



Western  
Education

Centre for Research & Education  
on Violence Against Women & Children

**Knowledge Exchange Workshop on  
Domestic Violence Training  
June 16-17, 2011  
Report of the Meeting  
Toronto, Ontario**

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# **Knowledge Exchange Workshop on Domestic Violence Training June 16-17, 2011 Report of the Meeting**

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## **A. Introduction**

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The Centre for Research & Education on Violence Against Women & Children (CREVAWC) brought together the developers and deliverers of Domestic Violence Training in Ontario that have been funded through the Ontario Women's Directorate (OWD) as well as other key stakeholders. (A summary of the many DV training projects that participants were involved in, is found in Appendix A).

The overall purpose for the meeting was to promote knowledge exchange and planning for domestic violence (DV) training. The meeting also had specific objectives:

- To update each participant on the nature and extent of DV training that has been developed and implemented as part of the Domestic Violence Action Plan;
- To develop a proposed core curriculum that can be used to assess the content of current training;
- To identify best practices that could be applied to new/other training initiatives (e.g. as part of training for the Sexual Violence Action Plan);
- To identify opportunities for collaboration with other trainers/ organizations/ sectors;
- To identify future needs; and
- To identify mechanisms for knowledge exchange amongst Violence Against Women trainers, curriculum developers, post-secondary institutions and professional development organizations.

Peter Jaffe and Barb MacQuarrie of the CREVAWC opened the meeting by noting that the participants all shared a passion to end violence against women and children. This meeting would provide a unique opportunity to work across sectors and to collectively become more effective in our work.

It has become clear that despite the high quality of training and information being developed and shared, we still know that knowledge is not always being picked up, it is not always getting to the right people or it is not registering.

The external context continues to change, with new governments, new public priorities and limited understanding of the depth and breadth of violence against women and children, maintaining sustainability is pivotal to these discussions.

This report provides an overview of the discussions that were held throughout the two days. It also includes a summary of many of the DV training initiatives that were undertaken as part of Ontario's Domestic Violence Action Plan.

The section on Lessons Learned and Promising Practices may be applicable to Ontario's recently released Sexual Violence Action Plan as well as to plans for establishment of a learning institute as recommended by the Domestic Violence Advisory Council in 2009. The Sexual Violence Action Plan is available at:

[http://www.citizenship.gov.on.ca/owd\\_new/english/resources/publications/svapdoc\\_2011.shtml](http://www.citizenship.gov.on.ca/owd_new/english/resources/publications/svapdoc_2011.shtml)

## **B. Domestic Violence Training Initiatives**

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A number of initiatives were presented. Each presenter of a training initiative provided a brief description of the project, highlights of the project and lessons learned. A summary of each project, with relevant contact information, is included in Appendix B.

### **Presentation 1**

<i>Presenter:</i> Robin Mason	<b>Women's College Hospital</b>
<i>Target Audience:</i>	Health Care Providers (Initiative 1)

*Highlights:* Started with a literature review and worked with an expert panel to pull out core competencies. The competencies helped structure the training. The training is developmental. There are a total of 17 units of training of which the first three are required. Each trainee must successfully go through the first three before they can proceed.

*Interesting Observations:*

- The knowledge to practice gap is always a challenge. 98% declared that they will change their practice.

*Lessons Learned:*

- It was difficult to engage the physicians.
- The competencies were "evidence based" and lent credibility to the training.
- On-line education is very effective for people who do not have time to go to face to face training.
- Advertise and promote the training in reputable journals that the potential trainers consider credible.

### **Presentation 2**

<i>Presenter:</i> Robin Mason	<b>Women's College Hospital</b>
<i>Target Audience:</i>	Mental Health and Addiction Workers (Initiative 2)

*Highlights:* There is very little literature on concurrent Mental Health, Addictions and domestic violence. Ten provincial roundtables with experts were held. Based on those meetings, a list of core competencies was developed. Project will target the needs of a wide range of professionals who work with mental health, substance use and VAW issues. In addition to the curriculum, will also develop a province-wide strategy for implementing the training.

### **Presentation 3**

<i>Presenter:</i> Marsha Sfeir	<b>Springtide Resources</b>
<i>Target Audience:</i>	English Language Elementary School Teachers, Principals and Counsellors

*Highlights:* The training came out of the Domestic Violence Action Plan's commitment to create Experts Panel. There were 15 organizations involved in the development of the resources and seven in implementation. The manuals were ready before the training so there was time to focus

on the training delivery approach. The demand was so high for the two-day facilitator training, that one partner contributed funding to make it accessible to more of its members.

*Lessons Learned:*

- It is challenging to hold large institutional partners accountable for meeting deadlines and producing reports. To address this, suggest payments to project partners be linked to deliverables.
- Working with school boards that work on a calendar year when the government funds on a fiscal year posed a number of challenges. Really only had six months to work with them. Need to do this type of training in a two-year timeframe.
- The schools have specific criteria for what qualifies as professional development (e.g outcome based approach). The training was not designed in that way so it did not qualify for professional development credits which was a barrier for some participants.
- Initially, did not prescreen participants for facilitator training. As a result, sometimes ended up with people who were not appropriate or ready for roll-out of training to other educators.
- Need to work within the authority lines of the institution. Needed to spend more time working with the principals because they were sometimes a barrier to teachers participating.
- Need to have very competent facilitators that can deal with both the content of the training, people that do not want to be at the training, and the high number of personal disclosures that occurred as part of the training.

**Presentation 4**

<i>Presenter:</i> Katherine Kehoe	<b>National Judicial Institute</b>
<i>Target Audience:</i>	Judges

*Highlights:* Deliver education to judges in Ontario and across Canada. Judicial education in Canada is “judge-led.” In addition to event planners who manage the logistics of educational programs, NJI has a group of senior advisors who are law professors or lawyers, whose role is to assist judges in developing programs, provide advice on what educational methods would work best, locate speakers, identify topics that might be of interest, and create supporting resources. No judge is required to attend any education programming so it needs to be based on their interest and need. The OWD project led to the development of three national programs focused on domestic violence: one on criminal law, one on family law, and a third that combined the two contexts, to be delivered in October 2012. There were great outcomes: developed strong in-house expertise, developed relationships with numerous non-judge experts in the domestic violence field; and the programs themselves used proven educational methods such as scenarios and videos . The project funds also contributed to the creation of a child protection handbook. NJI is currently working on a project on sexual violence funded by the OWD.

*Lessons Learned:*

- Have to present all the different perspectives.
- It is useful to be aware of community members that can participate in that kind of discussion.

### **Presentation 5**

<i>Presenter:</i> Deborah Aylward	<b>Perinatal Partnership Program of Eastern and South Eastern Ontario</b>
<i>Target Audience:</i>	Health care providers who work with pregnant women and their infants.

*Highlights:* Prepared a presentation and speakers script and posted all the resources that the training was based on. Collaborated with Best Start and had a number of delivery approaches: telemedicine, newsletter, in service neo-natal practitioner training and creation of new screening tools. Have worked with Women's College Hospital and developed two curriculums that targeted family physicians: "New Babies, New Worries," and "Post Partum Blues and Bruises."

#### *Lessons Learned:*

- Need the language and training approach to directly relate to the work that they do.
- Develop a Knowledge Learning Framework that provides an understanding of how the trainees learn and what are the tools and approaches that work.
- Have a neutral host /sponsor and good facilitation because unexpected situations arise and you need someone who can manage those situations.

### **Presentation 6**

<i>Presenter:</i> Nneka MacGregor	<b>Women at the Centre</b>
<i>Target Audience:</i>	Survivors, frontline staff and volunteers

*Highlights:* Survivors are sometimes asked to do presentations or "tell their story" as part of other people's training. Increasingly, survivors want to do their own training and pass on their experience of what worked and what did not work in the system. They are developing a four day training that will support survivors to present their story, put the story in a bigger context, be heard, not be triggered and be safe.

We need to support each woman to increase her confidence and know that she can shape and influence her experience, her life, family and community.

### **Presentation 7**

<i>Presenter:</i> Barb MacQuarrie	<b>Centre for Research &amp; Education on Violence Against Women and Children</b>
<i>Target Audience:</i>	Senior administrators, human resource and health and safety professionals

*Highlights* *The Neighbours, Friends and Family* (NFF) initiative is a highly adaptable awareness campaign that consistently teaches three core skills; recognize warning signs, respond empathetically to warning signs or disclosures and make appropriate referrals. Each community can develop their own approach. "Make it our Business" provides resources based on the NFF campaign that aligns with new legislation (Bill 168).

The original NFF campaign has been adapted for Francophone communities, Aboriginal communities and immigrant and refugee communities. NFF has also been adapted for an Elder Abuse Awareness campaign with funding provided by the Public Health Agency of Canada.

*Lessons Learned:*

- Training is more successful when communities are engaged in the development of the approach that will work for them.
- The Centre plans to offer the workplace training through a social enterprise model.

**Presentation 8**

<i>Presenter:</i> Madeleine Dagenais	<b>Action ontarienne contre la violence faite aux femmes (AOcVF)</b>
<i>Target Audience:</i>	Front-line Workers Serving Francophone Women; Managers and Directors of Francophone VAW Organizations

*Highlights:* Action ontarienne has a clear mandate as an umbrella organization for francophone women to develop resources and training sessions in French that are not just translated, but also culturally appropriate for the francophone community in a minority situation. To enhance quality French services, training sessions are offered to front line workers, and specific training sessions offered to directors and managers on managing resources efficiently in a feminist framework, for example. Our training model is divided in two categories: online core training with or without mentoring and in person ongoing training sessions on more specific issues, offering best practices and various intervention tools. The workshops were developed to reach out to a wide range of front line workers, using accessible language and always including available resources in French in Ontario. The model was developed with a specific focus on francophone issues and realities in a minority context. The online training is web-based and free so that people can access it throughout the province and around the world. There have been a number of products including: training modules, webinars, videos and video guides; pamphlets; training kits, presentations. Over the years, we have partnered with METRAC to adapt and to translate in French their legal information training kits, and are working with MOFIF (Mouvement ontarien des femmes immigrantes francophones) to reach out to francophone immigrants.

*Lessons Learned:*

- Training should be on an ongoing long term basis because the issues faced by women who are victims of violence are getting more complex and because of the turnover in personnel in that field.
- It is important to understand the needs of francophone women and not assume that their needs are the same because they are women.
- Organizations may have knowledge of much of the content in the training but the bigger challenge for many is how to facilitate changes in individual staff practices and how to make organizational changes to support the new practices.

**Presentation 9**

<i>Presenter:</i> Tracey Foreman	<b>Ontario Correctional Services College</b>
<i>Target Audience:</i>	Community and institutional staff who deal with female offenders

*Highlights:* The typical Parole and Probation Officer (PPO) has between 70 to 100 offenders that they work with. In 25% to 70% of each person's case load, domestic violence was either the core offence or was related to the crime. Training was developed that was embedded into the

PPO training curriculum, broadened to include correctional staff and included two provincial conferences. This is a group of workers that are very motivated to deal with this issue and have created their own NFF workplace initiative.

*Lessons Learned:*

- The workplace has a big impact on how the training can be delivered. While people preferred to have face-to-face training, it was prohibitive because of costs and labour disruptions.

**Presentation 10**

<i>Presenter:</i> Ruth Harper	<b>Ontario Association of Children’s Aid Societies</b>
<i>Target Audience:</i>	Child welfare workers

*Highlights:* In 2002, the VAW-CAS training was done as part of the development of joint protocols. It has continued as a major priority for further training. A practice guide has been developed and a two day training has been delivered to the 53 agencies around eleven competencies. Have incorporated a pre knowledge needs assessment and a post knowledge evaluation. The evaluations have been positive. There is a commitment to a six month follow-up with all trainees in order to see the retention and integration into practice.

*Lessons Learned:*

- Need to revisit and reestablish the protocols with the VAW sector.
- It is important to do pre-assessments so that the training is geared to the group.
- It is important to keep the trainers connected and to do ongoing learning. They are doing their own webinars.

**Presentation 11**

<i>Presenter:</i> Peter Jaffe	<b>Centre for Research &amp; Education on Violence Against Women and Children</b>
<i>Target Audience:</i>	Threat Assessment/ Risk Management for community-based service providers

*Highlights:* This initiative is still in process. The Threat Assessment/ Risk Management on-line training is being developed to meet the knowledge and skill development needs of professionals and service providers in the health, social services and education sectors and in workplaces.

Topics to be addressed include:

- the importance of collaborative relationships;
- limits and protocols for addressing confidentiality issues (e.g. guidelines for social service sector);
- threat assessment tools most commonly used in Ontario and other jurisdictions;
- assessing risk and providing support to women from marginalized communities;
- effective methods for monitoring and intervening in high risk cases; and
- communicating with front-line workers in other sectors (e.g. develop guidelines on how to work with the justice sector).

The training will use a variety of formats such as scenarios, work books, activities and checklists to meet the needs of different learning styles (e.g. auditory, visual, tactile). Case studies and reflective exercises will be utilized to make the training relevant to front-line workers in a variety of

professions as well as to those who serve women in northern and remote communities. The training will be presented in an online format that is fully accessible.

### **Presentation 12**

<i>Presenter:</i> Pam Cross	<b>Law Commission Ontario</b>
<i>Target Audience:</i>	Ontario law students

*Highlights:* This initiative is just starting. The intent is to have the VAW curriculum modules be integrated into the education system before students become lawyers. That will ensure sustainability and also avoid the curriculum being taught to those that are already converted. The curriculum will assist law students to understand dynamics of VAW and how it relates to the different aspects of law (e.g. real estate law, family law).

### **Presentation 13**

<i>Presenter:</i> Darlene Angeconeb	<b>Equay-wuk ( Women’s Group)</b>
<i>Target Audience:</i>	Front-line workers serving Aboriginal women in remote communities

*Highlights:* In the 31 communities that Equay-wuk is doing training, there is no safe house. there are only two shelters and most of the communities are fly-in. Have offered four workshops in Sault Ste. Marie and other remote communities. Have also created a “Healthy Living, Healthy Nations” tool kit and have put the material on the website. In the future would like to deliver the training to Healing Lodges, more health care providers and more community leaders. There have been a number of challenges, in particular funding the high cost of travel to deliver training (e.g. \$4,600 return to fly into one northern remote community).

*Lessons Learned:*

- More work needs to be done to get communities involved and committed to taking the training.
- The project funding was too short to build relationships, develop and deliver the training.
- With training there needs to be follow-up. Projects need to be long enough to allow for this.
- Due to high turnover rates, there is a need for ongoing training.

### **Presentation 14**

<i>Presenter:</i> Mandy Bonisteel	<b>Assaulted Women’s and Children’s Counsellor/Advocate Program, George Brown College</b>
<i>Target Audience:</i>	Students who have been vulnerable to violence

*Highlights:* In the first round, students were trained for one occupation only (heating and cooling systems) and all the teachers in that program that would work with the women were trained. However, women dropped out of that program, so the training shifted to a hub model, which allowed women to enter different training programs and different teachers were trained. The initiative has developed materials and workshops to support teachers and is now available to the full college.



*Lessons Learned:*

- Need to provide the women with options, even if it means that you will have to deliver training to a wider audience and a different audience.

**Presentation 15**

<i>Presenter:</i> Mohammed Baobaid	<b>Muslim Resource Centre for Social Support and Integration</b>
<i>Target Audience:</i>	Families

*Highlights:* The Centre was established two years ago and came out of the Muslim Family Safety Project, which was an initiative to build understanding and relationships between Muslim leaders and VAW service providers. Many Muslims have come from collective societies and are now living in a rights based individualized society. They have four major training initiatives: work with CAS to support them to understand how to work with Muslim families, the Safe Integration Project which supports all members of families where violence or a risk of violence has been identified and where the risk factors of pre-migration trauma and post-migration adjustment problems exist, the Family Safety Program intervenes and engages when there is a risk or an episode of violence has occurred and the Family Honour Project is working to identify risk factors for honour based violence and to develop intervention strategies.

*Lessons Learned:*

- Need to engage the community for training to be effective.
- Need to develop a language that is culturally appropriate and respectful. The language being used is "family protection" when talking about VAW.
- It takes time to build relationships. In the beginning everyone was suspicious but over time partnerships have been built.

**C. Lesson Learned and Promising Practices**

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After these presentations, the participants were asked to go into small groups and identify:

- a) Universal lessons learned
- b) Sector specific lessons learned
- c) Promising practices

A number of themes came out of the discussions.

1. **The Domestic Violence training is being done by a diversity of groups to respond to specific audiences.** The strength of this approach is that the training is geared for each specific audience. The weakness is that there has not been the creation of a universal language or set of competencies that would be good to be shared with everyone.
2. **Use principles of adult education in the development and delivery of Domestic Violence training.** For the most part the training is directed to professionals and adults who have their own expertise. It is important that the training delivery and techniques be facilitative instead of directive teaching; experiential; and build on their existing experience and knowledge.
3. **Develop the training with the trainee in mind so that the content is grounded and credible to the learners.** Need to answer the question, "What evidence would be credible

to them?" Some factors that determine credibility for different trainees is that it is: based on their specific needs; evidence-based research; based on lived experiences; credible to community partners; and developed with the engagement of partners.

4. **Identify core competencies/outcomes that inform the framework or knowledge base for the training.** The framework can be developed through literature reviews, engaging groups of experts, or a combination of both. Core competencies that have been identified through a knowledge base establish credibility for the training.

As noted above, language is not consistent in the field. While some use the term "core competencies" as their base knowledge, others use outcomes.

5. **Cultural competency is a core requirement.**

6. **The design of the training emerges out of the core competencies/outcomes.** In addition to identifying outcomes, learning objectives or core competencies, the design of the training needs to reflect a graduated continuum of competencies that is required depending on the specific nature of a person's job. The continuum can start by applying to everyone in the profession, then move to a targeted part of the profession, and then to a part of the profession that deals with a specific issue. The best example was the perinatal training that started with medical professionals and then moved to family physicians and finally to health professionals who were working with mothers who were learning to breast feed.

7. **The design of the training needs to be based on the audience/learners.** The training needs to speak in the language of the participants: linguistically, culturally and in terms of organizational context. Use the pedagogy that the trainees use and develop different formats/tools/processes that support their way of learning. Factors that have to be considered as part of the design of the training include: travel costs (are you expecting people to travel to training); translation costs (are you working with a bilingual group or a multi-lingual group); scheduling (are there times throughout the year where training is not realistic) and privacy and confidentiality factors (what happens when people disclose in a session?)

8. **Develop strategies to get the maximum uptake on the training.** Mandatory training or training that is incorporated into core curriculums not only legitimizes the training, it makes it more sustainable. Other strategies that have been used to get people to take training include: leaders promoting the training, meeting the specific needs of learners, interests and goals (e.g. professional credits), linking to other initiatives, linking to other relationships and expectations of other community partners and meeting regulatory or legislative requirements through the training.

9. **Develop a communication strategy for the training that will appeal and lend credibility to the training.** For example, the Women's College Hospital advertised their training for medical professionals in reputable journals that their intended audience would find credible.

10. **Strategies for delivering the training.** The most consistent message was to be creative and ensure it works for the trainees. Most initiatives used multiple approaches (web-based, scenarios, interactive) that were both self-directed and facilitator learning (not either/or).

Other suggestions were:

- an engaged process;
- engage community partners and establish partners;

- provide take away material; and
  - use appropriate and good facilitators/trainers.
11. **Sustainability** is a weak area for many training initiatives. After the initial funding is provided to produce and deliver specific training sessions, the training material can end up sitting on a shelf. Some strategies that have been used include: embed it in core, existing training; make it mandatory; sell it (social enterprise initiative) or make it accessible to learner in ways that are at minimal or no cost (e.g. put the material on the web).
  12. **Follow-up** on training is not a strong area. Having a long term impact on practice is the desired outcome for most training but it is often difficult to measure for a number of reasons.
    - The time frames for funding are often too short to do follow-up.
    - Evaluation of “knowledge to practice” is not strong
    - Refresh training and a plan to deal with new workers who have not been trained are not often considered in the design of the training.
    - Organizations lose the ability to promote the tools and continue training after funding is gone.
  13. **Respond to the unintended consequences of training.** The consequence of training does not end after training. While we focus our attention on changing practice through training, other unintended consequences have been identified: an increased anxiety or sense of responsibility by some workers; isolation from colleagues who have not absorbed the training; the emotional and social consequence of disclosure done in training and compassionate fatigue for the trainers. Ideally some of these issues would be identified in the training design and there would be supports for both trainees and trainers post training delivery.
  14. **Cross-sectoral collaboration is a highly effective way to develop and deliver training.** The work that is done in the VAW sector is relationship based. There is no one system or sector that can have sole responsibility to identify domestic violence and support women. It is effective when existing service partners can work together and recognize the barriers to working together through the training experience. Common ground and a common starting point can emerge from the experience of collaborative training.

However, this is a very challenging task because of the practice norm of working in silos and the lack of a common language to even talk about the issues. (e.g. violence against women, women abuse, domestic violence, family violence are all terms used to mean the same thing). It is important to recognize leaders in each sector and engage them in the training process.

## **D. Core Knowledge, Skills and Standards for DV Training**

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The participants were asked to develop a set of core competencies that could be a standard for all DV Training. To stimulate the discussions, the core competencies used by Women’s College Hospital were shared. A summary of the discussion and list of core competencies are provided below:

- Be careful to be inclusive of all populations of women and don’t assume a specific norm for “woman.”
- Ensure that there is an understanding of the differential impact of practice on women from diverse social locations embedded in the core competencies.

- While there may be core competencies, how they are transmitted would be directly related to the capacity and the culture of the audience.
- The community of people that will be receiving the training need to feel involved in the development of the training and not have it directed at them. Each core competency needs to be explored from their perspective.
- The training has to have a logical framework. Two were suggested: (Recognize, Respond, Refer, Reduce Risk) and (Impact, intervention, Reflective Practice)
- Any set of core competencies will need constant evaluation and renewal based on what is being learned as training is delivered.

## **Core Competencies of Domestic Violence Training**

### **1. What is domestic violence? (Recognize)**

- a) The characteristics of domestic violence.
- b) The prevalence of domestic violence (using a gender analysis).
- c) The dynamics of abusive relationships.
- d) What is not abuse? (What is a healthy relationship? What does conflict look like in a healthy relationship?)
- e) Understanding violence from a broader context (Anti-Racism/Anti-Oppression, Human Rights, Decolonization framework, Social determinants model).

### **2. What are the impacts of domestic violence? (Recognize)**

- a) What happens to the woman experiencing or having experienced domestic violence?
- b) What happens to her children and family?
- c) What are the health effects and costs of domestic violence?
- d) What is the impact on other relationships (including therapeutic relationships)?
- e) What is the impact of domestic violence on vulnerable populations?
- f) What is trauma and how does it relate to domestic violence?
- g) The legacy of child sexual abuse.
- h) What are the intersectional impacts of mental health, addictions and criminalization?
- i) What is the impact on women when they deal with the social systems (healthcare, police, lawyers, shelters, etc.)?

### **3. Interventions (Respond)**

- a) Having the conversation so trust is built.
- b) Creating safe environments for disclosure.
- c) Respectful disclosure responses.
- d) What else is going on in her life that may complicate intervention?
- e) Risk management/Threat assessment.
- f) Safety plans
- g) The unintended consequences of any intervention.
- h) What supports are available when intervening?
- i) Resource materials to provide to women.

### **4. Self-Reflection (Reflective Practices)**

- a) Personal values, attitudes and beliefs specific to the professional/ worker/learner on domestic violence and working with women.
- b) Engagement with self-care.
- c) Compassion fatigue.
- d) Commitment to continuous learning.

## 5. Professional role and practice (Referral, Risk Reduction)

- a) Roles/responses and mandate.
- b) Documentation, confidentiality and information sharing.
- c) Workplace policy.
- d) Making effective referrals.
- e) Worker's safety when dealing with domestic violence situations.
- f) Understanding the strengths and limitations of the professional framework of our sector/organization that we each work within.

## 6. Inter/Intra Professional Collaboration (Referral, Risk Reduction)

- a) Developing an integrated approach to intervention.
- b) How can we respect confidentiality and do appropriate information sharing?
- c) Mapping the network.
- d) Strengthening professional relationships and networks.

## F. Collaboration Opportunities

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The participants were asked to identify ways that collaboration amongst trainers and organizations could be increased.

### ***Actions that can be taken by workshop participants***

1. Provide link on websites to organizations that are doing VAW training. .
2. Talk with one another before starting a project. (e.g. as part of the call for proposal process)
3. Collaborate on training (e.g. Neighbours, Friends and Family and Women at the Centre work together; survivors become NFF trainers).
4. Extend an invitation to fellow trainers when developing training (to attend, to co-train and to mentor/coach).

### ***Additional resources required***

5. All of the deliverers of domestic violence training to have contact with one another through:
  - An on-line format
  - Face to face meetings
6. Web-based collaboration
  - a. Find a way to track important information (new research, etc) that can be sent out to trainers.
  - b. Have a calendar of training events
  - c. Have information on the web about the project, trainers, products and expertise.
7. Establish a training "association"
8. Track where trainees have gone – moved forward.
9. Open the collaboration to the range of trainers in this area.
10. Be entrepreneurial – what is being offered is professional development. How can it be funded under professional development?

## G. Addressing Sustainability

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How do we sustain the training activity and the trainers that do this work? A number of suggestions were proposed:

- 1. Recognize that we have a product that people want and market it.** There are a wide number of professionals that deal indirectly with domestic violence and are not trained or supported. The law requires workplaces to respond to the issue. Need to describe the problem and how training will help (similar to cancer or MADD campaigns). Marketing training would include the development of a brand (to ensure that quality of training is assured). Other suggestions were:
  - Have a social marketing campaign.
  - Target specific professionals and professional associations.
  - Connect the marketing to other initiatives like NFF which is doing public education about the issue.
  - Use data in the promotional material that is credible and evidence-based. (e.g. why training works? The cost of not doing training)
- 2. Broaden the funding base of who invests in domestic violence training.** The obvious strategy is to interest businesses and corporations to pay for training for their workers or sponsor training for their sector. Another strategy was to work closely with the government to develop a longer-term strategy about training. As more corporations and businesses resource training, they can also become champions and leaders around the message of the value of training.
- 3. Embed training in organizations.** The current practice is to have short term funding to develop a comprehensive training initiative including a needs assessment, development of training materials and delivery of training. When evaluation is part of the initiative it is often short term and does not show the long-term impact of training on practice.

Training that has had a sustained life after the initial funding has been embedded into professional development training of the sector, into core curriculums or through train the trainer programs that are attached to other initiatives. Other suggestions were to target professional associations, to identify domestic violence training as a best practice, and to make it part of the accreditation process.

- 4. Use training delivery products that do not rely on additional or new funding.** Many organizations are creating training that can be housed on a website and people can access videos, manuals and training modules on their own. Self-directed learning is more adaptable to web-based delivery.

## **H. Evaluating the Training Initiatives**

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We need evidence of the long term and sustained impact of training in order to pursue sustainability strategies. People will want to know, 'what is the impact of doing training?'

Fortunately there is usually an evaluation component to current training initiatives. Unfortunately, there is no consistency in what evaluation tools and techniques are being applied. Participants described using pre and post assessments, qualitative and quantitative data collection, audits, file reviews, simulation "clients" or "patients" to test trainees once they are back on the job, and longitudinal studies. Evaluations are done by either independent evaluators or by the in-house staff. Anecdotal feedback is currently not consistently captured in existing evaluation processes.

What is needed to make evaluations an effective tool in marketing domestic violence training and for ongoing learning is:

- Clear outcomes that can be measured.

- Evaluations that are developed early and integrated in different ways into the training initiative.
- Pre and post assessments.
- Create mailing list to “graduates” of trainees to facilitate ongoing communication.
- Funds to provide incentives and fees for training and evaluations.
- Follow-up evaluation forums.
- Tracking system to assess the impact of the training on practice.

The second stage of evaluating training initiatives is using the information. This is a function that needs to be coordinated. One concept is a learning institute that can support evaluation processes at the community level, collect evaluation data and review results. Having evaluation results collected and reviewed allows for gap analysis and an inventory of best practices.

## **I. Recommendations for Funder**

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The final question was, “How can the Ontario government further support and enhance DV training?” Specific suggestions were:

- Have a follow-up to this workshop so that these discussions can continue.
- Recognize that more comprehensive and longer term evaluations are needed and that they must be funded as part of training initiatives.
- Expand the existing list of training initiatives to include other information such as the products that are being produced out of the training and their availability. (e.g manual, video, scenarios)
- Be an advocate for mandatory training for professionals at both the educational and professional association level. Be an advocate for some part of that mandatory training to be cross-training with professionals they will work with in cases of domestic violence.

## **J. Closing Remarks**

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Peter Jaffe and Barb MacQuarrie closed by acknowledging the work being done by the people in the room. They noted that the work that is being done by the people at this meeting continues to keep women and children safer. Training provides others with the tools to play a critical role in making women and children safer.

## Appendix A

### Summary of Professional Training on Domestic Violence

#### Health Sector

Organization	Training Initiative	Description of the Training
<p><b>1. Women's College Hospital</b></p> <p>Robin Mason, PhD. <a href="http://www.women'scollegehospital.ca">Women's College Hospital</a> Tel: (416) 351-3732 x 2764 Email: <a href="mailto:Robin.Mason@wchospital.ca">Robin.Mason@wchospital.ca</a></p>	<p>Health Care Providers (English and French)</p>	<p>This scenario-based, interactive, e-learning platform is suitable for training a variety of health care providers including Emergency Department personnel, obstetricians, family physicians, medical and nursing students.</p> <p>17 modules have been developed. Upon completing the training modules, learners will have more knowledge about domestic violence and its health impacts. They will also know more about how to support women who are experiencing or are at risk of abuse.</p> <p>The competencies were developed through consulting the academic research literature, non-academic literature, experts in the field and a broad group of provincial stakeholders.</p>
<p><b>2. Women's College Hospital</b></p> <p>Robin Mason, PhD. <a href="http://www.women'scollegehospital.ca">Women's College Hospital</a> Tel: (416) 351-3732 x 2764 Email: <a href="mailto:Robin.Mason@wchospital.ca">Robin.Mason@wchospital.ca</a></p>	<p>Mental Health and Addictions Workers</p>	<p>A domestic violence core curriculum, resources and an implementation plan for training mental health and addiction workers across Ontario. This project will include:</p> <ul style="list-style-type: none"><li>• identifying training needs through a series of Round Table sessions</li><li>• a literature review to establish a basis for the development of core competencies;</li><li>• review of curriculum and training materials being used in Ontario and other jurisdictions;</li><li>• an advisory committee to assist with the development of the core curriculum, resources and implementation plan;</li><li>• an implementation plan; and</li></ul>



		<ul style="list-style-type: none"> <li>• piloting the core curriculum, resources and implementation plan.</li> </ul>
<p><b>3. Perinatal Partnership Program of Eastern and Southeastern Ontario (PPESO)</b></p> <p>Deborah Aylward, Project Educator/Perinatal Coordinator  <a href="#">Perinatal Partnership Program of Eastern and Southeastern Ontario</a>  Tel: (613) 737-7600 x3245  Email: <a href="mailto:DAylward@ppeso.on.ca">DAylward@ppeso.on.ca</a></p>	<p>Perinatal Care Providers (English and French, with handouts in multiple languages)</p>	<p>a) Forums:</p> <p>The Perinatal Partnership Program of Eastern and Southeastern Ontario (PPESO) developed resources and provided training in a variety of health care settings on best practice guidelines for the detection of and response to woman abuse in the perinatal period.</p> <p>b) Online modules:</p> <p>In collaboration with Women’s College Hospital, PPESO also developed two online training modules that focus on issues of domestic violence/woman abuse in the perinatal period. These modules develop competencies in the identification, assessment and intervention during the immediate postpartum period (in-hospital) and up to 3 months following the birth of a child.</p>
<p><b>4. Sunnybrook – Osler Centre for Prehospital Care</b></p> <p>Bryan Pett, Director Corporate Development and Strategic Planning  <a href="#">Sunnybrook – Osler Centre for Prehospital Care</a>  Email: <a href="mailto:bpett@socpc.ca">bpett@socpc.ca</a>  Tel: (416) 849-2450</p>	<p>Paramedic Response to Violence Against Women</p>	<p>The Sunnybrook – Osler Centre for Prehospital Care has developed online training for emergency first responders. The first initiative, the “Paramedic Response to Violence Against Women” is available to paramedics and paramedic students in community colleges across Ontario. With the support of the Association of Municipal Emergency Medical Services Ontario (AMEMSO), the training provides a realistic experience and practical skills to better identify, respond and support suspected victims.</p> <p>A separate initiative is being undertaken with Toronto Fire Services, who will pilot the program for Ontario firefighters. Participation in this training will be mandatory for all front-line firefighters in Toronto.</p>

## Education Sector

Organization	Training Initiative	Description of the Training
<p><b>5. Springtide Resources</b></p> <p>Marsha Sfeir, Executive Director  <a href="#">Springtide Resources</a>            Tel: (416) 968-3422 ext. 26            Email: <a href="mailto:msfeir@womanabuseprevention.com">msfeir@womanabuseprevention.com</a></p>	<p>English Language Elementary School Teachers, Principals and Counsellors (English Only)</p>	<p>An English Language Expert Panel for Educators was established to develop training, resources and an implementation plan designed for Ontario elementary school teachers, principals and counsellors. The <b><i>Woman Abuse Affects our Children</i></b> project is helping educators recognize and support children who may be experiencing violence in their home. The implementation plan included the province-wide roll-out of facilitator training sessions. Following this training, participants were asked to lead information sessions/ workshops with colleagues.</p>
<p><b>6. L'Association des directions et directions adjointes des écoles franco-ontariennes (ADFO)</b></p> <p>Nadine Goulet, Directrice générale  <a href="#">L'Association des directions et directions adjointes des écoles franco-ontariennes (ADFO)</a>            Tel: (613) 789-1998 ext. 222            Email: <a href="mailto:nadinegoulet@adfo.org">nadinegoulet@adfo.org</a></p>	<p>French Language Elementary School Teachers, Principals and Counsellors (French Only)</p>	<p>A French Language Expert Panel for Educators was established to develop training, resources and an implementation plan to meet the needs of French language elementary school educators across Ontario. The <b><i>J'ai mal quand on fait mal à maman (When you Hurt Mommy It Hurts Me Too)</i></b> project includes a resource guide for school staff, five animated training scenarios, an information brochure and a promotional poster. Many of these resources have been distributed to elementary schools across Ontario.</p>

## Justice Sector

Organization	Training Initiative	Description of the Training
<p><b>7. National Judicial Institute (NJI)</b></p> <p>Katherine Kehoe, Senior Advisor  <a href="#">National Judicial Institute</a>            250 Albert Street, 4<sup>th</sup> Floor            Ottawa, Ontario K1P 6M1            Tel: (613) 237-1118 ext. 271            Email: <a href="mailto:kkehoe@judicom.ca">kkehoe@judicom.ca</a></p>	<p>Skills-based Education for Judges</p>	<p>The National Judicial Institute (NJI) has delivered skills-based learning opportunities and produced practical education resources about domestic violence and the judicial process. The content and materials were developed by NJI in consultation with judicial leaders and experts.</p>
<p><b>8. Legal Aid Office</b></p> <p>For more information, contact your nearest Legal Aid Office:  <a href="http://www.legalaid.on.ca/en/contact/contact.asp?type=ao">http://www.legalaid.on.ca/en/contact/contact.asp?type=ao</a></p>	<p>Staff in Legal Aid Offices and Clinics</p>	<p>Training resources have been developed for staff in Legal Aid offices and clinics across the province as well as criminal law, family law and refugee lawyers. The focus has been on identifying women who have experienced violence as well as protocols to more effectively assist them.</p> <p>This training has been embedded through an e-learning component and the production and dissemination of training DVDs, and is now available to current and new Legal Aid service providers across Ontario.</p>
<p><b>9. Law Commission of Ontario</b></p> <p>Law Commission of Ontario</p> <p>Tel: (416) 650-8406            Toll Free: 1 (866) 950-8406            TTY: 1 (877) 650-8082  <a href="mailto:LawCommission@lco-cdo.org">LawCommission@lco-cdo.org</a></p>	<p>Ontario Law students</p>	<p>The Law Commission of Ontario (LCO) is leading a project to develop model course components (“modules”) for Ontario law students on issues related to violence against women. The LCO is working with all Faculties of Law in Ontario to design these course components for use in existing core courses and for a new intensive course or workshop that would focus on family and criminal law and skills development for effective management of domestic violence files. These modules will have the potential to be used as separate intensive course or workshop or integrated into existing course. They can also be modified for the Bar Admission course.</p>
<p><b>10. Ministry of Community Safety and Correctional Services</b></p>	<p>Training Manual – Working with</p>	<p>The Ministry of Community Safety and Correctional Services (MCSCS), in collaboration with violence-against-women</p>

<p><b>(MCSCS)</b></p> <p>Lucy Fernandes, Senior Staff Development Officer Ontario Correctional Services College <a href="#">Ministry of Community Safety and Correctional Services</a> Tel: (905) 548-5012 Email: <a href="mailto:lucy.fernandes@ontario.ca">lucy.fernandes@ontario.ca</a></p>	<p>Female Victims of Domestic Violence</p>	<p>experts, developed and delivered domestic violence training to both community and institutional staff who deal with female offenders. Through these two-day workshops, participants learn about the root causes of partner abuse, the long-term effects it has on women and their children as well as strategies for assessing risk. Because of this training, Ontario Correctional Services staff is better equipped to apply appropriate and timely interventions.</p> <p>The training is now imbedded as a mandatory component of the basic training curriculum.</p>
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## Social Services Sector

Organization	Training Initiative	Description of the Training
<p><b>11. Action ontarienne contre la violence faite aux femmes (AOcVF)</b></p> <p>Ghislaine Sirois, Executive Director <a href="#">Action ontarienne contre la violence faite aux femmes</a> 288 Dalhousie, Suite E Ottawa, Ontario K1N 7E6 Tel: (613) 241-8433 Email: <a href="mailto:aocvf@francofemmes.org">aocvf@francofemmes.org</a></p>	<p>Front-line Workers Serving Francophone Women</p>	<p>AOcVF operates a training institute for frontline workers and managers who provide support to French speaking women dealing with violence. Two types of training have been developed:</p> <ul style="list-style-type: none"> <li>• core training, particularly for new staff,</li> <li>• continuing education to keep frontline staff and managers updated on new approaches and specific emerging issues.</li> </ul> <p>Current focus is on inter-relationship of violence against women, mental health issues and addictions; children who witness violence against their mothers; and accessibility law. Includes the development of new tools or the adaptation of existing tools.</p> <p>The institute targets workers in shelters, sexual assault centres, women's centres and counseling agencies serving Francophone women across Ontario.</p> <p>Training is also offered online.</p> <p>AOcVF also offers training on demand (French only) on a variety of topics related to VAW and feminist interventions. (i.e. hospitals, schools, etc.)</p> <p>The J'ai mal quand on fait mal à maman project completed with ADFO includes :</p>

		<ol style="list-style-type: none"> <li>1. Aide-enfants-témoins website <a href="http://www.aide-enfants-temoins.info/">http://www.aide-enfants-temoins.info/</a></li> <li>2. Curriculum and training across the province. Documents, for principals and teachers, were put on the website: in Matériel à télécharger.</li> <li>3. 10 short film clips and a guide <a href="http://www.adfo.org/formation/violence-familiale/">http://www.adfo.org/formation/violence-familiale/</a></li> </ol>
<p><b>12. Equay-wuk</b> (Healthy Families Healthy Nations project)</p> <p>Jennifer Derosiers, Program Director <a href="#">Equay-wuk (Women's Group)</a> P.O. Box 1781 16 Fourth Avenue North Sioux Lookout, ON, P8T 1C4 Tel: 807-737-2214 Email: <a href="mailto:equaywuk@bellnet.ca">equaywuk@bellnet.ca</a></p>	<p>Front-line Workers Serving Aboriginal Women in Remote Communities</p>	<p>The Healthy Families Healthy Nations project developed a sustainable, culturally sensitive, holistic family violence prevention model and delivered training to professionals and service providers in remote First Nations communities North-western Ontario. Participants in the training sessions included police officers, child and family service workers, shelter workers, staff in treatment centres and community leaders, including band councillors and chiefs.</p>
<p><b>13. Springtide Resources</b></p> <p>Fran Odette, Coordinator Women with Disabilities <a href="#">Springtide Resources</a> Tel: (416) 968-3422 ext. 30 Email: <a href="mailto:fodette@womanabuseprevention.com">fodette@womanabuseprevention.com</a></p>	<p>Front Line Workers Serving Women with Developmental Disabilities</p>	<p>Springtide Resources brought together two issues: Violence Against Women and Intellectual Disabilities. This was done to raise awareness of the unique risks and support needed by women with intellectual disabilities. Another objective was to encourage service providers to develop more inclusive practices. As part of this initiative, Springtide established an advisory committee of service providers and women with intellectual disabilities to develop workshops and training resources. A report on emerging practices was developed after a successful pilot with agencies who serve people with intellectual disabilities.</p>
<p><b>14. Ontario Council of Agencies Serving Immigrants (OCASI)</b></p> <p>Immaculate Tumwine, Project Coordinator</p>	<p>Settlement Service Providers</p>	<p>The Ontario Council of Agencies Serving Immigrants (OCASI) developed and carried out a province-wide program to train settlement workers to recognize the signs of abuse and provide women and children at risk with appropriate support. The program was aimed at frontline and</p>

<p><a href="#">Ontario Council of Agencies Serving Immigrants</a>  110 Eglinton Avenue West,  Suite 200  Toronto, Ontario M4R 1A3  Tel: 416-322-4950 ext. 285  Email: <a href="mailto:itumwine@ocasi.org">itumwine@ocasi.org</a></p>		<p>management staff in settlement agencies, as well as volunteers and other workers who serve newcomers.</p> <p>Training content and materials were designed in consultation with an advisory committee drawn from settlement agencies, shelters and other violence-against-women services, Children’s Aid Societies, Francophones and other community-based organizations.</p>
<p><b>15. Ontario Association of Interval and Transition Houses (OAITH)</b></p> <p>Margaret Alexander  Ontario Association of Interval and Transition Houses  <a href="mailto:oaithtraining@web.ca">oaithtraining@web.ca</a>  416-977-6619</p>	<p>VAW workers</p>	<p>OAITH has completed: 4 training films and accompanying discussion guides, updated the training-related sections of its website including added an e-resource library, a policy revision guidebook, an anti-oppression training curriculum and online risk assessment training (includes a face to face component on woman abuse and technology).</p> <p>Currently in the process of developing a series of sector specific training materials that support Violence Against Women (VAW) workers to better advocate and support women and their children who have experienced violence.</p> <p>The focus of the next major initiative is on developing and implementing training to support women whose experiences of violence is further complicated by various social and systemic conditions that increase her risk of further harm (e.g. co-occurring problems such as mental health and family violence).</p>

<p><b>16. Ontario Association of Children’s Aid Societies</b> (Woman Abuse: Where Woman Abuse and Child Safety Intersect.)</p> <p>Ruth Harper <a href="mailto:rharp@oacas.org">rharp@oacas.org</a></p>	<p><b>Child welfare workers</b></p>	<p>Advanced, two-day training program designed for child protection staff to share best practice interventions. OACAS “Critical Connections” Practice guide accompanies the curriculum content and delivery. Includes:</p> <ul style="list-style-type: none"> <li>• Understanding: causes and dynamics of woman abuse</li> <li>• Gender based analysis and power imbalance</li> <li>• Effects of woman abuse on parenting</li> <li>• Differential assessment and effects on children</li> <li>• Lethality and safety planning</li> <li>• Inter-agency collaboration</li> <li>• Engaging men and holding them accountable</li> </ul> <p>Curriculum was developed with committee that included Child Welfare and VAW expertise. Being delivered across Ontario on a demand basis.</p>
<p><b>17. Ministry of Community and Social Services (MCSS) &amp; Ontario Native Welfare Administrators Association (ONWAA)</b> Jeff Bowen Policy Operations and Program Design <a href="http://www.mcss.gov.on.ca">Ministry of Community and Social Services/ Ontario Works</a> Email: <a href="mailto:Jeffrey.Bowen@css.gov.on.ca">Jeffrey.Bowen@css.gov.on.ca</a> Tel: (416) 325-6272</p>	<p>Ontario Works Administrators Serving First Nations</p>	<p>The Ministry of Community and Social Services (MCSS) delivered the training to Ontario Works administrators in eight First Nations communities. With the help of the Ontario Native Welfare Administrators Association (ONWAA), the MCSS adapted an earlier Ontario Works violence-against-women training package to meet Aboriginal needs. Copies of the training materials have been distributed to First Nations Ontario Works sites across the province.</p>
<p><b>18. Ministry of Community and Social Services</b></p> <p>Pamela Roffey Community Services Branch Ministry of Community and Social Services Tel: (416) 327-4866</p>	<p>Front-line Violence Against Women Workers</p>	<p>To address the need for ongoing training in the violence-against-women sector, the Ministry of Community and Social Services conducted needs assessments and supported training initiatives for front-line workers across Ontario. Content and materials were developed in consultation with outside experts,</p>



<p>Email:  <a href="mailto:Pamela.Roffey@ontario.ca">Pamela.Roffey@ontario.ca</a></p>		<p>including Aboriginal groups.</p> <p>Workers from emergency shelters, counselling agencies, transitional and housing support programs and the province-wide crisis line were invited to participated in training sessions dealing with regional issues as well as how best to support Aboriginal women and their children.</p>
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## OTHER (tbc)

Organization	Training Initiative	Description of the Training
<p><b>19. Centre for Research &amp; Education on Violence against Women &amp; Children (CREVAWC)</b></p> <p>Barb MacQuarrie            Centre for Research &amp; Education on Violence Against Women &amp; Children            Tel: 519-661-4023            Email: <a href="mailto:bmacquar@uwo.ca">bmacquar@uwo.ca</a></p>	<p>Threat Assessment/ Risk Management for service providers</p>	<p>The Threat Assessment/ Risk Management training will be developed to meet the knowledge and skill development needs of professionals and service providers in the health, social services and education sectors.</p> <p>Topics will include:</p> <ul style="list-style-type: none"> <li>• the importance of collaborative relationships;</li> <li>• limits and protocols for addressing confidentiality issues (e.g. guidelines for social service sector);</li> <li>• threat assessment tools most commonly used in Ontario and other jurisdictions;</li> <li>• assessing risk and providing support to women from marginalized communities;</li> <li>• effective methods for monitoring and intervening in high risk cases; and</li> <li>• communicating with front-line workers in other sectors (e.g. develop guidelines on how to work with the justice sector).</li> </ul>

<p><b>20. Centre for Research &amp; Education on Violence against Women &amp; Children (CREVAWC)</b></p> <p>Barb MacQuarrie            Community Director            Centre for Research &amp;</p>	<p>Workplaces</p>	<p>The Centre for Research &amp; Education on Violence against Women &amp; Children (CREVAWC) developed and is delivering a province-wide program, NFF@Work, to train workplace stakeholders to recognize, respond and refer in cases of domestic violence/woman abuse. The program has 3 levels and is intended to</p>
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<p>Education on Violence against Women &amp; Children  <a href="http://www.crvawc.ca">www.crvawc.ca</a>  1137 Western Rd, Rm.1118  London, ON N6G 1G7  Tel: 519-661-4023  Email: <a href="mailto:bmacquar@uwo.ca">bmacquar@uwo.ca</a></p>		<p>reach senior administrators, health &amp; safety professionals, human resource professionals and all employees.</p> <p>NFF@Work was developed from the Neighbours, Friends and Families community-based campaign to help workplaces meet new obligations in the Ontario Health &amp; Safety legislation to meet new requirements to prevent and respond to domestic violence.</p>
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<p><b>21. Women at the Centre</b>  Nneka MacGregor  <a href="mailto:nneka@womenatthecentre.com">nneka@womenatthecentre.com</a></p>	<p>Survivors, frontline staff and volunteers</p>	<p>This initiative focused firstly on outreach to different communities to raise awareness about the importance of survivor-led social action, and to inform women about opportunities. It then on increasing the individual and collective capacity of survivors to engage, through discussions and training on the fundamentals of advocacy, effective communication, leadership skills and understanding the systems and their experiences in context.</p> <p>Also developed and delivered training to system workers that was survivor-centred, survivor facilitated and shaped by survivor experiences.</p>
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## Appendix B

### Checklist for DV Training

<b>Core Competency or Outcome</b>
<b>Recognition</b>
<b>1. What is violence?</b> <ul style="list-style-type: none"><li>a) Characteristics</li><li>b) Prevalence (gender analysis)</li><li>c) Dynamics of abusive relationships</li><li>d) What is not abuse? (what is a healthy relationship? What does conflict look like in a healthy relationship?)</li><li>e) Understanding violence from a broader context (AR/AO – Human Rights – decolonization framework - social determinants model).</li></ul>
<b>2. What are the impacts?</b> <ul style="list-style-type: none"><li>a) On the woman experiencing or having experienced violence?</li><li>b) On her children and family</li><li>c) Health affects</li><li>d) Other relationships (including therapeutic relationships)</li><li>e) On vulnerable populations</li><li>f) Understanding trauma</li><li>g) Child sexual abuse legacy</li><li>h) Intersectional impacts of Mental Health, Addictions, Criminalization</li><li>i) Systems that the woman has to interface with.</li></ul>
<b>Response</b>
<b>3. Interventions</b> <ul style="list-style-type: none"><li>• Having the conversation so trust is built.</li><li>• Creating safe environments for disclosure</li><li>• Disclosure response</li><li>• What else is going on in her life that complicates intervention?</li><li>• Risk management/Threat Assessment</li><li>• Safety Plans</li><li>• Unintended consequences</li><li>• Supports available</li><li>• Resource materials to provide</li></ul>
<b>4. Self-Reflection (reflective practices)</b> <ul style="list-style-type: none"><li>• Personal values, attitudes and beliefs specific to the professional/ worker/learner</li><li>• Engagement with self-care</li><li>• Compassion fatigue</li><li>• Commitment to continuous learning</li></ul>
<b>Refer and Reduce Risk</b>
<b>5. Professional role and practice</b> <ul style="list-style-type: none"><li>• Roles/responses and mandate</li><li>• Documentation, confidentiality and information sharing</li><li>• Workplace policy</li><li>• Making effective Referrals</li></ul>

- Worker's safety
- Understanding strengths and limitations of the professional framework – work within one's sector/organization

**6. Inter/Intra Professional Collaboration**

- Developing an integrated approach to intervention
- Confidentiality (information sharing)
- Mapping the network
- Strengthening professional relationships and networks