

Project Connections: Children Exposed to Intimate Partner Violence and Animal Abuse



Agenda

- Pets and The Link
- Consent and Assent
- Confidentiality
- Assessment Instruments – Parent and Child
- Delivering Completed Assessment Packages
- Follow-Up Contacts and Interviews
- Roleplays

Introductions



- Team Members
 - James Herbert Williams
 - Tina Hageman
 - Beth Collins
 - Tamara Greene
- Your Name
- Position at Agency
- Pets?

DV Programs in Research Project



Pets in Families

- Majority (62%) of US households have companion animals (pets)
- 87% consider their pets as family members
- 47% of pets sleep with or near their owner
- 79% of pets receive gifts on holidays
- (Source: NPPA National Pet Owners Survey)



Children and Pets

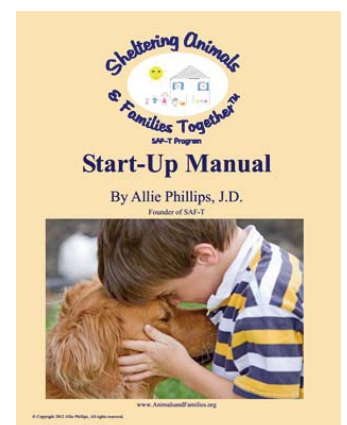
- Children are more likely to grow up with a pet in their home than with a father in their home
- Children's earliest playmates are often their pets, providing opportunities to learn social skills, empathy, attachment & bonding

The Link

- 50% of pet-owning women at DV shelters report animal abuse perpetrated by their adult partner (Ascione, 2007; Volant, 2008)
 - One-third delayed seeking shelter because of pets
- The majority of DV agencies did not routinely ask clients about pet abuse (Ascione, 1997)
 - “Do you have pets? Are you concerned for their safety?”
- Children exposed to DV are nearly three times more likely to abuse animals (Currie, 2006)



[http://www.vachss.com/
guest_dispatches/safe_havens.html](http://www.vachss.com/guest_dispatches/safe_havens.html)



<http://www.animalsandfamilies.org/>

Research Funding



Eunice Kennedy Shriver National Institute
of Child Health and Human Development

MARS
incorporated



WALTHAM[®]



Overview of Interview Process

1. Recruit participants
2. Obtain signed consent and assent
3. Obtain participant contact information
4. Administer adult assessments
5. Administer child assessments
6. Provide compensation to participants
7. Submit completed assessments
8. Follow-up phone calls at 6-month intervals
9. Conduct interview/assessments at 18-months

Participant Eligibility

- Client of Colorado Domestic Violence Program, with history of abuse within last year
- Mother aged 21 years or older
- Child aged 7 – 12 years of age at 1st interview
- Pet (any pet!) in the mother/child's home within the past 12 months
- Materials available in English and Spanish

Recruitment

PETS IN FAMILIES PROJECT

Do you have a pet animal or have you had a pet animal in the past year?

Do you have a child between the ages of 7 and 12 years?

The University of Denver Graduate School of Social Work in collaboration with the Colorado Coalition Against Domestic Violence is conducting a study about families experiencing abuse and their pets. We are interested in learning how interactions with pets help to address challenges.

This project will involve completing an interview and questionnaire (up to 1 hour). Our participants should receive some personal payments will also be interviewed and will complete questionnaires up to 1 hour.

Mothers will receive \$50 for completing the survey, and \$150 for participating again in 18 months. Children will receive \$25 each when they participate.

To learn more about participating in this study:
Contact Ruth Collier, Colorado Coalition Against Domestic Violence | 303.962.1211 | 875.374.1714 (toll free) or
Contact the Victim Advocates at your local domestic violence services program.

*Jane Anderson Williams, PhD, Principal Investigator | University of Denver Graduate School of Social Work
2003 14th St., Denver, CO 80202-7262 | 303.977.2222 | www.denver.edu/du

ADVOCATES AND STAFF
Help recruit participants for this ongoing study*

Project Connections

Clients will be compensated \$75.00 for their time.

If your client...

- ✓ Has a 7 to 12 year-old child
- ✓ Has Had a Pet Animal Within the Last Year

...they are eligible!

Fliers with information for clients are available in the main office

Certificates of Confidentiality

- Issued by the National Institutes of Health (NIH)
- Protect investigators and institutions from being compelled to release information that could be used to identify research study participants
- Allow the investigator and others who have access to research records to refuse to disclose identifying information in any
 - civil
 - criminal
 - administrative
 - legislative, or other proceeding, whether at the federal, state, or local level



PRE-INTERVIEW CHECKLIST

- ___ Secure storage file cabinet accessible for codes, contact information, activity log, and completed assessments
- ___ Master notebook of materials available
- ___ Counselor designated (for referral in cases of distress/adverse events)
- ___ Cash incentives for participants on hand
- ___ Receipt form available for recording cash disbursements
- ___ Gift for child available
- ___ Magnets and cards available
- ___ DO NOT DISTURB sign available
- ___ Comfortable, private room reserved for interviews
- ___ Writing materials (pens, pencils) available
- ___ Verify contents of assessment packets are complete (one set for mother and one set for child)
- ___ Verify packets have two copies each of Informed Consent, Parental Permission, and Child Assent forms so mother can retain one set of signed copies for her records. Mother may elect to store her copies of the signed forms at the DV Program in her secure client file or, if she prefers and it is safe to do so, may keep the copies with her own belongings. **DISCUSS THE SAFETY ISSUES THAT MAY BE ASSOCIATED WITH THE LATTER CHOICE** (e.g., if partner discovered the forms or if they were misplaced).
- ___ "Participant Contact Information" sheet available
- ___ **UNUSED CODE NUMBER ASSIGNED and entered into "Code Records" form**



Dual Roles and Boundaries



- Serving as a Research Interviewer - **not** as an Advocate / Counselor
- "This is an information gathering process, not a counseling or advocacy meeting"
- "We can set a time for you to talk more about your concerns after we are done with the questionnaires"

Participant Code Number

CONFIDENTIAL/SENSITIVE INFORMATION

Copy only for CCADV and place in CCADV lockbox at DV Program. Principal Investigator (Williams) and others at the University of Denver MUST NOT have access to this information.

KEEP ORIGINAL AT DV PROGRAM IN SECURE FILE CABINET

CODE RECORDS

	Full name of adult participant	Full name of child	Date of Assessment
0 8 0 1 0 0 1	Jane Doe	John Doe	10/20/12
0 8 0 1 0 0 2			
0 8 0 1 0 0 3			

- Assign the participant (mother-child pair) one code number prior to first assessment
- Enter date of assessment on "Assessment Log" sheet
- Keep secure in lock box. Copy only for CCADV if requested

Voluntary Consent

- Consent documents may be shown to mother during the Recruitment process
- Interviewer must read documents verbatim to mother and child
- Safety plan with mother regarding her copies



Consent Process

1. Mother's consent first
 - Adult participation informed consent
 - Parental permission for child's participation
2. Mother introduces project to child
3. Child assent – Alone with interviewer
 - Only approach child after mom's consent
 - Child participant assent form
 - Practice / role play for refusals and skips

Participant Contact Information

CONSENT/ PARTICIPANT CONTACT INFORMATION

Read to Participant Verbatim and Sign at All Times. Read only to (Child). Please provide name, address, phone number, and email address of the parent or guardian who may be contacted in the information.

All information and the consent information that is submitted online will be made available to the research team for the purpose of the study and for the purpose of the study.

Participant Name	Survey Code
First Name (Last Name if safe to use)	
Last Name	
Cell Phone	
Home Number	
E-mail Address (if safe)	
Home Address (if safe)	

Consent information for trusted friends or relatives who will relay the participant's contact information online is provided in the participant consent form.

Name of trusted friend/relative (last name)
First Name
Last Name
Cell Phone
Home Address

Name of trusted friend/relative (last name)
First Name
Last Name
Cell Phone
Home Address

All information will be kept confidential. The only information that is shared with the research team is the information that is needed to contact the participant.

- Safe follow-up contact info for mother's phone, email and mail
- Contact info for trusted friend and relative
 - Contact will be from "Pets in Families Project"
 - Ask mother to confirm that friend/relative will relay information

Overview of Adult Assessments

- Cover sheet – **yellow** – Interviewer completes
- Demographics – **pink** – Mother completes
- Six assessment tools
 - Mother can complete many on her own
 - Interviewer can read items to participant to help with literacy and language concerns
 - The Pet Treatment Survey must be completed in an interview format

Relationship Behaviors

CT33

RELATIONSHIP BEHAVIORS

No matter how well a couple gets along, there are times when they disagree, get annoyed with the other person, want different things from each other, or just have spats or fights because they are in a bad mood, are tired, or for some other reason. Couples also have many different ways of trying to settle their differences. This is a list of things that might happen when you have differences. Please circle how many times your partner did them in the past year. If your partner did not do one of these things in the past year, but it happened before that, circle "7".

How often did this happen?

1= Once in the past year	5= 11-20 times in the past year
2= Twice in the past year	6= More than 20 times in the past year
3= 3-5 times in the past year	7= Not in the past year, but it did happen before
4= 6-10 times in the past year	0= This has never happened to me

1. My partner showed care for me even though we disagreed 1 2 3 4 5 6 7 0

2. My partner explained his or her side of a disagreement to me 1 2 3 4 5 6 7 0

After interviewer reads instructions verbatim, allow mother to complete on her own. With mother's permission, the interviewer may read each item aloud, then wait for her to mark her responses. Mother should circle one number per item.

Definition of Animal Abuse

- For this research project, "animal abuse" or "cruelty to animals" is defined as:

Hurting an animal on purpose

- E.g., experiences with insects, animals that are used for food, and animals that are attacking people are *excluded*

Pet Treatment Survey

PET TREATMENT SURVEY
FRANK R. ASCIONE © 2011
Mother/Child Version

Participant Code: _____

PETS IN THE HOME **INTERVIEWER: ONLY SKIP QUESTIONS**
certain this information is in the de

- Do you now have a pet animal or animals?
No _____ Yes _____
If Yes, kind(s) Dog ___ Cat ___ Bird ___ Other _____
- Have you had a pet animal or animals in the past 12 months?
No _____ Yes _____
If Yes, kind(s) Dog ___ Cat ___ Bird ___ Other _____
- Do your pets receive regular veterinary care?
- Have your pets ever received emergency veterinary care?
- Do your pets have most of their vaccinations?
- How many pets have you had in the last 5 years? _____

- Purpose:** To learn about how pets are treated in your family
- Must be administered in an **interview format**
- Interviewer should record mother's responses verbatim (in mom's own words)
- Do not record names of persons or pets

Child Behavior Checklist

17

Please print CHILD BEHAVIOR CHECKLIST FOR AGES 6-18 For office use only ID # _____

CODE: _____

CHILD'S GENDER <input type="checkbox"/> Boy <input type="checkbox"/> Girl	CHILD'S AGE Mo. _____ Yr. _____	CHILD'S ETHNIC GROUP OR RACE Mo. _____ Yr. _____	PARENTS' USUAL TYPE OF WORK, even if not working now. (Please be specific — for example, auto mechanic, high school teacher, homemaker, laborer, latte operator, shoe salesman, army sergeant.) FATHER'S TYPE OF WORK _____ MOTHER'S TYPE OF WORK _____
TODAY'S DATE: Mo. _____ Yr. _____			THIS FORM FILLED OUT BY: Mother
GRADE _____ SCHOOL _____ NOT ATTENDING SCHOOL <input type="checkbox"/>		Please fill out this form to reflect your view of the child's behavior even if other people might not agree. Feel free to print additional comments beside each item and in the space provided on page 2. Be sure to answer all items.	
I. Please list the sports your child most likes to take part in. For example: swimming, baseball, skating, skateboarding, bike.		Your gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Your relation to the child: <input type="checkbox"/> Biological Parent <input type="checkbox"/> Step Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Adoptive Parent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Other (specify) _____	
Compared to others of the same age, about how much time does he/she spend in each?		Compared to others of the same age, how well does he/she do in each?	

- Purpose:** To learn more about your child's behaviors
- Qualitative and quantitative responses
- Mother should complete CBCL on her own, with assistance as needed. Mother should especially write her own responses to the child's activities, etc. on the first page

VI. Compared to others of his/her age, how well does your child:

	Worse	Average	Better	<input type="checkbox"/> Has no brothers or sisters
a. Get along with his/her brothers & sisters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Get along with other kids?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Behave with his/her parents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Play and work alone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VII. 1. Performance in academic subjects. Does not attend school because _____

Check a box for each subject that child takes	Falling	Below Average	Average	Above Average
a. Reading, English, or Language Arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. History or Social Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Arithmetic or Math	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other academic subjects-for example: computer

Below is a list of items that describe children and youths. For each item that describes your child **now or within the past 6 months**, please circle the **2** if the item is **very true or often true** of your child. Circle the **1** if the item is **somewhat or sometimes true** of your child. If the item is **not true** of your child, circle the **0**. Please answer all items as well as you can, even if some do not seem to apply to your child.

0 = Not True (as far as you know) 1 = Somewhat or Sometimes True 2 = Very True or Often True

0 1 2	1. Acts too young for his/her age	0 1 2	32. Feels he/she has to be perfect
0 1 2	2. Drinks alcohol without parents' approval (describe): _____	0 1 2	33. Feels or complains that no one loves him/her
0 1 2	3. Argues a lot	0 1 2	34. Feels others are out to get him/her
0 1 2	4. Fails to finish things he/she starts	0 1 2	35. Feels worthless or inferior
0 1 2	5. There is very little he/she enjoys	0 1 2	36. Gets hurt a lot, accident-prone
0 1 2	6. Bowel movements outside toilet	0 1 2	37. Gets in many fights
0 1 2	7. Bragging, boasting	0 1 2	38. Gets teased a lot
		0 1 2	39. Hangs around with others who get in trouble

Attitudes and Behaviors toward Animals CAI-Revised (P)

Below, you will find a series of questions that are related to certain experiences your child may have had with animals. One of these experiences could involve hurting animals on purpose or seeing someone else do this. But, remember we are not interested, for now, in your child's experiences with these animals:
a) insects (like mosquitoes and wasps) that bite or animals that carry diseases (like bird flu);
b) animals that are attacking people;
c) animals that are used for food.
These types of experiences, which are also very important, we will study at some other time.

Please put an X in front of the answer you have chosen.
Thank you for your help!

1. Has your child ever hurt an animal on purpose?

No, never
 1-2 times
 3-6 times

- Mother may complete on her own, with assistance
- Ask mother to respond “according to the best of her knowledge”

ICU

ICU
(Parent Version)

Code Number: _____

Completed by: Mother

Date completed: _____

Instructions: Read each statement and decide how well it describes your child. Mark your answer by circling the appropriate number (0-3) for each statement.

	Not at all true	Somewhat true	Very true	Definitely True
1. Expresses his/her feelings openly.	0	1	2	3
2. Does not seem to know "right" from "wrong".	0	1	2	3
3. Is concerned about schoolwork.	0	1	2	3
4. Does not care who he/she hurts to get what he/she wants.	0	1	2	3
5. Feels bad or guilty when he/she has done something wrong.	0	1	2	3
6. Does not show emotions.	0	1	2	3
7. Does not care about being on time.	0	1	2	3
8. Is concerned about the feelings of others.	0	1	2	3

- **Purpose:** To learn about child's emotional characteristics
- ICU: Inventory Caring/Uncaring
- Mother may complete on her own, with assistance

GEM-PR

Please read each statement below and indicate the extent to which you agree or disagree. Mark your answers by placing a cross on the appropriate point on the line.

Example: If you somewhat agree with the statement, you would place a cross as indicated below.

Strongly disagree Strongly agree

-4 -3 -2 -1 0 +1 +2 +3 +4

6. My child doesn't understand why other people cry out of happiness.

Strongly disagree Strongly agree

-4 -3 -2 -1 0 +1 +2 +3 +4

- **Purpose:** To learn about your child's responses to others' emotions
- GEM: Griffith Empathy Measure
- Mother may complete on her own, with assistance. She may circle each number if that's clearer than placing an "X".

Break



- Brief breaks are permitted!
- But mother and child should not interact, discuss their participation, responses to questionnaires, etc.
- Before completing the mother's interview time, please review her responses to ensure they are complete (or mark "S" for Skipped or "N/A") and clearly marked

Overview of Child Assessments

- Eligibility Reminder:
Child participant must be aged 7-12 and Have had a pet within the last 12 months
- Begin with icebreaker, trust building, etc.
- Most child assessments must be done in an **interview** format. Please read the survey aloud, record the responses in the child's packet, and provide another copy for the child to follow along

COEP

30

CHILDREN'S OBSERVATION AND EXPERIENCE WITH THEIR PETS (COEP) Revised 2010
F.R. Ascione & C. Weber ©1995

Participant Code: _____

PETS IN THE HOME

1. Do you NOW have a pet animal or animals?
No ___ Yes ___
Kind(s) Dog ___ Cat ___ Bird ___
Other ___

- Survey must be administered in an **interview format**
- Interviewer should record child's responses verbatim (in child's own words). Clarify responses as needed
- Do not record names of persons or pets

CEDV

DO NOT WRITE YOUR NAME ON THIS PAPER.
ID # _____

CHILD EXPOSURE TO DOMESTIC VIOLENCE SCALE
(CEDV)

Original artwork by Lisa Piccolo. Artwork used with permission from the artist.

- Purpose: To learn about ways your mom's partner treats your mom
- Survey should be administered in an **interview format**
- Interviewer should read each item and record child's choices or responses
- Watch for first question on bottom of third page (page #36)

CEDV – Sample

1. How often do adults in your family disagree with one another?

Never Sometimes Often Almost Always

↓

Circle never, then go to the next question.

How did you know about it?

= I saw the outcome (like someone was hurt, something was broken, or the police came).

= I heard about it afterwards.

= I heard it while it was happening.

= I saw it from far away while it was happening.

= I saw it and was near while it was happening.

- **FIRST...** Circle 'Never,' 'Sometimes,' 'Often' or 'Almost Always'
- **THEN...** Check all the boxes/ways the child knew about it on the right (or skip to the next item if 'Never')

Attitudes and Behaviors toward Animals CAI-Revised (C)

Below, you will find a series of questions that are related to certain experiences you may have had with animals. One of these experiences could involve hurting animals on purpose or seeing someone else do this. But, remember we are not interested, for now, in your experiences with these animals:
a) insects (like mosquitoes and wasps) that bite or animals that carry diseases (like bird flu);
b) animals that are attacking people;
c) animals that are used for food.
 These types of experiences, which are also very important, we will study at some other time. Answer these questions in a clear and honest way. The questionnaire will not be graded. It is not important if you make spelling or grammatical mistakes. Answer the way you honestly think. Also, do not worry about describing facts or feelings that I or other adults might not like.

Please put an X in front of the answer you have chosen.
Thank you for your help!

1. Have you ever hurt an animal on purpose?
- No, never
- 1-2 times
- 3-6 times

- Must be administered in an **interview format**
- Record the child's responses verbatim (child's own words), but do not record individual names
- Tell child not to worry about describing facts or feelings that you or other adults might not like

Children's Treatment of Animals

Children's Treatment of Animals Questionnaire

Code Number: _____

Completed by: Child

Date completed: _____

Directions:
How often do you do the following things with your pet(s) or companion animal(s)?
For each statement below, please indicate whether you **never**, **sometimes**, or **often** do it.
Remember to mark the response that is most true for you. There are no right or wrong answers.
Please do not spend too much time on any one statement.

	Never	Sometimes	Often
1. Play With			
2. Give food or water to			
3. Take for a walk			
4. Pat			

- **Purpose:** To learn about things you do with your pets
- Child can complete. Interviewer should read instructions and each item aloud, then give the child time to record his/her choice

Lessons Learned

- Skipped or missing responses – always mark
- Open-ended responses – also mark options and probe to ensure question is answered
- Clearly circle one item – not in between items
- GEM-PR – mark a number on the line



Pets in Families Contact Items



SPACE for 18-month interview date



- '125' = \$125 for 18-month follow-up interview
- Website provides general information about pets and provides option for participants to privately contact CCADC
- Calls to the 877 number will go to Pets in Families voice mail at CCADV
- Tamara's direct Pets in Families number is 303-962-0937

Compensation



Participant – 1st Interview

- \$60 to mother (\$30 if not completed)
- \$15 to child participant (\$10 if not completed)
- \$75 total

Participant - 18-Month

- \$110 to mother (\$60 if not completed)
- \$15 to child participant (\$10 if not completed)
- \$125 total
- Receipt to be Signed by Mom

Adverse Event Report

Adverse Event Report

Date: _____

Participant Code: _____

Nature of the adverse event:

How was the adverse event addressed?

Participant(s) feedback on the appropriateness of and satisfaction with the manner in which the adverse event was addressed.

- Complete Adverse Event Report and contact Tina ASAP
 - E.g., Child cries and asks to terminate participation
 - Mother or child describes incident that suggests child maltreatment
 - Child “freezes” and does not respond to prompts, etc.
- Return in Completed Survey Packet, even if blank

Log Survey Completion

- After the mother/child interview is completed, log your activities via Survey Monkey at www.surveymonkey.com/s/ProjectConnections
- CCADV will then provide compensation to the agency

1.

* 1. The name of your organization:

* 2. Please enter the seven-digit survey code:

* 3. Please enter the date on which you completed the interview:

* 4. Please enter the number on the receipt signed by the participant acknowledging they received compensation.

* 5. What was the total amount of compensation provided to the participants? (This may be a portion of the full amount if not all assessments were completed.)

Copy and Return Contact Information

CONFIDENTIAL PARTICIPANT CONTACT INFORMATION

Keep in Project Confidential Lock Box at the Program. Copy only for CCADV. Assessments completed during initial screening period under the supervision and address of the University of Denver may NOT have access to this information. All of the following must only be contact information that the participant provides in 2015 for the assessment. Do not include contact info that participant has before or after assessment.

Participant Name	Survey Code
First Name (Last Name will not be used)	
Last Name	
Cell Phone	
Other Number	
Work e-mail address, if any	
Home mailing address, if any	

Consent information: To be used to determine whether or not to include the participant's contact information in the analysis of the participant about the study.

Source of Information (Date to use)
Phone records
Cell logs
Cell phone
Other

Source of Information (Date to use)

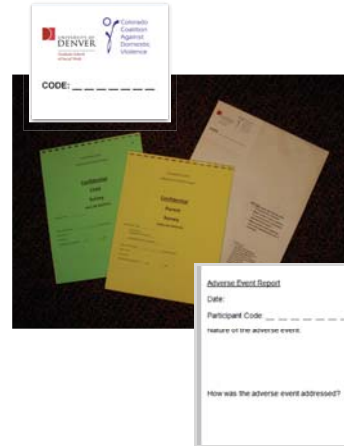
Phone records
Cell logs
Cell phone
Other

CCADV - Attention Beth
1120 Lincoln St., Ste 900
Denver, CO 80203

- Keep original secured in project lock box
- Send copy to CCADV in pre-addressed, stamped envelope (not with Assessment Packets)



Seal and Send Assessment Packets



- Checklist for Envelope:
- Code numbers match on envelope, assessments code record and log
- Consents signed and stored
- Assessments (both packets) completed & included
- Cash dispersed. Receipt signed & stored
- Future contact info completed & stored
- Adverse event report included

Scheduling UPS Pick-Up

- Survey administrator will schedule for UPS pick-up and delivery of **green** envelope with sealed survey packets - to be paid by CCADV
- 1-800-PICK-UPS (1-800-742-5877)
- <https://wwwapps.ups.com/pickup/schedule>
- If needed, contact Beth or Tina to arrange for pick up if UPS is not an option for your agency

6-Month and 12-Month Phone Calls

- Tamara at CCADV will notify you
- Purpose is to ask if still interested in project
- If yes, please update contact information
- Remind client of compensation (\$125 incentive) for 18-month interview
- Identify date of next contact



Follow-Up Contact Protocol

- Identify yourself as from Pets in Families Project
- Use *67 if phone is not already blocked
- Call the participant and then designated friends/relatives if needed
- Scripts available for voice mails, participant contact, and responses to questions
- CCADV will also send emails and postcards



Report Follow-Up Activity to CCADV

- Survey Administrator will use Survey Monkey to log follow-up contact activity
- www.surveymonkey.com/s/RYSLX8F
- Log after you have made contact with participant or have completed your attempts
- For assistance, contact Tamara



Scheduling 18-Month Interviews

- Begin attempting to schedule the follow-up interview prior to the 18-month timeline (Tamara will contact you)
- If mom has moved out of area, contact Research Team to determine next steps
- Expect to reschedule!



Parent Follow-Up Interviews

- Review Consent and Assent forms
- Re-administer all surveys and Pet Treatment interview
- Demographic includes info about mom, child, prior/abusive partner **and** current relationship
- If mom has a **current relationship**, administer **both** copies of the Relationship Behaviors survey

Child Follow-Up Interviews

- Review assent form and practice refusals/skips
- Re-administer all surveys and interviews, as conducted from the original survey packet
- If the Mom reported a **current relationship**, conduct the Child Exposure to DV (CEDV) Interview for **both** the Mom's Prior Partner and for her Current Partner

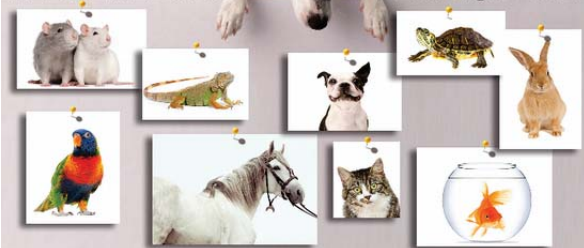


Contact Us



- Tina Hageman
 - Project Director
 - Tina.Hageman@du.edu
 - 303-871-4177
- Beth Collins
 - CCADV Liaison
 - ecollins@ccadv.org
 - 303-962-3321
- James Herbert Williams
 - Principal Investigator
 - James.Herbert@du.edu
 - 303-871-2203
- Tamara Greene
 - Research Assistant
 - tgreene@ccadv.org
 - 303-831-9632 x816 (CCADV)
 - 303-962-0937 (Pets in Families)

PETS IN FAMILIES PROJECT



Thank You!