DHS CHILD WELFARE DEFINES DOMESTIC VIOLENCE AS:
“A pattern of coercive behavior, which can include physical, sexual, economic, and emotional abuse, which an individual uses against a past or current intimate partner to gain power and control in a relationship.”

CONFIDENTIALITY REQUIREMENTS
DHS Child Welfare staff are authorized to share confidential information with co-located DV advocates about any child welfare case information that:
• Promotes child well-being and safety
• Ensures the best interests of the child
• Protects children from abuse and neglect

In order to release any information about a Domestic Violence Survivor, DHS must fill out a Request for Restriction and Use of Disclosures - Form 2099

IMPLICIT BIAS
Implicit bias refers to the unconscious association people make between groups of people and stereotypes about those groups. Being aware of implicit bias is especially important when co-located domestic violence advocates are working in different organizational cultures and when working with populations that are represented by people from diverse age groups, race, gender, physical and mental ability, and the LGBTQ community.

For more information, refer to:
https://implicit.harvard.edu/implicit/research
www.understandingprejudice.org

Regional and National Websites
1. American Bar Association: https://www.americanbar.org/aba.html
2. CDC-Coping with stress: https://www.cdc.gov/features/copingwithstress/index.html
3. David Mandel's online training: http://endingviolence.com/
4. Futures without Violence: https://www.futureswithoutviolence.org/
5. Legal Momentum: https://www.legalmomentum.org/
16. Prevention Institute, Preventing Violence: https://www.preventioninstitute.org/focus-areas/preventing-violence
17. Resource Center on Domestic Violence: Child Protection and Custody: https://rcdvcpc.org/
20. VAWAnet: http://vawnet.org/
Tips for Building and Maintaining Healthy Relationships with Co-located DV Advocates

Develop a Leadership Team that meets regularly to discuss and solve any problems that may arise in this collaborative relationship as well as celebrate successes of the relationship. The Leadership Team would be comprised of supervisory and line staff representing both the DHS Child Welfare or Self-Sufficiency Program and the non-profit domestic violence advocacy organization.

Establish a local Memorandum of Understanding (MOU) that:
- Distinguishes the roles and responsibilities of co-located domestic violence advocates from DHS caseworkers and any other service providers that work in the DHS office
- Develops a comprehensive orientation for all members of the co-located domestic violence advocacy program in partnership with the DHS Child Welfare and/or Self-Sufficiency Program
- Creates an organizational structure for the co-located domestic violence advocacy program in partnership with the DHS Child Welfare and/or Self-Sufficiency Program
- Offers domestic violence training for DHS Child Welfare and/or Self-Sufficiency caseworkers
- Identifies practices to ensure privacy and security for client files and data
- Clarifies the attendance and leave policies for the co-located domestic violence advocates
- Develops a referral process to the co-located domestic violence advocates in partnership with the DHS Child Welfare and/or Self-Sufficiency Program
- Problem solves with DHS Child Welfare and Self-Sufficiency caseworkers on how to best support domestic violence survivors in navigating DHS Child Welfare and/or Self-Sufficiency procedures
- Participates in DHS Child Welfare and Self-Sufficiency caseworkers’ case planning
- Participates in DHS Child Welfare and Self-Sufficiency home visits as requested

Strengthen Collaborations
Collaboration requires a group of people with diverse skills, experience and knowledge to commit to working towards a shared vision. Collaboration can:

- Open lines of communication
- Improve relationships
- Increase trust, knowledge and resources
- Break down barriers that inhibit collaboration

Trauma-Informed Care
Domestic violence survivors, and their children, experience trauma and need to be supported by a system that incorporates trauma informed care principles into their procedures, practices and policies. A fundamental element of implementing a trauma-informed care framework is the understanding of the impact of historical trauma and oppression. The basis for incorporating a trauma informed care model include the following elements:
- Creating a safe space, physically, emotionally, that is transparent, predictable and has clear and consistent boundaries
- Valuing the individual through relationship, compassion, respect, acceptance, non-judgement and collaboration
- Restoring power by promoting choice, empowerment, strengths and skill building

State Websites
4. Oregon Coalition Against Domestic and Sexual Violence: www.ocadsv.org
7. Oregon Law Help: www.oregonlawhelp.org
8. Oregon Law Center: http://www.oregonlawcenter.org