![Community Psychology — Social Justice Through Collaborative Research and Action](logo)

# Screen Mothers, Help Kids: An Innovative Community-Based Partnership Helps Amplify the Voices of Children

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Ninety percent of children who are exposed to domestic violence (DV) witness it firsthand, yet their exposure is often undetected (Huecker & Smock, 2020). Routine screening for the impacts of domestic violence (DV) within social services and child health appointments provide opportunities to identify



*Figure 1 Photograph by Community Health Network. CCO.*

children in need of DV-related services. Yet, ethically screening children directly and in age-appropriate ways can be difficult.

> We can combine a parental screen for DV with assessments of developmental delays in children to make active referrals to a community-based agency.

Through annual domestic violence screening, our project helps service providers better identify families experiencing DV. Children in the home can be referred to existing community-based services including immediate shelter, legal advocacy, case management, and safety planning. With three community partners, a non-profit contract research organization developed an easy-to-use DV screening.

**Highlights**

Children are often the unheard voices of domestic violence.

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Screening mothers for the impact of domestic violence on their kids is one way to connect kids with appropriate DV services in the community.

### The Screener

Creating the screener was a multi-stage process. The Pacific Institute for Research and Evaluation (PIRE) conducted a needs assessment informed by a Community Advisory Board of survivors of interpersonal violence. Key stakeholders and clients from the Home of the Innocents (HOTI) provided context of the lived experience of people in their community living with intimate partner violence. The Screener (Appendix A.) was developed with a team from three community non-profits located in Louisville, Kentucky: (1) Center for Women and Families that provides support and shelter to families experiencing dv, 2) Family Health Centers which include five offices serving the medical needs of low-income families, and (3) HOTI which provides transitional housing and independent living supports to young women ages 18-24 and their children.

## HOW DID A COMMUNITY PSYCHOLOGY PERSPECTIVE INFORM YOUR WORK?

We utilized theoretical perspectives from Community Psychology to ensure that potential clients/patients, community-based organizations, and researchers were on a level playing field when constructing the screening process and screener itself. Forming a strong community-based network builds capacity for DV and future efforts.

There are three steps to the screener:

**Step 1:** The screener begins with E-HITS, a five question DV screening for which we received permission from the developer (Sherin et al, 1998). Prior work in the Louisville Community showed us that E-HITS casts a wide net from which we can assess the likelihood of current violence. If the patient/client scored negative, meaning a total score of less than 9 and/or a score lower than 2 on Questions 1 and 5, the screening ends. If the patient/client scored positive, the screener continued to Step 2.

**Step 2:** The screener continues with a single harm question, developed by the full team as described above. The question: *Does the mother have concerns for her child's physical/emotional well-being due to violence in the household?* We know that impacts of DV in the home often impact children, if not resulting in violence directed towards them, from impacts of the stressful home environment. This question serves to alert the patient/client to this possibility in a non-confrontational way and provide information to the provider as to the readiness of the client/patient to seek help on their own. In many cases, the mother is aware and will affirm the need for a referral. In this case, the screening ends and an active referral is made. In some cases, the mother cannot or will not recognize the potential risk to the child. In rare cases, the impact of the domestic violence is nil. To ascertain a direction of referral in these discordant cases, the provider would proceed to Step 3.

**Step 3:** Some of the providers involved in our study were already using the CDC's Milestone Checklist (CDC, 2021) This developmental screener asks between 5 and 13 questions depending on the age of the child. Mothers screened are asked to answer for their oldest child living in the home. For children ages 6 and older, providers use the Columbia Impairment Scale (Bird et al., 1993) which asks 13 questions. Scoring for both screeners is explained in the attachment.

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**What Does This Mean For?**

*Research and Evaluation*: Although it is early in the project, the Screener is being implemented by a subset of our clinical partners with success.

*Practice*: Community-based organizations can use a common tool to address an issue (here, DV) and increase active referrals. Funding and research assistance may be needed to bring stakeholders together initially, but the work is sustainable after tools are developed and relationships are cemented.

*Social Action:* Committed social service providers are busy and often overwhelmed. They care deeply for their clients/patients but don't always know how make active referrals to other community-based organizations. Activists and community health promoters can serve as "connectors" with up-to-date information about what is going on in other agencies and possible ways that agencies can work together.

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**References**

Bird, H. R., Shaffer, D., Fisher, P., & Gould, M. S. (1993). The Columbia Impairment Scale (CIS): pilot findings on a measure of global impairment for children and adolescents. *International Journal of Methods in Psychiatric Research.*

Huecker, M. R., & Smock, W. (2018). Florida Domestic Violence.

Sherin, K. M., Sinacore, J. M., Li, X. Q., Zitter, R. E., & Shakil, A. (1998). HITS: a short domestic violence screening tool for use in a family practice setting. FAMILY MEDICINE-KANSAS CITY-, 30, 508-512.

United States Centers for Disease Control (CDC) (2021). CDC's Developmental Milestones. https://www.cdc.gov/ncbddd/actearly/milestones/index.html accessed 9/1/2021

## Appendix A. Sample IPV Protocol for Pediatrician at FHC to Complete

| | | |
|---|---|---|
| **Mother's Age:** | **# of Kids in Household:** | **Mother's Ethnicity:**<br>☐ Hispanic/Latino<br>☐ Non-Hispanic/Latino<br>☐ Unreported/refused to report |
| **Mother's Race:**<br>☐ White<br>☐ Black/African American<br>☐ Asian<br>☐ American Indian/Alaska Native<br>☐ Native Hawaiian<br>☐ Other Pacific Islander | ☐ More than 1 race<br>☐ Unreported/refused to report | ☐ Patient Declined Screening<br>☐ Section 1-Scored Positive<br>☐ Section 2-Scored Positive<br>☐ Section 3-Scored Positive<br>☐ Patient Screened Negative |

| | |
|---|---|
| **Referral/s Made:** Yes ☐ No ☐ | **If yes, where:** |

## Section 1: E-HITS

Please circle how often your partner did each of these things in the past 12 months.

**1. Has your partner ever physically hurt you in the past 12 months? positive if score ≥ 2**
1. Never
2. Rarely
3. Sometimes
4. Often
5. Frequently

**2. Has your partner ever insulted you in the past 12 months?**
1. Never
2. Rarely
3. Sometimes
4. Often
5. Frequently

**3. Has your partner ever threatened to harm you in the past 12 months?**
1. Never
2. Rarely
3. Sometimes
4. Often
5. Frequently

**4. Has your partner ever screamed or cursed at you in the past 12 months?**
1. Never
2. Rarely
3. Sometimes
4. Often
5. Frequently

**5. Has your partner ever forced you to have sexual activities in the past 12 months? positive if score ≥ 2**
1. Never
2. Rarely
3. Sometimes
4. Often
5. Frequently

**Patient Screens Positive if: Total Score ≥8 OR Question 1 or Question 5 Scores > 2**

**If positive, move to Section 2.**

## Section 2: Child Concerns Question

| | |
|---|---|
| Does the mother have concerns for her child's physical/emotional well-being due to violence in the household? **Positive if "YES"** | Yes ☐  No ☐ |
| Mother answered "no," but providers has concerns about this child.<br>**Please ask mother about her oldest child that is being seen in the appointment.** | Yes ☐  No ☐ |

**If yes to either question, move to Section 3a or 3b as appropriate.**

## Section 3a: CDC Milestone Checklist (ages 0-5)

**Positive if 2 or more are "yes"**

| *2 months* | | |
|---|---|---|
| 1.   Doesn't respond to loud sounds | Yes ☐ | No ☐ |
| 2.   Doesn't watch things as they move | Yes ☐ | No ☐ |
| 3.   Doesn't smile at people | Yes ☐ | No ☐ |
| 4.   Doesn't bring hands to mouth | Yes ☐ | No ☐ |
| 5.   Can't hold head up when pushing up when on tummy | Yes ☐ | No ☐ |
| *3-4 months* | | |
| 1.   Doesn't watch things as they move | Yes ☐ | No ☐ |
| 2.   Doesn't smile at people | Yes ☐ | No ☐ |
| 3.   Can't hold head steady | Yes ☐ | No ☐ |
| 4.   Doesn't coo or make sounds | Yes ☐ | No ☐ |
| 5.   Doesn't bring things to mouth | Yes ☐ | No ☐ |
| 6.   Doesn't push down with legs when feet are placed on a hard surface | Yes ☐ | No ☐ |
| 7.   Has trouble moving one or both eyes in all directions | Yes ☐ | No ☐ |
| *5-6 months* | | |
| 1.   Doesn't try to get things that are in reach | Yes ☐ | No ☐ |
| 2.   Shows no affection for caregivers | Yes ☐ | No ☐ |
| 3.   Doesn't respond to sounds around him | Yes ☐ | No ☐ |
| 4.   Has difficulty getting things to mouth | Yes ☐ | No ☐ |
| 5.   Doesn't make vowel sounds ("ah", "eh", "oh") | Yes ☐ | No ☐ |
| 6.   Doesn't roll over in either direction | Yes ☐ | No ☐ |
| 7.   Doesn't laugh or make squealing sounds | Yes ☐ | No ☐ |
| 8.   Seems very stiff, with tight muscles | Yes ☐ | No ☐ |
| 9.   Seems very floppy, like a rag doll | Yes ☐ | No ☐ |
| *7-9      Months* | | |
| 1.   Doesn't bear weight on legs with support | Yes ☐ | No ☐ |
| 2.   Doesn't sit with help | Yes ☐ | No ☐ |
| 3.   Doesn't babble ("mama", "baba", "dada") | Yes ☐ | No ☐ |
| 4.   Doesn't play any games involving back-and-forth play | Yes ☐ | No ☐ |
| 5.   Doesn't respond to own name | Yes ☐ | No ☐ |
| 6.   Doesn't seem to recognize familiar people | Yes ☐ | No ☐ |
| 7.   Doesn't look where you point | Yes ☐ | No ☐ |
| 8.   Doesn't transfer toys from one hand to the other | Yes ☐ | No ☐ |
| *10-12 Months* | | |
| 1.   Doesn't crawl | Yes ☐ | No ☐ |
| 2.   Can't stand when supported | Yes ☐ | No ☐ |
| 3.   Doesn't search for things that she sees you hide. | Yes ☐ | No ☐ |
| 4.   Doesn't say single words like "mama" or "dada" | Yes ☐ | No ☐ |
| 5.   Doesn't learn gestures like waving or shaking head | Yes ☐ | No ☐ |

| | | |
|---|---|---|
| 6. Doesn't point to things | Yes ☐ | No ☐ |
| 7. Loses skills he once had | Yes ☐ | No ☐ |
| **13-18 Months** | | |
| 1. Doesn't point to show things to others | Yes ☐ | No ☐ |
| 2. Can't walk | Yes ☐ | No ☐ |
| 3. Doesn't know what familiar things are for | Yes ☐ | No ☐ |
| 4. Doesn't copy others | Yes ☐ | No ☐ |
| 5. Doesn't gain new words | Yes ☐ | No ☐ |
| 6. Doesn't have at least 6 words | Yes ☐ | No ☐ |
| 7. Doesn't notice or mind when a caregiver leaves or returns | Yes ☐ | No ☐ |
| 8. Loses skills he once had | Yes ☐ | No ☐ |
| **19 Months - 2 Years** | | |
| 1. Doesn't use 2-word phrases (for example, "drink milk") | Yes ☐ | No ☐ |
| 2. Doesn't know what to do with common things, like a brush, phone, fork, spoon | Yes ☐ | No ☐ |
| 3. Doesn't copy actions and words | Yes ☐ | No ☐ |
| 4. Doesn't follow simple instructions | Yes ☐ | No ☐ |
| 5. Doesn't walk steadily | Yes ☐ | No ☐ |
| 6. Loses skills she once had | Yes ☐ | No ☐ |
| 7. Doesn't use 2-word phrases (for example, "drink milk") | Yes ☐ | No ☐ |

| | | |
|---|---|---|
| **2 to 3 Years** | | |
| 1. Falls down a lot or has trouble with stairs | Yes ☐ | No ☐ |
| 2. Drools or has very unclear speech | Yes ☐ | No ☐ |
| 3. Can't work simple toys (such as peg boards, simple puzzles, turning handle) | Yes ☐ | No ☐ |
| 4. Doesn't speak in sentences | Yes ☐ | No ☐ |
| 5. Doesn't understand simple instructions | Yes ☐ | No ☐ |
| 6. Doesn't play pretend or make-believe | Yes ☐ | No ☐ |
| 7. Doesn't want to play with other children or with toys | Yes ☐ | No ☐ |
| 8. Doesn't make eye contact | Yes ☐ | No ☐ |
| 9. Loses skills he once had | Yes ☐ | No ☐ |
| **3 Years to 4 years** | | |
| 1. Can't jump in place | Yes ☐ | No ☐ |
| 2. Has trouble scribbling | Yes ☐ | No ☐ |
| 3. Shows no interest in interactive games or make-believe | Yes ☐ | No ☐ |
| 4. Ignores other children or doesn't respond to people outside the family | Yes ☐ | No ☐ |
| 5. Resists dressing, sleeping, and using the toilet | Yes ☐ | No ☐ |
| 6. Can't retell a favorite story | Yes ☐ | No ☐ |
| 7. Doesn't follow 3-part commands | Yes ☐ | No ☐ |
| 8. Doesn't understand "same" and "different" | Yes ☐ | No ☐ |
| 9. Doesn't use "me" and "you" correctly | Yes ☐ | No ☐ |
| 10. Speaks unclearly | Yes ☐ | No ☐ |
| 11. Loses skills he once had | Yes ☐ | No ☐ |

| 4 Years to < 6 Years | |
|---|---|
| 1. Doesn't show a wide range of emotions | Yes ☐    No ☐ |
| 2. Shows extreme behavior (unusually fearful, aggressive, shy or sad) | Yes ☐    No ☐ |
| 3. Unusually withdrawn and not active | Yes ☐    No ☐ |
| 4. Is easily distracted, has trouble focusing on one activity for more than 5 minutes | Yes ☐    No ☐ |
| 5. Doesn't respond to people, or responds only superficially | Yes ☐    No ☐ |
| 6. Can't tell what's real and what's make-believe | Yes ☐    No ☐ |
| 7. Doesn't play a variety of games and activities | Yes ☐    No ☐ |
| 8. Can't give first and last name | Yes ☐    No ☐ |
| 9. Doesn't use plurals or past tense properly | Yes ☐    No ☐ |
| 10. Doesn't talk about daily activities or experiences | Yes ☐    No ☐ |
| 11. Doesn't draw pictures | Yes ☐    No ☐ |
| 12. Can't brush teeth, wash and dry hands, or get undressed without help | Yes ☐    No ☐ |
| 13. Loses skills he once had | Yes ☐    No ☐ |

## Section 3b: Columbia Impairment Scale (ages 6+)

**Please ask mother about her oldest child that is being seen in the appointment. Positive if Positive if total score ≥ 15 or any individual item score is ≥ 3 for any age.**

| In general, how much of a problem do you think [she/he] has with: | No Problem 0 | ........... 1 | Some Problem 2 | ........... 3 | Very Bad 4 | | Total Score |
|---|---|---|---|---|---|---|---|
| 1 getting into trouble | 0 | 1 | 2 | 3 | 4 | n/a | |
| 2 getting along with (you/[her/his] mother/mother figure). | 0 | 1 | 2 | 3 | 4 | n/a | |
| 3 getting along with (you/[her/his] father/father figure). | 0 | 1 | 2 | 3 | 4 | n/a | |
| 4 feeling unhappy or sad? | 0 | 1 | 2 | 3 | 4 | n/a | |
| **How much of a problem would you say [she/he] has:** | | | | | | | |
| 5 with [her/his] behavior at school? (or at [her/his] job)? | 0 | 1 | 2 | 3 | 4 | n/a | |
| 6 with having fun? | 0 | 1 | 2 | 3 | 4 | n/a | |
| 7 getting along with adults other than (you and/or [her/his] mother/father)? | 0 | 1 | 2 | 3 | 4 | n/a | |
| **How much of a problem does [she/he] have:** | | | | | | | |
| 8 with feeling nervous or afraid? | 0 | 1 | 2 | 3 | 4 | n/a | |
| 9 getting along with her/his] [sister(s)/brother(s)]? | 0 | 1 | 2 | 3 | 4 | n/a | |
| 10 getting along with other kids [her/his] age? | 0 | 1 | 2 | 3 | 4 | n/a | |
| **How much of a problem would you say [she/he] has:** | | | | | | | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 11 | getting involved in activities like sports or hobbies? | 0 | 1 | 2 | 3 | 4 | n/a | |
| 12 | with [her/his] school work (doing [her/his] job)? | 0 | 1 | 2 | 3 | 4 | n/a | |
| 13 | with [her/his] behavior at home? | 0 | 1 | 2 | 3 | 4 | n/a | |
| | **TOTAL SCORE** | | | | | | | /52 |
| | **Positive if Total Score is ≥ 15 or Any Individual Item Score is ≥ 3** | | | | | | | |

**Total Score** | /52

*For more information about this project, please contact Dr. Katherine Atwood, Lead Evaluator*

The "Expansion of screening, referral and trauma-informed services to meet the needs of children exposed to domestic violence and mothers who are victims of domestic violence (DV) residing in Jefferson County, Kentucky" Project is one of the 26 grantees participating in the Specialized Services for Abused Parents and Children (SSAPC) program funded by the Family and Youth Services Bureau (FYSB). The capacity building projects serve as leaders for improving responses to children, youth and parents experiencing domestic violence. The program's goals include:

- Improving systems and responses to abused parents and their children exposed to domestic violence
- Coordinating or providing new or enhanced residential and non-residential services for children exposed to violence
- Enhancing evidence-informed and practice-informed services, strategies, advocacy and interventions for children & youth exposed to domestic violence

Learn more about this project and SSAPC demonstration initiative here:
https://promising.futureswithoutviolence.org/advancing-the-field/communities-in-action/specialized-services-for-abused-parents-and-children-grantees/