

Screening for DV/IPV During Virtual Home Visits

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NMAIMH competencies addressed:

Working With Others:

- Building and maintaining relationships

Reflection:

- Self-awareness
- Emotional response

Direct Service Skills:

- Screening and assessments
- Advocacy
- Safety

Home Visitors play a critical role in assessing the needs and safety of all enrolled families by conducting ongoing screenings, observing parent-child interactions, and through the relationships that are built with families. Now more than ever, as stay-at-home orders have increased the risk of domestic violence (D/V) or intimate partner violence (IPV), Home Visitors may truly be lifelines. The Centers for Disease Control and Prevention (2020) reports that approximately 1 in 4 women and about 1 in 10 men have experienced some form of IPV, with numbers rising due to COVID-19 stay-at-home-orders and insurmountable stressors. Unemployment, financial instability, balancing multiple roles, school closures, social isolation, and limited access to resources put families at a much higher risk for IPV. Completing IPV screens such as the Relationship Assessment Tool comes with newfangled safety considerations and nuanced ways of administering the screening, as privacy may be uncertain.

First, it is important that we set a solid stage and provide a comprehensive orientation to families of what Home Visiting is and what they should expect. When describing the tools, it is important that we practice transparency by clearly providing the intention and meaning behind the tools. It is helpful that families understand the universality of the tools, that they are completed with *all* families. One of the roles of Home Visiting is preventing DV/IPV, keeping families safe, and referring to community supports when needed. There is much more to the tool than what's seen on the outside, one Home Visitor states, "we are breaking down stigmas and normalizing the conversation of hard topics." Just presenting the tool increases the awareness and signs of unhealthy relationships. Other considerations in orienting, particularly around the topics of DV/IPV, is ensuring that during a conversation about DV/IPV parents know that they can change the conversation at any time and the Home Visitor will follow suit if someone else enters the room and privacy is compromised. Another idea from the field was to

agree on a mutually understood hand signal for families to use in virtual visits when feeling unsafe and needing immediate help.

Suggestions and Strategies from the Field:

“Home isn’t a safe place for everyone. We hope to create a world where everyone can be safe in their own home. The reality is that it’s not for a lot of people” (Futures Without Violence, 2020).

Gauging the safety of the individual you are screening is the number one priority, as we never want to put a parent in increased danger. Virtual Home Visiting has tasked providers with exercising their creative muscles and sharpening their reflective questions to gain a “verbal video” from families of their home environments. Conducting an “environmental safety-check” during a virtual visit by asking yes-or-no questions may help ensure a partner or other individuals are not present (Rossi et al., 2020). When asking a Home Visitor about their experience, she said that it has become a normal practice to ask more questions and have them describe what is happening on the other side of the screen/phone. Asking questions like, “where is the baby today?” or “where is daddy or grandma?” have become second nature and gives the Home Visitor information about whether the RAT is appropriate to administer, or if it is best to wait. A Home Visitor from Taos First Steps explained that it may take multiple visits to complete, and to have the screening accessible for when the time is right.

The foundation of Home Visiting has always been to follow the lead of the families, and that continues to hold true when completing tools virtually. Home Visitors around the state have come up with creative ways to complete tools virtually, with safety always being at the forefront. When introducing the RAT, Home Visitors explain some of the sensitivity that may come up around the RAT, and the importance to complete the screening privately. Providing families with options to complete the screening, such as, dropping the tool off at their home to be picked-up later, texting a photo of the tool or just the responses for families to follow along, sharing the screen over ZOOM, or sending it through email to a confidential email address. In the case that the client chooses to complete it virtually, suggesting the client wear headphones may allow for increased confidentiality for the Home Visitor to ask the questions interview-style, prompting yes-or-no answers.

Another strategy from the field was the idea of completing safety plans with all enrolled families, preparing them to stay safe in various situations. By taking a universal approach to safety planning, we can help facilitate the conversation and add to their toolbox to access at any time, leaving families to feel empowered to take charge if needed. Safety plans should be personalized, concrete and collaborative. One Home Visitor stated that by beginning the conversation, “we are planting the seed for families to access when needed.” With the winter months ahead and COVID numbers on the rise, families will continue to live confined, in sometimes unhealthy situations. In FY20, Home Visitors administered 3,972 RAT’s to enrolled caregivers, revealing the lifeline Home Visitors play in prevention and connecting families to resources. Whether there is an identified risk or not, it is necessary that *all* families have access to DV/IPV resources both locally and nationally.

Questions for reflection:

- When and how do you introduce the Relationship Assessment Tool?
 - Reflect on your own thoughts and feelings that arise when discussing the RAT. What do you notice about your thoughts, feelings and body sensations? What Mindful Self-Regulation skills (breathing, self-talk) might you use to balance and ground yourself?
 - How do you know if it is safe to administer the RAT virtually? What strategies do you use?
 - What are the local domestic violence resources in your area?
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Resources:

Centers for Disease Control and Prevention-Support for People Experiencing Abuse:

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/stress-coping/abuse.html>

Futures Without Violence:

<https://www.futureswithoutviolence.org/resources-events/webinars-3/>

National Domestic Violence Hotline: Staying Safe During COVID

<https://www.thehotline.org/resources/staying-safe-during-covid-19/>

1-800-799-SAFE (7233)

Substance Abuse and Mental Health Services Administration:

<https://www.samhsa.gov/sites/default/files/social-distancing-domestic-violence.pdf>

References:

Levenson, R. & Hofheimer, L. (2020, May 8) *Remote Home Visitation: Supporting Clients Experiencing IPV in the Time of Covid 19 [webinar]*. Futures Without Violence.

[https://www.futureswithoutviolence.org/wp-](https://www.futureswithoutviolence.org/wp-content/uploads/HomeVis_RemoteSupportCOVIDwebinar_5.8.2020_FINAL.pdf)

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Preventing Intimate Partner Violence | Violence Prevention | Injury Center | CDC. (2020, October 09). Retrieved October 27, 2020, from

<https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html>

Rossi, F. S., Shankar, M., Buckholdt, K., Bailey, Y., Israni, S. T., & Iverson, K. M. (2020). Trying Times and Trying Out Solutions: Intimate Partner Violence Screening and Support for Women Veterans During COVID-19. *Journal of General Internal Medicine*, 35(9), 2728-2731. doi:10.1007/s11606-020-05990-0
