the Safe and Together™ model:
A strength-based, child-centered approach to partnering with adult domestic violence survivors

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Strong Families Arizona Home Visiting Conference
Glendale, AZ
PowerPoint and Resource Materials Available at:
http://endingviolence.com/strong-families-az/
Continuum of Domestic Violence Practice (CODVP)
Domestic Violence and Home Visiting: Context

• Stats
  – 3-19% of women report perinatal domestic violence
  – 34% of all substantiated CPS investigations included exposure to IPV as the primary category of maltreatment (Canadian study)
  – 48% mothers in one home visitation program revealed reported experiencing IPV since the birth of their child
  – 88% of a group of battered women described that their partner used their children to try to control her.
  – Studies show home visitors feel their competence to deal with IPV is low.

* Citations available upon request
Domestic Violence and Home Visiting: Context

• Federal Mandates
  – MIECHV Standards:
    • Screening
    • Referral
    • Safety Planning
  – CAPTA
    • Information sharing on training, programs and best practices related to collaboration between DV and CPS sectors
    • Gathering information child maltreatment cases with DV
    • Discretionary grants related to intersection of domestic violence and child abuse

• Practice Recommendations by Futures Without Violence
  – Training and Supervisory Support for Home Visitors
  – Self-Care and Values Clarification
  – Engaging Men and Fathers
Safe and Together Model Sites

United States
- Ohio
- Connecticut
- Colorado
- New York
- Oregon
- Florida
- Kansas City, MO
- Lincoln NE
- New Jersey
- Wisconsin; Louisiana; Vermont; Memphis, TN; Maine

Outside United States
- England
- Scotland
- Ireland
- Singapore
- Australia

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Safe and Together™ Principles

1. Keeping child Safe and Together™ with non-offending parent
   - Safety
   - Healing from trauma
   - Stability and nurturance

2. Partnering with non-offending parent as default position
   - Efficient
   - Effective
   - Child-centered

3. Intervening with perpetrator to reduce risk and harm to child
   - Engagement
   - Accountability
   - Courts

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Safe and Together™ Critical Components

- Perpetrator’s pattern of coercive control
- Role of substance abuse, mental health, culture and other socio-economic factors
- Actions taken by the perpetrator to harm the child
- Adverse impact of the perpetrator’s behavior on the child
- Full spectrum of the non-offending parent’s efforts to promote the safety and well being of the child

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The domestic violence perpetrator and his behavior* are the foundational source of the risk and safety concerns for children.

* not the adult survivor or her behavior
Multiple pathways to harm

Perpetrator’s Pattern

- Coercive control toward adult survivor
- Actions taken to harm children

Children’s Trauma

- Victim of physical abuse
- Seeing, hearing or learning about the violence

Effect on partner’s parenting

- Depression/PTSD/anxiety/substance abuse
- Loss of authority
- Energy goes to addressing perpetrator instead of children
- Interference with day to day routine and basic care

Effects on family ecology

- Loss of income
- Housing instability
- Loss of contact with extended family
- Educational and social disruptions

Harm to child

- Behavioral, Emotional, Social, Educational
- Developmental
- Physical Injury

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Perpetrator Pattern-Based to Domestic Violence and Children

• Looks at the perpetrator’s behavior, not the relationship, as the source of the domestic violence
• Highlights the choice(s) to be violent, abusive and controlling as parenting choices
• Beyond current relationship: 360 degrees assessment of perpetrator pattern
• More than adult on adult behavior: Strong nexus between domestic violence perpetrator’s behaviors child safety and well being.
Interest of Child Welfare

The abuse to stop & the children to be okay

Interest of Adult Domestic Violence Survivor

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Reasonable person standard

Efforts to protect children?

Efforts to parent despite abuse?

Attempts to plan despite partner’s unpredictable future behaviors?

Plans seem(ed) appropriate given circumstances and resources?
Good Practice with DV Survivors

Effectively partnering with a DV Survivor will help:

• Learn more information about the perpetrator’s behaviors and the impact on the children
• Build on what is already working to keep the children safe/better safety planning
• Avoid interventions that may increase danger ("domestic violence destructive")
Effective Partnering

• Introduce child welfare concerns in a non-blaming way
• Start off by asking about the relationship and then progress to the more serious violence
• Ask about and validate strengths related to keeping stability, safety planning, parenting, seeking help, etc.
• Ask about what she has done/is doing to keep herself and the children safe. What’s worked? What hasn’t worked?
Survivors’ Protective Capacities

• Starting with the perpetrators’ behaviors, child welfare can better:
  – Identify efforts survivors have made
    • Parenting
      – Providing stability
      – Providing financially
      – Providing day to day care
      – Talking with children about their feelings/the abuse
    • Protecting
      – Safe guarding children
      – Creating immediate, short term and/or long term plans to keep the children safer based on knowing the perpetrator
      – Utilizing resources (formal and informal)
Safe and Together Practice Tools

Mapping Survivors’ Protective Capacity
- Full Spectrum Strengths Assessment
- Validation
- Collaborative Planning

Pivoting
- Keeping the focus on the source of the safety and risk
- Strengthening partnership with adult domestic violence survivor

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Mapping Survivors’ Protective Capacities

What do we know about the survivors’ efforts to promote the safety and well-being of the children?

- Identify parenting effort (well-being)
- Identify protective efforts (safety)
- Validate strengths (documentation, engagement)
- Collaboratively safety plan
Situations For Using Pivoting

• When domestic violence case presentation starts with the adult survivor versus the perpetrators' behavior.
  – “This is a case is about a mother who deciding to stay with her partner who has abused her multiple times.”
  – “We have a mother who has been multiple abusive relationships.”
• Workers or teams are scared that if she doesn’t leave, end the relationship or call police she and/or the children will be seriously injured or die.
  – “No matter how I talk to her about the impact on the children, she won’t make the decision to leave him.”
• The adult victim is presented by the worker as difficult, resistant or in denial.
  – “She has lied to me about what’s going on.”
  – “She’s picking him over the children.”
Pivoting as a Safe and Together Model Practice Tool

• Strength based
  – Worker
  – Adult Survivor

• Perpetrator pattern-based
  – Demonstrates how understanding the perpetrator pattern is central to understanding survivor’s decision making
  – Based on the idea that the perpetrator is 100% responsible for his choices and that the abuse is a parenting choice

• Child Centered
  – Focuses on strengthening partnership with adult survivor around the safety and well being of the child
  – Creates a solid foundation for having compassionate, direct, non-blaming conversations with adult survivor about their safety and their child’s safety
  – Forms foundation for realistic and meaningful collaborative safety and case planning

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Pivoting as a Practice Tool

Pivoting is a three step process:

1. **Validate the worker:** Acknowledgment and validation of the social worker’s strengths, challenges and good intent.

2. **Pivot to the Perpetrator:** Pivoting from the focus on the survivor to the focus on the perpetrator.
   
   Part 1: What do we know about the perpetrator’s pattern of behavior?
   
   Part 2: Assess interventions with the perpetrator that are designed to reduce risk and safety concerns for children and family

3. **Return to the survivor:** After the initial pivot towards the perpetrator has been completed, pivot back to the survivor to check in on the presenting issue and/or determine how the conversation about the perpetrator can impact the practice related to the adult survivor.
Safe and Together Ohio Data

• Ohio 3rd Party Evaluation: Study coordinated by Ohio IPV Collaboration with support from
  – HealthPath Foundation
  – NCALP
  – ODJFS

• Data collected from 12 of the counties trained during 2013, as well as 12 Ohio counties that had participated in Safe and Together training during previous years, and 7 local CPS from AR counties that had not yet participated in the training.

• 5 data collection activities:
  – an online pre/posttest survey of 837 CPS caseworkers and supervisors
  – semi-structured interviews with 16 supervisors;
  – semi-structured interviews with 8 community stakeholders;
  – desk reviews of 191 CPS case files; and
  – review of written policies from 15 counties that had completed Safe and Together training. Exhaustive descriptions of each of these methods are appended to this report."
Strong evidence that:
- CPS staff assign less blame to victims for staying in a violent relationship;
- CPS staff increase their concern about, and documentation of the effects of children witnessing domestic violence.

Mixed Evidence:
- CPS staff increase their understanding of coercive control;
- CPS staff enhance safety planning for victims and children;
- CPS staff increase perpetrators’ accountability.

Little evidence that:
- CPS agencies change written policies; and
- Community stakeholders become more receptive to Safe and Together policies and principles.
Safe and Together Florida Data

• Work with both child welfare and domestic violence advocates
  – Multi-site work with DCF in Florida since 2008
  – Relationship with Florida Coalition since 2006
  – Different projects
    • Subject Matter Experts
    • Co-located Advocates
    • Children’s Legal Services
    • Cultural & Linguistically specific work

• Panhandle
  – Training and technical assistance for both child welfare and co-located domestic violence advocates
Domestic Violence Removals as Percent of Overall Removals (Bay & Gulf Counties, FL)

- Jan-June 2012: 20.6%
- June-Dec 2012: 13.6%
- Jan-June 2013: 9.1%
Correlation between model implementation and keeping children in homes

In Jacksonville Florida, the child welfare department was able to track the number of filings and removals for cases where domestic violence was identified. The data indicated a significant drop in neglect petitions (approximately 70% decrease) and removals during a period (approximately 50% decrease) correlated with significant Safe and Together model training.
Safe and Together Model Resources & Educational Events

• Open Events
  – 2nd National Symposium in Seattle WA October 2014
  – Thursday Webinar Series

• Resources
  – Website: www.endingviolence.com
  – Safe and Together videos:
    • https://www.youtube.com/user/SafeandTogethersModel
  – Safe and Together model blog: safe-and-together.endingviolence.com/blog/
  – Facebook: http://www.facebook.com/DavidMandelAndAssociates
  – Twitter: https://twitter.com/SafeandTogether
Save the Date

2014 2nd National Safe and Together Model Symposium
October 23 & 24, 2014
Seattle, Washington
Seattle Marriott Waterfront

Building on successful 1st National Safe and Together Symposium, our 2014 event will have the following enhanced features:

• Full day pre-Symposium workshops- October 22, 2014
• Presentations by Safe and Together sites and partners (call for papers will be made at the beginning of 2014)
• A wider focus including workshops on fathers, domestic violence informed child welfare systems, implementation fidelity and other topics

For more information, join our email list and keep checking back at http://www.endingviolence.com
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For more information