

SAFE & TOGETHER MODEL TRAINER CERTIFICATION PROGRAM:

Participant Guide



USING COACHING TO INCREASE EFFECTIVE PRACTICE & SYSTEM CHANGE



SAFE & TOGETHER

INSTITUTE

Concrete strategies.

Meaningful tools.

Real change.




TCP

BECOMING AGENTS OF CHANGE

TRAINER CERTIFICATION PROGRAM

Using Coaching to Increase Effective Practice & System Change

1



We recognise that most of our trainings take place on traditional lands and acknowledge and thank the generations of Indigenous and Aboriginal Peoples who have cared for these lands and pay respect to Elders both past, present, and emerging.

WELCOME

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Creating Domestic Violence-Informed Systems

- **The goal of Safe & Together Model training:**
 - Transformational learning that changes attitudes, beliefs, and behaviour.
- **The Model's "coaching" approach promotes:**
 - Critical thinking in participants about their reactions and connections to their role, work, and local context.
 - Individual skill development, rather than just knowledge transfer.
 - Showing vs. telling – modeling and behaviour-based practice tools.
 - "Leaning in" to resistance.
 - A safe environment that allows for challenging questions.

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Goals for Today's Session

As a result of participating in this session, participants will be better able to:

- ✓ **Explain the importance of ongoing coaching and its role in Model implementation**
- ✓ **Demonstrate basic coaching skills around case assessment and case planning**
- ✓ **Describe how Safe & Together Model™ tools and resources can be used in coaching**

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Coaching Basics

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Why Focus on Coaching?



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- Training and information sharing alone do not result in lasting practice change.
- New behaviours and skills can be introduced in training but are truly learned “on the job.”
- Ongoing coaching can help disrupt the impulse to return to old habits.
- Coaches not only promote the adoption of new skills, but also the emotional support and professional growth for workers.

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What Do We Mean By “Coaching”?

Coaching is

- A **non-directive** form of development
- Focused on **work performance improvement** and related skill development
- Dually focuses on both the **individual** and the **organisation**
- Provides **feedback**, raises **awareness**, and imbues **personal responsibility** for action
- A **skilled intervention** delivered by those trained in coaching skills

Source: Chartered Institute of Personnel and Development, 2007

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**Any interaction with a colleague
around domestic violence - both in
and out of a training room - can be
an opportunity for coaching.**

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Different Levels of Coaching

Asking coaching questions both in and out of the training room

Helping a peer with a case that belongs to them

Providing DV-informed guidance to those you supervise

Facilitating small-group discussions of DV cases

Consulting with a community partner/service provider on a DV case

Helping managers and leaders think through agency policies, data collection, staff safety, and other DV-informed initiatives

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Coaching Basics

Case Details – should be 50% of focus



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Coaching Basics

Worker's Practice – should be 50% of focus



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Coaching as a Process

Give specific guidance for trying something different with the purpose of learning (collect the data)

- Following up:
 - How did that work?
 - What did you learn?
 - What do you need to do next?
 - How else can I help you?
- **When someone doesn't follow through on an agreed step, approach them with curiosity versus blame**
 - "What happened to get in the way of 'X'?"

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A colleague comes to you for assistance with a case involving domestic violence. She has a report of an incident that led to an arrest two days ago. Father came home intoxicated, demanding dinner. Mother told him to quiet down because the children were sleeping. There are two children in the home, six and three. Father assaulted mother, waking up the children and a neighbor, who called the police. Father was charged with assault.

Mother wants to stay and work on the relationship. Is it safe for him to return to the home?

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Risk Assessment & Domestic Violence



- Research shows formal risk assessments as having limited to moderate success in predicting violence – especially repeat violence.
- Victims are generally good predictors of their own risk.
- Assessment length does *not* appear to correlate with prediction accuracy.
- Assessments of coercive control and behavioural patterns can help predict lethal violence.

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Assessment Reminders



Past system experience: will impact both perpetrator & survivor behaviour



Worker safety concerns: interfere with good practice and may show up as resistance, neglect, anger, carelessness



Perpetrator manipulation: can undermine the worker's response and deeply impact the adult and child survivors



Intersections: introduce complications that can distract workers from the abuse



Intersectionalities: can exacerbate power imbalances



Worker thinking errors: encourage faulty assumptions, weak conclusions, and poor practice

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MULTI-AGENCY TRIAGE PROJECT (MAT)

INITIAL MULTI-AGENCY RISK ASSESSMENT PRACTICE TOOL (Informed by the Safe and Together™ Model)

This Practice Tool was designed to be used by the Multi-Agency Triage Facilitator in the triage room when undertaking multi-agency risk assessments and referrals. The aim of the Tool was to keep the partner agencies undertaking collaborative risk assessment (of police family violence incident reports) focused on the perpetrator's role in causing the family violence, and the impact on the mother and children.

The Practice Tool was developed by Dr Lucy Healey, Deb Nicholson (University of Melbourne) & Lyn Turner (Berry Street) for use at the Multi-Agency Triage project piloted in the North Eastern Metropolitan Region of Melbourne between 2015-2017. The guidance and input of Professor Cathy Humphreys as MAT Project Lead and David Mandel, Safe and Together Institute, is acknowledged.

The Practice Tool was originally called the “aide memoire” and has been adapted over time with input from the multi-agency MAT practitioners. The practitioners working in the MAT room undertook the Safe and Together online training modules, which supported and enhanced their understanding of the rationale for using the Practice Tool.

The first question in the Practice Tool is “What perpetrator behaviours led to the police family violence report?” This question establishes the focus for a line of questioning that pivots to the perpetrator. MAT practitioners have found this to be very useful in helping to understand from the outset (at triage of the police report) how to assess risk and make appropriate referrals for the mother and children, that acknowledge her efforts in protecting her children, rather than blaming her for failing to do so.

Another key question in the Practice Tool is “What don't we know?”. This question encourages the practitioner to acknowledge early when they don't know the perpetrator's whereabouts, his mental health status, his use of alcohol or other drugs, any history of FV, for example. Before this question was added, it was common for practitioners to fill the “unknown” space with speculation about the perpetrator, or tellingly, further discussion and speculation about the mother. This ensured that the father/perpetrator was invisible or less visible in the risk assessment process. Including this question also led to triage practice decisions such as finding out more about the perpetrator from police or the men's service.

This version of the Practice Tool has been pared back from the version used in the MAT room, to only show the questions to ask. The terms used in the Victorian context are explained in the footnotes.

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INITIAL MULTI-AGENCY RISK ASSESSMENT PRACTICE TOOL (INFORMED BY THE SAFE AND TOGETHER™ MODEL)

1	Brief (and relevant to the risk) history from each agency						
2	What RESPONDENT¹ / FATHER / PERPETRATOR behaviours led to the L17?						
3	How is the AFM² / MOTHER supporting the safety and wellbeing of the child? (protective factors)						
4	<p>(a) What are the risks THE PERPETRATOR poses to the woman? (Use risk assessment indicators)</p> <ul style="list-style-type: none"> • Risks based on the current Police FV Report • Risks based on the multi-agency history (this informs the collaborative risk assessment) <p>(b) What are the risks he poses to the children? (Use indicators for children at risk)</p> <ul style="list-style-type: none"> • Risks based on the current L17 • Risks based on the multi-agency history (this informs the collaborative risk assessment) 						
5	What are the risks he poses to family functioning? (threats to mother-child relationship? Homelessness? Cultural safety? Health? Family finances?)						
6	What is the AFM's level of fear? (Has it been ticked on the police FV report?)						
7	What don't we know?						
8	<p>What is each team member's <u>individual</u> risk assessment of a) AFM and b) child (it may differ depending on the circumstances)</p> <table> <tr> <td>Requires immediate protection</td><td>➔ Highest risk</td></tr> <tr> <td>Elevated risk</td><td>➔ Medium / moderate risk</td></tr> <tr> <td>At risk</td><td>➔ Lowest</td></tr> </table>	Requires immediate protection	➔ Highest risk	Elevated risk	➔ Medium / moderate risk	At risk	➔ Lowest
Requires immediate protection	➔ Highest risk						
Elevated risk	➔ Medium / moderate risk						
At risk	➔ Lowest						
9	<p>What is the <u>collaborative</u> risk assessment of a) AFM and b) child (it may differ depending on the circumstances)?</p> <table> <tr> <td>Requires immediate protection</td><td>➔ Highest risk</td></tr> <tr> <td>Elevated risk</td><td>➔ Medium / moderate risk</td></tr> <tr> <td>At risk</td><td>➔ Lowest</td></tr> </table>	Requires immediate protection	➔ Highest risk	Elevated risk	➔ Medium / moderate risk	At risk	➔ Lowest
Requires immediate protection	➔ Highest risk						
Elevated risk	➔ Medium / moderate risk						
At risk	➔ Lowest						
10	<p>What is the referral pathway and rationale?</p> <ul style="list-style-type: none"> • Which agency is taking this case? 						

¹ The alleged perpetrator of the family violence

² Affected Family Member - the alleged victim of the family violence



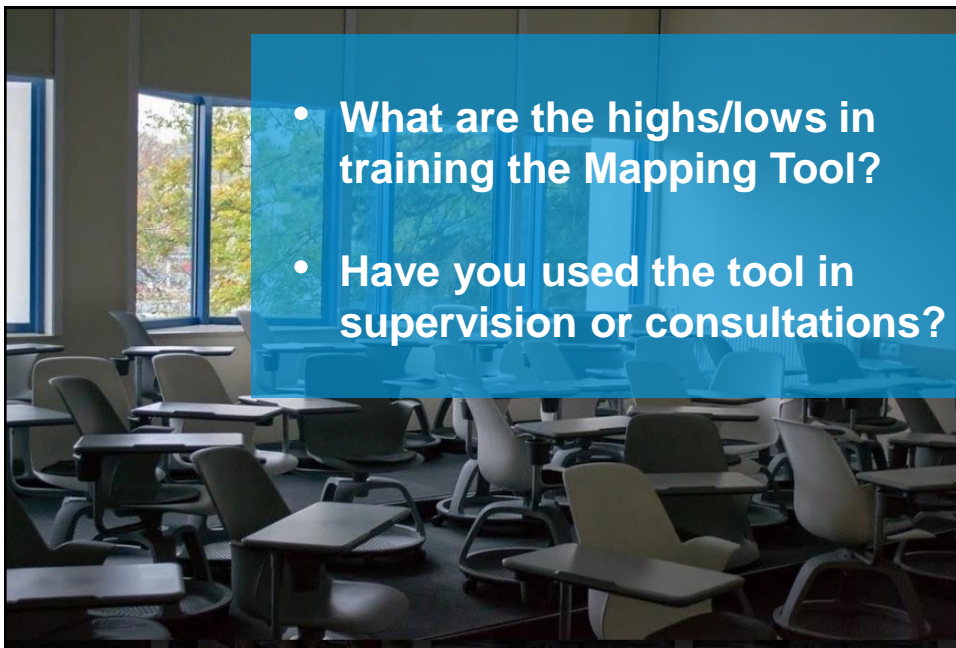
Perpetrator Pattern Mapping Tool:
A Practitioner's Tool for Improving Assessment,
Intervention and Outcomes

Using the Mapping Tool as a Coaching Tool


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The image shows a woman from behind, interacting with a large, glowing digital interface. The interface features various icons representing different aspects of safety and justice, such as a family, a heart, a factory, a house, a school, and a car. The background is a blue, abstract pattern of lines and circles.

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- What are the highs/lows in training the Mapping Tool?
- Have you used the tool in supervision or consultations?

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The image shows a classroom with several rows of desks and chairs. A large, semi-transparent blue rectangle is overlaid on the right side of the image, containing the text of the bullet points. The background shows a window with a view of trees outside.

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Historical Context




The Mapping Tool was developed as a way to bring the 5 Critical Components of the Model to life in the form of a practical application tool

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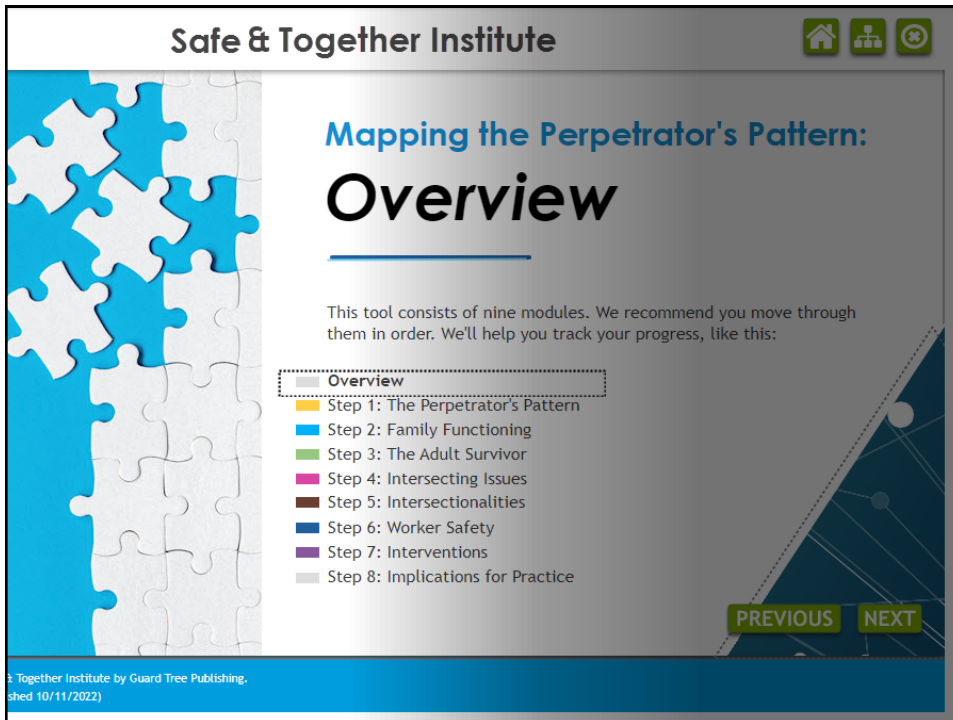
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How Can I Access the New web-based Mapping Tool?

All S&T Model Certified Trainers receive a FREE subscription to the web-based tool. Check your Virtual Academy account for the initial Overview e-course.

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Section 4: Intersecting Issues – EXPANDED Content

Step 4: Intersecting Issues

Intersecting Issues and Perpetrator Behavior: Examples

Resources Area

Perpetrator

Substance abuse

Mental health

Both

None

Survivor

Substance abuse

Mental health

Both

None

Help me choose.

Potential outcome

CHOOSE AGAIN

1 of 16

He calls her crazy and claims that he'll get custody of the kids even though he's an alcoholic.

Step 4

PREVIOUS

NEXT

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Step 5: Intersectionalities – EXPANDED Content

Step 5: Intersectionalities

Privilege and Perpetrator Behavior

Resources Area

Gender & sexual orientation

While attitudes are slowly changing, in many communities privilege is associated with being a heterosexual cisgender male.

Perpetrators may exploit hatred or fear of people with other gender identities or sexual orientations to assert coercive control over family members.

For example, a perpetrator may harness societal bias against his partner who is gay, nonbinary, or trans by saying, "I'll out you to your parents if you don't do what I say."

Similarly, he may threaten to expose a child's nonconforming sexual identity to his homophobic classmates.

He may also criticize, demean, or refuse to accept a family member's sexual orientation or gender identity.

Religion

Gender identity & sexual orientation

Position within the community

Race and ethnicity

Socio-economic status

Step 5

PREVIOUS

NEXT

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Section 7: Partnering & Interventions – NEW content



NEW section to address Partnering & Interventions

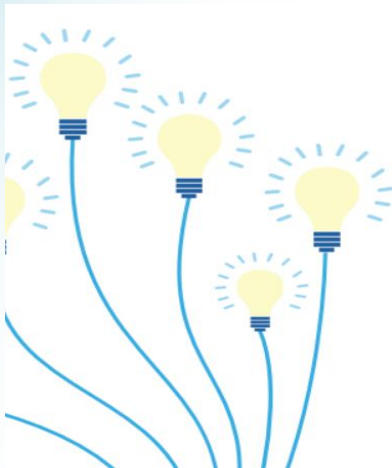
Assesses efforts to partner with the survivor and gathers information on both informal and formal interventions and their effectiveness in ending the perpetrator's pattern of coercive control.

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Working Through the Tool...



EACH STEP INCLUDES:

- **A Tutorial** to the step content (10-20 minutes)
- **How to Complete the Step** instruction on the “how” to map that content
- **Mapping the Case** with clickable guidance and resources
- **Check Your Work** guides review to ensure everything is comprehensive and dv-informed
- **Print or Save** the step

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My Active Cases:

Use this page to track your active

Taylor Case - Opened 2 February
Edit my work Print my work Delete

Nijssen Case - Opened 20 February
Edit my work Print my work Delete th

Coaching 1 - Sara
Edit my work Print my work Delete th


Coaching 2 - Open
Edit my work Print my work D

Team Meeting - 10 March
Edit my work Print my

Coaching with the New Tool


- **Multi-case Capabilities:**
The tool saves progress on up to 5 cases at once
- **For Coaching,** you may want to leave 1-2 open for individual consults, 1 open for group/team processing
- This still gives you 2-3 slots for your own cases and/or supervision - or training

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SECURE ENOUGH FOR CONFIDENTIAL CASE DETAILS



This web-based tool is cookie-based, saving your case data to your device only, making this tool incredibly secure.



For Coaching, you will need download and/or print the case to share it with the worker.



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Check Your Progress & Notes Any Time

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Help with navigation and lost progress ?

Progress Check [Return](#)

Use this page to view your progress on each of your five cases. Add to your cases step by step. Click Help [?] for more details. If you have information about a case that's not available to map yet, save notes in your case's notebook. See your case identifiers below.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Case Notebooks
<input checked="" type="checkbox"/> Tutorial	<input checked="" type="checkbox"/> Tutorial	<input checked="" type="checkbox"/> Tutorial	<input checked="" type="checkbox"/> Tutorial	<input checked="" type="checkbox"/> Tutorial	<input checked="" type="checkbox"/> Tutorial	<input checked="" type="checkbox"/> Tutorial	<input checked="" type="checkbox"/> Tutorial	
<input type="checkbox"/> Case 1	<input type="checkbox"/> Case 1	<input type="checkbox"/> Case 1	<input type="checkbox"/> Case 1	<input type="checkbox"/> Case 1	<input type="checkbox"/> Case 1	<input type="checkbox"/> Case 1	<input type="checkbox"/> Case 1	Notes Delete this case
<input type="checkbox"/> Case 2	<input type="checkbox"/> Case 2	<input type="checkbox"/> Case 2	<input type="checkbox"/> Case 2	<input type="checkbox"/> Case 2	<input type="checkbox"/> Case 2	<input type="checkbox"/> Case 2	<input type="checkbox"/> Case 2	Notes Delete this case
<input checked="" type="checkbox"/> Case 3	<input type="checkbox"/> Case 3	<input type="checkbox"/> Case 3	<input type="checkbox"/> Case 3	<input type="checkbox"/> Case 3	<input type="checkbox"/> Case 3	<input type="checkbox"/> Case 3	<input type="checkbox"/> Case 3	Notes Delete this case
<input type="checkbox"/> Case 4	<input type="checkbox"/> Case 4	<input type="checkbox"/> Case 4	<input type="checkbox"/> Case 4	<input type="checkbox"/> Case 4	<input type="checkbox"/> Case 4	<input type="checkbox"/> Case 4	<input type="checkbox"/> Case 4	Notes Delete this case
<input type="checkbox"/> Case 5	<input type="checkbox"/> Case 5	<input type="checkbox"/> Case 5	<input type="checkbox"/> Case 5	<input type="checkbox"/> Case 5	<input type="checkbox"/> Case 5	<input type="checkbox"/> Case 5	<input type="checkbox"/> Case 5	Notes Delete this case

Key: Cases you've named

Case 1: Taylor Case Case 2: Nijssen Case Case 3: Coaching 1 - Sara Case 4: Coaching 2 - Open Case 5: Team Meeting - 10 March

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Help with navigation, lost progress, and other FAQs and tips

Click on the "?" at the top for FAQs & help with navigation or lost progress

I want to see the opening information again: "About This Page" and "Simple Process Check"

What does "step by step" mean? Can't I jump around?

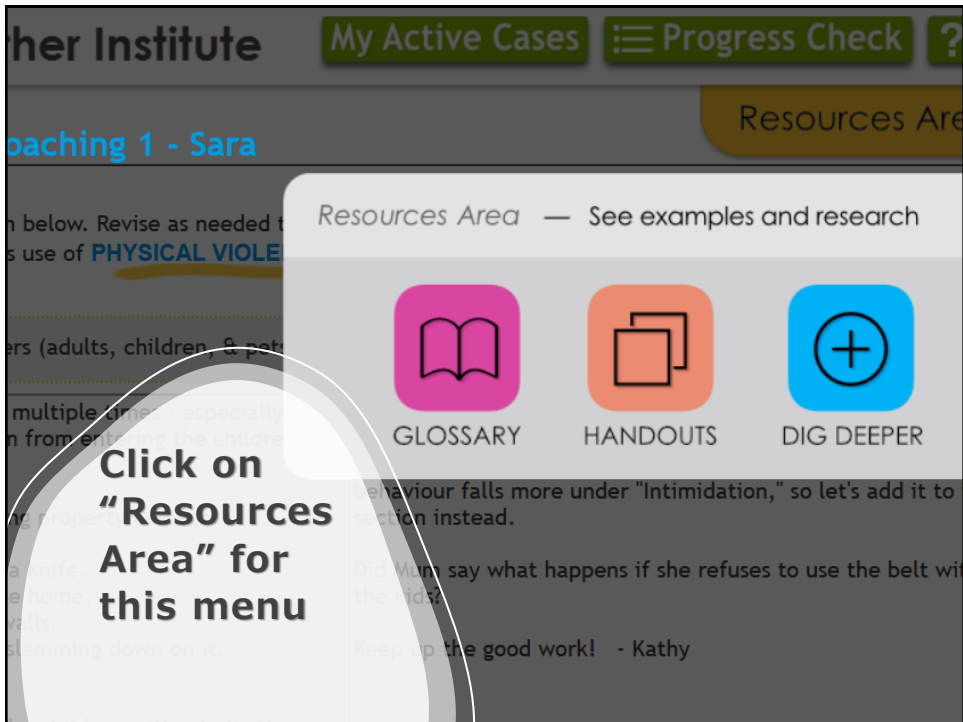
Do I have to go through the tutorial every time I want to map a case?

What's the difference between this tool and the paper Mapping Tool or PDF version?

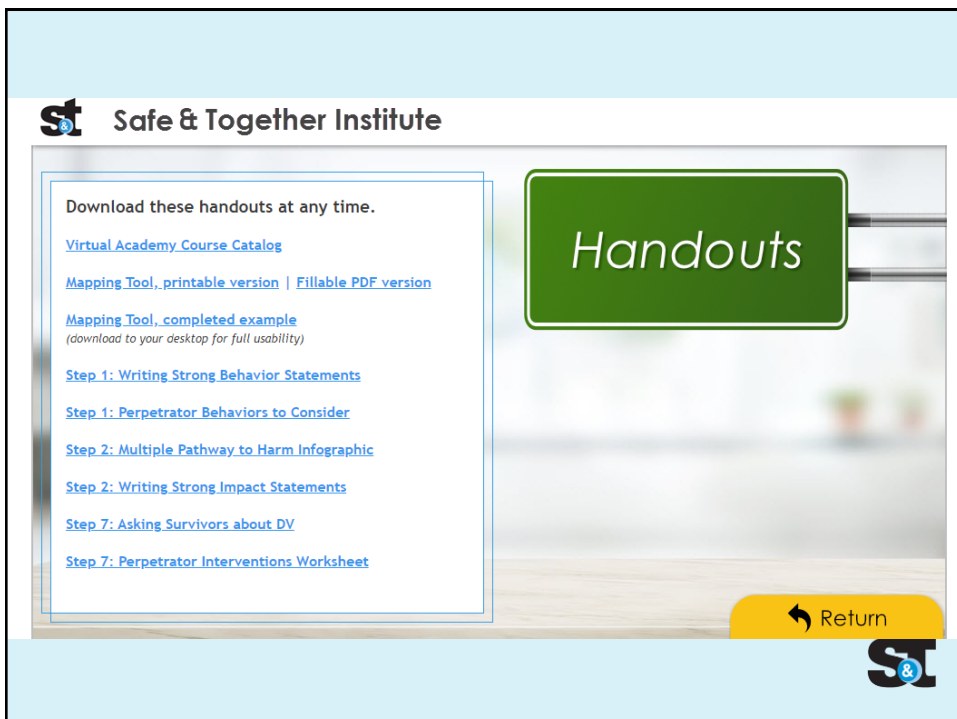
I lost my progress — I don't want to do the tutorials again. Help!

I lost my progress after completing my first 5 cases — I could jump around before. Help!

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You can leave coaching notes in the tool itself

Step 1: The Perpetrator's Pattern

Physical Violence: Coaching 1 - Sara

Resources Area

1 In each text box below, write specific behavior statements describing the perpetrator's use of **PHYSICAL VIOLENCE**.

PREVIOUS NEXT

Toward target household members (adults, children, & pets)	Toward prior partners & other children
<p>Mr. Barnes has shoved Ms. Barnes multiple times - especially when she has tried to prevent him from entering the children's room.</p> <p>Mr. Barnes has caused the following property damage:</p> <p>Mr. Barnes stabbed the wall with a knife.</p> <p>Mr. Barnes has thrown items in the home.</p> <p>Mr. Barnes has punched holes in walls.</p> <p>Mr. Barnes has broken a table by slamming down on it.</p> <p>Mr. Barnes physically disciplines the children with a belt. He expects Ms. Barnes to do the same.</p>	<p>N/A</p> <p>**Sara - the detail on the property damage is excellent! This behaviour falls more under "Intimidation," so let's add it to that section instead.</p> <p>Did Mum say what happens if she refuses to use the belt with the kids?</p> <p>Keep up the good work! - Kathy</p>

Step 1 done view examples done

Just be sure to delete them!

ST

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Case 3: Notebook for Coaching 1 - Sara — Jot down your notes

Have notes for this case? Jot them down here. Select X or Return to exit. T

Step 1: Section 1

You can also leave notes in each case's Notebook

**Sara - the detail on the property damage is excellent! This behaviour falls more under "Intimidation," so let's add it to that section instead.

Did Mum say what happens if she refuses to use the belt with the kids?

Keep up the good work! - Kathy

ST

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Check Your Work at the end of each step

Safe & Together Institute **My Active Cases** **Progress Check** ?

Step 1: The Perpetrator's Pattern **Review and Revise: Brown** **Resources Area**

1 Review your documentation below. Revise as needed to document **specific behavior statements** describing the perpetrator's use of **PHYSICAL VIOLENCE**. Select Next and Previous to move between behavior types.

Toward target household members (adults, children, & pets)	Toward prior partners & other children
<ul style="list-style-type: none"> - Routinely throws objects when angry, sometimes breaking them. For example, once he threw the remote so hard, it dented the wall. He picks up whatever is near him, even if it's one of the kids' toys. -more details 	<ul style="list-style-type: none"> - one police report of a "domestic dispute" occurring when with his prior partner. We don't have many details aside from this report.

Need a review of what to look for? Use these buttons. language scope expectations **PREVIOUS** **NEXT**

Step 1

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Safe & Together Institute **My Active Cases** **Progress Check**

Step 1: The Perpetrator's Pattern **Ready to Move On: Brown** **Resources**

Good work!

You've completed **Step 1: The Perpetrator's Pattern**, and you're ready to move on to **Step 2: Family Functioning**.

Click below.

Step 2: Family Functioning

PREVIOUS

Use the print icons to print or **your work** to keep in your cas

- Print or Save Step 1**
- Print or Save Step 2
- Print or Save Step 3
- Print or Save Step 4
- Print or Save Step 5
- Print or Save Step 6
- Print or Save Step 7
- Print or Save Step 8

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A Reminder



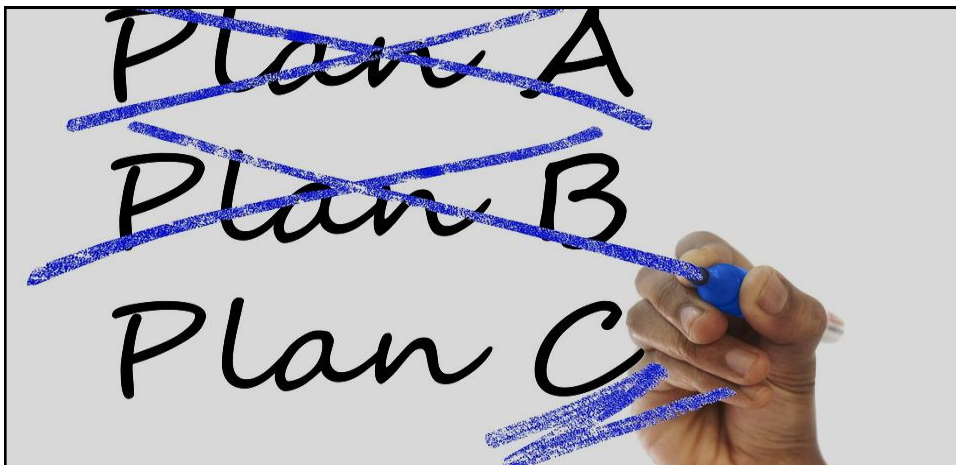
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The web-based Mapping Tool is NOT a substitute for good training and coaching or a replacement for effective family engagement and collaboration with other professionals. It's a tool to support these efforts.

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Coaching on Case Planning

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Impulses in Case Planning



Universal, one-size-fits-all approach



Automatic referrals



Box checking – wasting survivor's (and professionals' time) with unnecessarily tasks



Big swings, fixes – throw everything at the wall



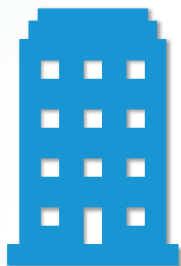
What else?

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Coaching Questions for Case Planning



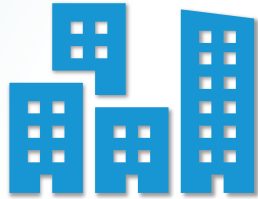
- **Which Concerns Can be Addressed in Our Agency/System?**
 - How can you break down each concern into an actionable goal?
 - What kind of expectations did you set for behavioural change?
 - Did you use the Case Planning Guide for Perpetrators as a resource?
 - How will you measure progress?
 - How did you collaboratively plan with the survivor?
 - How will you check in with her?
 - Do any of the concerns necessitate action from the adult survivor? The children?

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Coaching Questions for Case Planning



- **Which Concerns Need to be Addressed by Other Sectors or Systems?**
 - Are the right services available locally? Virtual alternatives?
 - Are the services culturally appropriate?
 - Can we make a referral?
 - What kind of information can we share?
 - Would a S&T Intersections Meeting (STIM) be appropriate?
 - How can you check in with service providers?

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Coaching Questions for Case Planning




- **What Informal Supports are Available to the Family?**
 - How did you ask the survivor about family, friends, community resources?
 - Would the Ally Guide be a good resource in this case?
 - How did you ask the perpetrator about family, friends, community resources?
 - Would the Choose to Change Toolkit be a good resource in this case?
 - Did you identify any collusion concerns in the perpetrator's informal network?
- **How are you documenting the case planning process?**

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Small Group Exercise

Review the Mapping Tool example and discuss the following:

- ✓ How well did the worker complete the tool?
- ✓ What information is missing or incomplete?
- ✓ What recommendations would you give on case planning?
- ✓ Any other observations?

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Reflections & Takeaways

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Concrete strategies.
Meaningful tools.
Real change.



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PERPETRATOR PATTERN MAPPING TOOL



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PERPETRATOR PATTERN MAPPING TOOL



Using a step-by-step process, this practice tool will help you focus on the most relevant domestic violence case facts to illuminate connections between the perpetrators' behaviours and child and family safety and functioning. The Mapping process will help you better assess and document:

- Risk and safety concerns for children from the perpetrator's behaviours
- Protective efforts by the non-offending (survivor) parent
- The intersections of domestic violence, substance abuse and mental health concerns
- How culture, privilege and marginalization factor into the case
- Worker safety issues
- Next steps in the case

Pick a specific case and use the tool to map the perpetrator's pattern onto the various aspects of the case that inform assessment, practice, decision-making and collaboration. In the final step, you will develop actionable next steps based on the comprehensive assessment of factors you've documented in the previous steps. *NOTE: Box sizes do not correspond to the importance or length of the answer. Please use as much or as little space as necessary to complete the question.*

STEP 1: IDENTIFY THE PERPETRATOR'S PATTERN OF COERCIVE CONTROL AND ACTIONS TAKEN TO HARM THE CHILDREN (1ST & 2ND CRITICAL COMPONENTS)

List the behaviours the perpetrator has engaged in to negatively impact child and family functioning. In this step, you are outlining the perpetrator's behaviour and statements (actions), not the resulting harm¹.

¹ Types of behaviour to include: violence, threats, intimidation, financial, emotional and sexual abuse; undermining the other person's parenting; using children as weapons against the other parent; physical, emotional abuse and/or neglect of the children; violent and threatening behaviour to others outside the family (gang involvement, honor-based violence); behaviours towards interveners (law enforcement, child welfare workers); other violent criminal behaviour; sanctioned violence as part of work/career (martial arts, military service, law enforcement). Scope of information to consider: full range of behaviours during presenting incident: before, during and after; pattern in current relationship; behaviours in prior relationships (towards adults, children, pets); behaviour targeting others outside the immediate family (friends, extended family); behaviours where others (friends, family, or kin) facilitate, acts as agents of or in support of their abuse; lateral violence (displaced violence towards one's peers rather than adversaries as part of a cycle of abuse rooted in factors such as: colonisation, oppression, intergenerational trauma and the ongoing experiences of racism and discrimination); other relevant behaviour (violence in other settings; indirect and direct actions towards children including both abuse and neglect.)

Sources of information to consider: child welfare records; criminal background check; interviews with adult survivor, child survivor, perpetrator; collateral contacts: family, friends, service providers, adult probation/court.

STEP 2: MAP THE PERPETRATOR'S PATTERN ONTO THE CHILD, SURVIVOR AND FAMILY FUNCTIONING (4TH CRITICAL COMPONENT)

Complete the following sentences²:

The perpetrator's behaviour pattern caused the following trauma-related effects on the children:

The perpetrator's behaviour pattern disrupted the family's ecology³ in the following ways:

The perpetrator's behaviour pattern affected the other parent's parenting in the following ways:

How else did the perpetrator's behaviour pattern weaken child and family functioning?

How is the child/children's daily life different because of the perpetrator's behaviours?

2 Things to consider: Multiple pathways to harm includes trauma, effects of the family ecology and effects on partner's parenting. Give examples of the connection between perpetrator behaviour patterns and harm to the child and family functioning. Include examples of physical harm: Has the perpetrator injured the children by physically abusing these children? Other children? Include violence or threats of violence towards partner that create child trauma concerns (driving dangerously leading children to being afraid of being in the car with the perpetrator). Include neglect that creates safety issues: Has the perpetrator's behaviour led to the children being placed in unsafe situations (left alone for long periods of time without supervision)? Include interference with basic needs being met and interference with partner's parenting: Has the perpetrator's coercive control interfered with the other parent's ability to discipline, guide and/or care for the children? Has this led to aggressive behaviour in children? Inconsistent discipline? Include impact of overall coercive control on immediate and overall functioning and stability of household (safe, stable housing or educational disruptions, interference with food or medical care). Connect the children's emotional, behavioural and other issues to the perpetrator's behaviour: Did the perpetrator's behaviour pattern cause, exacerbate or interfere with the treatment of any of the following: trauma-related symptoms and issues such as aggression, depression and/or developmental delays.

3 Interactions and relationships between different members of a family

STEP 3: MAPPING THE PERPETRATOR PATTERN ONTO ADULT SURVIVOR'S STRENGTHS AND PROTECTIVE CAPACITIES (3RD CRITICAL COMPONENT)

List as many behaviours as is known in this case in response to each statement⁴.

The adult survivor did _____ to promote safety of the children in response to the perpetrator's coercive control and actions to harm the children⁵.

The adult survivor did _____ to promote healing from the children's trauma in response to the perpetrator's coercive control and actions to harm the children.

The adult survivor did _____ to promote stability and nurturance of the children in the face of perpetrator's coercive control and actions to harm the children.

What else did the adult survivor do to promote child and family functioning in the context of the perpetrator's behaviour pattern?

4 Contextualizing adult survivor decision-making: We cannot understand the adult survivor's decision-making, particularly their protective efforts and safety planning without understanding the perpetrator's behaviour. Statements can be made to her like: "I'm assuming you've been taking steps to make things better/keep yourself and your children safe in the face of your partner's behaviour. I want to learn more about these efforts." Building a partnership with the adult survivor requires the ability to identify the perpetrator's behaviour, not her behaviour and choices, or the relationship, as the source of the child welfare concern. This foundation allows you to address child safety and risk without blaming the adult survivor and is more likely to lead to collaboration: "Given that we've seen no change in his pattern, we remain concerned for you and your children." "It's not fair but given that he remains dangerous and we've tried everything in our power to address his behaviour with him, we want to work with you to develop a plan that keeps you and your children safe."

5 Some examples may include: has consistent rules, routines and discipline; nurtures the children; the children and the survivor have a clear attachment; survivor provides financially for the children; ensures the children's needs (food, education, shelter, clothing, medical treatment) are taken care of; provides fun for the children; supports the children's social development; provides love for the children. Other examples may include: having a support network; maintaining family or social relationships; using formal resources like therapists, advocates or law enforcement for support; actions taken by the survivor to protect herself from abuse; acting as a positive role model for the children; maintaining employment; obtaining state assistance; working with housing or other systems to provide stability for the family; knowing what is safest for their family.

STEP 4: MAPPING THE PERPETRATOR PATTERN ONTO SUBSTANCE ABUSE AND MENTAL HEALTH (5TH CRITICAL COMPONENT)

List the issues in child, parent and family functioning that the perpetrator's pattern of behaviour may have caused. (e.g., a survivor had never used heroin until the perpetrator coerced them into using)⁶

List the issues in child, parent and family functioning that perpetrator's pattern of behaviour may have exacerbated. (e.g., a child's mental and behavioural health issues have gotten worse because of the perpetrator's coercive control)⁷

List the issues in child, parent and family functioning where the perpetrator has interfered with efforts of other family members to receive treatment or services. (e.g., interfering with the other parent's efforts to get sober or mental health care)⁸

In what ways does the perpetrator's substance use or mental health issues impact their pattern of coercive control?⁹

In what ways do the adult and child survivors' mental health or substance use issues make them more vulnerable to the perpetrator's abuse?¹⁰

6 Additional examples may include: survivor developed Posttraumatic Stress Disorder (PTSD) as a result of her partner's abusive behaviour ; child has been diagnosed with an anxiety disorder due to repeated exposure to trauma and concerns for survivor's wellbeing; adolescent child developed an addiction to opioids after being pressured into using with the perpetrator.

7 Additional examples may include: survivor had three years sober from alcohol until the abuse started and she relapsed; child with depression has become more sad and withdrawn since seeing the perpetrator threaten their mother; perpetrator taunts and verbally berates the survivor when she's experiencing an anxiety attack.

8 Additional examples may include: perpetrator has consistently undermined survivor's efforts to get the children to therapy; perpetrator calls and shows up repeatedly at the addiction treatment center until the survivor was kicked out of programming; perpetrator flushed survivor's mental health medication down the toilet; survivor is unable to get to treatment or mental health appointments because partner steals and hides her keys.

9 Perpetrator threatened suicide in front of the children; perpetrator spends rent money on drugs or alcohol; perpetrator uses mental health or substance abuse as an excuse for their coercive behaviour; perpetrator's substance abuse escalates his physical violence towards survivor and children.

10 Examples may include: perpetrator calls child "weak" for needing mental health medication; survivor's mental health symptoms are blamed for the perpetrator's abuse; when using substances, the survivor is less able to physically protect herself or the children from his abuse; perpetrator uses access to substances to control (e.g., "if you stay, I'll give you some alcohol").

STEP 5: MAPPING THE PERPETRATOR PATTERN ONTO INTERSECTIONALITIES¹¹ (5TH CRITICAL COMPONENT) //

What social status vulnerabilities does the survivor have?¹²

What social status or privilege does the perpetrator have that contributes to their control over their partner?¹³

What attempts has the perpetrator made to manipulate or actively turn child welfare, law enforcement, family court or other professionals against the survivor?¹⁴

11 Intersectionalities are powerful and complex dynamics related to socio-economic status, oppression, gender, sexual orientation and ability issues. This includes things such as race, ethnicity, religion, disability, immigration status or languages spoken. Intersectionalities also consider the diversity of status and move us to explore what the effect may be of multiple forms of oppression on the dynamics of domestic violence.

12 Some examples may include: the survivor's fears of race-related police brutality that makes her resistant to the calling law enforcement; a history of cultural alienation by the perpetrator that has increased her isolation from potential supports; she's undocumented and her partner is a citizen; she doesn't speak English and her partner does; she's part of a tight-knit immigrant community which means it's easy for him to monitor her; her partner is in a position of power in the community; the perpetrator threatens to "out" them as LGBTQ knowing it could result in disownment or violence; perpetrator engages in honor-based violence; survivor is isolated from supports due to lack of culturally or linguistically relevant programming; perpetrator is a court official that leverages their power and influence; the survivor is medically dependent on the perpetrator. Remember: Status is relative to the context. Someone may be in the same minority group as their partner, but have lower status.

13 Examples may include: white privilege; high socioeconomic status; respected member of school board; friends with local judge or law enforcement; military background; respected business owner; respected member of religious community.

14 Consider this: How has the perpetrator used their status or privilege to avoid consequences? To access structural advantages? Examples include: avoiding arrest due to friendship with local law enforcement, using leadership status in community to get out of criminal charges or placement in behaviour change programs, using wealth to file multiple lawsuits against the survivor; using status in tribe to undermine survivor's claims of abuse.

STEP 6: MAPPING THE PERPETRATOR PATTERN ONTO WORKER SAFETY CONCERNS //

List the specific threats to the worker's physical and emotional safety created by the perpetrator's pattern of behaviour.¹⁵

Describe what steps have been taken to mitigate the threats to worker physical and emotional safety.¹⁶

¹⁵ Examples may include: the perpetrator threatened to hurt the worker and/or their family members; the perpetrator has a history of resisting arrest or assaulting peace officers; the perpetrator makes comments like, "I know where you live" or "I know where your kids go to school" as threats. Consider this: Are there intersectionality factors (like race, culture, gender, or sexual orientation) that may impact worker safety? Example may include: the perpetrator is racist and the worker is Indigenous; the perpetrator has a history of asking female workers intrusive questions about their sexual orientation; the perpetrator has called workers derogatory names in the past.

¹⁶ Is there a safety plan in place for worker interactions with the perpetrator? If so, what behaviours does it mitigate? What behaviours are still a concern? Examples may include: supervisor accompanying worker to meetings with the perpetrator; meeting in a public place; setting up meeting spaces that make it easy for worker to escape; reviewing the case with a safety team.

STEP 7: INTERVENTIONS & PARTNERING

Describe what interventions have been used to address the perpetrators' coercive control and actions taken to harm the children.

Describe what interventions have been used to address the perpetrator's AOD and/or mental health issues (if applicable).

Describe what interventions have been used to address the survivor's/children's AOD and/or mental health issues (if applicable).

Describe the steps that have been taken to partner with the adult survivor?

Describe any specific actions taken (not already described above) to support the child survivors?