

# Clearinghouse on Supervised Visitation

The Institute for Family Violence Studies

Florida State University

## FEBRUARY EPRESS

### QUESTIONS FROM DIRECTORS

*When programs work with local churches or agencies to obtain space for visits, do they use a Memorandum of Agreement? Do you have a sample?*

Yes, I assume they do have some sort of written agreement, but no, I do not have a sample to offer you. If anyone reading this has an agreement they would like to share, please send it to [koehme@fsu.edu](mailto:koehme@fsu.edu).

*Is there a requirement for us to have insurance for child abuse or maltreatment?*

I know of no such requirement. The mandate is for liability insurance. See page 9:

[http://familyvio.csw.fsu.edu/wp-content/uploads/2012/04/Supreme\\_Court\\_Standards\\_for\\_SV\\_from\\_1998.pdf](http://familyvio.csw.fsu.edu/wp-content/uploads/2012/04/Supreme_Court_Standards_for_SV_from_1998.pdf)

*A grandmother is very active in her son's divorce. She has been calling me to talk about upcoming and prior visits, and she questions staff's credentials. She wants to come in and talk about how terrible the biological mom is. Am I supposed to be sharing information with her?*

Unless the court has mandated your program to correspond with the grandmother, you are under no obligation to do so. In addition, I doubt you have the resources to interview every family member and friend on both sides of the case – and such a role is not your job. I assume her son has been providing her with all of the court and SV documents, so she feels free to call you. The problem is that her son is the client, and he has a lawyer. There is a lot of potential to get mixed messages and crossed signals with three people asking the same questions in different ways. In addition, I assume the court wants the father to be

**the active parent he will have to be when the visits are no longer supervised. I would advise you to write a brief letter to the father and copy his lawyer, letting him know that your program will correspond directly with him (and his lawyer) about the case. When his mother calls, cite the letter. Be polite and respectful but firm.**

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## **Medication Safety**

By Kristen Carney

Over the counter and prescription medications are commonplace in the American home. It is imperative that parents and visitation monitors understand the risks associated with leaving these medications within their child's reach, proper disposal methods, and how to talk to children about medication safety. Monitors will come into contact with individuals who use over the counter medications and prescriptions every day and because safety is the number one concern, visitation monitors should adhere to safe protocol when handling, distributing, and disposing of medication.



### **Medications are the leading cause of child poisoning.**



In 2011 alone, 67,700 children were hospitalized due to medication poisoning and 3 out of 4 incidences resulted from medicine belonging to a parent or grandparent. More often than not, these medications were left within eyesight or arm's reach of the children which increases their likelihood of exposure. Parents should conceal medications from children and when guests enter the home, purses, bags and coats should be placed out of reach of children to protect their property from a curious child.

### **THE FACTS**

- In 2011, 67,700 children under the age of 4 were seen in emergency rooms for accidental medication exposure

- The most common medicines that children under 4 get into are ibuprofen, multivitamins and diaper care and rash products
- Ages 13 to 24 month olds are most frequently seen in emergency departments after getting into a medication that was not intended for them. This accounts for 68% of medication-related visits for young children

## **OUT OF SIGHT AND OUT OF REACH**

Oftentimes, children will come into contact with medication that is not intended for them in the following ways:

- **27%** of the time the child finds medicine on the ground after being dropped
- **20%** of the time the child finds medicine in a purse or bag
- **20%** of the time medicine is found on a counter or nightstand
- **15%** of the time medicine is found in a pillbox or bag of pills
- **6%** of the time medicine is retrieved from a cabinet or drawer

It is important to limit a child's access to medications. Placing medications out of site and out of reach will decrease a child's exposure and likelihood that he or she will consume medication on accident.

## **OBSCURE ITEMS**

Parents and visitation monitors must take extra steps to safeguard their children from medications and pills. It is also important to consider the implications of items such as diaper care and rash products. These items can propose life-threatening danger to children. Other objects, such as household cleaning agents, may be readily accessible by children and can lead to poisoning or even death. In the instance of suspected exposure, please call the [Poison Help Line: 1-800-222-1222](tel:1-800-222-1222). The poison help line can also be a great resource for information on proper dosages for medication intended for children.

## **PROPER DOSAGE**

The following tips and tricks should be used in order to ensure proper dosage:

- Keep medications in the original packaging and containers they originally came in.
- Even if you have used the medicine before, take the time to read the label and follow the directions.
- Do not give more medicine than the label states. No matter how sick the child is, it won't help in making children feel better faster, and it may cause harm.

- When giving multiple medications to treat various symptoms, be aware of giving children more than one medicine with the same active ingredient, because it increases risk for an overdose.
- Write down the time, dose and type of medicine every time you administer it. Timing of dosage leads to the greatest number of errors in children under the age of 5. It accounts for roughly 31% of all dosing errors.
- Measurement errors are the second leading cause of improper dosages. Measurement errors can be avoided by only administering the exact amount recommended by the health care professional or label on the medication. Using the dosing instrument that was provided with the medication can also limit measurement errors which account for around 30% of dosage errors.



## **RELATIVES/CAREGIVERS**

Forty-three percent of ER visits for young children result from the child getting into medicine where the medicine belonged to a close relative. Talk to family members about safety procedures with medicine or pillboxes when children are around. Offer to place your guest's belongings out of children's reach to protect their belongings and to protect your child.

When leaving children with a caregiver like a family member, friend, or babysitter, be sure to include specific instructions for your child's medication needs. The instructions should include what medicine to give, when to give it, and the correct dose. Emphasize the importance of documenting the time and dose given to the child to avoid accidental overdosing.

## **DISPOSAL**

When there is less medication in the house, the risk of a child getting into it decreases substantially. In order to limit a child's exposure parents can get rid of unused or expired medication. Medication take-back programs are available in most communities. This is an easy way to get rid of unused, unwanted, and expired medications. These authorized programs will have more information on the proper disposal of certain medications and can be a great community resource.

The Food and Drug Administration has outlined a list of medications that are dangerous and parents should take extra measures to dispose of them because they can be extremely harmful if ingested on accident. (Examples: morphine, hydrocodone, oxycodone, etc.)

To dispose on your own, medicine should be placed into a sealable plastic bag. If it is a pill, add water to dissolve it. Add cat litter, sawdust or coffee grounds to the plastic bag.

If you don't have any of these things, add anything that will make it less appealing for children or pets. Avoid flushing unwanted or unused medications.

## TALKING TO YOUR KIDS

Conversations about medication safety are a great way to make children aware of the potential harm of exposure to medications that were not intended for them. Teach the following things to your children to emphasize the importance of safe medication practices:

- Don't take medicine on your own. Medicine should always be given by an adult.
  - Store medicine out of reach – this requires an adult to retrieve and administer the medicine.
- Medicine is not candy. Don't call it candy to get them to take it. This could encourage them to try it on their own.
- Only take medications that are intended for you!
  - Taking prescription and OTC medications that are not meant for you can have serious consequences.
- Model responsible medication behavior.
  - It has been said that actions speak louder than words. What kids see adults doing is a much stronger message than what they are told to do.

Medication safety should be emphasized with children of all ages. It is not just a problem with younger children. Monitors should share this information with parents and caregivers to promote a healthy home environment safe from the risk of medication misuse.

## RESOURCE LIST

[Poison Help Line](http://www.poisonhelp.org): 1-800-222-1222

## REFERENCES

Disposal Sites & Events for Homeowners. (2015, October 13). Retrieved November 18, 2015, from <http://www.dep.state.fl.us/waste/categories/medications/pages/disposal.htm>

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# How-To Videos for Kids

This is a list of video resources to help children learn some of the basic skills necessary in daily life. Parents can watch these with their children, and repeat the messages and instructions. Have fun!



Name	Length	Content	Link
Wash your hands, face, hair song - English for Children Nursery Rhymes Songs - English lively songs	1:36 Minutes	This video gives simple instructions to children on how to get their day started. This video gives children examples of how to do things that should be a part of their daily routine such as washing their face and hands and brushing their teeth and hair. The best part about it is that the rhyme is simple and easy to remember!	<a href="https://www.youtube.com/watch?v=ibwO6v-e2Xw">https://www.youtube.com/watch?v=ibwO6v-e2Xw</a>
Hey Kids! Learn How To Brush Your Teeth Properly With Baby Tooth & Make the Tooth Fairy Happy!	3:48 Minutes	This video gives children step-by-step instructions on how to brush their teeth properly.	<a href="https://www.youtube.com/watch?v=R_mgHakWC1g">https://www.youtube.com/watch?v=R_mgHakWC1g</a>
Germ Smart Kids - How To Wash Your Hands	5:04 Minutes	This short video talks to children about the importance of washing their hands to get rid of germs that may make them sick and gives them step-by-step instructions on how to properly clean their hands.	<a href="https://www.youtube.com/watch?v=LQ24EfM7sEw">https://www.youtube.com/watch?v=LQ24EfM7sEw</a>

<b>Elmo &amp; Rosita: The Right Way to Sneeze!</b>	0:58	This video shows children how to cover their mouth properly when sneezing to avoid spreading germs.	<a href="https://www.youtube.com/watch?v=QW1yodZJpG8">https://www.youtube.com/watch?v=QW1yodZJpG8</a>
<b>How to Tie Shoe Laces - Teach Children</b>	2:02 Minutes	This is a short clip giving children simple instructions on how to tie their shoes.	<a href="https://www.youtube.com/watch?v=VA4AACzIhe8">https://www.youtube.com/watch?v=VA4AACzIhe8</a>
<b>This is the Way We Take Our Bath   Good Habits   Nursery Rhymes for Kids</b>	2:46 Minutes	This video gives children instructions on how to take a bath and how to dry their body after taking a bath.	<a href="https://www.youtube.com/watch?v=iJnflLauUoE">https://www.youtube.com/watch?v=iJnflLauUoE</a>
<b>You Can Dress Yourself</b>	3:28 Minutes	This video shows children how to dress themselves. It also explains the importance of preparing their outfit a day in advance and being careful to pick clothes that would be suitable for the weather and activities planned for that day.	<a href="https://www.youtube.com/watch?v=iugZbbUvAml">https://www.youtube.com/watch?v=iugZbbUvAml</a>
<b>Learn About 9-1- 1 with Emergency Ernie</b>	3:37 Minutes	This video shows children how to call 911 and gives examples of situations in which they should or should not call 911.	<a href="https://www.youtube.com/watch?v=ulf4oKqTUc8">https://www.youtube.com/watch?v=ulf4oKqTUc8</a>
<b>Safety and First Aid Cartoon</b>	4:30 Minutes	This video warns children of things that may harm them and gives them some safety tips to follow such as exercising precaution while in the kitchen or crossing the street.	<a href="https://www.youtube.com/watch?v=cC0smhfdTlg">https://www.youtube.com/watch?v=cC0smhfdTlg</a>
<b>Ask For Help Song: We Have Skills: Social Skills for School Success K-3</b>	0:58	This video teaches children how to politely ask for help.	<a href="https://www.youtube.com/watch?v=yoBPGvBlaz8">https://www.youtube.com/watch?v=yoBPGvBlaz8</a>



# Training Manual for Florida's Supervised Visitation Programs

## CHAPTER

### DOMESTIC VIOLENCE AND SUPERVISED VISITATION

#### Case Scenario

Tristan has been visiting his ten year old son Cole for the past few weeks at the local supervised visitation program. Upon intake, Cole's mother Victoria expressed concern about her own safety, as well as Cole's while participating in the visits. Victoria has a protection order against Tristan due to the history of domestic violence in their marriage. During their marriage, Tristan threatened Victoria with his hunting knife many times. Victoria specifically recalls a time he waved his hunting knife at her, saying, "I'll make you look like the trophy on the wall." Under Florida law, if a Court enters a domestic violence final injunction protection order against an individual, it is illegal to possess any firearms, but Victoria told the monitor she was worried Tristan may not have gotten rid of his hunting knives.

At a visit, Tristan brings up hunting with his son and shows him pictures of his knives. Cole finds this story very exciting and asks his father if he can come hunting with him sometime. Tristan tells his son, "It's up to Mommy, so you go ask her, and tell her that she knows I'm good with a knife and you can be, too!" When Victoria picks her son up after the visit, Cole asks about hunting with his Dad. Victoria is very afraid because she knows that Tristan uses knives when he hunts and she is worried that he's using this as a way to threaten her. Victoria calls the supervised visitation program to see what she can do.

*After completion of this chapter, you will be able to answer the following questions:*

- What batterer characteristics are described here about Tristan?
- How should the supervised visitation monitor have handled this topic during the visit?
- What policies and procedures need to be in place in order to protect Victoria?

## Introduction

In supervised visitation it is imperative that visit monitors understand the dynamics of domestic violence so that they can adjust their interactions with parents and children to enhance safety. Understanding the dynamics of domestic violence and how it affects children, victims, and perpetrators will allow programs to implement practices that best protect visiting families and staff members. This training will provide monitors with an overview of that information.

Supervised visitation services assist not only victims but also the court and law enforcement in ensuring safe contact between perpetrators and their children. It is important that monitors are attentive and observant of the interactions between family members who have experienced domestic violence. This training will help monitors hone their analytic skills in order to identify potentially harmful situations. In the case scenario above, the visit monitor could have stepped in at several points to prevent a potentially dangerous situation.

It is up to the monitors to take preventative measures within the program to keep batterers from coming into contact with victim parents at visits. Many families that are referred to supervised visitation programs have an injunction or order of protection. There are different types of injunctions which you will learn about later in this chapter. As you continue throughout this chapter you will learn that many batterers use their children to gain important information about their victim; batterers may ask their children where they and the victim parent are staying or where the victim works. Thus, it is important for monitors to pay close attention to the dialogue occurring between a battering parent and a child. It should not be assumed that if an injunction is in place that the victim parent is now safe from the batterer. There is a very real threat of danger and fatality, and at the end of this chapter you will learn how utilize risk identification skills and consider whether a situation is safe enough to continue services.

**The CDC reports that two-thirds of female stalking victims were stalked by a current or previous intimate partner.**

*Many domestic violence perpetrators will try to find out where their victim is and may use children to find out that information.*

## What will I learn in this chapter?

**Upon completion of this chapter, participants will be able to:**

- Understand domestic violence in its complexity and its impact on supervised visitation
- Understand the myths and biases that perpetuate domestic violence

- Identify characteristics of perpetrators and victims
- Recognize common behaviors of perpetrators that may impact supervised visitation services
- Work with perpetrators to ensure appropriate visits with children
- Understand the effects of domestic violence on children
- Understand how domestic violence affects a child's brain
- Understand the concerns that victim parents may have regarding supervised visitation
- Provide a safe and controlled environment for children
- Implement policies that protect children, victims, other families, and staff
- Utilize risk identification skills to assess danger

## Domestic Violence Statistics

Released in 2010, the summary report of the National Intimate Partner and Sexual Violence Survey revealed several alarming statistics in regards to domestic violence.

- In 2010, the summary report of the National Intimate Partner and Sexual Violence Survey found that more than 1 in 3 women (35.6%) and more than 1 in 4 men (28.5%) in the United States have experienced rape, physical violence, and/or stalking by an intimate partner in their lifetime.
  - *Center for Disease Control and Prevention & National Center for Injury Prevention and Control, 2010*
- Domestic violence can be fatal. In Florida's 2015 Annual Fatality Review Report, 64% of victims who were killed were separated from the perpetrator at the time of the murder
  - *Report of the Attorney General's Statewide Domestic Violence Fatality Review Team, 2015*
- Combining local, state and the National Domestic Violence Hotline calls received more than 14 calls are made to hotlines every minute.
  - *2013 Domestic Violence Count: A 24-Hour Census of Domestic Violence Shelters and Services, 2013*

# Common Myths about Domestic Violence

## **Myth 1: Domestic violence is rare.**

Domestic violence is tragically common. Data collected from the National Crime Victimization Survey found that domestic violence accounts for 21% of all violent crime. 77% of domestic violence occurs behind the closed doors of the victim's home, and so if people cannot see the domestic violence while it is happening, they might not think that it is occurring.

- U.S. Department of Justice. (2014).

## **Myth 2: Alcohol and drugs causes domestic violence.**

While alcohol and drugs can be involved during an episode of domestic violence, it certainly does not cause domestic violence. Many people who drink do not abuse their partners. Batterers may use alcohol and drugs as an excuse for being violent.

## **Myth 3: Victims have done something to cause the abuse, or they like the abuse. If they didn't, they would just leave.**

Victim provocation is no more common in domestic violence than in any other crime. Battered women often make repeated attempts to leave violent relationships, but are prevented from doing so by the abuser's increased violence and control tactics. Other factors which inhibit a victim's ability to leave include economic dependence, few viable options for housing and support, unhelpful responses from the criminal justice system or other agencies, social isolation, cultural or religious constraints, a commitment to the abuser and the relationship, and fear of further violence.

## **Myth 4: Men cannot be abused**

Although domestic violence disproportionately affects women, men can be victims of abuse as well. The CDC reports that 1 in 7 men have been severely assaulted by an intimate partner. In 2013, 13% of calls to the Domestic Violence Hotline were from male victims calling for assistance. Due to myths that reinforce traditional ideas of masculinity, male victims may be hesitant to report abuse due to the societal repercussions.

- National Center for Injury Prevention and Control, & Centers for Disease Control and Prevention. (2010).
- National Domestic Violence Hotline. (2014).

## Did you know?

- According to the CDC almost 1 in 4 women and 1 in 7 men have experienced severe physical violence by an intimate partner.

- *The National Intimate Partner and Sexual Violence Survey, 2010*

**Myth 5: Domestic violence does not affect children.**

Domestic Violence does affect children. When there is violence in the home, it affects everyone. Domestic violence may result in direct physical injury and/or psychological harm to children. If a child tries to intervene during an episode of violence, the child may be physically injured. Adult victims may over-discipline in order to keep the perpetrator from getting angry. Later in this chapter you will learn more about how children are affected by domestic violence.

- UNICEF & The Body Shop. (2006).

**Myth 6: Religious families do not experience domestic violence.**

The "National Declaration by Religious and Spiritual Leaders to Address Violence Against Women" acknowledges that domestic violence exists in all communities, including the church, and that too often sacred texts, traditions, and values have been misused to condone abuse.

- Faith Institute, 2006

**Myth 7: Domestic violence is usually a one-time event, or an isolated incident.**

Battering is often a pattern of coercion and control that one person exerts over another. It typically includes the repeated use of a number of tactics including intimidation, threats, economic deprivation, isolation, and psychological and sexual abuse. Physical violence is just one of these tactics. The various forms of abuse utilized by abusers help to maintain power and control over their spouses and partners. Sometimes an abuser can control a victim by threatening violence, even if actual physical violence has not been used for some time.

## What is Domestic Violence?

### Legal Definition

*Florida Statute Chapter 741.28*

- "Domestic violence" means any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, false imprisonment, or any criminal offense resulting in physical injury or death of one family or household member by another family or household member. 741.28(2), Florida Statutes.

### *Did you know?*

The Florida annual fatality review report found that 64% of abuse victims who were murdered were separated from the perpetrator.

- *Faces of Fatality, Report of the Attorney General's Statewide Domestic Violence Fatality Review Team, 2015*

- "Family or household member" means spouses, former spouses, persons related by blood or marriage, persons who are presently residing together as if a family or who have resided together in the past as if a family, and persons who are parents of a child in common regardless of whether they have been married. With the exception of persons who have a child in common, the family or household members must be currently residing or have in the past resided together in the same single dwelling unit. 741.28(3), Florida Statutes.

### **A Non-legal definition**

*From The National Domestic Violence Hotline:*

- “Abuse is a repetitive pattern of behaviors to maintain power and control over an intimate partner. These are behaviors that physically harm, arouse fear, prevent a partner from doing what they wish or force them to behave in ways they do not want. Abuse includes the use of physical and sexual violence, threats and intimidation, emotional abuse and economic deprivation. Many of these different forms of abuse can be going on at any one time.”

Another term for domestic violence is *intimate partner violence* which is inclusive of couples who do not or have not lived under the same household but have or had an intimate relationship. As a visitation monitor, it is important to understand that the parents you work with may not have ever lived together but had a violent relationship. Do not assume that mere separation of the victim from the perpetrator will end the violence. Most homicides that occur happen after the victim has left the abuser.

## Types of Domestic Violence

Table 1: Types of Domestic Violence

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<b>Physical Abuse</b> <ul style="list-style-type: none"><li>• Slapping</li><li>• Burning</li><li>• Mutilating</li><li>• Kicking</li><li>• Threatening with a knife, gun, or other weapon</li></ul> Destroying loved objects or pets	<b>Emotional Abuse</b> <ul style="list-style-type: none"><li>• Humiliation</li><li>• Threatening to kill</li><li>• Name- calling</li><li>• Accusing of affairs, infidelity</li><li>• Harassing</li><li>• Depriving of sleep</li><li>• Threatening children and/or pets</li><li>• Isolating</li><li>• Breaking household objects</li><li>• Withdrawing</li></ul>
<b>Economic Abuse</b> <ul style="list-style-type: none"><li>• Lying about money</li><li>• Stealing the victim's money</li><li>• Withholding all information about family finances</li><li>• Withholding money from victim, even for basic necessities</li><li>• Ruining the victim's credit</li></ul>	<b>Sexual Abuse</b> <ul style="list-style-type: none"><li>• Raping</li><li>• Sexually mutilating</li><li>• Forcing victim to have unwanted sex</li><li>• Threatening to sexually abuse</li><li>• Forcing victim to perform scenes from pornographic material</li><li>• Forcing sex in front of children or with third party</li></ul>

## Control Through Children

- Forcing children to spy on their parents
- Forcing children to witness degradation of parent
- Physically assaulting children or threatening children in order to control victim
- Using children as go-betweens with threats
- Intimidating or tricking children to reveal victim parent's whereabouts during supervised visits
- Forcing children to assault their parent

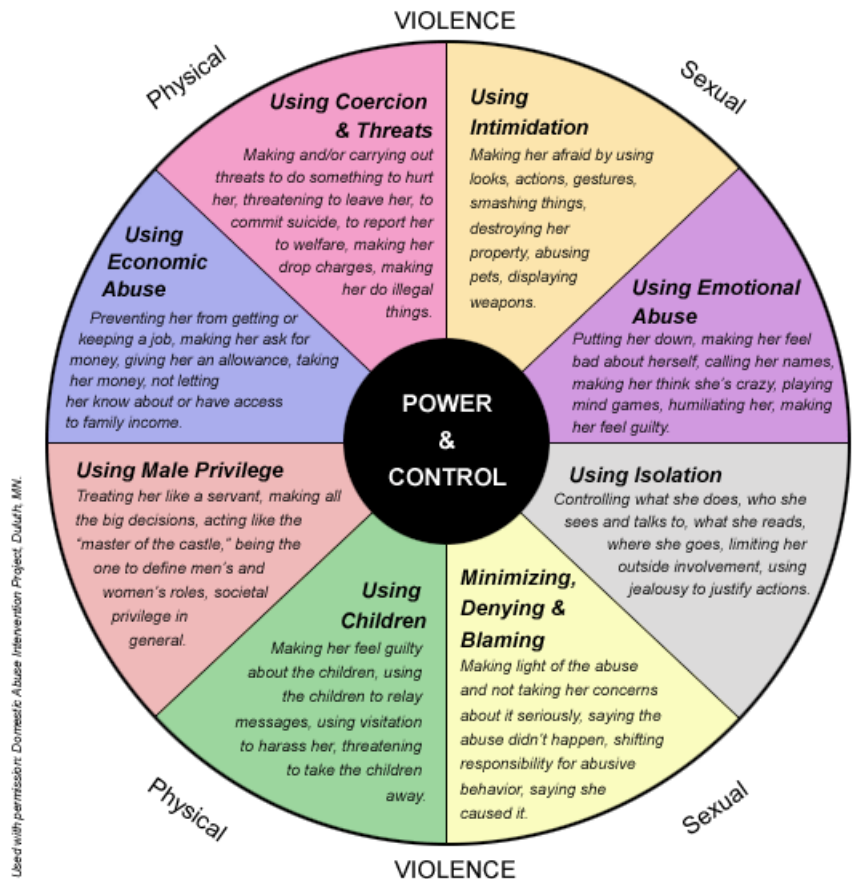
Abusers often use many tactics, including these in the chart below.

## Dynamics of Domestic Violence

Developed by the Domestic Abuse Intervention Project in Duluth, Minnesota, the Power and Control Wheel illustrates the tactics an abuser may use to control a victim. The victim is constantly surrounded by threats and/or actual physical and sexual abuse, as the abuser attempts to exert complete power and control.

### Key concepts about Power and Control Dynamics:

- Abusers believe they are entitled to control their victims. They believe that threats and violence are acceptable and will produce the desired results. Therefore, domestic violence is purposeful and instrumental behavior.
- The pattern is directed at restricting independent thought and action so that the victim will become devoted to fulfilling the needs of the abuser.





- The pattern is not impulsive or "out of control" behavior. Tactics that work to control the victim are selectively chosen by the perpetrator. This achievement is unfulfilling, however, because the abuser can never get enough control to make him/her feel comfortable. It is impossible, despite the victim's attempts to comply.
- Domestic violence is not limited to a person who physically hurts a spouse or family member because he or she cannot control his or her temper in an argument.

## **Legal Options Available to Victims of Violence**

Many domestic violence referrals to supervised visitation are the result of one parent obtaining an Injunction for Protection Against Domestic Violence. Thus, it is important to understand the legal options available to victims of violence.

In the state of Florida there are five different types of injunctions that can protect victims from perpetrators who commit acts of domestic violence, repeat violence, sexual violence, or dating violence, and stalking. It is important to understand the five different types of injunctions.

### **1. Injunction for Protection Against Domestic violence**

*Persons who may Petition for a Domestic Violence Injunction*

“Any person described in paragraph (e), who is either the victim of domestic violence as defined in s. 741.28 or has reasonable cause to believe he or she is in imminent danger of becoming the victim of any act of domestic violence, has standing in the circuit court to file a sworn petition for an injunction for protection against domestic violence.” 741.30(1)(a), Florida Statutes.

### **Other Types of Injunctions**

*Florida Statutes 784.046 contains the repeat violence, dating violence, and sexual violence injunctions.*

### **2. Repeat Violence**

“Repeat violence” means two incidents of violence or stalking committed by the respondent, one of which must have been within 6 months of the filing of the petition, which are directed against the petitioner or the petitioner’s immediate family member.”

784.046(1)(b), Florida Statutes.

“Violence” means any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, or false imprisonment, or any criminal offense resulting in physical injury or death, by a person against any other person. 784.046(1)(a), Florida Statutes.

*Persons who may Petition for a Repeat Violence Injunction*

“Any person who is the victim of repeat violence or the parent or legal guardian of any minor child who is living at home and who seeks an injunction for protection against repeat violence on behalf of the minor child has standing in the circuit court to file a sworn petition for an injunction for protection against repeat violence.” 784.046(2)(a), Florida Statutes.



### **3. Dating Violence**

“Dating violence” means violence between individuals who have or have had a continuing and significant relationship of a romantic or intimate nature. The existence of such a relationship shall be determined based on the consideration of the following factors:

1. A dating relationship must have existed within the past 6 months;
2. The nature of the relationship must have been characterized by the expectation of affection or sexual involvement between the parties; and
3. The frequency and type of interaction between the persons involved in the relationship must have included that the persons have been involved over time and on a continuous basis during the course of the relationship.”

The term does not include violence in a casual acquaintanceship or violence between individuals who only have engaged in ordinary fraternization in a business or social context. 786.046(1)(d), Florida Statutes.

*Persons who may petition for an injunction for dating violence:*

“Any person who is the victim of dating violence and has reasonable cause to believe he or she is in imminent danger of becoming the victim of another act of dating violence, or any person who has reasonable cause to believe he or she is in imminent

danger of becoming the victim of an act of dating violence, or the parent or legal guardian of any minor child who is living at home and who seeks an injunction for protection against dating violence on behalf of that minor child, has standing in the circuit court to file a sworn petition for an injunction for protection against dating violence.” 784.046(2)(b), Florida Statutes.

#### 4. Sexual Violence

“Sexual violence” means any one incident of:

1. Sexual battery, as defined in chapter 794;
2. A lewd or lascivious act, as defined in chapter 800, committed upon or in the presence of a person younger than 16 years of age;
3. Luring or enticing a child, as described in chapter 787;
4. Sexual performance by a child, as described in chapter 827; or
5. Any other forcible felony wherein a sexual act is committed or attempted, regardless of whether criminal charges based on the incident were filed, reduced, or dismissed by the state attorney.” 784.046(1)(c), Florida Statutes.



*Persons who may petition for a sexual violence injunction:*

“A person who is the victim of sexual violence or the parent or legal guardian of a minor child who is living at home who is the victim of sexual violence has standing in the circuit court to file a sworn petition for an injunction for protection against sexual violence on his or her own behalf or on behalf of the minor child if:

1. The person has reported the sexual violence to a law enforcement agency and is cooperating in any criminal proceeding against the respondent, regardless of whether criminal charges based on the sexual violence have been filed, reduced, or dismissed by the state attorney; or
2. The respondent who committed the sexual violence against the victim or minor child was sentenced to a term of imprisonment in state prison for the sexual violence and the respondent’s term of imprisonment has expired or is due to expire within 90 days following the date the petition is filed.” 784.046(2)(c), Florida Statutes.

#### 5. Stalking

- “A person who willfully, maliciously, and repeatedly follows, harasses, or cyberstalks another person commits the offense of stalking, a misdemeanor of the first degree.” §784.048(2), Florida Statutes.
- “A person who willfully, maliciously, and repeatedly follows, harasses or cyberstalks another person, and makes a credible threat to that person commits the offense of aggravated stalking, a felony of the third degree.” §784.048(3), Florida Statutes.

*Persons who may file for a stalking injunction:*

- “A person who is the victim of stalking or the parent or legal guardian of a minor child who is living at home who seeks an injunction for protection against stalking on behalf of the minor child has standing in the circuit court to file a sworn petition for an injunction for protection against stalking.” §784.0485(1)(a), Florida Statutes.
- “If it appears to the court that stalking exists, the court may grant a temporary injunction ex parte, pending a full hearing, and may grant such relief as the court deems proper, including an injunction restraining the respondent from committing any act of stalking.” §784.0485(5)(a), Florida Statutes.

*The full Stalking Statute is found in 784.048, Florida Statutes.*

## Characteristics of Perpetrators

Abusers do not differ from non-abusers in race, religion, or economic status. Abusers come from every profession, every level of education, every income level, every ethnic group, and every geographic location.

For various reasons, abusers can seem more "believable" and sympathetic than their victims. Therefore, it is very important for visit monitors to have an awareness of common abuser characteristics and behaviors in order to greater understand the dynamics of domestic violence.

**Abusers deny responsibility.** Often times, abusers will not take accountability for their abusive behavior. They might refuse responsibility for their actions by minimizing, denying, or lying about abusive episodes.

Abusers may blame their partner for their abusive actions or claim that their actions were justifiable due to the victim's actions.

**Batterers may blame alcohol or drug use for their behavior.** Abusers may attribute their abusive behaviors to alcohol or other substances. However, research indicates that batterers still abuse even when they are not using substances.

**The “Jekyll and Hyde” perpetrator personality.** This type of personality refers to the tendency of many batterers to possess good characteristics that might be charming or even loving. Then they also possess a darker abusive side. Batterers may not be abusive all of the time, in all places, or with all individuals. The tendency for abusers to have both good and bad characteristics help hide the reality of the abuse.

**Some, but not all, abusers may have been abused as children.** While being abused as a child does not predict future violence or involvement in violence, it can increase the risk for future domestic violence. Supervised visitation plays an important role in breaking this cycle of violence. Without preventative measures, children may grow up believing that domestic violence is a normal part of relationships.

## **Children's Experiences with Domestic Violence**

When children live in a home where domestic violence is present, they can be affected in many ways regardless of their age. For reasons they cannot control, infants, toddlers, and school aged children can become drawn into the domestic violence occurring in the home.

### **Ways Children are Drawn In**

#### *Infants: Ages 0-1*

- Born prematurely due to the effects of abuse on the mother
- Can hear or see the abuse
- Awaken due to loud yelling and actions
- In victim parents arms during abusive episode, children may be stripped from parent's arms by abuser

*Toddlers: Ages 2-4*

- Can see or hear the abuse.
- Tries to stop the altercation, can become injured during process.
- Questioned by abusive parent about victim parent's activities
- Kidnapped or held hostage by abusive parent

*School Age: Ages 5-12*

- Can hear or see the abuse
- May try to physically intervene during violent episode
- Runs to the neighbor or calls 911 for help
- Used as a spy by the perpetrating parent against the other parent
- Forced to participate in the attack on the other parent
- Physically, emotionally, or sexually abused by perpetrating parent to control the other parent
- Restricted from contact with others to keep the abuse a secret

*Adolescents: Ages 13-18*

- Hits parents or siblings
- Tries to stop the abuse
- Becomes abused
- Used as a spy by perpetrating parent
- Used as a confidante by perpetrator or victim

*Teen Girls*

- Learns that male violence is normal and that women do not deserve respect
- May accept violence in their own relationships
- Assumes relationships without violence are abnormal
- Harbors lasting fear of being a victim

*Teen Boys*

- Learns that males act violent
- Learns to disrespect women
- Have an inaccurate perception of what it means to "be a man" in a relationship





## Children's Responses to Domestic Violence

Children will have their own unique experiences with and responses to witnessing domestic violence. It is important to consider the possible emotional, physical, and behavioral responses that children might have in order to better understand a family's situation.

The responses that children have to domestic violence may vary due to multiple factors including:

- *The severity or duration of domestic violence.* Some children might witness the perpetrating parent threaten the victim parent with a weapon. Other children may witness an abusive episode.
- *A child's perception of the violence.* Children may believe that each abusive episode is life-threatening for the victim parent and can cause chronic stress in a child.
- *The age of the child.* At different ages, children may have different responses due to cognitive development and level of understanding.
- *The quality of the child's relationship with parents or one parent.*
- *The child's personal trauma history.*

Below are examples of the emotional, physical, and behavioral responses of witnessing abuse.

<b>Responses to Witnessing Abuse</b>		
<i>Emotional</i>	<i>Physical</i>	<i>Behavioral</i>

<ul style="list-style-type: none"> <li>• Fear</li> <li>• Anxiety</li> <li>• Shame</li> <li>• Depression</li> <li>• Anger</li> <li>• Disturbances in Sleep</li> </ul>	<ul style="list-style-type: none"> <li>• Stomachaches and headaches</li> <li>• Bedwetting</li> <li>• Inability to concentrate</li> </ul>	<ul style="list-style-type: none"> <li>• Acting out and aggression</li> <li>• Withdrawal</li> <li>• Poor school performance</li> <li>• Developmental delays (speech, motor, or cognitive skills)</li> <li>• Self-injurious behavior</li> </ul>
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Due to the traumatic nature of witnessing domestic violence, children may have specific short or long term responses.

**Note**

- Your role as a supervised visitation monitor is to understand the possible responses that children may have so that the impact of short-term and long-term responses are minimized.

**Short-term responses**

- Hyperarousal
- Re-experiencing
- Avoidance
- Withdrawal
- Reactions to reminders

**Long-term responses**

- Substance abuse
- Suicidal behaviors
- Impulsive acts
- Chronic health problems
- Criminal and violent behavior
- Victimization by an intimate partner in the future

**What Neuroscience Says About Domestic Violence**

Recent neuroscience research on brain development has led to new information regarding the effects of stress on the developing brains of children. The stress that is caused by being exposed to domestic violence can affect the development of important brain structures. The brain structures that are most likely to be affected by domestic violence are developing neurons and the hippocampus. Those two brain structures are important because they assist



children in forming trusting relationships with others, including their parents and friends.

### **The “Fight or Flight” Response**

Exposure to stress, caused by events such as domestic violence, leads to frequent activation of the “fight or flight” response, even in babies. When this response is activated, individuals must decide whether they want to run away or fight back in a situation. Many children who witness domestic violence are constantly activating their fight or flight response, which creates a great amount of stress and produces negative effects on the brain. The long term effects of stress created by the fight or flight response on children include minor mental illness or even extreme and violent outbursts.

These negative effects can last throughout the life course. This is because exposure to violence creates and changes the architecture of the child’s brain. While some stress may be positive for a child’s developing brain, the stress produced by constant activation of the fight or flight response is very damaging.

*“Neuroscience shows us that exposure to domestic violence harms children’s brains at the neuronal level, with lifetime consequences.”*

### **How Stress Affects a Child’s Brain**

Neuroscience research supports what is called “fear conditioning” (See Table) and how it plays a role in a child’s later problems with anxiety. Increased cortisol, a stress hormone, can “poison” circuits in the brain, causing permanent damage. Children exposed to high levels of stress, such as witnessing domestic violence, produce elevated amounts of cortisol. Elevated levels of stress hormones can cause confusion in infants because they feel they are unable to satisfy the fight or flight signals due to their lack of mobility. Therefore, infants may start to dissociate or have what is called a “defeat response.” This response may also cause long-term damage to the child and the ability to function socially.

It is important for children to have meaningful relationships with their caregiving parents. Babies in particular react well to positive interaction with their parent and experience intense stress (high levels of cortisol) when this positive interaction is unavailable to them. Witnessing domestic violence can damage a trusting relationship between a child and a caregiver. For example, if the caregiving parent is constantly worried about his or her living conditions (when he or she will be abused next, etc.) the child is aware of this tension. That negative energy turns into high levels of stress.

Children in domestic violence situations are not just “*at risk*,” they are at risk for brain damage.

<b>Long-Term Effects of Excess Stress</b>		
<i>Effect</i>	<i>Explanation</i>	<i>Outcome</i>
Increased Cortisol	An increase in stress hormones like cortisol can poison circuits in the child’s brain	Depending on which circuits are damaged, the child’s ability to form new relationships may be permanently disrupted.
Disassociation	Being in “fight or flight” mode for extended periods of time with no option for either.	The child shuts down in order to avoid the stress.
Fear Conditioning	Child experiences “embedded stress” and remains at a high level of stress for long periods of time	Increases the likelihood of anxiety troubles throughout the child’s life.
Mental Health	Children exposed to domestic violence are at a higher risk of developing mental illness. This includes substance abuse, learning disorders, hyper arousal, increased violent tendencies, etc.	Increased startle response, serious sleep disorders, anxiety, hyperactivity, conduct disorder, attention deficit and hyperactivity disorder (ADHD), and PTSD

### **Highlights from Neuroscience Research**

1. Neuroscience research allows social service providers to gain a more complete view of the damage caused by domestic violence.
2. Exposure to domestic violence can lead to maladaptive behaviors such as substance abuse, suicide attempts, and depressive disorders.
3. Neuroscience provides evidence that a close attachment with a nurturing parental figure supports healthy brain development and can restore brain health after experiencing domestic violence.

4. This evidence leaves no doubt that when a non-perpetrating parent seeks assistance from the courts to protect a child from exposure to domestic violence, judges' decisions will influence the development of a child's brain and impact the child's mental and physical health, learning capacity, and behavior across the child's lifetime.

## Working with Victims in Supervised Visitation

Supervised visitation can be stressful, especially on victims of domestic violence. A majority of violence research has been done with women victims, therefore, most of the available data relate to female victims with male perpetrators. Remember, women face a greater risk of being killed after leaving the abusive relationship, and this risk does not disappear simply because the victim and perpetrator are being supervised. Victims are at risk of being stalked before or after visitation.

<b>Working with Victims</b>		
<b>What to do</b>	<b>How it helps</b>	<b>Results</b>
<b>Create a Safety Plan at visits, and refer to certified domestic violence center for an expansive safety plan.</b>	<ul style="list-style-type: none"> <li>• <b>Arrange for both parties to arrive and depart at different times</b></li> <li>• <b>If the victim still does not feel safe, arrange for a law enforcement officer to follow her and/or escort her from the building.</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Having a safety plan eases victim’s stress, making the experience easier for everyone involved.</b></li> </ul>
<b>Refer to other services when necessary.</b>	<ul style="list-style-type: none"> <li>• <b>If you feel the victim needs or the victim independently requests individual or additional counseling for mental health problems, substance abuse problems, parenting issues, etc., do not hesitate to offer these referrals.</b></li> <li>• <b>When you offer a referral, make sure you follow up with the person you made the referral with. For example, ask questions such as “Did you have a chance to use that referral I gave you? Do you need any additional services?” etc.</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Many issues involving the plight of victims cannot be addressed by the supervised visitation program or staff. In these cases, it is appropriate and encouraged to refer victims to other services.</b></li> </ul>
<b>Stay Focused on Safety</b>	<ul style="list-style-type: none"> <li>• <b>Abusers might not necessarily seem like abusers. They may deny abuse. Stay focused on the safety of the children and the vulnerable parent.</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>There is no standard victim or abuser. Keep this in mind when working in a supervised visitation setting.</b></li> </ul>

Learn more about trauma-informed care	<ul style="list-style-type: none"> <li>• Being trauma informed can allow visitation monitors to create an understanding and supportive environment for victims.</li> </ul>	<ul style="list-style-type: none"> <li>• Monitors who are educated about trauma are more sensitive to client's needs.</li> </ul>
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*As a supervised visitation program, it can be very beneficial for staff to learn about trauma-informed care and services. To learn more about trauma-informed care and services, See Chapter XX, Practice Skills for Visit Monitors.*

## Domestic Violence and Mental Illness

Victims have increased likelihood of mental illness. Some of the most common mental illnesses present in domestic violence victims are:

- Anxiety and Sadness: 77%
- Major Depression (in the last 12 months): 51.4%
- Phobias 35.1%
  - The phobias may relate directly or indirectly to the abuse
- Bipolar and Manic Depression 23%
  - This number is significantly higher than the general population rate of 0.7%
- PTSD (Post Traumatic Stress Disorder) 16.2%

These problems can affect a victim long after they leave a relationship. Constant abuse wears on a person's self-esteem, making it difficult to leave negative relationships and to seek out new healthy relationships. Transitioning from an unhealthy relationship to a healthy relationship may be difficult and traumatic. Making referrals to counseling is beneficial to victims because it allows them to work on a variety of issues. The victim may be afraid, ashamed, or isolated by the relationship and may have developed unhealthy coping mechanisms to deal with these emotions.

## Unique Challenges Faced by Male Victims

Male victims face different challenges than female victims when seeking help. This section offers some information on challenges specific to male victims.

- Male victims do not have the same access to shelters as female victims. The majority of domestic violence shelters in the United States do not allow males, in an effort to protect female victims.
- As most social services related to domestic violence are directed towards females, male victims have access to fewer social services.
- Some male victims report difficulty when talking to hotlines, feeling as if the hotline operators cannot help them or do not believe them. One male victim interviewed stated, “I called eleven different numbers for battered women and got no help.”



These challenges represent the unique situation males face because they are less likely to experience domestic violence. Shelters and services do an excellent job for female victims, but more services are needed for male victims. The good news is that communities are beginning to explore ways to meet those needs.

### ***Effects of Victimization on Male Victims***

As with female victims, male victims experience a range of physical, psychological, social, and emotional effects resulting from victimization.



#### Physical

- Injuries
- Medical conditions caused by violence

#### Psychological

- Feelings of anxiety, depression, and fear
- Difficulty sleeping or relaxing due to stress
- Feelings of alienation and self-loathing

### Social

- Difficulty interacting in and forming relationships
- Feeling a lack of support in social relationships
- Separation from social relationships

### Emotional

- Feelings of guilt, anger, frustration, and hostility
- Feeling overwhelmed and out of control
- Avoiding experiencing emotions

## **The Victim as the Visiting Party**

Florida statutes state that the court shall consider evidence of domestic violence or child abuse as evidence of detriment to the child. (FL. Stat. 61.13) Thus, the court may require perpetrators to attend supervised visitation. Program staff should not presume, however, that only perpetrators will be ordered to supervised visitation. In fact, victims of domestic violence may also be ordered to supervised visitation for several reasons:

1. The perpetrator has convinced the court that he or she has not committed domestic violence.
2. The perpetrator may have convinced the court that it was he or she who was the victim of domestic violence.
3. The perpetrator has convinced the court that he or she was falsely accused of violence and that the children were wrongfully removed.
4. The victim flees to a domestic violence center and the perpetrator accuses the victim of abandoning the children.
5. The perpetrator has more resources and has used financial resources to gain the upper hand in protracted court litigation.
6. The victim has suffered mental illness of anxiety and/or depression because of the abuse and appears unstable because of long-term trauma. The perpetrator, on the other hand, appears calm and in control.
7. The victim may have abused substances to cope with violence and the status as a substance abuser discredits his or her claim for parental responsibility of the children.



### ***How Programs Should Respond to Victims as Visitors***

There are a variety of ways in which programs can prepare themselves to be responsible to victims as visitors. In addition to having a formal relationship with a certified domestic violence center, programs should be able to make referrals to community services that will improve the life of the victim. Most importantly, when a program determines a victim of domestic violence has been referred to visit as a visitor, specific considerations should be made which include the following:

1. Safety considerations are paramount. The program should ensure that its policies and procedures can be adjusted whenever necessary so that the victim's safety is enhanced. Program staff may need to alter their arrival and departure policies to minimize stalking opportunities by the custodial parent. The program should ensure that its arrival and departure policies do not endanger the victim. Other considerations such as having the victim wait at a nearby location until the batterer is on site may need to be incorporated.
2. Programs should discuss at intake and periodically with the victim about the risks to the victim, children, and staff that the victim perceives as a threat. This can be an ongoing conversation to ensure program policies can be flexible enough to incorporate safety considerations of the visiting victim.
3. There may be limits that need to be placed on the discussions the victim can have with a child regarding living arrangements so the child does not become a conduit to the batterer's attempts to obtain location information of the victim.
4. Some children may have been alienated from the victim parent by the batterer parent. This means the visiting parent may need additional support during visitation to improve the parent and child communication and relationship.



## Working with Children of Domestic Violence

When children have witness abuse, there are many impacts in their daily lives. In addition, children's experiences with domestic violence may impact the supervised visitation process. Monitors should be aware of children's reactions to domestic violence and what behaviors may be present during visitation as a result of the violence.

### *Infants: Ages 0-1*

- Fearful or anxious during visitation with perpetrating parent
- Will not leave the arms of non-perpetrating parent

### *Toddlers: Ages 2-4*

- Fearful or anxious during visitation with perpetrating parent
- Will not leave non-perpetrating parent
- Experiences developmental set-back like regression in toilet-training

### *School Age: Ages 5-12*

- Expressed loyalty to abusive parent or non-perpetrating parent
- Refused to visit
- Expresses anger toward visiting parent
- Adopts facial expressions that are not congruent with their feelings (e.g. smiling when scared)

### *Adolescents: Ages 13-18*

- Refuses to visit. Embarrassed about having to use visitation services.
- Withdrawn during visit
- Attends visitation even if they do not want to be there in order to protect siblings and non-perpetrating parent.

### *Teen Girls*

- Angry at victim/perpetrator for making them visit
- Confronts parent about the abuse

### *Teen Boys*

- Angry at victim/perpetrator for making them visit
- Aggressive towards abusive parent

A child’s experience with witnessing domestic violence can have an impact on visitation and monitors should not ignore those effects but engage in the techniques below to help address them. Refer to the table below to learn about ways that monitors can work with children during a visit to make them feel safe and have positive, healthy interactions with their parent.

<b>Working with Children</b>	
<i>What to do</i>	<i>Explanation</i>
<b>Help foster children’s self-esteem</b>	<ul style="list-style-type: none"> <li>• When children witness domestic violence their mental health is at risk. Self-esteem issues may result from witnessing domestic violence because it can create confusion, doubt, and fear. Children may even blame themselves for the violence that has occurred in their home.</li> <li>• Monitors can work with children to help foster self-esteem during visits in order to address those risks. Doing activities that make a child feel successful and encouraging parents to use positive language with their children can help increase self-esteem and combat negative self-perceptions.</li> </ul>
<b>Ensure a structured and predictable environment</b>	<ul style="list-style-type: none"> <li>• Children may be worried for their safety during a visit with the perpetrating parent. It’s important to establish a procedure for visits that allow a child to feel a sense of security.</li> <li>• If a particular visit monitor has always worked with one parent and child, the child may become frightened if there is suddenly a different visit monitor. Work with children to ensure that they are comfortable and feel safe during a visit.</li> </ul>
<b>Model appropriate interactions</b>	<ul style="list-style-type: none"> <li>• Children who witness domestic violence may have distorted ideas about what healthy and positive interactions are in a parent-child relationship.</li> <li>• Monitors can work with families to help them understand what appropriate interactions look and sound like.</li> <li>• A visit monitor can model appropriate interactions by using positive language and engaging in age appropriate conversations with the child.</li> </ul>
<b>Understand the unique needs of teens</b>	<ul style="list-style-type: none"> <li>• Teenagers who have witnessed domestic violence may have developed unhealthy or negative perceptions about relationship. Supervised visitation monitors can work with teenagers and families to have appropriate conversations about healthy relationships and nonviolent ways to address frustration or conflict.</li> <li>• Monitors should understand that visits with teenagers may be drastically different than visits with young children. Therefore, monitors should consider and understand how teenagers are affected differently by domestic violence.</li> </ul>

## Working with Perpetrators

In addition to working with victims and children of domestic violence, monitors will likely work with perpetrators as both visiting and custodial parents. When working with perpetrators it is important for monitors to consider how certain characteristics may affect supervised visitation and what special considerations must be made for safety and visitation compliance. In addition to the information provided in this chapter, monitors should also review the Practice Skills chapter to understand safety, termination, and intervention during visits.

In domestic violence referrals there is already an established history of violence in the family which increases the level of considerations monitors must take to ensure the safety of visiting children/families, and staff members. Monitors should do these 5 things when working with perpetrating parents.

- 1. Have a conversation about program expectations.** Before the first visit begins, monitors should have a conversation with perpetrating parents about the programs expectations of parental conduct inside and outside of the program. This is an opportunity for monitors to discuss what is considered appropriate interactions with children and what topics/conversations are not appropriate for the duration of a visit.
- 2. Inform the parent about program restrictions and limitations.** Programs may have different protocol about what is allowed inside the visiting center or what activities are allowed between parents and children. This information should be clearly communicated to perpetrating parents before the first visit.
- 3. Discuss consequences for violating program policies and procedures.** Monitors should explain to perpetrating parent's the consequences of violating program policies and procedures. Perpetrating parents can violate program policies by contacting the custodial parent outside of the program or following the child and custodial parent home after the visit has ended.
- 4. Explain that a visit/services can be terminated at any time.** If a monitor finds the visit to be harmful to the child or inappropriate the monitor should terminate the visit. Any type of violence toward the custodial parent that violates supervised visitation policies or an injunction will affect the perpetrating parent's ability to visit with their child.

### REMINDER:

Monitors can learn more about intervening during a visit, terminating visits, and reporting critical incidents in the practice skills chapter.

5. **Encourage the parent to rebuild the parent-child relationship.** Most importantly, supervised visitation programs offer perpetrating parents the opportunity to rebuild the parent-child relationship. Domestic violence can have several effects on children that can hurt them individually but their relationship with the perpetrating parent as well. Monitors can help encourage parents to build a healthy and positive relationship with their child.

*Continue reading for more information about communication with courts about safety and domestic violence issues.*

## How Batterer Characteristics Affect Supervised Visitation

The common behaviors and characteristics of batterers can have an impact on supervised visitation. Below are examples of how these behaviors may manifest during a visit.

### Characteristics

- *Denial of Abuse/Minimization.* Children may ask visiting parents questions about abuse and the parents may deny the abuse, say it was an accident, or minimize their actions. Visiting parent may claim that it was the other parent's fault for the abuse and that he or she caused the abuse to happen.



- *Blaming Partner.* Batterers may try to deflect responsibility for being at supervised visitation and blame the other parent, saying things like, “This is all my wife’s fault,” or “She’s the one who brought this on.”

- *Control/Manipulation.* Batterers may question or challenge program rules or demand exceptions to rules. Examples include: refusing to arrive or depart as required, bringing unauthorized individuals to visits, or tearing up rules or throwing intake forms across the room.

- *Attacking Parenting Skills.* Batterers may attempt to manipulate staff in apparent false allegations of child abuse against a victim parent, or try to use staff to call the Abuse Registry. Batterer may also make

disparaging remarks to the child about her mother: “You need to clean up better than Mommy. She’s a slob.”

- *Making Covert/Overt Threats.* Parent driving around the visitation program at the time of the scheduled visits but not coming into program. Parent verbally threatens staff, volunteers, judges, and others during visits.
- *Involving Children.* During scheduled visitations, batterers may attempt to question children about their current living arrangements (particularly if they are staying at a shelter or another undisclosed location) or inquire where the children are attending school. Additionally, visiting parents may ask children to relay messages to the other parent.
- *Stalking (in person or through a third party).* Batterers may follow the parent who is leaving a program and record the license number of the victim's car. Monitors should pay close attention to conversation, because perpetrators may reveal stalking incidents during conversations with children. Questions such as "Where were you last night?" or "Why weren't you in school yesterday?" are common.
- *Financial Abuse/Manipulation.* Batterers may refuse to pay for scheduled visits. Batterers may make it difficult for the program by paying in pennies or other small coins.
- *Animal Abuse.* A batterer may inform the child during a visit that a beloved pet has died or had to be

### **Think about this...**

- **These behaviors and characteristics can have a negative impact on supervised visitation for a variety of reasons:**
  - **The child becomes upset by the visiting parent.**
  - **These behaviors prevent the visitation staff from performing their duties properly.**
  - **These behaviors can hinder a healthy interaction between the parent and child.**
- **It is important to think about how these behaviors and characteristics will affect visit monitors, the visiting child(ren), other families, and the program in general.**
- **After exploring the ways that abuser demeanor can affect supervised visitation, think about how visit monitors can address these behaviors in order to promote safety and well-being in the program.**

*See Chapter XX, Practice Skills for Visit Monitors to learn more about appropriate interventions.*

given away because the child was no longer in the home.

- *Physical Violence.* Non-custodial parents may use violence against the other parent while the family is using services. In the history of supervised visitation, programs have reported murders or physical assaults that have occurred either on-site or near the program. These violent events can also occur outside of the programs perimeters, whether it be the custodial parent's home or workplace, which is why safety must be prioritized at all times.
- *Child Abduction.* Batterers may try to abduct children during visitation, or may try to abduct them offsite if the child's home address, school, or other location is revealed during a visit.

### **STOP and Think**

*After reading this section, you should be able to answer the following question regarding the case scenario from the start of the chapter.*

What batterer characteristics does Tristan display?

## **Risk Identification**

### **Separation Violence**

Research has revealed that the time after a victim leaves his or her perpetrator of domestic violence can be the most dangerous time for the victim. This is because the nature of the power and control dynamic of domestic violence. The batterer seeks to control the victim, and when the victim leaves that control is diminished. The batterer may seek to regain that control – creating real safety risks for the victim and children. When a case is referred to supervised visitation with the perpetrator as the visitor, that perpetrator has lost a great deal of control. Therefore, risks may be greater. In order to enhance victim and children safety, programs should consider doing the following:

- Develop security protocols on site. The best practice is to include using onsite security personnel (preferably law enforcement officials). Programs should also consider tools such as locked entrance doors, intercom systems, panic buttons, and weapon detectors that staff have been thoroughly trained to use.

- Conduct thorough screening of every case to determine the risks to each family member.
- Create safety plans that ensure that the victim and perpetrator do not come into sight or audio contact during visits.
- Create flexible and carefully created arrival and departure times to ensure the safety of the victim and children.
- Establish a clear method of communication with the referring court about any safety problems with program participants.
- Be sure to have highly trained staff who understand how to intervene if the perpetrator speaks negatively about the victim or denies, minimizes, or blames the other participants for the violence.
- Ensure that the program has copies of parents' injunctions on hand.

### **STOP and Think**

*After reading this section, you should be able to answer the following question regarding the case scenario from the start of the chapter.*

What policies and procedures need to be in place in order to protect Victoria from her batterer?

## **Red Flags**

Below is a partial list of parental behaviors at visits that may indicate heightened risk, necessitate suspension, or termination of services.

- Parents using the visitation program to monitor the other parent's location.
  - Waiting in a vehicle for the other parent before or after the visit.
  - Asking the children where the other parent lives.
- Parents verbally or physically threatening the other parent, child, or staff.
- Efforts to bring weapons to programs.
  - Guns, knives, pepper spray.
- Parents refusing to follow program safety rules or trying to control the actions of the staff.

## **Identifying Risks to Victims**

In every case in which an injunction for protection against domestic violence has been ordered by a court, visitation providers should take additional steps to ensure safety at services. Risk screening is an on-going process, not a one-time event.

Before the first visit, the program should obtain the following:

1. All relevant court and law enforcement records. The parties should provide copies of these to the program prior to intake.
2. Thorough intake with both parties and the children. The intake process provides an opportunity to ask about family history, safety concerns, and family needs. These may include victim advocacy services, transportation, housing, counseling, and a range of issues that are directly or indirectly related to safety. In addition, intake provides parents with crucial information about program policies relating to confidentiality and release of program records.

## **Danger Assessment**

When considering the safety of a victim, there are certain behaviors that a social service provider should be aware of that increase the risk of danger.

Please review this link as it provides a list of factors that show a strong association for increased violence or even lethality to occur. Supervised visitation programs can use this tool to consider these factors when assessing and planning for safety.

This danger assessment can help the victim and the service professional identify what the victim is going through. Use this danger assessment as a guide for helping a victim understand his or her situation, however regardless of the results, always help the victim find the resources necessary to receive services.

All of the factors within the risk assessment tool below are problematic and may indicate an increased risk of lethality.

Safety plays an important role in supervised visitation and the danger assessment can provide necessary insight to protecting the victim and victim's children. Monitors are encouraged to seek training on the specifics of danger assessments and how to interpret the results of a victim's assessment. This training will help programs develop the necessary steps to protecting the program, families, and staff.

Training can be accessed at [www.dangerassessment.org](http://www.dangerassessment.org) and the program offers a group discount for training.



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# DANGER ASSESSMENT

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Several risk factors have been associated with increased risk of homicides (murders) of women and men in violent relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

Using the calendar, please mark the approximate dates during the past year when you were abused by your partner or ex partner. Write on that date how bad the incident was according to the following scale:

1. Slapping, pushing; no injuries and/or lasting pain
2. Punching, kicking; bruises, cuts, and/or continuing pain
3. "Beating up"; severe contusions, burns, broken bones
4. Threat to use weapon; head injury, internal injury, permanent injury
5. Use of weapon; wounds from weapon

(If **any** of the descriptions for the higher number apply, use the higher number.)

Mark **Yes** or **No** for each of the following. ("He" refers to your husband, partner, ex-husband, ex-partner, or whoever is currently physically hurting you.)

- \_\_\_ 1. Has the physical violence increased in severity or frequency over the past year?
- \_\_\_ 2. Does he own a gun?
- \_\_\_ 3. Have you left him after living together during the past year?  
3a. (If have *never* lived with him, check here\_\_\_)
- \_\_\_ 4. Is he unemployed?
- \_\_\_ 5. Has he ever used a weapon against you or threatened you with a lethal weapon?  
(If yes, was the weapon a gun?\_\_\_)
- \_\_\_ 6. Does he threaten to kill you?
- \_\_\_ 7. Has he avoided being arrested for domestic violence?
- \_\_\_ 8. Do you have a child that is not his?
- \_\_\_ 9. Has he ever forced you to have sex when you did not wish to do so?
- \_\_\_ 10. Does he ever try to choke you?
- \_\_\_ 11. Does he use illegal drugs? By drugs, I mean "uppers" or amphetamines, "meth", speed, angel dust, cocaine, "crack", street drugs or mixtures.
- \_\_\_ 12. Is he an alcoholic or problem drinker?
- \_\_\_ 13. Does he control most or all of your daily activities? For instance: does he tell you who you can be friends with, when you can see your family, how much money you can use, or when you can take the car? (If he tries, but you do not let him, check here: \_\_\_)
- \_\_\_ 14. Is he violently and constantly jealous of you? (For instance, does he say "If I can't have you, no one can.")
- \_\_\_ 15. Have you ever been beaten by him while you were pregnant? (If you have never been pregnant by him, check here: \_\_\_)
- \_\_\_ 16. Has he ever threatened or tried to commit suicide?
- \_\_\_ 17. Does he threaten to harm your children?
- \_\_\_ 18. Do you believe he is capable of killing you?
- \_\_\_ 19. Does he follow or spy on you, leave threatening notes or messages, destroy your property, or call you when you don't want him to?
- \_\_\_ 20. Have you ever threatened or tried to commit suicide?
- \_\_\_ Total "Yes" Answers

**Thank you. Please talk to your nurse, advocate or counselor about what the Danger Assessment means in terms of your situation.**

## Program Communication with the Court

Supervised visitation programs should work in partnership with the court system to protect vulnerable families, especially when there is violence present. Thus, programs must establish a way to communicate with the referring court. In communication with the court, program administrators should be able to report problems such as the following:

- Parental noncompliance with program rules, including no-shows and cancellations related to domestic violence;
- Children's unwillingness to participate in visits due to the violence;
- Parental substance abuse;
- Parental mental illness issues interfering with visits;
- Parental misconduct on-site or any safety concerns; and
- Parental misconduct off-site reported to Visitation staff, including but not limited to parental arrests, additional litigation in family/dependency/criminal court, and violations of probation, violence, stalking and threats.

Program directors should work with the local trial court administrator or chief judge to find appropriate ways to alert the court to problems. All communication about the case should be copied to all parties and their attorneys. Judges have the power to set hearings *sua sponte*, or on their own, and parties can set hearings and file motions to address the problems reported.

## PRACTICE EXAMPLES

### Case Scenario 1

Nelson and Grace Forest have recently been referred to your program due to domestic violence. Not too long ago, neighbors witnessed Nelson drag Grace across their driveway during an explosive argument, leaving Grace with a gaping head wound. Grace obtained an Injunction for Protection Against Domestic Violence and left the home to relocate with their 9-year-old son Jackson.

#### *Discussion Questions:*

1. Receiving this referral, what kind of information and documents will you need during intake?
2. What questions will you ask the victim parent?
3. How will you determine the risk involved with this referral?
4. What training does your staff need to have in order to protect the victim parent, the child(ren), other visiting families, and staff?

#### *Discussion Questions:*

1. How might Grace Forest's behavior affect the way she is treated/perceived by staff at your program?
2. What are the red flags in this visitation scenario?
3. What batterer characteristics does Mr. Forest exhibit in this situation?
4. What services might be helpful to refer to Grace or the case manager?
5. What can your program do to adequately address victim parent's needs and concerns with visitation?

### Case Scenario 2

For the past few visits as Grace Forest drops off her son, she has looked distressed and her appearance has become increasingly disheveled. During check-in for each visit, Grace is constantly looking behind her and asking questions about whether or not her husband has arrived at the program. On the other hand, Nelson arrives at the program in a fairly calm manner. Sometimes, Nelson asks Jackson how his mom is doing. Regardless of Jackson's answer, Nelson will look at him and say, "Your mom has mental problems, I'm sure you've noticed. I'm not sure she why she behaves that way, and I've tried to help her."

## **Case Scenario 3**

During a visit, Nelson asks his son several questions about school. Nelson questions Jackson about his homework, grades, and friends. Jackson has attended a new school since the separation. Nelson proceeds to probe Jackson about his new school, how he gets home, and if he's enjoying his teachers. At the end of the visit, Nelson tells Jackson to remind his mom to be mindful of traffic when getting him to school in the morning. However, Jackson quickly responds and tells his father that traffic doesn't matter because they live down the street from the school.

### ***Discussion Questions:***

1. Are Mr. Forests questions appropriate?
2. What should a visit monitor do when the perpetrator parent asks questions or makes requests regarding the victim parent?
3. Should the level of risk be reevaluated for this case referral?
4. Would you inform the victim parent about the perpetrator parent's questions?

## Quiz Yourself!

1. **TRUE or FALSE.** The perpetrator might gain physical custody of the children, thus making the victim parent the visitor at the program.
2. **Domestic violence is a repetitive pattern of behaviors to maintain \_\_\_\_\_ and \_\_\_\_\_ control over an intimate partner.**
3. **All of the following are common characteristics of batterers, EXCEPT:**
  - a. Denial of abuse/minimization
  - b. Control/ manipulation
  - c. Attacks victim's parenting skills
  - d. Accepts responsibility and takes accountability for abuse.
4. **TRUE or FALSE.** Children who witness domestic violence are not at risk for brain damage.
5. **When should a visit or case referral be suspended or terminated?**
  - a. When battering parent uses the visitation program to monitor the victim parent's location.
  - b. When a parent verbally or physically threatens the other parent, child, or staff.
  - c. When parent refuses to follow program safety rules or tries to control the actions of the staff.
  - d. All of the above

Answers: 1. True 2. Power and Control 3. D 4. False 5. D

## Online Resources

- **Resources for Advocates- Trauma-Informed Domestic Violence Advocacy.**  
<http://www.nationalcenterdvtraumamh.org/trainingta/resources-for-advocates-trauma-informed-dv-advocacy/> Provides links to webinars and tip sheets that provide a comprehensive view of how to create culturally competent, accessible, and trauma-informed services and organizations.
- **Tips for Creating a Welcoming Environment.**  
[http://www.fcadv.org/sites/default/files/Tipsheet\\_Welcoming%20Environment\\_NCDVTMH\\_Aug2011.pdf](http://www.fcadv.org/sites/default/files/Tipsheet_Welcoming%20Environment_NCDVTMH_Aug2011.pdf). Offers different ways that social service programs can provide a welcoming environment for victims of domestic violence.
- **Tips for Enhancing Emotional Safety.**  
[http://www.fcadv.org/sites/default/files/Tipsheet\\_Emotional%20Safety\\_NCDVTMH\\_Aug2011.pdf](http://www.fcadv.org/sites/default/files/Tipsheet_Emotional%20Safety_NCDVTMH_Aug2011.pdf). This resource identifies seven tips to promote and increase emotional safety within programs.
- **A Trauma-Informed Approach to Domestic Violence Advocacy.**  
[http://www.fcadv.org/sites/default/files/Tipsheet\\_TI%20DV%20Advocacy\\_NCDVTMH\\_Aug2011.pdf](http://www.fcadv.org/sites/default/files/Tipsheet_TI%20DV%20Advocacy_NCDVTMH_Aug2011.pdf). Discusses the five core components necessary for a trauma-informed approach to domestic violence advocacy and helping survivors strengthen their psychological capacity to work through multiple issues associated with domestic violence.

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