 Pryce – Welcome to the Florida Institute for Child Welfare Podcast, this series is Child Protection Caseworker Support. I am Jessica Pryce, your host. On each episode we will explore topics that are relevant to child welfare professionals. We will hear directly from people who work every day to make a difference in the lives of children and families. It is our goal that this podcast is accessible, informative, and supportive. So, if you know someone who works in child welfare, be sure to share this podcast with them.

00:00:43 Today on the Florida Institute for Child Welfare Podcast we are discussing intimate partner violence, also known as IPV. This is for those people who have ever had a case involving IPV and wondered how you could be more competent and prepared to handle it. The complexity of IPV cases cannot be overstated and as we all know in the IPV world, the adult victim is the priority and in the child welfare world, the child victim is the priority. Today we will learn how we can merge those often conflicting points of view. Our guests today are Dr. Lisa Magruder, a research fellow at Florida State University and Sarah Latorre, a master’s level social worker and victim’s advocate with our local police department. Dr. Magruder received her master’s here at FSU and her PhD at the University of Denver. Her dissertation focused on frontline responders to intimate partner violence. Sarah Latorre, who also studied social work at FSU, brings hands-on and practical knowledge of her work with victims of IPV.

Let’s get started.

00:01:53 Pryce – I’m really excited to talk about this topic, the importance of it to child welfare can’t be overstated. As a previous child protective investigator, myself, I found my domestic violence (DV) cases extra challenging. So, I wanted to start by talking about the difference in DV and IPV I call it DV and there’s a new wave of IPV. So, Dr. Magruder, can you break that down for us, the difference?

00:02:17 Magruder – Sure. So, when talking about domestic violence or DV, and intimate partner violence or IPV, what we’re really talking about generally speaking is the same concept. I think people conceptualize domestic violence in the way that many researchers are conceptualizing IPV, which is to say violence between partners. So, meaning, married partners; so spouses, partners, boyfriends and girlfriends, and it doesn’t have to be that level of relationship either. It can be people with an ongoing sexual relationship, romantic relationship, or anybody who has a child in common regardless of their relationship status, former or current. And so I think many practitioners, when they talk about domestic violence conceptualize it in that way. Legally, domestic violence is a bit broader and can encompass violence, between other types of familial relationships. So, things like sibling abuse. So, when we’re talking about intimate partner violence,
we’re talking specifically about that violence that happens between partners, those partnerships that I just described.

Pryce – That’s an important distinction, and I know Sarah, that sometimes you have to switch up what you call it depending on who you’re dealing with?

00:03:32 Latorre – Right. So, as I work at a law enforcement agency as a first responder advocate, our Florida statutes call it domestic violence; it’s not intimate partner violence or IPV. So, often times when I’m dealing with investigators, I work with on a daily basis or the officers, DV would be what we refer to it as; however, I think IPV is a new kind of word or direction that it’s going in. And so, if I’m talking to let’s say our local IPV shelter, I would talk to them more of using those terms because that’s kind of more of a progressive term as well.

00:04:06 Pryce – So, thank you again for that very important distinction. And focusing on IPV, I want to talk about how it might overlap with child welfare because there are two different very almost estranged thoughts and points of views. So, could you tell us a little bit Dr. Magruder, on how they might overlap?

00:04:25 Magruder – Sure. So, these two distinct forms of family violence can intersect in several ways. I think when we mostly think about intersection, we think about prevalence or co-occurrence. And so, there’s research out there that demonstrates conservatively, up to about 67 percent, so about 2/3 of cases with child maltreatment also include an element of IPV. If we expand that definition to things that are maybe include less severe forms of child maltreatment, that number jumps to almost 100 percent. And so, we know that there’s a lot of overlap between these two, we know that they share some of the same risk factors like financial, stress, substance abuse, mental health concerns. We know that there are consequences for both, you know, both emotional consequences, physical consequences, financial consequences. In terms of children; in particular, children exposed to domestic violence tend to have emotional and behavioral problems that is worsened when there is that co-occurring child maltreatment. So, there’s that element of being exposed to it, but then also experiencing maltreatment themselves. So, some of those consequences can be fear, low self-esteem, PTSD (Post Traumatic Stress Disorder), anxiety. We also see a lot of externalizing behaviors. So, things we consider you know, acting out, you see poor conflict resolution skills, less secure relational attachments, and then we also do see some varying estimates of the intergenerational transmission of violence. So, how often are children who are growing up in homes with IPV going on to either become perpetrators or victims later in life either of IPV or other forms of violence? And so, there are varying estimates to that, but- yeah, so, there’s quite a bit of overlap between between these two forms of violence, and we know that
child welfare workers are feeling ill prepared. They’re, that’s what they’re telling us in the research.

00:06:22 Pryce – So, a pressing thing that I think would be great to talk about. There are competing principles when it comes to child welfare and IPV. You know, for example, the cornerstone of child welfare is: the child is the victim. And when I’m-I’m looking at you Sarah, because you are a victim’s advocate, and I believe that means the victim of the- the perpetrated abuse you know, and this is an adult person. So, I think that because as a PI (Protective Investigator) we are there to protect the child, and you’re there to protect the mom, or the dad, there could be some competition there. So, can you talk about, in your work, how do you deal with things like that?

00:06:58 Latorre – So, obviously law enforcement has victim advocates and especially in the area I’m in, they’re trying to enforce the law. And our laws for the state are to protect us as a society. So, in a way, especially if you’re working with someone that has a law enforcement victim advocate, or have access as a CPI (Child Protective Investigator) to that, I would say, use that to your advantage because the more communication and collaboration that you’d have on that end, I think you’d also be able to protect both, let’s say, the client from my perspective as a law enforcement advocate, along with the child. And because I know a lot, often times we’re used to advocates being within the IPV shelter in the community. Whereas, if you access advocates within, let’s say the court systems, if someone’s a perpetrator that’s already been arrested. Or within the first responders, they may be able to give you a little bit more information because the confidentiality isn’t as strong as with when you’re dealing with a, let’s say, an IPV shelter. So, if they both kind of network; if the CPI builds a relationship with the victim advocate, I think you can kind of find where you merge kind of both those goals together to get the positive end result.

00:08:11 Pryce – Wow, I just- the the lack of coordination that exists is really sad because I had a conversation with a woman this past week. I was in Minneapolis and she had her kids removed from her custody because she was leaving an abusive situation at home from her husband and she took her kids and basically lived in a cabin that her parents owned. And it had no electricity and no running water and anything like that. So, it wasn’t “the best place” for kids to stay, but when you talked about collaboration coordinating, I mean this was a victim, running for safety, trying to take care of her kids. But, when the department came on the scene, and this is another state, but they they said these kids are unsafe. And the mother talked about how losing her kids made her feel even more vulnerable and alone, so she went back to her abuser. So anyway, I just wanted to say that there needs to be a connection between both, and I would love if you could talk about
maybe a good experience that you’ve had in your practice with a CPI, or even a
good experience of coordinating on behalf of your victim with another
organization.

| 00:09:26 | **Latorre** – Absolutely. I was giving the example to Dr. Magruder earlier that a lot of
times as a law enforcement victim advocate, I will get a phone call that will say ‘I
was told I need to file for an injunction for my CPI to keep my kids safe. How do I
do that?’- I’m glad I get those phone calls from people, but it’d be even better if
we had the opportunity for the – let’s say the CPI to say ‘hey, this is Sarah at TPD,
give her a call, she’s gonna walk you through how to get this injunction.’ And that
being because no one knows how to navigate the criminal justice system. So, if
they make that connection, talk to me, I’ll explain you know, that our local IPV
shelter has an injunction assistance office in the courthouse. And if they go there,
they have a better chance of getting their injunction because they’re walked
through how to fill out the forms, what’s needed, what specific things to say, even
referrals to legal services to assist with that. The support of having someone
present at the court hearing. So, those are kind of examples of if a CPI knows to
send someone to talk to a victim advocate specifically how you could- the success
rate of the injunction being granted and giving that client the freedom from their
abuser, keeping the children safe as well is kind of the ultimate end goal. And
then, the parents would still be together, as well with the child. |

| 00:10:48 | **Pryce** – No, I totally agree. Dr. Magruder I know that you talked- you talked really,
poignantly about the competing principles and how there’s overlap. So, I was
curious if you could talk about how frontline workers could move past some of
those conflicts and better serve families based on the research. Like what, what
would you recommend?

**Magruder** – So, what we’re learning from child welfare workers is that there’s a
lot that can be done on the frontline of things. I think that what people are
expecting is for this to be a top down approach. Which we do need, we do need
leadership to come down and expect collaboration and there are certainly ways
that they can do that. But we hear a lot of frustration on the f- like you said, from
the frontline saying, ‘well what can we do in the meantime sort of while we’re
waiting for this agency change to trickle down?’ So, some of my colleagues and I
are looking at the concept of Institutional Empathy and how we can infuse that
into our frontline practice for addressing these these intersecting problems.
And some researchers back in 2008 coined this term specifically looking at this
intersection of child welfare workers, domestic violence providers, and other
criminal justice professionals. And so they said, child welfare workers need to
understand the history of the women’s rights movement and why we need to
empower victims and why those things are important. On the flip side, IPV service
providers need to understand that child welfare workers work in very large bureaucracies; things tend to move very slow; they’re beholden to very strict policies; and so they may not have as much leeway sometimes as IPV workers do. And so, what we’re looking at with this model, this Responder Institutional Empathy model is, it looks like a staircase. So, at the bottom we’re talking about laying the foundation for communication; literally just talking to each other. Kind of what Sarah alluded to, know who to contact, just knowing who that person is, and each of those agencies that you’re going to be collaborating with. And then once you have that base of communication, you sort of go on to this next step of building rapport. You get to know people, not, not that you have to be best friends with them, but you get to know them a little bit better outside of just who they are and what their role is. And that helps you to sort of, let down your guard a little bit and maybe be more open to the fact that we’re both working in these challenging spaces and things aren’t necessarily personal when things don’t work out or agency policies don’t mesh. And so we feel like once you’ve you know, built up this communication and this rapport that you start having a better appreciation for teamwork, you start demonstrating that ‘hey I know the value that this person, and or their agency, brings to our collaborative work together.’ And then finally if you have all these elements, we think that you can have a more consistent understanding of case processes.

Pryce – That sounds really interesting. I’m curious what your thoughts are about that Sarah, like on the practice standpoint would that be something that would be useful?

Latorre – Oh absolutely. And I would say, it’s not the relationships between child welfare workers and let’s say law enforcement, or any of the other kind of social systems that we work with. It’s all over and for example, I can say as a victim advocate in our local community, we have advocates within the university systems, we have the shelter advocates, we have judicial advocates, post-conviction advocates, and then first responder advocates too, and all of us have very different roles and our agencies each have different bureaucratic structures. So, my suggestion too would be take that- like as advocates, we all get together once a month to try to have a lunch and just to know each other almost on a personal level, but professionally as well like so we can discuss what different roles we have and our ways within our agency of getting kind of the job done to help individuals. So, I definitely think that- what was the model that you called it Lisa?

Magruder – The RISE.

Latorre – The RISE Model is a great way, and especially again when we’re the practitioners kind of doing the daily work, it’s difficult to really change agency
policies, but if we can network together and build those relationships you make ways not to say get around those things, but where you can have a successful outcome for everyone involved anyway.

| 00:15:05 | **Pryce** – And when you were talking, I thought about something that I’ve always been told, that statistically, victims will go back to their abusers, I think I remember, seven times.  |
| 00:15:05 | **Latorre** – That’s correct, yes.  |
| 00:15:05 | **Pryce** – And, I imagine some of your job is educating people that don’t know those things cause I’m I’m sitting at a CPI seat, and we don’t have seven times to protect your kids. We have once. So, how do you kind of balance that when you’re, you know, when you’re trying to educate CPI’s or even other community members on well, this is a victim and she may very well go back, but that doesn’t necessarily mean she needs to lose her kids or-  |

| 00:15:40 | **Latorre** – Yeah, that’s a very hard educational piece because when you’re not in that spot of being the individual that’s being victimized, it’s very easy to sit and say ‘well of cour-‘ you know like I would just leave, I’m not gonna put up with that situation; however, I mean, the statistics still- the seven times you’re right on that. And there’s so many outlying factors like, you gave the great example of the was it a client that you spoke to out of area? Well, she tried to leave and took her kids to now what the child- the child welfare workers saw as an unsafe conditions. So, her options were to go back to her abuser. There’s many people that don’t leave because they have no resources or support for themselves. So, even if I’m just talking to someone that’s calling in and saying ‘hey I just want to help my friend and I don’t know what to do. Can I make a police report for her?’ And the best thing you can do is meet them where they’re at, be a supportive person, and have options to give. And if they don’t take those options, know that they may come around at some point and you still need to be that supportive person and give those same options as well.  |

| 00:16:47 | **Pryce** – I also wanted to ask about safety planning, and you may not have experience with that, but I know as a PI we did a lot of safety plans when it came to DV. If we didn’t want to, you know, remove kids, we would say, ‘this is the safety plan. You’ll be staying with your mom or stay with a sister. You will not have these kids in the home with the you know, the batterer.’ Do you have any experience with working with safety plans or any-  |

| 00:17:08 | **Latorre** – Yes, absolutely. And again, with safety plans too, my main things is you know, get to know the client during the assessment that you’re doing. Whatever, whether it be the ten minutes or if you end up having two hours to spend, which I imagine for a child welfare workers your time’s limited, but and give them realistic
safety planning. And not the you know, have a go back under the bed because now often times you know, abusers are obviously gonna find that or don’t make plans on your cell phone as well because if they have access or some way to tap into your cellphone. So, really realistic things and sometimes my safety plans can be as simple as knowing where your phone is, being able to call 9-1-1, how are you going to get yourself out of your house in a safe way or where is a safe location in your house? So, kind of that simplistic stuff that we sometimes forget about, but just really have the client that you’re working with thinking about those things. And obviously with the children involved, you know, what age are they? How- you know, what is their interpretation of the situation, and how to keep them safe as well. And a- with all the majority of the IPV victims I work with, obviously their main concern is their children. Whether it’s the safety of just the reliable housing to the actual physical safety. So, it’s not hard to make someone dealing with an IPV situation think about their child because all- most of the time, that’s their main priority even if we can’t see it from that from our perspective.

00:18:33 Magruder – Just to kind of piggyback on that and tying in that collaboration piece; there is research out there actually to show that when advocates who sometimes have that relationship with those clients because I think advocates aren’t always viewed inherently so negatively perhaps as as a CPI might be. Advocates who tell their clients ‘you should see child protective services as a resource for you, they want to help you.’ Having that sort of trusted social service provider that they have a strong relationship with can actually make the work of the CPI, or the case manager easier because they have another professional who has a relationship with this client sort of backing up what they’re trying to do. And then it becomes a more collaborative process about how can we all brainstorm from our unique roles and perspectives what is needed for a comprehensive safety plan instead of sort of this piece-meal. Like I’m getting this from my case manager, and I’m getting this from my victim advocate. If everybody is sort of on that sort of same page and working together, it becomes, like I said, more comprehensive for that family.

00:19:38 Pryce – No, I love the model and I’m really glad that you talked about it today. It seems really practical and feasible for increased and enhanced communication. And I appreciate you talking about the the utilization of it. So, I also have another question for you Sarah, if you could. The people that are listening to this they’re probably not researchers, but we as researchers want to be able to have our work help them. So, I’m curious if research has ever really informed what you do, and if so, can you give us an example of-
Latorre – So, you know, as practitioners our days are pretty busy and we’re kind of limited on time, but I think a lot of times you know, the research - well I’d even say we utilize kind of like what- I’m sorry, that model again, what’s it called?

Magruder – RISE.

Latorre – The RISE Model. Like, when I was- talked to Lisa and she mentioned that, I was like, oh well, as prac-like as a practitioner I was kind of just like, ‘lemme get some other colleagues together and sit down and you know, talk about how we can both get to know each other professionally.’ The quick access to things like I know it’s a national crime victims journal. You know, they send like an email about once a week with like different articles and sometimes I’ll take those and browse those. And it both helps me as a prac- practitioner confirm if I’m doing something right, and then gives me new and fresh ideas of you know, new ideas to implement.

Pryce – So, just to clarify, when you said that when you heard about the RISE Model, you kind of sat down with your colleagues, are they colleagues at TPD, at the Tallahassee Police Department, or?

Latorre – They’re Coll-like advocates in the community I would say. And again, we’re very fortunate where I work that we have a strong network of advocates and, just our community really does have a lot of victim advocates in general compared to I think other communities that you would find you know, throughout the State. But, even then it was still kind of like, we’re really not taking the time to know each other’s roles in the system and sitting down together. Again, like having lunch, or just enjoying some down time to talk about where- what we are doing professionally, a little bit personally too really builds those connections. And now I know okay well, if I need something specific that I think the State Attorney’s Office might be able to help me with, I know what advocate I’m going to call and network with. So…

Pryce – Right, and as a previous PI, I must say that I didn’t have a lot of contact with victims- victim’s advocates and I hope that the PI’s that are listening or the case managers. I do hope that this podcast, helps you to see that the the importance of connecting with a victim’s advocate if you’re dealing with an IPV case. You know, finding out who it is and even picking up the phone and calling and talking through the case and and hearing what your thoughts are about your recommendations as a victim’s advocate.

One more question for you Dr. Magruder; your model that you just talked about, if someone wanted to read about it or know about it, what can they do, where can they go?
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00:22:34 Magruder – So, we’ll be providing citations for the research that I discussed today as part of the podcast. We currently have two articles out about this. So, we have an article in the Journal of Family Violence that talks about the challenges of child welfare workers collaborating on IPV cases. And then we have one in the Journal of Interpersonal Violence that is about the RISE Model and and things that facilitate collaboration. So, we kind of have both sides of things, and this is just another recommendation that I’d make to practitioners who are interested in that type of research, but maybe don’t have access to it. As we know there’s not a lot of time to access it; these can be expensive journals. What I often recommend is reaching out to researchers directly and asking them for a copy of their article if you’re- they’re interested. They are usually more than willing to share a pre-publication version or something like that with you if you do find a piece of information that you think will be helpful around that. And that’s certainly something that I can do as well.

00:23:41 Pryce – Thank you again to our guests, Lisa Magruder and Sarah Latorre. Very interesting discussion about how to build more effective partnerships between child welfare and domestic violence advocates. If you are a child welfare professional, I end each podcast with a thank you; we appreciate your commitment to this work and we hope the podcast was helpful. To learn more about the Florida Institute for Child Welfare and to read more about our guests, please visit WWW.FICW.FSU.EDU. And lastly, I want to thank Aaron Kudja our podcast engineer and Marianna Tutwiler, the producer of this series. Until next time, I am Jessica Pryce and we are strengthening child protection by providing caseworker support.