

Social Worker Interventions in Situations of Domestic Violence: What We Can Learn from Survivors' Personal Narratives?

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Abstract

Social workers are an integral provider in the statutory support offered to women experiencing domestic violence. This paper uses information obtained from women's personal narratives to examine this social worker–client relationship in situations of domestic violence. Embracing a feminist standpoint epistemology and focusing on the women's experiences, it is evident that many of the women expressed dissatisfaction with the way they were treated by social workers. Threats to remove the children from the home and victim blaming were among the tactics described. The parallel between such reported forms of coercion employed by social workers and those used by the abuser are striking. The findings suggest a lack of a favourable climate to ensure the safety of the woman and her family through the provision of family-centred care and a need to build more effective and supportive relationships with women experiencing domestic violence. Implications for social work practice are also discussed.

Keywords: Domestic violence, women, social work

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Introduction

Social work is at the 'cutting edge' for the provision of support for women experiencing domestic violence. A profession with a statutory mandate to support the welfare of vulnerable individuals and families, including the safeguarding of children, social work can benefit from a critical analysis concerning the treatment provided to victims of domestic violence.

The *Shaping Our Lives National User Network* document in the UK clearly identifies the personal attributes required for social workers to make a meaningful contribution to their profession and clients:

They place a particular value on social work's social approach, the social work relationship and the positive personal qualities they associate with social workers. The latter include warmth, respect, being non-judgemental, listening, treating people with equality, being trustworthy, openness and honesty, reliability and communicating well (Beresford, 2007, pp. 4–5).

Endorsed by the [British Association of Social Workers \(2011\)](#), these key attributes are further defined and referred to in the Code of Ethics, subsumed under the headings of human dignity and worth, social justice, service, integrity and competence. The [General Social Care Council \(2010\)](#) who regulates the social work profession ensures adherence to these codes of expected behaviours, whilst setting the standards of practice and conduct.

In the USA, similarly, the stress in terms of establishing a productive relationship with the client who is threatened by domestic violence is to intervene from a strengths perspective and, following the social work value of self-determination, to help her reach the best decision for herself and her family at that time. In the words of Davis and Lockhart:

A cornerstone of professional practice in both professional social work and the domestic violence field is the concept of empowerment practice. Within the domestic violence field, empowerment practice is addressed first as a strategy to assist individual women to take control of their lives and second, as a strategy for taking action against domestic violence in certain communities (Davis and Lockhart, 2010, p. xxvi).

According to the [Department of Health \(2010\)](#), social workers should work with women and their families to provide individualised care dependent upon their needs. Contemporary policies refrain from the traditional demarcation within policy for supporting women and children experiencing domestic violence, with current commissioning of services recognising the connection between them ([Goulding and Duggal, 2011](#)).

Background and theoretical framework

Domestic violence was constructed as a 'social problem' by second-wave feminist women, with coercive control being identified as the defining feature of women's experiences (Yllo, 1993). Feminist researchers apply 'multiple lenses' through which to seek knowledge from subjugated women's experiences (Brooks and Hesse-Biber, 2007). From the many varieties of feminism, the teachings of one school of feminism—standpoint feminism—is chosen as the guiding framework for this discussion because of the clear formulation of its precepts, its emphasis on 'giving voice' and listening to women's voices (Bui, 2007).

Feminist standpoint theory begins with the idea that less powerful members of society experience a different reality as a consequence of their oppression. It is built on the premise that such individuals can access knowledge unavailable to the socially privileged. Research undertaken from this perspective thus is political in the sense that it is committed to social action on behalf of the socially oppressed classes (Belknap, 2007). Largely rooted in Marxist ideology, feminist standpoint research challenges the researcher to explore structural oppression from the women's standpoint and therefore provides an understanding of how domination is attained (Jagger, 1997).

Standpoint theory is compatible with social work, which also deals with people at the margins of society and seeks to enhance their sense of dignity and worth (van Wormer, 2009). Choice and agency are hallmarks of standpoint theory (Collins, 1990) as well as of social work's strengths model and of its aim to help clients find their own way, to carve out their own paths to wholeness (Rapp and Goscha, 2006). The provision of choice, however, because situations are potentially life-threatening and destructive to child witnesses of the violence poses a dilemma to professionals in the field. Should they, as battered women's advocates, follow the recommended process and pursue domestic violence cases to the full extent of the law, regardless of the victim's wishes, or should the decision to proceed be left up to the victim-survivor (van Wormer and Roberts, 2009)? There is no clear solution to this dilemma.

This paper views this issue through a standpoint feminist lens, with attention to concerns of power imbalances, women's special needs and choice. Consistently with the emphasis on choice and self-determination, the social work model we are proposing here acknowledges that many women in situations of abuse seek to end the violence but not the relationship. Many other women are living in a state of such extreme fear that they are in no position to protect their children as is required by law. Their circumstances must be known to be understood.

Feminist social workers have been critical of contemporary practice in many situations relating to its treatment of children, women and men

(Dominelli, 2002). In the USA and Canada, the present system involving mandatory arrests and prosecutions of perpetrators of domestic violence has brought about unintended consequences, as many victims are reluctant to call the authorities for help (van Wormer and Roberts, 2009). Victim choice has not been a part of this process. Research conducted by Jacki Tapley (2010) on the handling of domestic violence cases in Britain cites examples of mothers feeling they are being punished for the bad behaviour of their partners. The widespread dissatisfaction with the current system of mandatory law enforcement in the USA behoves us to consider alternative forms of dealing with domestic violence.

Of special relevance to women's victimisation are the following standpoint feminist values: reliance on the woman's personal narrative for truth telling; acceptance of a holistic, non-dichotomised view of reality including a merging of the personal and political; a focus on choice and options; an understanding of the gendered nature of power relations in the society; and an emphasis on personal empowerment and respect for one's personal dignity. Empowerment is defined by standpoint theorists Sprague and Hayes (2000) in terms of facilitating one's self-determination. These attributes are consistent with the teachings of standpoint feminism in their focus on listening to the voices of women and oppressed populations, and are also consonant with social work values of self-determination and enhancing a person's sense of dignity and worth (van Wormer, 2009).

The aim of this study was to explore the experiences of women survivors of domestic violence and their interactions with social workers, and this paper is written in the belief that, as Dominelli (2002) suggests, talking to women clients about their encounters with social work professionals about their work helps develop insights about social work practice and education. Therefore, exploring the women's stories in terms of their interaction in this context, our paper strives to give subjugated and oppressed women a 'voice' as they describe their encounters with social workers. In our critical analysis of the narrative content, we list the power and control tactics as delineated by founders of the Domestic Abuse Intervention Project of Duluth, Minnesota.

Methodology of obtaining interview data

Enabling women to tell their own stories and describe their experiences is integral to feminist ways of conducting research (Dominelli, 2002). Consistently with this philosophy, the authors chose narrative interviews for data collection, to support each woman in regaining her autonomy as she chose the juncture at which her story began, the contents of her narrative interview and terminated the interview at her discretion. The nexus of control over the interview was thus located with the woman participant. In regarding each woman as an expert on her own life, the health care

professional interviewer avoided the role of expert, and elitist notions of professionalism were carefully avoided. As narratives often represent lengthy periods of discourse through which identities and experiences are conceptualised, this approach is especially relevant for exploring difficult life transitions, gender inequalities and other practices of power (Riessman, 1993).

Interviews were audio-recorded with consent and lasted between twenty-five minutes and one-and-a-half hours and were transcribed verbatim, ensuring the richness of the data was captured. The context of the dialogue was preserved by retaining non-lexical utterances, discourse markers and gaps in speech. Longer gaps were marked as a silence. We chose an inductive approach to thematic analysis by Braun and Clarke (2006) to analyse the narratives, as we sought to understand the participant's everyday experience, leading to an improved understanding of the particular phenomenon being explored (McLeod, 2001).

Sample

Using purposive sampling, fifteen women were interviewed, all of whom had been, or were currently, resident within the refuge. However, this paper focuses on the narratives of seven of those women, as *they* spoke in detail about their interactions with social workers following domestic violence.

All the women who shared their stories had experienced domestic violence and had one or more children by this partner or previous partners. At the time of the interview, eight of the women were resident within the refuge, three were living at home without their partners but supported by the refuge, and three women who had previously experienced domestic violence now provided support within the refuge. The residents were identified as largely working-class based on discussion with the manager and support staff at the time of the visit to the refuge. Their ages ranged from twenty-one to fifty-four. The majority of the women were white British, one European and one Irish.

Ethical considerations

All the women participants gave verbal consent to a one-to-one meeting with the primary researcher. To ensure anonymity, the woman chose a pseudonym by which to be known. All meetings took place during 2009 in a quiet room within a refuge, ensuring the safety and comfort of the woman. The study was approved by the first author's academic institution.

Findings

Although all the women in this study had children, not all talked of their experiences of social worker interactions; therefore, only those women whose narratives included this experience are presented. As the participants recounted their experiences with social workers, it became clear that they were being put on the defensive and did not feel free to disclose the facts about the true nature of the family violence. The women's fears of consequential action by the social worker if they revealed her violent relationship is an indication of a serious lack of trust in the social work agency. The needs of the victimised woman thus were not met. In those cases in which the social workers were aware of the partner violence, their concern focused primarily on the child's needs, with limited support offered to the mother, suggesting that these social workers were based within children and families' social work rather than an adult service social work focus.

Our analysis of the women's narratives revealed that these women expressed a great deal of anger towards the system and that much of this anger was related to the aggressive way in which they were treated by social workers. Even behind the words used by the women who reported positive experiences was an indication that the social workers had predominantly told them what to do rather than using a strengths-based or motivational approach to help the women feel empowered in their decision making.

Standpoint feminist theorists pay special attention to the issues of power and control in the society. Through the use of violence, the battering man acquires considerable power. Paralleling the partner's violence are many other strategies that are used to control the behaviour of the victim. We can draw on Foucault's (1975) concept of power as articulated in *Discipline and Punish* to show the connection between personal and institutional forms of power and the neglect of an individual's right to decision making. When social institutions re-victimise women by overriding individual choice, in forcing them, for example, to prosecute their partner, as is generally done in the USA in accordance with recommendations by the Duluth Model proponents, this process is a denial of women's agency. Foucault's understanding of the uses and abuses of social control contains lessons for domestic violence advocates and the social work profession today. Westlund (1999) shows, for example, that Foucault's model on power and dominance is especially relevant to women in a battering relationship. Not only does this woman have to continually try to placate an all-powerful partner, but she is also forced, if she wants help, to turn to modern institutions that may put her on the defensive and expose her to re-victimisation. Power and control issues are thus particularly pertinent

for domestic violence survivors, given their history of personal victimisation and, in many cases, further violation by the social services system.

To assess the similarity between strategies used by battering men to assert their power, we reviewed the eight tactics represented on the Power and Control Wheel of the Duluth, Minnesota model. The Power and Control Wheel was developed in 1984 from the experiences of battered women in Duluth who had been abused by their male partners (the Wheel is available at www.theduluthmodel.org). According to the teachings of this model, the batterer acquires a great deal of power over the victim apart from the actual violence or threats of violence by using several strategies to keep his partner submissive and to control her behaviour. The eight basic tactics that were identified as commonly used by batterers are: using coercion and threats, using intimidation, using economic abuse, using male privilege, using isolation, using children, minimising, denying and blaming.

Although the majority of social workers involved in domestic violence services are female, masculinisation of this profession has resulted in these professionals' becoming co-opted into the state machinery. Their use of male privilege, as defined by Duluth, to enforce control and surveillance of women survivors may result in professional behaviours being aligned to that of male perpetrators of domestic violence. Gilbert and Powell (2010) argue that control and surveillance as mechanisms of power create a paradox for both the social worker and the women.

We will examine the content of the women's testimonials regarding the other seven strategies of power and control to see whether they have any relevance to the treatment the women reportedly received in their interaction with social workers. We start with two descriptions that seem positive on the surface.

Positive accounts of social worker intervention

The role of the social worker is complex, incorporating providing support to families and safeguarding vulnerable members of society. According to the Department of Health (2010), social workers should work with women and their families, seeking to provide individualised care dependent upon their needs. The following two statements from the personal narratives of Vivien and Tulip describe experiences with social services that were positive for them:

I think they can be quite supportive when the woman is quite clear that she wants to leave the relationship, she doesn't want any contact with him and she is working with social services for the same goal. I find them quite supportive then (Vivien).

Well, social services got involved because my eldest went into school with bruising on his eye and bruising on his arms so they got involved and then when we were going for meetings and stuff he [ex-partner] started kicking off at meetings and showed his true colours to them so they strongly believed, because there wasn't enough evidence to take it to court, but they strongly believed that he did do it and they advised me to leave the relationship. I would've probably still been in the relationship so I do thank them for getting involved because I feel a lot better now (Tulip).

Tulip's excerpt reveals that she got the help she needed to make a major change in her life. We do not know from this testimonial whether the social workers would have taken her word for her ex-partner's behaviour had they not seen the abuse with their own eyes, but the narrator felt good that she was believed in any case. Their advice to leave the relationship was well received, but we do not know the extent to which the mother was helped to reach this decision of her own accord.

Vivien clearly states that social workers can be helpful if the woman is decisive about leaving the violent relationship—that is, representing what the social worker wants her to do. This statement implies, however, that the woman who is indecisive or wishes to remain in the relationship will not receive the desired support from the social workers. Our analysis of these brief reports of social work encounters reveals that a feminist approach was not used, but nevertheless that the decisions the women were more or less pushed into were the correct ones and they now are grateful. [McLaughlin \(2005, p. 283\)](#) identifies the self-determination of social workers to impose 'new moral codes of behaviour' on service users and, indeed, later in her narrative, Vivien talks of a more destructive side to the social worker interactions when the woman diverts from the social workers' demands. This brings us to a consideration of indications of the use of controlling tactics by social workers to move the clients in the desired direction.

Fear of informing social workers of the violence

Women who live within a relationship in which domestic violence occurs may often feel threatened by their partners. However, it appears that an additional source of threat or fear may be located from the women's interactions with social workers. It is the very genre of oppressive practice that has the effect of undermining an individual's self-esteem and confidence. Indeed, any oppressive practice may generate fear. The women below reveal their fears surrounding social workers and of the reluctance to interact with this statutory agency as a direct effect of these fears:

They [women] are protective and they have just had the baby and they might feel if they disclose when this is actually going on, then it is the stigma of social services and social services might come and take my baby away so it is best to shut up and do nothing about it (Lily).

The women are *terrified* of social services because they know they have got that power and they can use that power and they can use threats. I have known them to use threats and they do, yes (Vivien).

I mean if social services and all that lot are going to report if a woman in domestic violence does come out with stuff like that then they are going to be more scared to come out with stuff. So I think that is what it is with every other woman, they are scared of what the consequences would be if they found out (Sarah).

I am dead worried about him [the baby] because if he looks like him [partner] what will I do to him? What if he turns out like him [partner]. I am so worried. I have a social worker but don't know how much I can tell ... you know being a social worker it is her job and that, she might take him into care or something (Stacey).

Note that Stacey, in the fears that she expresses above concerning what she might do to her baby if the child looks like her abusive partner, shows that she needs therapeutic help. Yet, it is also clear that she is not getting the kind of preventive help she needs from this situation and that the baby might be at risk from both herself and her partner. Women's individual experiences offer a unique perspective into how society functions. The women experience fear, threats and intimidation, the significant fear revolving around losing their children. A parallel appears to exist between threats from the abusive partner and the threat of social services becoming involved. This paradoxical relationship seeks to further undermine the woman's autonomy, isolating her further from accessing any form of help.

Vivien describes tactics employed to coerce women to engage with social workers—tactics that, when employed by a partner, are considered within the range of behaviours constituting domestic violence (Dobash and Dobash, 1992). Each woman's excerpt represents her own construction of the feeling of fear of social worker interaction—powerful narratives revealing the hidden power basis upon which social workers are perceived. Indeed, Vivien uses the word 'terrified' to indicate the depth of the fear. Daly and Chesney-Lind (1998) draw on critical social theory to place the nexus of violence against women as an issue of power and control. These acts are usually equated with the behaviour by a perpetrator. However, as revealed in these women's narratives, the power may also be directed from social workers. The women also refer to social workers' oppressive practices that indicate a lack of engagement with the women. Although women may turn to services for help, it is these institutional barriers that may result in further difficulties for the women (Postmus *et al.*, 2009).

Use of threats concerning children

This actual consequential action following the social worker's dialogue with a woman experiencing domestic violence reveals the true nature of this relationship. The women talk of their involuntary or intentional relationships with the social workers, revealing the lack of ongoing support, empowerment or acknowledgement of the woman's situation:

I was scared about child protection and taking my daughter away ... I ended up in hospital on a life-support machine for a few weeks and I lost my daughter then, she was took off me. The social worker took her and that's what I am fighting for now [long silence]. They [social workers] don't help me with my daughter though. 'Gill', she works here, she is the one who has supported me more through my daughter than the social worker. She does the social workers job for me really. She shouldn't be but she is (Daisy).

He followed me everywhere for about a year. I went to people for help, went to social services but they weren't any good (Vicky).

I told my social worker because I got social services and everything involved, all these people on the case and, erm, they said they were going to close my case because I'm not a risk to the child, it is him (Stacey).

The response from social workers to women who seek their help, such as Stacey and Vicky, may portray subliminal messages to the women. A supportive approach signals belief in the woman's needs and legitimises her claims. However, as revealed in these narratives, an opposing response minimises the experience, deterring her from seeking subsequent help, thereby resulting in increased vulnerability (Horne and Radford, 2008). Women welcome a 'hands-on' approach, which takes account of both personal and social issues and the associated complex interrelations (Beresford, 2007).

Using coercion and threats

The following sections of the narratives from Sarah and Lily clarify, from their viewpoints, that they were in such deep trouble as battered women that social service workers were called in to protect the children but that, apparently, little real help was given to the mothers. We need to keep in mind in reading these accounts that, although the children were not being properly cared for, the mothers themselves may have felt powerless to provide the kind of protection the children required and powerless to end the abusive relationship:

They got in touch with social services. Social services come out and said I have put my kids at risk. And that was it. I didn't need that ... I just turned round and said I never said nothing, I never said I was in a domestic violence relationship so I wasn't going to have that, people are meant to be there to help you and they are not meant to do that (Sarah).

I think like for me it was my wake-up call social services coming in, he has to go or the children go. Even though he did talk to them, and talk them out of it he was able to come back which annoyed me but he used my job as an excuse. I didn't know the school had actually referred us so social services had got involved and you know they said he has to leave or we have to come and take the children because you're not safeguarding them (Lily).

It is definitely a form of abuse. It is almost a kind of a threat. I have heard horror stories about social workers coming out and saying 'if I find for one minute you're had any contact with him whatsoever we are going to get an emergency protection order and the kids are out of here and you won't be getting them back'. It seems to be, they seem to pick their targets as well. It seems to be the young vulnerable women, the women who are not as assertive as the older women or who know their rights as much you know and they are absolutely terrified and like 'oh my God I'm going to get my kids took off me' ... and it's just another form of abuse you know (Vivien).

The social workers have a hold over the women in that they have the authority to apply for a care order, with a view to involving other agencies to remove the children from the mother's care. This action may be perceived by the women as a 'punishment' if they do not comply with the social workers' demands. The institutional power structures governing social work practice challenge the relationship with the women (Bundy-Fazioli *et al.*, 2009) and this is made visible as Lily talks of the social workers' demands of 'he has to go or the children go'—a direct threat legitimised by the statutory role of social work.

Being blamed for domestic violence

Helping professionals, including social workers, sometimes blame the victims of domestic violence for their predicament, reinforcing other messages that our society sends to these women (Sandel, 2003). These negative messages serve to subjugate women further who experience domestic violence. Moreover, the fact that most of the social work interventions related to family violence focus on the mother leaves the mother open to charges of failing to protect her children from harm (Dominelli, 2009).

Often, idealistic social workers themselves become aware of the professional misuse of power. Consider this testimonial by a social worker who until recently specialised in domestic violence counselling:

I worked at a private, nonprofit community mental health agency where most of the women and men in the DV groups were referred to our services by Child Protective Services (CPS) and/or the criminal justice system. Often what I witnessed when working with women in the CPS system was that women were being held even more accountable for the violence perpetrated against them than the men involved in the system, particularly if their partners were not the biological fathers. If they were the fathers, they were often present in meetings in which women would be told that if they allowed the men back into their homes, the children would be removed. This often

created a dangerous set-up in which the men knew how they could control the situation. My work gave me a picture of how local institutions viewed DV and interacted with individuals affected by DV. What I walked away with from my direct service experience was a sense that women who were survivors of DV were often revictimised within systems that purported to assist them (Morgaine, 2011, p. 7).

The women's stories above reveal the interplay of psychological intimidation and coercive threats, used under the guise of a legitimate power base. The Power and Control Wheel includes the tactics of intimidation and emotional abuse as well as the blaming. All these highly controlling techniques that are employed by violence-prone men to subdue women are also in evidence in the following narrative. The following description of the kind of surveillance that Vivien received from social services representatives recapitulates the kind of possessive monitoring that is characteristic of the typical male batterer (van Wormer and Roberts, 2009):

Everything is monitored. I mean *everything* you know. It would be difficult enough if you're not in an abusive relationship if someone is monitoring how you are looking after your children and what your lifestyle is and to go through that abuse and then having the pressure of having to justify yourself you know several times a week it is absolutely awful for them [women]. It is. It is an unrealistic level of time that they are not returned because it is a catch-22 situation and the longer it goes on the less chance of getting your children back and a lot of it is down to the court system and social services are very slow at doing their reports, and a lot of the time it has to be adjourned you know because the social worker hasn't done the report you know and we are talking about people's lives here and also they are not supportive in getting custody (Vivien).

Vivien's claim that everything is monitored suggests that it *feels* like a continual process of being watched. This panoptical approach reflects Foucault's (1991) theorising on surveillance and self-regulation. The social worker's use of contemporary surveillance strategies towards the women reflects the mechanisms of power by which social workers attempt to force the woman to stay away from the perpetrator.

Discussion

Feminist standpoint researchers locate a woman's lived experience at the centre of the research and use it to understand the functionality of society. Additionally, it focuses on who knows what and how knowledge is legitimised.

This paper centres on a woman's experience of the interaction with social workers following domestic violence, the nexus of the experience lying within the domain of the woman. Hesse-Biber and Leavy (2007) posit that this then reclaims their subjugated knowledge and also illuminates oppressive societal practices. Pence and Paymar (1993) recognise that the

issue of a man's control over a woman is a theme that runs throughout our society yet, here, listening to the women's voices; this dominance is also expressed by social workers. Mullender (1996) argues that social workers have traditionally been a contributor to the problem of women's experiences of domestic violence. This is certainly reflected in these women's narratives. We do not know the social workers' side of the situations and we are aware of the kinds of bureaucratic pressures they are under. Stanley *et al.* (2011) identify the difficulties in establishing a meaningful relationship with a woman experiencing domestic violence, due to the current system of assessment and intervention.

Nevertheless, there is a message contained in these personal narratives of these women who have had first-hand experiences with social services. And their experiences have been far from empowering and probably not even preventive of future family violence. From the women's perspective, the tactics used accentuated her sense of powerlessness in much the same way as did those she was also experiencing at the hands of her abusive partner.

Implications for social work practice

In the UK, as in USA, women receiving social services related to domestic violence often find themselves in conflict with the very system designed to prevent family violence. Such conflict clearly emerged in the interviews with women who shared their experiences in dealing with members of the social work profession. And yet, for women living in situations of domestic violence and for their children, engagement with practitioners whom they can trust and can confide in is the first step towards ending the violence in the family. For effective work with these vulnerable women, possession of gender-sensitive professional skills is essential.

This paper has focused on responses to the treatment that women victim-survivors of domestic violence have received by social services departments and in interaction with social workers specifically. We recognise that such social workers themselves are under extreme pressure to be more efficient in what Dominelli (2002) terms the 'market driven economy' (Dominelli, 2002, p. 51)—pressure from society to help people and control them at the same time while the profession is publicly criticised for failing children (Dominelli, 2009). Abuse by social workers, although rare, still occurs and, when it does, we have to ask why (Dominelli, 2009). Additionally, Dominelli (2009) correctly locates much of the problem at the society level, related to the move away from relationship building, which is integral to social work, and the move towards 'techno-bureaucratic social work' (Dominelli, 2009, p. 20).

Overworked statutory workers in the UK have little time for relationship building, given the new forms of managerialism that now governs social work, despite the numerous recommendations in the *Training of Children*

and Families Social Workers document (House of Commons, 2009). Many social workers feel themselves victimised by the system accordingly, and they are transferring from statutory employment to work at voluntary agencies. Here, alternative forms such as feminist and anti-racist social work can be practised.

It is apparent that social worker practice lies within a dichotomous paradox of empowering women to protect their child from harm whilst simultaneously integrating a legal framework and local procedures as mandated in the *Every Child Matters: Change for Children Document* (Department of Health, 2006) to ensure the safeguarding of children. However, this latter strategy may negate a mother's actions to protect her child if they are considered ineffective and leave the child at risk of harm. The struggle to find a balance between ensuring the safety of the mother and child and empowering the mother to do this herself is clearly an issue.

Women survivors of domestic violence can be an excellent resource for engaging in domestic violence advocacy for the development of service provision and policy development (Hague, 2000). Accordingly, both the UK and the USA have witnessed the growth of several domestic violence survivor forums in which survivors are instrumental in setting up, if not providing, the services that are needed. Within these established forums, the success of domestic violence survivors working together has been clearly identified, with the successful incorporation of their recommendations to improve preventative work (Hague, 2005). These recommendations include listening to survivors' views and professionals sharing their power, ensuring that all voices are heard in the policy-making process (Hague, 2005). It is suggested that embracing this approach may lead to the provision of a favourable climate of trust and empowerment, thereby engaging women with social workers so they can strive together to ensure the safety of the woman and her family through the provision of family-centred care. Beresford (2007) argues that service users value the support that social workers can provide, as well as their ability to help them access and negotiate support from other services and agencies.

A major systemic problem in domestic violence prevention is the lack of inter-agency co-ordination. In recognition of the fact that the child welfare authorities tend to have one interest and domestic violence advocates another, the US National Association of Social Workers (NASW) (2009) has issued the following policy statement:

NASW will work with the child welfare system to support efforts to assist rather than punish the nonoffending custodial parent for future for 'failure to protect' when children have witnessed domestic violence (NASW, 2009, p. 144).

A fortunate development in the UK, as Tapley (2010) informs us, is that the government is making an ongoing commitment to improving its response to reports of domestic violence and a wide range of changes are

being introduced. Hopefully, there will be more room for feminist social workers to attend to the needs of women and her children simultaneously without sacrificing a focus on the one for the other.

Until the nature of domestic violence is completely understood and the agency representatives put themselves in the place of mothers who are living under the threat of severe, often life-threatening violence, women will continue to suffer in silence. Out of fear of seeking help from a system that has become increasingly punitive and bureaucratic, more families will fail to receive the help they need.

Social workers and students of social work are encouraged to work for systemic institutional change in prioritising relationship building with women experiencing domestic violence, integrating service users in policy decision making and embedding domestic violence training into social work curricula. In this way, women who have been personally victimised will know that they were truly listened to. As Patricia Collins (1998) indicates, individual empowerment is the key to social action. For women, even those who are the most oppressed, there is always the chance to act, sometimes collectively. We should never treat them as powerless beings but respect their personal choice and agency. Then they can receive professional and community support in developing safety plans for themselves and their children and, later, support in the healing process.

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