



Eve Sheedy, Esq.
Sheedy Consulting



Pritzker Center
For Strengthening Children and Families

The UCLA Pritzker Center for Strengthening Children and Families **unites a multidisciplinary network** across campus and throughout LA County to identify prevention strategies that safely **reduce the need for foster care**, while **supporting equitable reform** to our child welfare system.

STRENGTHENING CHILDREN AND FAMILIES



Sheedy Consulting, LLP - Eve Sheedy, Esq.

Subject Matter Expert – Intimate Partner Violence

- Former Executive Director of the Los Angeles County Domestic Violence Council (retired 12/31/2021)
- Former Director of Domestic Violence Policy at the Los Angeles City Attorney's Office
- Former Founder/CEO – WorkSafe: Domestic Violence Threat Assessment and Management for the Workplace
- Former Board Member, CPEDV – Statewide Domestic Violence Coalition
- Successful work on DV Legislation: Cal. Civil Code 1798.79.8; Cal. Labor Code Section 230; UIC Section 1256
- Extensive training experience – DV 101; GVRO's; DV/Gang Violence; DV/Pandemic; DV/Criminal Justice; U-Visas

Areas of expertise:

- DV/Child Welfare
- DV/Homelessness
- DV/Gang Violence
- DV/Gun Violence
- Government/Court System Response to DV

Ms. Sheedy is an active member of the California bar and has practiced law in the areas of criminal defense and prosecution, civil litigation, first amendment and privacy. Ms. Sheedy received her B.A. from Haverford College and her law degree from Boston University School of Law.

Common Issues

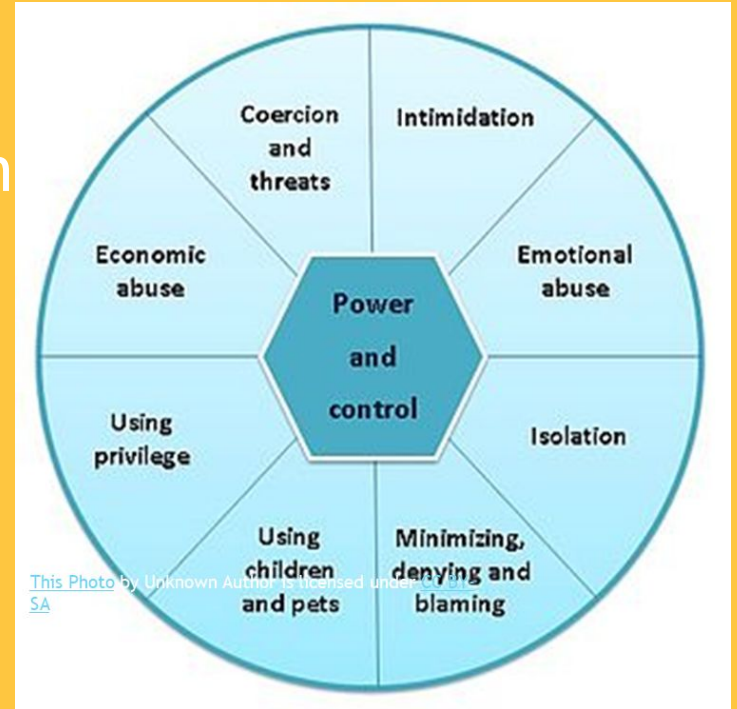
- Misunderstanding of DV
- Statutory Challenges
 - Failure to Protect
 - “Leaving”
 - Non-offending parent
- Lack of Shelter beds / Resources

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Coercive Control

- Constellation of conduct/ pattern
 - Not just physical violence
 - Not rage
- Diagram does not list all possible behaviors: sexual coercion, medical, gaslighting, etc.



2 Part System Impact

**Mandatory Reporting (CANRA)
Pre-Dept. Involvement**

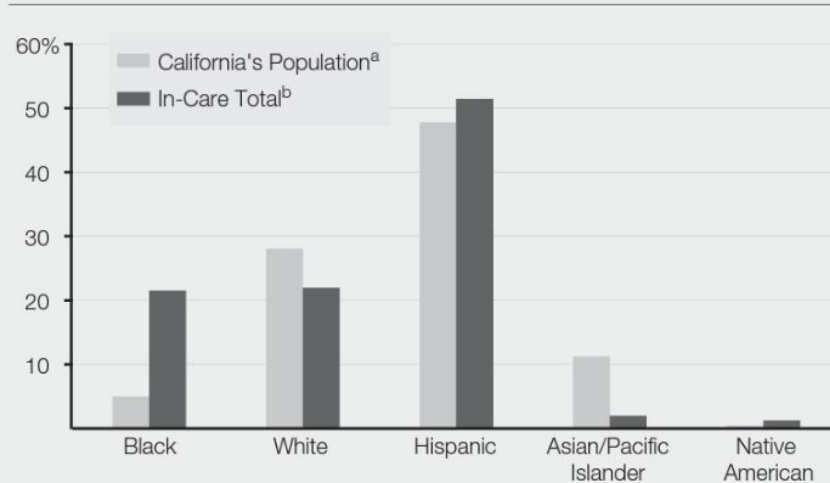


**Screened-In:
Investigation and Court Involvement**



Foster Youth Are Disproportionately Low Income, Black, and Native American

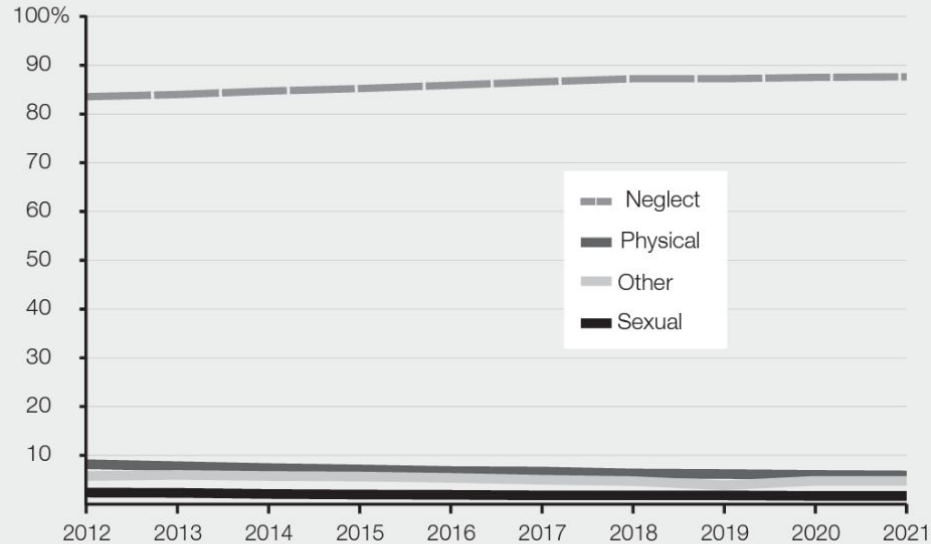
Proportion of Youth in Population Compared to in Foster Care



^a As of July 1, 2020. Data from DOF Demographic Projections. Includes youth ages 0 through 20, inclusive.

^b In care as of July 1, 2020. Data from California Child Welfare Indicators Project (CCWIP). Retrieved February 4, 2022 from University of California at Berkeley CCWIP website. URL: <https://ccwip.berkeley.edu>

Youth in Care: Reason for Removal



Notes:

Data from California Child Welfare Indicators Project (CCWIP). Retrieved March 4, 2022 from University of California at Berkeley CCWIP website. URL: <https://ccwip.berkeley.edu>

Data for July 1 of each year.

Data reflects child welfare placements; probation placements not included.


Overview

- Background
 - [Initial Study](#)
 - [Summit](#)
- Recent Efforts
 - [Antelope Valley](#)
- Future Work





A Balancing Act: How Professionals in the Foster Care System Balance the Harm of Intimate Partner Violence as Compared to the Harm of Child Removal

Laura Liévano-Karim¹ · Taylor Thaxton^{2,3} · Cecilia Bobbitt⁴  · Nicole Yee⁵ · Mariam Khan^{6,7} · Todd Franke^{8,9}

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Abstract

The striking prevalence of child exposure to intimate partner violence (IPV) and its associated adverse health outcomes necessitates a robust response from professionals who must grapple with the ethical dilemma of how to serve and support children in these circumstances. In 2020, 42 participants from four different professional backgrounds (attorneys, nonprofit leadership, licensed therapists, and social workers) were interviewed or participated in a focus group discussion. All groups acknowledged the shortfalls of current intervention practices, which often result in child removal. Group 1, which included social workers that work for children's legal services, minor's counsel, and Los Angeles Department of Child and Family Services social workers, were more conflicted in their recommendations for change. Some Group 1 participants recommended more training, while others thought more training would make little difference and recommended more substantial changes to prevent child removal when possible. Group 2, which included parents' counsel, and Group 3, which included social workers, attorneys, and nonprofit leadership at IPV nonprofits, were more closely aligned in their recommendations, primarily focusing on systemic changes to the child welfare system. Participants whose employment required them to advocate for parents tend to view child removal from a non-offending parent as harmful for both the child and IPV survivor. These findings illuminate how the perspectives of these diverse participants are influenced by their professional and personal experiences.

Keywords Child welfare system · Intimate partner violence · Maltreatment

Additional Research and Publication

- International Journal of Child Maltreatment
- The International Society for Prevention of Child Abuse & Neglect Conference
- UC Community Health Conference



'Failure to Protect': The Intersection of Intimate Partner Violence and the Child Welfare System

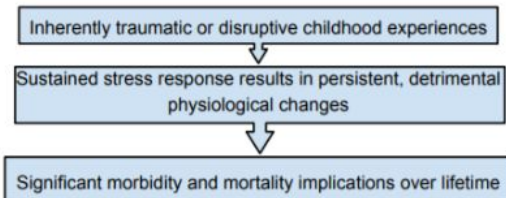
Taylor Thaxton^{1,2} and Mariam Khan²

¹Charles R. Drew University of Medicine and Science, ²David Geffen School of Medicine at UCLA

Introduction

As many as 15.5 million children in the U.S. are exposed to intimate partner violence (IPV) at home.¹ The striking prevalence of child exposure to IPV necessitates a robust response from healthcare professionals, who must grapple with the ethical dilemma of how to best support children in these challenging circumstances.

Witnessing intimate partner violence is an adverse childhood experience (ACE)²



Mandatory Reporting in California:

When physicians make a mandatory report of suspected child abuse or neglect to local law enforcement and/or the Department of Children and Family Services (DCFS), DCFS may become involved due to the victim parent's "failure to protect" their child from witnessing IPV.

Failure to Protect:

California Welfare and Institutions Code Sections 300(b) outlines cause for family separation: "child has suffered, or there is substantial risk that the child will suffer, serious physical harm or illness"³

Outcomes:

According to DCFS, community advocates, and lawyers in Los Angeles County, 'failure to protect' is alleged as the basis for removing children from their caregiver who is an IPV victim. As a result, victims are further burdened with the responsibility of navigating the dependency court system and their children are exposed to the additional trauma of family separation.⁴

Key Findings

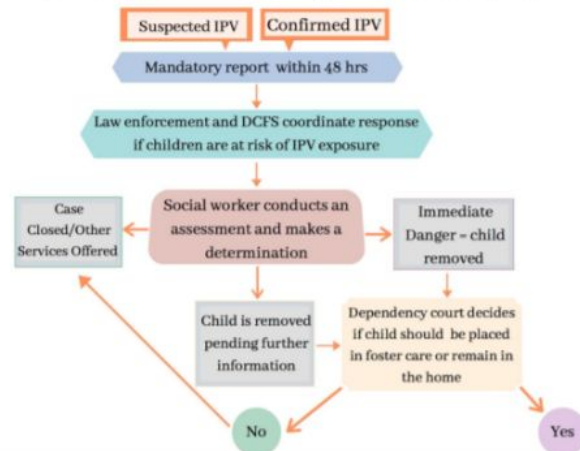
A literature review was conducted to determine the role of healthcare providers in IPV prevention, child health impacts associated with foster care and IPV, and the assessment of family separation in IPV cases: 3956 articles reviewed, 202 selected based on relevance.

The ACA covers the full cost of routine IPV screening/intervention for female patients. However, there is no clearly defined standard for assessment or case management.^{5,6}

- Most providers do not regularly take an IPV history
- Lack of systems-level support hinders IPV documentation, access to community resources, and outcome monitoring

While providers play a direct role in introducing patients to the child welfare system, medical literature is sparse in regards to the intersection of IPV and foster care.

- No studies evaluate foster care vs family care in IPV cases
- Children in foster care more likely to develop reactive attachment disorder than maltreated children who remained with birth family⁷
- Children with unstable foster care placements have blunted cortisol production patterns⁸ → chronically activated stress response



Future Directions

In order to better characterize how IPV is entangled with the child welfare system, the UCLA Pritzker Center has been commissioned to write a multidisciplinary policy report.

Purpose of the report:

- Determine if child removal is harmful or protective in IPV cases
- Assess evidence-based, trauma-informed family services in lieu of foster care placement
- Review systems and supports around IPV in LA County
- Make policy recommendations that promote well-being and healing for families

Next step: Conduct listening tours with providers from multiple specialties (OB-Gyn, Pediatrics, Family Medicine, Psychiatry)

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AGREED THAT IT IS
**DIFFICULT FOR FAMILIES
TO REUNIFY** DUE TO AN
**ABSENCE OF EFFECTIVE
SERVICES.**



Systemic Change

1. Training
2. Mandatory Reporting Guidance
3. Specialization
 - a. DCFS
 - b. Court
4. Services
5. Statutory Change

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Stay in Touch

- pritzkercenter.ucla.edu
- [@uclaPritzker](https://twitter.com/uclaPritzker)
- Eve Sheedy
eve@sheedyconsulting.com
- Taylor Dudley
dudley@gseis.ucla.edu

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