Social Work with Children Affected by Domestic Violence: An Analysis of Policy and Practice Implications

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Definitive version of this article (for citation) is available at:

http://www.informaworld.com/smpp/content~db=all~content=a903384425

Abstract
The past decade has seen an increasing awareness of the emotional harm to children that can ensue from exposure to domestic violence. This article develops a framework for understanding social work responses, using an analysis of recent developments in British policy as an example. It is argued that to understand what these developments mean in practice we need to develop our analysis of the value perspectives underpinning them. Issues facing those charged with implementing these sometimes ambiguous policy and practice changes are discussed in three levels of intervention: the macro, the intermediate, and the ‘streetlevel.’ The article concludes by calling for closer collaboration between policy makers, practitioners and service users in the co-production of policy.

Over the past decade researchers, activists, practitioners, and policy makers have increasingly developed their awareness of the needs and experiences of children affected by domestic violence. This paper is concerned with the impact of this awareness on social work. It aims to develop a framework with which to analyze policy development and implementation in this field, using Britain as an example. A brief review of the research on emotional and other impacts of domestic violence on children and the co-occurrence of domestic violence with other forms of child maltreatment is given. Following this, a model of different value and theoretical perspectives that may be represented within policy and practice in this area is developed. Using this model, British policy in this area since 1995 is examined. Finally, implementation is considered in three levels of governance identified in a recent review of the literature on implementation theory and research (Hill & Hupe, 2002), drawing out both generic issues and specific factors relevant to these particular polices.

DEFINITIONS AND TERMS
While recognising that the term domestic violence has been subject to criticism (see for example Humphreys, 2000), this paper nonetheless uses this term reflecting common practice in Britain. Humphreys (2000, p. 2) provides a useful definition of domestic violence.

The misuse of power and the exercise of control by one individual over another—generally by men over women—with whom they have been in an intimate relationship. It assumes a wide range of abusive physical, sexual, and psychological behaviours.
As indicated in the above quote, this paper is primarily concerned with the most common constellation of domestic violence, where a man abuses his female partner or ex-partner, and on occasions makes use of gendered language to indicate this. The terms ‘safeguarding children’ and ‘promoting welfare’ are in current use throughout British government guidance. They are used to indicate an integrated understanding of the circumstances and events, including child maltreatment, that may provide a risk of harm to children and the effect that this harm may have on children’s overall development. This is combined with an appreciation of the likely effects of service provision on this development.

Within Britain, social workers responsible for carrying out the duties outlined in the policy documents under examination are primarily based within Social Service Departments located within local government structures, although some may be employed within smaller not-for-profit or voluntary agencies.

RESEARCH INTO CHILDREN AND DOMESTIC VIOLENCE

Concern about domestic violence is global. The World Health Organization (2002) cites a study that brings together population surveys in 48 countries, which indicate that 10-69% of women reported experiencing physical violence from a male partner at some stage in their life. It has been estimated that three million children are affected by domestic violence in any one year in the U.S. (reported in Bancroft & Silverman, 2002). One study from Britain (Mooney, 1994) suggests that as many as many as 1 in 3 women may experience domestic violence at some stage of their life and at least half of these may have children living with them (Mirrlees-Black, 1996). That exposure to domestic violence can emotionally harm children has long been apparent to some workers, particularly within women’s refuges (Kelly, 1994).

Since the ‘discovery’ of physical abuse, subsequent decades have seen increasing awareness of other forms of maltreatment, from sexual abuse to emotional abuse and neglect. Awareness of the significance of domestic violence both as a context for other forms of maltreatment and as a significant cause of distress in itself is a part of this broadening understanding of the welfare and safety needs of children.

However, it was not until the 1980s that researchers began to systematically study specific impacts on children exposed to domestic violence. Much of the initial work was carried out in North America (for example, Jaffe, Wolfe, & Wilson, 1990), though there has been increasing interest in Britain in the past decade. While there have been methodological criticisms of the existing research and some discrepancies in the detail (see discussion in Hester, Pearson, & Harwin, 2000; Mullender & Morley, 1994), it is clear that exposure to domestic violence adversely affects children’s emotional well being in a range of ways. What is also clear is that there is much more to learn about the complex factors that influence children’s experiences of and responses to domestic violence.

Reviews of research (Hester et al., 2000; Kolbo, Blakeley, & Engleman, 1996; Jaffe et al., 1990; Mullender & Morley, 1994) have concluded that exposure to domestic violence can have a range of harmful effects on children. These include somatic symptoms (e.g., asthma or bedwetting, perhaps more
common in younger children), behavioural disturbance including difficulties at school and aggression, and signs of emotional distress, including anxiety and depression (perhaps more characteristic of older children). However, there is no one pattern of response, and impacts will be affected by a range of factors including age, gender, race, and socio-economic status (Hester et al., 2000; Morley & Mullender, 1994). Some protective factors have been identified suggesting that each child’s responses will be influenced by their relationships with their mother, father, siblings, peers, and other significant adults, and their individual characteristics, including personal strengths and survival and sense-making strategies (Jaffe et al., 1990; McGee, 2000; Mullender, Hague, Imam, Kelly, Malos, & Regan, 2002). Further complexities in interpreting the research arise in isolating the different aspects of children’s experiences. Issues to consider here are the length and type of violence children are exposed to, how the domestic violence has impacted on their mother, and whether the child has been abused in their own right in addition to witnessing the abuse (Hester et al., 2000).

Another consistent finding in the literature is an association between all forms of child abuse and domestic violence. This co-occurrence has been found both when researchers examine child abuse cases and when they focus on mothers who have experienced violence (Kelly, 1994). Studies carried out in the U.S. (Bowker, Arbitell, & McFerron, 1988; Stark & Flitcraft, 1988), in Australia (Hiller & Goddard, 1990), and in Britain (Brandon & Lewis, 1996; Farmer & Owen, 1995; Gibbons, Conroy, & Bell, 1995) have found co-occurrence rates of physical abuse of children and domestic violence of between 27-70%. An examination (O’Hara, 1994) of 35 official enquiry reports into child deaths in Britain revealed that many of these children had died as a result of assaults carried out by men who were also physically abusing their mother. This echoes research in the U.S., which found a heightened risk of death for children exposed to domestic violence (reported in Bancroft & Silverman, 2002).


Surprisingly, there has been less explicit focus in the literature on emotional abuse, though in the British studies cited above the children had been referred as a result of a range of causes of concern including emotional abuse. Some have argued that exposure to domestic violence is a form of emotional abuse in itself, harm that has been insufficiently recognised by practitioners (Abrahams, 1994; Brandon & Lewis, 1996). In her in depth interviews with 54 children and their mothers, McGee (2000) found that 60% of the children had experienced other emotional abuse from the domestic violence perpetrator in addition to witnessing the violence. She gives many vivid and poignant examples of cruelty towards pets, destruction of toys, verbal abuse and threats, and the differential treatment of children in the
same family described to her by these children and their mothers. Kelly (1994, p. 47) describes how in practice it is not easy to distinguish between domestic violence and child abuse; in many instances, there is a ‘double level of intentionality’ involved, where an act is designed both to control and harm a child and their mother. Bancroft and Silverman (2002), from their clinical experience, report that domestic violence perpetrators tend to replicate abusive behaviors towards their partner in their parenting style. Moreover, they argue that there are a number of typical behavioral characteristics that perpetrators display in their parenting, such as authoritarianism, self-centredness, manipulativeness, and the undermining of their partner. While these behaviors might not always be labelled as emotional abuse, they are nonetheless harmful to children.

The above provides a brief introduction to the research background within which Britain’s government policy has been developed, a government which is avowedly committed to ‘evidence based practice.’ The publication of *Child Protection: Messages from Research* (Department of Health, 1995) marked a significant shift in the ‘official recognition’ in child care policy of children affected by domestic violence. These overviews of research, regularly commissioned and published by the government, are intended to provide the conceptual frameworks within which social workers should practice. In a number of the contributing studies (Brandon & Lewis, 1996; Farmer & Owen, 1995; Gibbons et al., 1995), domestic violence was, for the first time, explicitly recognized and named; previous studies had tended to obscure domestic violence by referring to ‘marital disharmony.’

**A TYPOLOGY OF POLICY AND PRACTICE**

This next section discusses and adapts a typology of childcare policy perspectives developed by Fox Harding (1997) and applies these specifically to policy and practice approaches to working with children who are affected by domestic violence. These perspectives may be understood as ways of seeing issues in child care policy, each of which will contain similarities in their value base and in their ways of making sense of the issues. Any particular policy is likely to draw from a range of perspectives and, as we shall see later, these may or may not be not clearly integrated or articulated. Though it could be argued that in practice practitioners need to draw from a range of these perspectives in different situations and at different times, the author believes this typology is a useful tool to analyze assumptions and values underpinning policy and practice.

**Laissez-Faire and Patriarchy**

This perspective privileges the privacy of the family and seeks to minimize the intervention of the state into family life. Fox Harding argues that a non-interventionist policy will of necessity allow power within the family to remain with those who already hold such power by virtue of other social processes or institutions (i.e., usually men over women and adults over children). In relation to domestic violence, this is evident in policies and practices that ignore the existence of domestic violence or deny its significance in childcare policy or practice. Much practice before the recognition of the interrelationships between domestic violence and child welfare might be characterized in this
way. An example of this is illustrated in comments by a Family Court Judge interviewed about decision making in relation to contact between domestic violence perpetrators and their children: “If there is violence, but not in the presence of the child, well you wouldn’t necessarily give that great weight” (Robertson & Busch, 1994, p. 107). Evidence of the emotional harm experienced by children affected by domestic violence is thus effectively ignored or minimized.

**State Paternalism and Protection**

Here the protection of children is considered to be paramount through, if necessary, coercive state intervention. Social work responses that focus on the mother’s failure to protect typify this approach. Mama’s (1989) study of black women gives a number of examples of women threatened with having their children removed if they did not leave their violent partner and who experienced this intervention as punitive rather than supportive. Writers who ‘add’ domestic violence to a list of parental actions that may harm children without differentiating between the actions and situations of abusers or those experiencing abuse may, albeit not consciously, be adopting this stance (Brandon & Lewis, 1996). In a similar vein are institutional practices that are concerned primarily with issuing warnings, usually to women, that exposure to domestic violence is a form of child abuse (Hague & Malos, 1996).

**The Defence of the Family and Parents’ Rights**

Proponents of this view, Fox Harding (1997) argues, are concerned with the role of the state as a supporter of the family and believe that children, except in exceptional circumstances, fare best in the care of their birth families. The previous approach is critiqued as being oppressive to birth parents, ignoring their rights and the material circumstances that affect their capacity to parent effectively. While few writers explicitly take this stance in their discussions about domestic violence without differentiating between the roles of fathers and mothers, much recent government child-care policy could be characterized as coming from this perspective. Practitioners frequently express ‘common sense views’ that reveal assumptions about domestic violence being ‘caused’ by oppressive social circumstances, drug or alcohol misuse, and mental ill-health. Thus, practitioners holding such views seem to believe that perpetrators should not be held responsible for their violence; rather, inequalities in society are. In these cases, practitioners may represent parents’ needs, while recognizing that societal changes are needed.

**Feminist Empowerment**

This is not one of Fox Harding’s perspectives, but is, in parts of the policy documents to be discussed later, specifically promoted. Feminist commentators (Hester & Pearson, 1998; Humphreys, 2000; Kelly, 1994, amongst others) have criticized much current child protection social work practice for passing responsibility for the protection of children on to the survivor of the violence rather than working with and challenging the behavior of the perpetrator. Though to some extent the feminist empowerment model shares elements with the parents’ rights viewpoint, in that the injustice of a coercively protective stance is strongly represented, there is a sharp difference in the approach to domestic violence perpetrating fathers.
Inequalities of power between women and men are at the forefront, the roles of abusing and non-abusing parents are clearly differentiated, and the objective of practice is characterized as being the empowerment of women. This, they would argue, is the most effective way to safeguard children and promote their welfare. However, some feminist writers (for example McGee, 2000; Mullender et al., 2002) have recognized that voices of children have hitherto been insufficiently represented in this literature and are developing their work using the final perspective discussed next.

**Children’s Rights and Child Liberation**

Fox Harding argues that proponents of this viewpoint believe that the primary cause of children’s difficulties and distress is that adults deny children rights of citizenship and enforce dependency. The social institution of childhood is criticized, and these thinkers also highlight the oppressive role of the state towards children. Though not fully sharing the more radical views held by some children’s rights advocates, the principle that children have the right “to have their voices heard and to participate in any decisions affecting their lives” (Department of Health, 2001, p. 3) is well established in government policy. Professional practice building on this approach would keep children’s own accounts of their experiences of domestic violence to the fore. Children’s sense-making strategies and survival strategies would be validated, and genuine power and responsibility entrusted to children in making decisions about their lives. Mullender et al. (2002) have developed some key messages for practice rooted in this perspective based on their research with children who have been affected by domestic violence.

**APPLYING THE TYPOLOGY TO POLICY ANALYSIS**

The next section examines how public policy has developed in Britain since 1995 as an example of how these approaches may be applied in a particular situation. Readers may wish to adapt this method to analyze their own national context. Searches of relevant Government websites and one voluntary organization were undertaken, using key words such as ‘domestic violence,’ ‘safeguarding children,’ ‘promoting welfare,’ and ‘child protection.’ Only national policy documents specifically relevant to social workers and the agencies they are employed in were included, so policies, for example, directed exclusively to the police were excluded, as were more general policies aimed at promoting awareness among the public. Documents that made explicit reference to children affected by domestic example were included in the sample analyzed.

A template was drawn up to investigate the value perspectives embedded in the approach to children affected by domestic violence. This template addressed a number of issues. The frequency of references to the impact of domestic violence on children and whether the document contained specific sections on the topic were noted. The sources cited in the text and key words or phrases used were also noted. Documents were analyzed for their approach to domestic violence; this included whether gender differences in prevalence and presentation were noted and whether specific approaches to
work with the adult or child survivors of domestic violence and the perpetrator of that violence were advocated. Where appropriate, the general orientation of the policy in terms of Fox Harding’s general categories of child-care policy was analyzed. Using all of these criteria, an assessment was made of the particular approach to children affected by domestic violence represented in the document, or group of documents, in the light of the framework developed above.

Documents fell into three broad categories. First were those that were primarily concerned with domestic violence but also contained references to the impact of domestic violence on children—the ‘domestic violence documents.’ This category included the following: a national strategy to tackle violence against women (Women and Equality Unit, 1999); a major piece of legislation designed to increase legal powers to safeguard victims and accompanying guidance (The Family Law Act, 1996); a booklet summarizing research presented at conferences with social work agencies (Department of Health, 1996); and two guidance documents, one concerned with multi-agency working (Home Office, 2000) and the other with information sharing (Douglas, Lilley, Kooper, & Diamond, 2004).

Second, there were documents in the child-care policy field that also made reference to the impact of domestic violence on children—the ‘child-care documents.’ These included: guidance to agencies responsible for safeguarding children at risk of harm (Department of Health, Home Office, & Department for Education & Employment, 1999); guidance for social work and other agencies about assessing the needs of children and their families (Department of Health, Department for Education & Employment, & the Home Office, 2000); and policy documents arising from the tragic death of a child from abuse (Department for Education & Skills, 2003, 2004) and consequent legislation (The Children Bill, 2004).

In the third category were those that solely related to children affected by domestic violence—the ‘integrated documents.’ Only one set of documents was found in this category (Hester et al., 2000). This consisted of a training pack and reader, commissioned by the government and developed by a consortium of voluntary agencies and a university department, giving detailed summaries of research knowledge in this field and bringing together information about a wide range of practice responses. Significant differences between the value perspectives found in the categories of documents were found.

**Analysis of the ‘Domestic Violence’ Documents**

What is immediately striking about this set of documents is that overall the approach to domestic violence is clearly informed by a feminist empowerment perspective. Indeed, the underpinning national strategy on domestic violence originated in the Government’s Women’s Equality Unit in the context of a strategy on violence against women in general. All of the policy documents (bar the legislation) commented on the differential gender prevalence and presentation of domestic violence. Although British law does not differentiate between male and female perpetrators and victims, in the guidance issued by
the government to support this legislation these differences are acknowledged.

These documents cite work carried out by writers and researchers that have explicitly identified themselves as taking a feminist approach to domestic violence. The documents broadly take the view that effective work with domestic violence requires timely, knowledgeable, and well coordinated support to victims by relevant professionals, effective protection in civil law, and a criminal justice system that enables offenders to be prosecuted. Safety, justice, and prevention are some key themes that appear throughout these works.

All of the documents do acknowledge that children are also affected by domestic violence; a typical example of this is the statement that domestic violence is a ‘crime that blights the lives of thousands of children’ (Women and Equality Unit, 1999, p. 1 of introduction). Within the documents, it is acknowledged that emotional harm to children can ensue from witnessing domestic violence and the interconnections between domestic violence and other forms of abuse are noted. However, in all of these documents there is only one section that considers in any depth the implications for children of taking a feminist empowerment stance (Home Office, 2000). Here it is acknowledged that victims may be reluctant to disclose domestic violence if they fear that social workers will be “pre-occupied by child protection” and urges social work agencies not to see “domestic violence as just another discrete risk from which they must protect children” (p. 17).

The documents routinely refer to ‘domestic violence victims and their children.’ Here children are not represented as agents in their own right; rather, it appears that children are seen as merely adjuncts of the non-abusing carer. The complexities of children’s emotional responses, relational experiences, and sense-making strategies are not examined. None of the policy documents explicitly advocate that professionals should consult with children directly, neither are specific services for children advocated or funded. In this respect, the ‘children’s rights and child liberation’ perspective is not well developed in this set of documents.

The Child-Care Documents

Throughout the documents in this category, there are references to the impact of domestic violence on children; however, this is uneven. In one document, references are relatively frequent and there is a specific section on child protection in the context of domestic violence (Department of Health, Home Office, & Department for Education & Employment, 1999). One chapter in a book commissioned to support the introduction of a common assessment framework across England and Wales provides a more extended analysis of the issue (Cleaver, 2001). In all of the other documents, references to domestic violence are more ‘one-off’ (e.g., including the impact of domestic violence in a list of factors that may lead to poor outcomes for children). One key feature of these documents in contrast to the ‘domestic violence documents’ is there is little specific analysis of the gender relations involved in domestic violence.
The most consistent theme arising in these documents is that the potential harm of domestic violence to children needs to be recognized. One document specifically acknowledges that domestic violence is a common feature in families where children are being emotionally abused. Later in this document, the great distress experienced by children and the consequent damage to their development and emotional well being from being exposed to domestic violence is highlighted. This harm has now also been recognized in statute, with the legal definition of harm to children being amended to explicitly include “impairment suffered from seeing or hearing the ill-treatment of another” (Adoption and Children Act, 2002). However, there is no discussion about the dilemmas that may arise when widening these definitions. Do all situations of domestic violence require intervention to protect children? If not, how is the threshold to be determined? The particular difficulties faced by practitioners in making professional judgements about domestic violence and emotional abuse are not recognized, given the on-going and contested debates about what constitutes emotional abuse (Iwaniec, 1995). In the absence of these discussions, these documents may best be understood as falling within a state interventionist and protection perspective, as they widen the circumstances within which the state is empowered to intervene in family life, while not recognizing how this may further victimize non-abusing parents (usually mothers) who are subject to violence.

This perspective can also be identified in Cleaver’s (2001) article, which conceptualizes domestic violence as a factor that may impair parenting capacity. However, there is no recognition that perspectives of mothers and fathers may differ. The impact on parenting capacity is only conceived of in terms of the negative impact on the mother’s capacity to care; arising from this are implicit gender stereotypical assumptions about her responsibility to care for children. The abusers’ role as a father is ignored. Research findings (Peled, 2000) on parenting styles of domestic violence perpetrators are not considered. That abusers may also deliberately undermine the non-abusive carer’s parenting capacity, through belittling them and isolating them from sources of support, again remains unrecognized (Bancroft & Silverman, 2002).

Nonetheless, elements of a feminist empowerment strategy can be discerned in one of the documents that asserts “often, supporting a non-violent parent is likely to be the most effective way of promoting the child’s welfare” (Department of Health et al., 1999, p. 72). This document recognizes the value of working collaboratively with refuges and other specialist domestic violence services, many of which will be operating from an explicitly pro-feminist stance. Professionals are also urged to assist women and children escaping violence in practical and other ways.

None of the documents considers in depth what an approach to domestic violence that uses a ‘children’s rights and child liberation’ perspective might look like. Nonetheless, in general this period has seen a growing awareness of the value of involving children in the construction of policy; for example, children were specifically invited to contribute a response to one government
The new Children Bill provides for the appointment of a children’s commissioner whose role will be to represent the views and interests of children. It remains to be seen how far this will enable children affected by domestic violence to be empowered and to have their voices heard.

**The Integrated Documents**

As indicated above, only one set of policy documents exclusively addresses the position of children affected by domestic violence. It is here that an approach to working with children affected by domestic violence influenced by a feminist empowerment model is most clearly articulated. Approaches using a child’s rights model are also to some extent developed within this work. However, this piece of work, although widely circulated at the time, seems to have made relatively little impact on the development of child-care and domestic violence policy in general. Only one of the documents in any of the policies examined cites this piece of work.

In summary, an increased recognition of domestic violence as a factor in children’s welfare, and as a potential form of emotional abuse in itself, is signalled in these changes. All of the documents analysed clearly set out the Government’s commitment to combat domestic violence and the harm that this can cause children. This clearly suggests that the government has explicitly rejected the notion that domestic violence and its impact on all members of the family is a private matter and not the concern of the state, in contrast to a ‘laissez faire and patriarchy perspective.’ However, there are significant differences in the perspectives taken between, and at times within, the three sets of documents. The ‘domestic violence documents’ used a ‘feminist empowerment’ model, the child care documents represented a predominantly ‘state intervention and protection’ perspective (although an empowerment model was advocated in one of these documents), and the ‘integrated documents’ drew from both a feminist empowerment and a children’s rights and liberation model. The foregoing examination of the content and value assumptions embedded in these documents demonstrates the complexities involved in interpreting government policy. The dilemmas this may present for practitioners working collaboratively in real practice situations are discussed in more detail later.

**IMPLEMENTATION**

What then of implementation? What are the issues facing those who are responsible for implementing the policies contained in these documents and evaluating their effectiveness? What are the perspectives of social workers working directly with children and their families? Implementation processes involve many different people at national, regional, and local levels, all of whom have differing and competing priorities. Each country will have their own particular style of government that in different circumstances and with different sorts of policy may be more or less effective. Policies themselves may be more or less specific and coherent, and their success may be dependent on factors that people responsible for implementation may not be able to control.
In their international analysis of literature on implementation across several decades, Hill and Hupe (2002, p. 182) identify factors affecting implementation in three ‘loci’ or levels of governance: (a) the “locus of macro relations between government and society,” which refers to what kind of policy it is and wider socio-economic factors that could impact on implementation; (b) the “locus of intermediary institutional relations,” which refers to the relationship between the layers of government involved in implementation and the horizontal networks between the agencies responsible for implementation; and (c) the “locus of the street level,” meaning the reactions and responses of managers and frontline staff, and of service users affected by the policy. While it is not always easy to draw clear distinctions between these three areas, and implementation of any policy involves a complex set of interactions between these three areas, this does however provide a framework for analysis.

The following discussion draws out some of the key factors that implementation research and theory has suggested are important in these three ‘loci.’ These are generally applicable in different national contexts. Some more specific examples of what the implications of these factors are in the British context of implementing the particular policies under examination are then given. The purpose of this is not to provide an evaluation of how far the policy documents under discussion have been effectively implemented; this is beyond the scope of this paper and must await further research. Rather, it outlines the issues that policy makers, implementers including social work practitioners and managers, and researchers need to take into account in considering how these policies may be implemented and evaluated.

**Macro Relations**

Three significant factors affecting policy implementation and evaluation in this arena have been identified (Hill & Hupe, 2002). First, there are the characteristics of the policy itself, in particular how clearly the outcomes of the policy are spelled out and how likely the policy is to cause conflict among those responsible for its implementation. While the increased emphasis of the significance of domestic violence in British governmental child care policy has not provoked political resistance at a local level, the analysis of policy undertaken earlier suggests that the particular domestic violence and childcare policies under discussion would score highly on any ambiguity scale. Specific indicators and outcomes were not clearly identified; therefore, implementers and those evaluating the effects of policy have considerable latitude in how they interpret the policy and define indicators of success. There are additional complexities in that some or all aspects of this policy may be implemented as specified but overall the policy may not achieve the desired outcomes. Some of these complexities can be illustrated by reference to one of the recommendations in the guidance disseminated to agencies responsible for working together to safeguard children.

It is good practice for the police to notify social services where they have responded to an incident of domestic violence and it is known that a child is a member of the household. (Department of Health et al., 1999, p. 72)
It may be relatively easy to monitor whether these referrals have actually happened; however, evaluating the outcomes for children is more difficult. Although this approach promotes a wider recognition of the effects of domestic violence on children and provides for closer co-ordination between the two agencies, there are associated dangers. In a number of research studies (Abrahams, 1994; McGee, 2000), women have expressed fears that becoming involved with social services will mean their children will be removed. This policy may deter them from seeking help from the police or encourage them to minimize their experiences, thus unintentionally reducing the safety of women and children rather than increasing it.

The second significant factor concerns how far the objectives of the policy are resourced, supported, and monitored. In Britain, few specific resources were made available to implement improved practice with children affected by domestic violence. However, while the government might argue that overall additional funds have been made available for work with vulnerable children, the issue for implementers of this particular set of policies is how to weigh up the relative priority of the mass of competing goals and requirements laid down by central government. Monitoring of social services activity in Britain is undertaken by assessing performance against a set of quantitative measures, the performance indicators, none of which specifically relates to safeguarding and promoting the welfare of children affected by domestic violence. These quantitative measurements are supplemented by information from inspections which have to some extent addressed this area (Department of Health, 2002). This gives an indication of the relative priority the government has given to this area.

Third, the influence of wider social relationships and attitudes and of economic conditions is significant. If the assumptions, beliefs, and values implicit in a particularly policy are widely out of step with prevailing attitudes to the issue, then the compliance or co-operation of those affected by the policy is likely to be withheld. In respect of polices around domestic violence and children, the following factors could be significant: societal attitudes towards domestic violence; the economic conditions affecting choices, options, and resources available to those experiencing and perpetrating violence; and the attitudes of people affected by the policy to the service providers charged with implementing it.

**Intermediary Institutional Level**

What is of significance here are the relationships between the different organizations responsible for implementation. In analyzing these horizontal relationships, attention needs to be given to both the power dynamics involved within and between the organizations and consideration as to how far there is congruence between the aims and understandings of the personnel involved. The importance of strong interpersonal relationships between people collaborating from different agencies in the successful implementation of policy has been emphasized in the research (Powell, Exworthy, & Berney, 2001).
In Britain, two parallel sets of multi-agency groupings, the Area Child Protection Committees (soon to become Local Safeguarding Children’s Boards) and the Domestic Violence Fora are the bodies that are responsible for implementing strategic development of services at a local level and coordinating the horizontal links between agencies. Thus, responsibility for implementation of the specific policies being examined is devolved to networks of professionals. The representatives on these bodies come from diverse professional agencies such as the police, criminal justice agencies, social service departments, health services, voluntary groups concerned with domestic violence, and housing providers. However, these different agencies on the multi-agency groupings, and the individuals representing them, may hold different value orientations towards practice with children affected by domestic violence, which unless explicitly acknowledged may frustrate efforts to work together (Hague & Malos, 1996). So much depends on the capacity of these bodies, at both individual and organizational levels, to work together and to agree common aims, definitions, and objectives. Time, commitment, and skill is needed in order to create opportunities to explore differences, learn from the expertise of others, and develop new models of practice.

Power differences between and within these two different coordinating networks also need to be recognized. For example, in Britain, Area Child Protection Committees have been established for two decades and are usually chaired by a senior member of one of the partner agencies. They may have specific funding and dedicated staff attached to them. Social services departments are central in these committees. The Domestic Violence Fora, on the other hand, have been much more recently established. Hague and Malos (1996) found that commitment at senior or policy-making level from social services departments was often absent. This same study found that awareness of and involvement from women experiencing domestic violence was low and that participants from voluntary agencies, particularly the refuge movement, could also be marginalised.

**Street Level**

Thus far, the discussion about implementation has been viewed primarily through a ‘top down’ lens. What is the perspective of the individual social worker at street level? The value of policy and practice guidance may be perceived differently by policy makers and practitioners.

For policy-makers usefulness may be related to meeting government requirements or to highlighting an issue and providing evidence of doing something about it. For practitioners usefulness may be related to finding guidance when they feel uncertain about appropriate action, and identifying legitimate reasons for (not) acting. (Preston-Shoot, 2001, p. 5)

From a practitioner point of view, the good intentions contained in the guidance cannot be implemented without sufficient staff and resources. In many parts of Britain in the past decade, social work agencies have seen high staff turnover and shortages of qualified workers. Implementation also relies on dissemination. Though these documents have been widely distributed, they may not be available to practitioners when and where they need them. One survey (Bullock, 1998) of the information sources used by social workers in the Britain ranked national policy guidance as 8th out of 11 sources.
identified. The effectiveness of the training available to social workers during and after qualification is also highly significant here.

Practitioners work in emotionally demanding, and sometimes personally threatening, situations that may distort their perceptions and ability to act effectively. O’Hara’s (1994) analysis of inquiries into child deaths in the context of domestic violence pinpoints how fear of confronting violent men may have contributed to deficiencies in professionals’ responses to these situations. The psychological impact of the work needs to be understood by policy makers. The existence of effective supervision and of working practices that take account of the emotional and safety needs of workers is vital to the success of policy implementation (Bell, 2000).

It is practitioners who have to make sense of the policies and to manage any of the inconsistencies or differences described above. They may choose to adopt those aspects of the policy documents that most closely reflect existing frames of reference and values, and choose not to engage with those aspects that challenge them. Traditional conflicts between, say, child care social workers holding a ‘child protection’ stance and workers whose roots are in a feminist empowerment model may be perpetuated, with individuals being able to point to whichever part of the guidance most supports their stance.

The limitations of guidance in the form of many of the documents analyzed in this paper, from the point of view of practitioners, have been explored by Preston-Shoot (2001). Despite an increase in what he describes as regulatory intrusion, he suggests that the perceived distance between policy makers and practitioners subverts its usefulness. Paradoxically, the working practices created by regulation and the proliferation of practice guidance designed to ease the anxiety and insecurity experienced by policy makers may actually compound the anxiety and insecurity experienced by practitioners. Furthermore, he argues, practice guidance cannot in any case substitute for practitioners’ active engagement in the complexities and ethical dilemmas of practice.

Work with children affected by domestic violence is saturated with such ethical complexity. Take, for example, the decision about whether to invite a domestic violence perpetrator to a multi-disciplinary case conference concerned with the harm being experienced by his children. A practitioner may be concerned that inviting him may trigger further incidents of abuse or violence. However, agency procedures drawing from the principles of partnership with parents, extolled in much childcare policy, would indicate that he should be present. A practitioner wishing to develop a model of practice based on woman-centered empowerment principles might want to enable the woman experiencing the violence to make the decision. A practitioner taking a more explicit child rights stance might wish, depending on the child’s age and understanding, to allow the child to have more control over such discussions. However, on occasions, practitioners will need to put limits on the victim or child’s capacity to control the intervention in order to safeguard a child from harm or to hold the abuser accountable for his actions. Policy and practice guidance, however carefully and sensitively drafted, can only identify the
issues practitioners need to consider, and cannot provide answers applicable to every situation. Each situation requires an individual response, crafted by the practitioner, in collaboration with those affected by the violence.

CONCLUDING COMMENTS
This article opened with a brief review of the research literature on children affected by domestic violence. A typology of value perspectives that policy makers and practitioners may bring to work was developed in order to explore explicit, but more often implicit, ways of seeing and understanding this complex and morally challenging work. A detailed analysis of policy in Britain since 1995 showed how some of these viewpoints have been manifested. Issues of implementation in three loci were considered next. This section ended with a discussion of the experiences of social workers at the ground level and questioned how far this kind of top down implementation could be effective in practice.

The emotional and other effects on children exposed to domestic violence, and the link with other forms of child maltreatment, are being recognized, albeit unevenly, in social work policy and practice. This is very much to be welcomed. However, in order to develop practice that is sensitive to the complexities involved in safeguarding children affected by domestic violence, more critical debate about the underpinning value perspectives of this developing policy and practice is needed. Replacing policy through prescription with policy based on learning from the experiences of the workforce is one way forward (Preston-Shoot, 2001). This would involve developing ‘collaborative conversations’ with practitioners to allow them to become active subjects rather than objects in the policy making process. This of course begs the question as to what structures and processes could best facilitate this dialogue and enable us to move toward a culture that better respects professional understandings and judgements. In addition to these ‘collaborative conversations’ between practitioners and policy makers, ways of involving adult and child survivors of domestic violence in this process of co-constructing policy need to be developed.

References


