening to conceal a minor child from the petitioner, or making a single such threat following an actual or attempted improper removal or concealment, unless respondent was fleeing an incident or patter of domestic violence; or
- (vi) threatening physical force, confinement or restraint on one or more occasions. [750 ILCS 60/103(7)]

"Intimidation of a dependent" means subjecting a person who is dependent because of age, health, disability to participation in or the witnessing of: physical force against another or physical confinement or restraint of another which constitutes physical abuse as defined in this Act, regardless of whether the abused person is family or household member. [750 ILCS 60/103(10)]

"Interference with personal liberty" means committing or threatening physical abuse, harassment, intimidation or willful deprivation so as to compel another to engage in conduct from which she or he has a right to abstain or refrain from conduct in which she or he has a right to engage. [750 ILCS 60/103(9)]

"Willful deprivation" means willfully denying a person who because of age, health or disability requires medication, medical care, shelter, accessible shelter or services, food, therapeutic device, or other physical assistance, and thereby exposing that person to the risk of physical, mental or emotional harm, except with regard and thereby exposing that person to the risk of physical, mental or emotional harm, except with regard to medical care or treatment when the dependent person has expressed an intent to forgo such medical care or treatment. [750 ILCS 60/103(15)]

c) Domestic Violence Research Findings

When children are primary victims, research connecting domestic violence and child maltreatment is strong.

- Child abuse is 15 times more likely to occur in families where domestic violence is present (The Family Secret, Boston, 1995)
- Perpetrators sometimes use physical, emotional or sexual abuse of children to maintain or establish power or control over the victim (Schechter and Carter, 1995)
- Domestic violence is often linked to severe and fatal cases of child abuse (Felix and McCarthy, 1994).

March 23, 2005 – PT 2005.

When children are secondary victims, research shows that exposure to trauma increases the risk of:

- Eating and sleep disorders;
- Verbally and physically aggressive behaviors;
- Guilt, when the child believes that he or she is the cause of the abuse;
- Poor academic performance;
- Becoming frightened easily, anxious, clingy or frequently cry if the child is under the age of five;
- Adolescent alcohol and drug abuse; or
- Teen dating violence (Research shows that youth age 16 − 24 are most at risk of domestic violence than any other age group.).

d) Identifying and Assessing Level of Safety and Risk Related to Domestic Violence

- Assessment of safety and risk is the mechanism that workers must utilize throughout the life of the case to focus their decision-making on the level of interventions necessary to assure the safety of children. Workers are required to complete a SACWIS/CANTS 17A/DV, Domestic Violence Screen (Attachment), at any phase of a case when domestic violence is identified:
 - A) During the course of a CA/N investigation in conjunction with the initial CFS 1441, Safety Determination Form, whenever domestic violence has been alleged by any credible source and prior to case determination in all formal investigations;
 - B) Whenever Law Enforcement Agencies Data System (LEADS) information indicates that children may be at risk due to domestic violence (e.g., existing orders of protection, domestic violence orders of protection);
 - C) During the child welfare referral assessment period;
 - D) Anytime circumstances suggest that a child's safety may be at risk due to domestic violence or severe controlling behaviors exhibited towards an adult in the home by an adult perpetrator of domestic violence; or
 - E) Whenever any source provides reliable information that indicates that the welfare of children may be at risk or that they are at risk of harm due to severe controlling behavior or domestic violence.
 - The SACWIS/CANTS 17A/DV, Domestic Violence Screen (Attachment I), consists of three sections: When to Use the Screen; Identifying Domestic Violence; Assessment; and Batterer/Victim Characteristics. If domestic violence is identified, workers must assess for safety and risk.

March 23, 2005 – PT 2005.

- When domestic violence or severe controlling behaviors are alleged, suspected or known that may pose a risk of harm or immediate threat to the safety of the children, a discussion concerning domestic violence shall occur between the permanency worker and supervisor. A summary of the discussion shall be documented in a case note and placed in the case file. These discussions shall occur.
 - A) During the case handoff between the CPSW and the permanency worker that will assume casework responsibility;
 - B) Within five days of a case transfer/reassignment to a new worker of an existing child abuse or neglect investigation or open service case; and
 - C) During an administrative case review as part of any discussion related to reunification.

e) SACWIS/CANTS 17A/DV, Domestic Violence Screen

- 1) CHILD WELFARE SPECIALIST/INTACT FAMILY SERVICES WORKERS shall complete the Domestic Violence Screen at the following case milestones:
 - Within five days of the initial case assignment;

Note: When case circumstances have not changed and the worker has consulted with his or her supervisor, the worker may re-certify the **Domestic Violence Screen** completed by the CPSW.

- As part of the 45 day assessment;
- Prior to transferring the case to a new worker;

Note: When a **Domestic Violence Screen** has been completed within 30 days of the case transfer and the case circumstances have not changed, the worker may re-certify the screen after consultation with his or her supervisor.

- Every six months as part of the ongoing assessment;
- Whenever domestic violence is suspected or identified;
- Whenever considering screening the case with the State's Attorney; and
- When assessing whether to close the case and immediately prior to staffing the case for closure with the intact family supervisor, a new screen must be

March 23, 2005 – PT 2005.

completed in addition to the requirements of Rules 315, Section 315.310, Termination of Services and Planning for Aftercare.

- 2. PERMANENCY WORKERS shall complete the Domestic Violence Screen for placement cases at the following case milestones:
 - Within 45 working days after initial case assignment and upon transfer of the case when there are *other children still in the home* as part of an open family case assigned to the worker. Assess safety in the child's return home environment and document the conditions or behavior that continues to prevent the child from being returned home. The continued safety of every child still in the home must also be documented.
 - When considering the commencement of unsupervised visits in the home of the parent or guardian.
 - Before an administrative case review when the child in care has a return home goal *and there are other children still in the home* as part of an open family case assigned to the worker.
 - Within 24 hours prior to returning a child home. The **Domestic Violence Screen** must be completed on the child's return home environment.
 - Within five working days after a child is returned home and every month thereafter until the family case is closed.
 - When considering whether to close a reunification service case, the **Domestic Violence Screen** must be completed immediately prior to staffing the case for closure with the permanency supervisor.
 - Whenever evidence or circumstances suggests the presence of domestic violence poses a risk or safety concern for the child whether in the home of a foster parent, relative caregiver or pre-adoptive parent.

Note: Upon transfer and assignment of a case where domestic violence or severe controlling behaviors are alleged, suspected or known that may pose a risk of harm or immediate threat to the safety of the children, the workers must discuss the domestic violence case issues and a summary of the discussion documented in the case file.

3) Identifying Domestic Violence

Workers shall utilize the following list of *significant indicators* to identify possible domestic violence case issues. When a worker determines that one or

March 23, 2005 – PT 2005.

more of the indicators are present he or she shall conduct follow-up domestic violence interviews with alleged adult victim and children.

A) Significant Indicators

- Third party reports of domestic violence.
- Criminal history of assault or damage to property that has been verified through LEADS.
- Physical injuries to an adult, such as bruises, cuts, black eyes, marks on neck, etc.
- One partner seems to control everything (e.g., answers questions for the other partner).
- Observed damage to the home (e.g., phone ripped from the wall, holes in the walls, broken doors or furniture).
- Self-reported incident or incidents of domestic violence.
- One partner uses children to control what the other partner says, does or thinks.
- Prior or current police involvement for domestic violence.
- A history of receiving domestic violence services.

The screen is complete if none of the above indicators are present. Workers should continue with the second part of the screen (verbal indicators) when any of the significant indicators are present, and the facts or circumstances, if true, suggest the presence of domestic violence. Always interview the suspected or known adult victim separately from the suspected or known offender.

B) Verbal Indicators

- Has your partner ever tried to keep you away from your family, friends or neighbors?
- Has your partner ever threatened you or done something else that frightened you?
- Has your partner ever pushed, slapped, punched, kicked or hurt you in other ways?
- Has your partner ever threatened to use the children to control you in any way?

The presence of *significant indicators* and *verbal indicators* requires the worker to assess the risk and safety to the children.

4) Assessment (Level of Risk and Safety)

March 23, 2005 – PT 2005.

The presence of domestic violence may or may not warrant Department intervention. Workers must refer to the Risk Assessment, CERAP, allegation system and Domestic Violence Practice Guide to determine if the domestic violence rises to the level of abuse or neglect or poses a threat to the safety of the children. Interventions will be determined by assessed level of safety and risk to the children.

When assessing the level of risk to the children, workers shall consider whether reasonable cause has been established to believe:

• There is ongoing domestic violence and/or that the alleged batterer has a history of domestic violence;

AND

- The child or children are likely to be used as a shield or held or physically restrained from leaving during an incident of domestic violence; or
- The child or children will place themselves at substantial risk of harm by intervening during an incident of domestic violence; or
- The alleged batterer has committed assault or murder and has threatened to harm members of the immediate family, extended family and pets; or
- The child's or children's ability to function on a daily basis has been substantially impaired due to incidents of domestic violence; or
- The non-offending caregiver or alleged batterer describe the children in negative terms, act negatively towards the children or blame them for the incidents of domestic violence; or
- The alleged batterer has used or has threatened to use weapons.

Workers should also assess any strategies the adult victim has used in the past that can be supported or strengthened to protect the children.

f) Interviewing and interventions

1) Domestic Violence Interviews

When domestic violence is a case issue, domestic violence interviews must be conducted with the adult victim and children away from the perpetrator to assess level of risk and safety to the children. Interviews should only be conducted when it is safe to do so and workers should follow the guidelines for conducting domestic violence interviews, which are included in the Domestic Violence Practice Guide.

2) Collateral Contacts

March 23, 2005 – PT 2005.

Collateral contacts must be made with individuals who can provide information concerning the safety and well being of the children, parental functioning, home environment, the relationship between the adults and between the adults and children (e.g., criminal justice personnel, child care providers, social service agencies, neighbors, school and medical personnel and extended family members with extensive/significant personal contact with the family).

3) Documentation

Information obtained from required domestic violence interviews, collateral contacts, as well as information relevant to safety assessment and protective actions must be documented in interview notes and on the initial and any subsequent **Safety Determination Form**, **CFS 1441**, when evidence or circumstances suggest that a child's safety may be in jeopardy.

4) Level of Department Involvement

The level of Department involvement will be individualized and in correlation to the assessed safety and risk issues of the children. When significant indicators of domestic violence exist based on the administration of the **Domestic Violence Screen**, the Department must offer a domestic violence brochure to the adult who is a possible victim of domestic violence whether or not the level of risk to the child warrants any further involvement. Workers shall refer to the Domestic Violence Practice Guide and consult with their supervisor for further guidance on how to make confidential referrals for adult victims.

g) Safety Planning

Workers shall utilize the guidance provided by the Domestic Violence Decision Tree (Attachment II) in situations where the domestic violence has been observed or documented in LEADS or official reports/records. The Domestic Violence Decision Tree also provides alternatives that workers may pursue with the non-offending adult victim prior to taking protective custody. Those alternatives include the following:

- 1) The batterer acknowledges responsibility for the domestic violence and leaves the home; or
- 2) A safety plan is established and the batterer moves out of the home. This may include steps such as assisting the victim of domestic violence in obtaining a domestic violence order of protection, arrest of the batterer, police involvement or court action; or
- 3) A safety plan is established and the non-offending adult victim relocates with the children to a safe location. This location will be where the perpetrator will not have access, such as a relative's home, friend's home or domestic violence

March 23, 2005 – PT 2005.

shelter. The adult victim is also assisted in obtaining domestic violence services; or

Note: Any safety plan developed that is dependent on a third party's cooperation, must include full releases from the family to permit sharing all relevant information with the third party.

- 4) The non-offending caretaker makes arrangements for the children to be in a safe environment; or
- 5) The children are taken into protective custody if their safety cannot be assured.

h) Service Planning Activities

The primary goal of service planning for domestic violence cases is to promote enhanced safety and protection for children. This will often be achieved by promoting enhanced safety for non-offending adult victims and by having domestic violence perpetrators take responsibility for their own behavioral change. In order to protect the confidentiality of adult victims and children, separate service plans shall be developed for the offender and the adult victim. The victim's service plan shall not be shared with the offender. Administrative Case Reviews shall be segmented in an effort to secure confidentiality. The addresses and/or phone numbers of adult victims and children fleeing from domestic violence perpetrators shall not be included in shared documentation.

Workers shall consult with their supervisors when developing service plans where domestic violence has been identified as an issue. Workers should also refer to the Domestic Violence Practice Guide, which includes interview tools; sample service plans, and plans for protection in domestic violence situations. Adult victims shall be offered services such as family supports, battered women's programs, legal services, welfare and housing advocacy or community counseling services. Perpetrators of domestic violence shall be referred to a Department of Human Services approved partner abuse intervention program. Interventions that the adult victim states will increase the danger to the family shall not be used or promoted by DCFS staff in domestic violence situations without consultation with a supervisor. Consultation with a domestic violence specialist may be requested in such circumstances.

Adult victims may openly ask for help or may appear uncooperative or resistant. The demeanor of the adult victim may be misleading; the adult victim may seem uncooperative due to fear of the perpetrator or of service systems. Cultural beliefs or language barriers may exacerbate this seeming unwillingness to cooperate. However the adult victim appears, workers shall reiterate concern for the safety of both the children and the caretaker, and shall inform the adult victim of appropriate community resources. Referrals shall be offered to adult victims whether or not a case is opened.

March 23, 2005 – PT 2005.

i) Support

The Department will provide regional support to encourage effective interventions at the local level. Domestic Violence Specialists of the Division of Clinical Practices and Professional Development shall provide clinical consultation and technical assistance.

Case Name:	Report Date: Date Screen Completed:				
SCR/CYCIS Number:	Agency Name:				
Worker Name:	RTO/RSF:	Worker ID:			

I. WHEN TO USE THE SCREEN

The **Domestic Violence Screen** has been developed to assist in the identification of domestic violence in the home and associated risk and safety issues. A **Domestic Violence Screen** must be completed for all family reports.

CHILD PROTECTIVE SERVICE WORKERS shall complete the Domestic Violence Screen at the following case milestones:

- Within the first seven days of the initial investigation (Interviews should only be conducted when it is safe to do so and workers should follow the guidelines for conducting domestic violence interviews, which are included in the Domestic Violence Practice Guide.);
- Prior to the case handoff staffing;
- Whenever domestic violence is suspected or identified; and
- At the close of the investigation.

Workers may re-certify the initial **Domestic Violence Screen** prior to the case handoff or at the close of investigation when case circumstances have not changed and the worker has consulted with, and received approval from his or her supervisor to re-certify the screen.

CHILD WELFARE SPECIALIST/INTACT FAMILY SERVICES WORKERS shall complete the Domestic Violence Screen at the following case milestones:

Within five days of the initial case assignment;

Note: When case circumstances have not changed and the worker has consulted with his or her supervisor, the worker may re-certify the **Domestic Violence Screen** completed by the CPSW.

- As part of the 45 day assessment;
- Prior to transferring the case to a new worker;

Note: When a **Domestic Violence Screen** has been completed within 30 days of the case transfer and the case circumstances have not changed, the worker may re-certify the screen after consultation with his or her supervisor.

- Every six months as part of the ongoing assessment;
- Whenever domestic violence is suspected or identified;
- Whenever considering screening the case with the State's Attorney; and
- When assessing whether to close the case and immediately prior to staffing the case for closure with the intact family supervisor, a new screen must be completed in addition to the requirements of Rules 315, Section 315.310, Termination of Services and Planning for Aftercare.

PERMANENCY WORKERS shall complete the Domestic Violence Screen for placement cases at the following case milestones.

- Within 45 working days after initial case assignment and upon transfer of the case when there are *other children still in the home* as part of an open family case assigned to the worker. Assess safety in the child's return home environment and document the conditions or behavior that continues to prevent the child from being returned home. The continued safety of every child still in the home must also be documented.
- When considering the commencement of unsupervised visits in the home of the parent or guardian.
- Before an administrative case review when the child in care has a return home goal *and* there are other children still in the home as part of an open family case assigned to the worker.
- Within 24 hours prior to returning a child home. The **Domestic Violence Screen** must be completed on the child's return home environment.
- Within five working days after a child is returned home and every month thereafter until the family case is closed.
- When considering whether to close a reunification service case, the **Domestic Violence Screen** must be completed immediately prior to staffing the case for closure with the permanency supervisor.

• Whenever evidence or circumstances suggests the presence of domestic violence poses a risk or safety concern for the child whether in the home of a foster parent, relative caregiver or pre-adoptive parent.

Note: Upon transfer and assignment of a case where domestic violence or severe controlling behaviors are alleged, suspected or known that may pose a risk of harm or immediate threat to the safety of the children, the workers must discuss the domestic violence case issues and a summary of the discussion documented in the case file.

II. IDENTIFYING DOMESTIC VIOLENCE

Significant Indicators

Significant indicators of domestic violence are the physical signs and/or verifiable reports to consider during the assessment. The screen is complete after this section if no evidence of significant indicators exists. Complete the *Verbal Indicators* section if any of the significant indicators have been identified.

Yes	No	
		Third party reports of domestic violence.
		Criminal history of assault or damage to property that has been verified through LEADS.
		Physical injuries to an adult (e.g., bruises, cuts, black eyes, marks on neck).
		One partner seems to control everything (e.g., answers questions for the other partner).
		Observed damage to home (e.g., phone ripped from wall, holes in wall, broken doors or furniture).
		Self-reported incident or incidents of domestic violence.
		One partner uses children to control what the other partner says, does or thinks.
		Prior or current police involvement for domestic violence.
		An existing order of protection.
		A history of receiving domestic violence services.

Note: If there is current police involvement, summarize the extent of the involvement. Whenever a worker learns of an existing order of protection, the worker must include a copy of the order in the case file. If the client is unsure of the existence of an order of protection, the worker shall utilize LEADS to determine if there is such an order. Include the report number, date and time of occurrence.

Verbal Indicators

If any significant indicators are present, the following questions must be asked of the adult who is a suspected or known victim of domestic violence. **Do not interview the victim with the**

batterer or other members of the household present. The screen is complete if no verbal indicators are present. **Complete the assessment section if verbal indicators are present.**

Yes	No	
		Has your partner ever tried to keep you away from your family, friends, work or neighbors?
		Has your partner ever threatened you or done something else that frightened you?
		Has your partner ever pushed, slapped, punched, kicked or hurt you in other ways?
		Has your partner ever threatened to use the children to control you in any way?
III.	ASSESS	MENT (Level of Risk and Safety)
	using the	he risk and safety in cases where domestic violence has been identified or suspected by the interview tools in the Domestic Violence Practice Guide. With the information answer the following five questions: (Carter and Schechter, 1997)
Was o	r is there p	physical danger posed to the child from the batterer?
		al, developmental, or emotional impact of the domestic violence on the children rise to ected abuse or neglect?
	ere strates	gies the adult victim has used in the past that can be supported or strengthened to ren?

Has the batterer ever used or threatened to use weapons of <i>any</i> kind?							
In consultation with the supervisor, what if any action is required to address safety and/or risk?							
Comments							
Worker's Signature:	Date:						
Supervisor's Signature:	Date:						

This page intentionally left blank.

DOMESTIC VIOLENCE TRAINING EVALUATION

Date(s	s):					
	er(s):					
DIRE	k you for participating in this training. Please complete the following auge whether or not we are meeting your needs and will he CTIONS: Please rate your level of agreement with each of the fof agreement.	elp us pl	an for f	uture se	essions.	-
Content and Process		Agree		Disagree		N/A
1. 2. 3.	Main objectives were clear Training provided sufficient activities and variations Training was well-paced (length of time spent on various activities and topics was appropriate) Training gave me an opportunity to apply the skills learned	 5 5 5 5 5	4 4 4	☐ 3 ☐ 3 ☐ 3 ☐ 3		1
	Comments:					
Specif	fic Course Content	Agree			Disagree	
The for 5. 6. 7.	Discern warning signs and barriers to leaving an abusive relationship. Know the impact of Domestic Violence on children. Identify Domestic Violence resources and services available to victims and batterers.	□ 5 □ 5 □ 5	4 4	☐ 3 ☐ 3 ☐ 3		1
	Comments:					
Presenter Skills		Agree			Disagree N	
8. 9. 10. 11.	Was knowledgeable about the subject Was well prepared Communicated well Held my interest Comments:	☐ 5 ☐ 5 ☐ 5 ☐ 5	4 4 4	☐ 3 ☐ 3 ☐ 3 ☐ 3		1

Over	all Program	Agree		Disagree	N/A
12. 13.	This training program met the established objectives I will be able to apply what I learned to my work	□ 5 □ 4 □ 5 □ 4		$\begin{array}{c c} 2 & \square \\ 2 & \square \end{array}$	1 1
	Comments:				
Pleas	se circle your answer to these questions:				
14.	If needed, were materials provided in an alternative format (e.g. Braille, interpreter, etc.)?		Yes	☐ No	□ N/A
	Comments:				
Addi	tional Comments:				
Majo	r strengths of the training program:				
Му д	reatest challenge in implementing the skills/procedures taught in t	his course will b	ie:		
I reco	ommend modifying the following in this training program:				
Job T	Fitle: Name: Please Print (Optional)	pl	Print (Opt	ional)	
	Please Print (Optional)	Please	rrint (Opt	ionai)	

Thank you for your feedback!

Trainee: Please return evaluation form by e-mail to <u>BTaylor1@idcfs.state.il.us</u> or by fax to Brooke Taylor at 217/557-4349.