

# Domestic Violence Liaison (DVL) Program Evaluation - Final Report

## Executive Summary

The purpose of the DVL Program is to address the co-occurrence of domestic violence and child welfare concerns by:

1. Ensuring the safety of children and non-offending parents in stable and nurturing homes
2. Providing safety planning counseling with non-offending parent
3. Providing individualized, strengths-based, needs-driven services to children and families
4. Reducing the subsequent reports of domestic violence and/or child abuse and neglect

### What does a DVL do?

#### Direct Services

Assists survivors of domestic violence involved with child welfare system with:

- safety planning
- supports
- linkages to services



#### Indirect Services

Assists child welfare professionals with:

- case assessments
- case planning
- intervention strategies for survivors, children, and perpetrators



#### Facilitates Collaboration

Facilitates collaboration between domestic violence and child welfare systems to:

- develop mutual understanding of roles
- improve communication between systems
- improve outcomes for shared families



### Where are the DVLs located?

All 21 New Jersey counties have at least 1 Domestic Violence Liaison (DVL). DVLs are employed by the lead domestic violence agency and co-located in both the lead domestic violence agency and the county's child welfare offices.



**21 Lead Domestic Violence Agencies**

**46 Division of Child Protection & Permanency local offices**



**31.5 Domestic Violence Liaisons**

To contact a DVL for a particular county, reach out to the county's lead domestic violence agency. Visit the New Jersey Coalition to End Domestic Violence at <http://www.njcedv.org/project/memberprograms/> for the name of the agency and contact information.

# Evaluating the DVL Program - The Methods

## What did we want to know?

1. What organizational and staff level factors facilitate or hinder a successful interagency collaboration?
2. How do organizational and staff factors impact outcomes for families experiencing domestic violence?
3. Does participation in an interagency collaboration model improve safety and other outcomes for families experiencing domestic violence?

## How did we find out?

### Focus Groups

#### 63 participants:

- 5 Groups of child welfare professionals
- 2 Groups of DVLs
- 1 Group of DVL supervisors



### Survey with Professionals

#### 846 professionals:

- 212 domestic violence professionals
- 629 child welfare professionals



### Interviews with Survivors

#### 64 women from 9 NJ counties:

- 47 English-speaking
- 17 Spanish-speaking
- 46% used the DVL
- 54% did not use the DVL



## Data Analysis Utilized

### Focus Groups

- New Jersey's Department of Children and Families and the Office on Domestic Violence Services recruited participants.
- Two researchers facilitated one-hour focus groups.
- Researchers used Nvivo for qualitative analysis.

### Survey with Professionals

- Online survey was distributed to 5,453 child welfare and domestic violence professionals throughout New Jersey.
- Researchers used SPSS for quantitative analysis.
- Results include descriptives and mean values to scale questions

### Interviews with Survivors

- Researchers used flyers, partnerships with agencies, and snowballing to recruit mothers who have survived domestic violence & were involved with the child welfare agency to be interviewed.
- Researchers conducted one-hour face-to-face interviews using online survey tool.
- Researchers used Nvivo for qualitative analysis and SPSS for quantitative analysis.



# Key Findings Related to Collaboration

## Systems Collaborations

Child welfare professionals feel they have a positive working relationship with their local domestic violence partners and perceive them as being willing to collaborate.



Domestic violence professionals on average feel they have a positive working relationship with their local child welfare partners and value the collaboration.

"Face-to-face [contact] and having an individual in the office is [the] strongest strategy for collaboration in agencies"  
-DVL

"Over the years our relationship has improved"  
-Child Welfare

*Based on focus group & survey data*

## Training & Consultation

"How can we be more engaging so that it could be a collaboration? Maybe do [more of a] one-on-one [training] approach and chat with workers about cases through engagement..."  
-Child Welfare

72.7% of child welfare professionals received formal training from their DVL.

However, it was noted many times that the most effective training was in the form of one-on-one consultations.

"We do the case practice form together with the worker, and decide as a team if the DVL needs to meet with the client. We do everything with the worker present."  
-DVL

"[The] DVL meets with our workers one-on-one for a case. The DVL also gives us guidance and one-on-one training."  
-Child Welfare



"...training happens in consultation"  
-DVL

*Based on focus group & survey data*

## Increased Knowledge as a Result of Collaboration



A DVL participant indicated language changes among child welfare staff when describing and documenting domestic violence as a success. Another DVL indicated an increase in child welfare's knowledge of how to look for survivors' protective factors in domestic violence cases as success.



# Key Findings Related to Serving Survivors and Their Children

## Support from DVL

96% of survivors indicated that the support of the DVL helped to keep them and their children safe.

"DVL was a great emotional support and helped me boost my confidence"  
-Survivor

"I felt very comfortable with her [DVL]...I didn't know that dv continues after separation. I felt very supported."  
-Survivor



*Based on survivor interviews*

## Support from CPS

Survivors indicated that emotional support from child welfare was important to them. 76.6% of survivors noted that child welfare had asked whether they had experienced domestic violence by their partner.

"She [child welfare] is really helpful. She keeps motivating me... I feel she understands me and my situation"  
-Survivor

"She [child welfare] helped me to see that if I remained there, it was not going to be well for my kids."  
-Survivor



*Based on survivor interviews*

## Support Through Resources

"The services [child welfare] put in place were very helpful"  
-Survivor

"[The DVL] also connected me to resources and [a] referral to the shelter. She was very helpful."  
-Survivor

"[Child welfare] got me into a program [and] basically I am thankful for my sobriety because of that. I feel like they saved my life"  
-Survivor

"[The DVL] was very helpful educational wise [and] referral wise. She helped me not only with DV but also with housing and other service referrals [when] I need it"  
-Survivor



*Based on survivor interviews*

# Areas for Growth - Roles and Collaboration

## Clarifying the DVL's Role

"...[the] DVL and [child welfare] need to collaborate and identify who is going to be responsible for doing what... [We need] a clear understanding of roles."  
-Child Welfare

"Some workers don't even know who the DVL is"  
-Child Welfare

"Workers sometimes don't understand our role"  
-DVL



There is a disconnect between the goal of the DVL program to increase the capacity of child welfare to identify, assess and intervene with domestic violence cases and the utilization of the DVL primarily as a direct service provider. The type of training child welfare identified as being most useful, modeling and one-on-one training, fits the consultant role of DVLs that is being under-utilized. Therefore, more training and support for DVLs as consultants is needed.

*Based on focus group data*

## Identifying All Forms of Domestic Violence

"... If it was physical they would have known, but it didn't seem that they knew all the [forms of domestic violence]."  
-Survivor

Domestic violence survivors indicated deficits in child welfare's ability to identify domestic violence, particularly when the domestic violence was not physical. Additionally, the survey results showed that domestic violence professionals were more comfortable asking clients about financial abuse, emotional abuse, and stalking compared to child welfare professionals. More training opportunities around screening and identifying domestic violence is needed for child welfare as well as increased opportunities for DVLs to model these skills.



*Based on survivor interviews*

## Improving Communication Between Systems

Both child welfare and DVLs described communication and confidentiality as a significant barrier to collaboration due to the restrictions that confidentiality puts on what can be communicated across parties.

This indicates a need for increased communication regarding shared cases, such as case consultations, as well as more opportunities for child welfare staff and DVLs to engage with survivors together, eliminating the issue of confidentiality that results when confidential contact occurs between the DVL and the survivor or the DCP&P caseworker and the survivor.

A "...major issue to collaboration is limited information that is being shared" -Child Welfare

The goal is for "the [DV] agency and DCP&P [to] talk more rather than going through [the DVL]" [to communicate].  
-DVL

"[We are] having issues with collaboration with DV agencies because of communication..." -Child Welfare

# Areas for Growth - Services

## Improving Contact with Survivors

Child welfare and DVLs both agreed that face-to-face meetings with survivors are ideal, but they described multiple barriers to conducting these meetings primarily centered on lack of access to the offices, to transportation, to childcare, and to the DVL.

Child welfare also expressed a desire for DVLs to participate in more home visits with clients, which would eliminate many of the barriers survivors face to engaging with the DVL.

"Doing face-to-face contact is really difficult... A big issue in my county is transportation. Getting people to the area to speak to me is an issue."  
-DVL



"[the office] is even far from where it's needed—some individuals don't have the ability to get there, they don't take a bus or don't know how to..."  
-Child Welfare

*Based on focus group data*

## Enhancing Resources for Children

Survivors reported that their partner's abusive and controlling behaviors had a negative impact on their children's behaviors, relationships, and emotional well-being.

Further behavioral measures are needed to assess the impact on children as well as increased and improved services for children impacted by domestic violence.

"I felt more services were needed for my children"  
-Survivor

"[The DV agency] could be improved... by helping transition my special needs child. He needed someone to be with him one-on-one if I wanted to go for evenings services."  
-Survivor



"... my child was having an identity crisis and I don't think [child welfare] addressed it on time"  
-Survivor

"[The DV agency] did not take my children's disabilities into consideration"  
-Survivor

*Based on survivor interviews*

## Increasing Resources/Skills to Engage Battersers

Both DVLs and child welfare expressed a desire to have more knowledge on how to effectively work with perpetrators of domestic violence as well as increased services for this population.

"I need training on batterers' services, because they are coming through on referrals, and I don't follow up on it, because it is not what I do."  
-DVL



"...because educating the victim is not enough, [the whole family] needs to be treated...".  
-Child Welfare

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