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## COMPANION DOCUMENT: THE SAFE & TOGETHER™ MODEL AND DOMESTIC ABUSE PERPETRATOR PROGRAMMES



### GUIDE FOR USE

This Companion Document serves as an orientation to the connections between the Safe & Together™ Model and domestic abuse perpetrator behaviour change programmes. It specifically focuses on the Caledonian System as an example of an internationally-recognised perpetrator programme that engages in an all-family approach that mirrors key values and practices in the Safe & Together Model.

This document has implications for areas of Scotland that have both the Caledonian System and the Safe & Together Model, either one, or neither. It may also have utility beyond Scotland in other areas that are considering the connections between domestic violence-informed child protection practice and men's behaviour change programmes.

The goal of this document is to demonstrate the synergies between high-quality perpetrator programmes and the adoption of the Safe & Together Model. This guide will review how the interaction of the two approaches:

- Mutually reinforces shared values and practice;
- Increases the positive outcomes associated with both efforts; and
- Strengthens collaboration between perpetrator intervention programmes, statutory child welfare systems and wider sectors engaging with families impacted by domestic abuse.

This document speaks to professionals in child welfare systems, the Caledonian and those that work with them. It includes the following components, marked by symbols to support your learning:



**PRACTICE  
INDICATOR**



**BEST  
PRACTICE  
EXAMPLE**



**KEY  
POINT**



**SELF-  
REFLECTION  
ACTIVITY**

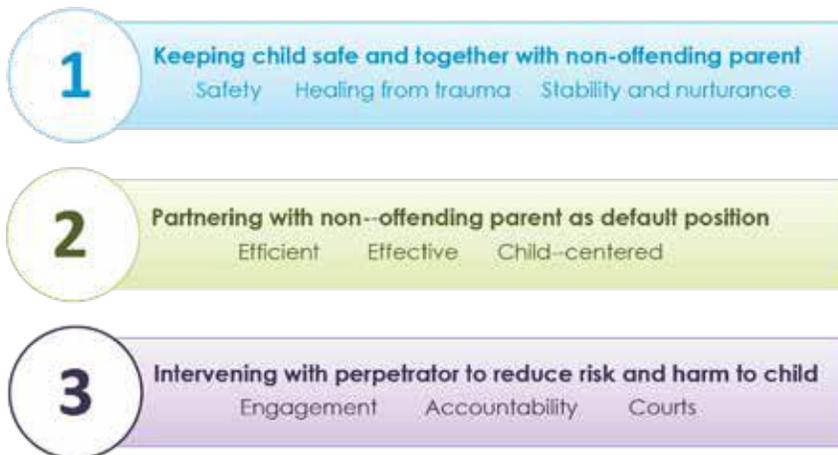


**TALK IT  
OUT OR  
SCRIPT IT**

## Background

The Safe & Together™ Model is an internationally recognised suite of tools and interventions designed to help child welfare professionals become domestic violence-informed. Continuously refined through years of experience implementing the Model across the United States, the UK, Australia and other countries, it is an evidence-based practice that can help improve competencies and cross-system collaboration. The Safe & Together Model, as a systems change framework, offers language, thinking and practices that help increase accountability for perpetrators as parents, reduce victim blaming and improve outcomes for children and families. The theory of change behind the Model suggests that when more practitioners and organisations adopt a perpetrator pattern-based approach, the movement of systems to greater efficiencies in domestic abuse cases and greater responsiveness to survivors will accelerate.

The Caledonian System consists of a behaviour programme for men convicted of domestic abuse offences, and support, safety planning and advocacy services for their partners and children. Accredited as the national programme for Scotland, the Caledonian is available in 19 local authorities, covering 75% of the population. The Caledonian can be delivered on a court or non-court mandated basis.



Interventions with perpetrators, particularly as parents, is one of the principles of the Safe & Together Model and is a key aspect of domestic violence-informed child protection systems. These diverse intervention strategies include: social worker engagement techniques, police and court sanctions, child protection mandates to, family and community engagement, and perpetrator behaviour change programmes. Perpetrator programmes play a unique and critical role by providing specialist support for men's change, increasing accountability, providing support to adult and child survivors, keeping the community focused on the perpetrator's responsibility and providing input into critical systems accountability decisions.



**KEY POINT:** *Perpetrator programmes are ONE of the ways that we can hold perpetrators accountable and support them to change their behaviour. The Caledonian is an example of a perpetrator program that aligns well with the Safe & Together Model.*

### **Creating collaboration between perpetrator intervention programmes, statutory child welfare systems and wider sectors engaging with families impacted by domestic abuse.**

Areas where Safe & Together and the Caledonian System have been implemented have shown improvements in their cross-system collaboration and domestic abuse competency. This extends beyond those engaged directly with both models, to professionals and systems which touch the work they do - including Sheriffs, Children's Reporters, the voluntary sector, and health services including Health Visitors, substance abuse and mental health services. Where either or both models have been implemented, a shared language and approach to domestic abuse has been developed. Sectors develop a perpetrator pattern-based approach and improve their skills in engaging with perpetrators, perpetrators as fathers, supporting them to change their behaviour and evaluating meaningful change.

The implementation of both models requires systems to work together effectively to;

1. develop an understanding of the issues which the models aim to address;
2. gather the staffing, financial and practical resources required for implementation;
3. deliver the training and increase understanding.

This has required the development of multi-agency steering and implementation groups, performance frameworks and clear links with local authority public protection structures, including child protection and criminal justice. This multi-agency project management and governance in-itself provides a rich environment to develop the relationships and insight required for domestic abuse-informed systems.

### **Safe & Together and the Caledonian System: Mutually reinforcing values and implication for practice**

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Safe & Together and perpetrator programmes align when domestic abuse perpetration is viewed as a parenting choice. In order to achieve the aim of perpetrator accountability, it is essential that behaviour change programmes not only engage with men as domestic abuse perpetrators but also as fathers. By drawing links between perpetrators' patterns and the broad-ranging impact on child and family functioning, as well as the connecting it with other forms of child abuse and to wider types of gender-based violence, less blame is placed on the survivor and practitioners are better able to partner with her and increase the safety of her and her children.



**BEST PRACTICE EXAMPLE:** In Edinburgh, currently, all Caledonian Managers and Practitioners have undertaken the Safe & Together Model CORE Training. A working group has been set up as part of the team development plan to ensure Safe & Together is incorporated into everyday practice, particularly in our documentation and recording.



**BEST PRACTICE EXAMPLE:** Across Scotland, there are a number of Caledonian workers who are also Safe & Together Model Certified Trainers. This allows them to bring their expertise in working with perpetrators and the Safe & Together Model when delivering training for either intervention.

There are many examples of how the Safe & Together Model and the Caledonian System express their mutually reinforcing values. This in turn has positive implications for the practice of Caledonian workers and other professionals they work with:

**The perpetrator’s pattern of coercive control** – both models value a wide-ranging assessment of all of the perpetrator’s current and past behaviours. This allows practitioners to map the perpetrator’s behaviour pattern onto multiple “pathways” to the harm he has caused to his child(ren) and the family’s functioning. The pathways the Safe & Together recognises include the ways his behaviour has impacted:

- his partner’s parenting (e.g., undermining her parental authority in the home);
- his children’s safety and wellbeing (e.g., creating unsafe situations where the children might be emotionally or physically harmed); and
- his effect on the family’s ecology (e.g., his behaviours have led to economic or housing instability)

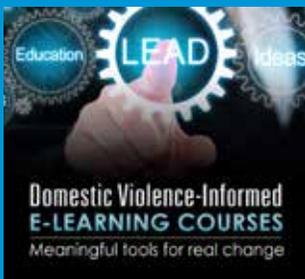
This full understanding, using the Multiple Pathways to Harm framework for assessment, can support the development of behaviourally focussed case plans because they help practitioners to assess what they are most concerned about in terms of impact on the child.



**SELF REFLECTION ACTIVITY** - When you have information about a perpetrator’s pattern, do you draw the links to the impact on the child and family’s functioning? What behaviours are you most worried about? Where do you record this?

There is little chance of real accountability or change without sharing information about the perpetrator’s pattern of coercive control and actions taken to harm the children. In this way, both models use a perpetrator pattern-based approach to break down silos between child maltreatment and domestic abuse. This shift moves practice away from blaming mothers for ‘failing to protect’ their children and increases our ability to partner with her and support child safety.

## Safe & Together E-Courses



**Safe & Together: An Introduction to the Model:** provides a framework for partnering with domestic violence survivors and intervening with domestic violence perpetrators in order to enhance the safety and well-being of children.

**Multiple Pathways to Harm: A Comprehensive Assessment Framework:** provides an introduction to the Safe & Together Model’s Multiple Pathways to Harm assessment and critical thinking framework.

**Intersections: When Domestic Violence Perpetration, Substance Abuse, and Mental Health Meet** provides insight into domestic violence perpetrators’ behaviors that have multiple, complex, intersecting issues.

**Working with Men as Parents: Fathers’ Parenting Choices Matter:** provides an understanding of male parental development and how men’s choices and behaviors impact child and family functioning using the Model Principles, Critical Components, Multiple Pathways to Harm and Practice Tools.



**TALK IT OUT OR SCRIPT IT:** When you hear other professionals using blaming language towards mothers, try 'pivoting' to the perpetrator by

1. validating the person's concerns about the children's safety, then
2. redirecting those concerns back to the perpetrator's behaviours, and then
3. returning to the concerns about the mother.

Try this with a co-worker then look for opportunities to try it in future.



**PRACTICE INDICATOR:** When speaking with survivors, ask direct, non-judgmental questions about the specifics of the perpetrator's behaviours.

For example, "What does it look like when he gets angry or is unhappy?"  
"What does he do or say?"

For example, "You said that he isolated her. Can you describe his behaviour?"  
"What he said or did to isolate her?"  
"How might that have impacted on the child?"

Caledonian workers share their assessment and information about the perpetrator's pattern of control across systems. They highlight the impact of the perpetrator's pattern on the children and family's functioning with child welfare workers so that they have a comprehensive understanding of the resulting harm to the child. Caledonian workers also share their assessment with wider services, like substance abuse and mental health treatment programmes, so that professionals working with the family can understand how the perpetrators pattern may hinder access to their services and how family members may present when using them. For example, a perpetrator might be sabotaging the survivor's ability to access mental health services or undermining plans for the child to attend a counsellor.

The Safe & Together Model also directs professionals in child welfare and wider services to assess perpetrators' patterns and share this knowledge with men's behaviour change programmes. This helps them to develop case plans and success measures linked to clear behavioural change and resulting outcomes for children and family functioning.



**BEST PRACTICE EXAMPLE:** Caledonian workers trained on the Safe & Together Model use the Mapping Perpetrator Patterns Tool to coach peers and multi-agency groups to map the patterns during discussions and meetings. This process has been developed in Edinburgh, where professionals can refer to Safe & Together trained workers for Case Mapping. It is also an action from Multi-Agency Risk Assessment Conferences (MARAC) to refer for a Case Mapping.

The quality of the information sharing regarding perpetrator's patterns of abuse in both directions is critical to accountability and change. Information sharing improves the ability of practitioners to better partner with survivors and to see survivors' decision making in the context of the perpetrator's behaviours. In addition, planning for safety will be better tied to her specific situation and needs. Child protection and other services are much less likely to blame her for the impact of his behaviours on the children.



**PRACTICE INDICATOR:** When making a referral to a perpetrator programme, include as much specific information about the perpetrator's behaviour pattern as possible in your referral. Including all forms of coercive and controlling behaviour—not just violence. This will advance accountability, change and safety efforts.



**PRACTICE INDICATOR:** Conversations about children and domestic abuse should start with mapping the perpetrator's pattern of behaviour. Without this step first, it is much more likely the survivor will be blamed for the impact on the children. Partnering with the survivor is critical to have a full understanding of the perpetrator's coercive control.

### **A gendered analysis of domestic abuse**

Both the Caledonian System and the Safe & Together Model recognise that both men and women can be violent and controlling. However, male against female violence and coercive control in heterosexual relationships is the most statistically common scenario. Men's violence towards women is more likely to be associated with physical injury, which is a proxy for fear and control. Men's violence is more likely to be tied to wider patterns of coercive control<sup>1</sup>.

Societal expectations of men and women as parents are also gendered:

- Lower expectations of men as parents makes it harder to hold perpetrators accountable for the harm they are causing children and families.
- Higher expectations for women as parents means they are more likely to be blamed for the impact of the perpetrator's behaviours on the children.
- Female survivors parenting strengths and protective capacities are more likely to be overlooked because of our general expectations for women as parents.

In recognition of these differences, the Caledonian System only works with male perpetrators in heterosexual relationships. Whilst Safe & Together can be used in all relationship contexts, the approach is gender-responsive and the different expectations placed on mothers and fathers are a critical aspect of the Model.



**KEY POINT:** *A perpetrator pattern-based approach can help avoid gender bias in dual arrests, situations where women use violence and same-sex relationships. The focus on patterns of behaviour helps identify harm and impact in varied circumstances.*

Adopting a gendered analysis and using the Safe & Together critical components can help wider systems work with complex cases where, at times, it can be challenging to assess who is doing what to whom. For example, when a mother who has experienced years of physical abuse and coercive control violently resists and injures the father. Practitioners need to be able to map each person's pattern of behaviour over time and how each parent has contributed to or has undermined the safety, stability and wellbeing of the child.



**PRACTICE INDICATOR:** Practitioners often struggle with assessment when there appears to be two violent parents. Practitioners can map out the full scope of each parent's violent, coercive and controlling behaviours to help them assess who has the control and then move forward to create an informed plan for intervention.



**SELF REFLECTION:** In my assessments, do I seek to understand how male caregivers' behaviours positively or negatively impact child and family functioning or do I use a framework which minimises the importance of men's behaviours in families? Do you see his role as a father as fulfilled when he has a job, has no criminal record or is not actively using substances, or do you look deeper?

<sup>1</sup> Brooks, O., Burman, M., Lombard, N., McFeely, C., McGowan, M. and Whiting, N. 2013. Domestic Abuse and Gender Inequality: An Overview of the Current Debate. Centre for Research on Family and Relationships.

The notion that domestic abuse perpetration is a parenting choice is woven throughout the individual and groupwork components of the Caledonian Men's Programme and the Safe & Together Model. Men who attend the Caledonian, are encouraged to have a child centred approach to parenting, to support rather than undermine their partners' mothering and they are educated about the impact of their behaviour on their children, their partner and how the family functions. By having direct contact with the children, the Caledonian Children's Worker is able to bring children's perspectives into the room and invites them to consider their role in children's healing and improving their children's wellbeing.

The roles that fathers have in families are seen as a critical part of the programme, no matter what the context; whether men are residing with their children, have minimal or no contact, or even for men who do not yet have children.

 **KEY POINT: Both programmes believe fathers' choices matter; that we need to have high expectations of men's parenting abilities and ask them what they are willing to do to increase their children's wellbeing. This concept also allows practitioners to close the gap between practice around domestic abuse and child maltreatment.**

The central role that fathers have in the family is a message which is clearly conveyed by Caledonian and Safe & Together trained workers to others who are working with the family. They lead by example, by having a focus on the fathers in meetings with professionals and family members, within case notes and reports. They exemplify how to talk to men in a way that holds them accountable, recognise the importance of the role they have as a father and show clear expectations of change. Raising expectations of fathers to be equal to that of mothers can improve relationships with survivors, who are often held responsible for their partner's parenting choices.



**SELF REFLECTION ACTIVITY:** Does your assessment of the perpetrator include describing how their behaviour has impacted child and family functioning? Does it hold men to high standards of parenting?



**PRACTICE INDICATOR:** When you are interviewing or in a multi-agency meeting, start your presentation of the domestic abuse in the case by describing the perpetrator's pattern of behaviour and its impact on the child and family's functioning.



**KEY POINT: How we talk and think about perpetrators has important implications for our work with survivors. When we say that perpetration is a parenting choice, not only are we improving our ability to hold perpetrators accountable, but we are also increasing our capacity to partner with survivors because we are reducing their sense of blame and guilt as parents.**



**PRACTICE INDICATOR:** Conversations with survivors should include key elements of the partnering approach from the Safe & Together Model. This starts with making it clear that her partner is 100% responsible for his choices and their impact on child and family functioning.

## Challenging ‘failure to protect’ narratives and partnering with the non-offending parent

The underlying principles of both models challenge the ‘failure to protect’ narrative where mothers are held accountable for the impact that domestic abuse perpetrators’ behaviours have on their children.



**SELF REFLECTION ACTIVITY:** Do you agree that the perpetrator is responsible for their choices and their impact on children? Or do you focus blame on:

- The relationship - “they are dysfunctional”
- The survivor’s choices - “she keeps going back to him”
- The relationship status - “If only they split it would be better”

In which situations do you struggle with the statement “the perpetrator is 100% responsible”? In those situations, why not have a conversation with another Safe & Together trained worker or use the Perpetrator Pattern Mapping Tool.

All Caledonian and Safe & Together trained workers, and specifically the Caledonian Women’s Workers, partner effectively with the non-offending parent as a default position; the second principle of the Safe & Together Model. They respect the survivor’s decision making, validate their strengths and protective efforts and create collaborative safety plans which reflect their choices and assessments. They understand that survivors’ choices and decisions are not easily understood without comprehensive knowledge of the perpetrator’s pattern of abuse. Embedded throughout both models is an understanding that the way in which services respond to mothers who experience domestic abuse impacts their engagement with the service. When case planning or safety planning with survivors, there is not an assumption that they need referrals to services, or are required to engage with them, in order to ‘prove’ they are protecting their children.



**TALK IT OUT OR SCRIPT IT:** When confronted with a survivor’s decision that appears risky or poor in judgment, seek to understand her choices in the context of the perpetrator’s pattern and the family ecology. Try asking her, “Why was it safer for you to do that?” It will help survivors to feel less blame and guilt as parents.

Partnering with the adult survivor is critical to the safety and wellbeing of the parent and their children. Caledonian and Safe & Together trained workers advocate for other professionals to take a non-blaming, partnering approach when working with survivors. They lead by example and show other professionals within conversations, meetings and documentation that the primary source of safety and risk concerns is the perpetrator’s behaviour, not the survivor’s choices and decisions. Partnering, which often uncovers valuable information that survivors hold about perpetrator’s behaviour, allows child welfare professionals to more accurately assess the risk to the child and determine whether the child can remain safely in the family home.



**SELF REFLECTION ACTIVITY:** Think of a recent case you’ve worked on, have you developed a comprehensive understanding of the survivor’s efforts to promote safety, stability and healing with her children? Have you documented it? Shared it with her? Asked if you can share it with others? Validating the survivor’s protective efforts is critical step to partner with her.

## The intersection of domestic abuse, substance abuse and mental health

Domestic abuse does not happen in a silo. However, most systems treat these issues separately. Domestic abuse often intersects in complex ways with other issues, such as substance abuse and mental health. The fifth component of the Safe & Together Model includes intersections; the role of substance abuse, mental health and other socio-economic factors that affect the family’s ecology. Assessing for these intersections in each family ensures practitioners have a holistic understanding of how a perpetrator’s pattern of behaviour is influenced by intersecting issues.



**KEY POINT:** *Perpetrator intervention programs can include assessment of the intersection of coercive control, substance abuse and mental health in their assessments of perpetrators, and coordinate with other practitioners providing treatment.*

One common misconception is that mental health issues or substance abuse can “cause” domestic violence and that accessing substance abuse or mental health services will result in changes in abusive behaviour towards partners. In addition, this view often holds survivors who struggle with mental health or substance abuse more culpable for the abuse perpetrated against them. Alcohol use is a ‘golden thread’ which runs through all of the Caledonian modules, but it is never seen as the ‘cause’ of the abusive behaviour. Both models highlight the importance understanding how perpetrators’ behaviours may cause or exacerbate survivors’ challenges with alcohol or mental health or interfere with them accessing support to heal. This can apply to both adult and child survivors. For example, the perpetrator may sabotage or undermine efforts for their child to attend counselling or support services.

This rigorous analysis of complex intersections is required for child welfare to make difficult risk and safety decisions around children. The information the Caledonian workers hold about substance abuse and mental health issues is invaluable in this framework. Collaborating and information sharing across systems are crucial to moving away from a siloed systems approach to intersecting issues.



**PRACTICE INDICATOR:** Substance abuse and mental health programs can seek to gain permission to communicate with perpetrator intervention program staff in order to share information and coordinate treatment.

All three types of programs can speak to the intersections in any documentation related to behaviour change, including within their case records and child welfare reports.



**TALK IT OUT OR SCRIPT IT OUT:** When you are working with a survivor who has mental health or substance abuse issues or has children who do, find out more about how the perpetrator’s behaviours intersect with those issues. Ask questions to ascertain how the abuse has caused or exacerbated these issues, and how the perpetrator has interfered with treatment by, for example, interfering with the children accessing support services or the survivor attending a support group.



**SELF REFLECTION ACTIVITY:** Often, it is easy for the focus to move towards a survivor’s substance abuse or mental health, even when concerns were initially about the perpetrator’s abuse. Ask yourself and others, ‘if we removed the perpetrator’s pattern, are we still worried about her parenting?’

## **Understanding Intersectionalities**

Intersectionality refers to the interconnected nature of social categorisations such as race, class, and gender as they apply to a given individual or group, which may lead to discrimination or oppression, or increase the perpetrator’s power. For example, domestic abuse perpetrators may gain additional power and their partner greater vulnerability and sense of entrapment when he comes from a privileged group and she from a group that has been historically discriminated against or oppressed. The Caledonian System uses the terms ‘service generated risk’ to describe the way in which society, systems and the individuals within them can work in ways that increase risk to domestic abuse survivors. This includes the way that systems and individuals may respond poorly when working with families from oppressed communities.

By highlighting these connections and making them explicit, practitioners can challenge discrimination and support other sectors to understand the ways in which domestic abuse perpetrators use power and privilege to increase the entrapment and vulnerability of the survivor.



**BEST PRACTICE EXAMPLE:** Respekt is a perpetrator, women's and children's service for Polish families in Edinburgh. It takes into account how Polish history, culture and religion may impact the experience and perpetration of domestic abuse for families that have moved to Scotland. For example, this might manifest itself in mistrust of police, different attitudes to domestic abuse or particular justifications that perpetrators might use for their behaviour. It also takes into account the universal experiences of immigrant communities relating to prejudice or discrimination.

## Cross collaboration and assessing behaviour change

The benefits of both models are enhanced when both child protection and Caledonian workers are trained in Safe & Together. Where a child protection worker has adopted Safe & Together, there is a synergy and clarity to how both parties work with all family members. Given that a primary concern for child protection is whether the domestic abuse perpetrator has changed their behaviour and whether the harm to the child has reduced, Caledonian with its direct contact with adult and child survivors and perpetrators, is an invaluable source of information to make these complex assessments. Information on the perpetrator's progress can be triangulated with reports from others.

However, neither Safe & Together or Caledonian are in the business of creating naïve practice. Often, services can create service-driven actions in case plans which assume that a referral to a perpetrator programme automatically results in changes to damaging behaviours. Neither model assumes that all men who are offered the opportunity to change will do so, or that men who are engaged with using their approach will automatically become better fathers. It is essential that all sectors are able to assess whether interventions have resulted in meaningful change in perpetrator's behaviour and have achieved the ultimate goal of both models – making real changes in the lives of adult and child survivors. This keeps the outcomes of improved safety, satisfaction, and self-determination for both adult and child survivors central; they should have more choices, be more physically and emotionally safe and have improved functioning as a family.



**KEY POINT:** *Perpetrator programmes can be dangerous if there is an assumption that referrals and completion of the service automatically reduces risk to children.*

**Attendance at a programme can:**

- *Convince a sheriff to grant a perpetrator unsafe access to children.*
- *Convince a survivor to give a perpetrator another chance that may not be safe.*
- *Communicate to a perpetrator a false sense that he has done all the work he needs to do to change.*
- *Wrongly communicate to others that he has changed, creating pressure on the survivor to "forgive and forget."*

Both Safe & Together and the Caledonian System focus on creating behaviourally focussed case plans with men, which are connected to positive outcomes for children. They are not reliant on service referrals but rather by evidencing real and meaningful change.



**PRACTICE INDICATOR:** Child protection should make sure plans for families related to domestic abuse include perpetrator behaviour change goals, not just a referral for services. These plans can help other professionals, like Sheriffs or Children's Hearing Panel members, make decisions based on whether the perpetrator has made concrete behaviour changes.

**Case plans need to be assessed against real behavioural change.** A shared, common-sense, cross-sector approach to real change focuses on three important questions for evaluating perpetrator change:

- Naming the behaviours - Has the perpetrator admitted to a meaningful portion of what he has done?
- Claiming the harm - Is the perpetrator able to talk about the impact of his abusive behaviours on others and himself?
- Making real changes - What relevant changes has the perpetrator made in his behaviour pattern?

Collaboration between Safe & Together, the Caledonian, child welfare and wider systems provide the most fertile ground to answer these critical questions.



**PRACTICE INDICATOR:** Reports from perpetrator intervention programs can be formatted to share information about whether the perpetrator has named the behaviours, claimed the harm or made real changes.

- Child welfare can develop case plans that outline the expectation that perpetrators acknowledge their abusive actions, demonstrate an understanding of their impact and show behaviour change.
- Sheriffs, child welfare workers, solicitors, and multi-disciplinary teams can use these questions to guide their own assessments and decisions.
- In court, a sheriff can ask a perpetrator what he has learned about his own behaviour and its impact on others through his participation in a program.
- A child welfare worker can ask a perpetrator's mental health worker to describe the behaviour change goals for her intervention with her client.

**It is clear that there are multiple ways in which programmes like the Caledonian System and the Safe & Together Model align and influence wider systems and practitioners to adopt domestic abuse informed practice. Below is a real life case example which highlights these synergies.**



**BEST PRACTICE CASE EXAMPLE:** Marketa was assessed as high risk by police who recently attended at her home. She and her partner, Aleksander have two children; Agata aged 7 and Jan aged 5. The police officer referred Marketa to a Multi-Agency Risk Assessment Meeting and Sarah, a Caledonian Children's Worker who is trained in Safe & Together, was allocated an action to undertake a case mapping using the Safe & Together Perpetrator Pattern Mapping Tool.

When she looked at the case notes for all members of the family, a picture of Aleksander's pattern of coercive control began to emerge. He had punched Marketa in the face on two occasions, regularly shouted aggressively at Marketa, called her names, banged and kicked doors, walls and shelves, and had threatened to cut her throat. Both children had seen these incidents and their toys had been damaged. On one occasion, Aleksander had thrown a mobile phone at Marketa and it has struck their son, Jan on the head. Marketa had also described a range of controlling behaviours by Aleksander. He timed her when she went to the shops, did not allow her a key to leave the house and locked her and the children in the bedroom when he was drinking. He did not allow Marketa to learn English whilst he was fluent.

When Sarah contacted the other workers involved it was apparent that the Children & Families Social worker was really worried about the children. He felt he was running out of options and was

weighing up whether to remove them from the family home. The school teacher was focussed on the how the children were dressed when they came to school; they had on dirty clothes and the youngest child never had his glasses. Both were critical of Marketa and her parenting and said she was not engaging with them. The Health Visitor reported that the mother had been smelling of alcohol. The police reports showed that the father tended to be the person calling the police after leaving the house with the children during arguments. He presented as calm and in control, whereas the mother was often hysterical when the police attended. He was able to engage with officers in fluent English, but the mother's language was more limited. The focus of all the agencies was on the mother as the main concern.

The Safe & Together trained worker brought the agencies together. She started the meeting by describing the Safe & Together principles. Susan worked through the Safe & Together Mapping Perpetrator Patterns Tool and wrote the information each worker had on the wall under the different sections:

- Identify the perpetrator's pattern of coercive control and actions taken to harm the children
- Map the perpetrator's pattern onto child and family functioning
- Map the perpetrator's pattern onto socio-economic, substance abuse, mental health or other complicating factors
- Implications for practice

She used the Safe & Together Mapping Perpetrator Patterns Tool to gather the facts together and to highlight gaps in information. For example, there was little information about the offending history of the father prior to his move to the UK. As the discussion progressed, it became clear that the Aleksander's behaviour was causing many of the issues which were concerning the professionals involved; disruption to the family routine was impacting on the children being clothed or coming to school with what they needed; Marketa's previous sobriety was being sabotaged by Aleksander who encouraged her to drink; the children's disruptive behaviour in school usually happened the day after the police attended the house. It was clear that Marketa was going to great efforts to maintain the stability and routine in the household and to protect the children physically and emotionally from the impact of Aleksander's behaviour; including sending them to the neighbour or putting them to bed early, talking to them about what happened and encouraging them to go to after school classes.

As a result of the meeting, the Children and Families Social Worker contacted the Police in Poland and found out that there was an order to prevent Aleksander from having contact with his children from a previous relationship. The teachers offered extra time and support to the children and Marketa. Agata's Art Therapist, who was unaware of the domestic abuse, immediately changed her assessment that Agata had ADHD and what interventions she required as a result of what she heard at the meeting. The police, who had been frustrated by Marketa when she had been drinking, began to engage with her differently. They began to see the Aleksander was purposely calling them when Marketa had been drinking or was emotional and that this was a tactic to undermine her with police and social work. They saw that, although he had been previously given credit for reducing his substance use, it had made little impact on his abuse towards Marketa.

Professionals who met with Aleksander spoke to him about the impact of his behaviour on his children and asked what he would be willing to do to support them. Aleksander was referred to the Respekt programme and Marketa was offered a Polish-speaking worker. Both children have remained living with Marketa and the focus of intervention moved to the person causing the child welfare concerns – Aleksander.

# Next Steps

## Safe & Together™ Model Trainings

Safe & Together Institute offers multiple levels of progressive training in domestic violence-informed practices and process change. Certain courses are offered in-person and in a virtual environment through our new Virtual Academy. Visit [www.safeandtogetherinstitute.com/what-we-offer/e-courses/](http://www.safeandtogetherinstitute.com/what-we-offer/e-courses/) for more information.



### Safe & Together™ Model CORE Training

With a focus on assessment, interviewing, documentation and case planning key skills, Safe & Together Institute's CORE Training provides the foundation for domestic violence-informed practice.



### Safe & Together™ Model Advanced Training

Advanced Training builds upon CORE Training and offers a more in-depth look at key practice issues relating to the Safe & Together Model and how to become more domestic violence-informed.



### Safe & Together™ Model Supervisor Training

A domestic violence-informed supervisory practice supports and guides employees working with adult and child survivors, intervening with perpetrators, and managing safety for themselves and the family.



### Safe & Together™ Model Train The Trainer

Due to global demand, we developed Train The Trainer to certify trainers so they can teach our Model curricula in more locations throughout the year and expand the Model's reach worldwide.



### Safe & Together™ Model Advocate Training

Advocate Training, the cornerstone of community efforts to becoming domestic violence-informed, provides expanded training to reduce system barriers and keep families safe and together.



### Safe & Together™ Model Coach Training

The Coach certification prepares professionals to be peer coaches to their colleagues and improves the transfer of knowledge as well as provides ongoing support for your practice.



Concrete strategies. Meaningful tools. Real change.

## CONTACT US

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