

Data Report

2022



**Domestic
Violence
Co-Location
Program**

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Acknowledgements

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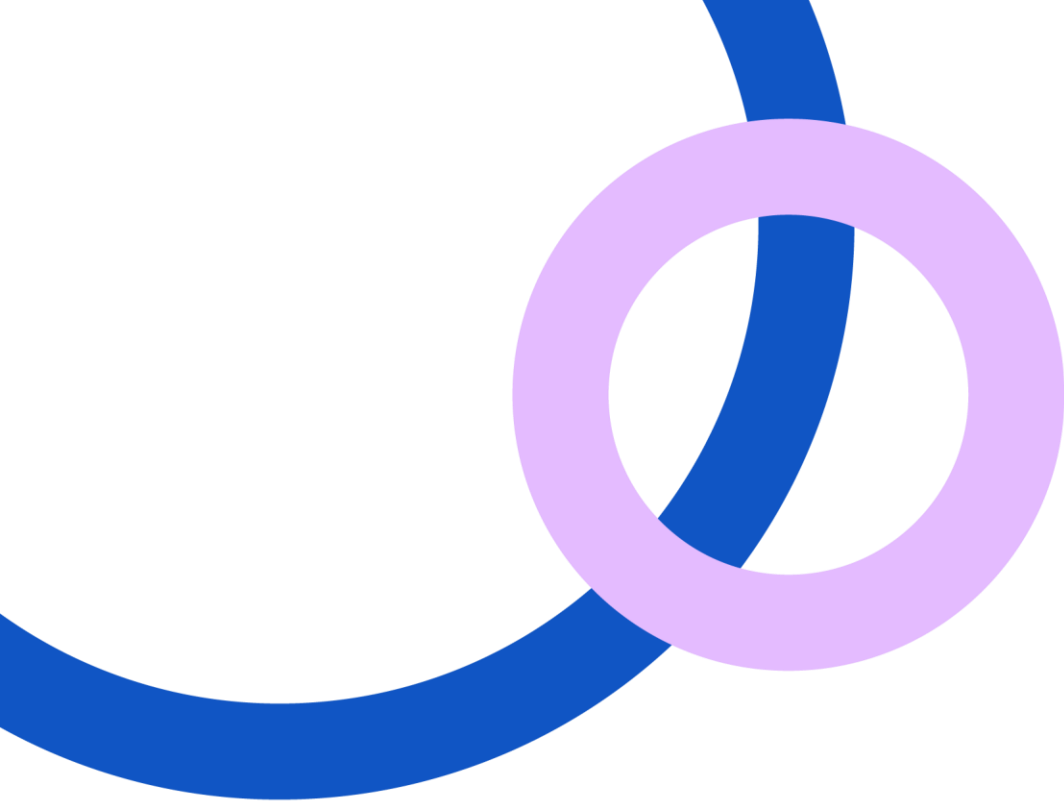
Table of Contents

01	Introduction	05
02	Data Limitations	19
03	Quantitative Data Analysis	21
04	Qualitative Analysis of Case Notes	35
05	Summary of Federal Research	42
06	Cost Analysis	44
07	Vision for DVCLP	47
08	References	49



Key 2022 DVCLP Takeaways

- The **Domestic Violence Co-Location Program (DVCLP)** is an innovative and collaborative program aimed at meeting the needs of families across Illinois experiencing both domestic violence and the child welfare system.
- Domestic Violence Co-Located Advocates (DVCLAs) report **positive experiences working with caseworkers and families** to provide domestic violence education, connection to services, and engaging in institutional advocacy to improve outcomes for survivors.
- In 2022, the **DVCLP doubled in size**, expanding from two Department of Children and Family Services offices to four, resulting in a 4% increase in total clients served compared to 2021.
- In 2022, the DVCLP served:
 - **765** Families
 - **1,173** Children
 - **1,977** Individuals (including caseworkers, adult and child survivors, and PUVCC)
- **72%** of families whose race was known by DVCLAs had **children of color**.
- **African American families were overrepresented among DVCLP participants** when compared to local demographic information. This aligns with existing research that African American families are disproportionately impacted by the child welfare system in Illinois.
- The DVCLAs had **direct contact** with one or more members of the impacted family in **71%** (544) of cases. Specifically, DVCLAs had direct contact with 527 adult survivors, 282 child survivors, and 93 persons using violence and coercive control (PUVCCs.)
- The DVCLAs worked with teams across the child welfare system, receiving **92% of referrals from DCFS** (70% from Investigations, 17% from Intact Services, and 13% from Placement Services teams) **and 8% from private, purchase of service (POS) agencies**.
- In **40% (466) of cases**, DVCLAs reported knowing that the **children remained with their adult survivor parent**.
- Across **90% of consultations**, DVCLAs reported confidence that the DCFS caseworker had received **information about domestic violence dynamics**.
- Overall, **85% of the caseworkers** partnered with the adult survivor in crafting interventions that **buffer risk and enhance their strengths**.
- In 2022, it is estimated that the DVCLP saved the state of Illinois anywhere **between \$5 and \$10 million**.



01

Introduction



What is DVCLP?

Overview

The Domestic Violence Co-Location Program (DVCLP) is an innovative and collaborative program aimed at meeting the needs of families experiencing both domestic violence and the child welfare system.

Focusing on improving the effectiveness of Illinois Department of Children and Family Services (DCFS) interventions into the lives of families experiencing domestic violence and supported by local and statewide partners and stakeholders, the DVCLP places domestic violence advocates in DCFS offices to work with child welfare professionals and to support families experiencing domestic violence.

Need

Responding effectively to families experiencing domestic violence has historically been and is contemporaneously challenging for child welfare systems. Although **domestic violence is present in 30 to 60% of child welfare caseloads nationally¹** and is one of the three most common circumstances present in the lives of families coming to the attention of DCFS, domestic violence cases are some of the most complex and difficult cases for child welfare workers to navigate. Child welfare workers often struggle to understand the dynamics of domestic violence, accurately identify the roles of the adult survivor and the parent using violence and coercive control (PUVCC), partner with the adult survivor in non-punitive ways, foster avenues of accountability with the PUVCC, exercise alternatives to removing children from their homes, and provide concrete supports and services that meet the needs of children and their families. **Families are fearful of losing their children when DCFS becomes involved in their lives, and many survivors of domestic violence do not reach out for help out of this fear.**

These challenges are heightened amidst a quasi-post-COVID-19 environment, significantly understaffed child welfare offices, and the disproportionate representation of families of color in the child welfare system. More specifically, across the country, 53% of Black children will experience a child welfare investigation by age 18, compared to 33% of all children.² In Illinois, African American children have been over-represented at every decision point in the child welfare system.³ As of October 2020, 43% of children in foster care in Illinois are Black, although Black children are only 15% of the state's general population, revealing an overrepresentation of 28% in foster care.⁴ **In the Cook County region, African American children are in foster care 2.5 times more than their presence in the general population.⁵** In the Northern Region of DCFS, which includes Winnebago and Lake Counties, two of the DVCLP sites, African American children are overrepresented in foster care **5 times** their presence in the general population, demonstrating the highest racial disproportionality in the state.⁶

Ineffectively responding to families experiencing domestic violence, in part by unnecessarily removing children from their parents, deeming adult survivors to be neglectful, and/or perpetuating systemic oppression reduces the safety and stability of families and communities, and further harms and causes trauma for children.

Collaboration between child welfare, domestic violence professionals, and other community partners and stakeholders has been established as an essential strategy to addressing these needs and avoiding these harmful outcomes.

Program Model

Adapted from evidence-informed programs in other states, the DVCLP model places a Domestic Violence Co-Located Advocate (DVCLA), employed by a local partner domestic violence agency, in DCFS field offices. **The role of the DVCLA is to help build the systemic capacity of child welfare investigative, intact, and permanency workers from DCFS and private agencies to more effectively respond to families experiencing domestic violence.** The DVCLA also supports families during child welfare interventions, models and fosters meaningful engagement with the person using violence and coercive control in order to promote sustainable accountability, and facilitates linkages to domestic violence and community-based services.

The DVCLP is internally rooted in the **Adult and Child Survivor Centered Approach** ("the Approach"). The Approach was developed by the Quality Improvement Center on Domestic Violence in Child Welfare administered by Future Without Violence through the U.S. Department of Health & Human Services, Administration for Children and Families, Children's Bureau. The Approach is a philosophical underpinning that is **family-centered, trauma-informed, strength-based and equity-driven**. The Approach guides practice to address the mental and emotional wellbeing of children by prioritizing their need to remain with the adult survivor in safety and stability, which social science research has long established as the critical pathway toward healing from any trauma the domestic violence caused children to experience.

The Approach and practice of the DVCLP is aligned with national child welfare initiatives, such as the federal prevention-focused legislation of the Family First Services Prevention Act, and other statewide child welfare initiatives that focus on seeking, integrating, and elevating the family voice into interventions and partnering with families to build upon their strengths and buffer risks.

Terms

The DVCLP uses the following terms:

Domestic Violence

A pattern of violent and controlling strategies, including physical, sexual, emotional, economic, or psychological abuse, used by a person to gain or maintain power and dominance over an intimate partner.

Adult Survivor

The parent who has experienced domestic violence and the child welfare system (a.k.a. the non-offending parent)

Child Survivor

The child who has witnessed or experienced domestic violence and the child welfare system.

Person Who Uses Violence and Coercive Control (PUVCC)

The person who perpetrates domestic violence.

Partner Domestic Violence Agency

The domestic violence agency that is partnered with the local DCFS office to hire, employ and supervise the DVCLA and that enters into a Memorandum of Understanding with DCFS to participate in the DVCLP.

Allegation 60, Part B

Allegation 60 in DCFS administrative rules is the allegation that parent or caretaker has created an “environment injurious.” This is an environment that creates a likelihood of harm to the child’s health, physical well-being, or welfare and that the likely harm to the child is the result of a blatant disregard of parent or caretaker responsibilities. Domestic violence is the second option (Part B) of the several specifically named environments, that may, though not by itself, create a real, significant, and imminent risk of moderate to severe harm to a child. **The adult victim of domestic violence is presumed to not be neglectful or to not be have created an environment injurious to the child so long as he or she has exercised precautionary measures to prevent or mitigate the real, significant, and imminent risk of moderate to severe harm to the child.**



Program Partner Descriptions

Illinois Department of Children and Family Services (DCFS)

The mission of DCFS is to protect children who are reported to be abused or neglected and to increase their families' capacity to safely care for them; provide for the well-being of children in its care; provide appropriate, permanent families as quickly as possible for those children who cannot safely return home; support early intervention and child abuse prevention activities; and work in partnerships with communities to fulfill this mission. DCFS answers more than 220,000 calls to the Child Abuse and Neglect Hotline and provides services to 60,000 families annually through a staff of 2,600.

The Management Entity

Three organizations support the implementation of the DVCLP by serving as liaisons with DCFS, providing technical assistance and onboarding, drafting policies and procedures, planning and facilitating meetings, collecting and analyzing data, and securing funding.

Ascend Justice: Ascend Justice is a 501(c)(3) non-profit organization based in Chicago, Illinois. Ascend Justice's mission is to empower individuals and families impacted by gender-based violence or the child welfare system to achieve safety and stability through holistic legal advocacy and system reform. Formerly known as the Domestic Violence Legal Clinic, Ascend Justice was founded in 1982 and has served survivors of gender-based violence with free legal services for more than forty years. Since 2005, Ascend Justice attorneys and volunteers have worked from offices inside the Cook County Domestic Violence Courthouse, providing onsite legal assistance to tens of thousands of survivors seeking Orders of Protection. Ascend Justice also offers the holistic legal advocacy necessary for survivors of gender-based violence to become safer and more independent, ranging from representation in child custody and support cases, immigration, housing, employment and consumer matters and family defense issues. In recognition of the criminalization of survivors of gender-based violence, as well as the high proportion of incarcerated women who are survivors of gender-based violence, Ascend Justice launched a project to serve incarcerated survivors in 2021.

Illinois Coalition Against Domestic Violence (ICADV): ICADV is a statewide

membership organization working to eliminate domestic violence in Illinois and to create a more just, accepting, and safe society for everyone. ICADV serves over 50 statewide agencies who provide direct service to survivors and their dependent children. Together with its member organizations, ICADV aims to increase access to ever-improving services for survivors of all backgrounds by advocating for strong policies that keep survivors safer and foster accountability with those who use violence and coercive control. ICADV educates the public on the root causes of domestic violence and focuses on preventing the cycle of violence from continuing.

The Network: Advocating Against Domestic Violence (The Network): The Network is a collaborative membership organization with 40+ members dedicated to improving the lives of those impacted by domestic violence through education, public policy and advocacy, and the connection of community members to direct service providers. The Network operates the Illinois Domestic Violence Hotline.

Partner Domestic Violence Agencies

Four partner domestic violence agencies are part of the DVCLP who hire, employ, and supervise the DVCLAs.

A Safe Place: A Safe Place is the sole community-based provider of services exclusively addressing domestic violence in Lake County, Illinois. Through multi-faceted programs, A Safe Place assists victims in transforming their lives after domestic violence, prevents future abuse by addressing its root cause through abuser intervention programs, and educates the community about domestic violence. A Safe Place provides the following services: 24/7 hour hotline; 33-bed emergency shelter; evaluation and group education for perpetrators of abuse; supportive permanent and transitional housing for victims with on-site counseling, advocacy, and life skills education; counseling services for individuals and groups in English and Spanish throughout Lake County, including Gurnee, Lake Forest, and Lake Zurich; a Family Visitation Center that provides court-ordered supervised visitations and monitored custody exchanges in a safe environment for families of domestic violence; court house advocacy located in the 19th Circuit Courthouse in Waukegan to assist victims in filing orders of protection; community education programs; and prevention education. All of the domestic violence survivor services are free, confidential, and voluntary.

Family Rescue: Family Rescue is dedicated to eliminating domestic violence in the Chicago community by providing comprehensive support services and shelter to victims of domestic violence, particularly to abused women and their children. Family Rescue also engages in advocacy to promote future system change and encourages prevention through community education. The agency provides the following services: crisis intervention; safe shelter with short-term support; individual and group counseling; 24-hour bi-lingual crisis line; comprehensive legal advocacy; parenting and life management skills; economic empowerment and career connections; educational support; enhanced children/youth services; after school care; substance abuse recovery support; community education; and affordable housing. All of the domestic violence survivor services are free, confidential, and voluntary.

Remedies Renewing Lives (Remedies): Remedies, located in Winnebago County, Illinois, provides critical and lifesaving services to adults struggling with substance

abuse and to victims of domestic violence and their children, and works to end the cycle of abuse and addiction through education and community involvement. Remedies provides a variety of domestic violence services in Winnebago and Boone County, including the only domestic violence shelter and 24-hour domestic violence hotline in that area. Each year, Remedies serves over 1,500 victims of domestic violence, roughly 20% of which are children. Remedies provides a safe, supportive environment and critical, client-centered services designed to promote the healing of individuals and families. Remedies offers advocacy, education, counseling, case management, order of protection assistance, and emergency shelter for survivors of domestic violence. Remedies' shelter is open 24 hours a day, 7 days a week, 365 days a year and all the domestic violence services are free, confidential, and voluntary.

Sarah's Inn: Located in Forest Park, Illinois, Sarah's Inn is a comprehensive domestic violence agency serving Chicago and 22 surrounding West Cook County suburban communities. The agency has seven off-site locations through partner agencies and area courthouses throughout Chicago and West Cook County. Sarah's Inn provides holistic intervention services to adults and children impacted by domestic violence, providing them necessary supports and resources, and a safe environment to process and heal from the trauma they have experienced. The agency works in partnership with local stakeholders to run education and training programs to promote an appropriate community response to violence. The agency provides legal support services to help ensure that survivors of domestic violence receive equal rights and protection under the law. Sarah's Inn's Partner Abuse Intervention Program (PAIP) works with individuals who are ready to change their violent and controlling behavior choices in a community of honesty and accountability. Sarah's Inn's Together Strong Project works in partnership with parents, educators, and adolescents through school-based violence prevention education programming, providing critical information for adults and students on how to prevent relationship violence, how to protect themselves against potential harassment, and how to seek help if they are a victim of violence or abuse. Sarah's Inn has a 24-hour crisis line, which is a free and confidential resource for safety planning. The agency is certified through the Illinois Certified Domestic Violence Professionals (ICDVP) Board as an official training site for Illinois Certified Domestic Violence Professionals and Illinois Certified Partner Abuse Intervention Professionals. All of the domestic violence survivor services are free, confidential, and voluntary.

Pairings

The following pairings exist between the partner domestic violence agencies and DCFS field officers:

- **A Safe Place** - Waukegan DCFS office
- **Remedies Renewing Lives** - Rockford DCFS office
- **Family Rescue** - 6201 S. Emerald, Chicago DCFS office
- **Sarah's Inn** - 1911 S. Indiana, Chicago DCFS office

DCFS Teams & Processes

DCFS itself carries out some of its responsibilities while sub-contracting with private agencies to carry out other responsibilities. This means that families may be involved with DCFS and/or a Purchase of Service (POS) agency during the various stages of child welfare interventions. There are three stages of child welfare interventions: investigations, intact families services, and permanency/placement. Across the state, DCFS conducts all investigations. For intact family and placement/permanency services, DCFS sometimes contracts with private agencies and at other times and in certain locations provides these services itself.

The following describes each of the DCFS stages of intervention:

Investigations

DCFS Department of Child Protection investigators receive referrals about families from the Illinois Child Abuse and Neglect Hotline. Investigators are tasked with concluding if parents or caregivers have abused or neglected a child(ren) while also determining if a child(ren) is safe. DCFS investigators have the power to take protective custody of children, thereby removing them from their families. At the end of the investigation, investigative findings of abuse or neglect will be made.

Intact Family Services

Following investigations, intact family services may be offered to families. Intact family services aim to provide services and support to families while children remain with their families. Intact family services include caseworker oversight, service plans, service referrals, and family engagement in services. Intact family services are voluntary for families, unless ordered by a judge as part of a juvenile court case.

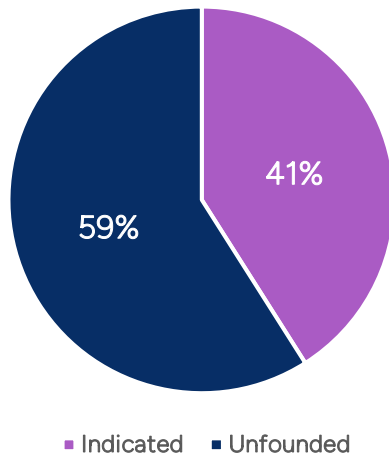
Placement/Permanency Services

Placement and permanency services occur when families are involved in juvenile court. If children have been removed from their parents, a juvenile court case follows. (Less commonly, a juvenile court case may occur where the children are still with their parents.) Placement and permanency services include overseeing out-of-home placements such as foster care, facilitating visitation between parents and children, obtaining an integrated assessment, developing a service plan, making referrals for services, evaluating participation and progress in services, and providing the court with recommendations regarding the permanency goal for the family.

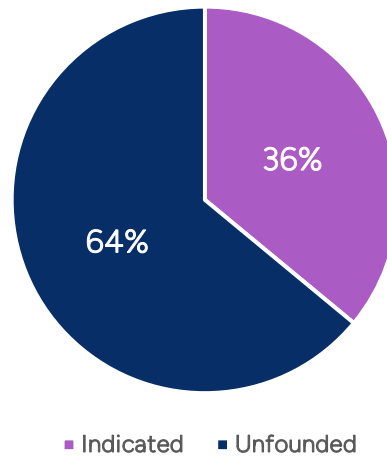
Current Intersections of Domestic Violence & DCFS⁷

In 2022, there were 72,155 DCFS investigations of Allegation 60 - Environment Injurious. The majority of these, 37,242 or 52%, were for Option B, Domestic Violence. **In 2022, 63% of all occurrences of Allegation 60 B (23,645 allegations) were the only allegation of abuse/neglect.** Allegations 60 B were slightly more likely to result in indications than Allegations 60 in general in 2022.

Percent of Allegation 60 B Cases with Indicated, Unfounded Outcomes in 2022

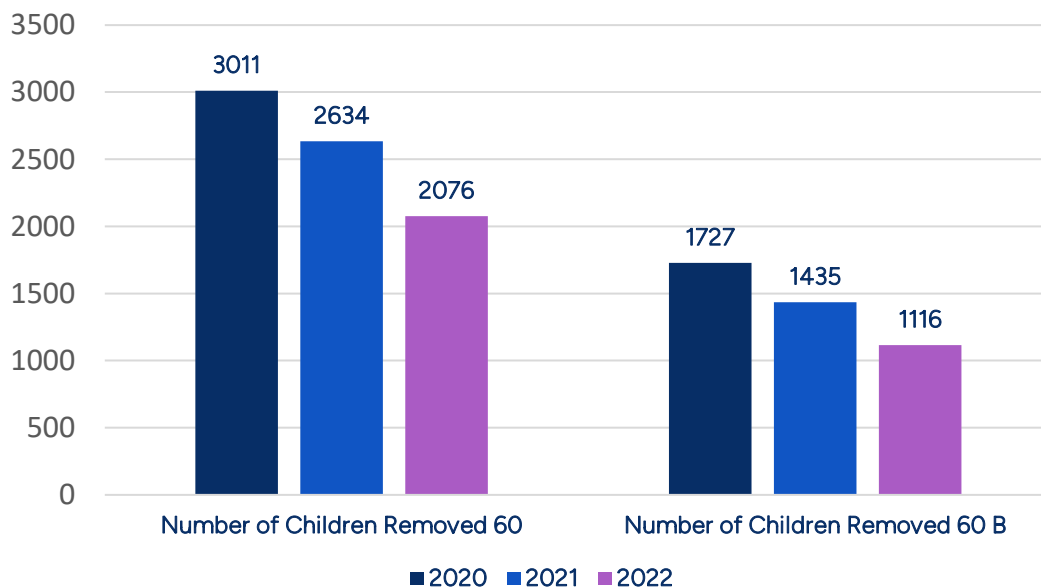


Percent of Allegation 60 Cases with Indicated, Unfounded Outcomes in 2022

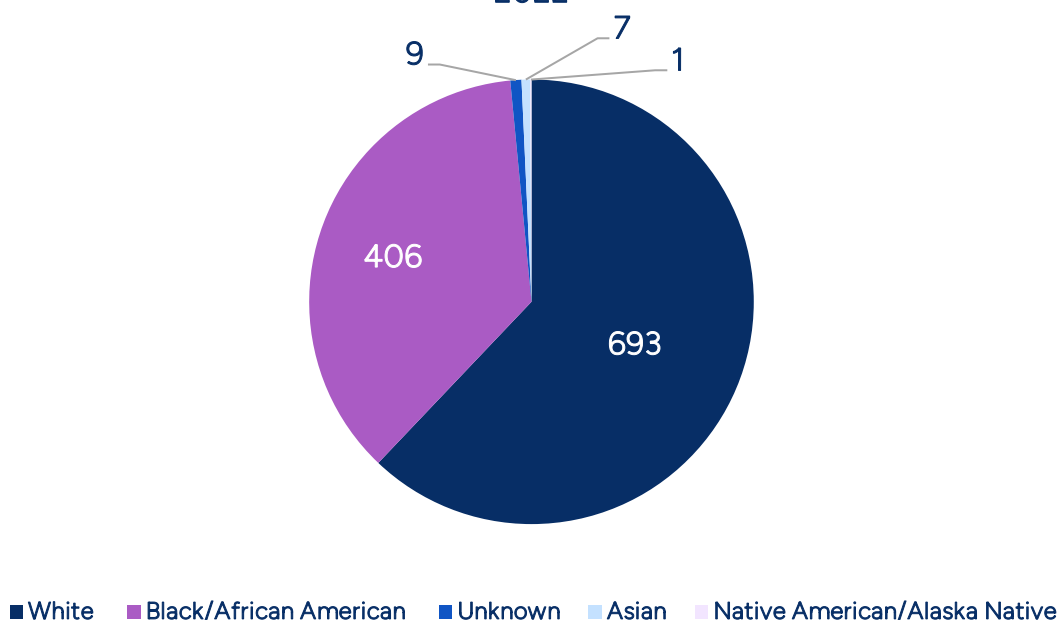


In 2022, 1,116 children were removed from parents in cases where the only allegation of abuse or neglect was Allegation 60 B, experiencing domestic violence. Of the children who were removed by DCFS where the parent's only allegation was Allegation 60 B, 62% were White, 36% were Black or African American, 1% were Asian, another 1% had unknown race, and .1% were Native American or Native Alaskan. Even though roughly 15% of the population of Illinois identifies as Black,⁸ Black children involved in DCFS investigations make up 36% of domestic violence-related family separations, creating a distinctly disproportionate impact on Black families.

Number of Children Removed by DCFS in Cases with Only Allegation 60 or 60 B Over Time



Children Removed Where Allegation 60 B was Only Allegation in 2022



In the last three years, there has been a downward trend in the number of children removed by DCFS related to Allegation 60 and Allegation 60 B specifically. DVCLP locations are in two of the highest removal rate counties, Cook and Winnebago. In the last three years, those two counties have also seen the largest decrease in removing children due to domestic violence alone.

Counties with the Highest Number of Children Removed due to Only Allegation 60 B for 2022		
County	Number of Children Removed	% of All Children Removed in IL
Cook	150	12%
Will	77	6%
Peoria	63	5%
Macon	62	5%
Winnebago	60	5%

Largest Decreases in Children Removed Due to Only Allegation 60 B by County in 2022

County	2020	2021	2022	Abs. Diff.	% Change from 2021	% Change from 2020
Winnebago	1882	1953	1548	-405	-21%	-18%
Cook	323	211	150	-61	-29%	-54%
Peoria	121	116	63	-53	-46%	-48%
Madison	39	63	25	-38	-60%	-36%
Tazewell	75	58	23	-35	-60%	-69%

Role of the DVCLA

The main responsibilities of the DVCLA are expanded upon below:

Consultation

The purpose of the *consultation* is to help build the capacity of child welfare professionals to adequately understand and interpret the dynamics and impact of domestic violence on the family and to craft effective interventions that enhance the safety, wellbeing, stability and healing of all members of the family. The DVCLAs support the child welfare workers in the DVCLA's assigned field office by helping to identify the presence of domestic violence and linking clients to appropriate services. DVCLAs cannot be involved in a case without an initial consultation.

Direct Contact

The purpose of *direct contact* is to directly communicate with all members of the family to assist and support the family during the child welfare intervention. In addition to working directly with the adult and child survivors, an important focus of the DVCLP is to meaningfully engage with the PUVCC in order to foster avenues of accountability. When engaging in direct contact with families, the DVCLA may provide:

- Information about child welfare;
- Support and education on domestic violence;
- Domestic violence safety planning;
- Crisis intervention;
- Advocacy;
- Expedited access to domestic violence services; and
- Referral to other community or social services.

By engaging in direct contact, the DVCLA may specifically be able to do the following:

- Participate in Home Visits, along with the child protection specialist, intact or placement team;
- Participate in Child and Family Team Meetings, Administrative Case Reviews, juvenile court proceedings and transitional visits between investigations, intact, and placement;

- Communicate with the family about the nature and severity of the abuse, the connection between domestic violence and the child protection issues identified by DCFS, and information about options and resources;
- Assist in the identification of safe emergency shelter and other housing options;
- Identify the adult survivor's protective factors;
- Determine the impact of the domestic violence on the children;
- Provide advocacy and share information with the adult survivor around the child welfare system;
- Engage in domestic violence safety planning with the adult survivor and children, when appropriate;
- Connect the adult survivor and children with services either at DVCLA's Partner Domestic Violence Agency, another domestic violence agency or other social service agency;
- Provide referrals to and advocacy for needed services to address other struggles, including emergency shelter, support groups, crisis intervention, legal representation, financial assistance, housing, and medical care; and
- Meet with the PUVCCs and connect them with the batterer intervention services either at the DVCLA's Partner Domestic Violence Agency or another DHS-protocol approved Partner Abuse Intervention Program (PAIP).

Training/Education

One of the main functions of the DVLCAs is to help build the capacity of child welfare professionals to work effectively with families experiencing domestic violence. In addition to consultations, the DVCLAs can conduct domestic violence trainings for child welfare professionals in collaboration with the DCFS Domestic Violence Intervention Program and the DCFS Office of Learning and Professional Development. Such training opportunities can foster collaboration and cross systems advocacy to strengthen partnerships and enable a more coordinated community response to domestic violence. In addition to training child welfare professionals, the DVCLAs can provide internal training for staff at their partner domestic violence agencies. As such, the DVCLAs help build the capacity of their colleagues to understand the child welfare system and the roles and responsibilities of child welfare workers.

Community Collaborations

The DVCLAs are encouraged to participate in existing collaborations related to domestic violence in their regions. The DVCLAs are also encouraged to identify and foster opportunities for greater collaboration between community and systemic stakeholders in responding to and supporting families experiencing domestic violence.

History

1999: The National Council of Juvenile and Family Court Judges publishes *Effective Interventions in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice* (a.k.a *The Greenbook*), which continues to serve as the best practice guide for the intersection of child welfare and domestic violence. The DVCLP builds upon the tenets of *The Greenbook*.

2017, Summer: DCFS and community partners travel to Florida to learn about the statewide domestic violence and child welfare colocation program. The National Council of Juvenile and Family Court Judges sponsors site visit.

2017, Spring/Summer: DCFS and its partners seek the passage of SB 646 bill to legislatively codify the DVCLP; the bill passed both houses unanimously; and the Governor signs P.A. 100-406 into law.

2017, Fall: Illinois is selected as a Research and Capacity Building Project of the Quality Improvement Center on Domestic Violence in Child Welfare (QIC-DVCW) that is administered by Futures Without Violence. The QIC-DVCW is an initiative of the U.S. Department of Health & Human Services, Administration for Children and Families, Children's Bureau. The QIC-DVCW grant funds the DVCLP from October 2019 to October 2021.

2019, October: The DVCLP launches in the Waukegan and Rockford DCFS offices, with A Safe Place and Remedies Renewing Lives as the respective partner domestic violence agencies.

2021, September: The federal grants ends and the two DVCLP sites are funded through private philanthropy.

2022, October: Two new DVCLP site are added, partnering Family Rescue with the 6201. S. Emerald, Chicago DCFS office, and Sarah's Inn with the 1911 S. Indiana, Chicago DCFS Office. The DVCLP exists in four sites in Illinois.

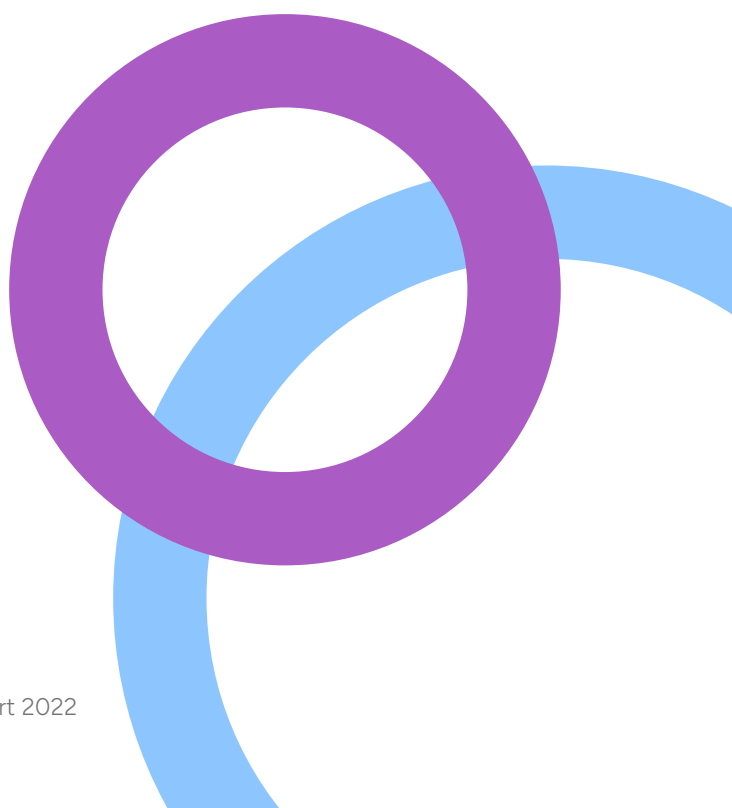
Goals

The DVCLP aims to improve outcomes for families and communities by:

- Preventing children from entering foster care and reducing the number of children in foster care through supportive, robust and effective front-end interventions, thereby saving money without jeopardizing safety;
- Enhancing the safety, wellbeing, stability and healing for children and their families;
- Addressing systemic racism, decreasing the disproportionality and disparity of Black children and families, and increasing equity;
- Cultivating collaboration and greater coordination among traditionally siloed systemic responses to families experiencing domestic violence; and
- Reducing the frequency, severity, and occurrence of domestic violence.

Funding

From 2019 to 2021, the Quality Improvement Center on Domestic Violence in Child Welfare funded the DVCLP. From 2021 to 2022, philanthropy through ten private foundations and grantors funded the DVCLP. From 2023 onward, the intention is to fund the DVCLP through state funds from the Illinois Department of Human Services.





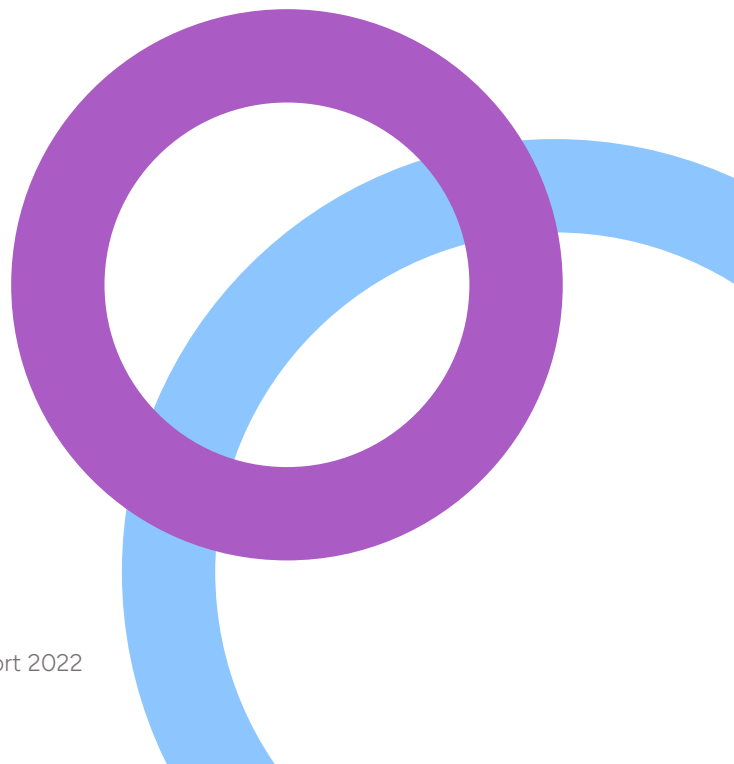
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Data Limitations

Data Limitations

The nature of the DVCLP places limitations on the data available for the program to review. Limitations of the data in this report include the following:

1. The DVCLP began in October 2019 and is an evolving program. The procedures for data collection have changed throughout 2022 due to pragmatic considerations from the DVCLAs collecting and reporting information. As a result, some data points have been collected for less than one year.
2. DVCLAs work for their non-profit domestic violence agencies and not DCFS. Therefore, they do not have access to the internal DCFS records system, Statewide Automated Child Welfare Information System (SACWIS.) While DVCLAs may be involved in cases to completion, they may also consult and provide direct services on an as needed basis. Due to these factors, DVCLAs only know what is reported to them by caseworkers or the families they are serving.
3. The DVCLP evaluation is not a scientific research study with an expert evaluator. There is no control group to compare against the families served by DVCLAs. This means that no causal conclusions can be drawn from this report; however, there are important correlations that the report explores.
4. All DVCLP services are confidential, which means that data collected and reported by DVCLAs is de-identified. This anonymity means that there is a limited perspective on some case elements. For example, there is no data on the length of cases carried over month to month.
5. All demographic data about program participants is shared on a voluntary basis. This results in limited demographic data for the program to analyze.





03

DVCLP by the Numbers

Quantitative Data Analysis

Quantitative Data Analysis

DVCLAs maintain records of their consultations with DCFS caseworkers and direct contact with families. These service activities are reported to the DVCLP Management Entity on a monthly basis and records are de-identified. The following quantitative data analysis is based on these records, beginning on January 1, 2022, and running through December 31, 2022.

Program Summary Totals

Who Referred Cases to the DVCLAs?

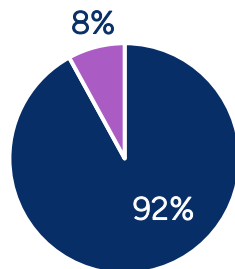
DVCLAs are involved in cases through referrals from DCFS teams and Purchase of Service (POS) agencies. Analyzing where referrals come from gives insight into what teams within DCFS and its contracted agencies are most utilizing the program.

Program Wide Referrals from DCFS and POS Agencies in 2022

	DCFS	POS	Investigation Referrals	Intact Referrals	Placement Referrals
Rockford – Remedies Renewing Lives	133	19	112	15	6
Waukegan – A Safe Place	531	36	360	98	73
S. Emerald Chicago – Family Rescue	9	4	1	1	7
S. Indiana Chicago – Sarah's Inn	31	0	21	5	5
Program Wide Total	706	59	494	119	91

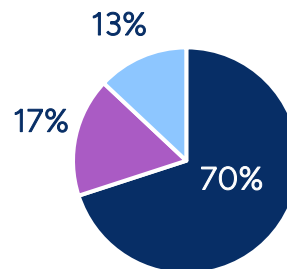
The vast majority of referrals came from within DCFS (92%) compared to POS agencies (8%). Of the DCFS teams, investigations made the majority of referrals (70%), followed by intact (17%), and placement (13%). This is a consistent pattern across each individual site, with the exception of the DVCLA from Family Rescue, who received the majority of their referrals from Placement.

Program Wide Referrals from DCFS & POS Agencies in 2022



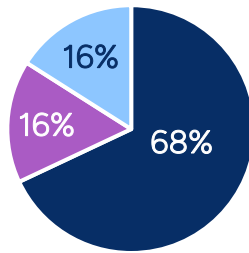
■ DCFS ■ POS

Program Wide Referrals from DCFS Teams in 2022



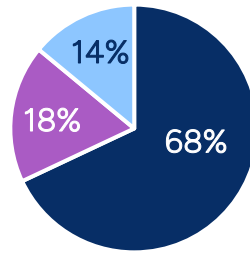
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S. Indiana Referrals from DCFS Teams in 2022



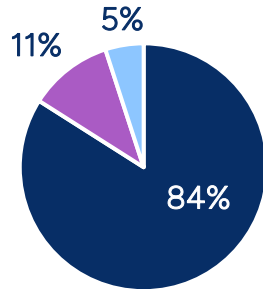
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Waukegan Referrals from DCFS Teams in 2022



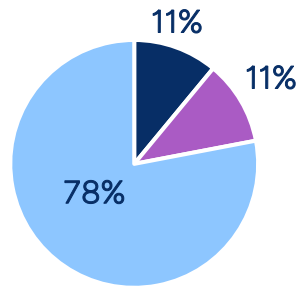
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Rockford Referrals from DCFS Teams in 2022



■ Investigations ■ Intact ■ Placements

S. Emerald Referrals from DCFS Teams in 2022



■ Investigations ■ Intact ■ Placement

Who Was Served?

In 2022, the DVCLP served 765 families, through consultation with caseworkers and direct contact with family members. The program served 1,977 individuals across all four program sites, which includes adult and child survivors, and PUVCCs. The program specifically served 1,173 children. Of the cases referred to DVCLAs, 47 had “previous child welfare involvement” which includes calls to the DCFS Hotline and/or subsequent child welfare interventions prior to the current child welfare intervention that involves the DVCLA.

The sites in Rockford and Waukegan had well-established programs at the beginning of 2022, so 12 months of 2022 data exist. Two new sites in Chicago that partnered with Family Rescue and Sarah’s Inn were introduced to the program in October 2022, so only 3 months of 2022 data exist from these locations. Waukegan served the highest number of individuals, at 1,379, followed by Rockford at 476. With only three months of service completed by the end of 2022, Sarah’s Inn worked with 96 individuals and Family Rescue with 26.

Program Service Totals in 2022

	<i>Program Wide</i>	<i>Rockford-Remedies Renewing Lives</i>	<i>Waukegan – A Safe Place</i>	<i>S. Emerald Chicago – Family Rescue</i>	<i>S. Indiana Chicago – Sarah's Inn</i>
Families Served	765	152	567	13	33
Children Served	1,173	330	767	13	63
Individuals Served	1,977	476	1,379	26	96

The majority of this direct contact with families was with the adult survivors (527 contacts across the program), followed by their children (282), and lastly, the PUVCCs (93).

Program Wide Direct Contacts with Family Members in 2022

	<i>Adult Survivor</i>	<i>PUVCC</i>	<i>Child</i>
Rockford – Remedies Renewing Lives	42	4	0
Waukegan – A Safe Place	465	89	282
S. Emerald Chicago – Family Rescue	4	0	0
S. Indiana Chicago – Sarah's Inn	10	0	0
Total	527	93	282

Demographic data for the program is limited and voluntarily shared, either by the caseworker who asked for the consultation or the family member who has direct contact with the DVCLA. In 2022, the only demographic data available for analysis is family race. Family race is indicated based on the race of the child at the center of the DCFS case.⁹

Across the four program locations, race data exists for 89% of families. Of those, **families of color make up the vast majority (72%) of cases**. Latinx families are the largest plurality (37%) followed by African American and White families (28% each), and families indicating a race of “Other” make up the smallest proportion (7%).

Program Wide Race Data

<i>Racial Category</i>	<i>Count</i>	<i>% of Families with Known Race</i>
African American	189	28%
Latinx	254	37%
White	188	28%
Other	50	7%

The racial makeup of families served varies significantly by location. In Rockford, 92% of families served had known race. White families made up the plurality (43%), followed by African American families (29%), with Latinx and Other families equally present (14%). In Waukegan, 91% of families had known race. Latinx families made up the plurality (44%), followed by African American (26%), White (25%), and Other (5%) families.

Families of Color Served by DVLCP in 2022



72% of families served in 2022 whose race was reported had children of color.

Rockford Race Data

<i>Racial Category</i>	<i>Count</i>	<i>% of Families with Known Race</i>
African American	41	29%
Latinx	19	14%
White	60	43%
Other	20	14%

Waukegan Race Data

<i>Racial Category</i>	<i>Count</i>	<i>% of Families with Known Race</i>
African American	134	26%
Latinx	228	44%
White	127	25%
Other	28	5%

At both locations, Black families were overrepresented in the DVCLP relative to the municipality's population, while families with White and Latinx identities were underrepresented.

**Rockford Representation Data
Compared to Population¹⁰**

	<i>African American</i>	<i>Latinx</i>	<i>White</i>
City	21.7%	18.8%	62.6%
DVCLP	29%	14%	43%
Difference	+7.3%	-4.8%	-19.6%

**Waukegan Representation Data
Compared to Population¹¹**

	<i>African American</i>	<i>Latinx</i>	<i>White</i>
City	18.8%	53.4%	36.9%
DVCLP	26%	44%	25%
Difference	+7.2%	-9.4%	-11.9%

The two new sites had lower response rates about the race of the families they served. At the S. Emerald location in Chicago, 85% of families had known race data. African American families made up the vast majority of cases (73%), followed by Latinx (18%), and White (9%) families. No families indicated their race as Other. At the Sarah's Inn location in Chicago, only 39% of families have known race data. Of those, African American families made up the plurality (46%), followed by Latinx (38%), and Other families (15%). No families served reported being White.

**S. Emerald Chicago - Family
Rescue Race Data**

<i>Racial Category</i>	<i>Count</i>	<i>% of Families with Known Race</i>
African American	8	73%
Latinx	2	18%
White	1	9%
Other	0	0%

**S. Indiana Chicago - Sarah's Inn
Race Data**

<i>Racial Category</i>	<i>Count</i>	<i>% of Families with Known Race</i>
African American	6	46%
Latinx	5	38%
White	0	0%
Other	2	15%

Both locations saw Black families overrepresented in the DVCLP relative to the municipality's population, while families with White and Latinx identities were underrepresented.

Chicago Representation Data Compared to Population¹²

	African American	Latinx	White
City	29.2%	29.7%	45.3%
DVCLP (Family Rescue & Sarah's Inn Combined)	58%	29%	4%
Difference	+28.8	-.7%	-41.3%

How Were Participants Served?

DVCLAs provide consultations to child welfare workers and, in some cases, have direct contact with members of the family. A consultation must occur before the DVLCAs can have direct contact with the family, but not every consultation will lead to direct contact. Across the entire program, **71% of cases had direct contact with one or more family members**. This varied by site, with Waukegan seeing the highest direct contact rate (84%), followed by S. Emerald (62%), S. Indiana (36%), and Rockford (33%).

Program Wide Referrals, Consultations, and Direct Contacts in 2022

	<i>Referral Only</i>	<i>Consultation</i>	<i>Direct Contact</i>	<i>% of Cases with Direct Contact</i>
Rockford – Remedies Renewing Lives	1	151	50	33%
Waukegan – A Safe Place	16	551	474	84%
S. Emerald Chicago – Family Rescue	1	12	8	62%
S. Indiana Chicago – Sarah's Inn	2	31	12	36%
Total	20	745	544	71%

Direct contact with families can occur in a variety of ways. DVLCAs may have conversations over the phone or in person with members of the family. DVCLAs can also provide additional support through home visits, Child and Family Team Meetings, transitional visits, court support, and Administrative Case Reviews (ACR). In this report contact with families in these additional support roles is referred to as Direct Contact External Activities.

In 2022, DVLCAs attended 197 direct contact external activities. Data for Rockford was

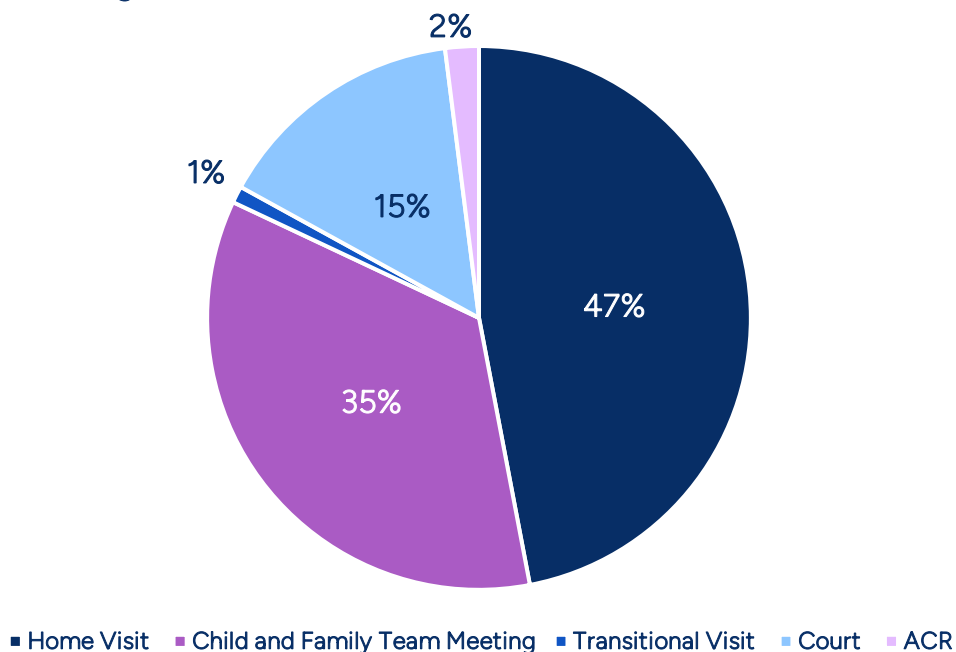
not available in February of 2022. DVCLA capacity and opportunities to engage in direct contact external activities varies widely, as seen in the site-by-site data. Waukegan's DVCLA attended 183 direct contact external activities over the course of the year, whereas Rockford's DVCLA attended 14. The two new locations had little direct contact external activity, with Family Rescue conducting 1 home visit and Sarah's Inn conducting none.

Program Wide Direct Contact External Activities in 2022

	<i>Home Visit</i>	<i>Child and Family Team Meeting</i>	<i>Transitional Visit</i>	<i>Court</i>	<i>ACR</i>	<i>Total</i>
Rockford – Remedies Renewing Lives	0	4	0	7	3	14
Waukegan – A Safe Place	92	65	2	23	0	182
S. Emerald Chicago – Family Rescue	1	0	0	0	0	1
S. Indiana Chicago – Sarah's Inn	0	0	0	0	0	0
Total	93	69	2	30	3	197

Of the direct contact external activities conducted across all program sites, almost half (47%) were home visits. Child and Family Team Meetings made up another third (35%) and court support accounted for 15%. There were few transitional visits (2%) and ACRs (1%).

Program Wide Direct Contact External Activities in 2022



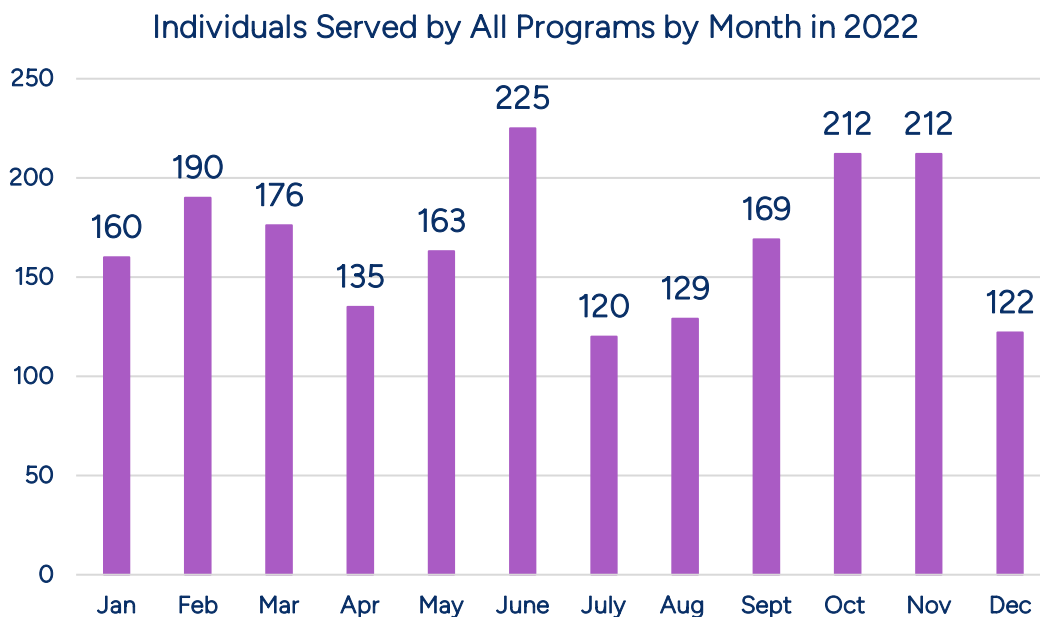
Program Growth Over Time

The DVCLP program is in its third year of operation and has continued to grow and evolve with time.

In 2020, two DVCLAs served 949 individuals and in 2021, two DVCLAs served 1,896 individuals. As of October 2022, there are four DVCLAs who served 1,977 individuals across three cities, a 4% increase from 2021. **Since its inception, the program has seen a 108% increase in annual service reach.**

This growth is impacted by changes in staffing, environment, and external factors. Regarding staffing, the DVLCA in Waukegan has been with that site since June 2021. The DVLCA in Rockford changed in October 2022 and a new person was hired in December 2022. The DVLCA from Family Rescue and Sarah's Inn began in October 2022. Throughout the year, A Safe Place, Family Rescue, and Sarah's Inn were in the DCFS office working alongside caseworkers. Remedies Renewing Lives has yet to receive access to the DCFS office. The program continued to experience COVID-19-related challenges in 2022, including issues with understaffing which led to increased caseloads for both DCFS caseworkers and the DVCLAs working with them. Additionally, DVCLAs maintained a hybrid schedule to reduce exposure to COVID-19.

In 2022, the number of individuals served month over month varied considerably, ranging from a minimum of 120 to a maximum of 225. Along with the above examples of factors impacting growth over time, there is a seasonal impact on DVLCA case involvement. As seen in the chart below, the DVCLAs served more people in June and the fall while connecting with fewer people near the winter holidays.



Institutional Impact

DVCLAs engage in institutional advocacy work through collaboration with DCFS workers during consultations to provide support at every level of the child welfare process and through the myriad of training and educational activities they conduct.

Training

DVCLAs engage in many formal and informal trainings to build capacity about domestic violence-related issues. In 2022, the DVCLAs reported attending regular team meetings with DCFS staff to educate them about the program, explain the DVCLA role, discuss domestic violence, and offer insight on cases.

The DVCLAs not only brought domestic violence education to DCFS, but also brought their knowledge of DCFS to their agencies through onboarding sessions and specially scheduled trainings, and to their community through presentations at local stakeholder meetings, rollcall trainings, and community policing committees. In the spring of 2022, two DVLCAs and a member of the Management Entity **lead a session at the at the Illinois Coalition Against Domestic Violence Annual Legal Advocacy Summit entitled “Domestic Violence and Child Welfare: Policy and Practice”** to build capacity within the domestic violence community to better understand the child welfare system.

Outcomes for Participating Caseworkers

Outcomes for participating caseworkers are based on the observations, interactions, and perspectives of the DVCLAs. When consultations do not result in observable feedback, the DVCLAs do not record an outcome. Caseworker outcomes data is available by site and across the entire program. Note that data on caseworker outcomes was not available from the Rockford location in January and the two new sites began submitting data in October.

At all sites, caseworkers who consulted with the DVCLAs received information about domestic violence in the majority of cases, ranging from 58% - 95%. Across the entire program, an average of 90% of caseworkers received information about domestic violence.

Received Information about Domestic Violence		
Rockford – Remedies Renewing Lives	137	82%
Waukegan – A Safe Place	733	95%
S. Emerald Chicago – Family Rescue	11	69%
S. Indiana Chicago – Sarah's Inn	26	58%
Total	907	90%

At half of the sites, the majority of caseworkers who consulted with the DVCLAs demonstrated an increased understanding of the dynamics of domestic violence. The two newer sites report lower rates of this improved outcome. **Overall, 86% of caseworkers demonstrated an increased understanding of the dynamics of domestic violence.**

Demonstrated Increased Understanding of the Dynamics of Domestic Violence

Rockford – Remedies Renewing Lives	124	74%
Waukegan – A Safe Place	734	95%
S. Emerald Chicago – Family Rescue	6	38%
S. Indiana Chicago – Sarah's Inn	2	4%
Total	866	86%

At half of the sites, the majority of caseworkers who consulted with the DVCLAs partnered with the adult survivor in crafting interventions that buffer risk and enhance their strengths. The two newer sites report lower rates of this improved outcome. **Overall, 85% of the caseworkers partnered with the adult survivor in crafting interventions that buffer risk and enhance their strengths.**

Partnered with Adult Survivor in Crafting Interventions that Buffer Risk and Enhance Strengths

Rockford – Remedies Renewing Lives	114	68%
Waukegan – A Safe Place	734	95%
S. Emerald Chicago – Family Rescue	5	31%
S. Indiana Chicago – Sarah's Inn	3	7%
Total	856	85%

At half of the sites, the majority of caseworkers who consulted with the DVCLAs engaged meaningfully with the person using violence and coercive control aimed at creating avenues of accountability. The two newer sites report lower rates of this improved outcome, Family Rescue reporting none at all. **Overall, 84% of caseworkers engaged meaningfully with the person using violence and coercive control aimed at creating avenues of accountability.**

Engaged Meaningfully with the PUVCC Aimed at Creating Avenues of Accountability

Rockford – Remedies Renewing Lives	95	57%
Waukegan – A Safe Place	733	95%
S. Emerald Chicago – Family Rescue	0	0%
S. Indiana Chicago – Sarah's Inn	11	24%
Total	839	84%

At half of the sites, the majority of caseworkers who consulted with the DVCLAs addressed the unique needs of child survivors in connection with their families and

communities. The two newer sites report lower rates of this improved outcome. Overall, 85% of caseworkers addressed the unique needs of child survivors in connection with their families and communities.

Addressed the Unique Needs of Child Survivors in Connection with their Families and Communities		
Rockford – Remedies Renewing Lives	110	65%
Waukegan – A Safe Place	733	95%
S. Emerald Chicago – Family Rescue	2	13%
S. Indiana Chicago – Sarah's Inn	5	11%
Total	850	85%

Outcomes for Participating Families

Outcome data for the families served by the DVCLP are limited to what is known by the DVCLAs. In 2022, DVCLAs tracked (when known) results of the child welfare investigation, referrals received by families, and information about who had custody of the children.

The DVLCAs have the most direct knowledge about whether clients received referrals, services and/or concrete supports. In 2022, 564 adult survivors (74% of those served by the program) received direct referrals, services, or concrete supports during the child welfare intervention and/or from the DVCLA. 217 children (18%) and 170 PUVCC (22%) also received direct referrals, services, or concrete supports.

Program Wide Referrals, Services, and Concrete Supports in 2022		
Rockford – Remedies Renewing Lives	95	57%
Waukegan – A Safe Place	733	95%
S. Emerald Chicago – Family Rescue	0	0%
S. Indiana Chicago – Sarah's Inn	11	24%
Total	839	84%

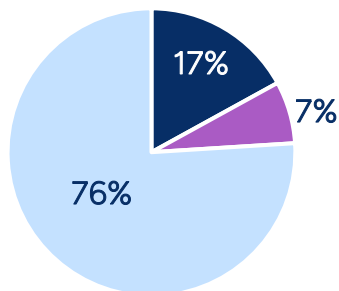
The DVCLAs record the outcomes of the child welfare investigations when they have knowledge of the findings. In 2022, across all program sites, the DVLCAs had knowledge that 133 adult survivor cases were unfounded, 52 adult survivor cases were indicated, and 137 PUVCC cases were indicated. The specific allegations of the findings are not specified.

Program Wide Referrals, Services, and Concrete Supports in 2022

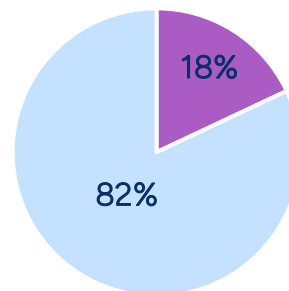
	# Adult Survivor Unfounded	# Adult Survivor Indicated	# PUVCC Indicated
Rockford – Remedies Renewing Lives	3	4	2
Waukegan – A Safe Place	125	41	131
S. Emerald Chicago – Family Rescue	0	5	0
S. Indiana Chicago – Sarah's Inn	5	2	4
Total	133	52	137

Of the cases handled across the program, most case outcomes are unknown. In 18% of cases, the PUVCC was indicated but 82% of cases have no known outcome data for the PUVCC. 17% of all cases had an unfounded decision in favor of the adult survivor and 7% of cases indicated the survivor. In 76% of cases, adult survivor outcomes are unknown.

Adult Survivor Case Outcomes
in 2022



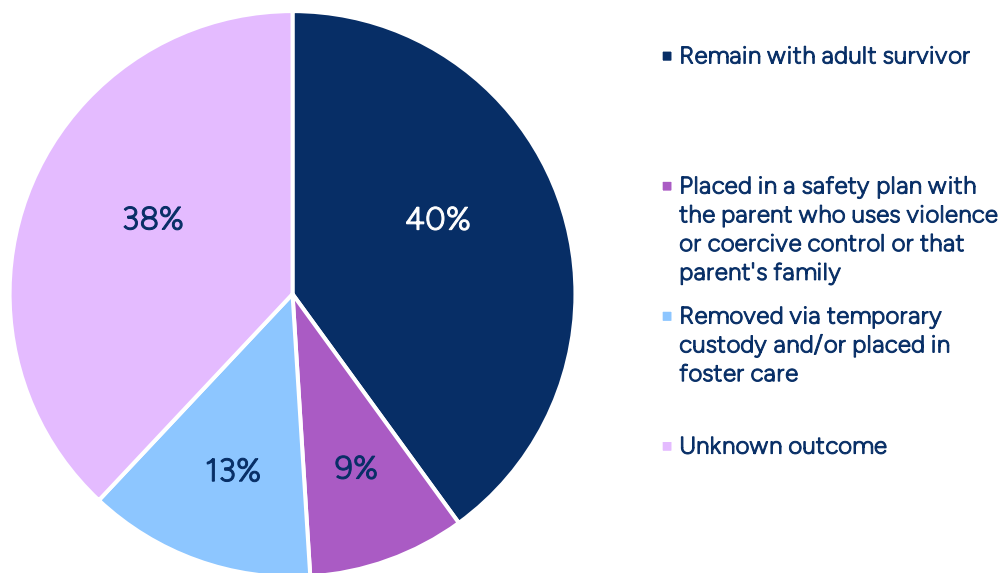
PUVCC Case Outcomes in
2022



■ Unfounded ■ Indicated ■ Unknown Outcomes ■ Known to be Indicated ■ Unknown

Similarly, who children are placed with, be it their survivor parent, the PUVCC, or temporary placement family, is unknown in the plurality of cases (38%). Of the known outcomes for the children served across all programs, **at least 466 children remained with their adult survivor parent (40%)**, 111 children were placed in a safety plan with the PUVCC or that parent's family (9%), and 150 children were removed from the adult survivor parent via temporary custody or placed in foster care (13%).

Percent of Known Family Outcomes for 1,173 Children Served in 2022



Program Wide Known Family Outcomes in 2022

	# Children remain with Adult Survivor	# Children placed in a safety plan with the PUVCC or that parent's family	# Children were removed via Temporary Custody and/or Placed in Foster Care
Rockford – Remedies Renewing Lives	105	8	20
Waukegan – A Safe Place	339	99	121
S. Emerald Chicago – Family Rescue	3	4	9
S. Indiana Chicago – Sarah's Inn	19	0	0
Total	466	111	150



04

Advocate Voices

Qualitative Analysis of Case
Notes & Interviews with
DVCLAs





Qualitative Analysis of Case Notes & Interviews

Themes from DVCLA Case Notes

DVCLAs provide monthly reports to the DVCLP Management Entity that include voluntary, anonymized case notes for review. These case notes provide important insights about the nuances of their caseloads as well as additional perspective on the nature of violence that many families involved with DCFS face, the range of services that DVCLAs provide, and the challenges that arise from inter-agency collaboration. For this report, 74 case notes from all four sites across the duration of 2022 were analyzed for common themes.

Violence Facing DCFS Involved Families

Fatal Violence

In at least four cases in 2022, DVCLAs worked with families living with the aftermath of fatal domestic violence. Prior to DCFS and DVCLP involvement, two adult survivors and one child survivor were murdered by the PUVCC, and one PUVCC died by suicide. In these cases, DVCLAs connected family members to essential services including counseling and legal support.

Nonfatal, High Lethality Risk Violence

A theme of nonfatal, high lethality risk violence was also reported by DVCLAs. They worked with adult and child survivors who had been shot or threatened with firearms, strangled, and those who were beaten while pregnant. Other cases involved forcible break-ins, violations of orders of protection, and extensive domestic violence histories with law enforcement involvement. In at least five cases, the PUVCC had a warrant out for their arrest, had been charged with a crime, or were incarcerated related to their violent behavior. The risk of self-harm also arose from child survivors who were struggling with their mental health in response to traumatic experiences.

Complex Cases & Family Needs

Many cases that the DVCLAs were consulted on involved complex circumstances and needs. These involved children with experiences of sexual abuse or developmental disabilities related to their abuse, cases where one or more adults were living with substance abuse issues, parents or caregivers who did not speak English, or circumstances that involved a survivor of abuse perpetuating harm against someone else. Through their collaboration with DCFS staff, the DVCLAs were able connect these families to and educate their caseworkers about essential resources, services, and information specific to their complex issue.

DVCLA Services

In response to the complex needs and extensive violence that these families faced, DVCLAs provided a wide range of services. When working directly with clients, they provided **crisis intervention and connections to services** including, but not limited to, counseling, emergency shelter, housing and legal support, interpretation services, and partner abuse intervention programs (PAIPs). DVCLAs also conducted extensive and iterative safety planning with families and caseworkers to explore options that would reduce harm while addressing each family's unique circumstances. To support the caseworkers managing these complex cases, the DVCLAs provided a range of domestic violence education, including LGBTQ+ experiences of abuse, multi-cultural sensitivity, safe exchange and partner abuse intervention programming options, and lethality risk education that addressed issues like stalking, strangulation, firearms use, and escalating violence during pregnancy. The DVCLAs also provided coaching support on complex cases, offering a space to parse the dynamics of power and control and consider the interpersonal dynamics when working with families directly.

DVCLA involvement, always beginning with caseworker consultation, has fostered positive relationships with DCFS staff, and offered valuable guidance on complex cases. The DVCLAs also provided support and understanding to the child welfare workers in doing this challenging work. The child welfare workers have expressed gratitude for the guidance and support from the DVCLAs and the DVCLAs have documented interactions that were particularly reflective of effective interventions.

Challenges with Inter-Agency Collaboration

Inter-agency collaboration often creates its own unique challenges, especially for new programs. Referrals to the DVCLAs in the DCFS offices in S. Emerald and S. Indiana in Chicago have been low, though slowly increasing. Support of the DVCLP from DCFS Deputies, Regional and Area Administrators, and supervisors is essential to the implementation of the DVCLP in both new and existing locations. Newer program sites also demonstrate the growing pains that come from instituting a new program in a new site. DVCLAs from Family Rescue and Sarah's Inn shared that DCFS staff sometimes are confused about the appropriate process for referrals and frustrated about the limits of information sharing within the requirements of confidentiality. The DVCLAs have responded with patience and repeated instructions, which is leading to incrementally increasing referrals.

Themes from DVCLA Interviews

Each DVCLA from the four program sites was interviewed for the purposes of this report. Each interview was analyzed for emergent themes and to identify case examples

that highlight the impact of their work. Interviews were voluntary for the DVLCAs to participate in and their responses have been anonymized.

Interagency Collaboration

All four advocates discussed the nuances of working in an inter-agency environment, thoughtfully outlining both positive and challenging experiences. All spoke highly of the collaborative relationships they have been able to build with DCFS staff, with one offering, **"I feel like the workers who I've been working with treat me like I'm part of the team."** Working together with caseworkers also prompted the DVCLAs to highlight the value of bringing combined expertise to each case. One DVCLA reported that they approach each case with the perspective that, **"it's going to take both of us to get this survivor the help they need"** and went on to explain what collaboration can look like in a moment of need. **"Occasionally they [the caseworkers] would call from the scene and ask me to talk to the survivor. We would do safety planning and service connection on the spot – dealing with transportation and shelter is often the immediate need."** Advocates also emphasized the value of learning from caseworkers about their role, how to navigate DCFS as an institution, and how to understand the organization's perspective on key issues. This information not only helped them to offer compassion to their DCFS partners, but also to engage in DCFS education with their domestic violence agencies and community members.

More consistent challenges identified by the DVCLAs centered the importance of communicating about their role, laying a foundation of information about domestic violence, and ensuring that key stakeholders are on the same page about the project. **"Sometimes they [the caseworkers] feel like you're the enemy,"** one advocate said of the beginning of their work, **"so you have to clarify that your role is to help caseworkers."** Framing the DVCLA role as one that supports and coaches staff in navigating domestic violence dynamics helped the DVCLAs build positive, mutually beneficial relationships with caseworkers, rather than being viewed as an adversary. Advocates also had to help their DCFS partners understand their procedures and legal requirements. One shared, **"lack of understanding of our role and how confidentiality works [is a challenge.] We don't operate like other agencies and cannot report out progress on a case without the survivor's permission."** Building caseworker understanding of the DVCLA role was also needed to make effective referrals, as advocates reported getting calls from families who did not understand why they were calling a DVCLA.

Advocates also encountered challenges when key stakeholders had misaligned expectations of the program. One advocate expressed that even though they had a positive working relationship with caseworkers, collaboration on cases would drop off when **"higher-ups were not on the same page about working with us."** As another put it, **"It can be hard to encourage collaboration when caseworkers are not encouraged by management to utilize collaborative efforts in helping the family."**

DVCLAs also discussed having different foundational understandings of domestic violence from their DCFS partners. One advocate explained this tension by adding, **"I would say the most challenging experience would be encouraging the caseworkers to learn more about domestic violence (DV). Most caseworkers tend to view each DV case as a 'one size fits all' category, which can harm the survivor.** For example, even though statistics show that abuse can escalate after an order of protection, caseworkers sometimes push the survivor to obtain an order of protection without regard to the survivor's sense of safety.


Sometimes, caseworkers will threaten survivors to get an order of protection or their child will be taken away.” Providing domestic violence education and expanding understandings of what safety can look like is a core function of institutional capacity building.

Finally, the logistics of working in an inter-agency environment can sometimes pose a challenge. DVCLAs had a range of experiences accessing shared office spaces and organizational email addresses. Some DVLCAs did not have access to the DCFS offices for months, whereas others were welcomed in on their first day. Regardless of the physical environment, each advocate found creative ways to build relationships with DCFS staff.

Collaboration Relationship Building with DCFS Caseworkers

All advocates who were interviewed emphasized the importance of relationship building in their work. One described connecting with caseworkers by **“calling, texting, facetimeing, hopping on Zoom to do introductions... and attending team meetings where I could explain my role and answer questions.”** Another added that **“consistency is key...relationship building takes time,”** highlighting that the longer an advocate is at a DCFS office, the more staff feel comfortable reaching out for consultations.

DVCLAs shared that it is important to go beyond introductions and formal case consultations, describing building rapport through personal check-ins and encouraging self-care among caseworkers. As the DVLCAs explained, **“You can build rapport by offering them [caseworkers] empathy – often I will ask, ‘have you taken a break today?’ Or, ‘are you driving on this call?’** One day, after I asked that question, the caseworker I was speaking to pulled over so that we could really talk. I offered her **perspective on the impact of going from one stressful place to another without taking a moment to decompress.”** Advocates described providing a wide range of emotional support to DCFS staff, from bringing in small self-care gifts to creating space to process vicarious trauma. In an extreme example, one advocate described a frightening situation where they served as an ongoing support system to the caseworker. As the DVCLA recounted,




There was a case where the PUVCC had a gun pointed at a child and was threatening to kill everyone. When police arrived, a shot was fired but thankfully it did not hit anyone. Over several months, I had 10 consultations with the caseworker who was feeling very traumatized at the thought that someone would point a gun at a toddler. I provided a lot of emotional support to her, as she was worried about her safety on calls to the home, and we talked about the domestic violence dynamics that led to that moment. I encouraged her to express her feelings and she was thankful to have someone to listen.

Institutional Advocacy in Action

In their work with DCFS, DVCLAs described engaging in a myriad of institutional advocacy activities, including providing domestic violence education, addressing


conscious and unconscious bias against survivors, connecting families to the services they need to be safe and together, facilitating communication for non-English speaking families who become DCFS involved, and ensuring caseworkers have the support they need on domestic violence cases. Much of the domestic violence education that advocates provide starts with reframing the issue, as one advocate said, **"Caseworkers will often ask, 'why does she stay?' when no one is asking the question 'why did the person choose to abuse?'"** Advocates also emphasized that information on domestic violence is eagerly welcomed by caseworkers, with one sharing, **"Caseworkers are hungry for this information. Often they will come to me and say, 'I hate that this [domestic violence] happened; how can I continue to encourage this client?'"** Educational efforts often focused on helping caseworkers understand the dynamics of abusive relationships, the barriers to safely leaving a relationship, and the importance of survivor input on the safest way to proceed.

Advocates also prioritize connecting families with the services they need to remain safe and together. DVCLAs help families find shelter, counseling, legal advocacy, medical care, and Partner Abuse Intervention Programming, among others supports, to address their unique needs. **"There was a case that I will always remember,"** one advocate said. She continued,




The couple had been together since they were 14 years old. Twelve years later, there had been multiple calls to police and DCFS, the cops were always at their home. When I got there for a home visit after an incident of violence, the officer was like, 'you know, you're just wasting your time, we are here all the time and they are never going to change,' right in front of the survivor. I took the survivor and the kids to shelter because they wanted to leave. Over the next several months, the PUVCC was hunting the survivor down and the domestic violence agency sheltering her had to switch her location repeatedly. Later she told me that, 'if wasn't for you coming that day and helping me pack up the car – I don't think I would ever have left.' She just couldn't find a way out and it was a team effort to get her safely out of that place.

Another advocate described the importance of connecting with the survivor on a personal level to help them trust and feel comfortable accepting services,



I worked on a case where the survivor was a young ward of the state and appeared to be experiencing trafficking. Her caseworker had been trying to get her into supportive programs for months when we agreed to go together for a meeting at the survivor's house. I got on her level and she really listened to me. I put the work mentality out of the picture and talked to her like a person, told her about the different services there are, and that I'm from her community too. She agreed to come to my agency's office and we got her toiletries, groceries, bus cards, and started her counseling services. She continues to come for services...Who knows what her future will look like now that she is connected to help.

DVCLAs prioritize clear communication with families, even across language barriers. Multiple advocates employed by the DVCLP are bilingual and can explain the DCFS process to families that are unfamiliar with what is happening to them. Advocates also seek to bridge gaps in communication when interpreters are required, like in one case involving a family that spoke only Arabic,




I merged a call with the two caseworkers [working with the family] and shared my concerns over the language barrier that seemed to be causing confusion. I shared strategies the caseworkers could use to eliminate confusion such as slowing down the conversation with the parents and assessing for DV. This meant explaining to the mother what domestic violence is, walking through the power and control wheel, and asking the mother if she identified as a victim. Additionally, the caseworker shared her concerns over the services that could be provided to the father. I reminded the caseworker that assessing for accountability and understanding if he was taking responsibility for his actions could provide clues to determine what services would be appropriate, such as individual therapy, parenting classes, or the Partner Abuse Intervention Program (PAIP). I was able to offer handout resources to help guide the conversations as well. The discussion about language barriers, confusion, and accountability allowed them to revisit services and conversations that could be best suited for the family. I believe my interaction with the family and the caseworkers had a positive impact in the way in which they could effectively address the concerns of domestic violence in the family and assess for appropriate services. I also believe my conversations with the caseworkers allowed them to think outside of the ‘one size fits all’ viewpoint.

The Impact of DVCLP

When asked about what they do and how they feel about the program, DVCLAs were enthusiastic to discuss the impact their involvement is having on the system and for families. **“We focus on finding solutions and we diminish as many barriers as possible,”** one advocate stated, **“I’m proud to ... be a DVLCA.”** Another expressed, **“DVCLP matters because it provides caseworkers and families with the additional support that is needed within the DCFS system. It enhances and strengthens the interventions that are used for domestic violence survivors and their children. The program can provide a space for education, collaboration, support, validation, and guidance.”**

One DVCLA offered a powerful case example to illustrate the program’s impact.



The biggest thing for me is witnessing a return home. In one case, I had been attending team meetings and administrative case reviews for months with this survivor and things had become really difficult for her. When she was granted custody of her children, I felt so proud to be standing next to her in that moment. Later, I had the opportunity to observe when that survivor shared her story at a public event. When we spoke after her speech, she burst into tears telling me she was so thankful for me and the way I educated her on her rights. A lot of clients don’t know the power they have, so hearing her say that was amazing.



05

Summary of Federal Research

QIC Report





Summary of Federal Research

From October 2019 to September 2021, Illinois was a Research and Capacity Building Project of the Quality Improvement Center on Domestic Violence in Child Welfare (QIC-DVCW). The QIC-DVCW was an initiative of the U.S. Department of Health & Human Services, Administration for Children and Families, Children's Bureau that was administered by Futures Without Violence. QIC-DVCW conducted a research study that focused on the Adult and Child Survivor Centered Approach (The Approach). The federal grant from the QIC-DVCW launched the DVCLP in Waukegan and Rockford. In Illinois, the DVCLP was the collaborative model between child welfare and domestic violence systems that was the foundation for bringing the Approach to stakeholders working with families experiencing domestic violence. The federal study did not focus on the DVCLP but rather researched the implementation, impact, and cost of the Approach.

While the final federal research report has not yet been published, the executive summary of the final federal research report was published in April 2023.¹³ The executive summary validates the experiences of many adult survivors of domestic violence that they fear losing their children when child welfare is involved, are blamed for the domestic violence, and do not receive the support they and their children need. The research on the Approach demonstrates that more effective practice is possible, even during a global pandemic, and that leadership buy-in is essential. By implementing collaboration and the Approach in Illinois, reunification rates increased, especially for Black children; child maltreatment rates did not increase; youth served by intervention sites and who were in foster care for two or more years were more stable; and the intervention across the project sites saved \$1187 per household without jeopardizing client safety.



06

Cost Analysis



Cost Analysis

One key DVCLP goal is to reduce the separation of children from their adult survivor parent, which would also reduce the financial costs of substitute care incurred by the state that the potential cost savings demonstrates added value created by the DVCLP for the state from a financial perspective, in addition to other programmatic strengths highlighted in this report,. The cost analysis cost analysis offers a high-level estimation of the positive financial savings of the DVCLP.

The cost analysis here was based on a similar cost analysis conducted by a comparable program in Florida. The Florida Child Protection Investigation Project places a domestic violence co-located advocate in 67 child welfare offices. The Florida program uses the following calculation to determine the potential costs savings:

$$(\text{Number of children the program served who were not removed}) \times (\text{Average number of months in foster care}) \times (\text{Lowest monthly foster care board payments}) - (\text{Expense of the program})$$

Based upon this analysis, the Florida program saved the state nearly \$26 million in 2015.¹⁴

The following explains the analysis of the potential costs savings of the DVCLP in 2022 in four sites in Illinois. The 2021 B.H. Consent Decree Monitoring Report issued by the University of Illinois Department of Social Work concluded that the median length of stay in substitute care for children in Illinois for the last several years has been 32 - 34 months.¹⁵ Placement of a child in foster care costs the state anywhere from \$388 to \$656 a month, depending on the age of the child and the kind of placement.¹⁶ In 2022, 466 children whose cases had DVCLA involvement were known to stay with their adult survivor parent, therefore avoiding substitute care placement. The DVCLP costs \$81,906 per site in program costs. With the management expenses, each site is \$120,371. The total costs of all four sites is \$481,484.

Estimated Cost Savings to State of IL by Supporting the DVCLP

<i>Lowest Median Number of Months Children in IL are in Foster Care</i>	<i>Lowest Monthly Payments Made to Foster Families & Caregivers (Unlicensed Families)</i>	<i>Number of Children Known to Remain with Adult Survivor in 2022</i>	<i>Cost of DVCLP</i>	<i>Lowest Estimated Savings</i>
32	\$ 388.00	466	\$ 481,484.00	\$ 5,304,372.00
<i>Highest Median Number of Months Children in IL are in Foster Care</i>	<i>Highest Monthly Board Payments Made to Foster Families & Caregivers (Children Age 9 - 11)</i>	<i>Number of Children Known to Remain with Adult Survivor in 2022</i>	<i>Cost of DVCLP</i>	<i>Highest Estimated Savings</i>
34	\$ 656.00	466	\$ 481,484.00	\$ 9,912,180.00

The DVCLP may have saved the state of Illinois anywhere from

\$5 – \$10 million

As a result of the DVCLP in 2022, the need for foster care services was significantly reduced and resulted in a potential cost savings of between \$5 to \$10 million by safely keeping children out of the foster care system.



07

Vision for the DVCLP



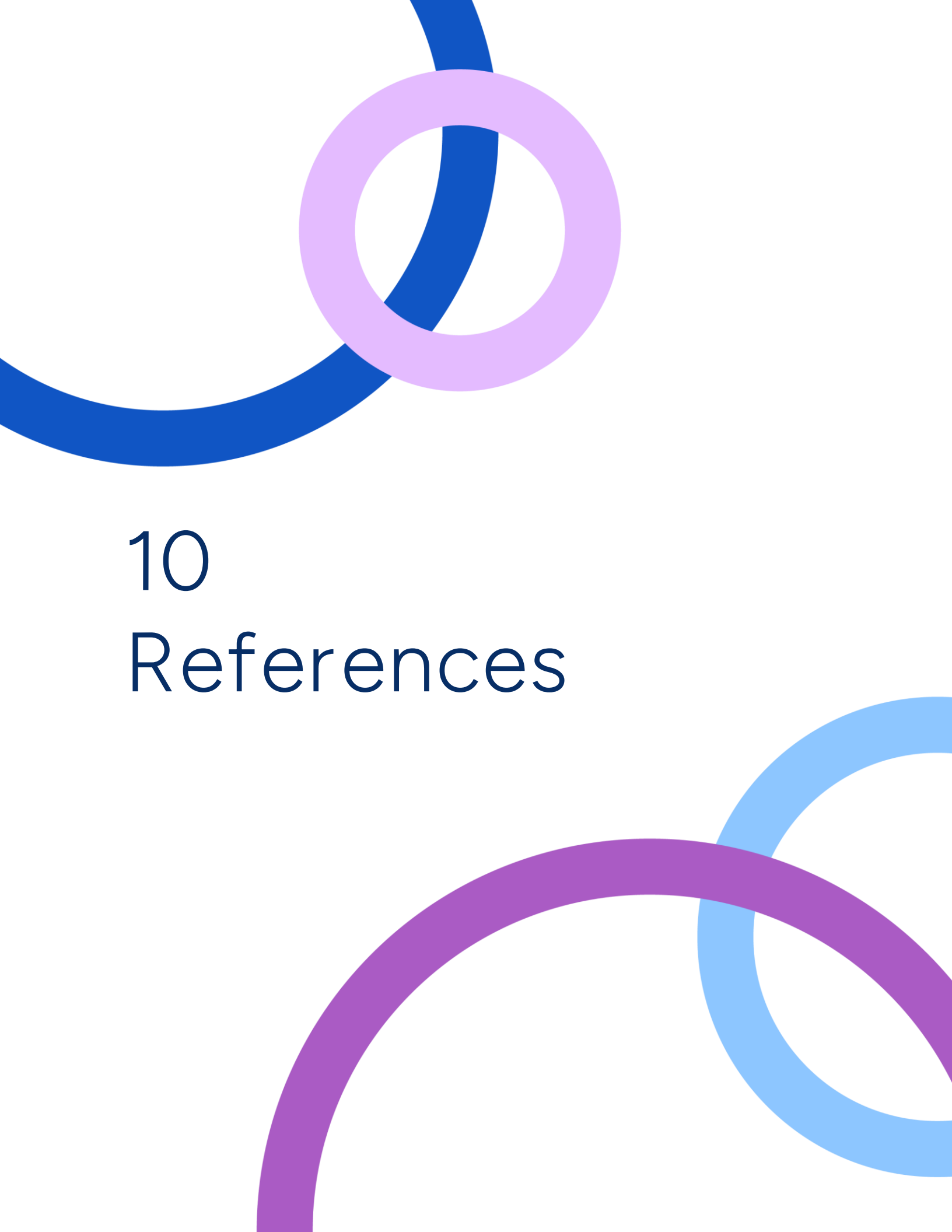
Vision for DVCLP

The vision for the DVCLP is to expand into a statewide program in which each DCFS office in Illinois is partnered with the local domestic violence agency that employs and provides a DVCLA.

With the current DVCLP sites in the Northern and Cook regions, the next step toward statewide expansion is to launch the DVCLP in the remaining two DCFS regions of Central and Southern. Following the implementation of the DVCLP in all of the four DCFS regions and three years of data demonstrating the effectiveness, impact, and cost savings of the DVCLP, statewide expansion will be pursued. In 2023, the DVCLP aspires to expand to either the Southern or Central region, and into the remaining region with the following the next year.

Through statewide expansion, the overall vision of the DVCLP is that through collaborative partnerships, family-centered, trauma-informed, strength-based and equity-driven child welfare interventions involving families experiencing domestic violence will prime, ripple into and ultimately lead to improved responses across all child welfare interventions that overcome the child welfare system's history of perpetuating oppression for families and communities of color, and that result in less isolated and more connected support for families and children.





10

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9. The DVCLP recognizes that families may have different racial makeup from member to member and that the racial categories used in this data are a non-exhaustive list.
10. Population data based on 2022 Rockford, IL demographic estimates from the U.S. Census Bureau: <https://www.census.gov/quickfacts/rockfordcityillinois>
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