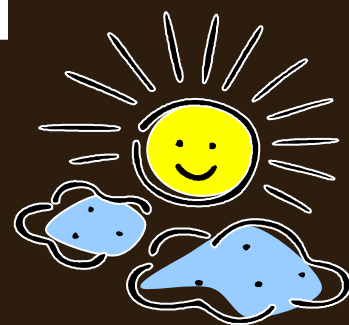




Children Exposed to Domestic Violence in Pima County:

Needs Assessment and Recommendations

February 2007



✕ A Two Year Report ✕

Tucson Safe & Bright Futures

Tucson Safe & Bright Futures is a project of the Pima Prevention Partnership funded by Federal Grant Number 5 SBFHP041016-02-00 awarded by the Office of Public Health and Science, a division of the U.S. Health and Human Services (HHS). The opinions and points of view expressed in this document are those of the author and do not necessarily reflect the official position or policies of HHS.



Pima Prevention Partnership



United States Department of
Health & Human Services



Office of Public Health & Science

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Baldasare, A. (2007) The Effects of Domestic Violence on Pima County's Children. Pima Prevention Partnership. Tucson, AZ.

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The Problem of Children and Domestic Violence

Across the U.S., the problem of children affected by domestic violence has been largely unattended and unaddressed. Children, especially under the age of six, can suffer extreme consequences from exposure to domestic violence, leading to disadvantages in every aspect of life. Although it is widely recognized that incidents of domestic violence are underreported, at least one third of American children have witnessed violence between their parents. Local officials in Tucson and Pima County, Arizona estimate that children are present at 65-70% of all domestic violence arrests.

These are a few of the many daunting facts that the *Tucson Safe and Bright Futures* community planning effort was undertaken to assess and address. In 2004, on behalf of The Juvenile Services Coordinating Council and The Pima Prevention Partnership (PPP), received funding from the U.S. Department of Health and Human Services under the Safe and Bright Futures for Children Initiative to conduct a two-year assessment and planning process to develop a coordinated community response to children exposed to domestic violence. This report provides an overview of the *Tucson Safe & Bright Futures* project, including: 1) an overview of the impact of domestic violence on children, 2) estimates on the number of children impacted by domestic violence in Pima County, 3) a summary of findings, 4) recommendations from the community assessment and planning process, and 5) new developments toward an improved system of response to children exposed to domestic violence.

I. Overview of the Impact of Domestic Violence on Children

What is Domestic Violence?

Domestic violence is defined as physical, sexual and/or psychological abuse committed by one person against another in an intimate or familial relationship. Domestic violence includes a full range of power and control tactics, including coercion, threats, intimidation, emotional/physical/sexual abuse, economic abuse, blaming victims, isolating them from others, and using children as bargaining chips. Most victims of domestic violence are women. Domestic violence occurs at all levels of society, in all socioeconomic classes, and in all ethnic backgrounds regardless of social, economic, or cultural factors.¹

How Does it Affect Children?

Research shows that the impact on children of witnessing domestic violence is similar to the consequences of being directly abused by a parent. Exposure to domestic violence can impact children right away, as they grow through adolescence and even into adulthood. The earlier the problem is addressed there, the better the possibility of reversing the impact and preventing future exposure.

Immediate consequences

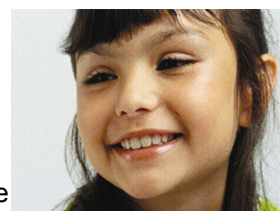
Children's exposure to domestic violence can create effects that are immediate, including:²

- ◇ Fear of being separated from parents
- ◇ Acting more "clingy" and dependent
- ◇ Increased aggression
- ◇ Difficulty sleeping and nightmares
- ◇ Becoming withdrawn
- ◇ Depression
- ◇ Crying and tantrums
- ◇ Inability to comfort self and increased frustration
- ◇ Hyperactivity and poor concentration (often misdiagnosed as ADD)
- ◇ Regression of developmental skills (e.g., return to bedwetting, thumbsucking, or loss of language skills)
- ◇ Unintentional injury to child
- ◇ Failure to thrive

Short-term consequences

The impact of domestic violence may continue through adolescence, resulting in developmental, social, and academic disadvantages such as:³

- ◇ Anxiety
- ◇ Impaired self-esteem
- ◇ Depression
- ◇ Behavioral health problems
- ◇ Impaired cognitive functioning
- ◇ Positive attitudes and acceptance of the use of violence
- ◇ Poor school performance



Long-term consequences

Children exposed to domestic violence who grow up without intervention may experience long-term effects and vulnerabilities that may last through adulthood, including:⁴

- ◇ Alcohol & drug abuse, smoking, and addiction
- ◇ Behavioral consequences such as depression & suicide
- ◇ Chronic health problems

The Cycle of Violence

Violence can be passed down from parents to their children.⁵ While not all children are affected in the same way, exposure to violence as a child has been identified as a leading risk factor for violent behavior in adolescence.⁶ With support and interventions, these children can grow up to break the cycle of violence.

The Resilience of Children

Some resilient children succeed in the face of these insults. Resiliency is defined as an individual's ability to cope or "bounce back" from stresses. Some of the factors that protect children and increase resiliency are: (1) caring relationships, (2) positive and high expectations, and (3) opportunities for meaningful participation. Ideally, systems should make every effort to support survivors of domestic violence in strengthening positive relationships with their children to maximize resiliency. A child's attachment to at least one individual who engages in proactive,

healthy behaviors with the youth may be the single most important protective factor. This individual may give the youth a sense of belonging and purpose, value his or her abilities, and may tell the child that he or she can, and will, be successful. In addition to non-offending parents, protective factors for children and youth can be provided by family members, community members, and school personnel, especially teachers, by conveying an attitude of compassion, understanding, and respect for the child. Family members, community members, and school personnel, especially teachers, can provide protective factors for children and youth by conveying an attitude of compassion, understanding, and respect for the child. School and community protective factors include contexts where youth can be exposed to positive influences, mentors, after-school programs, and recreational opportunities.⁷

II. Number of Children Affected by Domestic Violence in Pima County

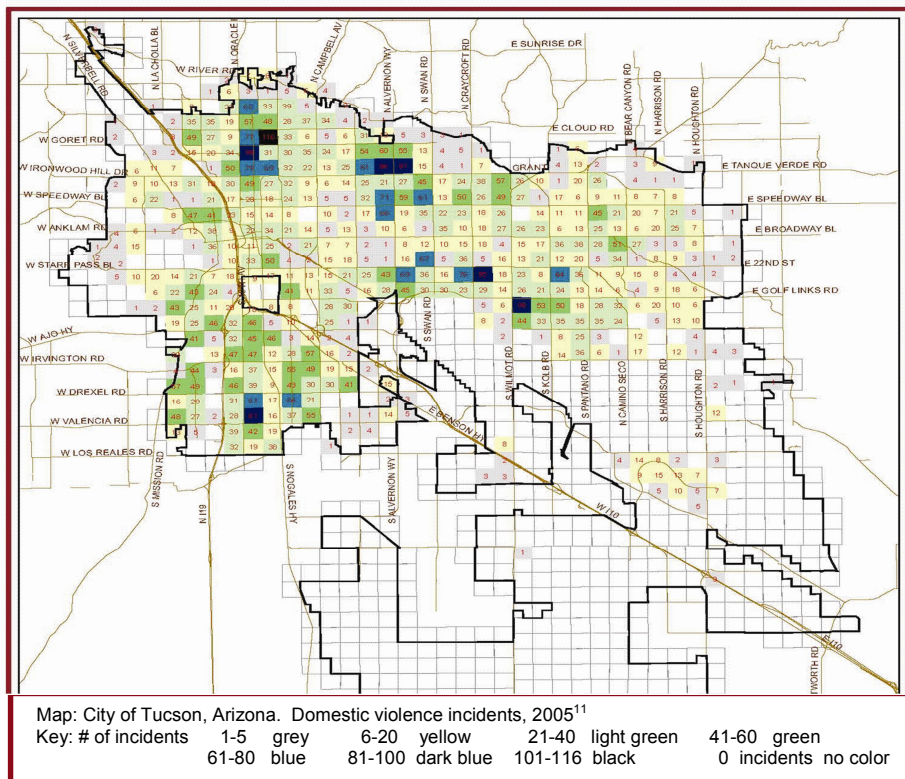
Children in Pima County

According to 2006 population estimates, 250,566 children under the age of 19 reside in Pima County, 25% of the total population of 1,002,265. The majority reside within the City of Tucson, close to 136,000.⁸

Incidence of children exposed to domestic violence

According to the Pima County Attorney's Office, there were 16,138 reported arrests for domestic violence in Pima County in 2005. The Pima County Sheriff's Department estimates that 65%-75% of all domestic

violence incidents had children present or in the immediate area, and approximately 35%-40% had children involved or injured. The national average for children residing in the home at the time of a domestic violence arrest is fifty percent.⁹

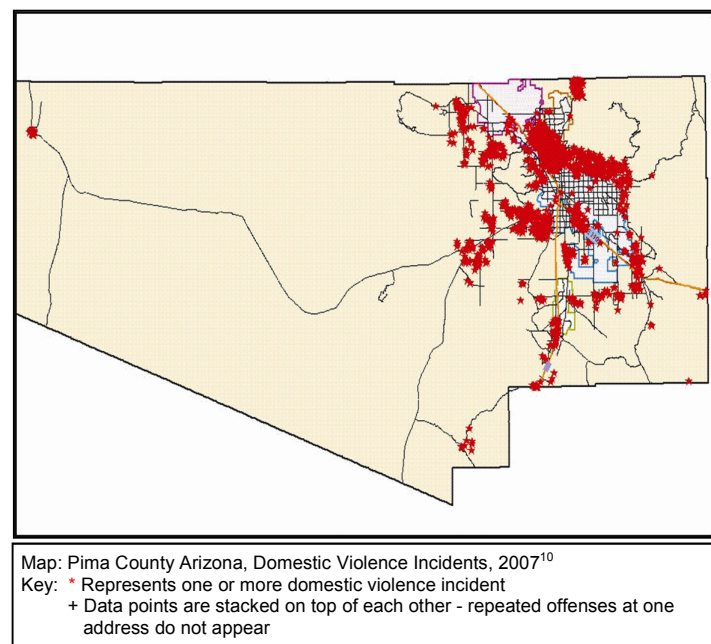


It is important to note that these figures only account for incidents of domestic violence resulting in arrest. Many people do not call 911 for help when domestic violence occurs, so these numbers underestimate the prevalence of children's exposure to domestic violence in our community.

According to Tucson Police Department (TPD), the number of children listed as present and/or assaulted at domestic violence calls was 2,363 in 2005 and 2,111 in 2006. TPD notes that these numbers underrepresent the actual number of children present, because protocols for this data collection have only recently been developed and are still being refined.¹²

In 2005, Pima County ranked the second highest among all six Arizona Child Protective Services (CPS) districts for the number of reports made to CPS that included domestic violence as an allegation. While Pima County accounts for 18% of all reports to CPS in Arizona, it accounts for 23% of all domestic violence allegations to CPS. From April 2005 to March 2006, CPS received 6,884 reports in Pima County. Recent estimates indicate more than 1,580 of those included domestic violence as an initial allegation.

According to the Arizona Department of Economic Security, in 2006 41% of all shelter clients in Pima County were children. Like other estimates of the number of children affected by domestic violence, this statistic underestimates the number of children affected by



domestic violence because 1) not all victims seek the services if domestic violence shelters; and, 2) shelter services are not always available. Due to a shortage in the number of beds available in Pima County 1,613 requests for shelter by women and children went unmet in 2006 because shelters were full.¹³

National Estimates

Nationally, it is estimated that between 2.3 and 10 million children are exposed to intimate partner violence each year.¹⁴ As many as half a million children may be encountered by law enforcement during domestic violence arrests each year in the U.S.¹⁵ Families with very young children are most at risk; domestic violence has been shown to occur disproportionately in homes with children under age five.¹⁶ Although many adults believe that they have protected their children from exposure to domestic violence, 80-90 percent of children in those homes can give detailed descriptions of the violence experienced in their families.¹⁷ Studies have shown that 25 percent of domestic homicides are witnessed by the children of the victim.¹⁸

National data has indicated that there is a high correlation between domestic violence and child abuse. There is an overlap of 30 to 60 percent between violence against children and violence against women in the same families.¹⁹ In a national survey of over 6,000 American families, 50% of the men who frequently assaulted their wives also frequently abused their children.²⁰



III. Needs Assessment Findings

Tucson Safe & Bright Futures Project Overview

In 2004, Pima Prevention Partnership (PPP) was awarded a \$150,000 federal grant by the U.S. Office of Public Health and Science under the Safe and Bright Futures for Children Initiative on behalf of the Juvenile Services Coordinating Council (JSCC). As a result, PPP formed *Tucson Safe & Bright Futures*, a two-year systems-level planning project established to improve the ability of our community to identify and respond to children exposed to domestic violence.

The planning project included:

- ◇ Comprehensive review of available services
- ◇ Analysis of system linkages
- ◇ Identification of gaps in services for children exposed to domestic violence in Pima County

Data collection of service statistics on children exposed to domestic violence were obtained from:

- ◇ Local law enforcement
- ◇ Domestic violence shelters
- ◇ Child Protective Services

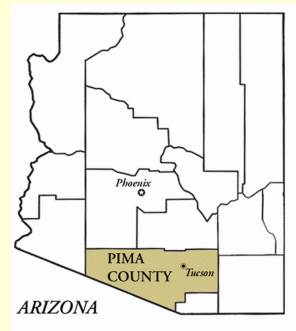
More than 60 in-depth interviews were conducted with:

- ◇ Victims of domestic violence
- ◇ Community leaders
- ◇ Authorities from ten different community service sectors
- ◇ Experts in domestic violence and child welfare

Parent focus groups with survivors of domestic violence provided information on:

- ◇ Systems of law enforcement, protection, services, and assistance for victims and their children
- ◇ The experiences of victims and their children in seeking assistance in times of need

Finally, a review of best and promising practices was an important component of the community assessment, informing the development of the recommendations listed in this report. Contributing monthly to the community assessment and strategic planning on the *Tucson Safe & Bright Futures* project was the *Tucson Safe & Bright Futures Working Group*, more that 25 community volunteers representing domestic violence services, child welfare, healthcare, behavioral health, education, childcare, social services, law enforcement, the judicial system, and victims of domestic violence (members listed on page 17). This group met monthly over two years to review the results of the community assessment and to develop recommendations for systems improvements. The following outlines the findings of the needs assessment process of *Tucson Safe & Bright Futures Project* beginning with the reflections of mothers who survived domestic violence.



Mothers' Reflections on Domestic Violence

A representative group of six mothers who have survived domestic violence shared their perspectives through interviews and focus groups. Each of the women had children who witnessed domestic violence between their parents, although the extent of their children's exposure varied in intensity, frequency, and duration. While some children were less affected than others, each of the mothers believed that they were seeing the long-term consequences of domestic violence in the behavior and health of their children years after leaving their abusers.

All the women interviewed agreed that parents need more education on the impact that domestic violence has on children. Many women described how their own trauma prevented them from being fully aware of the impact the violence was having on their children. Some comments follow:

I didn't realize the signs... I was just so wrapped up in it. He was four and... I was right in it, and it was almost ten years after the fact that I saw it.

I think what happens is the survivor mode. As long as [the children] are surviving, and they're not bleeding, and they're breathing and they're still in school, everyone thinks everyone is normal. We've survived. On that day we were surviving.

I was clueless. It was all about me, I'm going through so much pain...

The Impact on Their Children

Even after leaving their abusers and seeking help for themselves and their children, these mothers continued to deal with the long-term effects of trauma on their children's well-being. Mothers spoke of these effects on their children in terms of destroyed family relationships, eating disorders, poor academic performance, substance abuse, and violent behavior. Many of the mothers were concerned about their daughters' tendencies to appease angry men in order to calm them and attempt to avoid violence.

"Dissociation"

was a common outcome among both boys and girls, both immediately following violent assaults and in the long-term. As a result of psychological trauma, the child may emotionally disconnect and have an atypical approach to perceiving and interacting with reality.



He would freeze... I could see Bobby in the backseat through the mirror and he was disassociated, he curled up in a ball. Pulled in, I mean [my husband] would absolutely terrorize him. So Bobby just withdrew, and then his withdrawal eventually turned into running away and then turned into something else.

[She] has been diagnosed with dissociative identity disorder a few years ago... three years ago she was the cat named "October" and I was not her real mother. Our house cat, "Patches" was her real mother. Dad was a "Power Cat," a supernatural God-like creature who had left, but he had given her magical powers, and her mother was the house cat.

One of the boys who was two years older than my daughter... I observed through the back window... he was escalating in anger and I could tell he was yelling and saying derogatory things to my nine year old daughter and she was cowering and trying desperately to appease him, and I thought, "Oh my God, I have trained her. Look what I have done to her."

Mothers' Reflections on Domestic Violence

The Impact on Their Children

Some mothers saw their children become violent as a result of the domestic violence.

He's twelve now and I really seriously work with him because he is so violent. He hits, he has temper tantrums. When we were in shelter in 2001 he was the kid on the bunk bed banging his head on the wall, and then on the floor banging his head on the floor. Now...he almost got a felony charge. He was just charged with assault with a deadly weapon.

Just when we left him and gave up everything - wealth, our horses, our barn, custom home... we gave up everything... just when we moved to a little tiny apartment... that trauma on top of everything else was just enough to trigger this little sweet thing into to her fits of violence and rage on a daily basis. Because of being trained to be violent by Daddy and having some chemistry issues that come hereditarily, and then going through the trauma of all that loss and that crisis of change, she became the violent perpetrator.

Children exposed to domestic violence experience many different kinds of losses. Mothers interviewed for this project described their children suffering the loss of their fathers, loss of security, loss of trust, loss of relationships, and the loss of a home. Without interventions to help them heal, the trauma of loss and witnessing violence between their parents can have long lasting implications.



She has really lost her parental figure because, you know, she just couldn't accept that [her father] pulled that, so there's that loss. Then there is the most horrible loss of her relationship with her sister. They used to love each other, they shared a bedroom, they did everything together, everything until the little one... when you're only three and you have to figure out the world and the mean person gets the goodies and the nice person gets nothing, it's real easy in that lower level of development to choose to be the mean, bad, violent one. And she's beat up her older sister so many times that her sister hates her. She hates her!

Being Re-Traumatized by the System

The women interviewed for this project were disillusioned with the system of supports that was established to help and protect their children. Once they broke free of their abusers, a lack of coordination of services, victim-blaming, and a lack of understanding of the dynamics of domestic violence in the courts and among service providers made it difficult for these women to protect their children, and to help them recover from the trauma of living with domestic violence.

I think that the system has been as violent to my children as my ex-husband. My daughters knew that the system was a lot worse than living at home with Dad. I'm telling you, a lot worse.

Barriers Encountered by Victims Who Sought Support for Themselves and Their Children:

- ◇ Insufficient resources to hire attorneys
- ◇ Lack of domestic violence knowledge among judges
- ◇ Lack of coordination between criminal and family courts
- ◇ Lack of coordination between family courts and CPS
- ◇ Lack of specialized trauma services for children
- ◇ Lack of knowledge of available services in community
- ◇ Lack of support by employers; inability to maintain employment
- ◇ Time consuming legal battles

Most victims interviewed for this project expressed frustration that specialized domestic violence services were not available except through costly, private therapists. According to their mothers, those children who have received therapeutic interventions have improved behaviors and health, reinforcing the need for our community to have a coordinated system by which children exposed to domestic violence can be identified and supported.

Community Sector Findings

The Tucson Safe & Bright Futures Working Group identified ten community sectors that serve as points of entry in the system of protection, services, and assistance. Within each of those community sectors, gaps in the system prevent victims and their children from getting the assistance they need. As a result, survivors may lose faith in the system's ability to provide protection and assistance, and children may go without the help they need to recover from the impact of trauma.

Law Enforcement

Law enforcement agencies represent the first contact with systems of protection and support for many victims of domestic violence. As first responders, law enforcement officers are in a unique position to identify children who are living in homes where domestic violence occurs, and link them with services.

Data on the number of children present at domestic violence scenes responded to by law enforcement was not available from most Pima County law enforcement agencies. Although protocols are in place for recording the names of children present, they are not yet consistently applied.

A considerable asset to families impacted by domestic violence is the Pima County Attorney's Office for Victim Witness, which collaborates with the Tucson Police Department (TPD) and the Pima County Sheriff's Office (PCSO) to provide on-scene crisis intervention for any victim of crime, at law enforcement request. Victim Witness advocates are trained to provide crisis intervention to both adults and children, and can provide vital linkages between victims, detectives, prosecutors, and community services.

As first responders, law enforcement officers are in a unique position to identify children who are living in homes where domestic violence occurs, and link them with services.

- ◇ Work with Child Protective Services (CPS) to develop data collection and reporting protocols on all domestic violence cases involving children
- ◇ Institute regular training for law enforcement working with child victims and witnesses
- ◇ Increase training of law enforcement on services of Pima

County Attorney's Office for Victim Witness to increase calls to Victim Witness when children are present

- ◇ Develop satellite office for Victim Witness in Green Valley/Sahuarita area
- ◇ Institute regular training among law enforcement, CPS,

and physicians, to increase use of Southern Arizona Children's Advocacy Center

- ◇ Increase number of victim and child advocates to follow up with victims and families
- ◇ Co-locate victim and child advocates with law enforcement to increase victims' cooperation with prosecution of offenders

Courts

To date, the role of the courts within Pima County in identifying and aiding children exposed to domestic violence has been unclear. While domestic violence is a crime perpetrated against an intimate partner, children who witness this criminal behavior and suffer trauma as a result are not typically identified as victims. Statutes allowing for the removal of children for "failure to protect" or "exposure to violence" punish survivors rather than perpetrators, and are not recommended. Exposing a child to domestic violence is not a criminal act of endangerment or neglect under Arizona statutes, so children of parents involved in domestic violence cases are typically not identified as victims. The complexities associated with intimate partner violence make for challenging cases in both criminal and civil contexts, sometimes involving multiple, related, matters pending in different courts.

One approach to improving victim and child safety in domestic violence cases is to develop domestic violence specialty courts, which assign judicial officers trained in domestic violence to hear a special domestic violence calendar. Across the United States, many courts are employing specific procedures and coordinated community responses to address domestic violence, although

Findings

- ◇ Victim Witness services not available in all areas
- ◇ No data are available from most law enforcement agencies on children present at domestic violence calls
- ◇ Not all law enforcement agencies provide field officers with training on interviewing children
- ◇ Training on impact of domestic violence on children is not mandatory at most law enforcement agencies



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Recommendations for Law Enforcement

- ◇ Institute regular "6-minute" trainings for law enforcement on filling out spaces for children's names and information on law enforcement report forms
- ◇ Investigate appropriate data collection protocols regarding aggregate data on children living in homes where law enforcement responds to domestic violence calls

there are relatively few discrete domestic violence court models.²² These specialty courts tend to rely heavily on community resources being available for victims, perpetrators, and children exposed to domestic violence. Utilizing these services for intervention options, domestic violence courts can increase community coordination and involvement.

Findings

- ◇ Tucson City Court and Pima County Superior Court maintain no specific data on incidence of domestic violence in cases involving children
- ◇ Judges are limited by statute and cannot make judgments regarding child exposure to domestic violence
- ◇ Few prosecutors and judges have specialized training on children's exposure to domestic violence
- ◇ Courts lack a list of resources for children exposed to domestic violence
- ◇ There are no child advocates for divorce and custody hearings
- ◇ There is no standardized curriculum for domestic violence offenders who are sentenced to diversion; few programs address impact of domestic violence on children
- ◇ Judges discourage the presence of children in courtroom, yet childcare is not available at court



Recommendations for Courts

- ◇ Develop a family violence specialized court
- ◇ Provide courts with resource list/handout of all therapeutic and educational services for domestic violence victims and children exposed to domestic violence
- ◇ Develop protocols for collection and reporting of data from judicial system on the number of children involved in domestic violence-related cases
- ◇ Make childcare available to enable victims to be present at court proceedings
- ◇ Increase number and utilization of legal advocates to increase cooperation of victims with prosecution
- ◇ Develop training component for prosecutors and judges on the impact of domestic violence on children
- ◇ Advocate to reduce disparities in funding of courts and prosecutors between Pima and Maricopa County
- ◇ Reduce time delays in securing therapeutic services for domestic violence survivors and their children
- ◇ Develop Court Appointed Special Advocates (CASA) for children in divorce proceedings, similar to the Seattle model
- ◇ Advocate for a standardized curriculum for domestic violence offender classes, with standardized content on the impact of domestic violence on children
- ◇ Work with Probation to identify and address the service needs of children exposed to domestic violence
- ◇ Develop and implement a prosecutor staff training on the impact of domestic violence on children for Pima County Attorney's Office
- ◇ Develop advisory council to consult with Pima County Attorney's Office on special conditions for supervised probation that would be appropriate and helpful in protecting child witnesses to domestic violence

Health Care

Health care settings provide an important means for both the identification of children exposed to domestic violence and points of entry into services. The American Medical Association and other national professional health care associations have issued position statements regarding routine screening of patients and their families for domestic violence. In 1994, 37 percent of all women who sought care in hospital emergency rooms for violence-related injuries were injured by a current or former spouse, boyfriend or girlfriend.²³ Not only do victims seek medical treatment for injuries, but research also indicates that they trust doctors and would like doctors to screen for domestic violence.^{24,25,26,27} Furthermore, the National Association of Children's Hospitals and Related Institutions²⁸ states that a minority of women will seek medical care for themselves when abused, but almost *all* will bring their children for medical care. Therefore, the pediatric setting may be a woman's only point of access to enter domestic violence intervention programs. Health care settings could adopt protocols and policies that provide domestic violence screening, as well as resources and referrals for domestic violence victims and their children.



Findings

- ◇ Screening for domestic violence is not consistently applied in healthcare settings
- ◇ Not all area hospitals have a domestic violence policy
- ◇ Not all area hospitals have domestic violence training for staff
- ◇ There is insufficient availability of domestic violence training specialized for the medical community in Pima County
- ◇ There is no specialized training available in Pima County, provided on a systematic basis, for medical personnel on the impact of domestic violence on children

Recommendations for Health Care

- ◇ Increase recurrence of domestic violence training in health care settings, to increase screening and prevention/intervention practices
- ◇ Advocate for institutionalization of domestic violence prevention and intervention practices and policies in the Tucson/Pima County medical sector
- ◇ Advocate for hospitals to have ongoing staff training, formalized policies regarding domestic violence, and domestic violence committees with mandated staffing
- ◇ Put “shoe cards” with contact information for domestic violence services in clinics or private medical and behavioral health offices and hospital and clinic restrooms
- ◇ Identify and standardize the content of basic education on domestic violence, including the impact on children, at the University of Arizona School of Medicine, College of Nursing, and Pima College of Nursing program



Preschools and Childcare

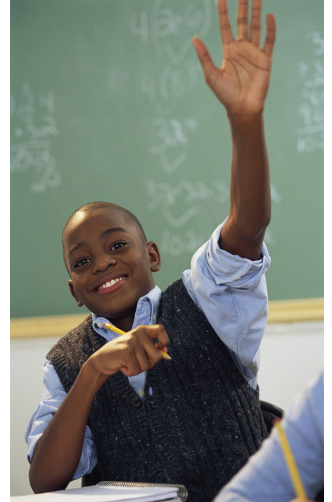
One of the consequences of a young child's exposure to domestic violence is behavior problems,²⁸ a common cause of expulsion from daycare or preschool centers. In Arizona, the rates of expulsion are three times higher in pre-kindergarten than in K-12.²⁹ According to the Blake Foundation, which provides training and technical assistance to childcare centers, expulsions of preschool children for behavioral problems are also a major problem in Tucson and Pima County.

In Tucson, more than 43% of all children are in some form of childcare. Childcare workers, having daily contact with the children, are in an ideal position to identify those who are having exposure to violence. However, most childcare teachers in Arizona receive very little formal training and earn a low wage, on average, \$6.43 per hour.³⁰ State regulations require childcare teachers to have only a high school diploma or GED, and also allow for child to staff ratios of up to one staff person for 15 four year olds. In sum, childcare staff are poorly compensated, often under-educated, and overworked in their jobs. In addition, the average rate of staff turnover at these centers in Pima County is four months.³¹

The majority of these staff have little or no training to help them respond appropriately to children who have special needs, including behavioral problems that may have resulted from the trauma of witnessing violence. Low-cost and convenient training is needed to improve the ability of childcare workers to safely identify and support children who may be experiencing domestic violence.

Findings

- ◇ Childcare centers expel children with behavioral problems
- ◇ There is an extremely frequent turnover among childcare workers (averaging four months)
- ◇ Childcare centers in Arizona must be licensed, but not accredited (officially certified as providing services of applicable standards)
- ◇ Licensing standards are among the lowest in the nation
- ◇ There is no specialized training available for childcare center staff on identifying and responding to children exposed to domestic violence



Recommendations for Preschools and Childcare

- ◇ Develop training and informational materials for childcare centers on the impacts of domestic violence on children, how to recognize and help children exposed to domestic violence, working with victims of domestic violence, and safety issues
- ◇ Make training and information available on an ongoing basis in response to high childcare staff turnover
- ◇ Target childcare centers that serve large numbers of CPS-involved children for training on children exposed to domestic violence

Education

Children who experience domestic violence often experience short and long-term impacts that may affect their performance at school. Teachers, having daily contact with students, are in an ideal position to identify those who are having exposure to violence. Early identification can lead to earlier and more effective support and intervention for children and their families. School-based interventions and prevention initiatives can reduce risk and increase protective factors for students. Teachers and other school personnel may be the caring adults who make a difference in the lives of students experiencing exposure to violence at home.

Teachers and other school personnel may be the caring adults who make a difference in the lives of students experiencing exposure to violence at home.

All school districts in Pima County have their own systems for assisting children in crisis, but no specific protocols or training on addressing the specific issues of children experiencing domestic violence. In order to create a systematic response to children exposed to domestic violence, schools will have to be consulted district-by-district and school-by-school. While all school personnel could benefit from training and information on domestic violence, teachers, counselors, social workers, nurses, and wellness centers are potentially fruitful starting points for systematic training efforts.

Findings

- ◇ Public and charter schools have no protocol for addressing child exposure to domestic violence
- ◇ There is no specialized training conducted for school or day care personnel on identifying and responding to children exposed to domestic violence
- ◇ Counselors and teachers have limited knowledge of community resources for children exposed to domestic violence
- ◇ Outreach efforts will have to be conducted on campus-by-campus basis
- ◇ School personnel are wary of backlash against child from family if they intervene because of suspected domestic violence
- ◇ School personnel lack time for additional training

Recommendations for Education

- ◇ Develop and implement training for school personnel (educators, counselors, social workers, nurses, etc.) to increase their capacity to respond to children exposed to domestic violence
- ◇ Conduct educational outreach with individual districts and schools

- ◇ Develop a domestic violence curriculum component for school counselors to present to students as part of guidance units already taught in classrooms
- ◇ Make use of school facilities for education and outreach to families during/after school hours
- ◇ Create resource list for school personnel

Domestic Violence Shelters

In Pima County, 41% of all domestic violence shelter clients are children under the age of eighteen.³² The move into a shelter can be difficult for children, who miss their homes, may be suffering from the effects of trauma, may wish to see their other parent, and are not accustomed to a communal living environment. The specialized services available to children at the two domestic violence agencies in Pima County vary. At one, there is a child advocacy program which provides safety

In Pima County, 41% of all domestic shelter clients are children under the age of eighteen.

planning and domestic violence education, guidebooks for parents, advocacy for children age nine and older, and art/play activities for children age two and older. The other major domestic violence agency offers support groups for children with safety planning, and operates a day care facility that is open to the public. Shelter clients may use the day care facility free of charge for three days. Both domestic violence agencies are in need of funding to expand their services for children.

The Arizona Department of Economic Security (DES) notes that childcare is among the top unmet needs for victims across the state. Childcare for shelter clients is essential, as most shelters have a maximum 120 day stay, during which victims typically need to secure housing, find employment, and address other urgent needs. Domestic violence shelter residents may be exempted from the normal requirements to qualify for childcare benefits from DES. However, wait-lists and transportation are often barriers. Safety and confidentiality issues with daycare centers are paramount for victims while they are in shelter, so that abusers cannot locate children and use them against victims.

Findings

- ◇ Forty-one percent of shelter residents are children
- ◇ Child advocacy program is only available at one of the two major domestic violence shelters
- ◇ Childcare is only available at one shelter, for maximum of three days
- ◇ Shelter clients must qualify for DES childcare
- ◇ There is no standardized education for survivors on impact of domestic violence on children

Recommendations for Domestic Violence Shelters

- ◇ Increase number of child advocates working in shelters
- ◇ Advocate for more emergency shelter beds for victims and children, including older male children and undocumented immigrants
- ◇ Increase childcare options for victims staying at shelters
- ◇ Include component on the impact of domestic violence on children in parenting skills classes offered in shelters



Department of Economic Security and Child Protective Services

The Department of Economic Security (DES) and Child Protective Services (CPS) provide critical intervention and support to children and families in crisis. DES and CPS can provide a leadership role in any coordinated community response to children exposed to domestic violence. DES provides economic support to eligible families through cash and employment assistance, as well as other important benefits such as childcare and healthcare. Within DES is CPS, the department responsible for the protection of neglected and abused children. Since 2003, under the direction of Governor Napolitano, CPS has been undergoing a reform process focusing on improved child safety and child and family well-being. An action strategy of this reform is, to co-locate domestic violence specialists in CPS and DES offices, which speak directly to the ability of DES and CPS to respond to the unique issues of families experiencing domestic violence. Recently, CPS has taken initiatives to identify and respond to children exposed to domestic violence. All new caseworkers at CPS now receive domestic violence training as part of their basic training before they begin the job. Two new programs, In-Home Services at CPS and Family Connections at DES are part of a family-centered approach, designed to prevent at-risk families from future or more significant involvement with CPS.

In-Home Services units in Pima County now work with families whose children are not removed, but whose cases remain open in order to provide much-needed services to stabilize the family. Family Connections units are integrated teams of DES staff representing CPS, Family Assistance Administration (FAA), and JOBS. The units work with families at risk before they become involved with the child welfare system. Members of both new programs have been actively working to improve their ability to identify and respond to children exposed to domestic violence.

All new caseworkers at CPS now receive domestic violence training as part of their basic training before they begin the job

Findings

- ◇ Data is only available on domestic violence allegations made at the time of investigation (no data is collected on domestic violence identified after investigation during case management)
- ◇ There is no standard protocol for investigating domestic violence
- ◇ Referrals are generally not made for domestic violence specific services
- ◇ There is limited caseworker knowledge of domestic violence resources and services
- ◇ Domestic violence training is only mandated for new employees at CPS
- ◇ There is no domestic violence training for DES workers outside of CPS



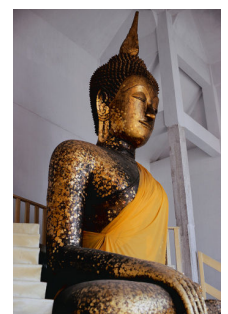
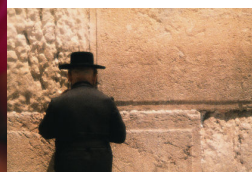
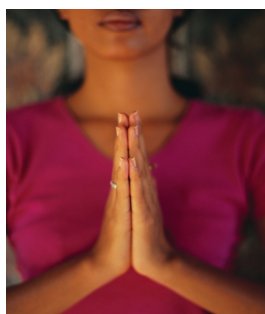
Recommendations for Department of Economic Security and Child Protective Services

- ◇ Develop protocol for CPS data collection and analysis of cases involving children exposed to domestic violence
- ◇ Work with CPS In-Home service units and Family Connections teams to identify and provide services for children exposed to domestic violence
- ◇ Provide training on impact of domestic violence on children to In-Home-Services staff as necessary
- ◇ Facilitate access to affordable and adequate childcare for families in crisis
- ◇ Provide transportation options for families receiving services
- ◇ Advocate for domestic violence screening by DES so that clients can be placed in appropriate services and safety measures can be taken
- ◇ Advocate for shared data systems and a universal application for all DES benefits
- ◇ Co-locate domestic violence advocates within CPS units
- ◇ Provide CPS-involved parents with information on child safety and the impact of domestic violence on children
- ◇ Advocate for more housing for victims of domestic violence and their children

Faith Communities

Faith communities possess a great deal of positive influence and can be valuable allies in a coordinated community response to children exposed to domestic violence. Nationally, forty-three percent of adults say they attend worship regularly, and 70% hold membership in a church or synagogue.³³ Religious beliefs can be a source of healing and justice in responding to domestic violence. Many faith institutions have resources such as volunteers, counselors, educational programs, and support groups that could be used to help victims of domestic violence and their children. On the other hand, congregations have varying views on spousal obligations, and some survivors, according to our needs assessment, have reported feeling further isolated by advice discouraging them from leaving their abusive partners.

Involving faith communities in a coordinated response to children exposed to domestic violence will require a congregation-by-congregation effort. Faith communities vary in their knowledge of, perspectives on, and willingness to address the issue of domestic violence. Education and outreach efforts to individual faith communities will be most successful when done by groups or individuals who can relate to that community with similar values, beliefs, and language.



Behavioral Health

In some cases, children's exposure to domestic violence can result in long-term consequences to mental health, including post-traumatic stress disorder. The earlier behavioral health interventions can take place with traumatized children, the more likely they are to mitigate the negative effects of that trauma. Additionally, one of the main needs of a child

experiencing domestic violence is to regain a sense of security and to experience a positive relationship with parents.

...one of the main needs of a child experiencing domestic violence is to regain a sense of security and to experience a positive relationship with parents.

It is important to have sufficient behavioral health service providers specially trained in domestic violence for both children and adults. Service providers who do not understand the complex dynamics of power and control and the safety issues involved in domestic violence may not only respond ineffectively in these situations, they may actually increase the level of danger for a child and/or a non-abusing parent. At the time of this assessment, therapists in Pima County with specialized knowledge of domestic violence were primarily in private practice, which is cost-prohibitive to many survivors and their families. Behavioral health providers providing services to Arizona Health Care Cost Containment System (AHCCCS)-eligible clients do not offer specialized services for domestic violence.

Findings

- ◇ There are few specialized therapeutic services for children exposed to domestic violence
- ◇ There are few domestic violence specialists within the public behavioral health system
- ◇ Victims rely on word-of-mouth to identify the few private therapists in town who are knowledgeable about domestic violence
- ◇ There is no specialized training for behavioral health personnel on the impact of domestic violence on children
- ◇ Many families lack the ability to pay for therapeutic services, but may not qualify for public coverage
- ◇ Wait-lists delay treatment while family situation deteriorates



Undocumented Immigrants

Undocumented immigrants who are victims of crime have certain legal protections under United States law. There are legal processes to grant visas to immigrants who are victims of crime, including the Violence Against Women Act (VAWA), the U-Visa, and the T-Visa. The Violence Against Women Act makes provisions for undocumented women to obtain legal status if they are victims of crime and if they are married to a legal permanent resident or a U.S. citizen. U-Visas require victims to make a police report and cooperate with law enforcement. T-Visas are for cases involving human trafficking. The requirements for each of these are very stringent.

Even when pursuing visas, undocumented immigrants who are victims of domestic violence face acutely difficult challenges in protecting themselves and their children. For those immigrants who are fleeing from domestic violence at home, the maximum 120 days of emergency shelter stay is usually insufficient to submit applications, obtain work permits, and have cases processed. Once applications are made, victims will not be deported, but they cannot work until they receive work permits, which reportedly can take as long as 10 months. Most transitional and permanent housing offered by domestic violence service organizations requires proof of income, which undocumented immigrants cannot provide without work permits. Thus, shelters have limited ability to assist immigrant survivors and their children when they have used their maximum length of shelter stay. Unfortunately, immigrant survivors are more likely to return to their abusers when they run out of work and housing options for themselves and their children.

Aside from the critical issues of housing and work, undocumented immigrants face enormous difficulties obtaining legal, health, and social services for themselves and their children. Culture, fear, and language barriers increase their isolation and add to the difficulties experienced by victims who are not legal citizens.

IV. Recommendations

The following recommendations were identified as priority items for the first year of action by the Tucson Safe & Bright Futures Working Group, because they could be readily implemented.

Law Enforcement

1. Institute regular “six minute trainings” for law enforcement officers on filling out spaces for children’s names and information on law enforcement report forms.

Justice System

2. Provide courts with a resource list/handout of all therapeutic and educational services for domestic violence victims and children exposed to domestic violence.
3. Develop and implement staff training on the impact of domestic violence on children for the Pima County Attorney’s Office.

Health Care

4. Place “shoe cards” (with critical information on domestic violence services) in clinics or private practice offices, hospitals, and clinic restrooms.

School System

5. Conduct outreach with individual districts and schools. Provide them with information and resource lists for children exposed to domestic violence.
6. Develop training for school personnel (educators, counselors, social workers, nurses, etc.) to increase their capacity to respond to children exposed to domestic violence.
7. Develop a domestic violence curriculum component for youth that school counselors could add to guidance units already taught in classrooms.
8. Make use of school facilities for education and outreach to families during and/or after school hours.
9. Create resource list for school personnel.

Preschool and Childcare

10. Make training and information available on an ongoing basis in response to high childcare staff turnover.

Department of Economic Security and Child Protective Services

11. Work with Family Connections teams to identify and provide services for children exposed to domestic violence. Provide training on impact of domestic violence on children to Family Connections staff.
12. Advocate for domestic violence screening by DES so that clients can be placed in appropriate services and safety measures can be taken.

Domestic Violence Shelters

13. Include component on the impact of domestic violence on children in parenting skills classes offered in shelters.

The following recommendations were also selected as priorities for action by the Tucson Safe & Bright Futures Working Group, although they will require significantly more time and resources to implement.

14. **Preschool and Childcare:** Develop training and informational materials for childcare centers on the impacts of domestic violence on children, how to recognize and help children exposed to domestic violence, working with victims of domestic violence, and safety issues.
15. **Domestic Violence Shelters:** Advocate for more emergency shelter beds for women and children, including older male children and undocumented immigrants.
16. **Courts:** Reduce delays in therapeutic services for domestic violence survivors and children.
17. **Department of Economic Security and Child Protective Services:** Advocate for more housing for victims of domestic violence and their children.



New Developments

Inter-Agency Council

- ◇ The Southern Arizona Children's Advocacy Center will move into a new building in Summer 2008. Constructed with Pima County bond funds, the new center will include the presence of other community service providers: Brewster Center Domestic Violence Services, Las Familias, Tucson Police Department, Pima County Sheriff's Department, Child Protective Services, Pima County Attorney's Office.

Community Training for Service Providers

- ◇ Based on needs identified in Tucson Safe & Bright Futures project, the Governor's Office for Children, Youth, and Families funded Pima Prevention Partnership to develop and implement two training programs to educate direct service providers on how to identify and respond to children exposed to domestic violence. Beginning in July 2006, training developed in collaboration with the Blake Foundation was made available to child care centers and to CPS-contracted in-home family service providers.

Tucson's First Conference on The Effects of Violence on Children

- ◇ As a result of the Tucson Safe & Bright Futures project, Tucson will hold its first conference on children exposed to violence, featuring national and local experts. The conference, scheduled for May 2 and 3, 2007, will provide training and education to more than 500 direct providers of services to children.

Tucson Safe & Bright Futures Working Group

- ◇ The Tucson Safe & Bright Futures Working Group will continue to meet monthly as a subcommittee of the Juvenile Services Coordinating Council to coordinate services and to implement the recommendations and priorities established in this report. Contact Sandra Klinger at 520-624-5800 x1203 for more information.

Tucson Safe & Bright Futures Website

- ◇ A website <http://www.violencefree4kids.org>, to disseminate information on children's exposure to domestic violence is under construction. The site will contain information, training materials, training calendars, links to partner agencies, downloadable resources, and a community resource guide.

Child and Adolescent Traumatic Stress Services (CATSS)

- ◇ Jewish Family and Children's Services agency was awarded funds from SAMHSA to provide specialized behavioral health services to children traumatized by exposure to violence. CATSS is part of the National Child Traumatic Stress Network.

Tucson Police Department

- ◇ Tucson Police Department is now collecting data on children who are present at domestic violence scenes, and they have implemented 6-minute training sessions for all staff on working with children exposed to domestic violence.

Courts

- ◇ Pima County Consolidated Justice Court System, in partnership with Pima County Adult Probation, the Pima County Attorney's Office, and the Pima County Sheriff's Office, was awarded a STOP Grant from the Governor's Office to establish and support a domestic violence court. The grant includes funding for a domestic violence detective, a specialized probation team for enhanced offender supervision, part-time staff in Victim Witness Services, and additional staff in the County Attorney's Office and the Sheriff's Office to expedite processing and improve coordination among project partners.
- ◇ Pima County Juvenile Court is developing an alternative reception center for youth arrested for domestic violence charges. The domestic violence reception center will be an alternative to detention where law enforcement agencies will be able to take youth who are unable to remain at home due to domestic violence. Crisis intervention, assessment, information and referral services specific to domestic violence will be provided.



Juvenile Services Coordinating Council Members

Chair: TMC Foundation, Emily Jenkins

Co-Chair: Pima County Attorney's Office, Fran McNeely

Arizona Children's Association, Fred Chaffee

Business Consultant, Beth Walkup

Casa de Los Niños, Susie Huhn

Child and Family Resources, Eric Schindler

Community Partnership of Southern Arizona, Neal Cash

Department of Economic Security, Child Protective Services, Lillian Downing

Gospel Rescue Mission, Roy Tullgren

Governor's Office for Children, Youth & Families, Irene Jacobs

La Frontera, Linda J. Lopez

Our Family Services, Sue Krahe-Eggleston

Pima County, Enrique Serna

Pima County Attorney, Barbara LaWall

Pima County Health Department, Dennis Douglas

Pima County Juvenile Center, Rik Schmidt

Pima County Juvenile Court, Hon. Pat Escher

Pima County School Superintendent, Linda Arzoumanian

Sheriff of Pima County, Clarence Dupnik

Superintendent, Flowing Wells School District, Nicolas Clement

TUSD Education Center, Holly Colona

Youth Member, T.J. Cheshier

Tucson Police Department, Richard Miranda

Tucson Safe & Bright Futures Working Group

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Arizona Department of Health Services, Jeffrey A. Serrano

Arizona Early Intervention Program, Pima County, Maria Bravo

Arizona's Children Association, Linda Selsor, Stan Levine

Big Brothers Big Sisters of Tucson, Inc, Amanda Abens

The Blake Foundation, Annabel G. Ratley, Kathryn Seidler, Jules O'Herron

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Casa de Esperanza, Dina Miller, Tabitha Weaver

Casa de los Niños, Susie Huhn, Daria Lessen

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El Rio Community Health Center, Maria T. Gonzales

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Jewish Family & Children's Services, Barbra Quade

La Frontera Center, Inc, Linda Lopez

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Pima Prevention Partnership Stars Mentoring Project, Maggie Allen

Pascua Yaqui Tribe, Health Dept, Sara A. Mendoza, Tula McCarthy

Pima County Attorney's Office, Fran McNeely, Nicol Green, William McCollum, Ashley Duncan

Pima County Health Department, Cece Teaque

Pima County Juvenile Detention, Dodi Ledbetter

Pima County School Superintendent's Office, Jill Rosenzweig

Pima County Sheriff's Department, Ramon de la Torre

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Southern Arizona Mental Health Corporation, Stacy Tarquinio

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Tohono O'odham Nation, Jane Latane

Therapist in Private Practice, Maureen Jordan

Tucson Centers for Women & Children, Karen Orr, Nicole Becwar

Tucson Police Department, Asst. Chief Kathleen Robinson, Sgt. Bernadette Eichenberger-Schneider, Sgt. Dennise Wilson

Tucson Unified School District, Morrow Education Center, Judy Bowers

United Solutions Coaching and Consulting Group, Gina Gavaris

United Way of Tucson and Southern Arizona, Patrick Jordan

University Physicians Healthcare, Doris Sisk

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Juvenile Services Coordinating Council (JSCC)

The Juvenile Services Coordinating Council (JSCC) is a broad-based collaborative institutional partnership which includes law enforcement, mental health services, the courts, and substance abuse prevention and child welfare services in addressing the issue of delinquent youth and their families. It was formed to address the most vulnerable population of children and those most likely to overstress the human service and law enforcement system in the future.

The Juvenile Services Coordinating Council is made up of 23 individuals from organizations throughout Pima County. The JSCC evolved from a meeting convened by Tucson Medical Center (TMC) in 1998 to address needs of children in the juvenile justice system. From this meeting, the JSCC was formed, and the members decided to collaborate in developing strategies for preventing juvenile delinquency. Tucson Medical Center obtained grants from the Flinn Foundation and St. Luke's Charitable Health Trust to fund a study and develop an action plan for juvenile delinquency prevention which was conducted by the Pima Prevention Partnership. In 2000, the JSCC obtained funding for its first community initiative, called Breaking the Cycle, a collaborative project that is being administered through Pima County. To develop the Children of Prisoner's Project, the JSCC obtained financial support from the Community Partnership of Southern Arizona (CPSA), Tucson 30, the Pima County Sheriff's Office, and the Gannett Foundation. Donated staff from TMC HealthCare and the Pima County Attorney's Office provide leadership for JSCC activities, with staff support from Pima Prevention Partnership.

Pima Prevention Partnership (PPP)

The Pima Prevention Partnership (PPP) is a community-based, non-profit organization established in Tucson, Arizona in 1991. The mission of the organization is building partnerships with young people, families, and communities to improve their quality of life. PPP provides research, program and grant development assistance for JSCC initiatives. Projects include the county-wide assessment and report on delinquency prevention, which was published in March 2000 and the three year Breaking the Cycle Project in partnership with the Pima County Health Department, Pima County Attorney's Office, Pima County Sheriff's Department, Tucson Police Department, and Child and Family Resources. In September 2001, *Children of Incarcerated Parents*, a planning grant, was awarded to PPP on behalf of the JSCC from the U.S. Department of Justice, National Institute of Corrections – one of only four awards given nationwide. As a result, in September 2003, PPP, was awarded the *STARS Mentoring Project*, a three-year-federal-grant from the Administration on Children Youth and Families, to address the needs of children of incarcerated parents in Pima County. In October 2004, PPP, on behalf of the JSCC, was also awarded *Tucson Safe and Bright Futures*, an 24-month planning project from the U.S. Department of Health and Human Services to assess the needs of children affected by domestic violence in Pima County. In 2005, the STARS Mentoring Project was expanded to Maricopa County and Texas, and in 2007, to Northern Arizona.

In July 2006, PPP was awarded funding for *Ensuring Safe and Bright Futures Project* from the Arizona Governor's Office for Children, Youth and Families, The Governor's Innovative Domestic Violence Prevention Planning Grant Program to provide education and training of two (2) key populations serving high-risk children and families in Pima County: a) *administrators/educators* from the childcare centers serving high-risk communities; and b) *behavioral health and child welfare professionals and paraprofessionals* from the DES-contracted AzPAC In-Home Family Support, Preservation and Reunification Team.

Additional information on the Pima Prevention Partnership is available at www.thepartnership.us.

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creating conditions for change

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