

# Abuse Assessment Screen

## Quick Facts about the Tool

**Author(s):** Wiist, William H., and Judith McFarlane. 1999. "The Effectiveness of an Abuse Assessment Protocol in Public Health Prenatal Clinics." American Journal of Public Health 89(8):1217–21.

<http://ajph.aphapublications.org/doi/pdf/10.2105/AJPH.89.8.1217>

**Author's Intent:** Reduce violence against women by asking and responding to women experiencing violence.

**About the Tool:** There are 5 questions and a Plan of Action if someone screens positive. It is available in English and Spanish and the initial research included use with Spanish-speaking and English-speaking women.

## Purpose

Pregnant mothers and mothers of young children are at significant risk of violence. The Wisconsin Department of Children and Families added this tool to the suite of screens and assessments as a response to the prevalence of violence against women and the opportunity to support women in establishing and maintaining safety through high quality evidence-based home visiting.

## Protocol

- Be compassionate, open, and respectful when introducing the tool
- Make sure that the person completing the screen can speak freely/safely
- Make sure the screening process is conversational, unhurried, and delivered calmly
- If you are aware of abuse history already, acknowledge awareness and explain that the screen simply insures that you haven't overlooked something important that happened in the family's life
- Record responses and determine if there is a positive or negative screen (Do not leave a copy of the materials in the home as this may increase risk.)
- Build a safety plan if the threat is current carefully considering the danger that exists if part of the plan involves leaving the abuser or children
- Provide a warm hand-off to community resources if needed
- Inquire with the person about need for ongoing support with a warm hand-off to a community referral if the threat isn't immediate but the person needs additional mental health support
- **Complete the tool within 60 days of enrollment and complete the follow-up on Plan of Action within 60 days of completion of Abuse Assessment Screen**
- Enter data into SPHERE

## Pitfalls

- Don't assume that people are necessarily ready or resistant to talk about abuse
- Don't just hand the family the screen and say, please fill this out
- Don't wait until you're entering the data into SPHERE to determine if it is a positive or negative screen

## Value to Families

- People appreciate receiving individualized services that are informed by their own lived experiences
- Asking about abuse in a respectful and compassionate way can normalize and reduce stigma for survivors and give permission for them to give voice to their experience if they so choose
- Trauma informed services make a difference in family/child outcomes
- Awareness of unmet needs provides an opportunity for connecting people with additional supports and resources for growth and healing

## Framing it for Families

- **Convey Compassion:**  
I really want to understand you and your family's history and needs so that I am able to shape services to what is unique about your family.
- **Be Open/Explain Why:**  
We ask these questions to all families we work with because often what parents experience in their own childhood can influence what happens or how they feel when they raise children of their own.
- **Emphasize Parent Control:**  
I am going to ask you/go through some questions with you about difficult experiences you may or may not have had. If you want to talk more about what a question means, let me know. We can do that. If there is a question you'd prefer not to answer, let me know and we can skip it.

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## Usefulness to Practitioners

- Provides an opportunity to support families in safety planning
- May help prevent unintentionally ignoring or creating barriers to build a working alliance with home visiting families
- Can build trust and strengthen partnership if person's responses or request not to respond are honored
- Helps to contextualize family goal setting
  - Understanding a family's trauma history opens the door to discuss what parenting practices a parent wants to continue or change
  - Gives insight to home visitors about barriers families may be experiencing in meeting goals. A family may be having trouble making progress with a parenting practice they have little or no procedural memory of from their own childhood.
  - Choosing parent education strategies: When trauma or toxic stress histories have disrupted or inhibited the development of procedural memories related to care and nurturing, meeting goals requires less of a focus on sharing curriculum and didactic teaching with a parent and more hands-on coaching.

## Quick Facts:

### According to the National Coalition Against Domestic Violence:

- One in every four women will experience domestic violence in her lifetime.
- An estimated 1.3 million women are victims of physical assault by an intimate partner each year.
- The majority (73%) of family violence victims are female.
- Females were 84% of spousal abuse victims and 86% of abuse victims at the hands of a boyfriend.
- Boys who witness domestic violence are twice as likely to abuse their own partners and children when they become adults.

### According to the Wisconsin 2014-2020 Long range Plan for a Safe Wisconsin

- 714,000 Wisconsin women have been physically abused, sexually assaulted or stalked by an intimate partner
- Domestic violence victimization leads to a significantly higher risk of depression, anxiety, post-traumatic stress disorder, suicide attempts and drug abuse.

## Home Visitor Safety Considerations

- Meet with the family/parent at the office if the situation does not feel safe
- Establish check in times with your office
- Park with front of vehicle pointed toward exit
- Observe and listen before entering a home
- Do not enter the home until you see the client at the door
- Position yourself near the door/exit in the household
- Have emergency numbers in your cell phone and set on auto-dial
- Always stay aware of your surroundings and look for behavioral clues
- Pay attention to warning signs of a dangerous situation

*(adapted from [tcfv.org](http://tcfv.org) home visitor self-care)*

## Key Ingredients for a Safety Plan from the National Coalition Against Domestic Violence

### If you are still in the relationship:

- Think of a safe place to go if an argument occurs - avoid rooms with no exits (bathroom), or rooms with weapons (kitchen).
- Think about and make a list of safe people to contact.
- Keep change with you at all times.
- Memorize all important numbers.
- Establish a "code word" or "sign" so that family, friends, teachers or co-workers know when to call for help.
- Think about what you will say to your partner if he/she becomes violent.

### If you have left the relationship:

- Change your phone number.
- Screen calls.
- Save and document all contacts, messages, injuries or other incidents involving the batterer.
- Change locks, if the batterer has a key.
- Avoid staying alone.
- Plan how to get away if confronted by an abusive partner.
- If you have to meet your partner, do it in a public place.
- Vary your routine.
- Notify school and work contacts.
- Call a shelter for battered women.

*Written plans can be found by an abuser and trigger violence. Discussion-based planning can help.*

See [www.nacdv.org](http://www.nacdv.org) for safety planning guidance.

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## Tips for Supervisors

### Preparation

#### Familiarize Yourself and Staff with the Signs of Secondary Trauma and Compassion Fatigue.

- [www.proqol.org](http://www.proqol.org)

#### Recruiting Home Visiting Staff:

- Let potential home visitors know that disclosures of abuse among participating families are NOT uncommon
- Give candidates a few minutes to review the screen, ask them to role play administering the screen during the interview

#### Orienting Home Visiting Staff:

- Discuss the amount of domestic violence and other forms of abuse in Wisconsin families and families in your caseload
- Describe the impacts of domestic violence on child development
- Schedule attendance at the next Abuse Assessment Screen training offered by the UW Milwaukee Training Partnership
- Share and review these tools with new home visitors or home visitors expressing discomfort with administering the scale
- Provide multiple role play opportunities within the first 90 days of employment conducting the screen
- The first time administering the screen should not be with a home visiting family
- Support safety planning with clear expectations and agency policies and protocols about what to do if a home feels unsafe

### Reflection

- Discuss feelings and reactions to administering the Abuse Assessment Screen with home visitors during staff meetings and/or during one-on-one supervision
- Listen without judgment
- Explore if any of the reflective exercises or other reflective activities which might help process delivery of the screen
- The supervisor and home visitor can consider together the implications of screening results on service delivery and add ideas to case notes
- Identify staff who are comfortable and effective in delivering the screen and pair them with colleagues to practice skills

### Administration

- Monitor completion of the Abuse Assessment Screen using the Home Visiting Data Collection Table
- Monitor documentation of screening results in Sphere at least quarterly for newly enrolled families
- Analyze data to see if there are any trends in completion rate, documentation of follow-up, and family outcomes
- The supervisor and home visitor can consider together the implications of screening results on service delivery and add ideas to case notes

## Reflective Exercise

### Home Visitor Safety Plan

- Understand your agency's domestic violence home visiting protocol. (See follow-up resources 1<sup>st</sup> link)
- If domestic violence is disclosed by a client, discuss with a supervisor whether or not it is safe to deliver home visiting services in the home?

### 5 Minute Journal Prompts

- What is the **worst** thing that can happen if I offer the opportunity to complete the screen in a compassionate, open, and respectful way?
- What is the **best** thing that can happen if I offer the opportunity to complete the screen in a compassionate, open, and respectful way?

### Debrief (With a supervisor, colleague, or on my own)

- Did I learn anything new about the family?
- How can this information guide me to better support the home visiting family?
- Is there any follow-up required before or at the next home visit?
- What did the family tell me explicitly that might change how I will provide coaching?
- Do I need to do something in particular to process what I learned with this screen?

### Follow-up Resources

#### Domestic Violence Protocol Template

[http://www.tcfv.org/wpcontent/uploads/2012/09/Domestic\\_Violence\\_Protocol\\_for\\_Home\\_Visiting\\_Programs.pdf](http://www.tcfv.org/wpcontent/uploads/2012/09/Domestic_Violence_Protocol_for_Home_Visiting_Programs.pdf)

#### The Abuse Assessment Screen-

Read a summary of the research about the screen.

<https://www.crimesolutions.gov/ProgramDetails.aspx?ID=165>

#### In Your Community-

Find domestic violence resources in Wisconsin.

<http://www.wcadv.org/gethelp/search>

#### Service Providers and Resources-

Find Sexual Assault Survivor Services in Wisconsin.

<http://www.wcasa.org/pages/SASPs.php>