



CALIFORNIA
**PARTNERSHIP TO END
DOMESTIC VIOLENCE**

Together, We're Stronger.

FAMILIES EXPERIENCING DOMESTIC VIOLENCE

ALICIA BERNSTEIN, MPA
CAPACITY-BUILDING PROGRAM SPECIALIST
CALIFORNIA PARTNERSHIP TO END DOMESTIC VIOLENCE

February 20, 2014

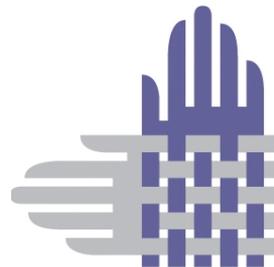
OFFICE: (916) 444-7163 EXT. 105,
alicia@cpedv.org

California Partnership to End Domestic Violence

The California Partnership to End Domestic Violence believes that by sharing expertise, advocates and legislators can end domestic violence. Every day we inspire, inform and connect all of those concerned with this issue, because together we're stronger.

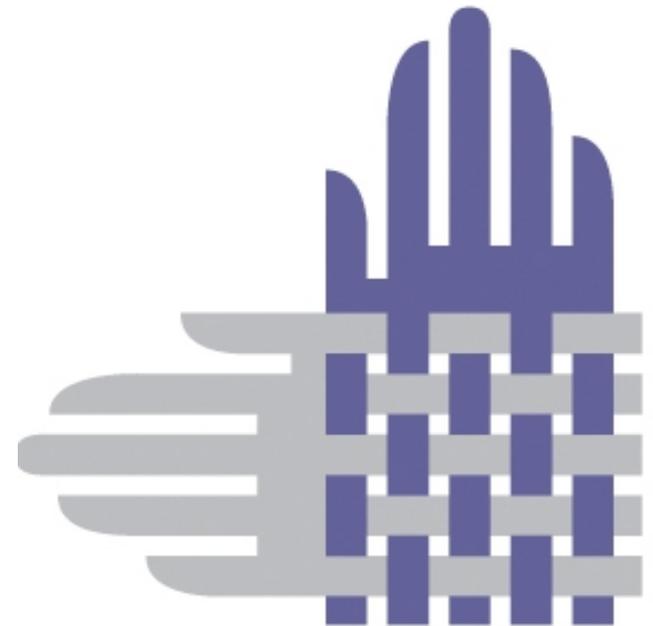
The Partnership is the federally recognized State Domestic Violence Coalition, serving advocates and survivors across California.

Learn more: www.cpedv.org



Agenda

- Effects of Early Exposure to Domestic Violence
- Family Violence Prevention & Services Act (FVPSA)
- Intersections of Service
- Strategies
 - ▣ Warm Referral Process
 - ▣ Trauma Informed Care
 - ▣ Family Centered Care
- Additional Resources
- Questions & Answers



Effects of Early Exposure to Domestic Violence



**Prenatal
Infants &
Toddlers**

Effects of **Early Exposure** to **Domestic Violence: Prenatal**

Domestic Violence During pregnancy

- Direct fetal injury
- Late prenatal care
- Pre-term labor
- Placental abruption
- Exposure to substance abuse alcohol/tobacco
- Low birth weight
- Vomiting

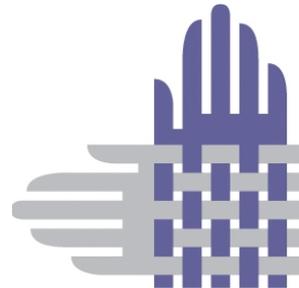
Effects of Early Exposure to Domestic Violence: Infant/Toddler

Behavioral

- Eating Problems
- Failure to Thrive
- Nightmares
- Acting out/ out of Control behavior
- Withdrawal/ Passive
- Excessive Attention Seeking
- Dependency, Mood Swings

Emotional/Psychological

- Difficulty Sleeping
- Shame, Guilt, and Self-Blame
- Confusion about Conflicting Feelings Towards Parents
- Fear of abandonment
- Anger



Effects of Early Exposure to Domestic Violence: Infant/Toddler

Social

- Attachment Problems
- Lack of responsiveness
- Poor anger management and problem solving skills

Physical

- Developmental Disabilities
- Language Delay
- Injuries When “Caught in the Crossfire”
- Short Attention Span
- Tired and Lethargic
- Frequently ill
- Poor Personal Hygiene
- High Risk Play
- Inconsolable crying

Family Violence Prevention & Services Act (FVPSA)



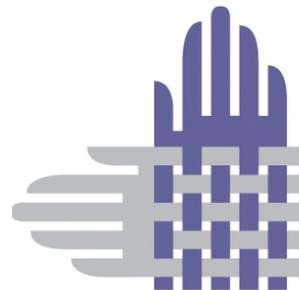
Family Violence Prevention & Services Act (FVPSA)

- First authorized in 1984
- Reauthorized in 2010 as a part of the Child Abuse Prevention and Treatment Act (CAPTA)
- Administered by the U.S. Department of Health and Human Services
- CA: Administered by the Governor's Office of Emergency Services (Cal OES)
- Reauthorized at \$175 million.



Family Violence Prevention & Services Act (FVPSA)

- Formula grants to states to provide shelter and supportive services through subgrants to local domestic violence programs
- National and specialized training and technical assistance resource centers;
- A newly authorized program for children who are exposed to domestic violence (the Specialized Services for Abused Parents and their Children program)



Family Violence Prevention & Services Act (FVPSA)



DOMESTIC VIOLENCE ASSISTANCE PROGRAM, Components: 40.20.151, 40.20.161, 40.20.451

Projects funded are mandated to provide:

- Twenty-four-hour crisis hotlines;
- Counseling;
- Business centers;
- Emergency “safe” homes or shelters for victims and families;
- Emergency food and/or clothing;
- Emergency response to calls from law enforcement;

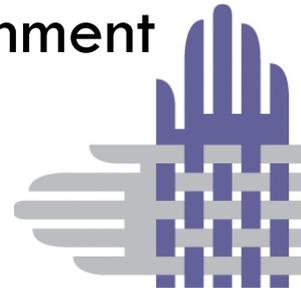
Family Violence Prevention & Services Act (FVPSA)



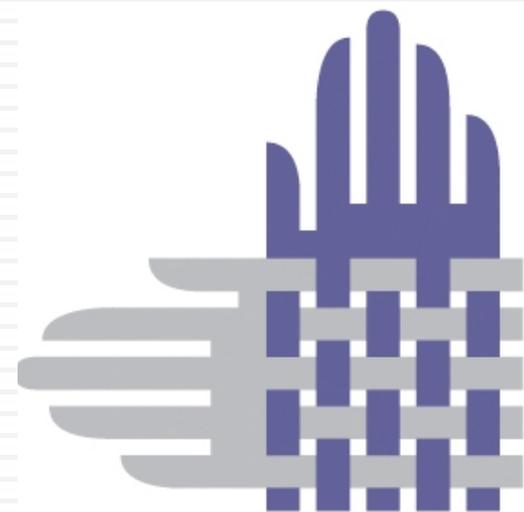
DOMESTIC VIOLENCE ASSISTANCE PROGRAM, Cont

Components: 40.20.151, 40.20.161, 40.20.451

- Hospital emergency room protocol and assistance;
- Emergency transportation to shelters/other safe locations;
- Supportive peer counseling;
- Counseling for the children of victims;
- Court and social service advocacy for victims;
- Legal assistance with temporary restraining orders and other protective and/or custody orders, devices, and custody disputes; and
- Community resource and referral for victims, and household establishment assistance.



Intersections



Intersections

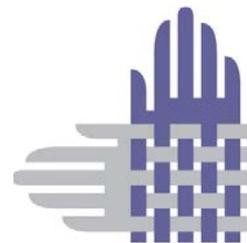
2009 The California Women's Health Survey (CWHS):

- **Approximately 40% of California women experience physical intimate partner violence in their lifetimes.**
- **Younger women, 18-24 years of age, were significantly more likely (11%) to be victims of physical intimate partner violence.**
- **Of those experiencing physical intimate partner violence, 75% of victims had children under the age of 18 years at home**

Intersections: In One Day:

The National Network to End Domestic Violence, reported that on one day in California in 2013:

- **1,734 children** were living in domestic violence shelters or transitional housing
- **533** sought services at non-residential programs





Strategies

Warm Referral

Trauma Informed Care

Family Centered Care

Strategies: Warm Referral

“Here is a hotline
number...”

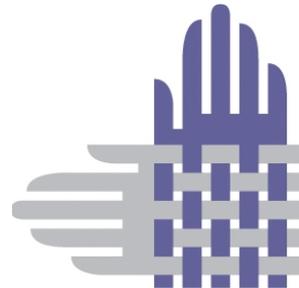
Vs.

“If you would like, we
can call Martha at
Save Space, they
have helped a lot of
families facing similar
situations.

Range of needs

Consistent Care

Coordinated
Community Response



Strategies: Warm Referral

Partnering with Local Domestic Violence Program

California Partnership to End Domestic Violence

Office: 800.524.4765,

website: www.cpedv.org

The National Domestic Violence Hotline

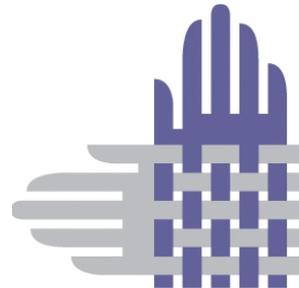
1-800-799-SAFE (7233)

website: www.thehotline.org

Strategies: Warm Referral

Partnering Strategies

- Staff trainings
- Joint Community Awareness Campaign
- April: Child Abuse Prevention Month
- Share brochures
- Connect



Strategies: Trauma Informed Care

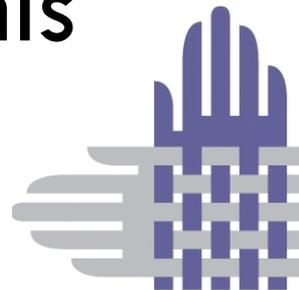
“Research demonstrates that domestic violence victims often employ protective strategies to try to mitigate against the effects of children witnessing / growing up in violent homes”

(e.g., Haight, Shim, Linn, & Swinford, 2007;
Levendosky, Lynch, & Graham-Bermann, 2000)

Strategies: Trauma Informed Care

**Instead of trying to discern
“What is wrong with this person?”**

**A trauma-informed approach asks
“What has happened to this
person?”**



Strategies: Trauma Informed Care

Barriers to Effective Screening

- Trauma Symptoms as Adaptations
- Substance abuse
- Indiscriminant sexual behavior
- Self-harm and suicidal gestures
- Dissociation
- Continued contact with abuser
- Freeze response
- Avoidance or withdrawal
- Eating disorders
- Engaging in high-risk behaviors

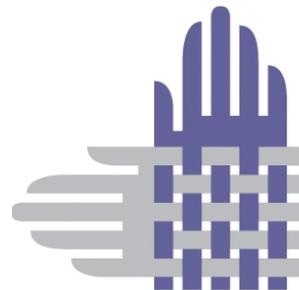
Strategies: Trauma Informed Care

Children's emotional recovery from exposure to DV depends more on the quality of their relationship with the non-battering parent than any other single factor.

(Bancroft & Silverman, 2002)

Trauma Survivors Need:

- To feel safe
- Open and respectful communication
- Consistency and predictability
- To not be blamed (overtly or covertly)
- To have personal resilience acknowledged



Strategies: Trauma Informed Care

Neurobiology of Trauma

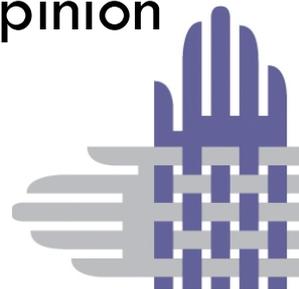
Psychological trauma is a neuro-physiological state stemming from neurobiological injury.

The brain is not rigid as we once thought, but rather, is plastic/pliable, and has the ability to change its' structure and function in response to experience.

Strategies: Trauma Informed Care

Connecting with Children Who Have Witnessed Domestic Violence

- ❑ Not their fault, and there is nothing they could have done to prevent it
- ❑ Avoid making negative statements about the batterer.
- ❑ Provide support, encouragement, and patience
- ❑ Pay attention to nonverbal communication
- ❑ Model appropriate behavior by talking about your feelings and labeling them
- ❑ Help them to identify coping skills
- ❑ Use language which focuses on the child, \ not your opinion of the child.
- ❑ Instead of saying “I’m proud of you”
say “You’re doing great.”



Strategies: Family Centered Care

Strategies to Service

- Creating a safe place survivors and their family
- Outlining services, managing expectations
- Supporting Protective Factors
- Trauma informed approach, for all members of the family

Children's resilience to trauma is linked to the presence of a healthy parent or adult in their lives.

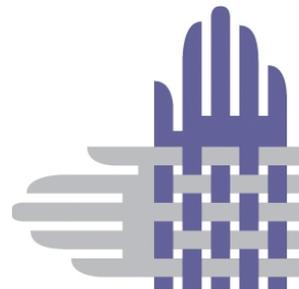
(Margolin, 1998)

Strategies: Family Centered Care

Supporting Protective Factors

- Parental Resilience
- Social Connections
- Concrete Support in Times of Need
- Knowledge of Parenting and Child Development
- Social and Emotional Competence of Children

Strengthening Families Approach
Center for the Study of Social Policy



Additional Resources

The National Network to End Domestic Violence (NNEDV)

www.nnedv.org

Futures Without Violence

www.futureswithoutviolence.org

Treatment & Trauma-Informed Care:

www.childwelfare.gov/responding/trauma.cfm

Cal OES Domestic Violence Programs

<http://www.calema.ca.gov/PublicSafetyandVictimServices/Pages/Domestic-Violence-Programs.aspx>

Additional Resources

Alicia Bernstein, MPA

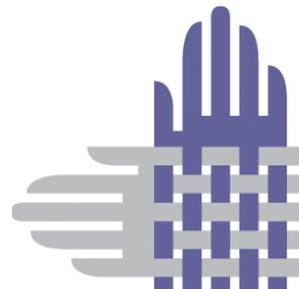
Capacity-Building Program Specialist

California Partnership to End Domestic Violence

Office: (916) 444-7163 ext. 105

alicia@cpedv.org

www.cpedv.org





QUESTIONS & ANSWERS

Alicia Bernstein, MPA

Capacity-Building Program Specialist

California Partnership to End Domestic Violence

Office: (916) 444-7163 ext. 105

alicia@cpedv.org