



## **Strengthening Local and State Collaborative Networks to Support Children Exposed to Violence**

Any initiative related to children’s exposure to violence shares the complementary goals of preventing such exposure while identifying and supporting children after exposure to violence has occurred. But this work is complex and multifaceted. No matter how strong an individual agency’s response, it will not be as effective or reach as many children on its own as it would in collaboration with local and state partners. In the absence of such collaboration, one part of the system may be facilitating resilience and healing while another does nothing or even creates harm. Children exposed to violence (CEV) and their families may interact with dozens of different agencies in any given community, yet their exposure to violence may still not be identified and/or they may not receive the support that they need and deserve. To enable a consistent, effective response, all practitioners who interact with children and families must be fully trained on this issue and supported in implementing trauma-informed practices to identify and respond safely and supportively to children’s exposure to violence so children no longer fall through the cracks or experience systems responses that exacerbate their trauma and distress.

More specifically, why is collaboration so important to this work? By enabling a no wrong door approach, collaboration enables systems to identify and support as many CEV as possible by conducting screening in many settings and connecting children with supportive resources. Collaboration also promotes safe, consistent, and healing responses to CEV by allowing multidisciplinary teams to identify and ameliorate systemic gaps and challenges while strengthening existing responses. In addition, collaboration allows practitioners to learn from and support each other across professional and agency boundaries as they are doing this difficult, complicated, and sometimes painful work. Thinking about implementation and sustainability, collaborative partnerships allow the broadest possible reach and institutionalization of the team’s efforts. These include screening, assessment and referral processes; expanding and strengthening services for CEV and their families; and ensuring an ongoing positive impact of CEV-related practitioner training and community education and outreach

work. Lastly, collaboration empowers teams to work together to secure additional funding to sustain these initiatives.

Many agencies and systems interact with CEV and their families, all of which are potential partners in strengthening the systems response. These include:

- Schools and childcare providers, including Head Start;
- Health care providers, including pediatrics, adolescent medicine, emergency/trauma medicine, reproductive health, forensic medical examiners, early intervention, visiting nurses, and medical social workers;
- Mental health professionals, including individual providers, mental health treatment agencies, and professional organizations;
- Youth programs and youth-serving organizations;
- Violence prevention and intervention programs, such as intimate partner and sexual violence prevention programs and community-based violence intervention programs;
- Social services, including WIC, homeless services, and government benefits administrators;
- The child welfare system at the local and state levels, including Child Protective Services, preventive services, foster care agencies, group homes and residential treatment facilities, and supervised visitation programs;
- The criminal legal and juvenile justice systems, including law enforcement, Child Advocacy Centers (CACs), prosecutors, defense attorneys, juvenile detention facilities, youth alternative to detention/incarceration programs, and juvenile probation and parole;
- Family Court, including attorneys, judges, court staff, and child support personnel;
- Victim services agencies, including advocates in CACs, law enforcement agencies, courts, prosecutor's offices, community-based agencies, Family Justice Centers, street outreach programs, domestic violence shelters, and state anti-violence coalitions.

Each of these agencies interacts with CEV and their caregivers, presenting an opportunity for identification of the exposure to violence and connection with healing resources, assuming their staff have received the necessary training and support. But what other roles might these partners play in an interagency initiative to address CEV? Some might become members of an advisory board, task force, or working group, some might provide expert consultation and peer review of training curricula or other documents, and some might assist with developing policies and procedures to improve systems integration. Others might be collaborators on community and system education and outreach initiatives or support implementation of more effective screening and response to CEV at their agency and in the system more broadly.

How can teams facilitate such collaboration, especially when individuals and agencies have never worked together before? A helpful place to start is with getting to know each other personally and professionally by learning about what the work looks like in each role through conversation, cross-training, and site visits. New collaborators can develop shared goals and values to guide their efforts and can also participate in interdisciplinary training on CEV that can provide foundational knowledge while strengthening collaborative relationships. In addition, agencies can develop memoranda of understanding (MOUs) that delineate how they will support each other, as well as joint policies and procedures for cross-reporting and making referrals. Lastly, the team can conduct a needs assessment that focuses on evaluating the systems' response to CEV, and the team can even develop grant proposals together.

Although collaboration may initially require a bit more time and effort than continuing the status quo, failing to meaningfully engage all of the agencies and providers that work with children and families will mean that a significant proportion of children exposed to violence will not be identified as such, thereby allowing the harm they've experienced to continue unaddressed and unmitigated. Our shared goal of supporting these children requires that we overcome the barriers to collaboration so we can create the integrated, effective system of care and support that these children need and deserve.

*This document was supported by cooperative agreement number 2018-V3-GX-K014, awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this document are those of the contributors and do not necessarily represent the official position or policies of the U.S. Department of Justice, Office for Victims of Crime.*