
Working Across Jurisdictions and Sectors to Build Networks of Effective, Coordinated, Collaborative Responses to Family Violence

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The institutions and various jurisdictions that most commonly address the problems of child maltreatment and domestic violence (child welfare, domestic violence services, and the justice system), tend to operate independently, despite the emerging evidence that these issues often overlap (Beeman, Hagemester & Edleson, 1999; Greenbook National Evaluation Team, 2004; Schechter & Edleson, 1994). In the last decade, community collaborative approaches have been hailed as the ideal in overcoming the isolation and possible harm to families experiencing domestic violence, when the mandates of the various systems are at odds or suggest diverse solutions. However, relatively little has been written about best practices in such collaborative responses or how a community develops a viable cross-jurisdictional approach. Further, what pitfalls should be avoided and have such networks been evaluated?

This document outlines the goals of collaboration, its strengths and challenges. It presents models from the fields of domestic violence, sexual assault and child abuse that inform what a collaborative, cross-jurisdictional approach to assisting those affected by exposure to domestic violence might look like. The document presents several models of community collaborative approaches developed specifically to address how to assist children exposed to domestic violence.

1.0 Models of Community Collaboration

While using collaboration to address issues related to children exposed to domestic violence is relatively new, collaborative responses through coordinated approaches to address intimate partner abuse, sexual assault and child abuse are more common. Community coordinated responses involve multi-agency, cross-jurisdictional efforts to respond in a collaborative and systematic manner to better meet the service and support needs of victims while increasing perpetrator accountability. The agencies and services that are most often involved include: police, prosecutors, crisis services, medical, sexual assault/domestic violence counsellors, specialized victim's advocates, legal/court advocates, and child protection workers in cases involving children (Anderson & McMaken, 1990; Campbell & Ahren, 1998; Faller & Henry, 2000; Jaudes & Martone, 1992). Community coordinated approaches have met with considerable approval and been implemented broadly. Thus, it is advantageous to briefly review how coordinated approaches have been used within these contexts.

1.1 Community Coordinated Approaches to Intimate Partner Abuse

Community coordinated approaches have frequently been proposed to address intimate partner abuse (Shepard & Pence, 1999). In part, this is because victims and perpetrators are frequently involved with multiple systems such as police, courts (whether specialized to address domestic violence or not), health, mental health, and child welfare. Each system has different mandates and the concern is that without coordination, systems could be working at cross-purposes with the unintended negative consequence of compromising the victim's safety.

Since intimate partner abuse is often hidden from public view, most community coordinated approaches have initialized screening protocols with formal systems to identify

victims. Researchers highlight the importance of developing protocols for a broad range of community agencies, not just one sector, such as justice or health (Shepard & Pence, 1999; Weisz, Tolman, & Bennett, 1998). For example, the Calgary Domestic Violence Committee worked with 64 agencies to develop local domestic violence protocols. Evaluations confirmed the utility of both the development process and training necessary to launch such protocols in mainstream (Thurston, Tutty & Eisener, 2003) and in immigrant serving agencies (Tutty, Thurston, Christensen, & Eisener, 2004). Screening protocols have also been developed for health settings such as hospital emergency rooms. Presently, all five Calgary hospitals are using a universal screening protocol with preliminary evaluation showing positive results (Thurston, Tutty, & Eisener, 2004).

Other community coordination efforts focus on the court process, such as Calgary's HomeFront specialized domestic violence docket court. Prosecutors and judges have received specialized training regarding the issues associated with intimate partner violence. Domestic court caseworkers support women through the court process and agreements are in place with local agencies to fast-track men convicted of crimes related to domestic violence into treatment.

The Domestic Abuse Intervention Project (DAIP), implemented in 1980 in Duluth, Minnesota, has become the model for coordinated interagency responses throughout the United States (Shepard & Pence, 1999). DAIP is primarily focused on women victims of domestic abuse and coordinates the efforts of domestic violence serving agencies in a victim-centred approach to intervention. Included in the DAIP are police, 911, prosecutors, sheriff, district bench, probation, public and mental health representation, and the women's shelter. These agencies respond to domestic violence in a coordinated manner according to set protocols whereby each agency can simultaneously operate in a victim-centred manner and meet its philosophical mandate. Weisz's 1999 study of the DAIP found that legal advocates provide essential emotional and informational support to victims of domestic violence and assist more women taking legal action against offenders, including obtaining protective orders and testifying in court. Similar collaborations operate in Santa Barbara, California (Domestic Violence Emergency Response Teams for Zero Tolerance) and Ann Arbor, Michigan (Thelen, 2002).

In Canada, a coordinated approach was developed over twenty years ago in London, Ontario by the London Coordinating Committee to End Woman Abuse with the objective of ensuring that abused women receive consistent responses at each entry point within various service sectors. This formal help network relies on relationships that foster communication, information and resource sharing, accountability, and coordination among the social, medical and justice systems (Grasely, Stickney, Harris, Hutchinson, Greaves, & Boyd, 1999; Luton, 1996).

1.2 Community Coordinated Approaches to Sexual Assault

As early as 1983 Underwood and Fiedler recommended agencies coordinate their efforts to share their expertise and resources in order to respond to sexual assault victims in a timely manner. Campbell and Ahren (1998) assert that the victim's perspective must be a core factor in developing coordinated services. Koss and Harvey (1987) further acknowledged that, "when practitioners 'march on' with their work, unconcerned with the

rape victim's right to know about and choose among alternative procedures, they reinforce her status as victim, ignore her capacity for survival, and undermine her recovery from the trauma of rape" (p. 81). Service providers can even re-victimize sexual assault survivors by blaming them or doubting their experience which increases the likelihood of victims developing post traumatic stress symptoms or having symptoms worsen (Campbell, et al., 1999; Sochting, Fairbrother & Koch, 2004). Gilson (1997) suggests this is unacceptable, commenting that "it is particularly critical to use the knowledge and skills acquired through professional education and practice without re-victimizing women" (p. 11).

Coordinated approaches strive to maintain their focus on victim's needs by streamlining the victim's progression through the disclosure phase, the investigative phase and the treatment phase (Trute, Adkins, & MacDonald, 1994). Campbell and Ahren (1998) assert that coordination of sexual assault services results in "victims [who] are more likely to obtain needed resources and assistance" (p. 1), less fragmentation in services and fewer incidents of re-victimization.

Coordinated responses through Sexual Assault Response Teams (SART) have been introduced to work with sexual assault victims. SARTs are composed of representatives from law enforcement, sexual assault centres, the courts, and medical system (Campbell & Ahrens, 1998). Each of these service providers go directly to the victim thus lessening the burden of seeking out the various services (Campbell & Ahrens, 1998). Sexual Assault Nurse Examiners (SANE) are used extensively in the United States to conduct the medical examinations (Ahrens., Campbell, Wasco, Aponte, & Grubst (2001); Campbell & Ahrens, 1998). Although not common in Canada, a SANE training program was instituted in Toronto in 1995 (Ontario Network of Sexual Assault Care and Treatment Centres, 2002). The first Alberta SANE team was launched in Edmonton (trained by the local sexual assault centre) (Tutty, Cavicchi, & Nixon, 2003). Current services in Calgary also represent a community coordinated response

Koss and Harvey (1987) propose five essential dimensions in assessing the effectiveness of a coordinated interagency rape response: availability; accessibility; quantity; quality; and legitimacy. *Availability* refers to the actual resources that exist in a community and draws light to the community's commitment to the crisis of rape. *Accessibility* means that victims can easily obtain services at any time of the day (i.e. 24 hour crisis line or hospital emergency room) with consideration for diversity issues. *Quantity* ensures that the community has an appropriate number of services and staff available to meet the needs of the population. *Quality* infers that the available services are victim-centred and knowledgeable of the factors involved in the trauma of sexual assault. *Legitimacy* refers to the degree of value granted to services by reputable primary systems, as well as the level of promotion of such services in the community. Research on coordinated approaches for sexual assault victims confirms that it decreases the number of interviews for victims, increases successful prosecution and improves communication between agencies involved in sexual assault cases (Anderson & McMaken, 1990; Moriarty & Earle, 1999). These dimensions are likewise essential for community-coordinated responses to address other populations such as children exposed to domestic violence.

1.3 Coordinated Approaches for Child Abuse and Advocacy Centres

Coordinated approaches have also been developed to address the needs of children who have been abused; with sexual abuse the most frequent focus. The Manitoba Rural Child Abuse Project, for example, is a collaborative network between systems and services to aid sexual abuse victims and their non-offending family members, which has resulted in a reduction of system-induced trauma to children who had been sexually abused and their non-offending family members (Trute, et al., 1994). The York Region Abuse Program, another Canadian coordinated approach, addresses the needs of victims, non-offending family members and offenders of child sexual abuse (Harper, 1990).

Child protection workers in Newfoundland and Labrador devised their own approach for working with vulnerable children since some of the strategies designed for more populous communities were not working well in rural centres (Crocker, 1996). Child protection staff reported that, while multidisciplinary teams generally were effective, the resources and services were limited. In addition, local community members seemed to mistrust professionals and were hesitant to talk with professionals about child abuse issues. "Professionals may not come from the community in which they work, and turnover in some agencies is quite high. Therefore, the community may view the professionals as outsiders whose interests lie in professional advancement over community needs" (Crocker, 1996, p. 207).

As such, the Newfoundland and Labrador child protection staff split their teams into two tiers. The first tier focused on building ongoing public awareness, education and prevention of child abuse in local communities, as well as offering cross-training for other professionals. Local community members were recruited to become part of the first tier teams.

The inclusion of community members achieves two important goals. Their presence helps create a more trusting relationship between the community and the team. It is also important in maintaining the team. There is a high level of turnover among rural professionals so the community members help maintain a level of consistency in team membership (Crocker, 1996, p. 209).

The second tier consisted of multidisciplinary professional staff who work together on a case by case basis to address the individual needs and circumstances of each child abuse case (Crocker, 1996). Since these rural communities tend to have small populations, victims and perpetrators alike, were often concerned that their confidentiality and anonymity be preserved; therefore, only professionals working directly with that family were involved in the team.

The trend in the United States has been for the continuum of services to evolve from service coordination to integrating the multiple services in one location through Children's Advocacy Centres (CAC). CACs tend to coordinate investigations, provide crisis response, as well as providing in-house access to police officers prosecutors, child protection workers, therapeutic services and referral sources (Anderson & McMaken, 1990; Berliner & Conte, 1995; Henry, 1997; Jaudes & Martone, 1992). While not all advocacy centres provide on-site medical investigations, most have a coordinated arrangement with medical facilities nearby.

Berliner and Conte (1995) noted that in cases of child sexual abuse, “coordination of investigations to reduce unnecessary interviews is virtually universally believed to be desirable” (p. 372). Indeed, a primary goal of CACs is reducing the number of times that a child victim must re-tell her/his story (Anderson & McMaken, 1990; Henry, 1997; Jenson, Jacobson, Unrau & Robinson, 1996; Reichard, 1993). A study of 90 sexually abused youth (aged 9 to 19) who had been through the court, concluded that reducing the number of interviews significantly decreased the level of trauma experienced by the child after disclosure of the abuse (Henry, 1997).

The major method to reduce the number of investigatory interviews by the various systems involved in a child sexual abuse case is videotaping the initial interview (Faller & Henry, 2000). Using video can decrease the need for subsequent interviews with the child victim or can assist professionals to strategize a second interview that would be the least trauma inducing for the victim (Jenson et al., 1996). Videotaping has also led to higher rates of offender confession. Faller and Henry (2000) studied 323 child sexual abuse cases extracted from criminal court and found that in cases in which the offender confessed, 61.9% of the prosecutors possessed videotapes of the child victim interview.

The first CAC opened in Huntsville, Alabama in 1985. Since 1987, the National Children’s Alliance (NCA) in the United States has served as a membership organization that works in a guidance capacity for CACs. The NCA identifies the purpose of CACs as providing “a comprehensive, culturally competent, multidisciplinary team response to allegations of child abuse in a dedicated, child-friendly setting” (Children’s Alliance, 2005, para.1). The guiding principle is to alleviate trauma to child victims and their non-offending family members. There are now over 500 CACs in the United States (Crimes Against Children Research Centre, n.d.).

In Canada, co-locating services to one site is a relatively new phenomenon (Tutty, Cavicchi & Nixon, 2002). Edmonton recently launched the Zebra Child Protection Centre, based upon the American CAC model. St. Catherines, Ontario is presently in the business-planning stage of developing a CAC. In Saskatchewan, Regina and Saskatoon have Children’s Justice Centres (focusing on child abuse) that co-locate child protection and law enforcement, and coordinate with prosecutor’s office, court preparation, victims’ services, counselling and medical services.

As early as 1992, Steele called for more systematic evaluations of CACs, yet few have been conducted. In 1996, Jenson and colleagues published one of the few evaluations of CAC’s. The study of three CACs in Utah, with 294 child participants, evaluated the child’s parents and team member’s satisfaction with the investigative process, as well as the legal and treatment outcomes using pre- and post-test measures. The researchers concluded that the multidisciplinary teams in a hospital-based setting had a positive influence in assisting families and children to acquire needed services. However, they also reported that parental satisfaction decreased between the initial interview and three-month follow-up. Parents reported feeling alone in dealing with their child’s sexual abuse, suggesting the need for further support/contact for parents to assist them in coping with their child’s sexual abuse.

Davison (2002) reported on prosecution rates with respect to the Dallas CAC. While only a minority of the investigated cases were prosecuted, once charged, the rates for carrying forward cases, guilty pleas and conviction rates were high.

The Crimes Against Children Research Centre (n.d) is now completing an evaluation of CACs: “using a quasi-experimental design, data from over 1000 cases of sexual abuse were collected from four CACs and from communities without CACs” (p.1). The complete report is not yet available, but the recently released executive summary highlighted that police were involved in 81% of child sexual abuse investigations conducted through CACs, but in comparison communities, police were involved in only 52% of the investigations. Children who were CAC clients were more likely to receive forensic medical exams (48% compared to 21%) and counselling referrals (60% compared to 22%) than children in the comparison communities. In addition, community leaders and other professional organizations tended to rely on the expertise of CAC staff as consultants and trainers regarding child maltreatment. The summary also notes that “CACs differ dramatically from one another in program design, client and case characteristics, referral patterns, agency involvement, and outcomes. This means that CACs will vary in the ways they are effective” (Crimes Against Children Research Centre, n.d., p. 2). Strong participation from law enforcement and district attorneys’ offices was critical in having a positive impact on justice outcomes. Interestingly, the results also indicated that whether or not children were involved with CACs or comparison communities, most were interviewed only once or twice.

The focus of CACs has led to some debate. Reichard (1993), an American judge, suggested that CACs that focus only on child sexual abuse may be defining themselves too narrowly and that more CACs could follow the example of Marion County, Indianapolis, Illinois, which changed its focus to being a Family Advocacy Centre (FAC) that also addresses domestic abuse. However, in response to Reichard’s suggestion, Williams (1993) raised concerns about broadening the mandate of CACs to include domestic violence as a source of potential conflict of interest. Similarly, Sorenson (1993) suggested that CACs should establish the degree to which they are effective at conducting their first mandate before expanding to service other constituencies.

1.4 Family Advocacy Centres

Few advocacy centres serving adult abuse victims exclusively are available. However, one example is the Phoenix FAC, which focuses on addressing the needs of adult victims of sexual assault and domestic violence (City of Phoenix, 2006). On-site representatives include the police, prosecutors and county attorney’s office, the SANE program, probation, counsellors and advocates from sexual assault and domestic violence centres and the City Manager’s Office. These professionals work together to streamline services for victims through case management, collaborative investigations, conduct medical and forensic exams, advocate for victims in the criminal justice system, and provide counselling for victims and non-offending family members.

The Mesa Center Against Family Violence (CAFV) also serves adult victims of sexual assault and domestic violence (City of Mesa, 2005). CAFV on-site representatives include: police units (domestic violence, sex crimes and child abuse, sex offender notification, and victim’s services), a professional forensic interviewer, child protective

services, forensic paediatric services, SANE program, county attorney's office, city prosecutor's office, adult probation, and sexual assault counselling. These agencies and organizations coordinate services to provide on-site videotaped interviews, forensic medical exams, criminal investigations, victim services, crisis intervention, referrals, victim notification and short-term counselling. An examination of provincial associations of transition houses, emergency shelters and sexual assault centres in Canada led Tutty and colleagues (2003) to conclude that no adult advocacy centres dealing with sexual assault and/or domestic violence had been developed in Canada.

The United States has begun developing advocacy centres for both children and adults. As previously mentioned, the Marion County FAC, initially developed as a CAC in 1990, changed its focus to include the whole family in response to the recognition of the high rates of co-occurrence of child abuse and intimate partner abuse (Reichard, 1993). The Marion County community believed that the CAC could provide better service by addressing the problems of the family as a whole unit, so as not to exclude issues that are interrelated with the child abuse. Since then, the Marion County FAC serves both adult and child victims of domestic violence. Although the centre will address issues of sexual assault, that is not its primary purpose. The police, prosecutor's office, sheriff department, child abuse hotline, IndyCorps (a domestic violence organization), child protective services, and social work interns are all co-located at the FAC. The Marion County FAC provides on-site police investigation, safety planning, videotape of child abuse investigative interviews, and domestic violence court advocates.

2.0 Collaborative Models for Children Exposed to Domestic Violence

Applying collaborative networks for children exposed to domestic violence is a relatively new phenomenon, therefore this section first examines the intent of using such approaches to this population and addresses which service providers may be potential collaborators. Next, two collaborative models are examined greater depth. Edleson's (2006) Graduated System of Care provides an organizational framework for collaborative networks. The second model to be described is the Greenbook Initiative. This is a five-year demonstration project that created collaborative networks to address the co-occurrence of child maltreatment and domestic violence in six American counties (Greenbook National Evaluation Team, 2004).

In creating collaborative models to address children affected by domestic violence, the relevant systems work together to achieve the common goal of increasing safety for children and women while holding the perpetrator accountable for his behaviour. The collaborative approaches presented in this section highlight the need to be sensitive to the range of responses shown by children exposed to domestic violence since many children exhibit varying degrees of emotional or behavioural changes while others do not appear to be affected (Centre for Children and Families in the Justice System, 2004; Edleson, 2006; Jaffe, et al., 2003). Edleson (2006) suggests that the range in children's responses to domestic violence exposure is a function of multiple factors including those related to the violence (frequency, severity, and chronicity) and those related to the child (coping styles, behaviours, and protective or risk factors). This "most likely precludes defining all children exposed to domestic violence as maltreated children" (Edleson, 2006, p. 199; see also Jaffe, et al., 2003). As Edleson notes, "many

children exposed to domestic violence do not fit into current child maltreatment categories and may be better serviced in voluntary, community-based settings” (Edleson, 2006, p. 199; see also Greenbook National Evaluation Team, 2004, Weithorn, 2001).

A collaborative approach assumes that a network of services is available. Thus, the onus is not on the victim or the non-offending parent to find, access or coordinate services as the network provides multiple points of entry and at each point service providers can refer the children and their families to other appropriate services (Berkman, Casey, Berkowitz, & Marans, 2004; Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004).

The intent of collaborative networks is to promote system integration (Greenbook National Evaluation Team, 2004). Such integration is enhanced and supported by collaboration between multiple levels of government, various departments and disciplines (Centre for Children and Families in the Justice System, 2004). At the community level, the opportunity for improved information sharing between agencies and systems reduces the likelihood that families are receiving conflicting legal orders or information regarding priorities (Greenbook National Evaluation Team, 2004). Networks may reduce the risk of traumatization by decreasing the number of professionals to whom children must disclose their experiences (Centre for Children and Families in the Justice System, 2004). Yet, the networks need to be responsive so that offered services can be tailored to the individual needs of each client (Jaffe, et al., 2003; National Council of Juvenile and Family Court Judges, 2004).

2.1 Potential Collaborators

Generally, collaborative networks to address children exposed to domestic violence include three key stakeholders: child protection services, domestic violence agencies (particularly shelters), and the justice system (Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004). In addition, researchers suggest other collaborative partners include those who, “are in positions to assist in the early identification of children exposed to domestic violence” (Centre for Children and Families in the Justice System, 2004, p. 27).

Thus, depending on community-specific needs and available services, collaborators may include teachers, day care providers, clergy, mental health and/or health care providers (Centre for Children and Families in the Justice System, 2004; Edleson, 2006; Greenbook National Evaluation Team, 2004). Survivors of intimate partner violence are often included in the collaborative networks since they can represent those who will be most affected by the introduced reforms. (Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004). It may also be helpful to include survivors of different ages because they bring expertise regarding the needs of survivors across the lifespan (Centre for Children and Families in the Justice System, 2004). Former perpetrators of intimate partner abuse are included in some networks (Greenbook National Evaluation Team, 2004).

Daro, Edleson and Pinderhughes (2004) suggest that those agencies and systems involved with youth violence participate in collaborative networks, because adult perpetrators of domestic violence often have histories of performing violent acts as youth,

and histories of being abused. They recommend placing more focus on young people in trouble with the law because earlier intervention may prevent the continuation of violent behaviour as adults (Daro et al., 2004).

The U.S. Women of Color Network suggests that collaborative networks include agencies serving communities of colour to help address the disproportionate number of people of colour involved in the primary systems, and to help address institutionalized racism within these systems (Carter, 2003).

Collaborative models focusing on the co-occurrence of child maltreatment and domestic violence are emerging. The Centre for Children and Families in the Justice System (2004) noted that as a result of round table discussions in Montreal (Table de Concertation en Violence Conjugale de Montréal), a protocol was developed among key stakeholders regarding the needs of children exposed to intimate partner abuse. This protocol, now in the implementation phase, outlines how each stakeholder becomes involved, lines of communication, and referral protocols (Centre for Children and Families in the Justice System, 2004). Further information on the project is not currently available.

Two collaborative models will be examined in greater depth: Edleson's (2006) Graduated System of Care for Children Exposed to Domestic Violence, which specifically examines how collaboration can be applied to children exposed to domestic violence and the Greenbook Initiative, a five year demonstration project dealing the co-occurrence of child maltreatment and domestic violence.

2.2 Edleson's Graduated System of Care for Children Exposed

Edleson (2006) suggested that "it is logical to envision a graduated system of care based on the seriousness of the exposure and its possible impacts on the child" (p. 200). The model he proposes is multifaceted: encompassing prevention, identification, assessment and intervention strategies for children exposed to domestic violence. Edleson designed this theoretical model after contacting staff from various programs, including some Greenbook demonstration sites.

The prevention component of the model has as its premise that increased public awareness can help change norms and beliefs in the community and assist in the identifying children who are being exposed to domestic violence, thus aiding in the mobilization of informal and formal support systems.

The identification component of the model encompasses both formal and informal sources. Edleson (2006) notes that those who play key roles in identifying children who are exposed to domestic violence are often those in the abused woman's informal support system: family and friends. Formal networks in children's lives including daycare workers, teachers or other staff within the school system, health care professionals, faith leaders, police, and outreach workers have key roles in identifying those children exposed to domestic violence. When children can be identified from so many different sources, the first responders need to have some clear ideas on which agencies are appropriate referrals. Unfortunately, as Edleson (2006) points out, what defines 'appropriate' can draw heated debate.

In the assessment phase of the graduated care system, children exposed to domestic violence could go into one of two different streams: child witness or child protection, depending on the risk for harm (Edleson, 2006). Children who are not in imminent risk could enter the “child witness” stream. Depending on the child’s needs, she/he could be referred to informal networks for support, and/or community resources such as CACs, family resource centres, or battered women’s shelters that offer programs for children exposed to domestic violence. Faith-based centres or immigrant serving agencies may also offer support to children.

Edleson suggests that children more seriously affected by their exposure to domestic violence would enter into the child protection system which could include the dependency court system. In Canada, the parallel is the family court system, which provides legal structures to protect the children through custody, visitation, or apprehension orders.

A graduated system of care includes intervention for battered women such as “income and housing assistance, subsidized child care, job training, and relocation assistance” (Edleson, 2006, p. 204). Women can also protect their safety and the safety of their children through supervised visitation centres (Edleson, 2006; Tutty, Barry, Weaver-Dunlop, Barlow, & Roy, 2006).

Edleson notes that a graduated system of care will be different in each community; it will vary according to the key stakeholders and services available in that specific area. He highlights that in order for such a system to work there must be funding support for programs helping children exposed to domestic violence. In some cases, this may mean implementing new services; in others, it will mean providing the funding for expanding existing services to incorporate the influx of children.

2.3 The Greenbook Initiative

The Greenbook Initiative, beginning in 2001, is a five-year federally funded demonstration project in the United States to provide a framework for collaboration between systems serving families that are experiencing child maltreatment and domestic violence (Greenbook National Evaluation Team, 2004; 2005). Federal funding is provided for collaboration and reform in child protection services, domestic violence agencies, and dependency courts (i.e. family court), yet excludes funding for collaborative reforms in treatment programs for abusive men and police departments. The funding includes monies for evaluation throughout the duration of the project.

The aim of the project is to form collaborative networks that improve “the safety, accountability, and advocacy for all family members, including victims and perpetrators alike” (Greenbook National Evaluation Team, 2004, p. 9). This initiative encompasses all forms of child maltreatment such as children who are exposed to intimate partner violence as well as those children who are being abused by a perpetrator who is also abusing their non-offending parent.

The Greenbook project is complex, involving the development of collaborative networks and system reform in six demonstration sites: El Paso County, Colorado; Grafton County, New Hampshire; Lane County, Oregon; San Francisco County, California; Santa Clara County, California; St. Louis County, Missouri. The following

narrative outlines some of the aims and experiences of the participants in developing collaborative system reforms. At the time of writing, the project has not run to completion, thus the information in this section describes the organizational structure of the collaborative network, the planning phase of the collaborators' work and early implementation of system reforms. A more detailed account of these issues and the collaborators' experiences are contained in Appendix A.

The six sites "established and organized interdisciplinary collaborations to plan, implement and oversee systems-change activities" (Greenbook National Evaluation Team, 2004, p. 21). To facilitate this process each of the sites established a hierarchical organizational structure of three tiers to guide their work. The first tier is the executive committee, which is responsible for hiring local Greenbook staff and overseeing the initiative's progress. The second tier is an advisory board consisting of local stakeholder agencies. And the third tier consists of working groups that address specific issues and topics.

In addition, all six sites have access to the National Technical Assistance Team which is available to offer support, facilitate communication, assist in conducting needs assessments and develop strategic plans (Greenbook National Evaluation Team, 2004). The sites also have access to the National Evaluation Team to help collaborators document their plans, process and progress. Through these teams, each site has access to the wisdom and experiences of the other sites. The National Technical Assistance Team also provided opportunities for yearly meetings between collaborators in all six sites.

The experiences of the collaborators highlight the importance of participants in all three hierarchical organizational tiers sharing a vision regarding the network (Greenbook National Evaluation Team, 2004). The participants represent various agencies and systems with differing mandates and agendas. The purpose of the collaboration is not to have one voice dominate but that the expertise of each is respected. Decision-making is by consensus. However, the sites found that achieving consensus could be challenging; thus, when needed, collaborators could access National Technical Assistance Team for support and mediation services.

In order to establish successful cross-system networks and reforms, the collaborators needed to develop a more in-depth understanding of one another and working relationships that allowed them to share common goals. Through the planning phase, the interim report identified four themes from Greenbook participants for strengthening the cross-system collaboration (Greenbook National Evaluation Team, 2004). First, the Greenbook participants' stressed that the leadership, both locally and nationally, needed to be neutral and unbiased. Secondly, by helping collaborators organize and develop strategies related to various activities, either by site or by system, the National Technical Assistance Team helped collaborators strengthen their working relationships and institute strategies for reform. Thirdly, the collaborators found that the increased communication between the various systems helped them increase their understanding of other systems, the mandates they worked under, the constraints they faced, and how the differences between systems could influence the networks' shared goals. Collaborators in the six sites used a variety of strategies including cross-system training programs, retreats, presentations, and position papers to help them increase institutional empathy. The experiences of the participants in the Greenbook Initiative

indicate that the differences between systems must be continually revisited. They repeatedly returned to this issue not only during the planning phase but also during the implementation phase. Finally, to ensure that the reform strategies they designed would help clients, “the sites have worked to identify and implement strategies that incorporate evidenced based practices. Best practices were identified through literature reviews, the National Technical Assistance Team, and results of local evaluations” (Greenbook National Evaluation Team, 2004, p. 28)

Collaborators of the Greenbook Initiative have moved from the planning phase to the early implementation of community activities (Greenbook National Evaluation Team, 2004). Collaborators in the six sites of the Greenbook Initiative prioritized their community activities into four areas: identification of co-occurring issues between child maltreatment and domestic violence, information sharing, perpetrator accountability, and improved access to services and improved advocacy as outlined below.

The collaborative networks are focusing on identification of co-occurrence between child maltreatment and domestic violence. Child welfare agencies have concentrated on strengthening their ability to identify issues of domestic violence at intake (Greenbook National Evaluation Team, 2004). Domestic violence service providers have implemented child behaviour checklists as part of their intake procedures (Greenbook National Evaluation Team, 2005). In addition, they are developing guidelines to determine when the children’s circumstances warrant staff reporting to child welfare (Greenbook National Evaluation Team, 2005).

Another major focus for the collaborative networks is to establish new protocols regarding when information should be shared, with whom and under what circumstances (Davies, n.d.; Greenbook National Evaluation Team, 2004). With the goal of sharing of case information across systems more effectively, collaborators aimed to create practices that were “more formal, active, and sensitive to the need for protecting the confidentiality of the adult victim of domestic violence” (Greenbook National Evaluation Team, 2004, p. 50).

Developing the frameworks for information sharing is a complex task (Davies, n.d.). Davies noted that collaborators have to consider the laws in their state regarding information sharing, whether any conversations are considered privileged, as well as the impact of legally required disclosures such as mandated reporting, subpoenas, and police investigations. Collaborators need to consider not only the current policies of the various systems and agencies but also how frontline workers have implemented these policies, and how policies and procedures might be changed to be more effective (Davies, n.d.). In addition, collaborators need to consider the possible consequences for women and children when systems are sharing information. The National Technical Assistance Team helped sites establish new guidelines regarding information sharing (Greenbook National Evaluation Team, 2004). For example, a draft of Grafton County’s guidelines for cross-system information sharing indicates that staff need to consider if the information being shared will assist family members or create greater safety risks; that domestic violence service providers as well as staff at the local sexual assault centre will inform victims that they have the right to request that their information is kept confidential and that all primary “partners will assist victims with safety planning for themselves and their

children, as well as explore the possible outcomes of the information being shared” (Greenbook National Evaluation Team, 2004, p. 56).

The most activity towards increasing perpetrator accountability has been in the justice and child welfare systems. Within the justice system, sites in the Greenbook Initiative have created specialized court positions that are intended to improve accountability of the perpetrator, and reduce victim blaming towards the non-offending parent (Greenbook National Evaluation Team, 2004, 2005; National Council of Juvenile and Family Court Judges, 2004). In congruence with research findings that indicate perpetrators are more likely to comply when the court is monitoring them, two Greenbook Initiative sites established monitoring programs for men convicted of crimes related to domestic violence (Greenbook National Evaluation Team, 2004; National Council of Juvenile and Family Court Judges, 2004).

Child welfare agencies in the six demonstration sites are focusing on the perpetrator’s behaviour when they are performing assessments regarding risk (Greenbook National Evaluation Team, 2005). They are also examining protective factors and including the men in the case plans. Some sites have also hired Batterer’s Advocates to act as resources to their own staff and to the men; other child welfare agencies have hired staff to address the men’s parenting skills. One site has co-located probation and parole advocates in their child welfare offices to enhance communication regarding shared cases between the two systems. In addition, staff at this site state that their safety is enhanced because they conduct joint home visits with the perpetrators.

Finally, to improve services and advocacy, Greenbook activities have centred on changing how the systems’ relate to one another and how direct service staff work with their clients. “These family-level responses promoted family safety and well-being by holding batterers accountable, keeping children with non-offending parents, and helping families to negotiate other systems” (Greenbook National Evaluation Team, 2004, p. 95). To facilitate this change, staff attended cross-training opportunities, agency documents were rewritten to avoid blaming the victim for the perpetrator’s abusive behaviour, multidisciplinary case planning was utilized, and new service positions in both the courts and child welfare agencies were created.

3.0 Benefits of Collaboration for Children Exposed to Domestic Violence

A number of benefits of collaboration for children exposed to domestic violence have been suggested. The benefits include outcomes with respect to children, families, perpetrators and systems.

Considering children, collaboration increases the likelihood of early identification of children who have been exposed to domestic violence, which enhances the likelihood of more immediate referral and intervention for children experiencing traumatic reactions (Centre for Children and Families in the Justice System, 2004).

Collaborative networks can also reduce the risk of re-traumatizing children by decreasing the number of people involved in the child’s case and minimizing the number of forensic interviews’ she/he undergoes (Centre for Children and Families in the Justice System, 2004).

Shared information may allow judges to make more informed decisions regarding placement and custody of children in view of level of risk a perpetrator poses to the children and/or their mother (Greenbook National Evaluation Team, 2004; Shaffer & Bala, 2004; Weithorn, 2001).

With respect to families, through creating a multipoint access, it is less likely that victims, their children and perpetrators will 'get lost' in the system (Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004). Integrating services means that all family members and their needs are recognized, rather than focusing on single issues or family members (Greenbook National Evaluation Team, 2004).

Considering the offenders of domestic abuse, a significant premise of collaboration is holding perpetrators accountable (Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004). Collaborative networks can also track and monitor abusive men's behaviour and their progress towards a non-violent lifestyle.

Collaboration may also have a positive impact on the effectiveness of treatment programs for perpetrators. For example, when programs for abusive men are part of a collaborative network they are more likely to incorporate issues regarding child development and parenting issues in their treatment curricula (Greenbook National Evaluation Team, 2004). For example, not only does the YWCA Calgary Sherriff King Home offer men's treatment, they also offer a program for fathers.

In regards to the systems that address domestic violence, collaborative networks allow the various stakeholders to develop and use interagency protocols which clarify each system's roles, when referrals should be made to other services, clarifies how information is shared, under what circumstances and defines when consultation is appropriate (Centre for Children and Families in the Justice System, 2004; Davies, n.d.; Greenbook National Evaluation Team, 2004; Jaffe, et al., 2003; Weithorn, 2001).

In many communities, mandatory reporting requirements have overwhelmed child welfare services, collaboration may be able to help communities ensure appropriate resources and services are in place (Jaffe, et al., 2003; Weithorn, 2001). Collaborative networks can provide referral services and support outside of the child welfare system.

Collaborative networks are recognizing and responding to the complexity of issues related to intimate partner violence.

The traditional range of services available to a child protection system does not include many of the resources necessary to respond effectively to domestic violence. Domestic violence victims and their children need a place of safety where they can reside until the threat of further violence subsides or is neutralized by legal system or other intervention. Domestic violence shelters have served this function for battering victims and their children. And yet, the availability of shelter beds is woefully inadequate to meet the needs of those families who seek them. Shelter stays are crisis-oriented and brief ... Victims require a range of services to help them survive in the community such as "safety planning," vocational counselling and training, transitional housing, medical and mental

health care, assistance in promoting their children's adjustment to school and the community, and legal services to assist them, for example in obtaining civil protective orders and public financial assistance, in addressing divorce and child custody issues, and so on (Weithorn, 2001, p. 139-140).

Collaboration promotes communication and coordination between the various systems and services that families may be involved including multiple arms of the court system: criminal court, civil court, and family court regarding custody and access (Weithorn, 2001). These networks also create opportunities for systems to work together and perhaps examine issues that they otherwise wouldn't have the funding or resources to address (Greenbook National Evaluation Team, 2004). For example, in the Greenbook Initiative, services at one site worked together to reduce language barriers and improve the cultural competency within their agencies.

Collaborative networks also provide opportunities for cross-training across systems and disciplines (Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004; Weithorn, 2001). Cross-training describes the process in which a specific system teaches other sectors about their area of expertise. This can deepen each sector's understanding of the roles and responsibilities of other sectors and can then, in turn, assist personnel in responding sensitively and appropriately to the needs of the children who are exposed to domestic violence. Cross-training can also integrate the additional issues often faced by each area's ethno-cultural communities (Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004).

Cross-training can help police officers deal with children when officers are responding to a domestic violence emergency; it can help them talk with children at the scene, and if necessary make appropriate referrals (Berkman et al., 2004; Centre for Children and Families in the Justice System, 2004; Weithorn, 2001). It may also help them feel that they are "contributing to a meaningful community collaboration to reduce violence in future generations" (Centre for Children and Families in the Justice System, 2004, p. 2).

Additionally, cross-training in domestic violence issues can help police officers when they encounter the minority of incidents in which both intimate partners have used physical violence. In many jurisdictions the practice for dealing with such incidents is to dual arrest. "Examination of these cases shows that the use of violence by women can differ dramatically from that used by men, For example, many women use violence against their abusers in attempts to protect themselves from their attackers" (Centre for Children and Families in the Justice System, 2004, p. 23). Thus, cross-training can aid police officers' understanding of intimate partner violence and aid their investigation techniques to examine if the woman was using physical violence in self defence, "to investigate which party, if either is the dominant aggressor, and to avoid arresting both parties where one is clearly more dangerous, more controlling in the incident ... The goal is to reduce the risk of serious harm to others in the family" (Centre for Children and Families in the Justice System, 2004, p. 24). The Centre for Children and Families in the Justice System discuss the concern that without cross-training, the unintended negative consequences of dual charging are more likely to occur. For example, abused women may be more hesitant to contact police. "Charges against the most violent and dangerous

abusers are routinely dropped because their victims are also accused [when they have fought back to defend themselves]. This outcome poses risk to adult victims and may further expose children to domestic violence” (Centre for Children and Families in the Justice System, 2004, p. 23).

Collaboration can benefit the justice system by “enhancing the quality of discovered evidence: for example collaborations between law enforcement, prosecutors and child development specialists to aid with forensic interviewing of children” (Centre for Children and Families in the Justice System, 2004, p. 25; see also Jones, Cross, Walsh, & Simone, 2005).

Collaborative networks are also compatible with community policing models because it increases police officers’ visibility in the community and brings them into contact with community members who may be at risk. For example, community policing in schools brings officers in contact with school children, including those who may be exposed to intimate partner violence (Centre for Children and Families in the Justice System, 2004). Such contact aids in identification of children in need, offering a point of entry and the opportunity for officers to refer children to other agencies for support.

Another benefit is that large systems have the opportunity for intra-system collaboration and training (Greenbook National Evaluation Team, 2004: Weithorn, 2001). Agencies can specifically focus training on how children exposed to domestic violence will be addressed according the mandate and philosophy of their agency. For example, after cross system training regarding children exposed to domestic violence, criminal courts and family courts can use intra-system collaboration to examine how mandatory reporting statutes impact other statutes including criminal law and child custody (Weithorn, 2001; Shaffer & Bala, 2004). Child welfare workers in one site of the Greenbook Initiative used the ideas from cross-training to enhance their own client work by developing “a protocol to increase safety planning with adult victims of domestic violence and to assess the lethality of the batterer” (Greenbook National Evaluation Team, 2004, p. 72).

4.0 Challenges for Collaboration for Children Exposed to Domestic Violence

A number of challenges have been raised for collaboration for children exposed to domestic violence. This section documents barriers including the mandates of different systems, a lack of funding to adequately enhance services to respond to increases in reporting and address children exposed, barriers to identifying children exposed, and sharing information, challenges to cross-training and barriers to marginalized cultural groups because of the dominant cultural discourse.

4.1 Barriers Created by the Mandates of Different Institutions

An overarching challenge with collaboration seems to be that different agencies/systems have different mandates, definitions, philosophies, approaches and strategies to deal with the issues and their clients (Centre for Children and Families in the Justice System, 2004; Greenbook National Evaluation Team, 2004; Schechter & Edleson, 1994). There can be a lack of understanding and institutional empathy between the various systems. Also the experiences of the Greenbook Initiative indicate that collaborators must be willing to ‘buy in’ to the collaborative network (Greenbook

National Evaluation Team, 2004; Jaffe et al., 2003). The various systems need to be able to see that in spite of their differences, there are also philosophies and goals that all the collaborators can share. However, this is not always easy to achieve.

4.2 Lack of Funding

One of the major concerns with respect to legislation that defines exposure to domestic violence as a child protection concern is that additional resources are seldom put into place (Christian, 2002; Edleson, 2006; Jaffe & Crooks, 2004; National Council of Juvenile and Family Court Judges, 2004; Weithorn, 2001). Most child protection services are already working over capacity and realistically, can only respond to the most serious cases, thus more funding is necessary to cope with the increased reporting, investigations, and intervention (Christian, 2002). As previously mentioned, when Minnesota brought in mandatory reporting in 1999, child protection was overwhelmed with reports. “The Minnesota Association of County Social Service Administrators estimated that counties would need \$30 million per year in additional resources to respond to these reports” (Christian, 2002, p. 4). Other services are also impacted. For example, if a judge wishes to increase the safety of a domestic violence victim and her children by ordering supervised visits, supervised visitation centres need to be available and funded (Jaffe & Crooks, 2004).

Additionally, most domestic violence programs are crisis oriented (Carter, 2003; Edleson, 2006). There are few long-term services available for women who are living poverty and who wish to leave their abusive partner and even fewer available to women of colour (Carter, 2003). There is little support available for families who wished to remain together, or those who require services in their first language (Carter, 2003; Kamateros, 2004).

Not only is funding necessary for the provision of direct service, but also to create and maintain the infrastructure needed to create collaborative networks (Christian, 2002; Greenbook National Evaluation Team, 2004; Jaffe, Crooks & Wolfe, 2003; Weithorn, 2001). Lack of funding can make it difficult for services to release staff from their regular duties for the work demanded in collaborative efforts (Greenbook National Evaluation Team, 2004).

4.3 Challenges in Identifying Children Exposed to Domestic Violence

Another issue with collaboration concerns identification. Children who are exposed to domestic violence are often first identified by people outside of formal systems, such as friends and families (Edleson, 2006; Kamateros, 2004). For example, Van Hook’s (2000) study reported that of the 40 battered women who responded to questions about help-seeking indicated that they were most likely to go to friends (65.9%) or family (61.3%) for help; and were less likely to access formal helping services. Only 6.8% of these women had accessed family violence programs for help. Thus when looking at collaboration, “developing these informal networks to better respond to battered women and their children is a major challenge in developing an effective response system” (Edleson, 2006, p. 202; see also Carter, 2003; Kamateros, 2004).

The differing mandates and philosophies of the child protection system, domestic violence service providers, and the justice system create challenges for identifying

children exposed to domestic violence. In the Greenbook Initiative, despite collaborators discussing their differences and establishing policies regarding identification, divisive issues resurfaced as the collaborators attempted to implement these ideas (Greenbook National Evaluation Team, 2004). The concern arose that if the sole focus was identification, not enough attention may be brought to addressing potential unintended consequences (Greenbook National Evaluation Team, 2004; Edleson, 2006). For example, with the emphasis on identifying children who have been exposed to domestic violence an unintended consequence may be that the woman is blamed for her partner's abusive behaviour and be viewed by child welfare workers as failing to protect her children (Edleson, 2006).

A rise in identifying children exposed to domestic violence needs to be matched to greater service availability, otherwise women and children “could be more exposed and vulnerable” (Greenbook National Evaluation Team, 2004. p. 45; see also Carter, 2003; Jaffe, et al., 2003, Weithorn, 2001). Previous to mandatory reporting requirements many of the children exposed to domestic violence would not have been reported to child protection agencies (Edleson, 2006). As more children are being identified the capacity of child protection services are being strained without providing additional resources (Christian, 2002; Edleson, 2006; Weithorn, 2001). Weithorn (2001) suggests a possible solution to overcome this challenge is that concomitant with the introduction of mandatory reporting additional services are developed with the phases of implementation staggered to allow the systems and services time to adjust.

Another collaborative challenge is the “quality of assessments performed on children exposed to domestic violence” (Edleson, 2006, p. 204; see also Shaffer & Bala, 2004). Funding resources need to be available to support assessments (Greenbook National Evaluation Team, 2004) by qualified individuals who aware of not only of the issues involved in the dynamics of domestic violence, but also the “protective factors both parents may represent in a child's life” (Edleson, 2006, p. 204; see also Shaffer & Bala, 2004). To date, there are no specific tools available to measure the impact of exposure and there are questions about what one identifies as the threshold of harm (Edleson, 2006; Greenbook National Evaluation, 2004). These issues have direct impact on collaborators' ability to know when they should refer and to whom.

4.4 Barriers to Information Sharing

Information sharing across systems is perhaps the greatest challenge to collaboration. Collaborators in the Greenbook project stated that “confidentiality and trust are key obstacles that must be addressed every day, particularly between agencies that work with such sensitive issues as family violence” (Greenbook National Evaluation Team, 2004, p. 18).

Differing mandates and philosophies are in forefront and are the most contentious when collaborators discuss information sharing because the decisions regarding this issue can profoundly affect clients. For example, the requirement for mandatory reporting is often a barrier to successful collaboration particularly for domestic violence service providers (Beeman, et al., 1999; Greenbook National Evaluation Team, 2004). The Greenbook Initiative found that even though four of the six sites were situated in states that had mandatory reporting requirements, data gathered at the beginning of the project

indicates that there was not a high level of reporting. “This suggests a distrust of the child protection system (that historically has been seen as blaming adult victims) rather than a lack of concern for child safety and well-being—or maybe a different conception of well being ... In addition, if child exposure to domestic violence can be construed as maltreatment in some cases, what is the threshold for deciding when it is” (Greenbook National Evaluation Team, 2004, p. 66).

Another challenge is that within many systems and services is an underlying assumption that domestic violence victims are safer when they leave their abusive partners. Yet research shows that when a woman leaves her abusive partner, the man’s level of violence tends to escalate, thus increasing the risk that he’ll seriously harm or even murder her; in addition, the man “may threaten to take the children through legal or illegal means” (Weithorn, 2001, p. 141). Collaborative networks need to be informed by this data. For example, in the family court system, judges need to be aware that granting a perpetrator unsupervised visits with his children often increases the risk to both the woman and children since this decision gives him frequent access to them (Jaffe & Crooks, 2004; Jaffe, et al., 2003; Weithorn, 2001).

4.5 Challenges to Cross-training

Another barrier to collaboration is the level of cross system training and expertise needed. For example, consider what is needed for judges to take children’s exposure to domestic violence into account in a child custody case.

Judges need to be trained to understand batterers, victims, and children exposed to domestic violence, and the interplay between domestic violence dynamics and the demands of court proceedings. The judge’s ability to make appropriate decisions will depend on well-trained family law lawyers, mediators, child custody evaluators, and divorce-education providers so that cases are properly screened and accurately portrayed to the court. Even after a good decision, the court will depend on qualified service providers to offer families supervised visitation programs, batterer’s intervention, victim-counselling services, and interventions for children traumatized from exposure to violence to make the decision a reality ... Failure by any of the aforementioned parties to address domestic violence can lead to empowering the batterer to intentionally use the system to continue exerting control over his partner (Jaffe, et al., 2003, p. 210; see also Shaffer & Bala, 2004)

4.6 Barriers Created by the Dominate Culture Perspectives

The experiences of one Greenbook Initiative site highlight a barrier in that collaborative networks often uphold the views of the dominant culture (National Council of Juvenile and Family Court Judges, 2004). In this particular community, collaborators noted that people of colour were disproportionately represented as clients within child protection, domestic violence and justice systems. Concern about this influenced the network to perform a study; the results indicated that “increasing collaboration among systems might, in fact, exacerbate the problem” (National Council of Juvenile and Family Court Judges, 2004, p. 4). The National Council of Juvenile and Family Court Judges, (2004) did not provide further details about these findings.

The experiences of this site are not unique. The U.S. National Clearinghouse on Child Abuse, cited in Carter (2003) noted that children of colour are disproportionately removed from their homes and placed in child care. In addition, many battered women stated that when they engaged with systems, they often faced institutionalized racism and discrimination.

5.0 The Role of Evaluation and Research

“The new paradigm begins with an understanding that the safety and well-being of a child and her nonabusive parent are linked” (Weithorn, 2001, p. 153). Collaborative efforts across systems are trying to recognize and implement policies and procedures that will increase the safety of both. Yet to understand how they are working requires evaluation (Centre for Children and Families in the Justice System, 2004; Daro, et al., 2004; Edleson, 2006; Greenbook National Evaluation Team, 2004; Jaffe & Crooks, 2004; MacMillan & Wathen, 2005; Smith et al., 2005; Weithorn, 2001).

For example, evaluating mandatory reporting for children exposed to domestic violence can let policy makers and officials know whether implementation of the statute is working as intended, how frontline services are using the law, if unintended negative consequences are occurring, and the impact the statute is having on the government’s budget (Jaffe & Crooks, 2004; Jaffe, et al., 2003; Weithorn, 2001). “From a practical standpoint, in an era of tight funding, it may become increasingly important to justify the benefits of particular programs and policies in order to insure their continuation” (Weithorn, 2001, p. 146).

A better definition of ‘children exposed to domestic violence’ is needed (Edleson, 2006; Weithorn, 2001). Edleson (2006) notes that researchers have suggested that “the number of exposed children depends in part on how domestic violence is defined” (p. 206). Some believe that the definition should include violence between any intimate adult partners; others feel it should be gender specific—violence against women (Edleson, 2006). Some researchers want the risk to harm to focus on the perpetrator’s use of physical assaults, while others believe verbal, emotional and psychological abuse should be included (Edleson, 2006). Another possible approach is to focus on the most serious criminal offences “such as murder, attempted murder, aggravated assault, or sexual assault, is sufficient to trigger child protective services involvement, whereas repeated exposure is necessary in order to trigger such involvement in lesser assault crimes, or for conduct that has not resulted in physical injury” (Weithorn, 2001 p. 134). It is important to examine and evaluate how the definition impacts the justice system, child welfare system, and domestic violence sector.

There is also a need to evaluate the collaborative networks responses to children’s exposure to domestic violence (Weithorn, 2001). Such an evaluation needs to explicitly define the assumptions the group is working from since that often defines the approach that is used, the interventions strategies that are utilized, and the outcomes attained (Centre for Children and Families in the Justice System, 2004; Edleson, 2006). It is also important to document the responses of local community services and systems to the changes because these reactions influence implementation and outcome not only within the system but also for clients (Edleson, 2006).

Finally, researchers immersed in various sectors of domestic violence research, (such as child abuse, youth violence, sexual assault and/or sexual abuse, intimate partner violence) could also benefit from collaboration across fields of study (Daro, et al., 2004; MacMillan & Wathen, 2005). Certainly, such research could aid policy makers, service providers and systems as they are searching for solutions to the complex and often inter-related issues to family violence.

6.0 Considerations for Collaborative Networks for Children Exposed

This literature review presents a number of views, contrasting ideas, and raises questions concerning the development and implementation of collaborative networks for children exposed to domestic violence. The purpose of this section is to highlight some of these dilemmas and to raise associated questions.

Perhaps, the most basic dilemma is how one defines ‘children exposed to domestic violence’ (Edleson, 2006; Weithorn, 2001). As Edleson (2006) commented, the definition potentially influences the numbers of children who are identified. Would the differing philosophies and mandates of the three primary systems (justice, domestic violence, and child protection) influence which children are identified as in need? Is it important to examine and evaluate how various definitions may impact the various systems? What are the intended and unintended consequences on each system? Who would be responsible for identifying these consequences? To whom are the consequences reported?

Once these children are identified who is responsible for the initial assessment? Without a comprehensive tool to measure the impact of children’s exposure to domestic violence, (Edleson, 2006; Weithorn, 2001) how can service providers confidently assess children in need? These questions impact collaborative networks because they influence which agencies are involved in the assessment and to whom children are referred. The definition also influences the services involved, the identified priorities, and the protocols designed between member agencies of the collaborative network.

The information in this literature review indicates that collaborative networks must be designed according to the needs of each specific community. While Koss and Harvey (1987) suggested there are five essential dimensions for assessing the effectiveness of a coordinated interagency rape response, could these dimensions be used to help communities design collaborative networks for children who are exposed to domestic violence? Again, the five dimensions are: availability; accessibility; quantity; quality; and legitimacy. At the same time, this raises the question of who is responsible for initiating the collaborative network. What do community service providers do if they discover gaps in services? And if ongoing collaborative networks want to evaluate their effectiveness, how do they do that? Again who is responsible? From where does one obtain the funding?

When establishing a collaborative network, who are the key community stakeholders? It seems logical that the services represented will have an impact on the nature of the collaborative network and the completed work. For example, the Greenbook Initiative did not include police or services for perpetrators as primary stakeholders, but others identify them as key stakeholders. Still others have suggested that youth violence

workers and communities of colour should be included as primary stakeholders (Carter, 2003; Centre for Children and Families in the Justice System, 2004; Daro, et al., 2004). One dilemma is how narrow or how inclusive to be in forming the network; too narrow and essential services and viewpoints could be lost, but if the network is too broad, the concern is that the process becomes unwieldy (Daro, et al., 2004). What are the implications for a network regarding the invited collaborators? Are there unintended negative consequences in limiting the network to these collaborators?

Several authors have commented that people of colour are frequently disproportionately represented as clients in the domestic violence, child welfare and justice systems (Carter, 2003; Greenbook National Evaluation Team, 2004). Carter (2003) suggests that collaborative networks could benefit from exploring “what might these collaborations look like, if they were effectively working with battered and assaulted women from communities of color?” (p.3). Who should the community collaborative partners be? How can the collaborative network best meet the needs of clients who are not from the dominant culture? What about those who have immigrated? What about women who have been sponsored? What about clients who speak neither French nor English?

The intent of collaborative networks is to promote system integration. The experiences from the collaborators in the Greenbook Initiative indicate that a shared vision of their goal was an important element in establishing their networks. For example, a common goal of collaborative networks for children exposed to domestic violence is to increase the safety for women and children while holding the perpetrator accountable for his behaviour. The challenge, it seems, becomes how collaborative networks operationalize this intent given the differing philosophies, and mandates in their individual sectors.

Representatives from the Greenbook National Evaluation Team (2004) suggested that clear communication between systems was a key element in establishing their networks. Decisions were made when collaborators reached consensus. Researchers emphasize that the voice of one system must not dominate, but that the decisions are neutral: respecting and balancing the views of all three sectors. However, for collaborators within the Greenbook Initiative, this could be a difficult process; for example, the National Evaluation Team differentiated between conflicts and fighting. According to their definition, fighting occurred when the participant’s objective was to win and be right. Collaborators with the Greenbook Initiative could access support from the National Technical Assistance Team if/when these situations arose. These points highlight the importance of respectful, balanced decisions from collaborators and the dilemmas that can arise if a team member is not willing to respect or honour the views of other participants or sectors. What happens if one collaborator or a group of participants dominate the network? Collaborative networks generally do not have access to the kinds of resources available to the Greenbook participants. What are the options for other collaborative networks if a team member is not respectful of other members or sectors? To whom do other network members turn? What are the options for members in a collaborative network if one team member is consistently disrespectful? Should there be an overarching body such as the National Technical Assistance Team that could offer support, resources, mediation to collaborative networks? If such a team existed, what

services would actually be offered? How would the team be funded? How would they be accessed? Are there potential unintended negative consequences to such a body?

Another dilemma identified in the literature is related to cross-training and intra-system training within sectors. These training approaches expand the knowledge and institutional empathy of service providers towards other sectors, and increase the expertise with which service providers can address the co-occurring issues of child maltreatment and domestic violence. The challenge is not only finding funding for the training, but how does one identify the key issues? What information does each system see as critical for increasing institutional empathy between sectors? Are there gaps in knowledge across sectors? Are there issues of institutionalized racism? Can cultural competency be increased across and within sectors? How can each system use the new information within their organization?

The literature also emphasized that appropriate services must be available for battered women and children exposed to domestic violence. Yet, most communities found that existing services did not have the personnel to meet the influx of clients; thus services needed either to expand or be created (Christian, 2002; Edleson, 2006; Jaffe, et al., 2003; Weithorn, 2001). How will these services be identified? Where would one obtain the funding? How could services ensure the funding was sustainable?

The literature review also notes that many services for abused women are crisis oriented, but in order for them to establish lives separate from their abusive partner, they need to have access to long-term services, particularly those which meet basic survival needs (Carter, 2003). Are these available? Are they available to women in rural or remote communities? Does the network have a role in determining if they are available, or in advocating for them? If, inadequate, how are funding issues addressed, and by whom?

Jaffe and colleagues (2003) commented that should any one service fail to be available, perpetrators are likely to use that gap as an opportunity to continue exerting control over their partner. What gaps exist between services and/or sectors that perpetrators could potentially use to continue exerting control over their partner and children? How can the various sectors minimize the gaps that perpetrators could use as opportunities to exert control? How do collaborators ensure appropriate services are in place?

Also, the literature review noted that some perpetrators will use cross-system information to gain access to their partners, and/or use the knowledge as an opportunity to exert control. Is there information that sectors need to share to reduce such opportunities for perpetrators? Do service providers need to protect information regarding the women and her children in order to reduce such opportunities for perpetrators?

Research suggests that women are at the greatest risk for serious physical harm or even murder when they leave their abusive partners (Weithorn, 2001). Perpetrators may also try to exert control through access to the children (Weithorn, 2001). How can collaborative networks use these facts to inform their work? Would this have any impact on how collaborators share information? Would service providers approach their work differently if the awareness of these risks were kept at the forefront?

The literature review stressed that another advantage to collaborative networks is that it increases perpetrator accountability. From the reviewed evaluations of the collaborative networks, it seemed that most of the work to date has focused on services for victims. While they are the ones at risk for harm, it makes sense that their needs take priority. However, it might be useful to explore how different agencies and sectors define 'increased accountability.' Does this definition and assorted interventions apply only to men who have been convicted of crimes related to domestic violence or child abuse? What services are available to self-identified perpetrators? Is there a need to increase their accountability? How could it be done? Are there any unintended negative consequences for victims as steps are taken to increase the perpetrator's accountability? How can these issues be addressed in collaborative networks?

In summary, collaborative networks have been hailed as the ideal in overcoming the isolation and possible harm to families experiencing domestic violence, when the mandates of the various systems are at odds or suggest diverse solutions. This document has reviewed how collaborative approaches and networks can be used to address the needs of children exposed to domestic violence. In particular, the two collaborative models presented by Edleson (2006) and the Greenbook Initiative have been highlighted.

The review has also highlighted the benefits and challenges presented by various researchers and scholars. Finally, we have raised questions that may be pertinent to those who are considering collaborative models to address the issues for children exposed to domestic violence, their mother's who are being abused, and the perpetrator. The literature seems to indicate that potential collaborators need to take a thoughtful careful approach to this issue in order to avoid some of the pitfalls and unintended negative consequences other systems and programs have experienced. However, this approach also offers the opportunity to increase the abilities of systems and service providers to work with their clients, whether it is the children, their mother or the perpetrator sensitively, respectfully, and responsibly.

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Appendix A: Greenbook Initiative

The Greenbook Initiative, previously described, is the best developed North American collaborative response to children exposed to domestic violence. Further it is being evaluated. As such, this appendix provides more detail about this complex model outlining in more details some of the aims and experiences of the participants in developing collaborative networks and system reforms in the six demonstration sites (El Paso County, Colorado; Grafton County, New Hampshire; Lane County, Oregon; San Francisco County, California; Santa Clara County, California; St. Louis County, Missouri). At the time of writing, the project has not run to completion, thus the information in this section describes the organizational structure of the collaborative network, the planning phase of the collaborators' work and early implementation of system reforms.

The Greenbook Initiative, beginning in 2001, is a five-year federally funded demonstration project in the United States to provide a framework for collaboration between systems serving families that are experiencing child maltreatment and domestic violence (Greenbook National Evaluation Team, 2004, 2005). Federal funding was provided for collaboration and reform in child protection services, domestic violence agencies, and dependency courts (i.e. family court), yet excludes funding for collaborative reforms in treatment programs for abusive men and police departments. The funding includes monies for evaluation throughout the duration of the project.

The aim of the project is to form collaborative networks that improve “the safety, accountability, and advocacy for all family members, including victims and perpetrators alike” (Greenbook National Evaluation Team, 2004, p. 9). This initiative encompasses all forms of child maltreatment such as children who are exposed to intimate partner violence as well as those children who are being abused by a perpetrator who is also abusing their non-offending parent.

Decision making structures of Greenbook sites and planning phase

The six sites “established and organized interdisciplinary collaborations to plan, implement and oversee systems-change activities” (Greenbook National Evaluation Team, 2004, p. 21). To facilitate this process each of the sites established a hierarchical organizational structure of three tiers to guide their work. The first tier is a small executive committee whose primary responsibility is to make monetary and administrative decisions, as well as ensuring that the project is moving forward by developing policies. The executive committee is also responsible for “hiring and supervising paid Greenbook staff (e.g., the project directors, local research partners, and support staff)” (Greenbook National Evaluation Team, 2004, p. 22). The second tier, the advisory board, consists of community stakeholder agencies working to develop the collaboration between the systems given the needs of their specific community. The third tier consists of workgroups that focus on specific issues. “Sites typically created 4-10 workgroups, organized either by system (e.g., a court or child protective services subcommittee charged with single-system assessment and activities) or by cross-system task (e.g. a cross-training workshops)” (Greenbook National Evaluation Team, 2004, p. 22). Workgroup findings are used to inform collaborative activities.

The six sites also included the views of survivors either individually or in focus group format and one site has included input from formerly abusive men (Greenbook National Evaluation Team, 2004). However, challenges were noted with trying to integrate the survivors into the larger tier structure. For example, judicial ethical standards require that personnel maintain impartiality. Although the perspectives of survivors and former perpetrators are important as they represent those who will be directly affected by collaborative networks their presence conflicted with the justice system's impartiality standard.

Finally, all six sites have access to the National Technical Assistance Team which is available to offer support, facilitate communication, assist in conducting needs assessments, and/or the development of strategic plans (Greenbook National Evaluation Team, 2004). The sites also have access to the National Evaluation Team to help sites document their plans, process and progress. Through these teams, each site has access to the wisdom and experiences of the other sites.

The interim report of the Greenbook Initiative details the collaborators' experiences to date with this organizational structure (Greenbook National Evaluation Team, 2004). These findings highlight that: (a) it is important for the collaborators in all three tiers carry a shared vision of the collaboration; (b) the workgroups were very efficient; and (c) communication between systems is a key element. These three points are detailed below:

(a) All three tiers need the shared vision to ensure consensus regarding direction and policies are reached (Greenbook National Evaluation Team, 2004). For example, it is important that each participant remember that child welfare services, domestic violence services and the judicial system have differing mandates and agendas. The purpose of collaboration is not to have one voice dominate, but that the expertise of each is respected. Prior experience working collaboratively was also noted as influencing the success of building collaborative policies between child welfare, domestic violence service providers and justice (Greenbook National Evaluation Team, 2004).

(b) The Greenbook National Evaluation Team (2004) commented that the workgroups were very efficient because the subcommittees focused on specific issues. However, they noted that there were also challenges. "Some workgroups found that they became bogged down in the nuances or challenges of a particular task" (Greenbook National Evaluation Team, 2004 p. 23). For this reason, it was important to include personnel from the upper two tiers to ensure that communication remained open, and group members remained on the assigned task. At times, outside facilitators were brought in because the views of all collaborators need to be respected and balanced between one another; the perspective of one system must not dominate.

(c) The findings indicate that in this organizational framework, constructive conflict is an essential part of group dynamics (Greenbook National Evaluation Team, 2004). Since the system representatives come from different perspectives it is important that dissenting opinions and views are heard. If key stakeholders feel disrespected or marginalized they could back out of the collaborative process. "Conflicts are distinguished from fights by their goals. In conflicts, participants seek to resolve an issue through interdependency, while in fights participants seek to win and be right.

Constructively, working through a conflict is often a process of information sharing” (Greenbook National Evaluation Team, 2004, p. 25). Ultimately, open communication and information sharing can help build trust as the systems’ understanding of one another broadens. Again, the National Technical Assistance Team provided support and expertise to help resolve fights between collaborators.

In order to establish successful cross-system networks and reforms, the collaborators needed to develop an understanding of one another and establish working relationships that allowed them to share common goals. Through the planning phase, the interim report identified four themes from Greenbook participants for strengthening the cross-system collaboration: (a) the importance of neutral leadership, (b) the importance of access to the National Technical Assistance Team, (c) the need to increase institutional empathy, and (d) any reforms considered by collaborators incorporate evidence based practice (Greenbook National Evaluation Team, 2004).

(a) The Greenbook National Evaluation Team, (2004) again stressed that for successful collaboration, participants needed to view the leadership as neutral. For this reason funding for the initiative comes from an institution not related to child protection, domestic violence or justice. Thus Greenbook staff, including project directors, are paid from an independent funding source. In addition, one site experienced difficulties when Greenbook staff were housed in the local child welfare offices. This created the perception that these staff members were not neutral. The staff subsequently moved to a different location. It is also for this reason, that when workgroups encounter issues regarding group dynamics outside facilitators are used.

(b) Stakeholders reported that the services offered by the National Technical Assistance Team helped them organize and develop strategies related to various activities regarding system reform (Greenbook National Evaluation Team, 2004). Their assistance made it possible for participants across all six sites to meet annually; as well, the National Assistance Team offered system-specific consultations, site visits, site-specific consultations, and site-specific training.

(c) Increasing institutional empathy requires that the expertise each system brings to the network is respected (Greenbook National Evaluation Team, 2004). It ensures that stakeholders can better understand the constraints of other systems, and how the differences between systems can impact their efforts to collaborate on shared goals. Some of the strategies used by the various sites to increase institutional empathy were cross-training programs, retreats, regular presentations, and exchange of position papers. The collaborators’ experiences and comments indicate that this is a process; communication regarding collaboration, differing mandates and philosophies must be continually revisited. Issues must again be raised, and the implications re-examined as collaborators encounter different situations or experiences.

(d) Finally, to ensure that the reforms collaborators designed would help clients, “the sites have worked to identify and implement strategies that incorporate evidenced based practices. Best practices were identified through literature reviews, the National Technical Assistance Team, and results of local evaluations” (Greenbook National Evaluation Team, 2004, p. 28). For example, to examine what was happening within the court system, “one site hired a domestic violence court-case coordinator to look at how

court policies affect outcomes in domestic violence cases” (National Council of Juvenile and Family Court Judges, 2004, p. 3). By knowing the outcomes, the justice system collaborators believed they could more knowledgeably and effectively institute changes in practice.

Early Implementation Phase of Collaborative Activities

Collaborators of the Greenbook Initiative have moved from the planning phase to early implementation of community activities (Greenbook National Evaluation Team, 2004). In the early implementation of community activities the six sites have prioritized their collaborative activities to four areas: identification of co-occurring issues between child maltreatment and domestic violence, information sharing, perpetrator accountability, and improved access to services and advocacy as outlined below.

Identification

Collaborators are focusing on identification of co-occurrence of child maltreatment and domestic violence. Most activity has occurred in child welfare agencies (Greenbook National Evaluation Team, 2004). Historical file review revealed that 23% of child protection files contain families in which the woman is being abused by her intimate partner; and 42% of files indicate a history of domestic violence. The focus of these collaborators has been primarily on promoting active screening for domestic violence at child welfare intake.

When the Interim report was written in 2004, other sectors had not been very active in developing co-occurrence screening protocols. In only two sites, domestic violence service providers were developing screening protocols for child maltreatment. According to the Greenbook National Evaluation Team (2004) it was not clear if the lack of development of these protocols across sites indicated a low priority for this sector or if philosophical concerns were hindering the development. Certainly, in discussions regarding screening for child maltreatment, the domestic violence sector raised concerns regarding “the issue of re-victimization and defining the threshold of what constitutes child maltreatment” (Greenbook National Evaluation Team, 2004 p. 45). However, by June 2005, the domestic violence service providers in the six demonstration sites had implemented child behaviour checklists as part of their intake procedures (Greenbook National Evaluation Team, 2005). They were also developing guidelines to determine when the children’s circumstances warranted staff reporting to child welfare (Greenbook National Evaluation Team, 2005).

The federal initiative also called for collaborators to institute identification of co-occurrence protocols with other direct service agencies that may encounter victims or perpetrators. According to the Greenbook National Evaluation Team (2004) little progress had been made in meeting this requirement.

Information sharing

The focus of information sharing is to establish new protocols regarding when information should be shared, with whom and under what circumstances (Davies, n.d.; Greenbook National Evaluation Team, 2004). Across systems, child welfare and the courts had the most protocols for sharing information already established (Greenbook National Evaluation Team, 2004). However, the information tended to flow unilaterally

from child welfare workers to the court. Most child welfare and domestic violence service providers had previously established systems of information sharing either through client's signed consent forms or memorandums of understanding. Yet, the research team findings indicate that even though these formalized procedures were already established, they have been neither used consistently nor often.

With the goal of sharing of case information across systems more effectively, collaborators aimed to create practices that were "more formal, active, and sensitive to the need for protecting the confidentiality of the adult victim of domestic violence" (Greenbook National Evaluation Team, 2004, p. 50). Developing the frameworks for practice was a complex task (Davies, n.d.). Davies noted that collaborators had to consider the laws in their state regarding information sharing, whether any conversations were considered privileged, as well as the impact of legally required disclosures such as mandated reporting, subpoenas, and police investigations. Collaborators considered not only the current policies of the various systems and agencies but also how frontline workers implemented these policies, and how they might be changed to be more effective (Davies, n.d.). The collaborators considered the possible consequences of sharing information between systems for the woman and her children. For example, if a woman has left her partner and her domestic violence advocate is subpoenaed to court to testify regarding a woman's ability to protect her children, the advocate must also bring the woman's file. Thus through his lawyer, the perpetrator has access to the woman's current location, and her safety plan. The teams had to consider how safeguards could be put in place so that the court could gather evidence while ensuring that their procedures were not compromising safety of the woman and children.

Service providers also examined how policies and procedures within their particular agency could impact women and children as they shared information across systems (Davies, n.d.). For example, domestic violence agencies may require that advocates record brief case notes with the view in mind that if the file is subpoenaed to court, the perpetrator will not have access to detailed information. Yet, if a file is subpoenaed to court, the issue is often in regard to the children. Thus, the notes need to include details of the woman's interaction with her children. However, if the notes have a problem oriented focus, an accurate view of the woman is lacking; her strengths, resilience, the strategies she has used in the past and is currently using to protect her children are not recorded. Such documentation could give the court inaccurate views of the woman's ability to protect her children. Yet, Davies (n.d.) notes, that to include such information may mean agencies change intake, assessment and documentation procedures.

The National Technical Assistance Team helped sites establish new guidelines regarding information sharing. For example, a draft of Grafton County's guidelines for cross-system information sharing indicates that staff need to consider if the information being shared will assist family members or create greater safety risks; that domestic violence service providers as well as staff at the local sexual assault centre will inform victims that they have the right to request that their information is kept confidential and that all primary "partners will assist victims with safety planning for themselves and their children, as well as explore the possible outcomes of the information being shared" (Greenbook National Evaluation Team, 2004, p. 56).

Generally, the courts were not involved in the cross system information sharing. Instead, their focus tended to be on how information in domestic violence cases could be shared intra-court (Greenbook National Evaluation Team, 2004; National Council of Juvenile and Family Court Judges, 2004). For example, clerks can do searches to ensure relevant family and criminal court information is collected. This information “is then forwarded to the appropriate judge and is used to inform such decisions as the terms of a restraining order or mandating a visitation schedule” (Greenbook National Evaluation Team, 2004 p. 52). One site created and implemented a fulltime position to facilitate intra-court information sharing (Greenbook National Evaluation Team, 2004). Yet, this is a difficult process for the courts because “it means balancing the right to due process with the safety of victims” (National Council of Juvenile and Family Court Judges, 2004, p. 6)

Perpetrator Accountability

Even though perpetrator accountability was set as a priority, most activity across sites has been in relation to the creation of specialized court positions that are intended to improve accountability of the perpetrator, and reduce victim blaming towards the non-offending parent (Greenbook National Evaluation Team, 2004, 2005; National Council of Juvenile and Family Court Judges, 2004). In congruence with research findings that indicate perpetrators are more likely to comply when the court is monitoring them, two Greenbook Initiative sites established monitoring programs for men convicted of crimes related to domestic violence (Greenbook National Evaluation Team, 2004; National Council of Juvenile and Family Court Judges, 2004). Preliminary findings indicate that these programs are successful (Greenbook National Evaluation Team, 2005). For example, at one site, during the Compliance Monitor’s first 18 months on the job, completion of court-ordered treatment leapt from 5% to 85% (Greenbook National Evaluation Team, 2005). Compliance Monitors have also acted as resources for perpetrators and as resources for women when they needed to report their partner’s non-compliance towards a court order (Greenbook National Evaluation Team, 2005).

The Greenbook National Evaluation Team reported that by June 2005, child welfare agencies in the six demonstration sites were focusing on the perpetrator’s behaviour when they are performing assessments regarding risk. They were also examining protective factors and including the men in the case plans. Some sites have also hired Batterer’s Advocates to act as resources to their own staff and to the men; other child welfare agencies have hired staff to address the men’s parenting skills. One site has co-located probation and parole advocates in their child welfare offices to enhance communication regarding shared cases between the two systems. In addition, staff at this site state that their safety is enhanced because they conduct joint home visits with the perpetrators.

Access to Services and Advocacy.

In terms of improving services and advocacy, Greenbook activities centred on changing how the systems’ relate to one another and how direct service staff work with their clients. “These family-level responses promoted family safety and well-being by holding batterers accountable, keeping children with non-offending parents, and helping families to negotiate other systems” (Greenbook National Evaluation Team, 2004, p. 95). To facilitate this change, staff attended cross-training opportunities, agency documents

were rewritten to avoid blaming the victim for the perpetrator's abusive behaviour, multidisciplinary case planning was utilized, and new service positions in both the courts and child welfare agencies were created.

All sites have co-located domestic violence advocates in child welfare offices. The advocates are available for case review and to act as resources for child protection staff (Greenbook National Evaluation Team, 2004). As a result of this of this collaboration, child welfare workers have changed how they contact the women, offering them the choice of meeting in a shelter or area offices (National Council of Juvenile and Family Court Judges, 2004). Some workers now attend protection order and criminal proceedings (National Council of Juvenile and Family Court Judges, 2004). In addition, Santa Clara County is piloting a multidisciplinary response consisting of child welfare and domestic violence in conjunction with the police to deal with situations that officers encounter when they have responded to a domestic violence incident in which there are children (Greenbook National Evaluation Team, 2004). Santa Clara County is also in the process of developing an initiative in which a domestic violence advocate will support and advocate for domestic violence victims from the time they enter the family court system throughout the court process (Greenbook National Evaluation Team, 2004).