

**A Discussion of Accounting for Culture in Supervised Visitation Practices:  
The City of Chicago, Illinois Demonstration Site Experience**

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# **A Discussion of Accounting for Culture in Supervised Visitation Practices**

## **The City of Chicago, Illinois Demonstration Site Experience**

*I'm not from this country; when you are going to assess me, you don't know me and where I come from and what I'm all about. How can you assess me and suggest things to me?*

*I brought sweets one day to thank [staff]. I told my [child], 'you can call him uncle.'*

*I thought I'd be going to a public aid office or an ER where you sit for 26 hours bleeding and no one cares ... but I felt that I was not another number to them.*

*If you don't respect the person, you're not going to do a good job, regardless of race.*

*What if I do not know how to read English, what if I do not know how to read? I want someone to explain the rules, all the form.*

*It is dangerous for some women if all resources and all of this help is revealed, left in the open air ... it has to be done culturally sensitive ... Remember that [women] have been treated like property; this is something we have been carrying since old times, and our grandmother suffered, our grandfathers did it. I do not know exactly what to do or how, but one has to be cautious about this. I have felt lost in all of this.*

*Respect . . . explain . . . listen*

- Mothers and fathers using supervised visitation and exchange -

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## *Summary and Recommendations*

As part of their participation as a demonstration site for the Safe Havens Supervised Visitation and Safe Exchange Program,<sup>1</sup> three Chicago visitation centers and their collaborative partner, the Mayor's Office on Domestic Violence, explored how the current design, processes, and procedures of visitation and exchange centers account for aspects of culture. The centers are programs of Apna Ghar, The Branch Family Institute (Branch), and Mujeres Latinas en Acción (Mujeres). Representatives from each center, the city office, and Praxis documented each center's efforts to account for their clients' cultural and economic backgrounds.

Using focus groups, interviews with parents and staff, observations, and group readings of redacted case files, we documented current center practices that account for the cultural differences of families coming to the centers and, in particular, that account for their experiences with race and class oppression.

We started the discussion with this question, selected by the Chicago demonstration site partners: How does culture play a role in serving families using supervised visitation? At one level, our question had a ready answer: of course "culture" plays a role in supervised visitation. Everything not of the natural world is cultural, constructed within a particular world view, language, values, and norms. There is no such thing as culturally neutral supervised visitation and exchange. Everything visitation centers do has cultural dimensions and impact. It is not a matter of saying that this intake is influenced by culture, but that exchange is not; or, this family has culture, while this family does not. It is a matter of understanding how to recognize the cultural dimensions and impacts of the ways in which centers are organized, and which culture influences the program.

Each of the Chicago centers is grounded in a larger organization that formed within a cultural-specific context and purpose. Each center serves families from multiple cultural backgrounds, although this is less true for Mujeres. The centers tweak, alter, and shape aspects of the prevailing model of supervised visitation in ways that recognize the different life experiences and cultural identities of the parents and children coming through their doors. At the same time, the procedures, policies, forms, and documentation look much like that of most supervised visitation and exchange centers throughout the country. We found that the prevailing model of organizing visitation services is so pervasive and familiar that it is difficult for someone in the day-to-day practice of a visitation center to imagine alternatives.<sup>2</sup> We were not able, for example, to get very far in articulating what it would look like if we had to come up with a way for one parent who was battering another to spend time with his children in a way that was safe for everyone, but without using a center, in the generic space and shape that we know. Different

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<sup>1</sup> The Safe Havens: Supervised Visitation and Safe Exchange Grant Program, established by the Violence Against Women Act of 2000, provides an opportunity for communities to support supervised visitation and safe exchange of children, by and between parents, in situations involving domestic violence, child abuse, sexual assault, or stalking. The four Demonstration Sites – in Chicago, Michigan (Pontiac, Jackson, Traverse City, and Muskegon), California (San Mateo, Santa Clara, and Santa Cruz Counties), and Washington (City of Kent) – have paid close attention to visitation and exchange in the context of domestic violence, and to collaboration between visitation centers, domestic violence advocacy organizations, and the courts.

<sup>2</sup> "We" in this paper is the collective we: the Chicago centers, project directors, and the Praxis technical assistance partners.

cultures might have entirely different ways of being safe and ensuring safety. Articulating what those different ways and ideas might be is one of the next steps in the continuing discussion. We put that project aside for another day and decided to focus on what was occurring in the centers.

We found numerous examples of “cultural humility” in action, however, and used the concept to frame much of our discussion. The notion of cultural humility was not a product of our inquiry, but a framework that resonated with the Chicago centers in exploring center practices and cultural differences.<sup>3</sup> Cultural humility “incorporates a lifelong commitment to self-evaluation and self-critique” and “advocacy partnerships with communities,” as “reflective practitioners” and with “self-reflection and self-critique at the institutional level.” Cultural humility “involves the curiosity and motivation to understand the web of meaning in which children and families live, and the reflective capacity to examine our own cultural values and assumptions. It requires a commitment to appreciating similarities and differences between our own culturally shaped goals and priorities and those of the children and families we care for. It requires as well an obligation to ‘rein in’ [our] power and authority . . . so that the voices of children and family members can be fully valued and heard.” (Browning, 2004)

Each of the centers has a keen awareness of people’s everyday experiences with oppression. Center staff describe their role as facilitating the process of visitation in ways that maximize safety for battered parents and their children, while minimizing the center becoming just another obstacle for families.

*Often I ask myself, and so does the staff ask: What are my biases? What is it about this culture we live in that makes things difficult for a family? What do I think of this culture? We individually acknowledge that we do not know all answers, thus we have to ask, when we do not know, and this only helps us to help the families. We are willing to learn, willing to accept feedback. It is [crucial] to ask and never to assume.*

– Visitation center director

*We don’t want to become one more of the oppressors.* – Visitation center staff

Our experience exploring aspects of culture in supervised visitation led us to the following recommendations, offered as a guide to centers in thinking about how to build cultural humility into their organization and practice. We want to emphasize that this is only the beginning of a much larger, ongoing discussion of culturally responsive visitation practices.

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<sup>3</sup> Melanie Tervalon and Jann Murray-García, *Cultural Humility Versus Cultural Competence: A Critical Distinction in Defining Physician Training Outcomes in Multicultural Education*, Journal of Health Care for the Poor and Underserved, 9:2, 117-125, 1998. For Tervalon and Murray-García the qualities of cultural “humility” include respect, dialogue, awareness, and reflection. While their article centers on health care, the Chicago centers found that the authors’ discussion of cultural humility resonated with how the centers’ approach their work.

## Building Cultural Humility in Supervised Visitation and Exchange

1. Practice ongoing study, self-reflection, and self-critique, both institutionally and individually.
2. Ground your work in historical context and understand how people and their cultural beliefs as well as behaviors have been excluded, silenced, denied, marginalized, and oppressed.
3. Design deliberately, in the staff, building, access, and décor; from the pictures on the walls to the greeting at the door.
4. Examine every form, policy, procedure, brochure, and directive and question its cultural framework, assumptions, and language, and identify which culture it privileges.
5. Learn about the communities you are and will be serving; make connections, find teachers, and teach yourself.
6. Include the communities you are and will be serving; provide a place *at the table*, via inclusion as staff, board members, trainers, and consultants.
7. Form and maintain advocacy partnerships; involve communities in crafting and defining policies, not just commenting.
8. Never ask a single individual, a single voice, to represent all of any community.
9. Provide services in a person's *first voice*, in their home language.
10. Learn and practice respectful listening and genuine dialogue.
11. Support families' cultural traditions.
12. To be discovered . . . We are not presenting our experience in Chicago as the final or only word on building culturally responsive supervised visitation and exchange. Ongoing work in Chicago and other communities – the “lifelong commitment to self-evaluation and self-critique,” – will lead to ideas and approaches that we have yet to discover.

But **how** to do this? None of these facets of cultural humility stand alone. They are intertwined and interdependent. There is no single formula, recipe, or seminar to follow. There is no single set of specific, finite tasks and skills that can be mastered. The *how* is a way of thinking about things that leads to concrete changes in a center's mission, design, and daily practice.

We are all cultural beings, familiar with our own behavior, art, beliefs, language, institutions, and other aspects of culture. The concept of cultural humility requires that we step out of this familiarity; it requires a commitment to reflection and questioning, on an institutional level as well as individuals.

For example, it is critical that European Americans working in supervised visitation understand and recognize their own cultural practices. As the dominant social group, its culture is so familiar to its members that it is largely invisible. Thinking about the work of the visitation center with recognition of the dominant culture in view, however, will lead to identifying ways in which European American ways of thinking, being, and acting have been imposed on center relationships and practices, such as concepts of parenting, ways of communicating, the definition of family, and the very concept of supervised visitation. (Duluth Family Visitation Center, 2004) This kind of reflection and critique cannot occur in isolation. It requires the genuine participation of and consultation with the communities in and near which the center is located, and careful listening.

We offer several ideas for cultural humility in action, drawing on the experience of the Chicago centers and our related discussions.

✓ **Define a clear identity that is separate from the court.**

For many families, civil and criminal court intervention has been characterized by disrespect, confusion, and a gross lack of information about the process and what is expected of them. Many immigrant families are far away from understanding the judicial system in their country of origin and even more so here, where the language and system itself are very different.

✓ **Structure adequate time and flexibility into all interactions with children and parents.**

Time and flexibility are essential in order to build trust and relationships, understand what has happened in someone's life, and explain supervised visitation or exchange and the center's procedures in a way that makes any sense to parents, particularly when the concept is entirely beyond their experience. For example: set aside ninety minutes for an intake appointment; expand the customary fifteen-minute parent arrival and departure windows to allow for bus transportation and getting several children in and out of jackets and car seats.

✓ **Invite diverse community organizations to walk through the center's space and procedures and provide a critique.**

Ask them to arrive at the center, complete an intake, and walk through the space as if they were a parent who would be using the center. Welcome their insights and recommendations about how to make the center and visitation a more culturally respectful experience. Does the center feel welcoming, a place where they can interact with their children freely, joyfully, and safely?

✓ **Prepare center staff to work with battering parents.**

A visitation center cannot demonize fathers or structure its work around fear of batterers.

To connect with them from a basis of respect does not mean abandoning battered mothers and their children, or ignoring the ways in which children might be used as a tactic of battering. The Chicago centers are not naïve about the very real danger that some battering parents can pose. They attempt to avoid lumping every visiting or non-custodial parent into a single category, however.

- ✓ **Use staff meetings, ad hoc work groups, community members, and parents to help examine every aspect of the center’s design and the implied and explicit messages about who is welcome and how they are valued.**

For the Chicago centers, non-threatening locations (alongside health care offices, a bank building, and community center) are important in conveying respect, along with careful consideration of the placement and use of such security measures as uniformed guards and metal detectors. Formality in how people are addressed is also part of how the centers welcome people and show respect, such as using Mr., Mrs., Miss, or Ms, or Usted, Señor or Señora.

When there is a gap between the center staff’s background and that of the parents using the center, invite community members to help review the center’s location, space, furnishings, magazines, art work, intake appointments, and visitation and exchange procedures. Invite parents to help inform understanding of the center’s design and impact, via focus groups, questionnaires, or other avenues.

- ✓ **Prepare staff to support parents and children to lead with the language of their choice.**

Siblings discussing their homework together may want to use English, for example, but this requires that center staff help their parent understand the conversation.

- ✓ **Provide opportunities for extended family to be involved.**

As the Chicago centers have experienced, this can occur within the context of safety for a battered parent and her children, and any restrictions in court orders or sexual abuse issues. In consultation with and approval from the custodial parents, visiting parents have brought other family members to celebrate a birthday or join them for the visit. “Family” for some parents and children includes a wide circle of relatives, close friends, and godparents.

- ✓ **Hold an all-center gathering to help bridge cultures and contribute to an atmosphere of warmth and respect for families.**

Again, this occurs within the context of safety, the specifics of court orders, and availability of adequate supervision. One center, for example, has an annual dinner the week of Thanksgiving, with visiting parents, children, and other family members in one area (with several staff members) and custodial parents in another.



✓ **Support families' food, music, and religious traditions.**

Provide space for sharing meals and moving about, including dancing and sports. Work with parents to accommodate families' faith observances, such as time for prayer, accepted foods, holidays, and rituals. It can be challenging, particularly in accounting for how these aspects of culture can be used as tactics of battering, or where there parents differ in traditions or in interpretation of tradition.

✓ **Build processes for expanding the center's understanding of families' experiences with the courts, police, Social Security, welfare, medical, psychology, and other intervening institutions, both individually and historically.**

African-American parents, for example, as several of the Chicago discussion participants emphasized, walk through the door with their whole lives, which includes their community's history with institutional racism, and well as their individual day-to-day encounters. A center that has been built with that cultural experience at its core takes care in how it appears to and works with parents. Because parents are so often under scrutiny in their everyday lives and routines, as staff members themselves have experienced, staff minimize taking notes during a supervised visit. They intervene if appropriate or necessary, but complete their notes after the parents and children have left. Where centers do not have a shared culture with parents and children, they must take extra care to become aware of their individual and community histories. For example, it is easy for a person to believe that institutional racism does not exist if they have not experienced it.

The exploration is just beginning. Culture always plays a role; there is no visitation center or service that is culturally neutral. How can we make supervised visitation and exchange an experience with minimal barriers? How can we make supervised visitation welcoming, respectful, and aware of the lives of everyone who comes through the door? How might the idea of safe visitation and exchange look without the physical space of a center? How can we facilitate families' cultural identities, as well as accommodate them? The Chicago Safe Havens centers will continue asking these questions of their work, recognizing that there is no single answer, no one-dimensional response. The next question might be: How would protective or monitored contact between a child and a parent look for different cultures, if they could figure it out from the ground up?

## ***Background***

As part of their participation as a demonstration site for the Safe Havens Supervised Visitation and Safe Exchange Program,<sup>4</sup> three Chicago visitation centers and their collaborative partner, the Mayor's Office on Domestic Violence, used methods of institutional ethnography to explore how the design, processes, and procedures of visitation and exchange account for aspects of culture.<sup>5</sup> The centers are programs of Apna Ghar, The Branch Family Institute, and Mujeres Latinas en Acción.

A Safety Audit typically looks for problems, for gaps between what people experience and need and what institutions provide. It seeks to make visible what 'we don't know we don't know,' and articulate the necessary change. The goal is to redesign the institutional response to more closely fit the person's needs. The Chicago discussion used some of the tools of the audit – interviews, observations, and case file review – but it did not produce recommendations for restructuring the prevailing model of supervised visitation. The work focused on documenting current center practices that account for the cultural differences of families coming in to the centers and, in particular, that account for their experiences with race and class oppression.

The demonstration site assembled a local group, comprised of two representatives from each center and the city office, to work with Praxis to undertake the discussion. Between August 2003 and February 2005, different members of the group visited the centers, conducted focus groups with parents, and interviewed visitation center staff. We met together to watch videotaped intake appointments and visits, and read several case files from each center.

With just under three million people, Chicago is the third largest city in the country. As reported in the 2000 Census, 21.7% of its residents were foreign born and 35.5% speak a language other than English at home. In recognition of this diversity, voting information has been translated into the top fifteen languages (other than English) spoken in the homes of Chicago public school students.<sup>6</sup> It has 77 city-defined neighborhoods, or 222 by the Chicago Historical Society's count, and over 3,000 places of worship. As part of "The Great Migration" in the first half of the

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<sup>4</sup> The Safe Havens: Supervised Visitation and Safe Exchange Grant Program, established by the Violence Against Women Act of 2000, provides an opportunity for communities to support supervised visitation and safe exchange of children, by and between parents, in situations involving domestic violence, child abuse, sexual assault, and/or stalking. The four Demonstration Sites – in Chicago, Michigan (Pontiac, Jackson, Traverse City, and Muskegon), California (San Mateo, Santa Clara, and Santa Cruz Counties), and Washington (City of Kent) – have paid close attention to visitation and exchange in the context of domestic violence, and to collaboration between visitation centers, domestic violence advocacy organizations, and the courts.

<sup>5</sup> Institutional ethnography is a field of study developed by Canadian sociologist Dorothy E. Smith to explore and analyze institutional organization from the standpoint of the everyday world – for example, from the standpoint of a woman who has been abused. It is concerned with the ways in which everyday experiences are shaped by and taken up by the sequences of actions within and across institutions. It seeks to discover the gaps between what people experience and need, and how institutions respond. Institutional ethnography does not look at individual workers, but at how they are organized and coordinated to act and produce certain outcomes. Ethnographers interview practitioners, observe different processes, and analyze the documents or text that shape and carry institutional authority and action. Praxis International has adapted these methods as a way to examine institutional responses to domestic violence.

<sup>6</sup> These are Spanish, Polish, Serbian, Croatian, Bosnian, Urdu, Cantonese, Arabic, Vietnamese, Assyrian, Russian, Romanian, Tagalog, and Gujarati. Source: Chicago Board of Election Commissioners, 2002.

20<sup>th</sup> century, hundreds of thousands of African-Americans settled in Chicago, building the base for one of the country's strongest African-American communities, and nearly 37% of the city's current population. In the last census, 26% identified themselves as Hispanic or Latino, and Chicago is the second largest Polish city in the world, outside of Warsaw.

In 1992, nearly all of the net growth in the Chicago metropolitan area labor force was due to immigration, with the leading countries including Mexico (582,028 persons), Poland (137,670), and India (76,931). Approximately two-thirds of the metro population growth between 1990 and 2000 may be attributed to immigration, which has been a significant factor in Cook County, which includes Chicago. Immigrants come with extraordinary diversity of experience, tradition, education, literacy, English proficiency, and income. For example, poverty rates range from 23.1% among those coming primarily as refugees from Bosnia and Herzegovina to 2.2% for Filipino immigrants. Most new residents from India (65.8%) have a college degree, in contrast to only 4.3% of those from Mexico, (Paral & Norkewicz, 2003).

The Chicago region is not adding new housing where it is adding new jobs. While nearly a third of renters pay more than 35% of their income for housing, 20% pay more than half. Since 1995, 16,068 units of public housing in Chicago have been demolished and only 1,296 units created; only 10% of the affordable housing need is currently met. In 2003, domestic violence was the immediate cause of homelessness for 22% of women in Chicago homeless shelters. 56% of women in homeless shelters reported that they had been victims of domestic violence. Chicago has only 154 domestic violence shelter beds. Almost 45% of homeless residents of Chicago are families with children. (Coalition for the Homeless, 2004-05). According to the 2000 Census, nearly 17% of Chicago families live below the official poverty level. For female householders with children under eighteen years, over 40% live below the set poverty level; even a higher percentage are in this predicament when children are under five.

This dip into the multiple backgrounds and experiences of Chicago's communities captures only a fragment of the complexity of this big, diverse city. It provides a sense, however, of aspects of the lives of those who might walk through the visitation centers' doors. It is a first step in exploring our question.

## ***The Centers***

Each of the three Chicago visitation and exchange centers is located within a larger organization that was founded with a specific cultural identity. They brought this experience to the Safe Havens demonstration site, although visitation and exchange services have developed largely along the outlines of the prevailing national model.

### **Apna Ghar**

Apna Ghar (Our Home) "was originally founded to meet the expressed need for appropriate cultural social services for women and children victim of domestic violence who came from the

Asian Subcontinent countries of India, Pakistan, Nepal, Bangladesh, Bhutan and Sri Lanka.”<sup>7</sup> It sought to provide a place where women and children could find help in ways that acknowledged their languages, dress, foods, religions, family structures, and values. Fifteen years later it provides a range of support services to victims of domestic violence, including a crisis line, shelter, counseling, translation, legal advocacy, housing and employment assistance, and supervised child visitation. Apna Ghar is located in the top ‘port of entry’ for new immigrants to Chicago. Over 43% of the population in Apna Ghar’s zip code area speaks a language other than English at home.

### **The Branch Family Institute**

The Branch Family Institute (Branch) grew from E.M. Branch & Associates, Inc., a clinical practice “established in order to provide culturally-relevant services to individuals, families, and communities impacted by the injustices of poverty and racism . . . [using] a strength-based approach in order to empower individuals and communities to overcome oppression.”<sup>8</sup> It has worked primarily within Chicago-area African-American communities. The non-profit institute was founded to expand individual, family, and group counseling services to low-income families. It’s “mission is to strengthen families and communities by providing quality, culturally-relevant services to underserved populations.”

### **Mujeres Latinas en Acción**

Mujeres Latinas en Acción (Mujeres) is located in the Pilsen area, one of the largest Mexican communities in the United States. Its mission as a “bilingual/bicultural agency” is “to empower women, their families and youth to become self-reliant and able to take full advantage of available opportunities, and create new opportunities to improve the quality of their lives.”<sup>9</sup> Over the past thirty years it has developed support for victims of domestic violence and sexual assault, including crisis intervention, a 24-hour crisis line, counseling, legal advocacy, and housing assistance. It also provides free child care for parents using the agency’s services. It offers a Latina Leadership Program, Parent Support Program, links with mental health services, tutoring, life skills support, and recreation for youth. The Project Sanctuary provides bilingual and bicultural staff for supervised child visitation and exchange.

Each center is grounded in a parent agency with a culture-specific perspective. The reality of providing supervised visitation and exchange, however, has been that each center serves families from multiple ethnic and cultural backgrounds, although this is less true for Mujeres than for the other two centers. Parents in the focus groups stressed the significance of minimizing travel time in a congested urban setting, whether via public transportation or private vehicle. The distance between Apna Ghar and Branch, for example, is twenty-two miles.

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<sup>7</sup> *Our History*, [www.apnaghar.org](http://www.apnaghar.org).

<sup>8</sup> *About Us*, [www.embranch.org](http://www.embranch.org).

<sup>9</sup> *Mission Statement*, [www.mujereslatinasenaccion.org](http://www.mujereslatinasenaccion.org).

## *The question*

We started with this question, selected by the Chicago demonstration site partners:

How does culture play a role in serving families using supervised visitation?

What do we mean by *culture*? It is easy to equate culture with race or ethnicity, and stop there; or, to see it as a set of fixed, stable patterns of belief and behavior. *Culture* is the complex, symbolic frame of reference shared by a group of people. It takes in the totality of worldview, behavior patterns, art, beliefs, language, institutions, and other products of human work and thought. Its many aspects are dynamic, diverse, and often misperceived by those inside and outside the group. It is contradictory, carrying values that can be both oppressive and nurturing at the same time. Culture develops and continues to evolve in relation to changing social and political contexts, based on race, ethnicity, national origin, sexuality, gender, religion, age, class, disability status, immigration status, education, geography, special interests, and time. A person's cultural identity is multi-faceted, with elements that are clear, ambiguous, changing, and sometimes contradictory. A person can claim multiple cultural locations and intersections. For example, "a person might identify as Italian and not speak a word of Italian; a person who grew up working class might now identify as a white-collar professional; a biracial person might identify with both heritages; or, a gay or lesbian might identify with an organized religion that does not accept homosexuality" (Warrier, 2005). We cannot, in other words, box someone into an either/or category without denying their cultural identity.

We took on a big question, and along the way wondered if the wording was exactly what it should be. Might a better choice, for example, have been to ask how our visitation centers are accounting for, adapting to, recognizing, or respecting the cultural identities of those using the centers? Or, how do families of different cultural identities experience supervised visitation and exchange?

Of course "culture" plays a role in supervised visitation and exchange. Everything not of the natural world is cultural, constructed within a particular world view, language, values, and norms. There is no such thing as culturally neutral supervised visitation. Everything visitation centers do has cultural dimensions and impact. It is not a matter of saying that this intake is influenced by culture, but this exchange is not; or, this family has culture, while this family does not. It is a matter of understanding how to recognize the cultural dimensions and impacts of the ways in which centers are organized, and which culture influences the program. Does this practice draw in or exclude people of particular cultures? How are people of different cultures heard? How do visitation centers recognize and account for people's experiences living with oppression? What are the cultural assumptions standing behind the design of observation notes, notions of parenting, and what and how information is reported back to the court?

## *The focus groups: learning from mothers and fathers*

Twenty-five parents contributed their experiences and insights to Chicago’s exploration of the role of culture in supervised visitation. Each center recruited participants for one focus group with custodial parents and one with non-custodial parents.

Group	Chicago Focus Groups – July 14-28, 2004		
	Custodial Parents		Non-Custodial Parents
#1	4 mothers	#4	4 fathers
#2	4 mothers	#5	1 father*
#3	3 mothers, 2 fathers	#6	6 fathers, 1 mother
Total	13		12
	* 1 father cancelled and 1 did not show up		

The participants were eager to contribute, had a lot to say, and left us with sixty-one pages of notes. Each group had its own character, and reflected the distinct experiences of the individuals who participated. We heard different themes at each center, plus some common concerns, as summarized below.<sup>10</sup>

In the spirit of reflection, critique, and challenge to our own assumptions, we also learned more about designing focus groups to account for cultural identity. This is in the category of ‘things we knew at one level, but now understand more completely,’ and will pay more careful attention to in ongoing work.

We heard many variations of this statement: *As long as I can see my kid, it doesn’t matter to me. They could be purple or a Martian as long as I can see my kid, that’s all I want;* and, *My concern was quality of care; it didn’t matter to me what color.*<sup>11</sup> But, was this entirely accurate? Did it make a difference that the facilitator in four of the groups was someone outside the participants’ racial and/or cultural identity and experience? Those answering the questions may have been more inclined to say ‘it doesn’t matter,’ when in fact it matters very much, but they don’t feel free to say so in that particular setting. We do not really know how accurate the statement is, because as often happens, our approach was influenced by time constraints and who was available when. We should have done more to match the facilitators with the groups, in order to more fully explore and understand these viewpoints.

We learned more when facilitators and note takers were bilingual and bicultural, particularly about the use of language, the significance of certain words, and considerations of age and experience. For example, the mothers in the Spanish-speaking focus group rarely used the word supervision (*supervisando*), but used words like vigilant and watched (*visitas de vigilancia*, *participar en las visitas*) – *my children had to be watched when they visit with their father*. The

<sup>10</sup> A cautionary note about focus group findings: while they provide much information, they do not tell us everything. How much of the picture we get depends upon who is in front of us. With these focus groups we have learned about the experiences of twenty-five mothers and fathers using three visitation centers, and raised common and distinctive themes that deserve further exploration and discussion.

<sup>11</sup> Throughout this report, quotes from individual and focus group interviews appear in *italics*.

fathers used the word *supervisores*, but never used the word *monitores*. Here is the significance of this use of language, as explained by the note taker.

*Culturally speaking, just the term supervisors connotes a different meaning, one of superiority in the sense that one is there to provide oversight, yes, but more than that in Spanish: as a ruler, as a dictator ... What other terms would create a more sensitive place as far as the spoken word? What happens with all the institutions that serve clients of other cultures is that terms are translated literally without really thinking about the cultural piece, the impact, the effects ... The word SUPERVISORES is so strong in Spanish, especially if you are from a lower economic background and not much education, and a culture where you are always obedient to superiors. This might already change how [fathers] will view the monitors before they know them.*

We attempted to structure the discussions by asking about how parents experienced the visitation center (Appendix B). What were their first impressions? What was confusing? What made them comfortable or uncomfortable? How would they design it if they were in charge? The weave of cultural identities in any one person does not fit neatly into a few direct questions, however. Nor do the words themselves – i.e., culture, ethnicity – have a universal meaning. We did not always succeed in accounting for this complexity, in part because we were unable to bring all of the facilitators together at one time to review the goals and approach for the focus groups. The Mujeres mothers' group, for example, started with very direct questions about 'where do you live' and 'what is your ethnic group?' The note taker made this observation: *These questions are too raw, and the women here did not understand 'etnico' ... the language in this way made it hard to communicate or get to what we wanted to get to.*

### ***Summary of focus group findings and themes***

1. Parents across the three groups expressed appreciation that the centers existed to help them with a difficult time in their lives and their children's lives. There were many qualities that clearly met specific needs that parents expressed as being important to their cultural identity: common language, atmosphere of respect, familiar faces and accents, and a shared history or shared immigrants' experience.
2. A sense of warmth and familiarity in the visitation center's appearance and atmosphere were important to many parents, particularly to those who were immigrants and whose first language was not English. One center was in temporary quarters in a community center that was once a school. Visiting fathers found the atmosphere *a bit cold, and has a sense of being an institution . . . is cold, there is no motivation to do fun things . . . sometimes the place seems like a jail, like in a box, like behind bars*. Mothers who had to wait at this center because they had children under five or who traveled via bus and had nowhere else to go during the visit offered suggestions on how to increase the sense of 'home': *a waiting room for women, with magazines, with information on jobs, classes ... someone teaching us English, someone to help us ... a cafeteria ... a TV, a kitchen, and maybe a coffee maker or a sandwich machine in the room where we wait.*

3. At one center, mothers felt that the requirement that they stay on site to take care of younger children's toileting needs (a common practice in visitation centers) enabled the fathers' lack of responsibility for children, enabling him *to continue with his machismo*. Where there was no sexual abuse involved, they felt that the father should have this responsibility: *he thinks 'oh, she can do it, she is the mother, and she is the woman'.* And, *I see this as machismo and it is being enabled here: the fact that during this time he is responsible for the children, so he has to take care of them. Why do I have to sit here the whole time?*
4. Mothers and fathers in all of the groups had concerns about the center rules, but in different ways. Mothers wanted to know that safety-related rules are enforced; it helped alleviate their fears and reassured them. This was particularly important to mothers who were fearful that they would be harmed or their children might be abducted. *I know that the center's staff will enforce the rules and that makes me feel safe . . . They do not allow him to make enquiries about my whereabouts . . . [Staff] reassures my child that nothing will happen and my child trusts that . . . she would wait for us at the door, she offered this to me . . . they explained that I would not see or meet him . . . if he ever came at the same time they would be there and take him away . . . I am thankful my [child] is safe and someone is watching him.*

Fathers felt the rules interfered with their authority and status as fathers: *I have a chip on my shoulder that someone has the right to tell you that you have to be watched with your children . . . The system is already set up for the women, so it doesn't matter what I say anyway. And, it's like giving birth automatically makes you The Parent!* The rules were *too rigid or strict: we cannot love our children openly*, was how one put it. For another, *I should be allowed to [talk to them] in the way I know parenting works best for us as a family and in the circumstances we have here . . . I am the parent, I know how to do it.* There was considerable discussion among the visiting fathers that *the court gives women preference.*

5. The focus groups raised questions about the notions of parenting that shape the work of most visitation centers nationwide and ways in which parents interact with children that may reflect different cultural dimensions. If the expectation, the structure of the visit, is that children will be 'doing something,' and the monitor will write down what they do, if a parent and child sit quietly together, would that be a 'bad' visit? One father expressed being caught between expectations for certain behavior as a parent, such as comforting a crying child, and lacking the knowledge and experience as a parent: *One does not know how to parent.* He was looking for more guidance and support on how to parent
6. One group of immigrant mothers felt caught up in a legal system that does not advocate on their behalf, nor appreciate the significance of their role as a mother. From this standpoint, visitation itself doesn't make sense. If the court system understood this view it would not order supervised visitation in the first place. For these mothers, visitation reinforces a feeling that the center is not there to support them. *[The fathers] could be nice for an hour, that's not so hard, and then they come out looking all good. They don't know how to raise children . . . No one other than the mother can actually take care of*



*children selflessly . . . Yes, we're the mothers. We're the ones that know how to take care of children. They don't know! . . . That's why the child should always be with her mother, no matter how bad the father wants to see his child. It did not make sense to them that the court would order visitation/exchange when the fathers did not spend time with their children, but left them in the care of other family members: Even with the visitation, he doesn't stay in the house; his sisters take care of her*

7. Mothers who were immigrants spoke about their experiences in their countries of origin and how that influences their lives here, particularly in the isolation that cultural practices reinforced and expectations for them as women. *I was so timid. I never used to talk at all. I was so scared; that's the way I was brought up . . . His whole family is here: his brothers, parents, uncles . . . In my country sometimes the [son's] mother beats the daughter so I'm scared . . . I was 14 years old when I came here; it was an arranged marriage . . . parents always want girls to be quiet. If the girls look bad, the community feels they look bad . . . one has to obey them [men], when one does not obey them that is a problem . . . He did not allow me to go out, to step out of the house. I had no contact with anyone.*
8. To a person, participants in one focus group spoke of the visitation center as *professional* and the importance of that, whether as a visiting parent or a custodial parent. By professional they meant many things, but primarily a deep sense of respect for them, in contrast to their community's historical experience. Professional meant: *Pleasant on the telephone . . . Not dismissed; they were interested in my individual situation . . . They talk to you, they listen to you . . . Takes time to talk when I need to, doesn't rush on . . . A way of being professional is to respect my time . . . The people here love what they're doing . . . They seem to care about what they're doing . . . They treated me with respect. They were on time.*
9. For parents at one visitation center, it was not only that the center had a cultural-specific identity, but it was the combination of location, knowledge, *professionalism*, and that identity that was important to these parents. For custodial parents, this contributed to their sense of safety and trust. One father said: *I was very concerned that someone could pick up cue words that she might be violent, like 'I'm going to buff the floors.' To someone else, that means nothing, but it means something to me [and my children]...It's the cultural thing. She made a statement but you may not catch it.*<sup>12</sup> A mother: *After I came I was glad [the staff is the same culture]. My [child's] father has substance abuse, but here they could pick up on things faster; phrases, certain expressions. And as another put it, they can say 'I've had that problem, too.' It's more comfortable; the trust was there ...[They] can relate more to the problems that were going on.*
10. While we did not ask parents about why they were using the center, not a single non-custodial parent (11 fathers, 1 mother) volunteered any information or gave any indication that they had ever been violent, threatening, or had done anything to warrant supervised visitation. In contrast, all of the custodial mothers expressed fear for

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<sup>12</sup> The significance of the expression to him was that it might not have the same meaning to someone outside his culture. In his context it carried a threat of violence, similar to 'I'm going to wipe the floor with you.'

themselves and their children, particularly around abduction and the move from supervised to unsupervised visitation.

11. Several collateral issues crossed all focus groups: widespread confusion about court processes; lack of accessible, competent legal advocacy and representation; custodial parents' sense of unfairness at being ordered to produce their children for visitation; visiting parents' outrage that anyone would watch their interactions with their children; a lack of information and clarity about various visitation processes; the intrusive nature of note taking during visits; a lack of communication back to custodial parents about the visits; and, the lack of flexibility in accounting for the realities of mass transit, urban traffic, and multiple children in getting to the center within a narrow window of time.
12. Participants had many suggestions about what they would include if they could design a visitation center from the ground up, beginning with the recommendation to design the center *according to each situation, each circumstance*. (Appendix A)

The focus groups made clear that we have a lot more listening and talking to do in order to understand what supervised visitation centers can do to best provide safe, culturally respectful visitation and exchange services to the broadest range of families in their communities. For example, what is cultural awareness in relationship to the tactics of battering, use of children, and a battered mother's safety? Where, how, and who should challenge a cultural framework that reinforces battering? Does a visitation center practice draw in or exclude people? How are people heard? What are the cultural assumptions standing behind the design of observation notes, notions of parenting, and what and how information is reported back to the court?

### ***Exploring 'cultural humility'***

The organization of the Chicago centers – the procedures, policies, forms, and documentation – looks much like that of most supervised visitation and exchange centers throughout the country. (See later discussion.) At the same time, they tweak, alter, and shape aspects of the predominant model in ways that recognize the different life experiences and cultural identities of the parents and children walking through the door. Each center is grounded in a larger organization that formed within a culturally-specific context and purpose. Each center acknowledges people's everyday experiences with oppression. They are aware of not wanting to contribute to that oppression in how they interact with those who come through their doors.

We found numerous examples of 'cultural humility' (Tervalon & Murray-García, 1998) in action, particularly in our direct conversations with center staff. The notion of cultural humility "incorporates a lifelong commitment to self-evaluation and self-critique" and "advocacy partnerships with communities." It is distinct from cultural competence, which suggests a set of specific, finite tasks and skills that can be mastered via a course of instruction. As it has developed in business, academic, and social service settings, cultural competence too often presents culture as a de-contextualized set of traits, inadvertently reinforcing stereotypes via laundry-lists of characteristics, such as 'Asians believe . . . or African-Americans are . . . or

Latinos communicate by . . . ’<sup>13</sup> The frame of cultural humility in no way discounts the value of knowing as much as possible about the communities which a visitation center serves, but it shifts away from mastery of a fixed set of “facts” about various cultural groups to “curiosity and motivation to understand the web of meaning in which children and families live, and the reflective capacity to examine our own cultural values and assumptions” (Browning, 2004).

In a roundtable discussion with one center we talked about how the staff facilitates the process of visitation with families who have had and continue to have many struggles in their lives, domestic violence among them, without making the visits unsafe or making the center another place where families find more obstacles in their lives. The director provided the following example:

*Often I ask myself, and so does the staff ask: What are my biases? What is it about this culture we live in that makes things difficult for a family? What do I think of this culture? We individually acknowledge that we do not know all answers, thus we have to ask, when we do not know, and this only helps us to help the families. We are willing to learn, willing to accept feedback. It is [crucial] to ask and never to assume.*

Someone described this exchange, observed while sitting in the center’s waiting room, as an example of working with the everyday reality of multiple languages where there is no interpreter readily available. It concerns a conversation between a Syrian mother, waiting for her children to return from a supervised exchange, and the monitor, who was from outside the United States.

The monitor greeted the parent and knelt down because the mother was sitting on the couch in the waiting room. She began to speak with the mother after she had given the children some toys to play with across the room, and far enough from me so that the client felt more privacy in the small room. In a calm, low voice, the monitor began to explain about the next visit, the time, and related details. I had arrived earlier and had tried to begin a conversation with the parent, so I knew that she spoke hardly any word of English. I could see that after a while the monitor is making hand signals, for Saturday and then for the time of the visit, and repeating slowly the time and place a few times over. The monitor asked the mother if she had understood, to which mother clearly answered with a confused look and a head shake, “No, 5:00 father, next time?” The monitor kindly explained again and again what time and day the next visit would be, until she was certain the mother understood.

Certainly having a monitor who spoke this mother’s language would have been less confusing and made for a quicker discussion. In this instance, the monitor was working with the reality of the situation, and drawing on her own experience as an immigrant who speaks one language, but needs to understand some important piece of information in another. Because of that experience

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<sup>13</sup> Much of the emphasis on cultural competency has also tended to omit examination of the dominant culture, as if only those who have been defined by the dominant culture as “other” have culture. It is critical that Western European Americans, in particular, “whose culture is the dominant culture of our society, understand and recognize their own cultural practices. Failure to do so renders that culture invisible to them and creates the basis for the cultural imposition of European American ways of thinking, being, and acting.” Duluth Family Visitation Center, 2004, p.35.

she had confidence in communicating without a common spoken language. *I know how and what it feels like to be an immigrant.* In getting to know this mother earlier on, however, and in establishing safety considerations for the exchanges, the center used an interpreter.

None of the centers used the term “culturally competent.” They offered many suggestions from their daily experience, however, on how to account for cultural identity and understand the “web of meaning” for children and parents using supervised visitation and exchange.

- The Chicago centers feel that their distance from the court has been important in being culturally responsive to the families that come to them. All three centers take care to explain to parents that they are not affiliated with the courts. For many of the families they work with, civil and criminal court intervention has been characterized by disrespect, confusion, and a gross lack of information about the process and what is expected of them. Many immigrant families are far away from understanding the judicial system in their country of origin and even more so here, where the language and system itself are very different. After working with families in these circumstances, the Chicago centers would recommend that visitation programs (court- and community-based) pay careful attention to recognizing and addressing peoples’ different experiences with legal systems and the courts.
- Time and flexibility are essential to building trust and relationships, to *understanding what’s happened in someone’s life*. It requires time and flexibility, for example, to explain supervised visitation or exchange and the center’s rules and procedures in a way that makes any sense to parents from Mexico or India, where the concept is entirely beyond their experience. *We have to make all the terminology simpler and explain in words they can really relate to . . . [we have to] break down all the information so that parents can understand all if it, we give examples if necessary.*
- Relationships with parents and children build slowly and over time. Building those relationships requires respect, compassion, and understanding and acknowledging experiences with racism, oppression, immigration, lack of education, lack of financial and other resources, and domestic violence, along with language, customs, and traditions. *We adapt to our families, as much as possible, and try not to give them more work, more worries, more stress.* As one person put it, *many times people feel like they cannot ask because none will listen*, and that has been the historical experience in their communities. Having respect for those using the center means not assuming you know everything and getting comfortable in that assumption. It is an ongoing process of self-awareness, of asking *what are the clients experiencing and how can I relate to that experience, and how it plays out at the center?* It is about *connecting to the person’s struggle in little ways*, but concrete ways, such as *acknowledging the long bus ride, how well taken care of the kids appear to be, or liking their outfit.*
- A visitation center cannot demonize fathers or structure its work around fear of batterers. Violent behaviors must be challenged, but it is the behaviors that are the focus and not the individual. Each center had examples of rule violations or safety

concerns that they had to address with a visiting parent. They emphasized that the goal was to support the parent in continuing to see his or her children and made sure that the parent's understanding of the court order and center expectations was clear. *Even if they are mean, as one monitor put it, they are given the respect.* In reinforcing accountability in the context of respect, *your behavior communicates more than the words and more than the rules.* The centers' emphasize that to connect with batterers from a basis of respect does not mean abandoning battered mothers and their children. *You need to believe that there is a possibility for change.* The centers are not naïve about the very real danger that some battering parents can pose. They attempt to avoid putting every visiting or non-custodial parent into a single category, however. This links back to each center's mission, guiding values, and role.

- The center's design, appearance, and staffing must be deliberate and conscious of the implied and explicit messages about who is welcome and how they are valued. One center stressed that they designed everything to convey respect, from its location in a health care building adjacent to a shopping mall, the quality of the furnishings, magazines and art work, the greeting by the receptionist, and the absence of uniformed guards and metal detectors. *Here we treat people the way each of us likes to be treated; we have designed these practices and have thought about them and continue to think about them.*
- The location should be non-threatening. One center inherited the visitation center facility because of the parent agency's location, but it has been a good fit because it is in a bank building, a more anonymous setting for parents who are coming from the immediate area, many from tight-knit immigrant communities. It does not draw attention to why they are in the building.
- Visitation centers should emphasize life experience and empathy and understanding for the *spectrum of life* in selecting staff. *I can teach the mechanics of supervising a visit, explained one director, but I can't teach empathy and understanding.* In each of the Chicago centers, staff use their own experiences with stress, racism, and oppression to avoid adding to what parents and children have experienced.
- Visitation centers should be *grounded* in people's experiences with the courts, police, Social Security, and other intervening institutions, and in the community's *historical context* and *institutional racism*. The means not only grounded in an individual's experience today, but in how deep-rooted oppressions such as racism are in the larger society. For African-Americans, for example, *the level of distrust is rooted in a historical perspective that has current implications. Some African-Americans bring to the centers this level of distrust in addition to their experiences with other institutions.* At our center, offered one staff member, *we don't want to become one more of the oppressors.* Because parents are so often under scrutiny and *being watched* in their everyday lives and routines, as staff members have also experienced, they minimize taking notes during a supervised visit. They intervene if appropriate or necessary, but complete their notes after the parents and children have left.

- Center staff must be prepared to accommodate and switch back and forth between someone’s first language and English. Each parent and child should be able to lead with the language of their choice. Siblings discussing their homework together may want to use English, as we observed during a visit, but the monitor makes sure that their father also understands the conversation. The emphasis was on the monitor’s flexibility in adapting to the family.
- Formality in how people are addressed can be an important part of establishing respect, as in Mr., Mrs., Miss, or Ms, or Usted, Señor or Señora and the person’s surname.
- Within the context of safety for a battered parent and her or his children, and any restrictions in court orders or sexual abuse issues, visitation centers should provide opportunities for extended family to be involved. “Family” for some parents and children includes a wide circle of relatives, close friends, and godparents. At one center, for example, in consultation with and approval from the custodial parents, visiting parents have brought other family members to celebrate a birthday or quinceañera (a girl’s fifteen birthday in Latino cultures). Across all the centers, visitations might include grandparents, uncles, aunts, and cousins, depending upon the circumstances.
- Centers can bridge cultures and contribute to an atmosphere of warmth and respect for families by holding an all-center gathering, with visiting parents, children, and other family members in one area (with multiple monitors) and custodial parents in another. Again, this occurs within the context of safety, the specifics of court orders, and availability of adequate supervision.
- Food and music are important cultural traditions that should be supported by visitation centers (again, in the context of accounting for how either might be used in a specific circumstance to reinforce tactics of battering). Each center, and the parents, wanted more space for sharing meals and moving about.
- *No two families are alike.*

We spent over ten hours talking with visitation center staff about their everyday practices, about how they adapt to who comes through the doors, in ways that are culturally respectful, inclusive, and aware. In Chicago, this means mothers, children, and fathers from dozens of ethnic backgrounds, languages, religions, indigenous traditions, class backgrounds, immigrant stories, and community histories. Staff made clear that working with families is *a journey*. They bring their own identities to their work, but do not assume that their own bilingual skills, immigrant experience, encounters with racism, knowledge of battering, or other aspect of their lives means that they already know all they need to know about any one family. As one monitor put it, *there are many ingredients*, among them respect, humility, and willingness to learn.

## *The pull of the prevailing model*

*We grabbed it in place of anything else.* – A visitation center director

In the spirit of “self-reflection and self-critique at the institutional level” (Tervalon and Murray-García, 1998), any exploration of the role of culture in supervised visitation and exchange must look at how the prevailing model organizes the work of visitation centers. This aspect proved more challenging for us to explore together. The prevailing model is so pervasive and familiar that it is difficult for someone in the day-to-day practice of a visitation center to imagine alternatives. We were not able, for example, to get very far in articulating what it would look like if we had to come up with a way for one parent who was battering another to spend time with his children in a way that was safe for everyone, but without using a center, in the generic space and shape that we know. Different cultures might have entirely different ways of being safe and ensuring safety. Articulating what those different ways and ideas might be is one of the next steps in the continuing discussion.

Visitation and exchange services in the three Chicago centers have followed the prevailing national model, which is grounded in child welfare practices and out-of-home placement because of abuse and neglect. Only within about the past fifteen years have visitation centers become involved with or recognized a growing caseload related to domestic violence, with a significant expansion after 2000 under the Safe Havens grants.<sup>14</sup> The Safe Havens requirements have had much to do with shaping the current model of service at each funded center. Those requirements prohibit off site visits, for example, out of concern that the difficulties in providing adequate security may place victims at greater risk of continuing or escalating violence.

The Chicago centers’ intake forms, observation reports, policies, procedures, and rules are similar to one another’s, and to the nine centers involved in the Safe Havens demonstration sites, as well as other centers across the country.<sup>15</sup> While approaches to interviewing and documentation are beginning to shift as a result of the demonstration sites and other Safe Havens work, a stack of case files from thirty different locations would still look quite similar.<sup>16</sup> If you blocked out names and addresses they could be interchangeable.

Part of our inquiry included reading case files together, followed by a closer look at two common visitation center forms included in the case files, the “intake” form and visitation observation report. This step told us more about the influence of the prevailing approach to supervised

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<sup>14</sup> As of May 2005 there are 62 grantees (planning, implementation, and demonstration initiative) representing 6 tribal nations and 32 states.

<sup>15</sup> The prevailing approach to supervised visitation has been greatly influenced, if not defined, by the Supervised Visitation Network (SVN), which in 1996 adopted *Standards and Guidelines for Supervised Visitation Practices* have been widely available to centers and are posted on the SVN Web site. Language and provisions included in the guidelines appear repeatedly in the forms and procedures of visitation centers, such as the “Conditions for Participation in the Supervised Visitation Program (Rules),” the 15-minute staggered parent arrival and departure times, and checklists of suggested information be gathered during intake and provided to parents (Appendices B and C). The guidelines have little to say, however, about framing practices to account for aspects of parents’ and children’s cultural identities.

<sup>16</sup> To learn more about shifting perspectives on supervised visitation and exchange in the context of domestic violence, go to the Audio and Video Archive, Visitation TA link, at [www.praxisinternational.org](http://www.praxisinternational.org).

visitation and raised questions about the ways in which administrative practices, such as completing a form, may shape visitation center workers in ways that run counter to their intentions in accounting for culture.

### *Reading case files*

Our first recognition was that families are very different, very diverse, and come to the visitation center via a court system that does not account for culture. The visitation center is left to ask and answer: Is there a gap between what families need and what supervised visitation or exchange provides? How do we recognize and bridge that gap?

We considered how supervised visitation center practices, such as the intake form and observation report checklist, have been influenced primarily by a child protective services orientation, where children are the target of abuse. Visitation and exchange has been largely framed by looking for harm to children that rests on one or more of these factors:

- Parental responsibility (parents who are not ready for the responsibility of children);
- Stress (could be rooted in the demands of day-to-day parenting, poverty, illness, violence);
- Parental cruelty (from those who were probably themselves abused as children);
- Control of children (which may be related to abuse or conflict between parents about raising children: i.e., “do what I say” or, “you’ll turn him into a sissy”);
- Diminished capacity (alcohol, drugs, mental illness, cognitive abilities); and,
- Conditions of parenting (social conditions, isolation, poverty).

What has been missing is the context of domestic violence and how children are used as a tactic of battering. Under this lens, a battered parent, who is more often a mother (Bancroft and Silverman, 2000), is the target of abuse, and children may be used as instruments in this violence. This includes: using violence and tactics of control in front of children; controlling the mother through the children by undermining her relationship with them, threatening to abduct them, obtain custody, or otherwise keep the children from her; and, a physical attack on and abuse of children to control their mother.

This discussion led to questions to ask of the case files, in looking at the ways in which individual experiences are recorded and documented.

- How are aspects of culture visible, erased, imposed, or appropriated?
- Who needs protection here? Is it primarily the children, the parent, or both?
- Are there signs of continued abuse and victimization? How do you as a monitor know what is going on?
- What is needed to protect those in need of protection?

What we learned by reviewing the written documentation was that it was often unclear who needed protection, what kind of protection, and why. Information about past and ongoing abuse and victimization was sketchy or missing. There was little to distinguish one person from the



next in the centers' documentary practices.<sup>17</sup> Our case file review opened five avenues of ongoing change for the centers to explore in their ongoing work as a Safe Havens Demonstration Site.

1. Design structures that allow for continuity with cultural identity and tradition, but also account for the ways in which batterers use children and institutions.
2. Understand how the use of children by batterers looks across cultures, and the implications for visitation and exchange.
3. Develop different documentation for the different reasons that people come to the visitation center. Consider how intake forms, observation notes, and reports could be redesigned to reflect more accurately who needs protection and what kind of protection.
4. Build into the intake process a more complete understanding of who is coming through the door. For example, what are a battered mother's connections, supports? What's safe and what's dangerous for her? What makes her more or less vulnerable?
5. Find and design tools to help us *be smart culturally*, as one center director put it, and continue learning. For example, find ways to develop the skill of listening to people about their own lives, rather than jumping to our theories and interpretations. Consideration of what helps us *be smart culturally* led to the recommendations that sum up this discussion.

We concluded our case file review, in other words, with more questions than answers.

### ***Intake forms***

“Intake” is the first face-to-face or voice-to-voice contact that parents have with a visitation center and before they get that far they have to find the name, number, address, and a way of getting there or making the call.

*I called the court and they told me . . . I asked if there was something closer . . . my ex-wife did the research . . . the judge referred me . . . it's close to my child . . . my attorney gave me the information . . . the GAL . . . I take two buses and that is difficult to get here to the center with my child . . . I can only communicate in Spanish, I do not know English, nothing . . . it is not easy for me to get here . . . I live in the shelter . . . this place is near where I live . . . I called and made the appointment . . . my friend is a doctor, she mentioned this place . . . it took forever to get him to do the intake . . . I was not dismissed; they were interested in my individual situation.* – Comments from parents in the focus groups

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<sup>17</sup> This has also been the experience of the Michigan and California Safe Havens Demonstration Sites in using a similar process to explore the role of a visitation center and the ways in which visitation accounts for safety in the context of domestic violence. The Michigan report is available at [www.praxisinternational.org](http://www.praxisinternational.org); go to Visitation TA, Tools, Written Materials.

The intake process sets in motions the supervised visits or exchanges. At this point the center gathers information about the family, explains the rules and procedures of the center, determines the visitation or exchange schedule, and obtains various releases of information. Many centers mail parents the intake forms ahead of time and ask them to complete them before they come in for the interview. The Chicago centers complete the form when the parents come to the appointment. This is an important distinction, and reflects their recognition of the ways in which many parents may have experienced institutional processes and forms as demeaning and burdensome. Based on a parent’s initial call to schedule the appointment, or with Mujeres Latinas en Acción and Apna Ghar, a contact from the larger organization’s domestic violence program, they will know whether or not family members speak English or another language. Visitation staff at Mujeres Latinas en Acción are bicultural and bilingual, as are several of the Apna Ghar staff.

In following our question, we stepped back to look at how the intake form accounts for and guides the person completing it to account for aspects of cultural identity that this parent and his or her children bring to supervised visitation and exchange. Here are examples from each of the centers of the kinds of questions included on the form, plus notation of the space provided to answer them.

Excerpts from Visitation & Exchange Intake Forms	
Center A	<p>To custodial parent:</p> <p><i>12. Do you have any concerns about the other parent’s relatives or friends visiting? Yes/No If Yes, Who and Why?</i>[in 1.5 lines]</p> <p><i>13. Are there any ethnic or religious restrictions that we need to be aware of? Yes/No If Yes, Please explain:</i> [less than one line]</p> <p><i>14. Do you have concerns if the Non-custodial parent would like to bring food, toys, take pictures? Yes/No If Yes, please explain:</i> [in 1.5 lines]</p>
Center B	<p>To custodial parent:</p> <p><i>Why did you ask for supervised visitations? And so you have any special concern the supervisor should be aware of?</i>[in 4 lines]</p> <p><i>As custodial parent, do you have any special request such as restrictions on what type of presents or food should be brought to the visit? Are there any health issues that the supervisor should be aware of, such as an allergy to a certain food?</i> [in 3 lines]</p> <p><i>What are your instructions if the children need to go to the restroom?</i> [in 4 lines]</p> <p>To non-custodial parent:</p> <p><i>Why did the custodial parent ask for supervised visitation?</i> [in 4 lines]</p> <p><i>As non-custodial parent, are your plans to gain non-supervised visitation?</i> [blank]</p> <p><i>If yes, what does the court say you must do to gain non-supervised visitation?</i> [4 lines]</p>

Center C	<p>[Telephone screening form; same for both parents; at intake interview, staff adds additional information in a narrative, case notes style]</p> <p>1. <i>When was the last time the child(ren) had contact with Non-custodial parent (you)?</i> [blank]</p> <p>2. <i>Is the supervised visitation requested through a court order: Yes/No (Non-custodial) ___ hrs/w Yes/No (Custodial) ___ hrs/w</i></p> <p>3. <i>What is the purpose for this supervised visitation request? [in 5+ lines]</i></p> <p><i>Other pertinent information [in 4 lines]</i></p>

What we discovered, as illustrated above, is that there is little in the intake form that guides visitation center staff toward dialogue with a parent in ways that will add to the center’s understanding of how to best recognize parents and children’s cultural identities. Questions such as who are they close to; who is considered family? Where do they get support? What holidays, customs, and foods are important to them? If an immigrant or refugee, under what circumstances did they and their children come to Chicago? What is it like to talk about the divorce in your community? To talk about the abuse you have experienced? To talk about why you must visit your children at this center? In spite of our best intentions, interviews tend to be driven by filling out the form. If the form does not direct us to discover or initiate the conversation, we are unlikely to explore further, particularly when bound by the time constraints of the next intake or next visit.

The Chicago case files and related forms reflect the prevailing organization of supervised visitation and exchange. As we apply “self-reflection and self-critique at the institutional level,” however, we begin to see the gaps between what we intend to do in accounting for culture and how visitation and exchange is organized in ways that impede us. The design of the intake form, for example, requires center staff to consciously step outside the form in order to connect with parents and children in ways that account for cultural identities. In our interviews and discussions with center staff they described how they intentionally emphasize having a *conversation* with parents, in order to avoid merely ‘filling in the form.’

The prevailing model of supervised visitation gave the centers an important and valuable template in creating a structure for opening their doors. It is also a structure embedded in considerable experience in keeping people safe during a monitored visit or exchange. At the same time, the prevailing model creates a boundary around what might be imagined, even as centers work around it in their interactions with the families who come through those doors.

***Observation reports***

Observation checklists/report forms, in particular, carry the predominant supervised visitation framework and its emphasis on parent-child interaction in a child welfare context. The forms

direct the visitation monitor to note who has and has not “smiled ...hugged ... kissed ... cried ... showed enthusiasm,” or interacted with one another. They direct attention to who is “detached ... hostile ... withdrawn ...receptive.” They emphasize “educational and recreational interaction” that includes “educational games, TV shows, etc.” and “reading, writing, coloring, etc.”

There is some variation across the Chicago centers in the placement and wording of items. One center, for example, takes a more narrative approach in recording the reactions of parents or caregivers and children at the beginning and end of visits. Monitors have one to five lines to respond to questions such as “positive verbal interaction?” and “give an example of two of the types of activities the NCP & Child did.” The core sections regarding “observed interaction of visiting adult” and “observed interaction of children,” however, are the same for each center.

Common Wording on Supervised Visitation Observation Report Form	
<u>Observed interaction of visiting adults</u> [monitors circle Yes, No, or N/A for each item]	<u>Observed interaction of children</u> [monitors circle Yes, No, or N/A for each item]
<ul style="list-style-type: none"> <li>• Ask questions about child(ren)’s activities/life</li> <li>• Set limits/boundaries</li> <li>• Initiated activity/conversation [One form inserts “stimulating” here]</li> <li>• Praised positive behavior</li> <li>• Addressed negative behavior of child</li> <li>• Spoke respectfully to child(ren)</li> <li>• Exhibit realistic expectation of child(ren)</li> <li>• Allowed child(ren) to show emotions</li> <li>• Focused on child(ren) vs. something/someone else</li> <li>• Spoke to child(ren) about adult issues/problems</li> <li>• Demeaned others in the presence of child(ren)</li> <li>• Interrupted normal play and forced child to display affection</li> </ul>	<ul style="list-style-type: none"> <li>• Appeared clean and healthy</li> <li>• Expressed natural affection for parent</li> <li>• Responded to behavior modification utilized by parent</li> <li>• Parental limits challenged</li> <li>• Acted like parent (role reversal)</li> <li>• Appeared detached or unresponsive during visit</li> <li>• Hyperactive/over-stimulated</li> <li>• Complained about custodial home</li> </ul>

As we looked closer at the observation form as a **cultural construction**, designed with a certain meaning in mind of what is a “realistic expectation,” “normal play,” and “natural affection,” we began to question how this form might be read by monitors in ways that impose a specific cultural point of view that discounts what is realistic, normal, and natural within the cultural framework of the families before them.

For example, one monitor described a father who visits with his two sons and *gives affection to one and attention to the other; the father hugs and shows all sorts of affection with the younger son, while with the older boy he only talks, is not affectionate, does not hug him or show any other parental affection*. She went on to explain that the expectation in the United States – in other words, the dominant culture expectation – is that the father shows the same affection to both boys. The observation reports for this father could present him as an inadequate parent. Where the monitor understood the family’s history and culture, however, she would see this as reflection of relationships between fathers and their younger and older sons, where physical affection between them disappears around age ten. This father did spend time talking with his older son, asking him about his life and school, but he did not hug or touch him.

A father in one of the focus groups provided an illustration of the notions of parenting evident in the observation form – that parents will be interacting, in motion, with educational games, reading, writing, coloring – and how they do not necessarily account for different cultural dimensions. *Many times the children do not want to play; they want to talk, or just stay still, so I as a father will not force them. I want to see their cues, I want to follow their rhythm but the monitor wants the time to be doing or saying something.*

How we talk with children, express love, expect them to contribute to the family, and define and correct misbehavior all have cultural design and meaning. In one setting, a father who sits quietly with his daughter and says little as she leans against him may be described as an uninvolved, detached, and perhaps inappropriate parent who has had a “bad” visit. In another setting, where the monitor understands that this is a much-valued time and way of communicating between a father and daughter at the end of a day, it will be a “good” visit.

### ***Summing up and looking forward***

How does culture play a role in serving families using supervised visitation?

Exploring this question was very real for the Chicago centers and their technical assistance partners: at times it mirrored the challenge, uncertainty, stumbling, and misunderstanding that so often go with starting a dialogue about cultural diversity, and keep many institutions and individuals from even beginning the conversation. The notion of cultural humility has been helpful in suggesting a framework and approach. Conversations with the mothers and fathers who use the centers and with the staff who work in them kept the inquiry moving forward. *Respect, explain, listen*, they reminded us, again and again. Out of this process, we found that we have a contribution to make to those charged with providing supervised visitation and exchange services.

### **Building Cultural Humility in Supervised Visitation and Exchange**

1. Practice ongoing study, self-reflection, and self-critique, both institutionally and individually.

2. Ground your work in historical context and understand how people and their cultural beliefs as well as behaviors have been excluded, silenced, denied, marginalized, and oppressed.
3. Design deliberately, in the staff, building, access, and décor; from the pictures on the walls to the greeting at the door.
4. Examine every form, policy, procedure, brochure, and directive and question its cultural framework, assumptions, and language.
5. Learn about the communities you are and will be serving; make connections, find teachers, and teach yourself.
6. Include the communities you are and will be serving; provide a place *at the table*, via inclusion as staff, board members, trainers, and consultants.
7. Form and maintain advocacy partnerships; involve communities in crafting and defining policies, not just commenting.
8. Never ask a single individual, a single voice, to represent all of any community.
9. Provide services in a person's *first voice*, in their home language.
10. Learn and practice respectful listening and genuine dialogue.
11. Support families' cultural traditions.
12. To be discovered . . . We are not presenting our experience in Chicago as the final or only word on building culturally responsive supervised visitation and exchange. Ongoing work in Chicago and other communities – the “lifelong commitment to self-evaluation and self-critique,” will lead to ideas and approaches that we have yet to discover.

Culture always plays a role; there is no visitation center or service that is culturally neutral. How can we make supervised visitation and exchange an experience with minimal barriers? How can we make supervised visitation welcoming, respectful, and aware of the lives of everyone who comes through the door? How might the idea of safe visitation and exchange look without the physical space of a center? How can we facilitate families' cultural identities, as well as accommodate them? The Chicago Safe Havens centers will continue asking these questions of their work, recognizing that there is no single answer, no one-dimensional response. The next question might be: How would protective or monitored contact between a child and a parent look for different cultures, if they could figure it out from the ground up?

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## Appendix A

<b>How would you design a supervised visitation center?</b>	
CP = Custodial Parent    NCP = Non-Custodial Parent	
Center A Mothers (4 CP)	<ul style="list-style-type: none"> <li>• According to each situation, each circumstance</li> <li>• Father would bring something to feed the children.</li> <li>• Father would change diapers or bring children to the bathroom (absent sexual abuse).</li> <li>• Space would be decorated, child friendly; ample toys and little chairs and tables</li> <li>• Waiting room for women with magazines, job information, classes, instructions in English</li> <li>• Bilingual</li> <li>• Cafeteria for waiting parent; or, a kitchen and coffee maker or sandwich machine</li> <li>• Security guard who would accompany mother to the bus stop</li> <li>• Revised, shorter hours on week nights during school year</li> <li>• Include a park</li> <li>• Counseling in one location</li> <li>• Provide information about the visit itself; meet with supervisor after the visit</li> <li>• Check in and find out how they are doing</li> <li>• More [culturally specific] centers across Chicago</li> </ul>
Center A Fathers (4 NCP)	<ul style="list-style-type: none"> <li>• Flexibility in rules</li> <li>• Guidance about parenting</li> <li>• Way for children to talk with visiting parent about what has happened</li> <li>• No waiting list</li> <li>• Bilingual staff</li> <li>• Older monitors with more life-experience</li> <li>• More men on staff</li> <li>• More time, extended hours and more hours to choose from</li> <li>• Bigger space with several rooms</li> <li>• Take pictures without discretion left to mothers</li> <li>• Sharing food, with a separate section for cooking</li> <li>• Section where we can read, another with quiet time, etc.</li> <li>• Secure</li> <li>• Park, more room, more air; change scenery</li> <li>• Counseling for children</li> <li>• Bring third parties without clearing it with other parent</li> <li>• Comfortable room</li> </ul>



<b>How would you design a supervised visitation center?</b>	
Center B Mothers (4 CP)	<ul style="list-style-type: none"> <li>• Know who to complain to and how</li> <li>• Clear communication when the center is closed or visitation appointments have been changed</li> <li>• Referrals to effective advocacy (i.e., court, housing)</li> <li>• Closer and/or easier availability (location and hours)</li> </ul>
Center B Father (1 NCP)	<ul style="list-style-type: none"> <li>• Hire more people that reflect those who come to center</li> <li>• Be more diverse in languages</li> <li>• Painting (not just white walls)</li> </ul>
Center C Mothers (3) and Fathers (2CP)	<ul style="list-style-type: none"> <li>• Supplementary services (such as therapeutic counseling on site, if necessary)</li> <li>• Space for children to move around</li> <li>• Notes sent directly to the court</li> <li>• Feedback to custodial parent on interactions between visiting parent and child/children</li> <li>• Additional security on a case-by-case basis</li> <li>• More time to get children ready to leave after a visit</li> <li>• A better setting for teenagers' age and interests</li> </ul>
Center C Fathers (6) and Mother (1NCP)	<ul style="list-style-type: none"> <li>• Bigger facility</li> <li>• Different rooms for different ages</li> <li>• Outside play space</li> <li>• Expand the boundaries for visitation to the adjacent mall</li> <li>• Extend visits to other family members</li> <li>• Bring and take photographs</li> <li>• Automatic reporting back to the court</li> </ul>

## Appendix B

### Chicago Safe Havens Demonstration Site – Safety Audit Focus Groups Facilitator / Note Taker Cues

Key areas of inquiry (the information we're seeking, as presented to IRB)<sup>18</sup>

- (1) Demographic: General area of the city they live in and race, ethnic or cultural group(s) they identify with.
- (2) Experience using the services provided by this center.
- (3) How visitation and exchange services can meet the needs of families from diverse backgrounds.
- (4) Factors that contribute to decisions to utilize this program/center.
- (5) Recommendations on how supervised visitation and safe exchange centers across the country can better meet the needs of families from diverse backgrounds.

#### Introduction and Welcome to Focus Group Participants

- Introduce & explain roles: facilitator, note taker, any observers
- Purpose of discussion: gain understanding of how families from diverse backgrounds experience supervised visitation and exchange
- Purpose **IS NOT** to discuss circumstances that have brought them to the center.
- How a focus group works
  - Note: may ask everyone to answer some questions
  - Apologize in advance for interrupting and moving on to another question or person
  - Want to hear from as many as possible
- Voluntary: don't have to answer; can leave at any time
- Confidential: no one will be identified by name in any reports
- Explain audio taping if applicable
- Read consent form
- Any questions?

#### Discussion

1. **Roundtable:** Icebreaker
  - a. First name/name & general area of the city you live
  - b. How did you come to live in Chicago, Illinois?
2. People find out about this center in different ways. I'm going to list some of those ways. If something applies to you, please raise your hand. It's OK to raise it more than once.  
[Note taker records numbers]

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<sup>18</sup> Because the Chicago Department of Public Health is the fiscal administrator for the Chicago Safe Havens grant, it required the demonstration site to obtain CDPH internal Institutional Review Board (IRB) approval for the focus groups. The Mayor's Office on Domestic Violence, as the grant's program manager and grants coordinator, negotiated IRB approval.

- a. Referred by a court to this specific center; to Branch/Mujeres/Apna Ghar [use name]
  - b. Referred by a court to any visitation center of your choice  
Probe: Why did you choose this center?
  - c. Picked it from a list that someone gave you
  - d. It's the easiest for me to get to
  - e. Other ways?
3. Describe your very first impressions with the center and what happened.  
Follow-up: Was there anything confusing about what would happen at the center?  
Probe: Is it still confusing; has it changed? Who helped; how did they help/ what was comfortable? What was uncomfortable?
4. **Roundtable:** If we put you in charge of the center, how would you design it? What would you want for your family?  
Probe: Trying to get at the look and feel of the center – how it might be different: toys, furniture, entry, food, language, staff, etc. – get at specific changes they have in mind.

#### Wrap-Up

- Thank you
- Compensation & transportation vouchers & Help Line cards
- Any questions?
- Be alert to post-group discussion and observations
- Facilitator and note taker debrief; note key themes, quotes