



REQUEST FOR INFORMATION REGARDING INTERVENTIONS TO SUPPORT CHILDREN AND YOUTH EXPOSED TO DOMESTIC VIOLENCE

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Commissioner

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The Department of Children and Families (DCF) seeks information and comment on trauma-informed, evidence-supported models to support the treatment and recovery of children and youth who have been exposed to domestic violence. The Department also seeks information on screening, assessment, and referral processes that may be utilized to identify children and youth in need of therapeutic intervention. DCF is seeking responses from public or private not-for-profit or for-profit organizations, University Partners and Faculty members, and other relevant stakeholders.

Children and youth exposed to domestic violence are at an increased risk for experiencing abuse (physical, sexual, etc.), developing emotional and behavioral challenges, and experiencing subsequent exposure to trauma and adverse life experiences. According to the National Survey of Children's Exposure to Violence, 40.3% of children surveyed have been exposed to family violence throughout their lifetimes, with 27.7% being exposed to physical intimate partner violence among parents.¹ In New Jersey alone, domestic violence shelters reported that over 56% of their housing population included children, and 96% of the services provided involved child support and advocacy.²

Exposure to domestic violence can have profound and lasting traumatic effects on children and their development. Potential impacts include but are not limited to:

- Lower verbal, cognitive and motor skills, and/or delays in childhood development;
- Depression, anxiety and Post Traumatic Stress Disorder (PTSD);
- Restlessness, impulsivity and difficulty concentrating;

¹ Hamby, S., Finkelhor, D., Turner, H., and Ormrod, O. (2011) Children's Exposure to Intimate Partner Violence and Other Family Violence. Washington, DC: U.S. Government Printing Office. Retrieved at : <http://www.unh.edu/ccrc/pdf/jvq/NatSCEVChildren's%20Exposure-Family%20Violence%20final.pdf>

² National Network to End Domestic Violence. 2013 Domestic Violence Counts: A 24-Hour Census of Domestic Violence Shelters and Services. Retrieved at: http://nnev.org/downloads/Census/DVCounts2013/State_Summaries/DVCounts13_StateSummary_NJ.pdf

- Fearful, withdrawn and inhibited behavior; and,
- Lower self-esteem and shame.³

At the same time, research demonstrates that early intervention with trauma-informed services is key to a child's recovery. Studies have found that there are protective factors and interventions which can mitigate the impact of exposure to domestic violence.^{4,5} Protective factors such as secure maternal attachment, social support to the family, high self-esteem, and child temperament contribute toward increased resilience in children exposed to domestic violence. Treatments that aim towards building resilience and promoting recovery can mitigate the long-term impact of violence exposure. Reliable measures for screening and assessment of domestic violence exposure are also important tools for working with this population, as these measures can direct treatment considerations and ensure use of appropriate interventions.⁶

The primary service DCF currently relies upon to support child victims of domestic violence is Peace: A Learned Solution (PALS). PALS targets youth between the ages of 3 and 12 who have been exposed to domestic violence, either as victims or witnesses. The program utilizes music therapy, art therapy, play therapy and other expressive therapies. The goal of expressive therapies is to enable children to gain control over their feelings that are affecting current behaviors and performance in educational and social environments. The PALS program is currently offered through 11 agencies in 11 counties across the State (Atlantic, Camden, Burlington, Ocean, Monmouth, Middlesex, Hunterdon, Union, Essex, Passaic, Bergen). Each program has capacity to serve a minimum of 50 unique clients (children) per calendar year.

In response to this Request for Information, we ask for the following input from our providers and the community. This information may be used in developing a future Request for Proposal and/or to enhance existing services.

1. Information on trauma-informed, evidence-supported programs intended to treat and support the recovery of children and youth exposed to domestic violence. Please include the following:
 - a. Description of the program including what population the intervention or program is indicated for, the duration of the intervention or program, and expected outcomes.

³ Futures Without Violence. <http://promising.futureswithoutviolence.org/what-do-kids-need/get-the-facts/>

⁴ Holt, S., Buckley, H., & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child Abuse & Neglect, 32*, 797-810.

⁵ Martinez-Torteya, C., Bogat, A., von Eye, A., & Levendosky, A. (2009). Resilience among children exposed to domestic violence: The role of risk and protective factors. *Child Development, 80*(2), 562-577.

⁶ Edleson, J., Shin, N., & Johnson-Armendariz, K. (2008). Measuring children's exposure to domestic violence: The development and testing of the Child Exposure to Domestic Violence (CEDV) Scale. *Children and Youth Services Review, 30*, 502-521.

- b. Reference to the body of evidence that supports the intervention. Please include references to or copies of specific published articles/research as appropriate.
 - c. Professional qualifications including training and educational requirements necessary to deliver/administer the proposed intervention or program.
 - d. Potential challenges to implementation of the program/intervention.
2. Information on a screening and/or assessment tool and process that can assist agencies who work with victims of domestic violence in identifying child/youth victims who may require treatment. Please include the following:
- a. Description of the screening or assessment tool and process including what ages the tool/process is indicated for, what setting(s) the tool/process can be completed in, length of time to complete, and the information needed to complete.
 - b. Reference to the body of evidence that supports the screening or assessment tool and process. Please include references to or copies of specific published articles/research as appropriate.
 - c. Professional qualifications including training and educational requirements necessary to administer the screening or assessment tool.
 - d. Potential challenges to implementation or adoption of the screening or assessment tool and process.

All responses to this RFI are due by 12:00 PM EST on or before November 17, 2015. Responses shall be accepted on a rolling basis. Responses may provide a basis for DCF to develop a final Request for Proposals or Request for Qualification for these services. Responders may request information and/or assistance from DCFASKRFP@dcf.state.nj.us

In Subject Line, enter RFI-DV Models of Intervention-Name of Agency

Responses received after 12:00 PM EST on November 17, 2015 may not be considered in our current planning process but can be submitted at any time.