Guidance for Identifying and Addressing Domestic Violence with Families

Parents as Teachers includes information about domestic violence in the new curriculum because domestic violence negatively impacts family well-being, parent-child interaction and development-centered parenting in a variety of ways:

- Women who experience abuse around the time of pregnancy are more likely to abuse substances, experience higher levels of stress and depression and attempt suicide (Bacchus, Bewley & Mezey 2001; Mezey, 1997);
- Abuse during pregnancy puts women at risk for having preterm births and low/very low birth weight babies (Bacchus, Bewley & Mezey, 2001);
- Women who recently gave birth and are abused are more likely to experience postpartum depression (Garabedian et al., 2011; Lancaster et al., 2010);
- Children living in homes with domestic violence are at risk for experiencing abuse themselves (OJJDP, 2000). In addition, children may experience isolation, decreased parent availability and chronic increased levels of stress and tension (National Resource Center on Domestic Violence, 2002);
- Early exposure to violence in the home may affect brain development as well as attachment and emotion regulation (Carpenter & Stacks, 2009).
- Home visiting provides a unique opportunity to identify and intervene with families experiencing domestic violence (Evanson, 2006).

How should your affiliate address domestic violence?

Your affiliate should have a written domestic violence protocol in place that includes guidelines and procedures for how to screen for domestic violence and how to handle cases where domestic violence is present or suspected.

A structured domestic violence protocol ensures that domestic violence issues within families targeted by the program are safely, routinely, and consistently identified, appropriately addressed, and that adequate supports and safeguards are in place for families dealing with domestic violence. The protocol should provide concrete guidance and reflect day-to-day practice at the program implementation level by identifying the roles and responsibilities of different program staff.

As you develop your domestic violence protocol, consider the usefulness of implementing a universal screening approach so that all women enrolled in your program receive a screening. A domestic violence survivor cannot be predicted by age, ethnicity or socioeconomic class and screening is effective in detecting abuse and reducing a woman’s chance of experiencing violence-related injuries (Punukollu, 2003).
At minimum, a domestic violence protocol should include:

- Scope and purpose of the protocol;
- Definition of domestic violence. The term “domestic violence” and related terms such as “intimate partner violence,” are often defined in different ways. To be clear, a common understanding of what constitutes domestic violence should be defined and reflected in the domestic violence protocol;
- Contact information for partnering agencies in your community that offer domestic violence-related services for families;
- A list of evidence-based screening tools that will be utilized with guidance to parent educators on introducing the screening to families, scoring procedures and their frequency of use;
- Clear guidance on how parent educators should proceed with a screen that indicates abuse, including safety planning, how referrals to domestic violence services will be made and use of intervention materials, such as the DOVE intervention (p. 1433 of the online Curriculum);
- Standards for maintaining confidentiality and communicating these standards to families.

Be aware that your organization may already have an agency-wide domestic violence policy informed by state law that includes detailed information about how referrals, safety and confidentiality are handled. If so, this policy should be reviewed and utilized during development of the domestic violence protocol.

Which domestic violence screening tool should be used?

At this time, the developer of the DOVE Intervention and the national office for Parents as Teachers recommend two screening tools for this purpose. The table below describes the tools, where to access copies, and information about scoring. Please note that both tools are publicly available at no cost and require no training. Results of the screen get recorded on the DOVE: Structured IPV Home Visit Documentation Form (p. 1467 of the online Curriculum).

<table>
<thead>
<tr>
<th>Screening Instrument</th>
<th>Where to Locate Copies</th>
<th>Scoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Abuse Assessment Screen (AAS)</td>
<td>The tool is available in English and Spanish at this link: <a href="http://www.nnvawi.org/pdfs/Abuse_Assessment.pdf">http://www.nnvawi.org/pdfs/Abuse_Assessment.pdf</a></td>
<td>Positive response to any question denotes abuse.</td>
</tr>
<tr>
<td></td>
<td>A protocol for use of the assessment screen is available at: <a href="http://www.nnvawi.org/pdfs/abusescreen.pdf">http://www.nnvawi.org/pdfs/abusescreen.pdf</a></td>
<td></td>
</tr>
<tr>
<td>Women’s Experience with Battering (WEB)</td>
<td>A copy of the WEB items can be found in this on-line article: <a href="http://www.jfponline.com/Pages.asp?AID=1490">http://www.jfponline.com/Pages.asp?AID=1490</a></td>
<td>Add all responses; scores will range from 10-60. A total score of 20 or above indicates abuse.</td>
</tr>
<tr>
<td></td>
<td>It is also available in Appendix A of this document.</td>
<td></td>
</tr>
</tbody>
</table>

Additional resources:

- Family Violence Prevention Fund: [www.futureswithoutviolence.org/](http://www.futureswithoutviolence.org/)
- Nursing Network on Violence Against Women International: [www.nnvawi.org](http://www.nnvawi.org)
- Safe Start Center: [http://www.safestartcenter.org/](http://www.safestartcenter.org/)

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1 Other tools may also be acceptable; see, for example, Haggerty et al.’s (2011) review of screening tools for interpersonal violence.
References


## Appendix A

### Women’s Experience with Battering Scale

<table>
<thead>
<tr>
<th>Description of how your partner makes you feel</th>
<th>Agree strongly</th>
<th>Agree somewhat</th>
<th>Agree a little</th>
<th>Disagree a little</th>
<th>Disagree somewhat</th>
<th>Disagree strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. He makes me feel unsafe even in my own home</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2. I feel ashamed of the things he does to me</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>3. I try not to rock the boat because I am afraid of what he might do</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>4. I feel like I am programmed to react in a certain way to him</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>5. I feel like he keeps me prisoner</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>6. He makes me feel like I have no control over my life, no power, no protection</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>7. I hide the truth from others because I am afraid not to</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>8. I feel owned and controlled by him</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>9. He can scare me without laying a hand on me</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>10. He has a look that goes straight through me and terrifies me</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

To score this scale, add the responses for items 1 through 10. The score range is 10 to 60. A score of 20 or higher is a positive screening test for battering.