

DV REFERENCES

Allen, N.E., Bybee, D.I., & Sullivan, C.M. (2004). Battered Women's Multitude of Needs: Evidence Supporting the Need for Comprehensive Advocacy. *Violence Against Women, 1*(9), 1015-1035.

(K5)

- About the study: All women were interviewed within the first week after exiting a shelter program. 278 women participated in the program, with 143 receiving advocacy services. Participants were randomly assigned to either a group to work with advocates or a control group who were not contacted again until their next interview 10 weeks later. This study examined the role of advocacy as a component to an effective community response to DV.
- Findings:
 - In the six months following the stay in the shelter, participated in at least one type of activity, three such activities being:
 - access resources for housing (61%)
 - education (61%)
 - employment (62%)
 - Community advocacy intervention enhanced survivors' effectiveness in acquiring needed community resources regardless of the specific set of needs the women presented.
- Implication of findings for CWS
 - Advocates and workers must be comprehensive and involve victims of DV in accessing services that will ensure their safety and that of their children.

Appel, A.E. & Holden G.W. (1998). The Co-occurrence of Spouse and Physical Child Abuse: A Review and Appraisal. *Journal of Family Psychology, 12*(4), 578-599.

(K4)

- About the study
 - This article is a lit. review of different studies that were compiled and evaluated.
 - Five models depicting the directionality of abuse in violent families are proposed and discussed in relation to data and theories of violence. These are:
 - Single perpetrator
 - Sequential perpetrator
 - Dual perpetrator
 - Marital violence
 - Family dysfunction
- Findings

- Clearest conclusion is that there is an inadequate database with which to evaluate the extent of co-occurrence. Despite that predominance that the rate of evidence of co-occurrence is high, the widely fluctuating rates of co-occurrence are of concern.
- The researchers inferred the rate of co-occurrence across the U.S. population is about 6%.
- In clinical samples of either battered women or physically abused children, the percentage of overlap ranges from 20-100%.
- Implication of findings for CWS-
 - The reviewed studies provide overwhelming evidence that are in martially violent homes are at risk for being physically abused; Since there is a considerable overlap between spouse abuse and child abuse, DV agencies and CWS need to collaborate to provide more integrative treatment for the family.

Balsam, K.F. & Szymanski, D.W. (2005). Relationship Quality and Domestic Violence in Women's Same-Sex Relationships: The Role of Minority Stress. *Psychology of Women Quarterly*, 29(3), 258-269.

(K7)

- About the study
 - Purpose of study was to empirically examine the impact of minority stress and identity variables on women's same-sex relationships. Many variables, including the degree of outness, internalized homophobia, recent experiences of DV were assessed in a sample of 272 predominantly European American lesbian and bisexual women. Women were recruited at regional "Pride" events, one in Burlington, VT and one in Atlanta, GA. and via "snowball" sampling.
- Findings
 - Minority stress variables of internalized homophobia and discrimination were associated with lower relationship quality and both DV perpetration and victimization.
 - Relationship quality full mediated the relationship between internalized homophobia and recent DV.
 - There are some limitations in interpreting results, such as the lack of racial and ethnic diversity.
- Implication of findings for CWS
 - When assessing for DV, it is important to consider its occurrence of DV in same-sex relationship and its impact of the family. It is important to incorporate other forms of oppression in understanding DV in all relationships.

Becker, K.B. & McCloskey, L.A. (2002). Attention and Conduct Problems in Children Exposed to Family Violence," *American Journal of Orthopsychiatry*, 72(1), 83-91.

(K4)

- About the study
 - This longitudinal study addresses potential environmental influences on attention problems by investigating the influence of different forms of abuse in families. Children in the family were between ages 6-12. There was some ethnic diversity in the sample. 363 mother-child pairs were interviewed to assess the impact of marital violence on children's mental health. Mothers were given instruments to assess ADHD and Conduct Disorder in one of their children. Adolescents were reinterviewed 6-7 years later.
- Findings
 - 29% of sample met clinical cutoff for ADHD.
 - Family violence is related to attention and conduct problems in girls only and had a direct effect on delinquency in girls.
 - When attention and conduct problems appear, they are more likely to predict later delinquency for boys than for girls.
 - Limitations of findings- i.e., results cannot illuminate the mechanism by which family violence influences attention problems.
- Implication of findings for CWS
 - Workers need to be aware of differential impact of DV on boys and girls and the possibility of comorbid childhood problems in order to make an accurate assessment and create an effective case plan.

Begun, A.L., Murphy, C., Bolt, D., Weinstein, B., Strodthoff, T., Short, L., & Shelley, G. (2003). Characteristics of the Safe At Home Instrument for Assessing Readiness to Change Intimate Partner Violence. *Research on Social Work Practice*, 33(1), 80-107.

(K6)

- About the study
 - Purpose of this article is to describe the development and issues related to validity of the Safe at Home Instrument, a 35-item self-report measure designed for social work assessment of individual's readiness to change their intimate partner's violent behaviors. The instrument was administered to all participants at each site, during intake and again at program completion.
 - Data was derived from Milwaukee, WI, Safe at Home Project and the Howard County, Maryland, Domestic Violence Center Project. In Milwaukee County, a total of 1247 men participated and in Howard County, Maryland, 112 men participated.
- Findings
 - As currently constructed and used with an intervention population, the instrument is adequate only as a measure of three phases in the change process: precontemplation, contemplation and preparation/action.

- The data did support, in part or full, some of the validity hypotheses.
- The findings suggest strong associations between aspects of the Safe at Home instruments and other attitudes that might be expected from individuals engaged in changing intimate violent behaviors.
- Implication of findings for CWS
 - At this time, the instrument is not applicable for use in generating placement decisions about individual cases. However, it is applicable for social work evaluation of batterer's treatment interventions, which can provide valuable information for case planning and referrals.

Bybee, D.I., & Sullivan, C.M. (2002). The Process Through Which a Strengths-based Intervention Resulted in Positive Change for Battered Women Over Time. *American Journal of Community Psychology*, 30(1), 103-132.

(K5)

- About the study
 - This is a follow-up to the Sullivan & Bybee (1999) study. This study is found in this biblio as well. This longitudinal study examines the mediational processes that were hypothesized to account for the intervention impact relating to the Sullivan & Bybee (1999) study. Women were recruited from a Midwest DV shelter program. Data presented is based on 278 participants. The sample was mostly African-American and Caucasian. They were interviewed six times over a 2-year period. Half of the women were randomly selected to receive advocacy services.
- Findings
 - Improvement in quality of life persisted over time and mediated or explained the intervention's positive effects on social support at 12-month follow-up, access to resources at 24-month follow-up and reabuse at 24-month follow-up.
 - This longitudinal study provides evidence that a strength-based, community-based advocacy intervention can increase the individuals' access to resources and social support, and thus, results in positive life changes over time.
 - Limitations- There may be other models that provide equally good fit to the observed data. Findings were limited by measurement issues. Due to the population, there is a limitation on generalization. The effect of the intervention on women's reabuse over time was relatively small.
- Implication of findings for CWS
 - When working with DV victims, the women (victims) must be actively involved in their case plan.

- Connection to community resources is related to the degree to which people feel in control of their lives.

Forgey, M, Moynihan, A., Strand, V., & Hill, L. (2001). The Professional Mandate for the Use of “Strategic Collaborations” by Lawyers and Social Workers in Child Maltreatment/Intimate Partner Violence Cases. In R. Perez-Koenig & B. Rock (Eds.) Social Work in the Era of Devolution, Toward a Just Practice. New York: Professional

(K1,K2)

- About the study/citation
 - This chapter in the book looks at the need to bring lawyers and social workers together to collaborate in cases involving both child maltreatment and DV.
- Findings/content
 - Lawyers and social workers need to look at the norms of their own professionalism to overcome the professional and systemic differences that may be standing in the way of assisting families. The approaches to address these are referred to as “strategic collaborations.”
 - Agencies are beginning to create structures to facilitate collaboration between professionals.
 - Formalized conferencing structures within CWS, such as Family Group Conferencing.
 - The establishment of child advocacy centers that work to coordinate efforts of professionals working in CPS with those of the medical, prosecutorial, and police systems.
 - Some courts are tuning to conferencing systems as alternatives to adversarial child welfare proceedings.
 - The Coordinated Community Action Model (CCAM), which includes shelters, programs for batterers, the courts and social services, as well as health care systems, educational systems, etc.
 - Professional attributes that will increase the likelihood that the social worker will engage in strategic collaboration:
 - Embrace a strength-based approach
 - Awareness of role limitations and respect for other perspectives
 - Aware of one’s own theoretical biases
 - Place equal value on one’s therapeutic role and case management role.
- Implication of findings for CWS
 - The social worker’s responsibility is to independently collaborate with other professionals as the need presents itself.

- Ethically, it is the social workers' right and responsibility to cooperate with colleagues when it serves the client's best interests.

Gondolf, E. (2002). *Batterer Intervention Systems: Issues, Outcomes, and Recommendations*. Thousand Oaks, CA: Sage.

(K5)

- About the study/citation
 - This book contains resources for films on DV, program resources, citations for articles regarding interventions for batterers, etc.
- Findings/content
 - Aside from the numerous citations and resources offered in the book, there is also a brief overview on men who batterer:
 - Several studies examining the relationship between factors, such as family power, status, decision-making, or severity of abuse suggests that a complex but clear association is present.
 - Several studies of intergenerational transmission show a high association between experiencing abuse as a child and being in a violent family as an adult.
 - Several studies indicate that batterers as a group are distinguished by violent family backgrounds, excessive use of alcohol, and threatened status.
 - Preliminary research with reformed batterers suggests a possible developmental process of change that goes well beyond the conventional notion of "treatment." The change process implies that a series of progressive interventions are in order, rather than one program or treatment approach being sufficient.
- Implication of findings for CWS
 - Social workers need to be aware of the research supporting treatment for batterers and the available resources available for interventions, in order to best address the needs of a family as a part of case planning.

Jones, A. S., D'Agostino, Jr., R. B., & Gondolf, Edward W. (2004). Assessing the Effect of Batterer Program Completion on Reassault Using Propensity Scores. *Journal of Interpersonal Violence*, 19(9), 1002-1020.

(K5)

- About the study
 - This study assesses the program effectiveness of a batterer's intervention program with use of propensity score analysis.

- The sample comprised of 633 batterers and their partners from three different geographically located batterer's programs.
 - 22% of batterers voluntarily entered the program.
 - 78% were mandated to attend by the court system.
 - Of all in the sample, 54% completed the group sessions required by a program.
- Batterer initial partner and any new partners were interviewed by phone every three months after intake over a 15-month follow-up period.
- Findings
 - Program completion reduced the probability of reassault during the 15-month follow-up by 33% in the full sample. For court-ordered men, program completion resulted in a nearly 50% reduction in the probability of reassault.
- Implication of findings for CWS
 - When creating a case plan for families with issues of DV, workers should consider the effectiveness of batterers' programs. Also, the worker should consider whether the batterer has completed such a program when assessing for safety issues or reunification.

Kashani, J.H. & Allan, W.D. (1998). *The Impact of Family Violence on Children and Adolescents*. Thousand Oaks, CA: Sage.

(K4)

- About the study/citation
 - This book addresses primarily physical and verbal/psychological violence within a family. The book provides information on proposed theories regarding the etiology of family violence and the impact of children witnessing varying types of family violence.
- Findings/content
 - Adolescent males who witness family violence often use physical violence with their mothers, including during conflict resolution.
 - Symptoms of depression and anxiety may be displayed by children and adolescents who witness family violence.
 - Preschoolers and children from homes with physical violence score lower or more impaired on measures of social competency than youngsters in non-violent homes.
 - Gender differences emerge as children get older and male tend to display more externalizing problems in particular. Females seem to cope generally better than males after observing marital violence.
- Implication of findings for CWS
 - Social workers need to be aware of the impact of marital violence on children when conducting assessments, and the importance of treatment/intervention when addressing case planning with families experiencing DV.

Kohl, P.L, Barth, R.P., Hazen, A.L., & Landsverk, J.A. (2005). Child Welfare as a Gateway to Domestic Violence Services. *Children and Youth Services Review*, 27(11), 1203-1221.

(K1, K3)

- About the study
 - The purpose of this article is to examine the identification of DV by child welfare workers during investigations of maltreatment and determine how this contributes to receipt of DV services. The National Survey of Child and Adolescent Well-being (NSCAW) sample 5504 children ages birth-15 y/o, who were investigated by CWS following an allegation of maltreatment. Children were selected from 92 primary sampling units proportionate to size in 97 counties, located in 36 states. Face-to-face interviews with permanent caregivers of children remaining in the home with CWS or without CWS at baseline and 18 months.
- Findings
 - While 31% of caregivers reported DV victimization in the past year, workers only identified this violence in 12% of all cases.
 - When the worker specified active DV on the risk assessment, the likelihood of the caregiver receiving DV services was more than 7x that of caregivers without DV identified by the worker.
- Implication of findings for CWS
 - If the worker overlooks DV, this may impede efforts to protect children and provide appropriate services to families and may be one reason for repeated contact with CWS
 - Training related to the co-occurrence of DV and child maltreatment is needed by child welfare workers.

Kohl, P.L, Edleson, J., English, D.J. & Barth, R.P. (2005). Domestic Violence and Pathways Into Child Welfare Services: Findings from the National Survey of Child and Adolescent Well-Being. *Children and Youth Services Review*, 27(11), 1167-1182.

(K1, K3)

- About the study
 - This study explores the role of DV in CWS using data from The National Survey of Child and Adolescent Well-being (NSCAW). The information for the sample is available in the previous study. Also, the sample for this study was 3931 caregivers of children who underwent a complete investigation for child maltreatment between October 1999 and December 2000. Face-to-face interviews were conducted by child welfare worker.
- Findings
 - Active DV was distributed fairly evenly across the three most serious maltreatment types:
 - Failure to supervise (28%)
 - Physical abuse (23%)

- Emotional maltreatment (23%)
 - DV is one of the many risk factors for families entering CWS and appears to have only a minor role in decisions made by workers; yet, children exposed to DV often have multiple contacts with CWS due to a higher number of repeated allegations of child maltreatment.
 - Limitations- Caregiver report of DV in which children went into out of home care was not included; thus, the level of DV in CWS was likely under identified. Limited information is available about secondary caregivers who may be the perpetrators of the DV and child maltreatment.
- Implication of findings for CWS
 - Due to the growing linkage between DV and child maltreatment, info regarding DV is important to consider in the decision-making process of child welfare workers.

Lessard, G. Lavergne, C., Chamberland, C., Damant, D., & Turcotte, D. (2006). Conditions for Resolving Controversies Between Social Actors in Domestic Violence and Youth Protection Services: Toward Innovative Collaborative Practices. *Children and Youth Services Review*, 28(5), 511-534.

(K2, K6)

- About the study
 - The article presents an analysis dealing with obstacles and elements favorable to the resolution of intervention controversies in families experiencing both DV and child maltreatment (CM). This Canadian study is based on data collected by interview with psychosocial workers dealing with DV in shelters for battered women and children, organizations to help violent partners, and local community service centers, as well as those working in youth protection. The data were collected from two different studies: workers handling cases of DV in the former study, whereas youth protection workers' viewpoints are explored in the latter. 71 interviews were conducted on a voluntary basis.
- Findings
 - There were several findings regarding interventions, such as:
 - Creating conditions favorable to significant participation.
 - Learn how to get to better know the other social actors.
 - Involve members of the targets family.
 - Distribution of power among social actors.
 - Focus on common interests of all workers and families.
 - Limitations- the samples come from two regions with significant urban populations, and volunteers were encountered on a voluntary basis.
- Implication of findings for CWS
 - Collaboration is needed in order to effectively address the needs of families dealing both with DV and child maltreatment. Attempt the

researched interventions in order to work towards favorable collaboration.

Lieberman, A.F., Van Horn, P.J., & Ghosh Ippen, C. (2005). Toward Evidence-based Treatment: Child-Parent Psychotherapy with Preschoolers Exposed to Marital Violence. *Journal of the American Academy of Child and Adolescent Psychiatry*, 44, 1241-1248.

(K6)

- About the study
 - The study reports outcome findings from a randomized clinical trial to evaluate the efficacy Child-Parent Psychotherapy (CPP) compared with case management plus individual treatment. Treatment was offered for 50 weeks. Dyads were assessed at intake, at 6 months and at conclusion of treatment. Participants were 39 girls and 36 boys ages 3-5 and their mothers. The mother-child dyads were recruited if the child was ages 3-5, had been exposed to marital violence as confirmed by the mother's report on the Conflict Tactics Scale 2, and the perpetrator was not living in the home.
- Findings
 - The findings support CPP efficacy for preschoolers exposed to marital violence.
 - Children randomly assigned to CPP improved significantly more than children receiving case management plus treatment as usual in the community.
 - Mothers receiving CPP showed significantly fewer PTSD avoidance symptoms at the end of treatment than comparison group mothers.
 - Limitations- small sample size, reliance on maternal report for some of the major outcome variables
- Implication of findings for CWS
 - Social workers need to be aware of the importance of including the mother as an integral partner in the treatment of preschoolers' traumatic stress symptoms.

Mills, L.G., & Yoshihama, M. (2002). Training Children's Services Workers in Domestic Violence Assessment and Intervention: Research Findings and Implications for Practice. *Children and Youth Services Review*, 24(8), 561-581.

(K1)

- About the study
 - This paper analyzes the three curricula available to train child welfare workers on domestic violence assessment and intervention. The effectiveness of two programs (One-Day and Fellows program) is further discussed. The programs are from Los Angeles

and Orange counties. Both types of programs used the Friend, Mills and colleagues' (1999) curriculum. Pre and post-tests were administered at the beginning and end of the training.

- Findings
 - Following the training, the participants were less tolerant of men's use of violence against women and more likely to view DV as a social problem. They were also less likely to view battered women as being unable to protect their children.
 - Participants self-rated competency improved.
 - The Fellows program yielded a greater degree of improvement for participants with lower pre-tests scores in some areas.
 - Limitations- Pre and post-test design involves biases that may affect validity. A considerable number of trainings did not complete both the pre- and post-tests and also, there was no comparison group. Also, there was a short time interval between pre- and post-tests.
- Implication of findings for CWS
 - Social workers need to be aware of the importance of training in the area of DV assessment and intervention, especially when personal biases can influence one's work.

National Council of Juvenile and Family Court Judges. Effective Intervention in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice. Reno, NV: NCJFCJ. 1999.

(K5)

- About the study/article
 - This article (mainly chapter 3-4) provide guidelines and recommendations for policies regarding collaboration with other agencies and interventions for families experiencing DV. The data in the article is from the National Child Abuse and Neglect Data Systems which contains data on child maltreatment that is reported state child protection agencies.
- Findings
 - Several recommendations are cited, including:
 - CPS and community-based child welfare agencies should collaborate with DV organizations and juvenile courts to assess the availability of resources in the community, to develop new responses, to monitor the effectiveness of community programs
 - CPS should develop screening and assessment procedures, information systems, case monitoring protocols and staff training to identify and respond to DV and promote family safety.
 - Intervention programs for batterers should reexamine the contents of their procedures, policies, and curricula to

ensure that both child and adult safety and well-being are integrated into programmatic activities.

- Batterer intervention programs should participate regularly in cross-training activities with the agencies and groups that deal with child welfare.
- Implication of findings for CWS
 - Workers should collaborate with other agencies with dealing with DV and child maltreatment and should be aware of the research on the recommendations for policies regarding assessment and interventions for DV.

NYS Office for Prevention of Domestic Violence (2001). Domestic Violence in Lesbian, Gay, Transgender, and Bisexual Communities Participant Manual. Retrieved April 19, 2007, from <http://www.vawnet.org/DomesticViolence/PreventionAndEducation/Training/LGTBManual-Participant.pdf>

(K7)

- About the study/citation
 - This curriculum was designed for all health and human services providers, including HIV and other health care and mental health providers, clergy, corrections officers, rape counselors and DV service providers.
 - Goals of the training are to challenge participants to examine beliefs, values and attitudes that can impact their ability to understand LGTB victims of DV and provide them with knowledge and skills that will enable them to respond to those victims more sensitively and successfully.
- Findings/content
 - The content includes:
 - Definition for LGTB DV- “A pattern of coercive, exploitative and violent tactics, used by one intimate partner against the other, in order to establish and maintain power, control and dominance.”
 - Differences in heterosexual LGTB DV, such as additional risks faced by victims and lack of preparation for assisting victims on the part of DV service providers.
 - Myths about LGTB DV
 - Information about identifying DV in LGTB relationships.
 - Appendices include guide to interventions and safety planning hints for human service providers.
- Implication of findings for CWS
 - Workers should be aware of the prevalence of LGTB DV, the need to assess for this issue and possible interventions that can be used when dealing with a family experiencing LGTB DV. Workers should look at their own biases that might hinder the identification of LGTB DV.

Oregon Department of Human Services. Child Welfare Practice for Cases with Domestic Violence (2005, January). Retrieved April 19, 2007 from <http://dhsforms.hr.state.or.us/Forms/Served/CE9200.pdf>.

(K1, K2, K5)

- About the study/citation
 - This document provides guidelines for social workers on addressing DV with families. Document reported that a recent review of research literature shows that the children most impacted are those that both witness DV and suffer physical abuse themselves.
- Findings/content
 - The document provides guidelines for the assessment of DV, such as:
 - Assess for DV in all referrals.
 - Ask questions about DV only in separate interviews.
 - In cases of DV, visitation guidelines are discussed, such as:
 - When developing a child-family contact plan, consider measures that will meet the safety needs of the child and non-offending parent in DV situations.
 - There are guidelines on how to interview children, non-offending parent and perpetrator.
 - There are guidelines for intervention and case planning, such as:
 - Family Decision meetings are used to develop case plans and to develop safety plans.
 - There is resource information on restraining orders and domestic violence websites.
 - There is a DV intervention flow chart.
- Implication of findings for CWS
 - Social workers need to be aware of the guidelines for dealing with DV in their own county and/or as provided through literature reviews. Social workers should know the importance of assessing for DV and providing appropriate interventions/resources.

Pence, E. & Taylor, T. (2003). Building Safety for Battered Women and Their Children into the Child Protection System, A Summary of Three Consultations. (2003, May). Retrieved April 19, 2007, from Praxis International site: <http://www.thegreenbook.info/documents/buildingsafety.pdf>.

(K2,K5)

- About the study
 - This document was based on work with three communities. Each community considered the possibility of using the Safety and Accountability Audit as a planning tool to analyze and change current practices.
 - The communities consisted of Minnesota, Colorado, and Missouri.
- Findings

- Several findings including:
 - Workers reported that less than half of the men they see through child protection and court system are actively working to stop their violence or abuse.
 - There was little evidence found that the services offered by DFS to battered women and their children actually met their specific needs.
 - While there is some strong coordination efforts between the courts and DFS, advocacy programs were found to lack involvement in intervention practices outside of their own organization.
- Numerous recommendations were made related to each site that involved changes to policy or guidelines to use when dealing with DV cases. One such recommendation was to develop a DV screening tool and require its use as a standard intake practice.
- Implication of findings for CWS
 - Social workers should be aware of research in regards to assessing DV, best practices and policy recommendations in order to best address the needs of families experiencing DV.

Rossmann, B. & Ho, J. (2000). Posttraumatic Response and Children Exposed to Parental Violence. In Geffner, R, Jaffe, P. & Sudermann, M. (Eds.) Children Exposed to Domestic Violence: Current issues in research, intervention, prevention, and policy development. New York: The Hawthorn Press, Inc.

(K4, K5)

- About the study
 - This article presents a data relevant to children's posttraumatic response as a result of exposure to interparental violence. The participants consisted of families from the community and those residing at battered women's shelters where a range of parental violence had occurred. Recruitment for shelter families were conducted through referrals from nine battered women's shelters in the greater Denver and Front Range area. Recruitment for community families was conducted through multiple channels, using referrals, letters and flyers. 285 children (49% female) between the ages of 4 and 13 years old and their mothers were interviewed. Mothers and children were interviewed separately.
- Findings
 - A higher percentage of exposed/sheltered children met the diagnostic criteria for PTSD than the community children, exposed or non-exposed.

- There were significant group differences on the measures used suggesting that exposed children had significantly higher total symptom scores than non-exposed children on all measures.
- The relation of PTSD symptoms to child and family factors:
 - A whole host of adversity or risk factors are associated with arousal/avoidance and intrusion symptoms.
 - Higher dysphoria factor scores are significantly linked with poor nonaggressive and aggressive information intake, poorer social competence, less time in a violent home, fewer family stressors, and a child rejecting help from mother.
- Diagnostic complexity occurred because many symptoms that form a part of the PTSD diagnosis for children also occur as symptoms for other diagnosis often used with children, such as Depression or ADHD.
- Implication of findings for CWS
 - It is important for social workers to be aware of the impact of violence on children and how PTSD symptoms can affect the interventions used with such children. Evaluation of PTSD and treatment should be an important consideration in case planning.
 - It may be necessary to make longer-term treatment available in the home, particularly to battered mothers with very young children, in order to ensure that the home stays safe and that intervention services are delivered.

Sullivan, C.M., & Bybee, D.I. (1999). Reducing Violence Using Community-based Advocacy for Women with Abusive Partners. *Journal of Consulting and Clinical Psychology*, 67(1), 43-53.

(K5)

- About the study
 - This study was designed to evaluate an intensive community-based advocacy intervention. Participants were recruited from a Midwest DV shelter program. Participants would be interviewed six times over a 12-month period. Half the women were randomly selected to receive free advocacy services for the first 10 weeks postshelter exit, 4-6 hours per week. Data was based on 278 remaining participants. The majority of the participants were Caucasian and African-American. The intervention consisted of helping women devise safety plans when needed and providing advocacy services.
- Findings
 - Women who received free services of paraprofessional advocates for 10 weeks experiences less physical violence over time and reported increased quality of life, higher social support, less depressive symptoms, and increased effectiveness in obtaining resources compared with women in the control group.

- One out of 4 women in the experimental group experienced no abuse (by the original assailant or by any new partners) across the 24 months of postintervention follow-up. Only 1 out of 10 women in the control group remained completely free of abuse during the same period.
- Limitations- All participants had been residents of a DV shelter program, most had low incomes and all sought help from their community to deal with the abuse they were experiencing. Most were African-American and Caucasian and none were residing in rural communities.
- Implication of findings for CWS
 - When working with DV victims, the women (victims) must be actively involved in their case plan.
 - Connection to community resources is related to the degree to which people feel in control of their lives.

Yoshihama, M. (2002). Battered Women's Coping Strategies and Psychological Distress: Differences by Immigration Status. *American Journal of Community Psychology*, 30(3), 429-452.

(K2, K3)

- About the study
 - This study investigated the type of coping strategies women of Japanese descent (both Japan-born and U.S.-born) chose and their perceived effectiveness in dealing with their partners' violence. Using participants who share a common cultural background, but were born in different countries, allows for an exploration of within-group differences. There were 129 women who reported having experienced partners' violence in a face-to-face interview study that investigated the prevalence of DV. The overall interview study employed a community-based random sample of 211 women of Japanese descent in L.A. county. Structured face-to-face interviews were conducted.
- Findings
 - As compared with Japan-born women, U.S.-born women were more likely to use "active" strategies and tended to perceive them as more effective. Examples of "active" strategies are observable, behavioral efforts, such as confrontation or seeking help from friends. "Passive" strategies are unobservable, cognitive or emotional efforts. Note: The use of "passive" strategies should not be viewed as a deficiency.
 - For Japan-born women, the more effective they perceived "active strategies," the worse off they were psychologically. The opposite was true for U.S.-born women.
 - The use of "active" coping strategies, such as confronting, in and of itself may be detrimental to the psychological well-being of

- Japan-born women, because such strategies are culturally incongruent.
 - Limitations- The use of measures that had not been previously validated.
- Implication of findings for CWS
 - Social workers need to be aware of the impact of culture and immigration status on how women cope in DV relationships. This information needs to be considered when creating a case plan and/or safety plans.

WEBSITE RESOURCES

Aardvarc, An Abuse, Rape and Domestic Violence Aid and Resource Collection
<http://www.aardvarc.org/> (K5)

Abusive Men Exploring New Directions (K5)

<http://www.amendinc.org/>

<http://www.aardvarc.org>

Another Closet, Domestic Violence in Gay and Lesbian Relationships

<http://ssdv.acon.org.au/>

California Department of Human Services, California Family and Domestic Violence Referral Directory (K5)

<http://www.dhs.ca.gov/epic/fvrefer/?????>

Violence Prevention Resource Directory

<http://www.cdph.ca.gov/HealthInfo/injviosaf/Pages/ViolencePreventionResourceDirectory.aspx>

Community United Against Violence

<http://www.cuav.org/index.php>

Family Violence Law Center

<http://www.fvlc.org/>

Family Violence Prevention Fund

<http://www.endabuse.org/>

Gay Men's Domestic Violence Project

<http://www.gmdvp.org/>

Institute on Domestic Violence in the African American Community

<http://xnet.kp.org/domesticviolence/>

Kaiser Permanente, Family Violence Prevention Program

<http://xnet.kp.org/domesticviolence/>

New York Model for Batterer Programs (K6)

<http://www.nymbp.org/>

Office of the Attorney General

<http://xnet.kp.org/domesticviolence/>

National Center for Victims of Crime

<http://www.ncvc.org/ncvc/Main.aspx>

SAFE NETWORK, California's Domestic Violence Resource

<http://www.safenetwork.net/directory.cfm>

SafeState, Preventing Crime and Violence in California

<http://safestate.org/>

U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime

http://www.ojp.usdoj.gov/ovc/help/res_dom.htm

U.S. Department of Justice, Office on Violence against Women

<http://www.usdoj.gov/ovw/>

Women Escaping a Violent Environment, WEAVE

<http://www.weaveinc.org/>