

**BLUEPRINT to GUIDE DEVELOPMENT
of DOMESTIC VIOLENCE PROTOCOLS**

**Identifying and Responding to Domestic Violence Issues
in Healthy Marriage Initiatives**

This Blueprint is a tool to assist federally-funded Healthy Marriage initiatives develop a protocol describing how each will respond to domestic violence issues within their projects. While some similarities exist across funded sites, there are also significant variations related to key project partners, referral and referring agencies, services provided, and current domestic violence policies and practices within the funded agency itself. These variations affect how a site might approach assessing for domestic violence and then respond when domestic violence is disclosed or detected. Therefore, the domestic violence protocol developed by each Healthy Marriage initiative should be site-specific and tailored to reflect the particular characteristics of the community and project.

In the Healthy Marriage Initiative context, a well-structured domestic violence protocol (DV Protocol) ensures that domestic violence issues within families targeted by the project are safely, routinely and consistently identified and appropriately addressed and that adequate supports and safeguards are in place for families dealing with domestic violence. Each DV Protocol should serve as a resource for anyone involved in the implementation of the Healthy Marriage Initiative (HMI), providing concrete guidance and reflecting day-to-day practice at the project level and reflecting the roles and responsibilities of different project partners.

This Blueprint identifies key components that sites might consider including in their DV Protocol and provides commentary in the form of critical questions and analysis to facilitate site-level discussion and decision-making. To be most effective, the DV Protocol should be developed collaboratively with local and/or state domestic violence programs and experts.

KEY COMPONENTS OF A COMPREHENSIVE DV PROTOCOL

A. Name of Healthy Marriage Project _____

B. List of Key Project Partners

Discussion

This area of the DV Protocol should not only list the key partners involved in the HMI and its domestic violence response, but also include a lead from each partner agency and his/her contact information.

C. Program Description

Discussion

In this section of the DV Protocol, a concise description of the HMI could be included to provide a context for the domestic violence response. What are the characteristics of the communities and families being targeted by the project? What healthy marriage programs or services are being offered (duration, frequency, curricula used, settings)?

D. Mission of Healthy Marriage Project

Discussion

What is your HMI ultimately hoping to accomplish? For example: “To help low-income married couples maintain and strengthen their marriage.” Or: “To promote the emotional and financial well-being of all families and children through the delivery and coordination of faith-based and community initiatives that support healthy relationships, marriages and responsible fatherhood.”

E. Scope and Purpose of Protocol

Discussion

What role is the protocol meant to play within the healthy marriage initiative? For example: “This protocol is designed to ensure that domestic violence issues within families targeted by (name of project) are safely, routinely and consistently identified and appropriately addressed and that adequate supports and safeguards are in place for families dealing with domestic violence.”

F. Underlying Principles and Shared Values

Discussion

This section of the protocol – and the discussion among partners that it prompts – can be very helpful in identifying shared principles and values and building trust between those working in the healthy marriage, responsible fatherhood, and domestic violence fields. It asks a simple but important question: What are the shared values that guide your work together?

Some examples of value statements from other HMI DV Protocols include:

- We recognize that domestic violence is a complex problem and that physical and emotional abuse is a serious obstacle to stable and healthy relationships. An important message to convey in all aspects of this initiative is that individuals involved in healthy relationships do not engage in violent, abusive, or coercive behavior.*
- All healthy marriage activities and programs will be provided in a manner that does not compromise the safety of any family member.*
- In promoting healthy marriage and responsible fatherhood, care will be taken not to disparage or compromise the efforts and successes of single parents.*
- We recognize the diversity of the _____ community and the importance of providing culturally sensitive approaches to supporting the development of healthy relationships and families.*

G. Definition of Domestic Violence

Discussion

It is important for each HMI to define how domestic violence is defined for purposes of its DV Protocol. The term “domestic violence” and related terms such as “intimate partner violence,” are often defined in different ways. To be clear, a common understanding of what constitutes domestic violence should be built among the project partners and reflected in the DV Protocol.

For example, from one HMI DV Protocol: “For the purposes of this initiative, the term “domestic violence” describes a pattern of abuse and coercive behaviors, including physical, sexual, and psychological abuse as well as economic coercion used against an intimate partner. Domestic violence often involves the use of a combination of tactics aimed at establishing control of one partner over the other.”

You might also want to include some indicators of the prevalence of domestic violence in the community targeted by the initiative and statements reflecting the community’s commitment to address it.

H. Providing Safe Opportunities to Disclose: Screening and Assessment for Domestic Violence

Discussion

The decision to disclose domestic violence is a difficult one for many domestic violence victims. Survivors have identified a number of important factors that affect their decision to tell someone about the abuse they are experiencing (see attached discussion on disclosure issues). Domestic violence victims are more likely to disclose abuse when they:

- *Perceive that the individual asking is actively listening and truly concerned;*
- *Understand the reason that they are being asked about domestic violence; and*
- *Feel assured that the disclosure will not be reported back to the abuser or make their situation more complicated or dangerous.*

The following components of the Blueprint identify key areas for consideration by HMIs as they describe how domestic violence issues will be identified and addressed when disclosed or detected.

- 1) What information will be provided to all potential participants and how will it assist domestic violence victims decide whether the program will be helpful to them and whether it will be safe for them to participate?**

Discussion

This section of the protocol will be particularly important in instances when individuals can self-refer to a marriage education program offered by the project (i.e., there is no formal referral process that involves screening/assessment). To be most useful to a domestic violence victim, the information provided about the marriage education program, whether written or as part of a group orientation session prior to registration, should:

- *Clearly describe the goals of the program, the course content and its limitations in addressing violent and abusive relationships. The materials should also identify options that might be available at a particular site, such as a mothers only class, that might be a safer option for a domestic violence victim.*

- *Provide information about alternative resources available to address domestic violence issues, such as the local domestic violence hotline or other appropriate helpline. (NOTE: your domestic violence partners can help you craft the right language).*

2) What information will be provided to all referring partners about the HMI program to ensure that appropriate referrals are made?

Discussion

Many HMIs are relying on referrals from community-based organizations or institutions, including from religious leaders, and/ or from public agencies, such as child protective services or welfare. When this is the case, the DV Protocol should describe the steps that will be taken to inform referring partners about the HMI program, including clear statements in all materials describing the HMI program and in any presentations about the program that the HMI is not a domestic violence intervention and that alternative community services exist for those families with current domestic violence issues, as well as what constitutes appropriate and inappropriate referrals.

When referring partners are actively engaged in screening/assessing potential participants for the HMI program, some of the discussions below might also be relevant.

3) How will screening and assessment for domestic violence be approached?

Discussion

In addition to specific screening procedures, it might also be useful to reflect what are known to be “best practices” related to raising issues of domestic violence in these kinds of settings. The following are particularly key and could be reframed as elements of a site’s approach to screening and assessment:

- *Always raise the issue of domestic violence privately so that others, including the perpetrator, will not overhear the conversation. Asking about domestic violence in the presence of the perpetrator, or in a way that alerts the perpetrator to the conversation, can put a victim at risk.*
- *Explain why you are exploring the issue of abuse and tell the individual being screened that they do not have to answer any of the questions being asked.*
- *Provide assurances of confidentiality, with the exception of information that requires mandatory reporting (such as child abuse).*
- *Pay attention to the language of the screening questions and make sure that the terms you are using will be easily understood.*
- *Avoid blaming or judgmental responses.*
- *Do not force an individual to say WHY they are not interested in participating.*

- *Regardless of whether a disclosure of domestic violence occurs, UNIVERSALLY provide information on domestic violence services and support available in the community. (Your domestic violence partners can help you craft the right language.)*

NOTE: A negative response to screening may only indicate that the victim is not comfortable disclosing abuse at this time.

4) Screening and Assessment for Domestic Violence -- How will domestic violence issues be explored with potential HMI participants?

Discussion

HMIs use a variety of intake procedures. This important area of the DV Protocol should describe key procedures related to identifying domestic violence issues in those intake procedures:

- a) Who will be screened for domestic violence and at what point of contact with potential participants?** *For example: "All potential participants in relationship/marriage education activities will be routinely screened for domestic violence, whether signs, symptoms, or behaviors suggesting abuse are present or not, prior to referral to any relationship/marriage education services."*
- b) Who is responsible for screening and assessment for domestic violence within each partner agency or a central intake site?** *For example: "Individuals within partner agencies and organizations responsible for identifying and referring potential participants in healthy marriage activities will explore domestic violence issues prior to referring any participant to the program.. All those involved in screening activities will receive training on domestic violence and the purpose, goals, and programs of (name of project)."*

In projects with multiple partners and more than one referral point, the protocol might include a specific list of those who will play this initial screening role within each of the partnering agencies included in the body of the protocol or as an attachment. The role of each partnering agency should be spelled out in terms of initial and secondary screening that will occur within the agency. The protocol should also identify how and when domestic violence advocates will be involved in the screening and assessment process.

- c) What screening procedures will be used?** *If a screening/assessment instrument is being used to explore domestic violence issues, a copy of the instrument should be attached to the DV Protocol. Alternatively, an actual screening script can be included in the body of the protocol.*

Consider this sample script as an example only, to be fine-tuned to ensure community and cultural sensitivity. Such a script would be most appropriate at a site in which there is not an in-depth intake and intrusive questions about domestic violence would not be appropriate:

- *" (Name of project) is coordinating a broad array of services and activities designed to provide support to families and to strengthen relationships. These include: (specific description of the services offered so that the*

individual understands the context for the domestic violence questions that follow).

- *In order to figure out which programs might be most helpful and because we care about your safety, we are asking everyone these questions about some of the dynamics of your relationship.*
- *Most couples argue from time to time. When you and your partner/spouse argue, do you ever feel afraid?*
- *When your partner is angry, how does he/she act? Does he/she ever get physical and push, grab or hit you? If yes, when was the last time this happened?*
- *Does your partner ever try to control you in a way that makes you uncomfortable, such as controlling who you see or talk to, how you spend your money, what you wear, whether or not you work or go to school?*
- *Is there any reason that you would be uncomfortable participating in a relationship or marriage education program with or your partner (or with the father of your child? (If it is possible for an individual to participate in your program without their partner, explore this option as well.)*

I. Responding to disclosures of abuse

Discussion

When disclosures of domestic violence occur as a result of screening or at any point during participation in a healthy marriage program or activity, an appropriate response must follow. The purpose of screening for domestic violence is two-fold: to ensure that referrals to and participation in marriage and relationship education activities are appropriate, and to identify and provide assistance to abuse victims. This section of the DV Protocol should describe both how decisions related to participation in HMI activities will be made when domestic violence has been disclosed or detected, and how referrals to domestic violence services will be made.

1. CRISIS RESPONSE: What procedures will be used to assess for immediate danger?

Discussion

With your domestic violence program partners, identify the specific steps to be followed to respond to an individual who is in immediate danger – what options should be presented and what steps should be taken to assist the victim to access those options. Include specific contact information necessary for a crisis response (including providing assistance making a call to the emergency domestic violence hotline or the police, arranging for the victim to meet with an advocate, where a victim can most easily receive assistance obtaining a restraining order, etc.)

If abuse is disclosed, there are several key follow-up questions that help assess for immediate danger

- *Are in danger right now? Are you afraid that your partner will hurt you today? Are you afraid to go home? Does the abuse seem to be getting worse?*
- *If yes, do you have somewhere safe to go right now or do you need help finding a safe place?*

- *If no, do you want to talk to someone about all this and help you figure out ways to keep you and your kids safe?*

2. Responding to disclosures of past abuse or current abuse that the victim does not identify as posing an immediate or ongoing risk

Discussion

With your domestic violence program partners, identify the specific steps that will be taken to:

- *Refer a domestic violence victim for support in dealing with domestic violence, whether past or current, including victim support services and batterers intervention services.*
- *Provide a more in-depth assessment for a domestic violence victim who, after receiving a description of course content and limitations, remains interested in participating to improve the quality of a co-parenting relationship or an intact relationship. The goals of this assessment are to ensure informed decision-making and safe participation and should include a full safety assessment and full exploration of options.*

This section of the protocol should also identify any programs or services provided by the healthy marriage initiative (such as gender-specific informational sessions, or relationship skills building sessions that do not require attendance with a partner, etc.) that might be of assistance to domestic violence victims looking to improve the quality of future relationships or to support healthy co-parenting.

3. When will referral to the HMI NOT occur?

Discussion

Some HMIs have elected to specifically identify in their protocol when a referral for marriage or relationship education will NOT occur, so that it is very clear to all parties.

Two examples of such an approach include:

Example 1 (which involves a highly competent set of referral and assessment agencies, well trained by the local domestic violence agency):

- *“Referral to the ____ will NOT occur under the following circumstances: there is a current restraining order against one of the parties; there is a pending court case related to either domestic violence or related family matters; one or both parties express fear of the other party; one party indicates that they are not interested in such a referral to the HM classes; or any other indications of present abusive or controlling behavior in the relationship (such as jumpiness or nervousness around a partner, signs of controlling or abusive behavior by one of the parties, or indications of distress or injury).*
- *In instances in which past abuse is disclosed and the victim remains interested in participating in HM classes to improve the quality of a co-parenting relationship or an intact relationship, a more in-depth assessment, including a full safety assessment and full exploration of options, will be conducted. Such assessments shall include consideration of the recentness of the abuse, whether*

it occurred in a present or past relationship, the types of intervention services provided to both the victim and the perpetrator, the perpetrator's successful completion of a batterer's intervention program or other appropriate response, and other intervening variables. The goal of this assessment will be to ensure informed decision-making and safe participation should a referral be made."

Example 2:

- *"Due to the pilot nature of the project, no individuals disclosing current or past domestic violence will be referred to _____. Instead, they will be provided the following options...."*

J. Maintaining Confidentiality

Discussion

Perpetrators who discover that a victim has told someone about their abuse may retaliate with further threats and violence. For this and other ethical reasons, it is important that information related to disclosures of domestic violence is handled with utmost care and that the privacy and confidentiality of victims receive the highest priority.

This section of the protocol should clearly describe the confidentiality standards (some of which are defined by law or professional standards) that bind information sharing by those who will be involved in domestic violence screening, including governmental agencies, domestic violence programs, health agencies, clergy, and other community-based organizations. To clarify roles and avoid misunderstandings, expectations related to what information will and will not be shared related to domestic violence disclosures should then be described.

K. Cross Training On Healthy Marriage And Domestic Violence Issues

Discussion

In order to effectively implement this protocol, it will be necessary to ensure that those involved in identifying and responding to domestic violence issues and those providing support to domestic violence victims within the context of the Healthy Marriage project receive the necessary training.

This section of the protocol could identify the key partner groups (state/county agencies, domestic violence organizations, health care providers, clergy, and relationship/marriage education program providers) and, for each:

- *the training they will receive to fulfill their roles under these protocols*
- *the training they will provide to assist others in fulfilling their roles.*

The protocol should also clarify how the trainings will be coordinated and the timetable for the training and how often it is scheduled.

L. Review of Protocol

Given the demonstration nature of many of the HM projects, it is also recommended that a 6-month protocol review be built in to allow the project partners to assess implementation strengths and weaknesses and make modifications as necessary.

DISCLOSING DOMESTIC VIOLENCE

The decision to disclose domestic violence is a difficult one for many domestic violence victims. There are many reasons why someone would choose not to talk about abuse they are experiencing.

- **The victim is afraid for their own or their children's safety.** An abuser has made serious threats such as, "If you ever tell anyone, I'll hurt you and the kids." or "I'll make sure you never see the kids again" and has made good on threats in the past.
- **They do not feel safe in your office.** There may be many reasons for this. There may not be enough privacy to talk about the abuse. The process of applying for benefits or services through your office might feel overwhelming. A victim may have had an experience with other systems that were abusive, making them very cautious.
- **A relative or friend of the abuser may work in your office.** The victim may feel that it is too dangerous to reveal the abuse they are experiencing. This is especially true in small rural offices or if the victim has to use a translator who is part of a close-knit immigrant community.
- **They may be afraid of losing her benefits or services if they tells your office staff.** If the process of getting benefits or services is confusing, they may need some time to understand their rights and responsibilities.
- **A victim may have many reasons to believe that talking about the abuse can only make their situation worse.** They may have told a neighbor or friend who didn't believe them or made them feel that the abuse was their fault. They may have confided in a family member who then told the abuser, resulting in a serious injury.

WHAT SUPPORTS DISCLOSURE?

- **Messages that say this is an informed, safe place to disclose.** What does your office/waiting rooms/materials communicate to domestic violence victims about whether this is a safe place to disclose domestic violence?
- **Messages that say that you are an informed, safe person to tell.**
- **A clear understanding of how the information will be used.** This includes understanding how and if the domestic violence information the victim provides will be shared with others in your office or within the community, which is particularly important in rural communities where privacy is harder to maintain.
- **A clear understanding of how the information might affect any decisions you make about their case.** How will the fact that she is or has been victimized by an intimate partner affect eligibility for or access to services and supports in which they might be interested? Are there protections that you can offer that will allow them to participate safely? All of this should be explored in the context of their particular circumstances, concerns, interests, needs and resources.
- **Meaningful assurances of confidentiality and privacy.**