

Formerly Family Violence Prevention Fund

Trauma Informed Reporting of Domestic Violence and Child Abuse

Reporting Domestic Violence to Law Enforcement:

Trauma informed reporting begins with recognizing that a report made against a patient's wishes may lead to feelings of helplessness and frustration. Providers should inform patients about the process of reporting, to help them understand what to expect and involve them in making the report. These actions can minimize the untoward effects of reporting and give a patient more of a sense of control through the process. Sample script:

"I do have to make a report but you are welcome to listen as I call in the report so you know what is being said and there are no surprises. I can also add any concerns you have about what will happen if your partner finds out about the report."

Offer to connect the patient to an advocate on the phone, in order to create a safety plan around potential retaliation by her partner after the report is made.

Reporting Child Abuse in Homes Where There is Domestic Violence:

Key Considerations:

- Unless your state has a law that requires mandated reporting for children who are exposed to IPV, reporting all cases of children exposed to IPV is discouraged. Such practices often have unintended consequences that prevent mothers from seeking help and may cause greater risk to women and children. In addition, children may be unnecessarily removed from their mothers care.
- Non abusive moms may be charged with Failure to Protect, if reporting exposure to domestic violence as child abuse.
- Cross training with child welfare workers is essential to understand how batters may manipulate systems and service providers in ways that can further endanger battered women and their children.
- Promoting safety and keeping children in the care of their non battering parent whenever possible are core to protecting children and promoting resiliency.

If a report does have to be made to CPS:

- Inform the patient or client of your requirement to report.
- Explain what is likely to happen when the report is made.
- Ask your client if she is willing to call or meet with an advocate to develop a safety plan in case of retaliation.
- Maximize the role of the client in the process by asking; if she would like to be present when you make the report and, if she would like to be kept informed about the process.

Remember!

Making a report can never substitute for the important care you provide.