Multi-agency risk assessment and management for children and families experiencing domestic violence

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A B S T R A C T

This paper explores risk assessment and management in relation to children and families experiencing domestic violence; in particular, the communication and collaboration between child protection services, the police and independent domestic violence services. Four key themes structure our analysis of the challenges of risk assessment and management in this field: the question of who is the primary client and the focus of risk assessment; the issue of how the information to inform risk assessment is organised, including how it is collected, the tools that are employed, and the context in which information is collected; the position of the child, mother and father and whether risk is assessed and managed with them or to them; and the relationship between risk assessment and risk management, specifically whether risk management is restricted to families where levels of danger are identified as high or whether there are opportunities for support and safety planning for families where the risk is assessed as low. Finally, the paper examines some of the mechanisms that have developed as a means of resolving these issues, describing approaches to multi-agency risk assessment and management in this field that have emerged in both the UK and Australia and drawing on a range of studies undertaken by the authors.

1. Introduction

Established approaches and protocols for risk assessment and management are often challenged at the interface of interagency work. At the level of risk assessment, conflicts emerge between different conceptions of risk and between different approaches to the collection of information used to inform risk assessment. In risk management, some agencies restrict their intervention to high risk cases, while others maintain a focus on those which require lower levels of support. While these conflicts may impede the day-to-day practice of risk assessment and management, they are also valuable in illuminating the varying perspectives which organisations bring to the task of protecting children. Differences which arise in mapping the territory can highlight the need for new structures and the support required for agencies to work collaboratively.

This paper explores risk assessment and management in relation to children and families experiencing domestic violence; in particular, the communication and collaboration between child protection services, the police and independent domestic violence services. This is a field where agencies have struggled to harmonise and co-ordinate their risk assessment procedures, not least because one agency’s assessment of risk can result in high workloads for another organisation (Humphreys, 2007; Stanley, Miller, Richardson Foster, & Thomson, 2011a). Relatively recent recognition of the high prevalence of children’s exposure to domestic violence (Stanley, 2011) has resulted in agency acknowledgement of a wide arena for intervention but as yet there is limited understanding of how different agencies can contribute to building a response that distinguishes levels of need and provides a calibrated response (Edleson, 2004; Jaffe, Crooks & Wolfe, 2003). In the UK and Australia, this need for a more differentiated service response has been highlighted by key inquiries and reviews into child protection (Cummins, Scott, & Scales, 2012; Munro, 2011).

Domestic violence is a complex phenomenon in families involving different family members in varying roles, evoking different agency models of response (Hester, 2004) and overlapping with a range of other social problems such as substance abuse and mental health needs (Cleaver, Unell, & Aldgate, 2011; Stanley, Cleaver, & Hart, 2009). In this sense it is consistent with Devaney and Spratt’s (2009) account of child abuse as a ‘wicked problem’. These are problems which:

′go beyond the capacity of any one organisation to understand and respond to, and [where] there is often disagreement about the causes of the problems and the best way to tackle them. (APSC, 2007, p. 5)′

Responding to such problems is likely to involve changing the behaviour of large groups of people across and between organisations, so
challenging traditional modes of policy making and programme implementation (APSC, 2007; Ison, 2008).

Four key themes structure our analysis of the challenges of risk assessment and management in this field. First, we address the question of who is the primary client and the focus of risk assessment? Second, how is information to inform risk assessment collected and organised; what tools are employed for this purpose; what context is it collected in and when and how does the relationship between the practitioner and the family shape the information available to inform risk assessment? Third, we examine the position of the child and family in risk assessment and management in this field: is risk assessed and managed with them or to them? Fourth, we consider the relationship between risk assessment and risk management: is risk management restricted to families where levels of danger are identified as high or are there opportunities for support and safety planning for families where the risk is assessed as low?

Finally, we explore some of the mechanisms that have developed as a means of resolving these issues, describing approaches to multi-agency risk assessment and management in this field that have emerged in both the UK and Australia and drawing on a range of studies undertaken by the authors.

This paper brings together emerging approaches to risk assessment and management from both the UK and Australia. Since the UK includes four countries and Australia comprises six states and two territories, variations arise between jurisdictions and in what follows we aim to identify broad trends. A number of studies (e.g. Spratt & Devaney, 2009; Spinney, 2012; Munro & Manful, 2012) have sought to compare policy and practice in children’s services in these two countries where child welfare systems encounter similar challenges (Sheehan, Rhoades, & Stanley, 2012) but where contextual differences mean that a solution developed in one country may not work for the other. These similarities and differences offer opportunities for explanation and learning (Stafford, Parton, Vincent, & Smith, 2011). In the UK and Australia, policy recognition of the risks domestic violence poses for children has been stimulated in part by the campaigning work of the Women’s Movement but also by analysis of child death reviews which have implicated domestic violence in child homicides (Brandon et al., 2009; Connolly & Doolan, 2007). Thus the service response in both countries is informed by both a gender-based feminist analysis of violence to women and children, as well as a child welfare analysis of concepts of risk and danger.

Increasingly, children’s experience of domestic violence is conceptualised by policy initiatives in both the UK and Australia as one aspect of multiple problems in ‘troubled’ families also characterised by substance misuse and mental health problems (Casey, 2012; Hunter, 2008; White, Warrener, Reeves, & La Valle, 2008). Just as in North America (Edleson, 2004; Jaffe, Crooks, & Wolfe, 2003), child protection services in the UK and Australia have been overwhelmed by the large volume of referrals concerning children exposed to domestic violence (Stanley et al., 2011a; Humphreys, 2008). Refining and adopting new approaches to risk assessment and management have been a means of controlling that volume. As prevalence studies (e.g. Walby & Allen, 2004; Radford et al., 2012) begin to expose the full extent of children’s experience of domestic violence, risk has become a tool for funnelling and rationing the service response to a widespread and complex social problem.

2. Whose risk?

Perhaps the most contentious issue for risk assessment in the field of domestic violence is the co-existence of an adult victim and a child victim, both of whom have linked but separate needs. The intervention system tends to be organised around a strict binary distinction between victim and perpetrator and different organisations do not always concur about who is at risk (Hunter, Nixon, & Parr, 2010). For specialist domestic violence services, the primary focus of risk assessment is frequently the adult victim and the objective of risk assessment is to secure her safety (in this paper we describe adult victims as female since although men can also be victims of domestic violence, men’s abuse of women tends to be more severe and has greater impact, see Hester, 2009; Walby & Allen, 2004). Many independent domestic violence services now include children as a primary focus of their work but some may find it hard to distinguish between the needs of children and the adult victim, advocating the view that mother safety is a guarantee of child safety. Children, when consulted, may sometimes express views which differ from those of their mothers (Øverlien, 2011; Stanley, Miller, & Richardson Foster, 2012).

The police also assess risk with a view to securing the victim’s safety but additionally they aim to achieve convictions and their assessment therefore has a dual focus addressing the danger posed by the perpetrator as well as the vulnerability of the victim. For child protection services, the primary focus of concern is the child’s safety, and while social workers can struggle to maintain a focus on the child (Laming, 2003), where domestic violence is an issue the attention to the woman as victim is frequently overridden by assessment of her as a parent. Child protection social work is all too often only about mothers (Scourfield, 2003) and social workers’ engagement with fathers can be limited (Ashley et al., 2011) with the consequence that the risks posed by the perpetrator retreat into the background (Humphreys, 2007). However, recent evidence from a local UK study suggests that social workers are more likely to include fathers in assessments and interventions when they are known to be violent (Baynes & Holland, 2012). These variations in client focus can result in confusion and clashes of perspectives at those points where agencies need to share information or collaborate. Stanley, Miller, Richardson Foster, and Thomson’s (2010) study of police notifications of domestic violence incidents to child protection services in England found that risk assessments undertaken by the police focused on the adult victim and perpetrator to the exclusion of the child:

...when you communicate with the family you communicate with the adults generally speaking and you don’t communicate with the children, the only time that you communicate with the children generally is when they are suspects...or they’re witnesses. (Specialist Supervising Police Officer 1)

Analysis of police incident records and notification forms in this study revealed that the police positioned children involved in domestic violence incidents on the periphery of their gaze: there was limited evidence of police officers talking to children or making even rudimentary direct assessments of the impact of domestic violence on the child (Richardson Foster, Stanley, Miller, & Thomson, 2012). In consequence, the information that the police communicated to child protection services about children’s experience of the incident was patchy and sparse; in some cases the information failed to convey the full extent of a child’s involvement in an incident. However, children’s social workers participating in this study were found to have limited engagement with the perpetrators of domestic violence. While children and mothers were the focus of social work attention in the majority of the 46 cases studied in depth, engagement with fathers was found in less than two-thirds of these cases and some of this engagement was at a minimal level (Stanley, Miller, Richardson Foster, & Thomson, 2011b).

These variations between agencies with regard to their primary client focus and the depth of their engagement with different family members impact on risk assessment processes and outcomes. Shlonsky, Friend, and Lambert (2007) describe how discourses of victimisation differ between agencies and across time and note that ‘Conflict in the home has, ironically, created conflict in the provision of services by agencies charged with different yet overlapping missions’ (p. 350). Such differences constitute a major challenge for the development of multi-agency risk assessment tools and procedures and, as we argue later in this paper, recognition of these differences is essential if progress is to be made towards these goals.
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