

Characteristics of Supervised Visitation Programs Serving Child Maltreatment and Other Cases

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Supervised visitation programs allow parents who may be a risk to their children or to another parent to experience parent–child contact while in the presence of an appropriate third party. Use of a “neutral third party” to oversee such contact has long been recognized as essential in child maltreatment cases in which the child has been removed from the home. This paper presents the results of an exploratory study of the structural and functional characteristics of 47 supervised visitation programs in Florida. Findings indicated that programs are typically operated on small budgets, with the related challenges of limited hours of operation, delayed or denied services to families in need, small and/or unpaid staff, and inadequate security measures. Recommendations for stable and sufficient funding as well as statutory legitimization are provided. [*Brief Treatment and Crisis Intervention* 7:291–304 (2007)]

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Supervised visitation programs provide a community-based option for the courts when trying to balance the need for positive interactions between estranged parents and their children with critical safety concerns. They allow parents who may be a risk to their children or to another parent to experience parent–child contact while in the presence of an appropriate third party (Thoennes & Pearson, 1999). Use of a “neutral third party” to oversee such contact

has long been recognized as essential in child maltreatment cases in which the child has been removed from the home. In those cases, social workers or child protection workers traditionally supervised visits to maintain the child’s relationship with the parents and to work toward reunifying the family (Straus, 1995–1996). Attempts to improve the conditions under which these contacts occurred resulted in contracting to programs that focused on these services (Straus, 1995–1996).

Beginning in the late 1980s, supervised visitation programs emerged as an option for courts responding to families experiencing separation and divorce, when conflict between parents necessitates an “outside resource” to allow the child contact with a noncustodial parent

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(Birnbaum & Alaggia, 2006). Programs were developed for cases in which a parent is accused of substance abuse, mental health issues, poor parenting, risk of parental abduction, or lack of a relationship with the child. In addition, the epidemic of domestic violence and concern for victim and children safety at visitation has resulted in the creation of supervised visitation programs specifically for family violence cases (Jaffe & Geffner, 1998; Shepard, 1992). As the American Bar Association (2000) has pointed out, court orders for supervised visitation or visitation exchanges can place family members at risk of violence or manipulation by the abuser. However, "visitation centers may reduce the opportunity for retributive violence by batterers, prevent parental abduction, safeguard endangered family members, and offer batterers continuing contact and relationships with their children" (The Model Code on Domestic and Family Violence, 1994, p. 6).

The service arena has evolved to address a wide array of family needs and presenting problems, including the often overlapping concerns of child maltreatment, domestic violence, and parental substance abuse (Graham-Bermann, 2002; Kelley, 2002). Indeed, Schechter and Edleson stated "Numerous studies over two decades show that child maltreatment and adult domestic violence co-occur in about half of the families studied" (2000, p. 4), and drug use often faces children in violent families.

The proliferation of supervised visitation programs has been well documented: There were only 56 known programs in 28 U.S. states in 1995 (Straus, 1995–1996) and by early 2007, the Supervised Visitation Network (a national organization of supervised access and visitation programs) included 525 agency, affiliate and individual members in North America (2007). Florida has the second highest number of supervised visitation programs in the United States.

Supervised visitation programs may offer a variety of services:

- One to one supervision (one supervisor assigned to a single family);
- Monitored exchanges (supervision of a child's movement between the residential and nonresidential parent immediately before and after unsupervised visitation);
- Group supervision (supervision of several families at a time);
- Telephone monitoring (monitoring phone calls from the nonresidential parent to the child);
- Ancillary services, such as parenting education; and
- Therapeutic supervision (mental health professionals providing therapy/ counseling to the family during the visit).

The Florida Policy Context

Florida's Model Family Court specifically includes "the utilization of qualified programs for supervised visitation and/or monitored exchange" (2000, p. 20) as an essential component of such courts. The Florida Supreme Court's Family Court Steering Committee developed standards for supervised visitation and exchange programs in 1998 to create uniformity in such areas as staff training, terminology, and basic practice norms. Chief Justice Major Harding endorsed the Florida Supreme Court's Minimum Standards for Supervised Visitation Program Agreements and crafted an administrative order in 1999 mandating that chief judges of each circuit enter into agreements with local programs that agreed to comply with the standards. The purposes of providing supervised visitation expressed by the standards are "(a) to assure the safety and welfare of the child, adults, and program staff during supervised contact; (b) to enable an ongoing relationship between the noncustodial parent and child by impartially observing their contact

in a safe and structured environment and to facilitate appropriate child/parent interaction during supervised contact” (Supreme Court of Florida, 1999, p. 3).

Literature Review

Two foci predominate in the literature on supervised visitation: child/family outcomes and program characteristics/needs. Positive child outcomes that have been studied include: parental bonding, relationships and attachment (Ansary & Perkins, 2001; Johnston, 1994; McWey & Mullis, 2004); child well-being (Dunn, Flory, & Berg-Weger, 2004); and, child harm reduction (Field, 1998). Positive family outcomes include: increased reunification (Ansary & Perkins, 2001; Perkins & Ansary, 1998); decreased parental conflict (Dunn et al., 2004; Flory, Dunn, Berg-Weger, & Milstead, 2001); child safety for domestic violence victims (Field, 1998); family stability (Johnston, 1994); and, child support maintenance (Pearson & Thoennes, 1997).

Although these studies have documented beneficial outcomes from supervised visitation services, two primary concerns persist: the potential for these services to increase trauma for certain children and a lack of rigorous investigations. Review of secondary data of Johnston and Straus (1999) pointed to troubling findings of children’s traumatic experiences while in supervised visitation. These included psychologically harmful contact with abusive noncustodial parents, exposure to parental attempts for control, intimidation and/or abduction, and exacerbation of conflicting and confusing feelings regarding their own physical safety. The second concern was identified by Birnbaum and Alaggia (2006), who concluded that the literature on outcomes of supervised visitation lacks scientific support, with no controlled studies reported thus far.

The second focus of program characteristics/needs has consistently been described in terms of staffing requirements, security needs, and funding limitations. Studies of staffing have included the importance of worker neutrality, empathy, or integrity (Burton, 2003; James & Gibson, 1991; Stern & Oehme, 2005; Stocker, 1992) and specialized training (Maxwell & Oehme, 2001; Sheeran & Hampton, 1999; Stern & Oehme, 2002, 2007). The importance of appropriate security measures was documented by Maxwell and Oehme (2001), Oehme and Maxwell (2004), Sheeran and Hampton (1999), and Thoennes and Pearson (1999). Funding concerns were emphasized as successful program implementation was clearly tied to the first two foci because without sufficient funding, programs are forced to rely on paraprofessional or volunteer staffing and inadequate security measures (Levin, 2000; Oehme & Maxwell, 2004; Thoennes & Pearson, 1999).

In their recent literature review of supervised visitation, Birnbaum and Alaggia (2006) stated, “the first generation of research has focused on referral processes, program descriptions, and generating empirical support in favor of the use of supervised visitation services” (p. 123). Their review included studies of visitation in postseparation and divorce matters and specifically excluded, “studies that focused exclusively on child welfare issues and supervised visitation” (2006, p. 121). This paper builds on these “first-generation” studies by (a) providing an understanding of visitation services provided to families across the referral spectrum: divorce, post-separation, domestic violence, and other case types, including child maltreatment and (b) describing supervised visitation programs in Florida with direct comparison of findings with those of another study. The second generation of research called for by Birnbaum and Alaggia consists of rigorous studies that empirically document the contribution of supervised visitation to improvements

in child and family outcomes. However, we argue that the consistently identified program improvements that emerge from descriptive studies are yet needed as a foundation for outcome research.

Development of the Database

Florida is currently the only state that tracks the *statewide* usage of supervised visitation across all types of referrals, including domestic violence, child abuse and neglect (dependency cases), and separation and divorce cases. In January 2005, the Clearinghouse on Supervised Visitation, within the Institute for Family Violence Studies, started collecting program and service data in a Web-based database. Program-level data include information about the programs themselves such as location, funding sources, and number of employees and volunteers. Service-level data consist of information on clients and the services they receive. The project was funded initially by Florida's child welfare agency.

The database is divided into two sections. The first is programmatic data, which includes program characteristics, staffing and funding, services, and security information. This includes agency associations, kinds of cases each program accepts, personnel data, hours, waiting lists, and budget information. The second section is comprised of client, case, and service data.

At the time the database was developed, 38 programs existed in Florida, up from 15 programs in 1997 (Oehme & Maxwell, 2004). As of September 2006, the statewide database held information on 5,196 cases, 20,838 clients, and 68,234 services representing cases entered since January 2005. Included are dependency cases (i.e., child maltreatment), domestic violence cases, and divorce/paternity cases involving custody disputes. This paper presents an anal-

ysis of the program-level data available on the database from January 2005 to September 2006. A companion paper will subsequently be available presenting the analysis of the aggregated client-level data.

Methodology

The data presented herein represent the results of an exploratory study of program-level data in 47 supervised visitation programs in Florida. These data were collected from January 1, 2005 to September 30, 2006. Programmatic data were entered into the online database by the site program director or a designee. They were then extracted by a research assistant and entered into a spreadsheet. The data were then reviewed for completeness, and follow-up calls were made to programs that had reported little or no data. Information provided via follow-up calls was entered into the spreadsheet and three programs that did not have any or had very little information were removed. The data were then imported into a statistical software package (SPSS) for analysis.

Because of the exploratory research design and limited number of respondents, only non-parametric statistical analyses were conducted. The results of univariate analyses (frequency distributions) are presented below.

Findings

When these data were collected, there were 62 active supervised visitation programs in Florida. A total of 47 supervised visitation programs contributed data. This includes 36 main programs and 11 supplementary sites; five of the main programs had multiple sites. For program characteristics, only the 36 main site programs reported data. Nonreporting programs were unable to participate because they had not yet received training on the use of the database or did not have staff available to enter

TABLE 1. Program Auspice

Program auspice	Responses		Percent of cases
	<i>n</i>	Percent	
Part of a larger nonprofit	24	58.5	66.7
Court-based program	6	14.6	16.7
Freestanding nonprofit	6	14.6	16.7
Part of a certified DV center	2	4.9	5.6
Faith-based agency	1	2.4	2.8
Other	2	4.9	5.6
Total	41	100.0	

cases into the database. Participation in the database was and continues to be voluntary.

Program Characteristics

*Program Auspice*¹

The majority of programs (67%, $n = 24$) responded that they are part of larger nonprofit agencies; another 17% ($n = 6$) reported they are freestanding nonprofit programs. Only one program (5.6%) reported that it is a faith-based agency (Table 1).

Regions Covered

The most common (47%, $n = 22$) regional coverage by the programs and sites were urban, suburban, and rural areas together. The majority (70%, $n = 33$) of programs and sites covered at least two types of regions.

Hours and Days of Operation

Over half (53%, $n = 25$) of responding programs reported that they were operational for 40 hours or more a week, and 21% ($n = 10$) reported they were open for 19 or fewer hours per week. Thirty-five (66%) programs reported they were open at least 5 days a week; notably,

¹Respondents could indicate more than one program auspice.

TABLE 2. Highest Degree of Director

Highest degree of director	Frequency	Percent
High school diploma	3	8.3
Associates degree	4	11.1
Bachelor's degree	13	36.1
Master's degree	13	36.1
Doctorate	3	8.3
Total	36	100.0

eight programs (17%) reported they were open 7 days a week.

Agreements with the Court

The majority (80%, $n = 28$) of the programs that responded reported they had agreements with the court at the time they submitted data. However, most respondents (77%, $n = 27$) also said their court agreements were either not renewed at the time they submitted data, or their agreements had not been renewed since January 2005.

Service Barriers

Forty percent ($n = 19$) of all supervised visitation programs and sites had to either delay or deny services in the previous 12 months due to limited/full capacity, and 43% ($n = 20$) reported putting clients on a waiting list for this reason. Eleven percent ($n = 5$) reported they denied or delayed services due to a language barrier or lack of an interpreter.

Staffing

The majority of program directors reported their highest level education as Bachelor's degrees or higher (81%, $n = 29$); in addition, 28% ($n = 10$) of directors reported they had some form of licensure or certification (Table 2).

The majority (80%, $n = 28$) of all programs responding reported having nine or fewer employees. Nearly half (45%, $n = 14$) of all programs that responded reported employing 1.9

TABLE 3. Funding Sources

Funding sources	Responses		Percent of cases
	<i>n</i>	Percent	
Access and Visitation (state) Client fees for service	22	21.4	62.9
County funding	19	18.4	54.3
Safe and Stable families (state)	16	15.5	45.7
United Way	14	13.6	40.0
Private/corporate	13	12.6	37.1
Safe Haven/supervised visitation (federal)	11	10.7	31.4
City funding	5	4.9	14.3
Total	3	2.9	8.6
	103	100.0	

or fewer full-time equivalents with the majority of respondents indicating they employed 3.9 full-time equivalents or fewer (55%, $n = 20$).

Seventy-nine percent ($n = 26$) of programs that responded reported use of volunteers; in addition, 77% ($n = 27$) of respondents reported use of interns.

Funding²

Sixty-three percent of all programs received funding from Access and Visitation (state), the largest single source of funding; moreover, the other state-funded program (Safe and Stable Families) accounted for 40% of the programs' funding. The second most commonly reported source of funding was client fees for service (54%) (Table 3).

Only 23 programs submitted budgetary information, but of those that responded, 39% ($n = 9$) reported annual operating budgets of \$50,000 or less in the last year, and more than

²Respondents could indicate more than one source of funding.

TABLE 4. Annual Operating Budgets

Operating budget	Frequency	Percent
\$1–\$50,000	9	39.1
\$50,001–\$100,000	4	17.4
\$100,001–\$200,000	5	21.7
\$200,000+	5	21.7
Total	23	100.0

half (57%, $n = 13$) reported annual budgets of \$100,000 or less (Table 4).

Service Issues

Average Length of Visit

The most frequently reported length of visit is 1.5 hours (38%, $n = 16$). Ninety-eight percent ($n = 46$) of responding programs reported an average length of visit of 2 hours or less (Table 5).

Services Provided³

The most frequently reported service was supervised visitation, with 83% ($n = 39$) of programs reporting this service, followed by Monitored Exchange at 64% ($n = 30$). Nearly half (45%, $n = 21$) provided Community Referrals, and 26% ($n = 12$) offered parent education service. The least commonly reported service was Mediation (6%, $n = 3$) (Table 6).

Case Types⁴

One-on-one (Individual) Dependency cases were most common case type (89%, $n = 42$); followed by one-on-one Domestic Violence Injunction cases (79%, $n = 37$), one-on-one Dissolution of Marriage cases (75%, $n = 35$), and one-on-one Never Married/Paternity cases (75%, $n = 35$). Notably, for each type of case

³Respondents could indicate more than one service.

⁴Respondents could indicate more than one case type.

TABLE 5. Average Visit

Average visit (hr)	Frequency	Percent
1	16	34.0
1.5	18	38.3
2.0	12	25.5
3.0	1	2.1
Total	47	100.0

(Dependency, Domestic Violence, Dissolution of Marriage, and Never Married/Paternity) programs reported services were provided in one on one rather than group modalities. Finally, the majority of responding programs reported providing services to criminal cases (57%, $n = 27$) (Table 7).

Security⁵

Three programs responded that they were without any level of security or security equipment. The most common type reported by respondents was Equipment (96%, $n = 42$), which could include hand-held metal detectors, panic buttons, breathalyzers, one-way mirrors, security alarms, or walkie-talkies, followed by Law Enforcement (43%, $n = 19$) (Table 8).

Discussion

Several programmatic elements were reported by Thoennes and Pearson (1999) that are common to this study; our discussion refers to comparable data where available.

Most programs (84%) reported they were part of or freestanding nonprofit agencies; only one is faith based, and only two were part of certified domestic violence centers. Thoennes and Pearson found a smaller, yet substantial, portion of programs housed in nonprofit agencies (64%). The majority of respondents indi-

⁵Respondents could indicate more than one security type.

TABLE 6. Services Provided

Services provided	Responses		Percent of cases
	n	Percent	
Supervised visitation	39	28.3	83.0
Monitored exchange	30	21.7	63.8
Community referrals	21	15.2	44.7
Parent education	12	8.7	25.5
Telephone contact	10	7.2	21.3
Transportation	7	5.1	14.9
Therapeutic supervision	7	5.1	14.9
Counseling	5	3.6	10.6
Parent planning	4	2.9	8.5
Mediation services	3	2.2	6.4
Total	138	100.0	

cated that they provide services in at least two types of regions of the possible urban/suburban/rural categories. Just over half of programs indicated that they provide services 40 hours per week, but over 20% reported that they operate fewer than 19 hours per week.

Although the majority of responding programs reported that they had agreements with the courts, the data are not clear that these

TABLE 7. Case Types

Case types	Responses		Percent of cases
	n	Percent	
Dependency (individual)	42	18.6	89.4
Domestic violence (individual)	37	16.4	78.7
Dissolution of marriage (individual)	35	15.5	74.5
Never married/paternity (individual)	35	15.5	74.5
Criminal	27	11.9	57.4
Dependency (group)	12	5.3	25.5
Self-referred	13	5.8	27.7
Never married/paternity (group)	9	4.0	19.1
Dissolution of marriage (group)	9	4.0	19.1
Domestic violence (group)	7	3.1	14.9
Total	226	100.0	

TABLE 8. Security

Type of security	Responses		Percent of cases
	<i>n</i>	Percent	
Equipment	42	56.8	95.5
Law enforcement	19	25.7	43.2
Private	10	13.5	22.7
Specially designated volunteers	3	4.1	6.8
Total	74	100.0	

agreements are updated annually. All programs receiving judicial referrals must comply with the Supreme Court's minimum standards (1998). However, not all programs in this study reported having Letters of Agreement with the Court, which are required by these standards.

A Program Agreement is a written understanding between the court and an independent service provider including, but not limited to, the scope and limitations of the provider's services, the procedures for court referrals to the provider, and the manner and procedures for communicating with the court. Such communications might include detailed or summary reports of visitation observations, incident reports, or professional assessments. The Program Agreement also incorporates the program's written operational policies and procedures.

In addition, most programs did not report that they have annual Affidavits of Compliance. Independent programs are required to annually submit Affidavits of Compliance with the minimum standards to the chief judge. It is possible that some programs have such Affidavits but did not indicate such in the study.

Programs in this study reported either delaying or denying services due to limited capacity, waiting lists, or language barriers. Thoennes and Pearson (1999) similarly found that waiting lists were common in their sample. Our study makes it absolutely clear that there are families in Florida who are not receiving the services

they need—or are placed on waiting lists to receive it.

Supervised visitation programs were staffed by a small number (fewer than nine) of employees, and nearly half of all responding programs reported that they employ fewer than two full-time equivalents. In addition, most programs reported the use of interns and volunteers, which is consistent with those studied by Thoennes and Pearson (1999). The small number of full-time employees at supervised visitation programs, combined with the heavy reliance on volunteers and interns, indicates that unpaid personnel are substituting for professional salaried staff at most visitation programs. Although we do not know the experience or educational levels of the volunteers and interns working in these programs, such unpaid staff members typically bring neither the education nor experience that professional staff members offer. The authors of this article provide the court-mandated statewide training for personnel of all of Florida's supervised visitation programs, via in-person meetings, conferences, and online tutorials. We know of no instances where unpaid staff members such as volunteers or student interns received our training.

Funding for programs came predominately through the Florida's child welfare agency (with most of this comprised of federal pass-through funding), the counties, the United Way, and client fees. Thoennes and Pearson (1999) reported that most of the programs in their study that served families in the child welfare system were funded by state contracts; however, no such direct relationship between case types and funding source was documented in our study. Unlike annual budgets documented by Thoennes and Pearson (1999), which ranged to more than \$600,000, Florida's programs had small annual budgets—most were under \$100,000.

Programs reported providing a variety of services—predominantly supervised visitation,

but including monitored exchange, telephone contact, and parent education. Supervised visitation services do not exist in a vacuum. Instead, they are simply one of the many tools for the judiciary to use when addressing the problems of families in crisis. The fact that nearly half of all supervised visitation programs are attempting to provide families with linkages to other meaningful resources in the community means that programs recognize their place in the web of local services. Most responding programs reported serving families in individual modalities, which is consistent with Thoennes and Pearson's study as well as Straus' argument that any high-risk situation requires one-on-one supervision as a basic condition of the service (Straus, 2000). The average supervised visit was 1.5 hours in length, which is somewhat shorter than visit lengths (2.0–2.3 hours) documented by Thoennes and Pearson (1999).

Over half of programs (65.9%) reported that they use trained security personnel—either from law enforcement or private security companies. Although nearly all reported using security equipment, some indicated that program staff considers “cell phones” a type of security equipment. Alarming, three programs reported having no security at all, raising serious concerns about safety and training. Small budgets likely contribute to these decisions about security levels and result in decreased safety for the families, the staff, and the surrounding communities. The Florida Supreme Court's Minimum Standards currently only require programs to have a “written security protocol.” No discussion is offered as to what the protocol should require. Sharon Rogers, Executive Director of one of the participating programs noted:

These families need the extra layer of safety that our off-duty police officer provides. The non-custodial parent who's visiting his child looks around at the other families and thinks

the officer is there for them. The custodial parent thinks the security is there for his child. The victim of domestic violence thinks the security is there for her. Staff and volunteers are pleased that the security is there for them. In a way, they are all correct. Security is there for everyone, and I wouldn't operate a program without it (personal communication, January 6, 2007).

Conclusions and Recommendations

The study is limited by several methodological problems: not every program in Florida contributed data and the sample was not randomly selected, so we cannot generalize the findings to all programs. The small sample size reduced generalizability and precluded the use of parametric statistical analyses. Further, because different staff persons entered data across those programs that did participate, we have no assurance that items were interpreted or reported consistently across all programs.

Despite these limitations, information can be gleaned from this study that can be used to improve this critical community service. Based on our analysis of program-level data provided by Florida's supervised visitation programs, we offer the following recommendations:

1. **Standards and Certification:** In order to ensure consistency and safety at supervised visitation programs, legislatures should plan for statewide standards enforced by the certification and monitoring of supervised visitation programs. This study has underscored the fact that programs are serving families with a myriad of presenting problems, including child maltreatment, divorce, domestic violence, and substance abuse, thus consistency and oversight are critical for ensuring appropriate settings are

provided. Jaffe and Geffner stated that monitoring supervised visitation in domestic violence cases is important, but "... has been difficult in many jurisdictions" (1998, p. 393). Tortorella (1996) called for statutory guidelines and Clement (1998) proposed that legislation providing for the regulation of supervised visitation programs be adopted by all states, yet little progress has been made. As Florida Chief Justice Harding wrote to the Speaker of the Florida House and President of the Florida Senate:

The lack of guidelines or standards for these programs and lack of oversight of these programs, particularly as to staff and visitor safety and staff training, is of great concern ... I urge the legislature to consider establishing a certification process, and designate an entity outside of the judicial branch to be responsible for oversight of supervised visitation programs. (M. Harding, personal communication, November 17, 1999).

2. Increased and Stable Funding for Programs: To adequately provide a safe environment, sufficient and stable funding must be assured: "The need for supervised visitation, however, is not matched by available resources" (Thoennes & Pearson, 1999, p. 473). Levin (2000) stated unequivocally that funding must be secured for an increase in the number of visitation centers in order to provide a viable option for the courts, especially in cases involving domestic violence.

The unacceptable alternatives are program instability, waiting lists, and insufficient or nonexistent security measures. Program instability results from the lack of assurance of ongoing funding streams, with cycles of privatization often

interrupting previously continuous contracting relationships. Waiting lists are simply unacceptable when courts have mandated services and children's well-being is at stake. With regard to security issues that are affected by insufficient funding, we start by recognizing the potential for revictimization in child maltreatment cases where programs provide inadequate safety and security measures (Johnston & Straus, 1999). Requiring that programs have law enforcement officers with the power of arrest on-site during visits—especially in cases involving domestic violence or child maltreatment—lends a distinct layer of safety to each visit. Although security devices such as metal detectors and breathalyzers used by non-law enforcement staff may seem adequate, this illusion is dispelled when the metal detector beeps or the litmus test turns color, indicating an armed or intoxicated parent. As one program director stated:

I have serious concerns about programs that do not use professional security on site. I have seen how dangerous some of these cases are. They are unpredictable. But the courts want us to provide safe visits. How can you provide safe visits without security? (T. Waterman, personal communication, December 15, 2006).

It is important, however, to ensure that the physical and emotional environment is conducive to the needs of children and that security does not have an intrusive presence. Levenback (2000) emphasized the need for supervised visitation settings that ensure both safety and comfort for children. Child maltreatment cases typically include a domestic violence component, with serious ramifications for

threat of violence, stalking, and related problems.⁶ Florida's supervised visitation programs have consistently reported multiple instances of batterers trying to use the visitation environment to stalk their former partners—because batterers know where their ex-spouses/partners will be (e.g., dropping off or picking up children at the visitation program); Florida's programs also report that visiting parents show up under the influence of alcohol or substances (Maxwell, Oehme, & Crook, 2006). In addition, even in cases where domestic violence does not exist, parental conflict or substance abuse can be a factor, the threat of parental kidnapping may be heightened, and/or child abuse can exist. These are all justifications for ensuring that supervised visitation programs are adequately funded and staffed, so that safety is ensured for all participants.

Underlying each of these concerns is program use of unpaid staff in the form of volunteers and/or student interns. Florida's programs report that they use unpaid staff when funding is uncertain, fluctuates, or insufficient to accommodate court referrals. Anecdotally, Florida program directors report that waiting lists are reduced in direct proportion to their ability to hire paid monitors. Moreover, we contend that unpaid or poorly paid program staff may be ill-equipped to disarm parents or to inform a parent emboldened by drugs or alcohol that a visit is cancelled. Perlmutter and Crook (2004) discussed the extensive roles that volunteers can play in social service programs: "volunteers are essential for the

accomplishment of the agency's mission and generally require considerable organizational and professional controls" (p. 136). They specified the need for organizational controls such as training and the provision of professional staff oversight, and expressed concerns that "there are potential costs and dangers to their involvement" (p. 138).

3. Improved and Ongoing Documentation of Program Characteristics: The fact that so many similarities in the challenges faced by supervised visitation programs were documented by studies of providers in four states and Canada (Thoennes & Pearson, 1999) and Florida seven years later indicates that we have not made much progress. Unrelenting pressures of inadequate and unstable funding present an environment of uncertainty for the courts, the children and families, and the communities served by these programs. Indeed, it is remarkable that programs have continued to partner with the courts under these conditions and that the number of such programs continues to grow. We advocate for states to develop and monitor the documentation of program characteristics such as those reported in this paper in order to provide support for increased funding, legitimacy, and accountability for this crucial community service.

Returning to the model of Birnbaum and Allaggia (2006) of first- and second-generation research in supervised visitation, we propose these be considered parallel rather than consecutive pursuits. Our study of program characteristics indicates a dynamic rather than static condition of the venues for provision of supervised visitation services. Although we indicated that many program characteristics had not changed since the work of Thoennes and

⁶Overlapping concerns of child maltreatment and domestic violence have been cited by Graham-Bermann (2002), Kelley (2002), and Schecter & Edleson (2000).

Pearson (1999), we do not know if there was an ebb and flow of these characteristics in the ensuing years, or if the hundreds of other programs that were not studied across the country are similarly situated. As any good program evaluator knows, we are “shooting at a moving target,” in that people, funding, administrative and clinical protocols, and other elements of social service programs are in constant flux. Accordingly, because the second generation of research was identified as program effectiveness and parent/child outcomes (Birnbaum & Allaggia, 2006), it follows that these must be accompanied by ongoing first-generation research, especially those that describe programs and provide empirical support for the use of supervised visitation services especially with regard to child welfare.

Implications for Future Research

Although this study contributes to the knowledge base about supervised visitation as discussed above, it is clear that there is much work to be done. Some of the immediately identifiable questions to be addressed in future research are as follows:

- What child and family outcomes are important to measure and track over time?
- What program characteristics are important to measure and track over time?
- In what ways are child and family outcomes and/or program characteristics related to:
 - The use of unpaid versus paid professional staff members?
 - Implementation of appropriate security protocols?
 - Waiting lists and access to services?
 - The provision of training to all monitoring staff (i.e., unpaid, paraprofessional, and nonprofessional)?

- Types of monitoring settings offered (e.g., group vs. one-on-one)?
- Successful linkages to community resources?
- Unanticipated consequences such as unwelcoming environments or increased risks to children or family members?
- Relationships with the courts?

To acknowledge that families are the cornerstone of our society, we must follow through with the promises we make to families in crisis. Paying lip service to families by allowing communities to offer services that are not fully regulated and funded can create more danger by fostering an illusion of safety and support. Children, families, communities, and the courts rightfully expect the highest quality of support and care for the most vulnerable among us.

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