

The Interconnection Between Domestic Violence and Child Welfare in Los Angeles County:

An Examination on Data, Training, and Policy

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Los Angeles County Domestic Violence Council
Department of Public Health
Department of Children and Family Services
Inter-Agency Council on Child Abuse and Neglect



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REGARDING LANGUAGE USE

The authors and editors of this report have attempted to be intentional about the word choices used, while being as consistent and clear as possible. Following is an explanation of language chosen.

Throughout the report, the term “survivor” is used to describe the intimate partner being harmed, rather than “victim”, “victim/survivor”, or alternating between these terms. Some people may identify as both or may categorize themselves as “survivors” and “victims” for distinct types of abuse, or in different points in their lifetime. However, for uniformity the term “survivor” is used throughout this report. Similarly, throughout the report the term “perpetrator” is used, rather than “abuser”, “aggressor”, “person who harms” or “person who causes harm.” The contributors of the report understand that there are different reasons to choose these distinct terms. The term “perpetrator” is used here again for consistency and to align with the terminology used by the Centers for Disease Control and Prevention.¹

Throughout the report the words “survivor”, “perpetrator”, “couple”, “relationship”, etc. may be used to describe people within an intimate relationship (past or present). The authors and editors understand that this may denote a restriction to monogamous relationships. The contributors of the report acknowledge the existence of polyamorous relationships (where a person has more than one romantic and/or sexual relationship at a time) and the occurrence of domestic violence within those relationships.² Nevertheless, for the sake of clarity, words implying a relationship between two people, are used.

On the other hand, the terms “parent(s)”, “guardian(s)”, and “caregiver(s)” are often used interchangeably, although the report recognizes that these terms have different legal definitions and social implications. The authors and editors of the report made this stylistic choice to reflect the current literature, which often uses the terms interchangeably.

Lastly, staff at the Department of Children and Family Services that work directly with the families are denoted as “Children’s Social Workers” (their official title), while “DCFS social workers” or “DCFS staff” refers to other members of the organization who may not interact with families.

PROBLEM STATEMENT

For people working in the domestic violence and child welfare spheres in Los Angeles County, the general link between these two systems may be evident, even if there is confusion and misunderstanding about the inner workings of the other system (see page 43 for Appendix A, which includes definitions and more information on domestic violence and child welfare). However, for those outside of these fields, the connections, and seemingly conflicting responses to domestic violence by these two entities, may be less understood.

In 2020, the last complete year of available data, almost 57,000 referrals were made to the Los Angeles County Department of Children and Family Services' Child Protection Hotline due to suspected abuse and/or neglect³ (the Department of Children and Family Services is Los Angeles County's designated child welfare system). Of those referrals, 24.1% contained allegations of domestic violence.³ Furthermore, of the hotline referrals that contained reports of domestic violence, 96.3% were "screened in"³ (meaning the report made in the referral meets the requirements to begin a child abuse investigation).⁴ This is compared to 72.3% of referrals that did not contain concerns of domestic violence that led to an investigation.³ Moreover, of the hotline referrals involving domestic violence that resulted in investigations, 27.1% had at least one allegation that was considered to be substantiated³ (meaning that upon investigation, child welfare services determined that it was more likely than not the child abuse or neglect had occurred).⁵ For the investigations that did not contain allegations of domestic violence during the hotline referral, the number of investigations considered that had at least one substantiated allegation was 23.9%.³ Of screened in hotline referrals that reported domestic violence, 8.4% resulted in a placement within 60 days³ (placement is defined as the child being relocated outside of the home due to safety concerns). For cases that did not initially include reports of domestic violence in the hotline referral, this occurred 10.5% of the time.³

It is important to note that this is data from the year the COVID-19 pandemic started. As such, there were fewer referrals made to the Child Protection Hotline overall.⁶ This is thought to be because children were not physically in school, and school staff make the biggest percentage of child welfare referrals.⁷ Due to the pandemic, other factors (such as the percentage of referrals made by different groups of mandated reporters) were different during this time,⁶ which may have affected the general trends in substantiated investigations and opened placements. Lastly, it is important to note that the data presented were based on a single binary question during the hotline screening regarding whether domestic violence was a concern or not for the family/household. Therefore, these numbers do not represent cases in which concerns of domestic violence were encountered at any other point during the child welfare process (such as during investigations or open, non-placement cases) nor for the possibility that domestic violence might have been alleged during a hotline referral, but upon further evaluation, this was deemed as unlikely to have occurred.

Even with these limitations and caveats, these statistics highlight the fact that allegations of domestic violence make up a considerable percentage of child welfare hotline referrals, investigations, and cases. Even though this has been a recently documented pattern on the national and state level,^{8, 9} determining and implementing the best response in families with children in which domestic violence occurs is complex. In these circumstances, there are

multiple survivors of domestic violence, the child or children who are exposed to violence and the adult survivor, who is the direct survivor of the violence.

In Los Angeles County, like many jurisdictions throughout the country, different systems are designed to prioritize and provide services to different survivors. The child welfare system emphasizes the protection of the child, while those providing support in the domestic violence field underscore the protection of the harmed partner. Many times, these two systems have different views about what is best for their client (the client being the child for the child welfare system, and the harmed partner for the domestic violence system) and may have conflicting ideas about what is best for the family overall. For example, the child welfare system may consider that it is in the best interest of the child and the family for the perpetrating parent to move out while this person completes their case plan (which may include domestic violence classes). However, in this same situation, a domestic violence advocate may consider that this puts the non-perpetrating parent and the child at risk for future violence, given the increased economic stressors of an additional rent or mortgage payment, which may cause the perpetrating parent to further blame the separation on the survivor. Additionally, each system may place responsibility onto different people, such as the domestic violence field placing responsibility on the perpetrator and the child welfare field placing responsibility on both the perpetrating parent and the harmed parent (the charge for the non-perpetrating parent is called “failure to protect”, please see page 46 in Appendix A for more information).

Given these different perspectives on solutions and responsibilities, as well as for other reasons discussed in this report, the child welfare system and the domestic violence system often find it difficult to collaborate. This report addresses the systemic barriers that prevent these two systems from offering families impacted by domestic violence the services and support that they need. Most importantly, this report offers recommendations to put us on the path to getting there.

DEVELOPMENT OF REPORT

The process by which this report came to be is as important as the report itself. Although systems change advocacy is designed to result in long-term institutional change, a necessary first step may be the establishment of trust among those who work and “live” within those systems. The groups that came together to create this report included people with lived experience of domestic violence and the child welfare system, as well as LA County service providers in the domestic violence and child welfare fields. They all reported that they have gained insight and understanding that they did not have prior to engaging in this process. That alone is a success. This process has produced concrete, short-term, proposals for change that are included in this report. This report also includes recommendations that are clearly aspirational. Even if not attainable today, these ambitious recommendations highlight next steps that can be taken.

The Ad Hoc Domestic Violence-Child Welfare Committee that authored this report grew out of an unprecedented collaboration between Los Angeles County’s domestic violence community, the Department of Children and Family Services (DCFS), and the Inter-Agency Council on Abuse and Neglect (ICAN). It was convened under the auspices of the county’s Domestic Violence Council (DVC) housed within the Health Promotion Bureau of the Department of Public Health. Please see Appendix B for more information on these, and other, key stakeholders. The group first met in February 2020. The group, comprised of domestic violence service providers, DCFS staff, legal service providers, members of academia, among others, jointly decided that data, training, and policy were the most important areas to focus on. Subcommittees addressing each of these three areas were formed. In partnership, each subcommittee was co-chaired by someone from the domestic violence community and someone from DCFS.

The goals, discussions and recommendations of the Data, Policy, and Training Subcommittees presented in this report reflect a consensus on various issues. This is not a report from one county department, one agency or even one field. It is the work and vision of many, all of whom are impacted by the way Los Angeles County addresses the intersection of domestic violence and child welfare. Our hope is that our recommendations from this unifying process will be heard and heeded. We invite others with a stake in or responsibility for the wellbeing of children and families in Los Angeles County to partner with us in creating a system in which both children and survivors of domestic violence thrive.

Importantly, this report and the work that led to its creation, reflects the insight and expertise of many hard-working, dedicated people. We wish to acknowledge the efforts of the members of all three subcommittees - Data, Training, and Policy. Individual members are acknowledged in the section of their respective subcommittees. Additionally, we want to extend gratitude to the Domestic Violence and Child Welfare Committee’s Executive Team, consisting of:

- Taylor Dudley, Administrative Director, University of California Los Angeles Pritzker Center for Strengthening Children and Families
- Frank Ramos, Deputy Director, DCFS
- Karen Richardson, Deputy Director, DCFS
- Eve Sheedy, Former Executive Director, LA County Domestic Violence Council

- Edie Shulman, Children’s Social Worker III/ICAN Assistant Director and
- Deanne Tilton-Durfee, ICAN Executive Director.

Furthermore, we want to acknowledge and thank Isabel Checa, Health Program Analyst, LA County Domestic Violence Council for her outstanding contribution in editing this report; and Jolene Cooper, former Staff Assistant, LA County Domestic Violence Council for her effort in organizing the meetings for the committees and subcommittees.

Lastly, we want to stress that this is not a commentary on any individual’s decisions, but rather, on the system that allowed or encouraged policies that were less than optimal. None of us, as individuals, can change our systems. If we come together, as we have done here, we can.

SUMMARY OF RECOMMENDATIONS AND FINDINGS

Certain themes arose from discussions in all three groups. These common recommendations address holistic system improvements.

- **Survivors' voice:** Survivors, both those who have been impacted by domestic violence and those who have been impacted by the child welfare system, must be included in all discussions about how the two systems operate. Too often, those with lived experience are excluded, or are included far too late in the process. All subcommittees involved in the development of this document included people with lived experience. Discussions and recommendations were enhanced, and more meaningful, because of their input. Basic fairness, and strong policy development, dictate that decisions about what should be done be shaped by conversations that include those whose lives will be impacted by those decisions.
- **Implicit and explicit bias:** The need to address and acknowledge the existence, and impact, of explicit and implicit bias in child welfare and domestic violence systems was raised by all subcommittees. In our domestic violence and child welfare systems, there are numerous moments in which decisions are made, and are influenced by, the bias of the decision maker(s). The result is action that unfairly impacts families of color, particularly Black and Indigenous American families. Addressing bias requires a multi-tiered response that includes training, policy review and policy development, starting with a careful review of the language we use to describe clients and situations in these fields. Experts, including those impacted by systemic bias, must be engaged to develop a holistic plan for change.
- **Cross-training and knowledge of training gaps:** Although one subcommittee focused exclusively on training, all three groups recognized the need for additional training. A common theme across all three groups regarding training, was the importance of fostering a climate across agencies that supported, and encouraged, acknowledgement of gaps in information and expertise. This quality improvement approach framed discussions about the need for training in concrete areas for specific organizations. The primary recommendations made by each subcommittee are set forth below. Discussions and underlying reasons are explained in the body of the report.

FINDINGS AND RECOMMENDATIONS FROM THE DATA GROUP

- **DCFS as a data source:** DCFS is currently a vital repository of domestic violence data. The quality of the data can be improved by making alterations to both input and content to ensure consistency and usefulness.
- **Centralized and publicly available:** Aggregate, de-identified domestic violence and child welfare data should be centralized, and publicly available through the county or other entity. This information would provide a deeper understanding of both domestic violence and child welfare, as well as the interaction between the two areas.
- **Standardized definition:** The term “domestic violence” is defined differently across California statutory codes, within county departments, and elsewhere. Development of a standardized definition of domestic violence would provide a powerful first step towards a shared understanding. This policy change would permit consistency in courts, DCFS,

and domestic violence agencies. Importantly, domestic violence must be defined broadly, beyond physical violence, to include all forms of coercive control.

FINDINGS AND RECOMMENDATIONS FROM THE TRAINING GROUP

- **Partnerships to create training:** Comprehensive, cross-disciplinary training, capturing domestic violence and child welfare information, is needed for these two fields, as well as others (law enforcement, judges, other county workers, etc.). Domestic violence agencies and child welfare groups should work in partnership (with other stakeholders) to develop multi-disciplinary, comprehensive training on the issues of child abuse, domestic violence, and their intersection. To be effective, cross-training should be mandated for all workers in related fields during onboarding, and periodically as refreshers.
- **Utilize currently available training:** A few inclusive, cross-disciplinary training courses have already been created and are in use in other jurisdictions. Where appropriate training programs exist, Los Angeles County should take advantage of those options to conserve time and resources (see information regarding Safe & Together™ on page 26).

FINDINGS AND RECOMMENDATIONS FROM THE POLICY GROUP

- **Support policy approaches that address the nexus between domestic violence and child welfare, including the punitive effects of failure to protect provisions which continue to harm survivors and families.** A strong recommendation of the policy workgroup surrounded the need for state efforts to address the intersection of domestic violence and child welfare. Previous attempts at creating legislation in this area have included the mandate to create a state-wide workgroup composed of representatives from the domestic violence and child welfare fields.¹⁰ This workgroup would assess current data, training, and policy systems within the state, and would evaluate needs for improvements in these domains.¹⁰ By bringing these groups together prior to introducing legislation, the needs of both child welfare and domestic violence survivors, and providers, can be discussed, analyzed and addressed.
- **Review DCFS policies:** To ensure that best practices regarding domestic violence are included and followed, DCFS should engage in a review of all present policies and procedures. All systems policies historically have been, and are, structured in systemic racism. DCFS, like every other social service system, is not exempt from this reality. Engaging in a systemic review of policies may help reveal strengths, gaps, and inequities that may be currently imbedded in such protocols. Special attention should be paid to the impact of policies and procedures on Black communities, Indigenous American groups, other communities of color, as well as special populations (including undocumented community members, families that include an incarcerated individual, families with one or more LGBTQ+ persons, etc.). Specific recommendations for modification of policies and procedures are listed in the Policy Subcommittee's report (starting on page 32), including suggested alterations to policy concerning interactions with service providers, confidentiality concerns with survivors staying in shelters, the creation of an accessible grievance process, etc.
- **Increase supportive services:** Currently, there are insufficient services that help prevent families from becoming involved in the child welfare system or to meaningfully assist

families once they become involved in the child welfare system. This is especially true with respect to housing. To be effective and innovative, development of additional services should be collaborative, with input from domestic violence survivors, adults who as children interacted with the child welfare system due to domestic violence, domestic violence advocates, child welfare representatives, other social service providers and governmental agencies, etc.

- **Improve referral processes:** Currently, families are generally connected to social services by someone at an organization who gives them a list of other agencies they can call. This is generally not helpful or effective. Connecting families to services often requires the assistance of a knowledgeable, persistent case manager who understands the agency to which the referral is being made and can help the family complete an application or other procedures that may be required.

DATA SUBCOMMITTEE

Co-chairs:

Jacqueline Do, Assistant Regional Administrator, Department of Children and Family Services

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SUBCOMMITTEE COMPOSITION AND PROCESS

The Ad Hoc Data Subcommittee was tasked with reviewing and analyzing the existing domestic violence data available within Los Angeles County, particularly within the Department of Children and Family Services (DCFS). This work of the subcommittee was to determine whether data is collected or available to inform, as well as improve, the response to domestic violence survivors and their children within the county's child welfare system.

The subcommittee met monthly via an online platform between December 2020 to June 2021. The Data Subcommittee consisted of members from DCFS (Managers, Children's Social Workers, Supervising Children's Social Workers, Children Services Administrators, and County Counsel), the Department of Public Health, and the domestic violence community.

The Subcommittee gathered existing domestic violence data (which primarily came from DCFS), discussed findings, and analyzed whether the current system of domestic violence data collection works to benefit families impacted by domestic violence, and if not, what could be improved.

GOALS

The Data Subcommittee was tasked with responding to the following:

- Gather information and review what current data is collected. The aim in examining data collection procedures was to create a foundation for informed discussion about whether such data collection methods support a response to domestic violence that keeps children safe and improves DCFS' actions regarding domestic violence.
- Determine if data regarding the intersection of domestic violence and child welfare in LA County is available and accessible to community agencies, the public, and the county.
- If needed data is not available or accessible, make suggestions and recommendations about how to address this insufficiency.
- Explain the reasons why having access to certain data helps to support an improved response to those impacted by both domestic violence and the child welfare system.
- Provide recommendations about what changes can, should, and could be made to improve the system of data collection in Los Angeles County to better support children, survivors, and perpetrators impacted by domestic violence.
- Determine, what, if anything, domestic violence service providers who serve survivors and perpetrators can do to improve this system.

ACTION STEPS

To reach its goals, the Data Subcommittee agreed to do the following:

- Determine what data is collected by domestic violence agencies, how it is collected, and who has access to the data.

- Determine what domestic violence data is collected at DCFS. Ascertain who enters domestic violence data at DCFS, and at what point in the process domestic violence data is entered. Learn who has access to domestic violence data at DCFS.
- Determine whether there is sufficient domestic violence data (from domestic violence agencies, DCFS, other entities, etc.).
- If there is insufficient domestic violence data, determine what needs to be measured, and why it should be measured.
- Analyze what confidentiality concerns impact domestic violence data collection.
- Ascertain whether the courts or County Counsel collect domestic violence/child welfare data. If the courts or County Counsel do collect data, determine what is collected and who has access to this data.
- Generate specific recommendations on the state and county level generally, as well as for DCFS and LA County's domestic violence providers.

FINDINGS

Data from domestic violence agencies

How is data collected: In Los Angeles County, domestic violence service providers collect data using different formats, different processes, and different practices. One of the reasons for this is that each funder, whether public or private, requires either diverse data sets, data sets collected over different periods of time, or both. Even funders from the same entity, for example, Los Angeles County departments (Department of Public Health, Department of Public Social Services, Department of Mental Health, etc.), require distinct data collection and reports.

What data is collected: Each domestic violence agency collects their own internal data. That data is used to respond to funders, analyze internal systems, learn about survivor needs, among other necessities which vary by agency. While the data collected at each agency differs, most domestic violence providers collect data on the number of hotline referrals, services provided, intakes, and other data relevant to specific funding outcomes.

Who has access to the data: Data that is shared outside of a domestic violence agency usually must be cleared by the Executive Director (or equivalent position). Data requested by a funder as part of an ongoing grant or other funding mechanism may be released by the person handling financial oversight and/or grant compliance.

What data domestic violence agencies use: Per conversations with subcommittee members, it appears local domestic violence agencies typically publish information from the National Network to End Domestic Violence, criminal statistics, published studies, among other sources, in grant applications. There is no shared or available local data that domestic violence agencies can mine to provide an accurate or thorough picture of domestic violence in Los Angeles County.

Data from DCFS

Domestic violence data may be collected at various points from the time that DCFS receives information about a specific case until the case is closed.

1. How data is collected and what is collected

Domestic violence information is collected through public referrals into the Child Protection Hotline (CPH) that alleges a child has been harmed due to domestic violence. Domestic violence may be investigated as an allegation of emotional abuse, physical abuse and/or general neglect, as defined by the California Welfare and Institutions Code (WIC) Section § 300.¹¹ The Cal. WIC Section § 300 outlines behavior that may bring a child within the jurisdiction of Dependency Court.¹¹ Information is collected in narrative form within Screener reports.

Domestic violence information is also collected through petition filings in Dependency Court under subdivisions of emotional abuse, physical abuse and/or general neglect defined by Cal. WIC Section § 300.¹¹ Information is collected in narrative form in court reports.

Domestic violence data is collected through State-approved tools that are used by DCFS:

a. *Structured Decision Making (SDM ®) Hotline Tool* developed by Evident Change- Completed by a Child Protection Hotline Children’s Social Worker (CSW) to determine if an in-person investigation is needed.¹² The tool collects domestic violence data via a check-box option which defines domestic violence under:

- Physical Abuse- “Caregiver action that likely caused or will cause injury.”^{12(p6)}
- Emotional Abuse- “Exposure to domestic violence.”^{12(p6)}
- Neglect- “Failure to protect.”^{12(p6)}

b. *SDM Safety Assessment* (by Evident Change)- Completed during the initial referral investigation by an Emergency Response CSW and can also be completed by the Continuing Services CSW during an open case whenever a child safety assessment must be done.^{12(p68)} Domestic violence data is collected via a check-box option that identifies domestic violence as a “safety threat” under:

- #1: “Domestic violence likely to injure the child.”^{12(p48)}
- #5: “Caregiver describes or speaks to the child in predominately negative terms or acts toward or in the presence of the child in negative ways and these actions result in severe psychological/emotional harm, leading to the child being a danger to self or others.”^{12(p48)}
- #6: “Caregiver is unable or unwilling to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.”^{12(p49)}
- “Caregiver complicating behavior- Domestic violence,”^{12(p50)} This check-box option is defined as follows: “there are indications of a recent history of one or more physical assaults between intimate members of the household, or

threats/intimidation or harassment that are known as a result of self-report or other credible report by a family or other household member, friend, other collateral contacts, and/or police reports.”^{12(p60)}

- c. *SDM Substitute Care Provider Safety Assessment* (by Evident Change)- Completed by Emergency Response/Continuing Services CSW at any time during a case when an assessment of child safety in out-of-home care must be done.^{12(p87)} Domestic violence data is collected via a check-box option identifying safety threats^{12(p75)} (similar to those outlined in subsection b, above).
- d. *SDM Family Risk Assessment* (by Evident Change)- Completed by Emergency Response/Continuing Services CSW before opening a case to determine the level of future risk a family may maltreat a child again.^{12(p109)} Domestic violence data is collected via a check-box option that asks if there have been 0-1 or ≥ 2 incidents of domestic violence within the past year.^{12(p94)}
- e. *SDM Family Strengths and Needs Assessment* (by Evident Change)- Completed by Emergency Response/Continuing Services CSW to evaluate strengths/needs of the family.^{12(p155)} The information gathered from this tool drives the case plan. Collects domestic violence data via check-box options to determine whether domestic violence is a barrier to child safety, permanence, and/or well-being or whether domestic violence contributes “to imminent danger of serious physical or emotional harm” for the youth.^{12(p155)} In October 2021, DCFS officials reported that this tool was being replaced (in phases across DCFS Regional Offices) with the *Child and Adolescent Needs and Strengths (CANS)* assessment, see below.
- f. *SDM Family Risk Reassessment for In-Home Cases* (by Evident Change)- Completed by Continuing Services CSW to assess whether risk of abuse/neglect has been reduced sufficiently to close a case, or if services should be continued.^{12(p200)} Collects domestic violence data via a check-box option to identify whether domestic violence and/or harmful/tumultuous relationships continue to pose a risk factor.^{12(p189)}
- g. *Intake and Detention Control Petition Filing Tracking System*- Completed by Emergency Response/Continuing Services CSW when filing a petition in Dependency Court. Collects domestic violence data via a check-box option marking domestic violence as a factor for the filing.¹³ Please note, this does not necessarily mean that domestic violence would be filed in court. Evidence that will meet the standard of proof must be available before filing in court.
- h. *Child and Adolescent Needs and Strengths (CANS) assessment* by the John Praed Foundation- Completed by Emergency Response/Continuing Services CSW on all open cases to determine the mental health, service supports, and/or placement/caregiving needs of a child. Collects domestic violence data via a “Yes/No” check-box option to indicate whether a child has been exposed to domestic

violence.¹⁴ There is also a comment section where the CSW may include a narrative. In October 2021, DCFS officials reported that this tool was slowly replacing the *SDM Family Strengths and Needs Assessment*.

i. **Child Welfare Services/Case Management System case plan¹⁵**- Completed by Emergency Response/Continuing Services CSW on all open cases, as well as the Dependency Investigator CSW. Domestic violence data is collected via a drop-down menu where the CSW selects a list of “contributing factors” that lead to the open case (e.g., domestic violence, parent has unsafe associations-activities in the home, parent has poor impulse control, parent has harmful relationships, and/or parent lacks a safe home).

2. **Persons collecting data, and point in process in which domestic violence data is entered**

Domestic violence data can be entered by the Child Protection Hotline CSWs, Emergency Response CSWs, Dependency Investigator CSWs, and Continuing Services CSWs who are assigned to the family’s investigation and open case. The domestic violence data can be entered at any time during the case where there is an open investigation. Information on domestic violence can be included when a CSW considers whether to open a case, continue servicing, or close out a case. The domestic violence information can be entered in referral narratives of investigative reports, court reports, Child Welfare Services/Case Management System contacts, and through the tools described above.

3. **Who has access to the data**

For Child Welfare Services/Case Management System access: Primary CSWs and their supervisors (Supervising Children Social Workers or SCSWs) in regional office, and secondary CSWs who were assigned to the case/referral.

For *SDM*, *CANS*, Petition Filing System access: Primary CSWs and their SCSWs in regional office, and secondary CSWs who were assigned to the case/referral.

The Information Technology (IT) section can provide domestic violence data reports at the request of DCFS Administration.

4. **Confidentiality concerns regarding domestic violence data**

While confidentiality is an important concern with regards to the safety of survivors of domestic violence, protecting confidentiality can be accomplished by gathering and providing data in aggregate without disclosing personally identifiable information (e.g., name/date of birth/social security number/address, etc.).

5. **Role of Dependency Court or County Counsel in collecting domestic violence data**

Dependency Court and County Counsel do not collect domestic violence data.

DISCUSSION

Domestic violence agencies

Lack of uniformity and definition: There is no uniform or consistent definition of domestic violence across DCFS and domestic violence communities. Definitions of domestic violence or domestic abuse exist in the California Penal Code¹⁶ and the California Family Code.¹⁷ Moreover, some definitions of domestic violence that are used do not recognize the full spectrum of abusive conduct. Domestic violence includes physical abuse, but also includes all forms of coercive control such as financial abuse, emotional abuse, sexual abuse, psychological abuse, gaslighting, etc. Additionally, there is a lack of consistent terminology around domestic violence between DCFS and the domestic violence community.

Lack of uniform and consistent definitions of domestic violence across departments, agencies, and others at best makes it difficult to aggregate domestic violence data in a meaningful way and, at worst may lead to inaccurate conclusions.

No universal format or centralization: Domestic violence agencies do not have a central or organized data collection procedure or depository. Domestic violence agencies do not use a universal data format, and they lack funding to implement one. Each agency collects their own information through different procedures. Moreover, there are no resources to aggregate and analyze domestic violence data. Many agencies do their own studies, with many organizations doing evaluations that center around a specific grant, or agency-based needs.

DCFS

Data is inconsistent and lacking certain information: Even in cases where statutes and interpretations of statutes work to define domestic violence, these definitions fail to capture the complexity, types, or intersectionalities of domestic violence. Compounding this confusion is the lack of a definition of domestic violence in the California Welfare and Institutions Code. Notwithstanding this lack of foundation, the Welfare and Institutions Code forms the basis of DCFS investigations and petition filings in Dependency Court in cases involving domestic violence. With no separate category for domestic violence, most domestic violence investigations and court filings are done under the code's definitions of general neglect, emotional abuse, and/or physical abuse as defined by Cal. WIC § 300 codes.¹¹ Per a Senior Deputy County Counsel and a Supervising Children's Social Worker, when DCFS opens a case for domestic violence, County Counsel consults with Dependency Court services regarding the most appropriate Cal. WIC § 300 section subdivisions under which to file domestic violence allegations, based on the unique circumstances of each family. Generally, Intake and Detention Control (IDC) will file instances of domestic violence under physical abuse (count against the perpetrator, as the perpetrator's conduct places the child at risk of physical harm) and failure to protect (usually for both perpetrator and survivor- a survivor may be charged with failure to protect depending on the length of the exposure to violence). Both sources stated that filing under emotional abuse is rare, as it requires demonstrating that "serious emotional damage"¹¹ was caused to the child by the domestic violence that occurred.

There is internal inconsistency of data collection within DCFS: There is inconsistency in the way domestic violence is measured and defined. The *CANS* assessment captures whether a child is exposed to domestic violence throughout their lifetime. The *SDM Family Risk Assessment* captures two or more incidences of domestic violence within the past year. The Dependency Court views domestic violence as a measure of frequency and magnitude. For example, a domestic violence incident between a survivor and a perpetrator may not be filed in Dependency Court if the incident is considered “mild” (e.g., “he pushed me” or “he threw a phone at me, but it did not hit me”, etc.). However, one incident of a stabbing or shooting would get filed. Domestic violence usually starts with lesser offenses, but these may not be understood as domestic violence until a serious injury occurs (such as observing a black eye, broken arm, etc.). Additionally, the tools used may prevent an accurate assessment. If *SDM* limits domestic violence data to one year and a mother was stabbed 13 months ago by the father, this would not be captured in the tool, but could be captured in a domestic violence petition filing.

Lack of searchable data fields: DCFS tools do not capture other vital information such as the severity of the domestic violence incidents, who the perpetrator(s) or survivor(s) are in the relationship, or if there are multiple partners (three or more) in a relationship(s). The tools also do not inquire about domestic violence between a parent and other partners. The severity, and a classification of who is the survivor and who is the perpetrator, is currently available in narratives of contacts, Screener Narratives, Investigative Narratives, or court reports in Child Welfare Services/Case Management System (CWS/CMS). Other factors may be described in these same systems (narratives and CWS/CMS). However, since narratives don’t have “data fields” that can be mined (or searched), this information is not captured in the current available domestic violence data. There is also no objectively reliable way to determine how often or how accurately the tools (*SDM*, *CANS*, etc.) are being completed.

Types of domestic violence are not captured: Improved data would capture categories of domestic violence including physical, emotional, financial, sexual abuse, etc. This information should be available for DCFS to share with domestic violence agencies/case managers when sharing clients (when the client agrees that these two systems may exchange information). This sharing of information would provide data about what type(s) of abuse are more prevalent in certain communities, age groups, family structures, etc. With this information, DCFS and domestic violence agencies can develop and provide services that better address the types of issues families are experiencing. Moreover, in individual cases, an absence of this information can lead to incorrect assumptions. For example, without information about a family’s finances, when that survivor does not leave, DCFS may incorrectly interpret that conduct as failure to protect.

Data regarding prior or current service provision is not collected: There is no data that shows whether prior or current services have been provided to address domestic violence for the survivor, perpetrator, and/or children. Including this information in the DCFS tools (e.g., *SDM*, *CANS*, CWS/CMS case plan, etc.), will provide data to determine if current or prior domestic violence services have been successful in mitigating the domestic violence. This data would also assist in assessing whether providing domestic violence services for children affects the future

recurrence of domestic violence in the household. Parents are typically referred to domestic violence programs, but the children are not always involved in this process. As such, gathering this data can show which types of treatment programs are most effective in reducing future incidents of domestic violence in the home.

Data that can be collected is not accessible: The Information Technology (IT) section can create specific reports from the domestic violence data captured in the *SDM* tool to show how many domestic violence referrals come in to DCFS, how many referrals get closed out, and how many investigations turn into cases. However, that information is not shared publicly and is not readily available. To obtain that important data it must be specifically requested and approved by DCFS Administration.

RECOMMENDATIONS

State-level recommendations

1. Consider creating a standardized statutory definition of domestic violence that applies across all California Codes or, at a minimum, create a separate category for domestic violence in the Cal. WIC Code. If such a standard definition existed, it could be utilized by both DCFS and domestic violence agencies. This shared language could help build better understanding, assessment, and alignment of the treatment support and services provided to families impacted by domestic violence.

However, there are risks associated with creating either a single definition or a specific code section. Unless carefully drafted, with input from all stakeholders, the existence of a specific section could lead to yet another definition of domestic violence that is used against survivors having cases filed against them in Dependency Court. Should the controlling statute be amended, the intention, including what constitutes domestic violence, and how to best address cases where a non-offending parent is victimized must be made clear.

2. Improve the scope of domestic violence data sought by DCFS. DCFS tools could include additional questions about domestic violence to help guide staff to seek other relevant information. This would lead to richer and more detailed domestic violence data that would improve the quality of CSW's assessments and responses. Since DCFS uses tools that are required by the California Department of Social Services, this would require change at the state-level.

Recommendations for LA County

1. LA County should create a system to gather aggregate domestic violence data from DCFS, domestic violence agencies, other county departments (Department of Public Social Services, Department of Mental Health, etc.), and, ideally from other agencies providing services in LA County. Although there is shared agreement about the need to help families impacted by domestic violence, the data to move the work forward is not

available. The subcommittee proposes that Los Angeles County’s Chief Information Office, or another appropriate office, lead and/or participate in this project to ensure that data could be made accessible on the county’s Open Data Website (as of the writing of this document, a search of “domestic violence” on the county Open Data Website yields no results).¹⁸ Provision of readily available domestic violence data can help the public to understand the scope of the issue and can provide valuable information for county departments, community agencies, schools, and others for use in analysis, grant applications, project discussion and planning, presentations, etc.

2. **Create a system to allow DCFS and domestic violence agencies to share aggregate, de-identified data.** Shared data would enhance the collaboration between these two systems. An improved partnership, based on knowledge gathered from accurate and current data, can work to prevent families from entering the child welfare system, and can provide improved support and services for families that do enter the system. Amongst other uses, the data can show geographical areas in the county where domestic violence is most prevalent, thus allowing DCFS and domestic violence agencies to further partner by taking steps to improve the education, training, assessment, and preventive services offered in that area. This need has been highlighted during the pandemic, where the economic and emotional stress families have endured may have led to an escalation of harmful behaviors. The subcommittee suggests that sharing these statistics would lead to improved outcomes for children and families.

Recommendations for domestic violence agencies

1. **Work with funders to establish a universal, organized way to collect domestic violence data within, and amongst, domestic violence agencies.** In addition to standardizing procedures, domestic violence agency data can provide information which would assist in determining what types of services are needed. For example, intake information could provide a more accurate picture by including the type(s) of domestic violence (i.e., physical, emotional, sexual, financial, litigation abuse, etc.) a survivor reports experiencing. Additional detailed information about specific circumstances could potentially be collected in a narrative format, with data fields included.

Recommendations for LA County’s DCFS system

1. **Using data that is already collected, DCFS can track reports from the Child Protection Hotline (CPH) to determine how many referrals come in for domestic violence that are closed/evaluated out, how many become referrals that require investigation, and how many referrals get opened as cases.** This information can show which communities are most impacted, enabling both the domestic violence community and the county to take a deeper dive into how to improve resource distribution, and how to further partnership between DCFS and community-based agencies. The CPH and individual DCFS offices can provide the number of domestic violence related cases based on zip code. This data can be analyzed by various lengths in time (for example, a month, three months, six months, a year, etc.) to ensure there is sufficient support/domestic violence related services available for families in those zip codes.

2. Create a “subcategory” in the Child Welfare Services/Case Management System program that allows Child Protection Hotline/Emergency Response/Dependency Investigator/Continuing Services CSWs to click on “contributing factors/options” to include additional details in their assessments. This could include whether the domestic violence is financial, physical, verbal, psychological, and/or sexual; as well as whether the domestic violence has revealed other elements of power and control.
3. Create a “subcategory” in CWS/CMS that the Emergency Response CSW completes regarding how domestic violence referrals are closed. Domestic violence agencies often hear and believe that DCFS detains children in many of the domestic violence-related investigations. When data has been available, it shows that DCFS does not detain children in most domestic violence-related cases. Improving data collection and accessibility, as described, would ensure that domestic violence agencies, and members of the public, are given access to comprehensive data versus individual examples. This enhanced knowledge, through broad case review, would lead to better understanding and improved relationships.
4. Create domestic violence as a drop-down option to explain the “reasons for removal” under the Temporary Custody page in the CWS/CMS program. Providing domestic violence as a reason for removal would further enhance understanding of the impact of domestic violence on families and the community.

TRAINING SUBCOMMITTEE

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SUBCOMMITTEE MEMBERS AND PROCESS

The Ad Hoc Training Subcommittee was tasked with reviewing current trainings easily accessible to those working within Los Angeles County that address, explain, or provide information to further understand the intersection of domestic violence and child welfare. The subcommittee, comprised of approximately 50 attendees, included staff/employees from DCFS, ICAN, LA County Department of Public Social Services (DPSS), Los Angeles County District Attorney's Office, domestic violence providers, and a domestic violence survivor. The subcommittee relied on their experience, both personal and professional, to collect information and thereafter conducted some targeted outreach to obtain additional information about related trainings. The subcommittee met via an online platform between December 2020 to May 2021.

GOALS

The Training Subcommittee was tasked with the following:

- Determine what trainings are currently available to members of the child welfare and domestic violence communities.
- Ascertain if there is cross-disciplinary training within the two fields, lack of cross-disciplinary training, and if any gaps exist.
- If no adequate trainings were discovered that provided curriculum that effectively addressed the two disciplines, the Ad Hoc committee was to move forward with ideas to address that inadequacy.
- Make recommendations about what can, and should, be done to ensure effective training for those whose work involves the domestic violence-child welfare connection.

ACTION STEPS

To reach their goals, the Training Subcommittee agreed to the following action steps:

- Survey the subcommittee to determine their current and previous roles (i.e., experience in domestic violence, child welfare, or both). Investigate what training (domestic violence, child welfare, both, neither) subcommittee members had received in those areas.
- Analyze available trainings in detail (e.g., components, strengths, if known, how long the trainings take to complete, etc.).
- Develop a list of dream, or aspirational, trainings based on the experience and discussion of subcommittee participants.
- Discuss gaps in information that exist between groups that work in both domestic violence and child welfare, as well as the practical and operational results of those gaps. Determine how these gaps could be ameliorated through cross-disciplinary trainings.
- Generate specific recommendations on how trainings can and/or should change. Determine whether those recommendations require state, county, department, or community level action.

FINDINGS

Subcommittee members' experiences

At the first meeting of the subcommittee, members were surveyed on both their own affiliation and their participation in training relative to domestic violence, child welfare, or “cross-disciplinary” training, meaning that those in the domestic violence field had received child welfare training or vice-versa. Of the participants surveyed:

- 50% worked within domestic violence.
- 33% worked within child welfare.
- 8% worked within a role that involved both fields.

Additionally, from the participants that completed the survey:

- 20% responded that they had been previously given the opportunity to take cross-disciplinary training.
- 25% stated that they wished there were more comprehensive trainings with both focus areas.
- 17% of the group surveyed reported that they had never received any training in domestic violence or child welfare.

Current trainings

Based on their experience, subcommittee members reported the availability of the following trainings, and their opinion about effectiveness. Subcommittee members provided information about the trainings (time frame, attendees, components, etc.). Since the list was compiled based on the personal knowledge of subcommittee participants, the following list is not, and is not intended to be, exhaustive of what is available countywide. However, it provides an overview of what specific agencies include and provides valuable insight into the types of issues that are addressed by domestic violence agencies, DCFS and others.

1. By agencies with a primary focus on domestic violence-

The training requirements for those working in domestic violence service provider agencies are, to some degree, dictated by the terms of two California statutes.

First, California Welfare and Institutions Code § 18297¹⁹ requires that staff and volunteers of domestic violence shelter-based agencies meet the training requirements set forth in California Evidence Code § 1037.1. Next, Cal. Evid. Code § 1037.1 defines the term “domestic violence counselor” and sets forth the training and other requirements that are needed for a person working at a domestic violence agency to be able to assert a legal privilege protecting information provided to them from a survivor.²⁰ The privilege does not limit the obligation of staff/volunteers to report child maltreatment pursuant to California Penal Code § 11166.²⁰

California Evidence Code § 1037.1 requires the 40-hour training to “include, but need not be limited to, the following areas: history of domestic violence, civil and criminal law as

it relates to domestic violence, the domestic violence victim-counselor privilege and other laws that protect the confidentiality of victim records and information, societal attitudes towards domestic violence, peer counseling techniques, housing, public assistance and other financial resources available to meet the financial needs of domestic violence victims, and referral services available to domestic violence victims.”²⁰ Many agencies provide a certificate of completion when participants fulfill the 40-hour training, however there is no state-approved certification process for the 40-hour domestic violence training.

All the domestic violence agencies that are listed below offer the 40-hour training, or a longer training, that satisfies the requirements of the statutes cited above. The following alphabetical list provides information regarding training that some local domestic violence agencies deliver (the information is limited to those with representatives on the Training Subcommittee). As noted, many have adapted their training to meet the needs of the community during the pandemic.

- a. **Building Forever Families Institute (“BFFI”)** has a curriculum called *Building Forever Families Initiative*. This is provided by community partners House of Ruth (a domestic violence shelter-based agency) in collaboration with Azusa Pacific University.^{21, 22} The partnership allows Azusa Pacific graduate students to train as family coaches who can provide support for families impacted by domestic violence, with the overarching goal of keeping them safe and together.^{21, 22} The partnership also works with children that are at risk of entering foster care, to improve mental as well as physical health by providing education and resources. This family education, bolstered by a “natural support system” (i.e., family, friends, and others involved in the caretaking of a child), helps build a healthy social network for families.²¹ BFFI’s research-informed curriculum is a domestic violence continuum of care best practice, which ensures that help reaches a willing parent, so that children develop more successfully within an intact family structure based on family-wide wellbeing.²¹ The training is provided in the eastern San Gabriel Valley region. Due to the pandemic, training has been provided remotely.
- b. **Casa De La Familia** is a non-shelter-based agency that provides, amongst other services, domestic violence counseling, and offers the 40-hour domestic violence training described above. The training is virtual and open to the public using an online module that allows a participant to complete the training at their own pace.²³ Upon completion of the course, participants receive a certificate of completion from the agency.²³
- c. **Jenesse Center, Inc.** provides the 40-hour domestic violence training to all new staff and interns. Although training is usually offered to the public, the pandemic has prevented this from occurring. In addition to the required topics, the training includes information about sexual assault, and features guest speakers and expert presenters. Counselor advocates and Master of Social Work interns receive additional

customized training which provides an overview of domestic violence risk factors and issues related to provision of virtual services.

- d. **Peace Over Violence (“POV”)** provides an array of training topics for its employees, community members and external service providers and professionals. POV provides the 40-hour domestic violence training. Additionally, POV extends the opportunity for staff and community members to participate in a 72-hour crisis intervention training that includes information about sexual violence, trauma-aware response, counseling skills and techniques, teen dating violence, domestic violence, and other topics.²⁴ Other in-service trainings encourage team members to receive continued education learning with a focus on marginalized communities. As a result of the pandemic, POV is presently conducting trainings virtually.
 - e. **Rainbow Services** provides the 40-hour training to its staff, providers, county employees, and the community.²⁵ 1.5 hours of the training is dedicated to mandatory reporting, which is presented by a DCFS employee. The training is provided over a series of lectures that includes the required information plus legal remedies for protection due to ongoing risk of violence, trauma-aware care, and resources/support for survivors. At the culmination of training, each trainee is given a certificate of completion.
 - f. **Valley Oasis in Antelope Valley** offers a 72-hour training regarding domestic violence and sexual assault.
2. **By agencies with a primary focus on child welfare-**
- a. **DCFS** provides state mandated curriculum for newly hired Children’s Social Workers (CSW’s). Domestic violence is included in the 2-day Key Issues trainings, along with substance use disorders and behavioral health problems. DCFS also supports a three-day course on domestic violence that DCFS staff can access for Board of Behavioral Science’s continuing education credits.

At times, members of individual DCFS regional offices voluntarily enroll in additional trainings on domestic violence. For example, the Pasadena office has participated in training from the Safe & Together™ Institute. This consisted of six days of training, in which a variety of topics related to domestic violence and child welfare were covered, including understanding perpetrators patterns of violence, coercive control behaviors perpetrators may use, disturbances of safe family functioning, partnering with the survivor parent to keep the family safe, and joining with the perpetrating parent to highlight accountability.

In another innovative program, the DCFS Office in Van Nuys has partnered with Haven Hills (a domestic violence shelter-based agency) to create a pilot cross-training regarding domestic violence and child welfare to be administered to the staff of both agencies.

- b. **Inter-agency Council on Child Abuse and Neglect (ICAN)** has worked with numerous public agencies and nonprofit providers to produce the *Guide to Effective Response to Domestic Abuse (GERDA)*,²⁶ which outlines best practices for professionals in Los Angeles County who are providing first response to families in which there is known domestic violence. ICAN also provides trainings, including webinars on domestic violence, lessons learned from child abuse and child fatality, as well as inter-disciplinary approaches based on accountability and advocacy.
 - c. **The UCLA Pritzker Center** has provided research-based trainings available to the public. For example, in May 2021 the Pritzker Center presented a half-day virtual training called *Child Welfare and Domestic Violence: The Summit on Intersection and Action*,²⁷ which offered expert presentations to explore the gaps in policy, practice, training, data collection, and cultural competency.
3. **By other county agencies-**
- a. **Los Angeles County Department of Public Social Services (DPSS)**: DPSS provides an employee training called *Supportive Services Awareness*²⁸ which covers mental health, substance use disorders, and domestic violence as part of their onboarding of new and existing staff. Additionally, DPSS requires that CalWORKS and GAIN case managers that are designated as Domestic Violence Specialized Supportive Services Workers receive specific training to service participants who are survivors of domestic violence. This training provides an awareness of the dynamics of domestic violence and the impact of abuse on the family. Domestic Violence Specialized Supportive Service Workers provide confidential case handling, case management, and assist survivors in the development of Welfare-to-Work plans, focusing on removing barriers to promote self-sufficiency and economic mobility.
4. **By outside vendors-**
- a. Trainings from the Safe & Together™ Institute were mentioned as ideal trainings in multiple discussions. Currently, the Safe & Together Institute offers multiple course trainings. The trainings are based on a comprehensive, collaborative model. The training is developed to assist anyone working with families impacted by domestic violence, including child welfare workers, domestic violence agency staff, law enforcement, and providers of Batterers' Intervention or Men's Behavior Change staff.
 - b. One example of training offered is the Safe & Together Institute's four-day CORE Training. This training is designed to provide a skills-oriented foundation for domestic violence-informed practice. Each day of training provides experiential classroom learning focused on the following foundational practice areas: Day 1 Assessment, Day 2 Interviewing, Day 3 Documentation, and Day 4 Case Planning.²⁹

The Safe & Together Institute CORE Training provides participants with the following:

- Learning how to use practice tools, such as Mapping Perpetrators' Patterns and Multiple Pathways to Harm that can be implemented immediately to improve assessment of risk, impact on children, survivor protective efforts and essential case decisions.²⁹
- Practice interviewing perpetrators, survivors and children through modeling, role play and videos.²⁹
- Improvement of domestic violence-informed documentation through individual and group exercises.²⁹
- Discussion of their own current or past cases and explore how the Safe & Together Model could be implemented.²⁹
- Action plans developed by participants to support implementation of the model to improve their day-to-day practice, and to influence their organizations and communities to become more domestic violence-informed.²⁹
- Completion of a pre- and post-test to reflect learning, as well as a training evaluation.²⁹
- Participants who complete all four days (22 hours) and score an 80% or higher on the CORE Training posttest will meet one of the prerequisites to become a Safe & Together Model Certified Trainer.²⁹ Certified Trainers were a hallmark for the success of implementation in Ohio, but that training module was not a focus of this subcommittee due to the high costs and significant time requirements that are needed to become a Certified Trainer.

For the subcommittee to gain more information about trainings from the Safe & Together Institute, three subcommittee members participated in a two-day conference in early June 2021. This conference discussed how the state of Ohio implemented the Safe & Together model (since 2010, Ohio has committed to offering Safe & Together trainings to county child protective service agencies across the state).³⁰ The conference also explored the importance of identifying the impact of domestic violence on children and family functioning, and reviewed how to apply a fact-based assessment to evaluate perpetrators' behavior patterns.³⁰ The conference demonstrated a creative approach to addressing domestic violence: partnering with adult survivors while concurrently intervening with perpetrators.³⁰ The participants from the subcommittee found the training helpful and insightful. The subcommittee believes that the training offered would be helpful to those addressing domestic violence and child welfare issues.

DREAM TRAININGS

In addition to discussing trainings that members had attended that they considered useful, subcommittee members felt it would be valuable to also list their “dream trainings.” The following list, while aspirational, highlights the complexity of these issues and underscores the need to increase learning opportunities so that practitioners can provide superior service and support to families involved in the child welfare and domestic violence systems.

Suggested “dream trainings” include:

- Core Practice Model Partnership with Survivors and Their Children
- Cycle of Abuse and Violence
- Risk Assessment and Safety Planning in Domestic Violence and Child Welfare Cases
- Types of Child Abuse
- Mandated Reporting of Child Abuse: Guidelines and Reporting in Domestic Violence Contexts
- Skills for Interviewing Children in Homes Where Domestic Violence is Occurring
- The Effects of Trauma on Parenthood (For Fathers, Mothers, and Non-Binary Parents)
- The Effects of Trauma on Memory, Concentration, and Focus
- Ways Perpetrators May Use Systems (DCFS, Courts, etc.) To Further Enact Abuse
- Dynamics of Custody Battles
- Roles of Professionals and Agencies Involved in Domestic Violence and Child Welfare Cases
- Safety for Workers in the Domestic Violence and Child Welfare Fields
- Gender and Social Norms: How Social Service Providers May Cause Harm by Imposing Social Norms
- Implicit Bias, Explicit Bias, and Becoming Aware of Your Own Trauma: Shifting from “Trauma- Informed” to “Trauma-Aware”

The subcommittee acknowledged that not all training, even on the same subject, is equal. It is important that principles underlying training also address the needs and circumstances of the populations that they are designed to assist. Accordingly, the subcommittee stated that ideally trainings should be trauma-aware, strengths-based, empowering of survivors, and should include a focus on diversity, equity, and cultural humility. Of course, the subcommittee recognizes that understanding these terms and their application to these issues may also require training in and of itself.

Additionally, subcommittee members proposed that the 40-hour domestic violence training be expanded to be 80 hours. This suggestion posits that the additional 40 hours could include topics from the “dream trainings” list. Participants of the subcommittee suggested that, ideally, this 80-hour training should be mandatory for additional stakeholders; including lawyers, judges, child welfare workers, domestic violence advocates, mental health therapists, law enforcement and anyone who has direct contact working with a family experiencing domestic violence. Of course, expanding the 40-hour training to 80 hours, and mandating it for so many more categories of professionals would require considerable stakeholder discussion and planning as well as additional financial, personnel, and other resources. For some of the listed stakeholder groups, additional training requirements would also necessitate legislative and/or administrative changes, as well as union negotiations in some instances.

DISCUSSION

The subcommittee worked to provide a safe space to enable candid dialogue. One method used was to create smaller discussion groups by randomly placing subcommittee members in virtual break-out rooms. Although some members requested anonymity when sharing their views and concerns, the subcommittee was able to engage in robust discourse about present trainings and system improvement. Notably, the subcommittee members voiced general disappointment in the infrastructure of current systems. The discussion led to the following findings.

Baseline assessment

The subcommittee agreed that there is a need to do a baseline assessment of stakeholders to determine what training is presently available and utilized (beyond surveying subcommittee members). Importantly, the subcommittee learned that despite agreement that everyone wants to serve their clients and communities appropriately, some members indicated that they feel unable to admit to their lack of training openly.

Necessity for implicit and explicit bias training

Implicit and explicit bias training was suggested to be presented to all service providers (DCFS, domestic violence agencies, etc.) and members of the bench and bar (lawyers and judges) due to the known disproportional impact of child removal/child welfare proceedings on communities of color.

Reflecting on the impact of implicit bias, one DCFS participant member anonymously admitted that the child welfare system sometimes places the child with the perpetrator (who may portray more privilege), rather than placing the child with the survivor parent (who has less privilege due to the abuse, institutional racism and/or other forms of systemic discrimination).

Many other members of the subcommittee argued that it was of the utmost importance for judges to obtain implicit and explicit bias training, given their role as ultimate decision makers. Subcommittee members thought that ideally it would be best for all judges (of Dependency Court, Family Law Court, Criminal Court, etc.) to be trained, since families impacted by domestic violence may have cases in one or more of these courts.

Need for domestic violence and child welfare training for new lawyers

The subcommittee recognized that understanding the impact of domestic violence in the context of child welfare requires specialized training. New lawyers practicing in Dependency Court who lack this training or understanding may not recognize or be able to effectively address these issues. Newer lawyers are therefore learning “on the job” at the expense of those that they are representing. This can lead to unfair and sometimes devastating decisions for litigants. To rectify this, subcommittee members proposed that new lawyers (5 years or less) receive domestic violence and child welfare training.

Need for training by DCFS to community partners regarding child welfare procedures

Domestic violence agencies and other community providers reported that they lack understanding as to why or how decisions are made by DCFS. Providers experience a lack of

consistency in case outcomes. This makes it difficult for them to offer adequate support and manage expectations for clients involved in these cases. Accordingly, community-based service providers need training about the policies and procedures DCFS uses to make decisions in child welfare cases when domestic violence is present.

RECOMMENDATIONS

State recommendations

1. **Create cross-disciplinary trainings to be developed by, and later presented to, staff of agencies that work with survivors of domestic violence.** This training would be available to domestic violence community providers, DCFS staff, mental health therapists, attorneys, law enforcement, first responders, as well as members of the bench for Family Law, Criminal Law, Dependency Court, etc. The trainings could include the topics listed in the aforementioned *Dream trainings* section, or other topics relevant to the connection of domestic violence to child welfare. Ideally, these trainings should be conducted when onboarding new staff, and periodically as refresher courses (for example, every 2 years).

The subcommittee encourages trainings to include role-plays, scenarios, vignettes, and case examples. One recommendation was to have staff role-play in other positions (such as mental health providers role-playing as law enforcement, or attorneys role-playing as Children's Social Workers, etc.), for members to gain understanding about different roles and responsibilities. Since each agency has specific roles, parameters, and ways that they support families, understanding of these differences leads to stronger working relationships.

2. **Recognition of survivor experience and litigation abuse must be included in training.** One survivor who participated throughout the review process provided examples of how systems, whether it be the court, DCFS, or community providers, had failed her and her child. She felt that providers, government agencies, and courts neglected to acknowledge the impact of coercive control and the history of domestic violence between the parties. This lack of knowledge allowed the perpetrator to engage in ongoing abuse by using and seeking to manipulate the child welfare and court systems.

Recommendations for LA County DCFS system and domestic violence agencies

1. **Provide trainings by the Safe & Together Institute.** Trainings from this organization are already considered by many in both fields (domestic violence and child welfare) to encompass best practices for families impacted by domestic violence. While this training requires allocation of financial resources, it is an immediately available product that is considered effective. Providing this training for both domestic violence service providers and DCFS workers would create a system of collaboration and understanding that is absent from our present system.

2. Alternatively, DCFS, domestic violence agencies (including those providing services for perpetrators), and survivors should be supported to create and implement the list of dream trainings and/or other needed trainings. While the subcommittee has provided their proposed dream trainings, they recognize that the list is not exhaustive and does not include other important stakeholder input. The list provides a good starting point for further survivor and stakeholder discussion. Collaboration to develop training may be most effective on a local level. For example, there is an effective partnership between the Van Nuys DCFS office and Haven Hills (a domestic violence community organization). The training that they developed could be shared with others or used as a starting point for the creation of other, location-based training.
3. **Ensure survivor voice.** All training efforts, from development through implementation, require input from those with lived experience. Absent this voice, we lose valuable insight, and risk failing to address the needs that training is designed to meet.
4. **Create a centralized site (such as a website or a listserv) for community partners and governmental agencies to be able to access information.** Material provided would include relevant meetings, trainings, resources, recordings, etc.

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Elisa K. Jimenez, Director, California Mental Health Connections

Minouche Kandel, Senior Staff Attorney, American Civil Liberties Union of Southern California

Alyson Messenger, Managing Staff Attorney, Jenesse Center, Inc.

Renee O'Neill, Attorney Supervisor, Children's Law Center of Los Angeles

Deana Payne, Program Director, Good Shepard Shelter

Dominique Quevedo, Managing Attorney, Legal Aid Foundation of Los Angeles

Reimagining Child Safety Group (Ms. Dixon, Ms. Rios, Ms. Suttle, and Ms. Wilson)

Jessica Sotelo, Licensed Clinical Social Worker, Jewish Family Services

Candy Soto, Children Services Administrator I, Department of Children and Family Services

Bernita R. Walker, Chief Executive Officer, Project: PeaceMakers, Inc.

Hong Zhao, Coach Developer, Department of Children and Family Services

SUBCOMMITTEE MEMBERS AND PROCESS

The Policy Subcommittee was tasked with reviewing DCFS policy related to domestic violence and making recommendations about how to best improve this policy when appropriate. The group sought to use a trauma-aware, racial and cultural equity lens to provide a foundation for improving policy and practice for families experiencing domestic violence who are brought to the attention of the child welfare system.

The Policy Subcommittee was fortunate to have a participant who works at DCFS, and whose responsibility it is to review, amend and create policy. Accordingly, some of the Policy Subcommittee's findings and recommendations that are mentioned below were implemented in the updated DCFS policy regarding domestic violence, which was released in November 2022.³¹

The subcommittee met through an online platform, and conversed regularly through email, between December 2020 and June 2021. Approximately 30 stakeholders participated in the subcommittee. The workgroup included employees from the Department of Children and Family Services, Office of Child Protection, as well as domestic violence, legal aid, and mental health providers.

GOALS

- Review, analyze and discuss current policies and procedures regarding domestic violence in the child welfare system.
- Make recommendations regarding policy revisions to better serve families and children impacted by domestic violence.

ACTION STEPS

- Hold regular meetings to discuss current DCFS policies and practice, and then recommend revisions. In meetings, have external speakers, as well as subcommittee members, discuss how current institutions have impacted their lived experiences as survivors and/or advocates.
- Share current published guidelines by reviewing and analyzing DCFS written policies regarding domestic violence during meetings, as well as via email.
- Determine if other DCFS guidelines contradict or undermine the agency's *Assessment of Domestic Violence* policy³² and, if so, recommend how to resolve this internal contradiction.
- Obtain feedback from members to recommend revisions of certain DCFS policies and procedures.

FINDINGS

In reviewing DCFS' current published guidelines, the subcommittee found these relevant policies and procedures:

- *Assessment of Domestic Violence*- Defines domestic violence, provides guidance for how to assess a child's exposure to domestic violence, and discusses factors to consider when assessing a survivor parent/caregiver, as well as when assessing a known or alleged perpetrator.³² Provides special considerations in evaluating domestic violence for undocumented and immigrant survivors, male survivors, teen survivors, and disabled survivors.³² Details the procedures that Children's Social Workers should take when investigating a referral involving domestic violence.³²
- *Court Family Maintenance and Voluntary Family Maintenance*- Specifies the criteria that makes a family eligible for Voluntary Family Maintenance and Family Maintenance.³³ These programs are DCFS-supervised, time-limited protective services offered to families when the child or children can safely remain in the home (Family Maintenance is court-ordered versus Voluntary Family Maintenance, in which the parent/guardian willingly participates in the services without a court-order).³³ This policy also discusses the procedures Children's Social Workers should engage in when providing Voluntary Family Maintenance and Family Maintenance services.³³
- *Referrals Regarding Children of Military Personnel*- States how the Family Advocacy Program Office is responsible, along with DCFS, for investigating and providing rehabilitative services for incidents involving child maltreatment in military families.³⁴ Delivers guidance for how Children's Social Workers should collaborate with the Family Advocacy Office on investigations and on-going services (if necessary).³⁴
- *Community Based Resources*- Provides brief descriptions of various community-based resources, including Prevention and Aftercare Services, Family Preservation Services, Partnership for Families, etc.³⁵ Outlines procedures for Children's Social Workers and their supervisors in making these referrals.³⁵
- *Child and Family Team Meetings*- Explains the values of the Child and Family Team meetings, as well as who should be included/invited to these team meetings.³⁶ Lists procedures for DCFS staff and/or staff from other agencies, in regard to facilitating or participating in a Child and Family Team Meeting.³⁶
- *Selecting and/or Arranging for Appropriate Services for Incarcerated, Institutionalized, Detained or Deported Parents*- Details rights to reunification services for parents in the listed situations and describes how, in some instances, parents can become involved in court proceedings.³⁷ Delineates procedures on how Children's Social Workers should provide services in these circumstances.³⁷
- *Immigration Options for Undocumented Children and Families*- Explains how Children's Social Workers may refer clients to the Special Immigrant Status (SIS) Unit to provide

immigration services, if this is considered to be in the best interest of the child.³⁸ The policy provides that the Children’s Social Worker would provide usual services, while the Eligibility Worker assigned at the SIS unit will provide immigration services (including the entire legalization process if the child meets the requirements).³⁸ The policy also provides brief descriptions regarding other options for undocumented families (U-Visas, Violence Against Women Act Visas, T-Visas, etc.) and the procedures for Children’s Social Workers to refer families to receive this type of legal help.³⁸

DISCUSSION

The subcommittee deliberated over the child welfare system and its approach to domestic violence survivors and families, as well as the procedures involved with law enforcement, community members, and domestic violence professionals. The overall themes of the discussions centered around:

- Improving teaming within, and amongst, agencies and court systems.
- Increasing support for families that have experienced domestic violence, particularly survivors and their children.
- Developing new community-based resources and/or expanding on existing resources to keep survivors with their children.
- Refocusing DCFS to work towards keeping families together, rather than viewing survivors as failing to protect their children and seeking to remove their children.
- Increasing financial and other resources for families that have experienced domestic violence, including access to housing.
- Understanding the impact of domestic violence on family dynamics and responding appropriately by developing policy that requires comprehensive training to first responders (i.e., law enforcement, DCFS, etc.).
- Including a domestic violence advocate or other qualified mental health professional in responding to, and investigating, domestic violence.
- Using an equity lens when working and communicating with families.
- Understanding and addressing the unique needs of families (e.g., immigration issues, military involvement, low/no income, or incarceration).

RECOMMENDATIONS

State-level recommendations

1. Do not charge survivors of domestic violence with failure to protect.

Policy approaches are needed to prevent survivors of domestic violence from being accused of failing to protect their children. Previous attempts to legislate around the issue of failure to protect have not progressed.¹⁰ Further evaluation and analysis are needed on current data, training, and policy as it relates to domestic violence and child welfare to inform policy approaches.

Recommendations for LA County

1. Create formal partnerships between DCFS, domestic violence agencies, and other entities.

The Policy Subcommittee proposes that Children’s Social Workers team up with domestic violence advocates to minimize the dual roles of Children’s Social Workers. Currently, Children’s Social Workers simultaneously provide services or referrals, while assessing the family (either during the investigation phase as Emergency Response Children’s Social Workers or during the case as Continuing Services Children’s Social Workers to evaluate progress with the case plan). These dual roles can be confusing and, at times, feel threatening to families. Domestic violence advocates working conjointly with Children’s Social Workers during child welfare investigations and cases may help survivors feel more comfortable, and as such, may increase the utilization of immediate and appropriate services.

2. Explore and engage in pilot programs to determine applicability to Los Angeles County.

The subcommittee recognizes that the issues studied and discussed here are prevalent throughout the country. Some programs that have been instituted in other jurisdictions may work here. The subcommittee also developed programming suggestions. Accordingly, the subcommittee suggests that the county consider implementing programs from other communities, as well as other new programs, as pilot programs to determine if they improve systems and service delivery in Los Angeles County. Three such programs are:

- a. Have domestic violence advocates, experts, and/or lawyers available to Children’s Social Workers at the DCFS Child Protection Hotline (Massachusetts appears to have a similar program).³⁹ A pilot program with this same model has been funded by the Los Angeles County Board of Supervisors to start in 2023.⁴⁰
- b. Pair parents/guardians experiencing domestic violence to a domestic violence advocate from a community-based organization.
- c. Provide free, holistic legal services to parents at risk of entering the child welfare system (utilized previously in Detroit Center for Family Advocacy, which was partially funded through federal Title IV-E dollars as children served through the program were deemed as potential candidates for foster care).⁴¹

3. Review policy on partnerships between DCFS and law enforcement.

Law enforcement personnel are presently required, as a matter of statute, to report instances of child abuse to DCFS.⁵ However, the circumstances of when that report must be made can be further specified. The subcommittee recommends considering limitations of the situations in which law enforcement refers a parent experiencing domestic violence to DCFS. For example, in San Francisco, law enforcement is directed to only refer to their child welfare agency when an arrest has been made and the child is present, or in other specific situations (such as when there was a homicide or attempted homicide, there was serious bodily injury and/or a threat was made to commit a crime that would have

resulted in serious bodily injury, weapons were used and/or threatened to be used, there were firearms in the home, among others).⁴²

4. Create new systemic supports in LA County to maximize families receiving community services (to decrease or prevent families' interactions with the child welfare system).

Many issues confronting families involved in the child welfare system arise from systemic failure to address the social determinants of health (such as housing security, food security, access to quality education, access to appropriate and affordable medical care, etc.). Failure to address these basic needs on a community level can lead to various complications, including violence and instability. The subcommittee recognizes this and urges the development of policies that allocate additional resources to address these underlying issues, as a method to prevent domestic violence and child abuse. This includes an increase in free or affordable resources, such as legal aid, parenting support, employment assistance, medical and mental health treatment, anger management courses and treatment, etc. Ideally, concrete and tangible needs provisions should be offered, including flexible funding supports for rental assistance, food, to support employment, and for other immediate necessities. The subcommittee recommends increased financial backing for domestic violence agencies and faith-based organizations, as well as greater collaboration between all agencies and school districts to meet survivors where they, or their children, are. This is similar to Recommendation #7 in the UCLA Pritzker Center report^{43(p20)} (the UCLA Pritzker center is mentioned in the key stakeholders section of this report, in Appendix B on page 49).

5. Increase housing and move-out alternatives for survivors.

Under our present system, the survivor parent is often required to physically separate from the perpetrating parent. This is extremely difficult due to the economic hardship this can impose (i.e., having an additional rent payment on top of the usual rent/mortgage payment, often with first month's rent, last month's rent, and a security deposit due before moving in). Domestic violence agencies provide some shelter and housing but certainly do not have resources to house the number of families interacting with the child welfare system. Therefore, additional housing and shelter resources are needed.

Alternatively, LA County could consider a system where, in lieu of looking to the survivor to move-out to prove that she/he/they are protecting her/his/their children, the perpetrator moves out of the home so that the rest of the family can stay at home. This can be currently accomplished through a move-out order in Family Law Court; however, obtaining a move-out order requires a survivor to go to court to request a restraining order, and this request must be approved by a judge.⁴⁴ The subcommittee recognizes that for couples who want to romantically and/or financially stay together, or for those who are financially linked together (such as sharing bank accounts), this may still pose an economic hardship to the family. However, remaining in their current residence could afford greater emotional stability for survivors and their children.

6. Work to minimize disconnect between types of courts (Dependency Court, Family Court, etc.).

- a. **Domestic violence courts:** Implementation of dedicated domestic violence courts have worked in various jurisdictions across the country. The subcommittee recommends that the county and courts analyze whether the creation of a specialized domestic violence court in Dependency Court is a viable alternative here (see recommendation #5 in the UCLA Pritzker Report).^{43(p14)}
- b. **Dependency Court orders:** At times, Dependency Court orders regarding visitation, custody and exit orders are not specific (i.e., do not include the times or specific days of visitation). While this may work in relationships that do not involve domestic violence, leaving opportunities for interpretation can be exploited by perpetrators to further abuse survivors. For example, if a court order says “two hours of visitation three times a week” a survivor, and the survivor’s children may be subject by the perpetrator to a fluctuating and inconvenient schedule that changes week to week. With clear and specific orders, e.g., “two hours of visitation on Tuesday afternoons from 3-5 pm” survivors can move forward to implement the orders and inform the court when orders are not obeyed.

4. Increased collaboration between systems to address certain special populations.

a. Military personnel (active/reserve/veteran)

California Welfare and Institutions Code § 328.1⁴⁵ subsection (a) requires that “a county child welfare department investigating a case of child abuse or neglect involving an allegation against the parent or guardian of the child shall attempt, as soon as practicable, to determine if the parent or guardian is an active duty member of the Armed Forces of the United States.”⁴⁵ The law further permits child welfare departments to develop a Memorandum of Understanding with military installations that would govern the investigation of the allegations for active-duty service members.⁴⁵ Per DCFS staff, as a result of this new legislation, DCFS is updating its policy.

However, as enacted, this law applies to active members of the military, not inactive reserves, retirees, or veterans.⁴⁵ Therefore, the subcommittee recommends that in creating policy to address the new law, that DCFS expand beyond what is statutorily mandated to create a system to screen and identify all past and current military personnel.

Other actions to increase connections to support veterans:

- Development of DCFS policy ensuring that Children’s Social Workers, hearing officers, and judges receive training on interacting with military personnel (active, reserve, and/or veteran).
- Increased connection of DCFS social workers, domestic violence advocates, and members from other agencies with Veteran Affairs to work to better link veterans with services.

b. Incarcerated parents

DCFS, domestic violence agencies, legal aid, and other organizations should consider creating partnerships to create programming within correctional facilities, including trauma advocacy and counseling. These services are especially important considering that it is estimated that around 77% of incarcerated women have experienced partner violence at some point in their lifetime (with 86% of incarcerated women having experienced sexual violence and 60% experiencing abuse from caregivers at some point in their lifetime).⁴⁶

Additionally, incarcerated parents are often unable to participate in and/or contest adoption proceedings due to a lack of notice of hearings, inability to arrange visitation, and lack of access to legal services (however, it should be noted that the length of time a parent is incarcerated may prevent reunification in some cases).⁴⁷ Programs are needed to provide these parents with services. One possible avenue for change is for DCFS to review, and if needed revise, their policy on *Selecting and/or Arranging for Appropriate Services for Incarcerated, Institutionalized, Detained or Deported Parents*.

c. Immigrants

DCFS, domestic violence agencies, legal aid, etc., should consider creating formal partnerships with each other and other agencies to best address the needs of immigrants, especially those that are undocumented. To begin to address immigration issues, DCFS should review, and if needed expand on, the policy *Immigration Options for Undocumented Children and Families*.

Recommendations for LA County DCFS

1. DCFS, in partnership with domestic violence providers, child abuse providers, and people with lived experience (in domestic violence, child welfare, or both) should review all DCFS policies. If necessary, these entities should collaboratively review and revise DCFS policies to ensure accurate information and best practices related to domestic violence. The DCFS policy *Assessment of Domestic Violence* as well as other guidelines and trainings, often do not acknowledge the complexity of domestic violence. Some policies reflect a misunderstanding that domestic violence is a one-time situation, or only existing when there is proof of physical violence. Both policy and training should reflect a deeper understanding that domestic violence is a pattern of conduct used to exercise coercive control.

Additionally, other areas for examination and possible revision include:

- a. Making sure that DCFS guidelines are uniform throughout and are consistent with the DCFS *Assessment of Domestic Violence* policy.
- b. Reviewing what assessment, if any, is being utilized to determine if a parent/caregiver is non-offending, and if this evaluation is valid and reliable across groups.
- c. Specify the assessment measures in place, if any, to assess the correct implementation of DCFS' policies/procedures.

2. DCFS should review and expand guidelines relating to domestic violence, to reinforce consistency in child welfare procedures.

An assessment of lethality (i.e., probability of death for the survivor parent) should be added to the *Assessment of Domestic Violence* policy, under the procedure section. Although the policy guides Children's Social Workers to use the *Structured Decision Making Safety Assessment* and *Structured Decision Making Family Risk Assessment*, there is no current evaluation of lethality. Additionally, the appraisal of the survivor's ability to address safety concerns is very vague. The *Structured Decision Making Safety Assessment* states "at least one caregiver identifies and acknowledges the problem/safety threats and suggests possible solutions."^{12(p42)} Lethality assessments and evaluations of survivors' abilities to address safety concerns are crucial in determining secure placements for children and providing consistency in outcomes among child welfare cases.

Also, although the *Assessment of Domestic Violence* policy provides a list of the reasons a caregiver may be reluctant to leave or stay away from the perpetrator, there does not seem to be any mention as to why domestic violence survivors may not have reported their abuse. This should be added to the *Assessment of Domestic Violence* policy and related training.

3. Assess and report-back on other jurisdictions' community programs for domestic violence survivors and/or families involved, or at risk of being involved, with the child welfare system.

The subcommittee encourages LA County's DCFS' Policy Section to continue attending the monthly meeting with policy analysts from other Southern California child welfare agencies (through the Policy Implementation Committee meeting). Sharing how child welfare agencies address domestic violence (best practices, emerging practices, challenges, lessons learned, etc.) is crucial.

4. DCFS should create policy concerning contact with service providers.

In the subcommittee, there was a shared agreement about the need for Children's Social Workers to communicate with providers to ensure clients are receiving agreed upon and/or court-ordered services and that reporting their progress to the court occurs without delay. This would address late or last-minute requests from Children's Social Workers seeking updates to a client's progress, attendance, etc. that they need to present to the court. Providers often cannot meet short deadlines and clients may suffer from their inability to do so. The lack of a provider report can be misinterpreted as a failure to comply with the court's order. Creating stronger connections would yield better communication that would prevent this from happening.

One method of addressing this would be the creation of a written policy that provides for collaboration with service providers at the time that the services are ordered in cases involving domestic violence. Under this policy, Children's Social Workers and service providers can create timelines for the progress letters that are reasonable and work for all parties.

5. DCFS should create, expand, revise and/or reinforce other policies and procedures.
 - a. **Regarding confidentiality and safety.** The subcommittee was unable to locate any DCFS policy that addressed protecting confidentiality for domestic violence survivors living in shelters. This is a critical safety and legal issue. Accordingly, a policy that provides guidance for addressing confidentiality is necessary.
 - b. **Regarding visitation and Family Reunification.** Although DCFS has a process in place internally, and Dependency Court holds DCFS accountable via sanctions hearings to safeguard the visitation processes, there was a consensus in the subcommittee that these procedures needed to be improved. Visitation is family bonding time and should be tailored so that it is natural in children's lives (see Chapin Hall's briefing on Family Bonding).⁴⁸ DCFS should be assisting families to assure that visitation is occurring.
 - c. **Regarding the Child and Family Team and Child and Family Team Meetings processes.** The *Child and Family Team Meetings* policy could be strengthened in the following ways:
 - Include a link to the *Assessment of Domestic Violence* policy.
 - Include input from individuals with lived experience and advocates.
 - Provide supports for domestic violence survivors, including those who have not yet processed or come to terms with their lived experiences as survivors (such as linking clients to individual or group counseling, or connecting parents to Parent Partners who are able to support survivors through the child welfare process).⁴⁹
 - Invite the presence of subject matter experts to the team, and if possible, to the meetings (for example, if there is a medical issue, a medical professional familiar with the condition should be conferring with the team).
 - Contract with facilitators for CFT meetings who are independent from DCFS to promote objectivity.
 - d. **Regarding the grievance process**

The subcommittee recommends the creation of an Ombuds office to process complaints against DCFS personnel. The current process has been described by some subcommittee members as confusing, and it is often unknown to families interacting with DCFS. The grievance process should be easy to find on the DCFS website, and complaints should be tracked so that internal and external review is possible.
6. DCFS should increase linkage to other resources, especially before an investigation is opened. Recommendations for improving the Child Protection Hotline Prevention and Aftercare program include adding more referrals to resources that address the needs of survivors, including legal resources, housing resources, trauma-aware counseling resources for survivors and their children, among others.

CONCLUSION

The analysis, discussion, and recommendations contained in this report reflect hours of work provided by public and private community members with insight and expertise on the connection between domestic violence and child welfare. Our hope is that this report serves as both an impetus and blueprint for moving forward. Numerous committees, task forces, and groups like this one, have convened and established the need for change and that need is clear. The next step is to move forward with changes in policies, practices, and responses to families experiencing domestic violence who become involved with the child welfare system. Creation and implementation of these policies and practices require dedicated leadership, partnership, compromise, resources and application of the findings and recommendations in this report and the many that have come before it.^{9, 43, 50}

In the process of creating this report, we have provided a model and best practices for effective partnership from those working on the frontlines. Systemic changes which incorporate these recommendations will help us move forward so that every family in Los Angeles County impacted by domestic violence receives understanding and support. This support includes reconfiguring systems that systematically and disproportionately criminalize and punish parents of color and those of lower socio-economic status who are experiencing domestic violence. An example of a needed systems change is modification and/or elimination of the continued use of “failure to protect” ideology that further exerts power and control over victims of domestic violence and perpetuates further harm to the child(ren) through the separation from a loving and supportive caregiver. Rather, domestic violence survivors deserve systems that focus on healing abusive relationships, while supporting survivors and their families with the resources most beneficial to their individual family’s needs. Strength and change lay in the power of survivors to advocate for their needs and to have these needs heard and responded to by the systems developed to assist and serve them.

APPENDIX A- DEFINITIONS AND CONTEXT

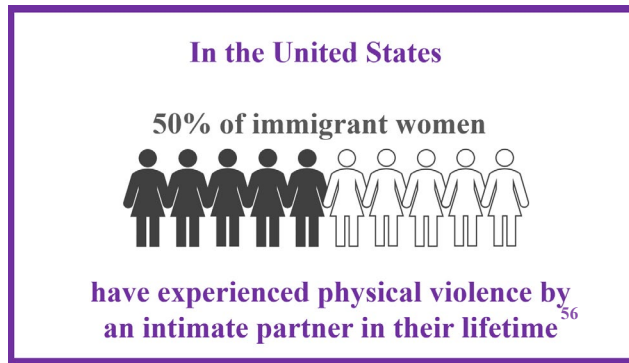
DOMESTIC VIOLENCE

Domestic violence (also known as intimate partner violence) is a pattern of behavior that is used to gain, or maintain, power and control over a current or former intimate partner.^{51, 52, 53}

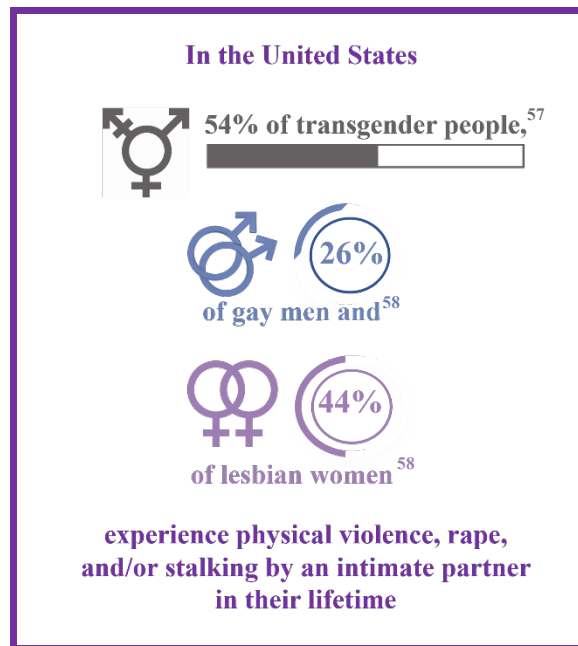
Although we often focus on physical abuse, the term of domestic violence applies to sexual, emotional, economic or psychological actions, or threats of actions, including withholding medication, forced substance use, litigation abuse, and other measures that seek to control the conduct of another person.^{51, 52, 53} Behaviors that frighten, intimidate, terrorize, manipulate, hurt, humiliate, blame, injure, or wound someone are therefore also included in this definition.⁵¹ In recognition that domestic violence actually includes a spectrum of behaviors, the conduct is sometimes referred to as “coercive control.”⁵⁴ Domestic violence can occur within a range of relationships, including partners who are married, living together, dating, in polyamorous relationships (having more than one partner at a time), and/or between people that have an ongoing sexual relationship.^{2, 51, 52} Domestic violence can and does happen to anyone of any race, age, ability level, religion, education level, economic background, nationality, citizenship status, sex, gender identity, sexual orientation, etc.^{2, 52, 53}

Although domestic violence occurs across all populations, data indicate that communities impacted by systemic discrimination face higher rates of domestic violence. According to the Center for Disease Control, in the United States, 30.5% of White women reported physical abuse by an intimate partner in their lifetime.⁵⁵ Comparatively, 41.2% of Black women and 51.7% of indigenous women reported physical abuse by an intimate partner in their lifetime.⁵⁵ The numbers follow a similar pattern for men, with 26.6% of White men, 36.3% of Black men, and 43.0% of Indigenous American men reporting physical domestic violence within their lifetime.⁵⁵ Among immigrant women in the United States, the rates of domestic violence are as high as 50%.⁵⁶ No information regarding rates of domestic violence among immigrant men could be found at the time of the publication of this report.





Similarly, rates of domestic violence are disproportionately high for lesbian, gay, transgender, and queer communities (LGBTQ+), with an estimated 54% of transgender people,⁵⁷ 26% of gay men⁵⁸ and 44% of lesbian women⁵⁸ suffering from intimate partner violence in the country.



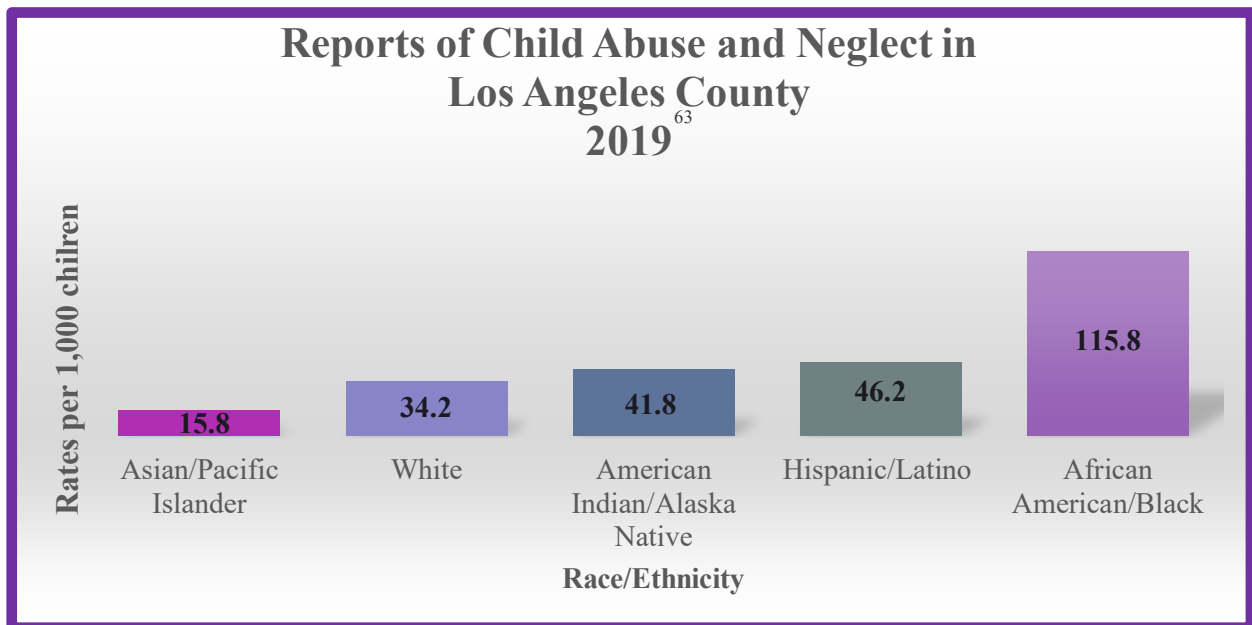
CHILD WELFARE

Child welfare is the major system of intervention to remediate and avert child abuse and neglect in California.⁵⁹ The goal of child welfare services is to keep children in their home when it is safe, and when the child or children are at risk, to develop a plan as soon as possible.⁵⁹ Children, and their families, come into contact with the child welfare system when someone, usually a mandated reporter (a person who is legally bound to report child maltreatment), reports knowledge or reasonable suspicion that a child is experiencing physical abuse, sexual abuse, emotional abuse, and/or neglect.⁵ As with domestic violence, survivors and perpetrators of child abuse cut across demographics (income, race/ethnicity, gender, disability status, etc.).

In comparison to domestic violence data, there are fewer child abuse statistics by breakdown of social groups. According to the Child Maltreatment Report for 2020, over 60,000 California children were the victims of maltreatment.⁶⁰ For this report, child maltreatment was defined as “any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation” or “an act or failure to act, which presents an imminent risk of serious harm.”⁶⁰ According to the available information, this report did not have statistics for California regarding the percentage of cases involving domestic violence.⁶⁰

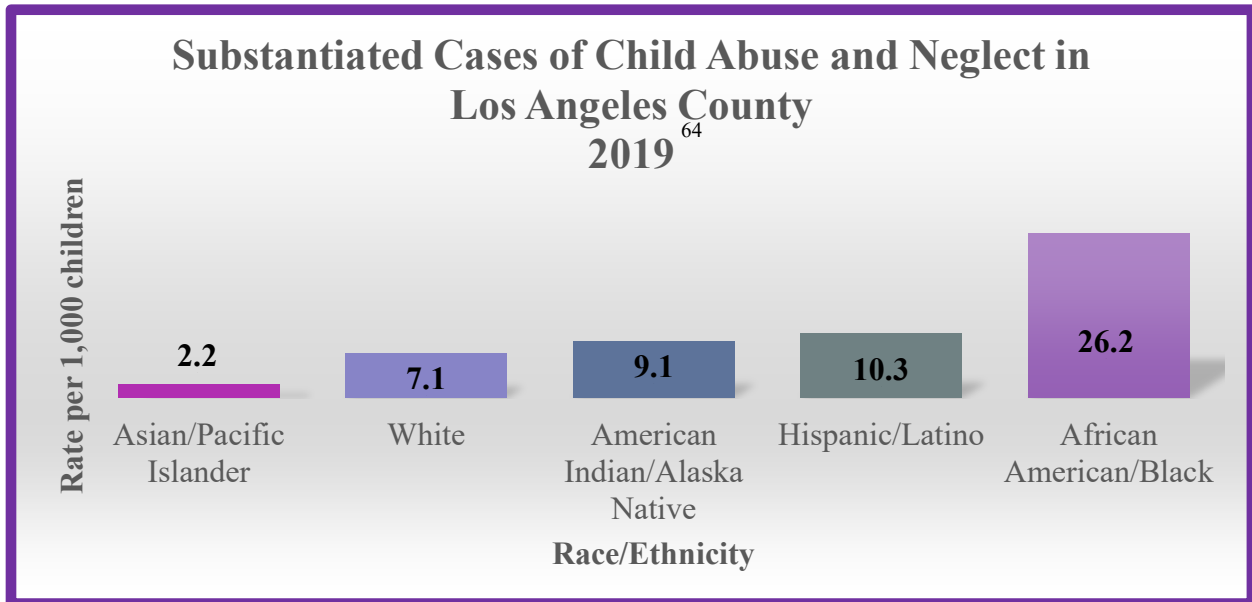
From 2016-2020, a national decrease of 12.2% in reports of child maltreatment were observed. It has been hypothesized that this decrease is most likely the result of the COVID-19 pandemic. Many factors have been posited as to why this decrease was seen, including stay at home orders which dramatically decreased or eliminated most students’ in-person contact with health care providers and school staff (teachers, coaches, administrators, etc.) who as mandated reporters, account for the majority of child abuse reports.⁶⁰ Due to this, the editors of this report have chosen to use 2019 data as a more representative sample since many in the field consider 2020 data to be atypical.

In Los Angeles County for 2019, there were 52 child abuse and/or neglect reports per 1,000 children,⁶¹ with 10.2 child maltreatment reports per 1,000 children in the county considered to be substantiated⁶² (meaning that upon investigation, child welfare services determined it was more likely than not the child abuse or neglect had occurred).⁵ In the same year for Los Angeles County, there were 15.8 reports per 1,000 Asian/Pacific Islander children, 34.2 reports per 1,000 White children, 41.8 reports per 1,000 American Indian/Alaska Native children, 46.2 reports per 1,000 Hispanic/Latino children, and 115.8 reports per 1,000 African American/Black children.⁶³



Rates are by number of children within the same racial/ethnic group (e.g., in 2019, 115.8 African American/Black children per 1,000 African American/Black children were reported to have been abused and/or neglected). Data for Asians and Pacific Islanders were only available as a combined category.

In terms of substantiated reports, 2.2 reports per 1,000 Asian/Pacific Islander children were found to be substantiated, 7.1 reports per 1,000 White children, 9.1 reports per 1,000 American Indian/Alaska Native children, 10.3 reports per 1,000 Hispanic/Latino children, and 26.2 reports per 1,000 African American/Black children were deemed substantiated.⁶⁴



Rates are by number of children within the same racial/ethnic group (e.g., in 2019, 26.2 African American/Black children per 1,000 African American/Black children had substantiated cases of abuse and/or neglect). Data for Asians and Pacific Islanders were only available as a combined category.

Although there is a disproportionate number of children of color interacting with the child welfare system, it is unclear what accounts for this. It is not known if this over-representation is a result of an increased percentage of child maltreatment in communities of color (due to the impact of systemic discrimination issues such as poverty, which is highly correlated with reporting of child abuse and neglect), increased contact with mandated reporters from public and other agencies, racial bias in reporting and child welfare decision-making, or a combination of these factors.^{65, 66}

FAILURE TO PROTECT

Domestic violence and child maltreatment intersect in social, psychological, and legal realms. These types of abuse often co-occur in families and/or households.^{67, 68, 69} Additionally, it has been repeatedly demonstrated that exposure to domestic violence increases the probability of cognitive, behavioral, and emotional problems for youth, including higher risk of experiencing intimate partner violence themselves.^{69, 70, 71, 72} Legally in California, although exposure to domestic violence is not defined as child maltreatment in and of itself, caregivers in a household where domestic violence occurs may be charged under the physical, emotional and/or general abuse statutes of the California Welfare and Institutions Code (WIC) § 300 on the sole basis that as a victim of domestic violence they have failed to protect their child(ren).¹¹ This is true even when the caregiver is the non-offending survivor of domestic violence.

A non-offending survivor of domestic violence may be deemed as having failed to protect their child/children on the basis of “willful or negligent failure of the child’s parent or guardian to [...] protect the child from the conduct of the custodian with whom the child has been left” which could result in the child suffering or being at substantial risk of suffering “serious physical harm or illness.”¹¹ In fact, California law holds both the perpetrator and the non-offending survivor of domestic violence equally responsible for the child and supports the practice of charging and holding both caregivers with child maltreatment.

Many in the domestic violence community, as evidenced by conversations among community leaders and news articles,^{73, 74} view this practice as unfair as it relies on the premise that a survivor of domestic violence (non-perpetrating parent) is responsible for violence inflicted upon or witnessed by their child/children. Despite these views, the law still defines exposure of a child to domestic violence as child maltreatment, and most often specifies “failure to protect” by the non-offending parent.¹¹

APPENDIX B- KEY STAKEHOLDERS

DOMESTIC VIOLENCE COMMUNITY

As used herein, the term “domestic violence community” means all those within Los Angeles County whose lives have been touched in some way by domestic violence, including but not limited to, domestic violence survivors, members of academia, as well as domestic violence legal aid and social service providers (for survivors, as well as those who cause harm to their intimate partners).

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

The Department of Children and Family Services (DCFS) is the governmental agency in Los Angeles County that manages child welfare cases.⁷⁵ The mission of DCFS is to promote “child safety and well-being by partnering with communities to strengthen families, keeping children at home whenever possible, and connecting them to stable, loving homes in times of need.”⁷⁵

DCFS oversees Los Angeles County’s Child Protection Hotline where community members can call 24 hours a day, 7 days a week, to report concerns of child maltreatment.⁷⁶ These reports can be made anonymously if desired by the caller.⁷⁶ Based on the contents of a referral to the Child Protection Hotline, DCFS social workers, named Children’s Social Workers, may conduct investigations into the alleged child maltreatment to assess risk and safety.⁷⁶ These investigations often include interviews with the identified child or children, family members, and other people involved in the family’s life.⁷⁶ From the investigation, DCFS concludes whether or not they consider that a child has been abused and/or neglected.⁷⁶

If DCFS determines that a child has been abused and/or neglected, and Dependency Court decides that a child is not safe at home, DCFS is responsible for finding a stable environment for the child.⁷⁶ DCFS’ goal is for children to reunify with their families whenever possible, and as such, DCFS has the duty to ensure that parents receive the support and services they need to reunite with their child or children.⁷⁶ If and when Dependency Court considers it is not in the child’s best interest to return home, it is the responsibility of DCFS to identify an alternative placement that is safe and healthy for the child.⁷⁶ This can be with extended family or foster parents, among other arrangements.⁷⁶

DOMESTIC VIOLENCE COUNCIL

The Los Angeles County Office of the Domestic Violence Council (DVC), which is housed in the County’s Department of Public Health, provides leadership in the creation and support of a survivor-centered, coordinated countywide approach to addressing domestic violence.⁷⁷ The DVC strives to improve systems coordination, strengthen relationships with community-based providers to ensure quality service delivery, improve data collection efforts, raise awareness of the prevalence and health impacts of domestic violence in Los Angeles County, as well as to engage in internal and external policy efforts by representing the domestic violence community in county initiatives. The DVC has created various committees, each with a specific focus, which meet regularly to advance these efforts.⁷⁷ These include the LGBTQI+ Issues Committee, the Los Angeles Regional Policy Committee, the Health Committee, among others.

INTER-AGENCY COUNCIL ON CHILD ABUSE AND NEGLECT

The Inter-Agency Council on Child Abuse and Neglect (ICAN) was created in 1977 by the Los Angeles County Board of Supervisors to develop and coordinate services for the prevention, identification and treatment of child abuse and neglect in Los Angeles County.⁷⁸ ICAN's mission is to improve the lives of children and families at risk and those served by the child welfare systems.⁷⁸ ICAN has created numerous distinct committees that meet regularly to advance the agency's mission.⁷⁸ Some of these committees include the Child Death Review Team, the Child and Adolescent Suicide Review Team, and the Child Abduction Task Force.⁷⁸

UCLA PRITZKER CENTER

The University of California Los Angeles Pritzker Center for Strengthening Children and Families, herein referred to as the UCLA Pritzker Center, seeks to unite a multidisciplinary network throughout UCLA and Los Angeles County to identify prevention strategies that safely reduce the need for foster care, while supporting equitable reform to the child welfare system.⁷⁹ The UCLA Pritzker Center has conducted research and developed trainings on numerous issues affecting youth, including the intersection between child welfare, domestic violence, and public health.⁷⁹ Some of this information is included in the report that the UCLA Pritzker Center released, titled *Child Welfare and Domestic Violence: The Report on Intersection and Action*.⁴³ Many of the findings and recommendations made in this report echo the proposals made by the UCLA Pritzker Center, and as such, their report will be referenced throughout this document.

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