PERCEPTIONS OF CHILD PROTECTION WORKERS ABOUT VIOLENCE AGAINST WOMEN

By

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A thesis
Submitted to the School of Graduate Studies
In Partial Fulfillment of the Requirements
For the Degree
Master of Social Work

McMaster University

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TITLE: Perceptions of Child Protection Workers about Violence against Women

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NUMBER OF PAGES: vii, 79
Abstract

Research on child welfare practice, where children have witnessed violence against their mothers has identified paradoxical outcomes: victimized mothers who require the most help are often blamed, pathologized, and labeled as 'bad'. These women are ultimately responsible for the physical, emotional, mental, and environmental welfare of their children, whereas the male perpetrators remain practically unnoticed. Despite the fact that violence can occur within any relationship where there are imbalances of power, this research study only focused on heterosexual couples in which violence has occurred against women.

The objective of this qualitative study was to investigate how child protection workers define violence against women and perceive/define intervention plans. I also explored differences in definitions and perceptions between experienced and non-experienced child protection workers, as it was assumed that child protection workers are not 'experts' in women abuse. It was also assumed that child protection workers lacked specific interpersonal violence training, which often contributed to the re-victimization of women. Nine child protection workers, who work for a Children’s Aid Society within the Hamilton area, were interviewed about violence against women and child neglect issues. The participants varied in levels of education, experience in child protection and experience in social work. An analysis of the findings led to the emergence of five themes: (1) the belief that it is the mothers job to protect her children; (2) mothers can simply leave; (3) mothers needs are a separate issue from children’s needs; (4) deficits in staff training; and (5) moral and ethical dilemmas in working with mothers who were victims of interpersonal violence. Recommendations for anti-oppressive social work practice within the context of child welfare are made, and implications for future research are discussed.
Acknowledgements

This research project was a two year long endeavour that could not have been completed without the assistance, support, and commitment of the many important individuals of my life. After losing my first child in 2005, just prior to my original thesis deadline, I was so overcome with the loss and despair that completing this project seemed close to impossible. It was due to five very important entities in my life that I gathered the courage, motivation, and will to embark on this project again and work towards its completion. I would like to, first, thank God for never leaving my side during the darkest and most devastating time in my life and for guiding me out of the dark and into life again. Thank you for providing me with guidance, and granting me the greatest blessing of all, my new healthy baby girl, Ava Grace. Secondly I would like to thank my daughter, Ava, for her wonderful motivating smiles and cooperation with taking her daily naps while I worked on this project, along with my husband who never gave up on me and inspires me each and every day. My husband has provided me with a great foundation of love, support and respect, along with an unending source of encouragement, motivation and guidance. Thank you for standing by me always and walking with me, hand in hand, during the most horrific period of our lives.
Over the last two years, the School of Social Work staff and professors at McMaster University have been nothing short of wonderful, understanding, and supportive. I would like to thank them for their guidance, knowledge, encouragement, sensitivity and assistance. I would especially like to thank my research supervisor and mentor, Sheila Sammon, whose encouragement, advice, motivation, understanding, and respect have greatly helped me through the journey of research and thesis writing, but also of healing after the loss of my child and the difficulties of my subsequent pregnancy. Thank you believing in me, when I did not and for not letting me quit, when I was ready to give up on it all. Thank you for being there for me as a professor, mentor and friend.

Lastly, I would like to thank the agency, participants and management for believing in this issue and showing interest in my research and social work within the field of child protection.
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Introduction

Prologue: Why I Chose this Area of Study

Issues pertaining to violence against women and child witnessing of women abuse are very important and a great area of interest for me. I became extremely fascinated and concerned with this topic shortly after commencing my first job as a child protection worker for a local Children's Aid Society. It was only after embarking on this research that I began to realize that there were also very personal reasons as to why this topic was of interest to me.

It is my opinion that we all hold our own unique and individual lens through which to see the world. Within this area of research, I have chosen to take a critical and analytical stance when examining child protection around violence against women. My views on this issue are also influenced by historic and cultural specificity, as they would be quite varied had I grown up in a different era or been raised in an alternate country. My culture, upbringing, country of origin and residence have framed my perceptions and opinions on this particular issue. During my undergraduate and graduate studies I have continually reflected on how my knowledge or what I deem as "truth" has been shaped by social processes. An example of this is the manner in which I define the treatment of women, who are victims of violence, within the system of child welfare as a great social injustice. My knowledge of this has been molded by my experience as a woman, that of my mother's and the experiences of those women, both clients and colleagues, whom I worked with during my time within the field of child welfare. This knowledge also comes in part from what I have read, viewed on
television, learned within a class room environment and experienced as the child of a woman who was victimized by her partner.

I was born in Portugal and resided there until the age of nine. Although I did not realize this until my twenties, much of my perceptions of roles and individual duties were shaped during my childhood in Portugal. Behaviours that I once viewed as 'acceptable' or 'normal', I now view as degrading and abusive towards women. Within my native society, although certainly also found here in our Western world, women were viewed as objects and inferior to men. I grew up surrounded by stereotypes about women and our place within society. It was not until I actually entered post secondary education here in Canada that I began to re-examine such views and challenge some of those beliefs and stereotypes. This was especially true within my family and my challenges were met with great hostility and objection both from my father and my mother. Growing up, I was raised to believe that yelling and often hitting a woman by their husbands was acceptable and that often the blame was on the woman for ‘causing’ such a reaction from her husband. Within my household, which consisted of my mother, father, and younger sister, our role was to obey and serve the needs and demands of my father. He made the rules and enforced them with threats and acts of physical force, and my sister and I were taught that that is simply how things are. Although less transparent here in Canada, it became very obvious to me that women are equally oppressed, not only within the personal domain, but also within the public one. This became especially clear to me when I began working with women and children within the field of child welfare. Many of my
child protection cases dealt with issues of violence against women and children witnessing violence against their mothers. It quickly became apparent that these women were not only being victimized within their home, but that the actions taken by me, in consultation with the child protection agency and its policies, these women were also victims of society. I also began to make observations that treated women and mothers differently than that of men and fathers. I detected that case files, for example, were opened under the mother’s name, even when the father was the primary caregiver or the mother had no contact with the children. I also observed that contracts and case plans generally, if not exclusively, identified the mother as the offending or co-offending parent and as the primary caregiver. I also really struggled with the label of ‘failing to protect’ placed on mothers who were victims of violence and were deemed as failing to protect their children if they did not leave the abusive relationship, along with children being placed in care under the ‘failure to protect’ umbrella. Although I recognize children witnessing violence as a grave social problem, I do not believe it to be a separate entity from the social problem of violence against women. I believe these two ‘separate’ problems to actually be too interconnected and woven to be treated and addressed separately. I further affirm that continuing to address them separately will only re-victimize both mothers and children.

My position on both violence against mothers and children witnessing violence against mothers is shaped and influenced mainly by feminist theory and doctrine. According to feminist theory, violence against women results from gender inequality
on the social level (Yodanis, 2004). In accordance with the theory, the more unequally women are compared to men in society, the more likely men are to be violent toward women and the more likely these women are to be re-victimized within the social system. I concur with the statement made by Callahan (1993) in that “women are oppressed because they are women; men are oppressed for other reasons but never because they are men” (p. 175). Hansen and Haraway (1997) argue that “battering is recognized as occurring within the social context that devalues women while promoting the privileges of men” (p. 171). Theoretically speaking, when men dominate family, political, economic and other social institutions both in number and in power, the policies and practices of such institutions, such as child welfare, are likely to encompass, reciprocate and legitimize male domination over women. I believe that we need to look beyond individual level variables to understand and develop appropriate strategies for reducing violence against women and thereby also reducing the number of children who witness violence against women.

I do not intend, in anyway, to down play real and serious violations of parental duties and circumstances of child abuse/neglect. Nonetheless, the definition of deviancy in motherhood within child welfare, such as labeling a mother as an offending parent in case where she is a victim of interpersonal violence, does not necessarily signify practices that actually harm children. I simply believe that women and children are better served if the issues of violence against mothers and children who have witnessed such abuse are addressed in a collective, rather than an individualistic manner. I also believe that the responsibility for that abuse should be
placed on the abusers themselves, and on the social systems that support their actions and inhibit women from being able to leave such relationships.

Objectives

Throughout my research on North American child welfare practice, where children have witnessed violence against their mothers, I have noted themes and trends of mother-blaming, pathologizing of women as 'bad' mothers, and placing women as ultimately responsible for the physical, emotional, mental, and environmental welfare of their children. Male perpetrators remain practically unnoticed. Although violence may occur in any relationship where there exists an imbalance of power, this research study will primarily focus on heterosexual couples in which men have abused women. The objective of this qualitative study is to investigate how child protection workers define violence against women and perceive/define intervention plans. It also explores differences in definitions and perceptions between experienced and non-experienced child protection workers. The child welfare context in Ontario, Canada will be discussed, along with issues of power, the social problem of children's witnessing adult domestic violence as a social problem, and the 'neglect' and 'failure to protect' arguments. Implications and recommendations for anti-oppressive social work practice and social justice will be reviewed, along with suggestions for future research and practice initiatives.

Although the current language used when referring to female victims of violence is 'violence against women', for the purpose of this research study, the term 'violence against women', will be used interchangeably with 'violence against
mothers', as this study focuses specifically on women who are mothers and also victims of interpersonal violence perpetuated by male partners.

**Literature Review**

**Systemic Maltreatment of Victimized Mothers**

In order to understand child welfare's response to mothers whose children have witnessed their victimization, it is important to place this problem in context. I will discuss the functions of a child welfare system, the etiology of the social problem, perceptions of child witnessing, an understanding of why women stay in an abusive relationship, a consideration of issues pertaining to neglect and definitions, and how these issues translate into the current problems within the child welfare system.

**Social Work practice in child welfare today-Child Welfare Context in Ontario**

Child welfare organizations have developed from very small charity and community organizations into large bureaucratic entities throughout North America. Canada has child welfare agencies in each province; in Ontario they are typically referred to as Children's Aid Societies (CAS). Today, the child welfare system is a highly organized and formalized system that is carefully monitored by the community and is bound by governmental policies and legislation (OACAS: Risk Assessment Model, 2005). These policies dictate how the agencies should operate and intervene with children and families within their provinces. Currently in Ontario, the Child and Family Services Act of 1984 legislates how child welfare agencies should operate (OACAS: Risk Assessment Model, 2005). The primary mandate of child welfare is expressed as the protection of children. Child welfare workers are involved in
activities that exercise authority, including investigation of complaints, insistence upon particular changes in parental behavior, and apprehensions of children from the care of their parents (Swift, 1995). Profiles of child welfare clients illustrate that most are poor, many are single, and many are members of racial minorities, disproportionately of Native origin. Approximately 60% of clients in Ontario are single women or women with "little family support" (Swift, 1995), and women still continue to be identified as primarily responsible for the ultimate well being of their children.

Child protection workers operate within a very strong position of power considering their expertise in the field of child protection. The tasks associated with the roles of CAS workers are to define, assess, label and identify 'bad parents' within the community and formulate detailed plans of how to alter client's 'problematic' behaviors. The role of child protection workers is to produce evidence of neglect and parental failure through documentation and affidavits for court purposes. In situations of child neglect, including those related to cases of violence against mothers, workers use their power to identify concerns relating to the gender-specific role of the mother, such as home maintenance, dental and physical hygiene and health of the children, and her mental/emotional state. Through these processes, child protection workers essentially investigate all facets of the lives of their clients, thereby being extremely intrusive. Thus, this ability to intrude, assess, and judge carries a great responsibility, along with a crucial need for respect and sensitivity. It is, therefore, essential for social workers to understand what it means to have power and influence in order to

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1 The term 'bad parents' or 'bad parent' is being used within this paper to refer to how parents who abuse/neglect their children are characterized in society.
acknowledge the implications that power has for practice and on the lives of their clients, especially when working with women who have been victims of violence. While an educated and well experienced social worker is likely to assist a client in attaining much meaningful and affective change; a social worker that is ill equipped and lacks understanding of particular issues, such as violence against mothers, can, likely, do much harm, as they would be unable to address or meet the needs of that client.

Although this paper will primarily focus on potential misuses of power, social workers can also use power in a very positive and meaningful manner. They can influence clients to work toward mutually agreed upon goals and advocate on behalf of clients so as to attain resources within their community, such as subsidized housing. Further, social workers can provide clients with the tools and self esteem to empower themselves and better their lives and those of their children.

Social workers relationship with power is very complicated, particularly for social workers who work with involuntary clients, such as child protection workers. According to Foucault, "power is tolerated only on condition that it masks a substantial part of itself. Its success is proportional to its ability to hide its own mechanisms" (Foucault, 1976 in Burr, 1995, pp. 71). This statement suggests that in order to access and utilize power, certain aspects of it need to be kept hidden so that the relationship between the holder of power and that of the one without power remains unequal and unbalanced. This applies to social workers, particularly those who work within the field of child protection because, as it will be discussed further in latter paragraphs,
clients of child protection workers often are unaware of all aspects of power possessed by their workers. For example, they are not aware of the range of issues addressed in assessments and investigations, thereby the power remaining mostly with the protection worker. Child protection workers are expected to attain the socially desired and mandated outcome of protecting the child and holding the mothers primarily accountable, which often leads to the use to coercive power as a means of controlling their clients. For example, a child protection worker may use the threat of removing the children from the family home as a means of 'convincing' the mother, who is also a victim of violence, to leave her abuser or the mother may be asked to participate in certain programs in order to have her children remain in their care. These are examples of obvious uses of coercive power. Very rarely are clients advised of all aspects and areas of an investigation or do they have access to such assessment and investigation forms. Hidden uses of coercive power, for instance, includes social workers using acts of kindness and politeness as a means of persuading a woman to allow the worker to enter her home, so that they can then assess the maintenance of the home and examination of the children. Often women involved with child welfare are being assessed and evaluated for facets of their lives such as their mental health or house keeping abilities, without their knowledge, and rarely are they aware of their rights as participants in this process. This observation is masked under the guise of protecting children. In such cases, the original referral may revolve around issues of violence against the mother, nevertheless, the worker
will still assess the mother on all areas, including, for example, the cleanliness of her home.

As Foucault suggests, the power is tolerated because the motive is noble and the observation justifiable and somewhat invisible (Margolin, 1997). A child welfare worker then often enters a home and begins an assessment under the promise of helping, but these practices pose very unique problems for female clients, particularly in cases where violence against women is a concern. Mothers who are also victims of violence are typically very isolated and financially dependent on the abusive partner. Their financial, social, and emotional resources are often limited (Hartley, 2004)

When a child protection worker assesses a mother on the cleanliness of the home, her hygiene, the health and hygiene of the children, along with the academic and social performances of her children without considering the unique dynamics and hardships faced by women who are victims of violence, she is re-victimized. By identifying the mother, who is in an abusive interpersonal relationship, as ‘neglectful’ indicates that she is responsible for her children being exposed to and witnessing violence in the home. This suggests that the belief is that the mother is somehow in control of her surroundings and able to assure her own safety and that of her children. In assessing the home environment, without considering the impact of violence on a family, also discounts the unique issues faced by women within these violent relationships. This will be further discussed within the “Understanding Why Women Stay” section.
One of the core goals of social work is to encourage self-determination of the client by focusing on empowerment, yet how can a woman 'self-determine' if faced with threats of removal of her children, physical violence, or a life of limited resources? If the client is unaware of the areas of assessment and the focus remains on her individual flaws, how can empowerment ever be established? The legacy of individual pathologization within the field of child welfare, specifically in the form of mother-blame, has been well documented (Margolin, 1997, Swift, 1995) “in fact, training and socialization in counseling professions, such as social work and child protection training, frequently involve learning to accommodate to high levels of mother-blaming” (Krane and Davies, 2000). In cases of violence against mothers, intervention plans are typically focused around the mother and her responsibilities for protecting her children from witnessing violence, with the consequence of removal of the children if she fails to meet the case objectives (Scourfield, 2001).

While the mothers are continuously being assessed and analyzed within the practice of child welfare, those same assessment tools do not address or recognize the power of the male who is abusing the mother or the impact of children witnessing such violence. Rather, the male perpetrator is often left unnoticed and unaccountable, while the mother is deemed as an offending parent. The onus falls on the mother to protect her children, without any thought given to how the mother will assure her own safety. The fathers are also virtually invisible when it comes to writings and research about domestic issues, such as child rearing and house keeping. Thus, even within our current culture and historically, women are viewed as the primary caregivers
According to feminist theory, it is through fear and intimidation that one group is able to control another's behaviour thereby maintaining control of social institutions (Yodanis, 2004). It can be argued here that holding the mother solely accountable for the wellbeing of her children and using the threat of apprehension as a means of obtaining the desired outcome is a form of control and oppression.

"Power is more than a constraining or limiting force; it is not just about prohibitions and limits. There is a strong constructive element to power, and it is this positive aspect that makes possible and shapes many of our contemporary social institutions. It is the everyday operation of this ordering, organizing, and totalizing principle, which we have become so accustomed to, that Foucault would like for us to appreciate" (Sproule, 2006).

Foucault emphasizes that disciplinary power is an inherently suspicious power that functions primarily through surveillance. Foucault identified three procedures related to this type of control. They include hierarchical surveillance, normalizing judgment, and the examination (Foucault, 1977 in Parton, 1999). "Hierarchical surveillance" refers to how social workers, for example, are able to create individual knowledge about human bodies, such as mothers and issues of neglect, on a continuous basis, through assessment, but that they too are being supervised and having definitions made about them by their superiors. Mainly, it refers to how child protection workers' continued analysis of individual flaws and problems have defined their views, definitions, and understanding of certain individuals operating within society. However, child protections workers' role and expectations of conduct have also been constructed by their superiors, such as supervisors and their governing body, through definitions and understanding of how
child protection workers should operate within their role, and what results they should attain in cases of child neglect.

Within the field of child welfare, social workers operating in child welfare create a sense of *panopticon*, which literally means *that which sees all* (Foucault, 1977 in Parton, 1999). *Panopticon* originates from the Penopticon prison, which was designed to allow guards to see their prisons, but not allow prisoners to see guards. The building was circular, with prisoner's cells lining the outer diameter, and in the center of the circle was a large, central observational tower. At any given time, guards could be looking down into each prisoner's cells - and thereby monitor potentially immoral behavior - but carefully-placed blinds prevented prisoners from seeing the guards, thereby leaving them to wonder if they were being monitored at any given moment. Thereby forming the idea of clients always being watched, but child protection workers are also under the impression that they too are always being observed and evaluated (Moffatt, 1999) by their superiors. Child protection workers, then, are monitored and carefully watched by their superiors through the review of their documentation and completion of the necessary risk assessments. In considering this, it can also be concluded that the child welfare agency is also operating within a *panopticon*, as they are also being watched by the government, through the use of audits and the analysis of record keeping and statistical documentation. Thus, while child protection workers hold power above their clients, power is held over them by their superiors. The chain continues all the way to government bodies and individuals.
This hierarchical surveillance can also be seen as an example of normalization, in which there is a continuous evaluation of conduct. Normalizing judgment refers to the power inherent in all social expectations (Foucault, 1977 in Parton, 1999).

"Its purpose is to establish the gaps that exist between expectation and practice, so these deviations can be corrected. When these irregularities are discovered, they require a punitive response, which usually takes the form of required training, and ideally, a uniformity of activity is restored. John Sproule, 2006".

The power, which operates through normalizing judgment, lies within the use of examinations and assessments, such as conduct for example. This is an important piece in discussing issues of power in child welfare because it suggests that through normalizing judgment, child welfare workers do not recognize their actions as mother-blaming or re-victimization of mothers because they are simply examining individuals based on the definitions already made. The message to clients is simply that they must conform to the socially defined forms of conduct or risk losing their children to the care of the CAS. As a result of the CAS definitions of mothering and neglect, it is justifiable for mothers and their domain (such as condition of home and hygiene of children) to constantly be assessed and evaluated even when the reason for CAS involvement relates to concerns of violence against the women.

By “examination”, Foucault is referring to a method of control that combines hierarchical surveillance with normalizing judgment (Gutting, 2003). “Observation and judgment come together in this formalized process, and the result is a "normalizing gaze, a surveillance that makes it possible to qualify, to classify and to punish" (John Sproule, 2006). The examination process also situates individuals within the field of
documentation and recordings, thereby removing the individuality from the individual and simply turning people into a 'case' file. Through recording and documentations, child protection workers can build up a case against their clients and provide 'evidence' of neglect. Women who are victims of violence are often perceived as emotionally unavailable to their children and having impaired parenting capacities, thereby they are subjected to markedly distinct investigative and intervention approaches. It is through this surveillance that it is possible to qualify, classify, and punish (Parton, 1999) women as offending caregivers and contributors to the neglect of their children, even in cases of violence against mothers. Social workers often use ultimatums in order to achieve the desired outcome, such as removal of the children from the care of the mother if she does not leave the abusive partner. But ultimatums and other types of coercive interventions by child protection services do not consider or reflect the complex reasons why women may want men to stay, or be persuaded or intimidated into letting them stay (Scourfield, 2001). It is imperative for workers to have the knowledge and the education pertaining to the impact of interpersonal violence on a woman's physical, spiritual, mental, and emotional wellbeing in order to fully comprehend the actions taken and not taken by these women. It is also important to support the mother in such a way that she is able to advocate for herself and that of her children.

Considering this use of power, it is evident that child welfare clients, mainly mothers, are often manipulated and coerced to cooperate with the Society, often not even being aware of what they are really being assessed for and how such
assessments reflect on and portray them as women and mothers. Hence, child
care can then be viewed as a form of policing parenting, especially through the
policing of ‘good’ mothering. The focus of child protection workers is on and only on
the wellbeing of the child, which is viewed as a separate unit from the mother and that
of the family as a whole. This form of policing can be argued to have originated from
the definition and assumptions of need by professionals and the focus on the risk to
the child instead of the needs of the entire family, including those of the mother or
even the need of each family member.

A Focus on Social Problems-Influences on Practice

A social problem is an aspect of society that people are concerned about and
would like changed (Henslin, 2003). Social problems begin with an objective
condition, which is an aspect of society that can be measured or experienced. In the
case of this paper, the objective condition is child witnessing of violence, and the
secondary problem involves the ‘bad mother’, who fails to protect her children from
such witnessing of violence. The second key element of a social problem is a
subjective concern, which is an issue that a significant number of people have about
the condition (Henslin, 2003). A social problem focuses mainly on socially
constructed definitions of deviance and socially unacceptable behavior. From a
constructionist approach social problems can be viewed as claims-making (i.e.
assumptions) or other social activity that defines putative (i.e. alleged) conditions as
threats or crises. This study addresses the identification and creation of child
witnessing as a primary problem and ‘bad’ mothering as the secondary social
problem. By 'bad' mother, I refer to a mother who, as a woman fails to protect her child from witnessing violence. Issues of battered women and violence towards women will be utilized as examples of how mother blaming continues to dominate child welfare legislation and means of intervention.

**Origins in structuring current practice - A historical Link**

Social construction can be defined as the process through which we commonly understand the world, along with the definitions and concepts that we use to provide meaning to our understanding. According to Vivien Burr (2000) the means and methods of our understanding of the world are socially constructed and culturally and historically specific (Burr, 2000, pp. 4-5). Knowledge is also socially constructed by social processes. Definitions and language must be viewed as interrelated and as developing within a specific historical context. It is important to understand and acknowledge that the different locations and positions of members of society are socially defined. Varied social locations inevitably produce different and conflicting forms of consciousness (Swift², 1995). The roles of mother, father, and child are thought to be determined by the needs and dominant values of the society in which they live. Thus, it is theorized, when western society, dominated mainly by white protestant males, began to show interest in the child, in its survival and its upbringing, the spotlight automatically and intrinsically turned to the mother, who became the essential person for ensuring the over all wellbeing of the child (Badinter, 1981, pp. 5).

Although negative definitions of mothering can be traced back to biblical times, it was during the late 1800's that negative definitions of mothering really began to
shape what we understand child welfare to be today. Many recordings of societal concerns during this era involved the birth of 'out of wedlock' babies and 'illness' of the mothers, which typically referred to addiction (Swift, 1995). Notions of individual blame for social problems were not unusual as individual responsibilities were also embedded in Poor Law beliefs during this time (Swift, 1995). Blame was exclusively placed on parents, who were characterized as lacking parenting skills or intelligence. Parents were blamed for their inability to provide for their children, when in reality, poverty was the issue affecting their lives (Swift, 1995). It was not infrequent during this time, for children to be removed from homes, simply because their families were poor or they came from a single parent family. Critics of the nineteenth century child welfare practices have argued that the new emphasis and focus on biography and individuality, as opposed to structure and social barriers, established not only the offender as existing before the offence, but also used the concept of individual blame as a method of societal control (Margolin, 1997, pp. 15). The focus was entirely on individualized 'problems', which determined that a parent was being or could be potentially neglectful, without any environmental or structural barriers being considered. This led to concerns that children were not only being abused and neglected, but also at risk of abuse and neglect (Swift, 1995).

By the 1930's, the investigation practices adopted by child welfare agencies were thoroughly geared to the investigation of home and family (Swift, 1995). Beginning in this same time period, there was also the emergence of the 'child-centered family'. In contrast to earlier notions of motherhood, maternal affection, love,
and devotion were seen to be necessary and crucial to the well-being of the child (Krane and Davies, 2000, pp. 38). Social and structural systems were disregarded as having any substantial impact on individual families and its members. This approach provided a much romanticized view of mothering and motherhood as a woman’s chief and main vocation, while overlooking all other facets of women’s lives, along with barriers encountered daily by all women, but especially those who are marginalized. “Concerns related to child neglect are generally understood, conceptualized, defined, investigated, and acted upon in individual and gender-specific terms” (Swift, 1995, pg. 72). Therefore, when children present with ‘problems’, the blame was typically placed on the mother.

In current Canadian society, because the portrayal of motherhood is viewed as an expression of love and care, the actual labour of and resources needed for the caring of children go largely unnoticed and unappreciated (Krane and Davies, 2000, pp.39). A woman is, then, expected to provide for her children and her household without difficulty. Such struggles in doing what is viewed as only natural to any mother is then perceived as a flaw and impairment of the mother and only the mother. This invisibility of women’s perceived maternal labour within the home is underlined by the idea that ‘normal’ and ‘good’ mothers can cope well in managing all aspects of child rearing and house keeping, and typically without any outside support or assistance.

In the 1960’s, the diagnosis of abuse by medical professionals, whose diagnosis and explanations where individualistic and psychopathological rather than social and/or situational, introduced the disease model of mistreatment and its
accompanying psychotherapeutic treatment for perpetrators of abusing children (Knudsen, 1988, pp. 29).

Again, I feel the need to state that I do not intend to downplay real and serious violations of parental duties and circumstances of child abuse/neglect, nor downplay the very serious, valuable and difficult work performed by child protection agencies and their workers. Nevertheless, I continue to raise concern with the definition of deviancy and how child welfare agencies are managing cases involving mothers who are victims of violence and child neglect. The current definition of deviancy in motherhood does not necessarily signify practices that actually harm children. It is essential to review child witnessing of violence as a social problem, how the social construction of a social problem has influenced and structured how child welfare operates today, in an effort to fully understand how mothers, within the child welfare system, are exclusively held responsible for the well being of their children.

Children's Witnessing of Adult Domestic Violence as a Social Problem

It is evident that research on the serious consequences to children from exposure to women abuse has influenced child neglect definitions (Aron and Olson; 1997 in Kaufman Kantor and Little, 2003). This influence on the child welfare system has led some to raise fears regarding victim blaming, re-victimization, conflict of needs, impact on parenting, and issues surrounding 'failure to protect' (Swift, 1995). As consciousness has been raised on the overlap of women abuse and child maltreatment, child welfare agencies and battered women's service providers are attempting to mend their historical conflicts to address the multi-faceted issues being
faced by mothers who are being victimized (Aron and Olson; 1997 in Kaufman Kantor and Little, 2003). This is evident in Ontario, Canada, particularly in the city of Hamilton, where both child welfare agencies and women's shelters are doing collaborative training on violence against women\(^2\). Agencies must learn to balance the safety and well-being of children with that of their mothers, despite conflicting priorities of advocacy and varying degrees of client engagement (Fleck-Henderson, 2000).

This poses a great challenge for child protection workers as they are mandated by the Child and Family Services Act of 2000 (Child and Family Services Act, 2000) to protect and ensure the safety of children, often expecting the woman/mother to guarantee the safety of her children, when she is unable to protect herself. The Act can be said to influence child protection workers' attitudes, as the needs of children, as per the Act, outweigh those of the mother. How can child protection workers really provide a broader service and address both the mothers and the child's needs given the language of the Act and the imposition on the mother as an offending parent.

It has been argued that only in the last few decades have children been defined and recognized as victims of violence against women or to put it differently, as secondary victims, when their mother is assaulted (Peled, 1993). The concerns about children witnessing violence, however, generated the concern about re-victimizing women. As maintained by Peled (1993) the narrow medical approach of child witnessing leads to 'double victimization of the battered woman who is blamed for victimizing her children by her own victimization'; this is believed to then have a

\(^2\) This information was gathered during the interviews with the research participants
negative influence on her parenting skills. Child welfare, its legislation and models of intervention, are also aimed at holding the mother responsible for the child’s welfare under all circumstances. Thus, the child welfare system blames the victim when she is ‘unable’ to protect her children from witnessing the violence being imposed on her. Straus (1992, in Edleson, 1999) argued that there is an estimated ten million children exposed to violence against women each year in the United States of America. He approximated that at least one third of children have witnessed violence between their parents, and most had endured repeated events (Straus, 1992 in Edleson, 1999). These statistics have raised concerns among child experts and have lead to a growing body of literature that has examined the child development problems associated with witnessing violence against women.

The expert literature described several childhood problems that are associated with a child’s witnessing of violence against his or her mother (Aron and Olson; 1997 in Kaufman Kantor and Little, 2003). These problems include behavioural and emotional dysfunction, cognitive functioning and attitudes, and long-term developmental problems (Edleson, 1999). These children are also at greater risk for internalized behaviours, such as anxiety and depression (Stiles, 2002). Child witnessing is viewed as a huge social problem because, according to social learning theory, children learn to be aggressive by observing and imitating the behaviour of influential people in their lives (Johnson and Dauverge, 2001). A study reviewed by Somer and Braunstein (1999), found that children who had observed their mothers being assaulted had a higher likelihood of being involved in serious personal crimes,
such as assault, rape, attempted rape, attempted murder, kidnapping, and murder (McCord, 1983 in Somer and Braunstein, 1999). Children who witness are also believed to live in dangerous, chaotic, and highly dysfunctional families. The risk for behaving violently in adult relationships is high among children who have witnessed their mothers being assaulted. A study by Strauss et al. (1980) revealed that the rate of women abuse/assault was 1000% higher for men who observed familial violence in childhood than for men who had not witnessed it (Somer and Braunstein, 1999). It is imperative to note, nonetheless, that many children who do witness violence against mothers do not have adverse cognitive, behavioural, and emotional effects (Stiles, 2002). Children are resilient and there are several known variables that may diminish the outcomes of witnessing violence. Some of these may include female gender, intellectual ability, higher levels of socioeconomic status, and social support for the children (Stiles, 2002). This suggests that the best method of intervention in cases of child witnessing violence may be to maintain the child/mother dynamic intact, while providing with children and mothers with supports and resources within their community, as opposed to placing the mother solely responsible and using threats of and removal of children from the family home as a form of intervention. Again I am not suggesting that apprehending children should never be an option in cases of extreme child neglect and violence against mothers, rather I am simply noting the importance of maintaining the child/mother unit together and providing resources and supports to both as a means of minimizing the emotional trauma experienced by these children.
The many dangers of exposure to violence against women appear to be magnified for the youngest of children--those who are completely dependent on their parents or caregivers to protect them from trauma. It is evident that a relationship exists between witnessing violence and children's behaviour. In reference to social learning theory, children, who are exposed to violence learn to be aggressive through the observation and imitation of behaviour of influential persons in their lives (Bandura; 1977 in Johnson, 2001). In such cases, violence may become a method in which problems are solved, especially if there is a lack of negative consequences. Typically, for these children, the results of violence are seen as positive, and there are few opportunities for learning other means of conflict resolution (Johnson, 2001). The lesson for children becomes about legitimizing harming another person, particularly a women partner.

Witnessing a violent episode is commonly defined as being within visual range of the violence and seeing it occur (Edleson, 1999). Being an eye witness to a violent incident, nevertheless, is not the only way children can be exposed to violence. Many children describe very traumatic events that they have not seen but have heard (Edleson, 1999). The aftermath of a violent event may also be equally traumatic for children. This may include a mother who has been physically injured, a father who alternates between physical violence and loving care, police intervention, moving to a shelter for battered women (Edleson, 1999), or being separated from the mother through Child Welfare intervention. Because child exposure to violence against women has now come to the forefront of many researchers and academics, policies
and practices have been developed to define childhood exposure to women abuse, as child maltreatment. The law holds mothers accountable for the abuse (Kaufman Kantor and Little, 2003). Thus, women who are abused are expected to deal effectively with their abuse in order to protect their children from future witnessing of violence.

**Discourses of Neglect and ‘Bad’ Mothering**

Discourse and definitions play an important role in shaping our sense of a particular social problem. The term ‘discourse’ can have various connotations. In this case I am referring to the meaning provided by Vivien Burr, which is “discourse refers to a set of meanings, metaphors, representations, images, stories, statements and so on that in some way together produce a particular version of events” (Burr, 2000, pp. 48). The idea of discourse is quite commanding, in the sense that it creates what is “true” and “real” and how we view the world in which we live.

These discourses are intimately tied to the structures and practices that are lived out in our society, thus, it can be argued that discourses can and are also socially structured and influenced by historical contexts. Much professional discourse in Western society has come about as a result of the social problem of ‘bad’ mothers and the socially defined discourse of deviant mothers. The different terms that are utilized to describe and intervene with ‘bad’ mothers often create pathologies of social deviance. Language, including terms used by professionals, then, exists within and is transmitted through specific, historically located discourses.
The discourse of child neglect, in Western society, is primarily pre-occupied with adults: adult characteristics, faults, flaws, vices, and the potential for changing them (Swift², 1995, pp. 37). The needs and feelings of children at times appear to be located as background concerns. Professional discourses of 'bad' mothers ignore marginalization and other socially constructed barriers as influences in child neglect cases. Reviews of child protection files often illustrated that poverty, wife assault, drug abuse, and social dislocation are important features of neglect cases that continue to be underemphasized both in the professional discourse and in the programs funded to confront child neglect (Swift¹, 1995). An analysis of the literature has also revealed that this focus on the characteristics and behaviors of the individual mothers has continued through the 1980's and 1990's, while themes of poverty and deprivation have taken second place (Swift¹, 1995) and are rarely even considered within the assessment process.

Professional social work, in North America, has been primarily focused on the philosophy of individualism and perception of need (Swift², 1995). One way of looking at need is that an individual's personal failures cause them to be in need of intervention and professional assistance. This was seen in the early years of the twentieth century, when social workers began developing investigation techniques and methods of diagnosis and treatment, which would result in an understanding of the unique and individual problem of each client (Swift, 1995). The idea of mother as the exclusive caregiver for her children is also closely linked to the individualistic philosophy that overshadows our social and economic life (Swift², 1995). Following
this logic, if a child has a problem, the cause then must be related to flaws and needs of his or her mother.

Sigmund Freud's theory of neurosis, which emphasized the mother's frustration of her children's instincts, commenced the systematic blaming of the mother (Grolnick and Gurland, 2002, pp. 5-6). Mother-blaming dominated explanations of childhood neurosis and psychoses at the mid-century (Jones, 1998, pp. 101), such as autism among children and juvenile delinquent behavior. From the 1890's to 1950's, for example, women labeled as independent-minded or over protective women were believed to have caused their son's homosexuality; whereas working mothers had long been blamed for juvenile delinquency. Women were also blamed for their children's behaviour, even when their children had committed no crimes. "Conservatives blamed permissive mothers following the advice of Dr. Spock for an entire generation of flower children!" (Badinter, 1981, pp.5).

The myths of a 'bad' mother over exaggerate the mothers' limitations or faults and transform them into hideous and socially unacceptable flaws (Unger and Crawford, 1996, pp. 424). In popular advice books about parenting, mothers are overrepresented about being emotionally needy and their inevitable failure to control their emotions is believed to cause their children's problems (Unger and Crawford, 1996). Even in situations where the male is the perpetrator for sexual abuse of the children, for example, it is the mother who is blamed for failing to protect her children and for failing to control and regulate her partner's sexuality. These myths and associated ideals and responsibilities for mothers, leaves women with "powerless
responsibility" over their own lives, their children's, and that of their partner's, while dealing with issues of isolation and without any relative material or social supports (Unger and Crawford, 1996).

The media also play an important role in the formulation of the identity of the 'bad' mother and the discourse associated with it. Mother-blaming even made its way to Hollywood. Films such as Mildred Pierce dramatized the danger and tragedy of the working mothers, while Psycho demonstrated how psychotic a mother could make her son (Ladd-Taylor and Umansky, 1998). Women who did not fit the cultural stereotype and discourse of the 'perfect' mother, one of passive dependence, provided boundless material for comics and sitcoms.

When considering why women stay with an abusive partner, it is vital to understand the impact of interpersonal violence on a woman. According to DeVoe and Smith (2002), the consequence and effect of violence on a women’s mental health functioning has been highly documented in the literature and includes elevated rates of depression, anxiety, and post-traumatic stress symptoms. Women living in these violent situations are often socially isolated and extremely fearful of leaving, not only for their own lives, but for those of their children. It is a fact that women who are victims of violence, who leave the abusive relationship, are most at risk of uxoricide³ (Chewter, 2003). The number one cause of women's injuries is abuse at home, for example women are more likely to be injured from a partner than car.

³ Uxoricide refers to a murder of a wife, or female partner, by her husband, or male partner (Merriam-Webster on line, www.m-w.com, and search dated October 25, 2005). The word femicide could also be used here, although I would argue that uxoricide is more appropriate for this paper as it refers to female being killed by a male intimate partner. The term femicide is related to the term 'gendercide'. It refers to female genocide, but is not specific to interpersonal violence.
accidents/falling/etc. This abuse occurs more often than car accidents, muggings, and rape combined (Chewter, 2003). Every nine seconds a woman is assaulted by her intimate partner in Canada, which means that while watching one hour of your favorite television programming, nine hundred women in Canada have been assaulted. There are also huge financial consequences for women, if they are separated, as they are usually dependent financially on their partner. Although physical safety may be crucial to the abused women, it is often secondary to more important considerations, including their cultural and ethnic identities (Mills, 2000). Disruption to the relationship between the batterer and the abused woman can be viewed by the victim as a rupture between the woman and her culture, which may also impact her status in her community (Mills, 2000).

Furthermore, when a woman is asked by child protection services to leave the relationship with her children, considering these statistics, it is just as crucial for the child protection worker to consider the safety of the mother, as well as that of the child(ren), when asking a woman to leave her partner. Ultimatums, in which women who are victims of violence are forced to 'choose' between the perpetrator and her children, may be inappropriate when viewed in a cultural context (Mills, 2000) and when considering other factors such as finances, ability, and lack of family and other support systems. So when we say that if a woman is being victimized and her children are being exposed to violence, she should 'just leave', it is important to recognize that for many women 'just leaving' is clearly as terrifying and often more dangerous than staying in the abusive relationship. When considering the children,
the mother leaving the abusive partner also poses unique concerns. The thought of separation from the other parent or siblings, staying in a strange place such as a shelter or a foster home may cause much anxiety and fear for the child. From a social learning perspective, if the mother and/or child(ren) are the ones being forced to leave the family home, as opposed to the perpetrator, the children may perceive the separation of the family, as being their fault or the fault of the mother, as opposed to the offender. In essence, they see the abuser as rewarded with the family home, while the victims are forced to leave. Thus, interventions plans need to take into account both the safety and stability of mother and child equally.

Concerns have also been raised pertaining to parenting problems of women who are victims of violence. It has been suggested that women who are victims of violence can get ensnared in psychological processes, which contribute to their difficulties in protecting their children from abuse (Kaufman Kantor and Little, 2003). This implies that mothers who are victims of violence may be so pre-occupied with not 'causing' an outburst or violent incident that they are emotionally unavailable and, thus, neglectful of their children's emotional and physical needs. These women may neglect to provide the nurturance needed by a child as a consequence of the persistent abuse by their intimate partner (Kaufman Kantor and Little, 2003).

In retrospect, it is not surprising that parent-child relationships can be notably affected when women, who are victims of violence, are forced to cope with their own physical injuries and emotional reactions to their victimization (Wolfe et. al, 1985, in DeVoe and Smith, 2003). Rather than being neglectful, women who are victims of
violence tend to be deeply concerned about their children and the impact of exposure to violence. They are committed to assisting their children in 'breaking the cycle' (DeVoe and Smith, 2003). Overall, the parenting efforts of abused mothers must be understood within the context of violence and with consideration of the potential impact of violence on both mothers and their children. For this reason, defining failure to protect in terms of women's behaviour “may be an error in attribution, which is affected by the underlying bias, and all too frequent truth in our society, that women are the primary parents” (Kaufman Kantor and Little, 2003, pp. 350). While the need to interrupt the cycle of violence is important, the child welfare system is also responsible for responding to abused women in ways that serve the combined interests of mothers and their children (Mills, 2000), as opposed to viewing their needs as separate entities.

Considering the Issue of Neglect

There are concerns with victim blaming within the field of child welfare. This creates great difficulty for child protection workers to ensure the safety of children while allowing client self-determination and being mindful of the needs of the mother. According to the Child and Family Services Act 2000 (Child and Family Services Act, 37, 2g, 2000) section 37(2) g, "there is a risk that the child is likely to suffer emotional harm of the kind described in sub clause f...resulting from the actions, failure to act or pattern of neglect on the part of the child's parent or the person having charge of that child". This language suggests that the parent who was the victim of violence would be found neglectful if she remained with or moved back in with her abuser, and the
violence continued. In accordance with the act, the child protection worker must hold the person having charge of that child, who is typically the mother and victim, ultimately responsible for the protection of her children. The workers are expected to focus mainly, if not exclusively, on the child while not necessarily addressing safety concerns with the mother/victim of violence. In such cases, if the mother is unable to ensure the safety of her children, the child welfare system can become more intrusive in their interventions and ultimately remove the children from the care of the mother. Removal of the child from the parent, even an abusive parent, can be very traumatic for a child, and there is still the possibility of children experiencing multiple placements and lingering in foster care (Kaufman Kantor and Little, 2003). The concern with using apprehension of children as an intervention plan if the mother does not leave the abusive partner is that it does not place responsibility on the abusive partner. In fact, the offending partner may use the threat of the CAS apprehending the children as a means to prevent a woman from calling police, fleeing to a shelter, or seeking other help. In my experience within the field of child protection services, that mothers who are victims of violence are terrified to even disclose the abuse out of fear of losing their children to the foster care system. Children, are also very fearful of disclosing abuse because they fear that they will be taken away from their mothers.

In a study conducted by DeVoe and Little (2003), women, who were involved in violent situations, described their children as experiencing heightened feelings of separation anxiety, loss, and protectiveness of mothers. A number of children were also reported to be greatly concerned about the actual and potential losses,
particularly the threat of loss of their mothers (DeVoe and Little, 2003). Consequently, if a child is removed from his/her mother by a child protection agency due to concerns of family violence, the separation trauma imposed on that child may lead to severe emotional distress. If emotional harm of the child is the concern, then separation and trauma caused by the removal of a child from the care of their mother should also be considered in the welfare and legal system.

According to the Risk Assessment Model 2000, emotional harm is defined as “the child has been emotionally harmed or is at risk of emotional harm as a result of specific behaviours or pattern of neglect of the caregiver towards the child or resulting from the caregiver failing to adequately address the emotional condition” (Risk Assessment Model 2000, Sec. 3). In Section 3.2, under Adult Conflict, of the risk assessment model, it states that caregivers are responsible for the protection of their children from encountering adult conflict in the home and from suffering emotional harm from the violence (Risk Assessment Model 2000, pg. 45). This definition not only places accountability on the victim of violence, typically the mother, in protecting that child, but also fails to address the emotional impact and trauma on that child, should the child be separated from his/her mother as a result of her being ‘unable’ to protect her child. A more in depth look will be taken with the Risk Assessment Model and “failure to protect” arguments in the following section.

Concerns with Current Practice

While considering the psychosocial implications of mother-blaming and the classification of ‘bad’ mothers, it is equally significant to also review the origins of
current child welfare practice within Ontario, Canada, in an effort to embark on the deconstruction⁴ of patriarchal narratives and gender-specific ideologies of motherhood in order to reconsider attitudes and beliefs. The method of deconstruction encourages the opportunity to re-evaluate and analyze the historical descriptions of motherhood from a distinct and separate lens by challenging their source and the period in history when they were developed.

In 1999, amendments were made to the Child and Family Services Act (CFSA). Some of the amendments lowered the threshold regarding what could be deemed abuse and placed more accountability on professionals and people in the community to report suspected cases of child maltreatment (OACAS, 2000). The changes to the CFSA have been greatly influenced not only by the last party in government, but also by the media and the public, in response to the deaths of children whose families had been involved with welfare agencies in Ontario. There were also several coroner inquests into the deaths of these children, and considerable media attention focused flaws within the child welfare system. The Child Mortality Task Force was formed to review the deaths and the child welfare system (Publications, 2001, www.torontocas.ca). This task force was influential in placing pressure on the government to make changes. The Ontario Child Mortality Task Force Reports, published in March 1997 and July 1997, were catalysts in creating a clear focus on the needs of vulnerable children and developing the capacity of the child welfare system

in Ontario (Publications, 2001, www.torontocas.ca). In response to the task force reports, the government of Ontario implemented the Risk Assessment Model 2000 requiring child welfare workers to use standardized assessment tools; the eligibility spectrum, the safety assessment tool and the risk assessment tool. For the purpose of this paper, I will only discuss the areas of the Risk Assessment and Eligibility Model that pertain to violence against women.

The term “adult conflict” is listed in the Eligibility Spectrum. Using this tool, the child protection worker is responsible for the assessment of “adult conflict”, and is expected to intervene when the conflict is likely to cause physical or emotional harm. The risk assessment is defined as the systematic collection of information related to the future abuse or neglect of a child (Cash, 2001). It is also an estimate of the probability that a child will be maltreated in the future, as opposed to a tool used to validate a current incident of neglect. The primary reason for risk assessment is to protect children from future abuse and neglect, while secondary reasons can include:

“operationalizing the concept of risk, providing a systematic and reliable approach to the assessment of risk, substantiating a case, determining the severity of abuse or neglect and prioritizing cases, determining type of services needed, and determining critical points in the case such as child removal or case closure” (Cash, 2001).

Within the risk assessment tool, “family violence” is also listed in the “Family Influence” category. In my experience as a child protection worker, I observed that the majority of the risk assessment “goals” focused on what the mother/victim must do in order to ensure the safety of her children. For example, “mother will ensure that children are not exposed to adult conflict or violence” or “mother will not allow father (or perpetrator) to have access to the children or the family residence”. It is apparent
that the perpetrator is virtually invisible within this risk assessment tool, and yet criteria about the perpetrator and his accountability are not in the legislation. There are also concerns with the wording and language utilized in the Child and Family Services Act pertaining to 'failure to protect'. This issue will be further explored in later sections of this paper.

One major critique of the risk assessment model is that it does not address structural/institutional barriers and issues of marginalization, such as racism and poverty. Rather, it focuses on an individualized definition and identification of problems, as it is inherently biased in favor of deeply-rooted personal causes of behavior, rather than external factors that focus on environmental or situational factors (Petrucci and Mills, 2002). The theme of mother-blaming and identification of 'bad' mothers has continued throughout the development and growth of child welfare agencies in Canada, and more specifically in Ontario and is visible within the risk assessment tool.

The risk assessment tool has been criticized for having false prediction rates. This refers to those instances where high risk was suspected but no maltreatment occurred (Krane and Davies, 2000). This means that even when no maltreatment has occurred within a family unit, factors such as a single-parent unit or a parent with a history of being abused as a child may actually elevate the risk identified within the assessment. When addressing situations of violence against mothers, the risk assessment appears contradictory in that it assesses the family as high risk if violence is occurring in the home, but if the mother was to leave the relationship, a subsequent
assessments would conclude the family to be at high risk because she would be a single parent, with a history of being an offending parent under the 'failure to protect' clause.

The risk assessment has also been critiqued for being very subjective; as definitions of harm and risk are culturally constructed and individual professional interpretations of what constitutes risk are, at the same time, filtered through normative gendered assumptions of proper family life (Paron, 1997 in Krane and Davies, 2000). The inclusion of single-parent status as a risk factor indicates a cultural bias against sole parent families, which are statistically headed by more females than males. Women who experience partner violence are in a double bind. If their children are exposed to violence, they are assessed as negligent; if the women leave their relationships and parent alone (perhaps living in poverty), their children are assessed as being at risk for living in a single parent family. Either way, the mothers are perceived as placing their children at risk and unable to protect them.

Risk assessment tools, overall, are thought of as distancing social workers and the practice of social work from the daily lives of clients, and therefore, de-contextualizing the proper evaluation of other risk factors (Krane and Davies, 2000). Ironically, given the distancing of the worker from the assessment, risk assessment tools are criticized for allowing too much room for human error with workers over or under estimating risk (Paron, 1997 in Krane and Davies, 2000). In several studies, reviewed by Cash (2001), findings suggested that child protection workers had received little to no training on the risk assessment tool and that the risk assessment
instrument neither predicted nor correlated with future abuse or neglect. These findings suggest that the tool does not have any predictive validity (Cash, 2001). Methodological problems have also been identified within the literature. Some of these include “small sample sizes, ungeneralizable findings, threatened statistical conclusion validity, and questionable reliability and validity, along with a lack of cultural sensitivity and predominant focus on deficits without consideration for the family’s strengths” (Cash, 2001). As has already been highlighted, a risk assessment is not for abuse or neglect substantiation and if an instrument is needed for case substantiation then a new instrument should be developed (Cash, 2001). 

Numerous research studies (Hartley, 2004, Jones and Gross, 2000) have also noted that child protection workers lack an understanding of the unique issues and problems of mothers who are victims of abuse and related cultural issues. In one study conducted by Hartley (2004), determined that child protection workers often viewed women who were victims of violence, as being responsible for incidents of child maltreatment, leading to the removal of the child from the home. In another study by Jones and Gross (2000), forty two percent of the respondents, when asked about mother abuse, believed that the victim could simply leave the relationship, while twenty six percent of the child welfare workers believed that the victim was somewhat responsible for the violence. This finding highlights an important theme that battered women are also being identified as ‘bad’ mothers by child welfare workers under the umbrella of ‘failure to protect’. In both of these studies, experience in the field and
education of the workers reflected a better understanding of the multi-faceted issues of wife/woman abuse.

The increased attention to the connection between child abuse and domestic violence has prompted collaboration between advocates, administrators, policymakers, and researchers in the fields of child abuse and violence against women and has resulted in some innovative collaboration and training initiatives (Mills and Yoshihama, 2002). Several studies reported that after participating in violence against women training, child protection workers were more likely to assess the mothers' safety. They would consider as a first task in child welfare investigations, an assessment of whether or not the mother was being abused. They did not see this as an issue separate from the safety of the child. As a result of training, workers attitudes towards abused women changed and they were less likely to view women as unable to protect their children and responsible for the neglect of their children (Mills and Yoshihama, 2002, Hartley, 2004, Jones and Gross, 2000). Research studies such as the ones just described clearly indicate that appropriate training on issues pertaining to violence against mothers undoubtedly leads to alterations in practice and greater support for the victims of violence, namely mothers and children.

In child welfare practice, there appears to be a dangerous assumption that the children and mother's needs and wellbeing are completely separate and do not impact each other. John McKnight (1995) identified assumptions of need by professionals, including: the translation of need into a deficiency; placing deficiency in the client; and placing professionalized definitions on the citizens of society (pp. 45). This resonates
in child welfare practice. The child client has the need of residing in a home without violence, a need that has been professionally identified. This need becomes re-defined when the child needs a mother to protect him or her from witnessing the mother’s abuse. If a mother, then, cannot provide that “protection” she is viewed and defined as deficient. In this case, she is, a mother who “fails to protect” and who has allowed her child to be emotionally neglected/abused, and is by societal standards—a “bad” mother. These assumptions of need place a great and unbearable weight on women who are victims of violence. They have to deal with the pressures and demands for specified actions from child welfare services, in order to meet the objectives of the agency and in order to keep or recover custody of their children. Women’s advocates argue that if child protection workers place their focus on the needs of the mother, this will, in turn, ensure the safety of the child (Jones and Gross, 2000).

Tensions between the ‘best’ interest of the child and the ‘best’ interest of the mother are not easily reconciled. Strong cultural conception of mother as the primary caregiver also contributes to the mother being judged more harshly by the child protection system. A question must then be posed: does the removal of the child better meet the needs and safety of that child and mother, or the removal of the male perpetrator? There are ongoing concerns with the invisibility of fathers and male perpetrators in child protection work. There continues to be a high focus on the mother, while the men continue to be ignored as both a risk and an asset to that family (Swift², 1995).
The primary focus on risk presents various concerns for social work practice in child welfare. It is significant in terms of the way workers are encouraged to think and organize themselves and how they are organized, mainly through their obligations and the way they are held accountable. Risk management—the identification, assessment, elimination, or reduction of possibility or consequence of the potential risk—becomes the primary concern of the professionals themselves (Parton, 1999). This leaves little to no room for preventative services and adequate social work interventions with women who are victims of abuse, as they are visible only in their role as perpetrators of the neglect of the children, and not as clients with their own issues and in need for advocacy and assistance. These procedures and mechanisms for risk assessment and risk management change the role of the professional social workers, who are also being monitored and watched at a distance.

It is my belief that social workers are unwitting participants in this process of mother blaming in child welfare and assessment of risk. Social workers have a sense of distrust of their clients, but also have feelings of powerlessness over the child welfare system. Workers are so aware of their accountability and fearful of repercussions for not following the rules that they end up going through the motions of social work and comply with the organizational structures which require actions that are contrary to their assessments of client’s needs and contrary to their personal values. Child protection workers are not only faced with professional accountability (especially when registered with a professional college), employer accountability (as they are responsible to their employer), public accountability (as their services are
government and community funded), and self accountability (as social workers typically struggle with moral and ethical issues) (Cox, 1998). This can be extremely overwhelming for any worker.

Meeting the complex and competing needs of mother and child in situations of child witnessing, is a daunting and stressful task. The literature suggests that a first step is to help child welfare workers understand the issues related to violence against women. In order to better understand the needs of child protection workers, this study was designed to ask the following questions:

1. How do child protection workers understand violence against women?
2. What are their beliefs about the causes of violence towards women?
3. What are child protection workers’ interventions with victims of violence and perpetrators?
4. What, if any, are the perceived training needs for workers?

**Methodology**

The goal of interpretive social research, as indicated by Neuman (1997) is to develop an in-depth understanding of social life and identify how people construct meaning within their natural environment. In accordance with the description of this particular area of thought, external behavior is perceived as an indirect and frequently ambiguous indicator of true social meaning. Thus, it is important to try to view the world through the eyes of those being studied. Social reality, for the interpretive perspective is, after all, based on an individual’s definition of it. Although the interpretive and critical approach view social reality as altering and subject to socially creating things, the critical approach deviates from the interpretive approach's emphasis on micro-level interpersonal interactions and its approval of any meaning
system (Neuman, 1997, 75). Accordingly, this study aims to obtain an understanding of how social workers, within the field of child welfare, define abuse, neglect, and parental negligence in cases where violence against mothers and children witnessing violence is identified. Further, in order to gather a clear perception on child welfare intervention in cases where violence against mothers and child witnessing is branded, we must first gather a better understanding on how definitions of 'abuse' and 'neglect' are formed by child protection workers.

A convenience sample was used for this research study. The sample included child protection workers from a local Children's Aid Society agency. Workers were presented with an information flyer that was e-mailed to their supervisor. The flyer requested that those interested in participating in the study contact the researcher. The apparent limitation of this study, as with qualitative methods, is that it has low external validity, as the number of participants and their responses cannot be generalized to the rest of the population, as many qualitative researchers have found that a minimum of 15-25 participants are required to generalize the data to the rest of the population\(^5\). This study, therefore, included nine personal interviews with child protection workers at their place of employment. There were twelve volunteers for this study, but due to the fact that only nine were needed, the last three volunteers were not interviewed.

Qualitative methods seek to convey the complex worlds of respondents in a holistic manner, using descriptive, rather than particularistic categories (Padgett, \footnote{Part of a lecture on sampling by Dr. Jim Gladstone on February 14, 2005.}
This requires that the researcher see his/herself as a sensitive instrument of observation, one who is also capable of developing categories of meaning from raw data. A particular issue with qualitative research is that it is inductive: it seeks to discover, not test explanatory theories. This was particularly important for my study because I sought to understand how child protection workers came to develop their definitions of parental deviancy in cases where violence against mothers and child witnessing were identified, and how actions plans were formed based on such definitions. Further, I sought to gather a more in depth and personal view of the potential difficulties and challenges that child protection workers may have had in working with mothers who were victims of violence and children who were witnessed to such abuse.

There were several methodological concerns while conducting this qualitative research, including: questions and apprehensions surrounding areas of disclosure; distress and emotional harm; confidentiality and privacy; bringing out private voices into the public sector; including the added concern about my social position as a social worker in child protection.

The dynamic interplay between the researcher and the respondents is one of the defining features of qualitative research, and special considerations need to be made in an effort to assure a sense of security by the participants. I considered that there could be issues of trust for the respondents in the sample, which could have posed as either barriers or aids to the study. I also needed to consider my previous work history as a child protection worker for a different Children's Aid Society.
throughout the research process. Prior to commencing the interview process, I did disclose to all participants my previous work history with a different Children’s Aid Society and provided them with an opportunity to terminate the interview at any point, should they desire to do so. Further, I discussed confidentiality. Participants were informed verbally and in writing that confidentiality would be respected. I addressed this issue, by assuring anonymity to the participants at four different stages. The first stage occurred at initial contact. After being contacted by the volunteer, I sent an e-mail outlining the purpose of the study and attaching a copy of the consent form. The second stage occurred after confirming participation in the study, I sent a second e-mail and advised the participant that if they decided not to participate, to simply e-mail me, and no further contact would be made. The third stage occurred at the beginning of the interview, where I advised the participant about the details pertaining to the consent form. The last stage occurred at the end of the interview, where I would let the participant know that if they decided not to be part of the study, they could simply e-mail me and their interviews would not be used. In relation to informed consent, due to the majority of my research focus involving active, face to face engagement, informed consent was necessary prior to the beginning of the relationship (Padgett, 1998).

**Data Collection**

I invited child protection workers from a local Children’s Aid Society to participate in the study. Nine workers were selected from the group of workers who had volunteered for the study. Data collection was achieved through interviewing
participants at the agency, using an interview schedule and a tape recorder. The interview location was selected in an effort to convenience the workers and ensure that the environment was comfortable. Workers had a choice to be interviewed at their place of employment or any other location in the community. Before each interview began, participants were asked to sign a consent form indicating that their participation was completely voluntary, and that their names and/or any other identifying information will never be used in any communication with the agency or elsewhere. Interviews were conducted in private by the primary researcher. All interviews were audio-taped with the consent of respondents.

Analysis and Findings

Huberman and Miles (1994) in Padgett (1998) offered a hierarchical typology of qualitative data based on the degree of abstraction and processing of the data. The raw data for this study included tapes, field notes, and any partially processed data (such as transcripts and logged comments by the researcher). The taped interviews were transcribed by the researcher once the interview process was completed. This is where the researcher began to look for concepts and themes. The researcher then used constant comparative analysis (Padgett, 1998, pg. 77), which is a concept associated with grounded theory. The process began as inductive, then deductive, and then returned to an inductive approach. As themes materialized from the preliminary coding, I went back to the data to ensure that it was coded in accordance with these themes. As I returned to the data, as was anticipated, new themes began to arise, and where categorized according to similarities and commonalities.
Findings

Five themes emerged from the analysis of this research. These included the belief that it is the mothers job to protect her children; the belief that mothers can simply leave; the perception that mothers' needs can be separated from the needs of their children; moral, ethical and practice dilemmas in working with mothers who were victims of interpersonal violence; and lastly, training deficits.

Five of the respondents had less than five years of experience in the field of social work and/or child welfare; two of the respondents had between five and ten years of social work and child welfare experience; and two of the respondents had more than ten years of social work and/or child welfare experience. The education of respondents consisted of two with a Bachelor of Arts degree, two with a combination of a Bachelor of Arts and Child and Youth Worker diploma, two of participants had a Bachelor of Arts and Bachelor of Social Work degree, and one had a Child and Youth Worker diploma. In terms of training pertaining to violence against women, six out of nine participants had attended only one training session offered by the agency. They reported that they did not find it very helpful in assisting them to understand women abuse and intervene in cases where women abuse was occurring.

It's the Mother's Job

Many of the respondents felt that at the end of the day, the responsibility always fell on the mother to ensure the safety of her children. As two of the participants stated,
"We give mom an ultimatum...ultimately she needs to protect her children...", and

"generally, the difficulty is when the perpetrator and mother deny that there is abuse going on, but you know it's there...the lack of acknowledgement by the mother makes it difficult to work with her...usually we get more intrusive if they don't want to work with us".

When looking at participants' definitions of child welfare's practice in cases where both violence against mothers and child neglect was occurring, eight of the workers stated they would hold the mother ultimately accountable in protecting her children. Only one of participants stated that it was important to address both types of abuse and the need to support the mother in making changes. This participant, unlike all others, also viewed child abuse and violence against the mother as child protection issues. In this category, one of the respondents also held the belief that holding the mother as ultimately accountable for the protection of her children, is empowering to women and that the mother had the power and responsibility to protect her kids.

Three participants with experience in child protection stated that they would request that the offender leave the family home, but that if he refused, the responsibility ultimately fell on the mother to protect her children, which usually meant leaving with her children and going to a shelter.

Mother's needs as a separate issue

Most participants felt that the needs of mothers and children were separate, which often meant that their focus was mainly on the needs of children. Some participants believed that because their role was from a child protection stand point
that their responsibility was only to the child/children and not to the mother. Two of
the respondents stated that,

"Mainly, we (child protection workers) need to ensure the safety of the children...the
child is the client...I mean, we can support mom, if she is open to services",

"...we are a child protecting agency, not an adult one...our commitment is to the
children" and

"If there is no disclosure, but we see signs, and mom doesn't want to press charges it
makes it difficult to work with them...parents are unwilling to work with us (CAS)
because of fears of losing their children".

Half of the respondents with experience between five and ten years stated that
in cases where both types of abuse is occurring (violence against the mother and
children who are witnessed to such violence), the children were usually removed from
the home immediately and placed in foster or kinship care. Lastly, two of the workers
stated that they would give the mother an ultimatum, either leave the home and
protect children or the children would be apprehended. Interestingly enough, although
six of the workers stated that they would connect the mother with community services
and encourage her to leave her home and go to a shelter, one of the participants with
more than ten years of experience, felt that shelters were not very helpful in assisting
women and their children and where not “on the same page as child protection
agencies...it’s a men hating thing”. The logic presented in this last quote would
significantly impair any assistive work with the mother, because the worker does not
appear to acknowledge the mother’s need for support, or even the legitimacy of her
victimization. None of the respondents discussed completing a safety plan with the
victim of violence as a common practice when dealing with cases where violence against women and child neglect were occurring.

**Women should just leave**

It was interesting to hear the respondents' state that most of their interventions consisted of encouraging women to leave the family home with their children and that they expected women to leave the home as a means of ensuring the children were not further exposed to violence. As one worker stated,

"Usually we’re (child protection workers), intrusive, giving mom an ultimatum...either she leaves relationship or the child is apprehended...we give the voluntary option for the male to leave, but if he doesn’t, mom has to make the choice...”.

In this study, all but one participant stated that they expected the women in these relationships to simply leave their homes and go to a shelter, or have the perpetrator leave the home. The respondents believed that this expectation was appropriate as it addressed the immediate needs of the children in the home. Only one respondent stated that although often the expectation was there for the mother to leave the abusive partner, which often meant leaving the family home, the respondent acknowledged the tremendous pressure and responsibility being placed on someone who was also a victim of violence. The worker also recognized that the mother would need much support and assistance during this time, along with safety planning for herself and the children, equally.

Participants were also asked about their definitions of violence against women, causes of women abuse, and characteristics of perpetrators. Most participants were able to identify various aspects of women abuse, such as emotional, psychological,
and financial control and intimidation, along with physical/sexual abuse or threat of harm. When defining causes of women abuse the majority of participants, focused on individualized causes of women abuse, such as personality traits, culture, education and social status background, history of abuse in family, low self esteem of victim, poor impulse control; and four of the workers felt that some cultures accepted and supported women abuse and violence towards women. Only one participant in this study identified structural and societal factors as causes of violence against women. This participant stated that a patriarchal society, such as Canada’s and many developing countries, along with history of beliefs about women have provided structures and value systems that support women as second class citizens. In terms of characteristics of perpetrators, eight of the workers identified micro level factors only and individual characteristics, such as mental health, substance abuse, financial insecurity, and cultural background. Again in this section only one participant answered the question with “it could be anybody”; although this worker recognized that in her line of work she typically sees more clients from low economic status, she felt that violence crosses all spectrums of society and that just because it’s not always visible, it doesn’t mean it isn’t there.

**Moral, Ethical, and Practice Dilemmas**

The majority of respondents really struggled with moral and ethical dilemmas when working with mothers who are also victims of violence and some stated that they did not know how to ensure the safety of both children and mothers within child welfare. A couple of respondents stated that,
"I have difficulties dealing with violence against women...it's a catch twenty-two...mom is the victim and then re-victimized...it's a personal struggle for me and I don't know how we (child protection workers) can protect both...the responsibility is always on mom's”, and

"I think that mom is made to be the perpetrator and responsible for having her children apprehended...I really struggle with the procedure...”.

When looking at the difficulties workers encountered in cases involving mother abuse and forms of child neglect, workers with five to ten years of experience seemed to really struggle with perceived moral and ethical constrains in working with victims of violence and their children. These workers felt that there was no means of ensuring the safety and addressing the needs of both mothers and children. These respondents also identified having trouble with cases involving both violence against mothers and children witnessing such violence, as they felt they lacked knowledge about violence against women. Five workers identified working with shelters as a major difficulty and a practice deficit. They felt that there was poor communication between shelters and CAS agencies and that often shelter staff they not comprehend the child protection concerns. The workers felt that this strain in their relationship made it a challenge to address the needs of the children. Respondents with the least amount of experience also stated that they had dilemmas in decoding which type of abuse was actually more damaging and how the intervention would impact the children. Mainly, they struggled with how separations, through apprehension, impacted the child's emotional well being. The second statement appeared to refer more to mother blaming and the belief that women are responsible to the safety of their children at all times, and thus, if unable to protect the children from witnessing
violence, the mother can be identified as the offending parent and may even result in her children being placed in care due to this exposure. The worker who made this statement identified categorizing the mother as the “perpetrator” as a real struggle.

Training Deficits

Participants in this study identified various training needs. Some child protection workers felt that, 

“Additional training is needed and the agency should provide it...like on the cycle of violence...mom's feel like the perpetrator...it's re-victimizing...”;

“We ask moms to leave, but budget cutbacks don't allow society to assist...we just expect them to do it...”; and

“dealing with shelters is difficult...I really need to work with shelters better and have a better understanding about violence...how does it impact women and what are the effects on the kids...I think joint training with shelters would be good...”.

When asked about tools and resources used when intervening in cases where mother abuse and child neglect is occurring, all workers stated that they would consult with a supervisor at some point in order to determine a method of intervention, but generally they lacked knowledge of how to actually intervene in such cases, especially as it related to the mother being a victim of violence. Only five of the workers stated that they would use a safety assessment for the child to assist them in intervening in such cases. All participants advised that they utilized community resources, such as shelters, to assist with these cases. In terms of the Risk Assessment Model 2000, 66% of workers did not find the risk assessment useful in predicting or identifying issues pertaining to violence against women and impact of children witnessing violence. Some of these workers felt that the assessment tool was very value based,
subjective, and didn't address cultural differences, meaning that it reflected mainly western values, definitions, and meanings of family and parenting. One worker stated that it was more of an interpretative piece and that the child protection worker really had to be creative in order for the assessment tool to reflect issues pertaining to violence against women.

Lastly, participants were asked if they felt they have the necessary tools to work with women and children experiencing violence; their perceived limitations as workers; and their perceived training needs. In terms of tools, only two workers stated that "yes" they had the tools and knowledge necessary to intervene in cases involving violence against women; nevertheless, one of these workers acknowledged that she had the tools because of her extensive history in working with women at women's shelters, not because of her experience in child welfare. All respondents with less than ten years of social work/child welfare experience felt that they did not have the necessary tools/knowledge to appropriately intercede in cases involving mother and child abuse. When considering participants perceived limitations, they stated that they had difficulty in identifying the mother as the offending parent when she is also the victim; holding the mother as ultimately accountable; using coercive power and control as opposed to bringing clients into the process of decision making; time limitations, no secure time for workers to attend training; and lack of community resources. One experienced child protection worker (10+years) identified the Child and Family Services Act and Canadian society's views of women as a limitation.
Respondents with less than five years of experience also branded their inability to place responsibility of perpetrators, such as no legal basis to keep offender out of home, for example, as a limitation, along with the isolated focus on child safety only. In terms of perceived training needs, 88% of workers felt that they required intensive training on the cycle of violence, violence against women, education on barriers that prevent women from leaving, and the impact(s) of witnessing violence on children. In addition, eight of the workers also identified joint training with shelter staff as crucial to their learning and to their work with victims of violence. These workers felt there was typically tension and strain in their relationship with shelter staff. One participant stated that she lacked the knowledge of what role shelter staff played in working with women and how shelter staff/women's advocates and child protection workers could work together in protecting mother and child. Six of the respondents identified education on community resources for women and children as a training need for child protection workers.

Discussion of Findings

For the most part, child protection workers have had some opportunity to learn about violence against women. Child protection workers were more likely to engage in safety planning, typically having mom and children leave to a shelter rather than removing the children from mother's care. However, the focus was mainly, if not exclusively, on the safety of the child. In this sense, the adult victim and her specific needs were generally ignored. Most workers would make community referrals for the mothers, such as connecting the mother with a transitional support worker, but few
mentioned referring the offender to any services. This finding may suggest that many child protection workers place greater emphasis on the mother to make the changes as opposed to placing the responsibility on the perpetrator. As one worker suggested “...essentially it's moms that are being investigated, it's moms that have to go through most of what we do here...dads have much less responsibility to take”.

Another worker explained this issue when discussing the validity of the risk assessment tool used by child protection workers, saying,

“I find the risk assessment often makes mom look like the perpetrator, which sometimes there are neglect concerns and drug/alcohol by mom, sometimes there are, but when you have cases of domestic violence, it just makes mom look like the perpetrator and that mom was the one that put her kids at risk”.

The participant did not appear to recognize or acknowledge how living with an abusive partner could be interconnected with child neglect. MAINLY that being a victim of violence can lead to female depression and/or substance abuse, thereby leading to the neglect of children.

While most child protection workers interviewed in the study agreed with the view that women abuse is a social problem, a few respondents had difficulties recognizing women abuse as a gender issue and felt that the term 'domestic violence' was more appropriate as men can also be victims of intimate violence. Although it is a fact that males are also victims of interpersonal violence, the idea that some workers were unable to accept women abuse as a unique social problem highlighted some training needs for workers around the cycle and pattern of intimate violence, occurrence, and exclusive issues faced by women in the community. Femicide is actually one of the leading causes of premature death for women in North America.
(Grisso, Schwartz, et al. 1999 in Campbell, 2004). While barely 3% to 6% of male homicide victims are killed by an intimate partner, 30% to 50% of femicide victims are killed by an intimate partner (Campbell, 2004). In a study on femicide, it was determined that the majority of women who were killed were seen in the criminal justice, health, social services, or shelter systems during the year before they were killed, suggesting that there was an opportunity to conduct safety planning with them (Sharps, Koziol-McClain, et al., 2001 in Campbell, 2004). These statistics indicate that women are at higher risk of being abused and killed by an intimate partner and face very unique issues in safely leaving these relationships. It has also been previously discussed that within child protection, women comprise the majority of parents held responsible by the child welfare system and tend to be the focus in service agreements and recommendations. Training for child protection workers, should then have a specific focus on women and violence against women.

During one of the interviews with a senior child protection worker, the worker stated that "this is a child protection agency, not an adult protection agency" and therefore did not feel that education and training on women abuse was necessarily relevant to the nature of their work, rather the worker felt that training on child witnessing was what was needed for child protection workers. It can be argued, however, that although safety planning with women in women's shelters and advocacy programs is extremely important, it also needs to be done in every system where these women might be seen (Campbell, 2004). Education on child witnessing would be beneficial to child protection workers, however, being aware of the patterns of
violence, along with the distinctive issues faced by women in violent relationships would provide child protection workers the ability to intervene in these cases with more sensitivity and ability to help women understand that their own perceptions of risk are extremely important, and if they are fearful for their lives and safety, they should attend to that fear and engage in safety planning (Campbell, 2004).

Violence against women was usually characterized in terms of physical, psychological, financial, and sexual violence and control, indicating that the majority of workers understood that the pattern of violence against mothers as multi-faceted and included more than just physical violence. Nonetheless, most workers also stated that intervening in cases where violence was not physical was more difficult because it was not as visible and easily proven, especially within the legal system. Psychological and individual causes for abuse were the most popular for this sample. Only one participant identified structural explanations for the occurrence of abuse. Cultural explanations were also favored among workers.

It is of concern that the participants within this study believed that mothers should be held accountable for the emotional and physical wellbeing of their children under the ‘failure to protect’ label. In the Nicholson v. Williams case (White, 2003), the court decision recognizes that the dynamics of violence against women require exceptional considerations in “failure to protect” cases and that the removal from the home was not necessarily the best alternative for the well-being of children. As previously noted in other sections, the dynamics of a relationship where violence is taking place, habitually inhibit victims from seeking help or leaving the abuser. The
victim of violence cannot stop the abuse from happening to her nor from it occurring to or in front of the children (White, 2003). To hold the mother in many of these cases accountable for her children witnessing abuse, simply because our society deems women to be primary caregivers is unfair and without merit, if one truly understands the patterns and cycles of violence. Further, child protection agencies must determine if the removal of children who have witnessed their mother’s abuse from the stability of their mother’s care is necessarily protecting children from harm (White, 2003).

Accordingly, if a child protection agency deems the mother as unable to protect her children from harm, then it should provide services and supports to assist her in doing so (White, 2003). It should also hold the perpetrator more accountable and ensure that the abuser is also taking the necessary steps to prevent the children from witnessing further violence. Mainly, most of the plan of action should focus around the perpetrators’ behavior and negative impact on the children, as opposed to the mother’s “failure to protect”.

Seven of the nine child protections workers who participated in this study also struggled, ethically, with holding the mother solely accountable for her children, and felt that more should be done to assist the mother in safety planning. Respondents with less than five years of experience tended to struggle more with the ethical dilemma of conflict of needs between mother and child. Mainly, they had difficulty in focusing on the perceived safety needs of the child, holding the mother accountable for her child witnessing her own victimization, and ignoring the safety issues of the mother. It was evident that one of the participants with experience working in shelters
and with abused women, appeared to understand more about violence against women and the micro, mezzo, and macro barriers impacting victims of violence.

It cannot be denied or understated that the field of child protection is extremely difficult and stressful. Workers are frequently overworked, with heavy and complex case loads, limited time lines, and highly accountable and liable for the services they provide. Child protection is not an easy task, especially when it is under funded, and with a high burn out rate for its employees. Many of the respondents felt unsupported by other services and resources in the community in their attempts to respond to the needs of mothers and felt they had little power to operate in a manner that holds perpetrators more accountable, while providing greater support for the child and adult victims. As one worker highlighted the issues, saying,

"if they [women] are not willing to admit it...and just not being able to empower those women to leave, so then you have to make decisions based on that...you have to make them aware that if the abuse continues that the children will need to be removed" "...it's hard to have the perpetrator leave because often the women are still at risk of him coming back...and we can't legally make him leave the home...only if police lay charges and make it part of his conditions not to frequent the home...”.

One other worker stated that,

"my job is to ensure that the child is safe, my client is the child...I mean you can't help to look at the domestic violence...I'll need to ensure that if mom is open to services she has all of the information, but umm, my immediate, certainly my immediate goal is to ensure the safety of the child”.

It was clear during this study that the majority of respondents had a strong sense and desire to provide the best service and intervention possible for both children and women as they identified struggling with the fact that at times they were unable to
address the women's issues. However, the workers reported that they felt constrained by societal, agency, and legislative barriers.

The issue of training on violence against women for child protection workers has been quite visible within this study. Participants were asked about their perceived training needs and an overwhelming number of workers responded that they could greatly benefit from some form of specific training on patterns of violence. Some of the respondents felt that joint training and education with women's shelters and women's advocates may encourage some cooperative team work in meeting the needs of both mothers and their children. As one worker stated,

"I think it's important to get training about violence, along with the affect on kids... and joint training with shelters along with information on resources, like how to access housing for them (women)... I also think it would be a good idea for workers (child protection workers) to spend time at a shelter to see what their (shelter workers) role is...".

It is my belief that if child protection agencies operate in a manner that supports, educates, advocates, and works in partnership with victims of violence, women may be more open and empowered to work with the agency, as opposed to being resistant out of fear of losing their children. In this sense, the Child and Family Services Act also needs to reflect a better understanding of the complex and multi-faceted issues impacting families, especially women and children. A good worker and a critical thinker should always leave room for and be open to more knowledge and not just rely on one or two tools to make an assessment.
Implications and Recommendations for Social Work Practice

This research study used a very small sample from a single site, thus, several limitations should first be noted. The sample of child protection workers consisted of only women, most with university degrees. Only two of the respondents had a bachelor of social work degree. These respondents appeared to have been more aware of violence against women than professionals without their level of education, and both tended to focus on the safety of both mother and child during the interview process. One out of these two participants also had extensive experience in working with women, who were victims of violence. This worker stood out due to her comprehensive and inclusive knowledge of interpersonal violence, along with the social, environmental, cultural, and personal influences on issues pertaining to violence against women. This finding may suggest that a higher level of education, specifically a Bachelor of Social work or higher, along with specialized training in areas of violence against women, can equip workers with the tools and knowledge to provide a better assessment and intervention plan for women, who are victims of violence, and their children.

Most of the child protection workers in this sample recognized interpersonal violence as an area of concern, but only as it related to the child. A small percentage of participants developed a plan of safety for the victim, whereas the majority focused on the primary safety of the children. Only a small minority of workers in this research study indicated that they would remove the child from the home as an initial response to violence against the mother. It should be noted that about half of the participants
were more recent graduates and thus may have been more exposed to feminist theories and knowledge about power and control in their formal education. Also, approximately six participants of the sample thought the victim could simply leave the abusive relationship. This view can be said to carry with it some victim blaming philosophy since the victim is held responsible for both the cause and the solutions. It is imperative that workers comprehend both the psychological and societal variables associated with women staying in violent relationships.

Interestingly in this study, six of the respondents did not find the risk assessment useful in predicting or identifying issues pertaining to violence against women. Some of these workers felt that the assessment tool was very values based and did not address cultural differences. It would appear that an ecological approach, or person-in-environment approach, would stress the contribution of the structural and social influences to both interpersonal and psychological problems. In any other case, any intervention would overlook a preventative focus and therefore, be incomplete. In short, a more in-depth training module that addresses the unique issues of violence against women, social work education and agency in-service training, which uses current and leading research to provide information on etiology (Mills et. al., 2000), would likely provide better results in serving clients within child welfare.

It has been argued throughout this paper that the discussion of the perfect mother and its counterpart, the 'bad' mother permeates the child welfare system. Idealized images of mothers who are strong, protective self sacrificing and resourceful shape the practices within child welfare, particularly when addressing child witnessing
of violence. Methods of intervention with women who are victims of violence illustrate simply just another example of mother-blaming in our society. The risk assessment tool has been criticized for having false prediction rates. This refers to those instances where high risk was suspected but no maltreatment occurred (Krane and Davies, 2000). This means that even when no maltreatment has occurred within a family unit, factors such as a single-parent unit or a parent with a history of being abused as a child may actually elevate the risk identified within the assessment. When addressing situations of violence against mothers, the risk assessment appears contradictory in that it assesses the family as high risk if violence is occurring in the home, but if the mother was to leave the relationship, a subsequent assessment would conclude the family to be at high risk because she would be a single parent, with a history of being an offending parent under the 'failure to protect' clause. The risk Assessment tool should use wording that focuses on the abuser not the victim, by using phrases, such as "the offender will not verbally, physically, emotionally abuse the adult victim", along with a focus of the needs being placed on the safety for women and their children; assailants, not their victims being accountable for the abuse, and a move to preserve the unit of the children and their non-abusing parent (Fleck-Henderson, 2000). Factors that are value based should be replaced with factors empirically known to be associated with child maltreatment recurrence; it should operate from an ecological perspective and should take into account of contextual effects within a family's system; cultural sensitivity should also be considered in an ecological perspective to risk assessment; finally, the assessment instrument should be able to forecast case
outcomes for members of different racial/ethnic groups (Cash, 2001). Instruments should also be oriented toward assessing the strengths of the family, and "not just the deficits; and when possible families should be involved in the process of safety planning and development of a service agreement. Women who are abused are the best predictors of their own risk of re-assault" (Campbell, 2004). These instruments and tools utilized by child protection workers should address issues of marginalization, while also supporting persons who live with racism, as opposed to punishing them.

It is equally important to integrate woman abuse assessment and response into child welfare practice, ensuring that it is comprehensive and includes violence against women and children, along with other family problems. The focus needs to be on the impact of witnessing on children, the dynamics of women abuse within our society, and the importance of seeing the interrelatedness of mother and child safety, emotional health and wellbeing. Additionally, child welfare training could focus on creative responses with male perpetrators, including increased dialogue with police and court officials. The social work lens within child welfare also needs to be readjusted to address systemic and institutionalized barriers being faced by families in our communities, such as alienation, marginalization, poverty and oppression. Part of anti-oppressive social work is also to allow the client to have self-determination and provide room for advocacy in the community. Examples should include: allowing women to define own problems, intake screening assessment tools to be completed by the mother, informing clients about risk assessment components and seeking client feedback.
Training is an integral part of addressing issues of mother blaming and pathologizing women but it is not enough. One criticism of the Risk Assessment highlighted in this research was that it was too subjective and interpretive. It can be argued, however, that if workers have the appropriate 'micro' training and education around violence against women and child witnessing, they can utilize the tool to address both the needs of the mother and those of the children because the needs would be categorized as one. Another area of training that needs to be address is that of awareness of community services and support groups for both women and children. Workers should have a vast understanding of and connection to local services and support groups and actively participate in advocacy for their clients. In meeting the needs of both mother and child, child protection workers should be actively participating in the connection to services and during the transition phase. Although this research was limited to heterosexual interpersonal violence, it is crucial that child protection workers also receive training around the analysis of violence against men, violence against women, and same-sex interpersonal violence, so that they are better equipped to assist our diverse community.

Education also needs to be provided, not only to workers but also to the community, about the historical context of mother-blaming and the identification of 'bad' mothers. Additionally, better education about mother abuse and the impact of placements on children needs to be mandated. Along with community and agency education, it is important to forge collaborative links with other agencies and organizations in order to educate all community members about the connections
between child maltreatment and wife/woman abuse and provide preventative and
direct services. It is equally crucial to understand the social and professional
responsibilities when dealing with violent men. Helping professionals better
understand the distance between their theories and assumptions and the actual
experience of abused women is a basic necessity. Child welfare, and the community
at large, needs to hold the male perpetrator accountable for abuse and their actions,
not the victim, and they need to be involved in the service agreement.

In terms of the absent father or male perpetrator, offending fathers should be
made aware by the agency, the family court and criminal court systems, and society in
general, that by failing to shield their children from observing their mother being
exploited and brutalized by them, they are also maltreating their children and so are
should be liable to criminal prosecution(Somer and Braunstein, 1999). With proper
training and support, workers can also play a more active role in advocating for the
male perpetrator and providing the offender with services and supports systems to
assist in having the perpetrator leave the family home and seek help, as opposed to
relying on the mother and children to have to leave and enter the shelter or foster
home systems. Lastly, training should note be limited to only specialized teams, but
rather be spread to all workers.

Although there are no easy answers for responding to these complex issues,
communities must find ways to provide for the needs and safety of both women who
are victims of violence and their children, which share accountability with the parents
and hold batterers accountable (Kaufman Kantor and Little, 2003). It is crucial that
society, the legal system, and all social services send the same message and hold perpetrators more accountable for their actions and failure to act. For child welfare agencies and other community services alike, clear definitions of neglect and precise understanding of how women abuse and child maltreatment overlap are needed to adequately understand and address this problem, especially without further re-victimizing the women and children.

Researchers and academics have previously documented and identified the tensions and conflicts between battered women advocates and child protection workers. This opposition has been attributed to a number of factors, including high caseloads, different philosophies and mandates, terminologies, and competition for funding (Mills et al., 2000). Thus, women's advocates and child protection workers may find the philosophies and practices at odds with the safety of their clients. Despite the co-occurrence of child maltreatment and domestic violence, the service sectors that treat these problems continue to operate independently. Child protection services primarily focus on children whereas battered women services focus on women who are victims of violence: collaborations should be directed more toward strengthening community partnerships across law enforcement, judiciary, and health care institutions (Schechter and Edleson, 1999 in Kaufman Kantor and Little, 2003).

Essentially both women's and children's needs should be viewed as interconnected and interdependent, instead of conflicting and opposing. This suggests that there is a need for the development of age-appropriate interventions that target the effects of violence against mothers for children and their abused
mothers. In order to be most effective with children, it will be indispensable to address the needs of mothers and children simultaneously, either in conjoint work or with a strong parent guidance component focused on addressing the impact of mother abuse on their children. Women may also be in need of information about how their children may be affected and specific assistance with how to address those effects at an appropriate developmental level (DeVoe and Smith, 2003).

**Implications for Future Research**

It is necessary to hear the voices of the service users, especially those of women, and listen to how they perceive the issues and methods of intervention in order to better serve them and assure that they are not being re-victimized in the process. I believe that it would be of value to conduct research on the perceptions of women involved in child welfare as clients, who are also victims of violence, and inquire on how they perceive and identify the issues and interventions, what they believe are the solutions, and how they feel child welfare can be of assistance to them.

Further, we need to know the extent to which violence against women-related failure to protect results in different consequences for the child and the longitudinal consequences of varying types of exposures. This may be very relevant for particular research, clinical assessments, or placement decisions. There is also a need to investigate women's perceptions of their children's experience of family violence and the ways in which children's self-reports influence decision making by child protection workers and the courts. (Kaufman Kantor and Little, 2003). Lastly, research on the
impact of training on child protection workers is needed, along with on the effectiveness of collaborative training with shelter workers, child protection workers and women's advocates.

There are a large number of social workers currently working in child protection agencies all over Canada, and especially in Ontario. Collectively, social workers within the field of child welfare have the potential for being a very strong lobbying and advocacy group to bring about collective change. Further, if social workers work towards uniting forces with women's advocacy groups and shelters, they can also bring about much collaborative change for women who are victims of violence and children who are witnessed to such violence residing in our communities.

Concluding Thoughts

I recognize the difficulty and barriers faced by women child protection workers and by the women with whom they work. It is essential to ensure the safety of children at all times, and I fully accept and comprehend the issues of professional responsibility and liability being faced by workers today. However, I believe there is room in child welfare services to reflect both the woman's and child's needs through the development of services that serve both mother's and children's needs.
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Interview Schedule

This Interview Schedule is for the use of the interviewer only. It will not be provided at any time to the participants. The interviewer will use this schedule as a guide during the interview process.

Child Protection Workers' Perceptions and Interventions with Women Abuse

Interview Schedule

Respondent I.D. _______ (number) _______ male or female

1. Work Experience:

   Number of years worked as a Social Worker? _______________

   Number of years worked in the field of Child Welfare? _______

2. Current Position: __________________

3. Education:

   ( ) Graduate
   ( ) B.S.W.
   ( ) B.A./B.S.W.
   ( ) Associated Arts Degree

4. Have you participated in any additional education pertaining to issues of Violence Against Women?

   ( ) Training offered by the agency
   ( ) A course at a local university
   ( ) Read an article on Violence Against Women
   ( ) A workshop in the community

5. What is the current practice in cases where there is both child maltreatment, such as neglect, and violence against women occurring in a family whom you are assessing in your practice?
6. As you are aware, the Child and Family Services Act in section 37(2)g it states “there is a risk that the child is likely to suffer emotional harm of the kind described in sub clause f...resulting from the actions, failure to act or pattern of neglect on the part of the child’s parent or the person having charge of that child”. What would you say are the difficulties that you have encountered in serving families where both types of abuse are occurring?

7. Would you use any tools/resources or consult with a supervisor in order to chose a means of intervention? (If yes, please describe how you would come to a decision on how to intervene in a case involving woman abuse)

8. How helpful do you find the Risk Assessment Model 2000 in identifying violence against women in cases? And is it helpful in anyway?

9. What do you define as Woman Abuse? (this is an open-ended question. Promps will be used as needed)

   ( ) Threatening Spouse/partner with a knife or gun but not using it
   ( ) Throwing objects at spouse
   ( ) Slapping spouse with hand
   ( ) Pushing Spouse
   ( ) Insisting on sex, even when spouse says she is not in the mood or doesn't want to have sex
   ( ) Check up on where spouse is all of the time
   ( ) Not allow spouse to open a bank account
   ( ) Disagreeing on how much to spend on personal items
   ( ) Disagreeing on how to discipline a child
   ( ) Not allowing spouse to use the telephone
   ( ) Kicks the family dog in front of spouse
   ( ) Damages spouse's personal items

10. Opinions pertaining to Causes of Woman Abuse. (this is an open-ended question. Promps will be used as needed)
( ) Poor impulse control
( ) Childhood experiences with violence
( ) Men who believe they have the right to control women
( ) Substance abuse
( ) Belief that women are property
( ) Some cultures permit physical punishment of women
( ) Culture that encourages subservience in women
( ) Arguments that get out of hand
( ) Mental illness
( ) Employment Pressure
( ) Unstable employment history
( ) Overcrowded housing
( ) Women's lower status in culture
( ) Poverty
( ) Bab marriages
( ) Women wanting to make more decisions in the home
( ) Women who work outside of the home
( ) Large power or status differential within the culture
( ) Isolation or lack of resources
( ) Women who are pregnant or with small children

11. Describe some characteristics of male perpetrators. (This is an open-ended question. Prompts will be used as needed)

( ) Men who are uneducated
( ) Men who are financially strained
( ) Men who are unemployed
( ) Men who are members of a particular culture
( ) Men who are provoked by their partner
( ) Men who have a substance abuse issue
( ) Men who work in the labour sector
( ) Men who show extreme jealousy
( ) Men who are unable to cope with stress/mental health concerns
( ) Men with a history of personal or family discord
( ) Men with a history of criminal activity
( ) Men with a history of childhood abuse

12. Do you feel you have the necessary tools/resources/knowledge to intervene in cases involving violence against women? Please explain.
13. What, if any, are your limitations in working with families where woman abuse is a concern?

14. What, if any, are your perceived training needs for child protection workers in dealing with cases involving violence against women?