



## Spotlight #8

# Podcast Transcript

Key:

**F1 = Introduction**

**J = Jenny**

**A = Anna Mitchell**

***F1: Welcome to Spotlight, the Podcast for the domestic abuse sector. In this series, SafeLives are shining a spotlight on parenting through domestic abuse and how it feels attempting to navigate complex systems and agencies, whilst trying to keep yourself and your child safe.***

***In this podcast, Jenny is talking to Anna Mitchell, the UK Lead for the Safe and Together Institute, about the principles of the Safe and Together model as it applies to social work and domestic abuse more generally.***

**J: Hi Anna**

A: Hello.

**J: Can you tell us a bit more about the Safe and Together model and how it came about?**

A: The safe and together model is an approach to domestic violence cases where there's children involved and the name refers to the belief that children's needs are best served when they're kept safe and together with the non-offending parent, who's usually the mother.

So, it's really the belief that keeping the child safe and together is the best way to provide safety, stability, and nurturance for the child. So, it's not related to keeping the perpetrator present, but really about how we find ways to keep the child safe irrespective of relationship status, where the parents are living or what contact the child has with the perpetrator.

So, the models are set out of principles and components. The first is that we need to keep the child safe and together with the non-offending parent, again, to provide safety and healing from trauma, stability and nurturance, and that we need to be able to partner with the non-offending parent as a default position; that we need to have good positive working relationships with the non-offending parent to be able to reach the goal of assessing risk to children to child safety.

The final principle is that we need to intervene with perpetrators to reduce risk and harm to the child, and at times, that might be about direct engagement but it's also just about how we hold the perpetrator accountable with our documentation, when we're speaking at meetings, when we're speaking to different members of the family, and the idea that, really, it's the perpetrator's pattern of coercive control that is creating the risk and harm to the child rather than the non-offending parent's decisions.

**J: What does the safe and together model offer professionals in the domestic abuse sector then?**

A: The Safe and Together model provides a lot for practitioners and professionals in the domestic abuse sector. So, it's a set of principles and components which can be applied to practice and systems, and whilst it's not a direct intervention for families, it's really an intervention for practitioners to support them to become more domestic abuse competent when they're working with families.

So, for example, the core training provides clear tools of how to put the Safe and Together principles into practice when we're carrying out casework tasks. So, the four-day training looks at assessment, interviewing, documentation and case planning, so really focused on practical casework tasks and how we can become domestic abuse competent when we're assessing, interviewing or case planning with all members of the family, be that the perpetrator, non-offending parent, or the child.

So, the training is really practice based but the principles and components are really an approach that can be applied to our systems and processes, and it provides a shared language for all practitioners, so no matter what their goal or which member of the family they're working with, it allows us to think, "what is best practise and what does that look like when it comes to working with domestic abuse and child welfare issues?".

The Safe and Together Institute has a global mission to create domestic violence informed child welfare professionals, communities and systems. So, it's a really big mission that is about systems change, communities, organisations and individual practice, and it provides training system consultation and tools to help all of us become more domestic violence informed.

The creation of my post as the Safe and Together Institute UK Lead is really testament to the commitment that the Safe and Together Institute in the States has to support in localising and developing the model through the UK context.

**J: So, Edinburgh was the first area to undertake training in the model following a domestic abuse case filed audit. What were the main findings and how does the Safe and Together model improve practise and challenge the failure to protect narrative?**

A: This was really back in 2015; my role in Edinburgh as a Domestic Abuse Lead Officer, we undertook case fail audit where we looked at 26 case files where there had been three or more police call outs for domestic abuse in a six month period, and where risk and need assessment had been completed. What we were asking is, "does our practice reflect what we know is good practice in relation to domestic abuse, so why are we being domestic abuse competent on our practice?".

I suppose one of the difficulties was really trying to establish what is good practice in this area, and we looked at the Safe and Together model to provide a good example of what the best practice can look like and we created an audit tool that allowed us to think about whether the case plans, assessments, and overall case files were meeting best practice in relation to domestic abuse.

So, whilst the audit was done in Edinburgh, I know there's been subsequent audits in other parts of Scotland, there's been many decades of research around domestic abuse and the failure to protect narrative, and what the audit found was similar to much of that research.

So, in terms of assessment, there was a focus on physical violence rather than looking at a pattern of coercive control. When it came to the impact on the child, there was a real recognition that domestic abuse impacted on children but it tended to be generalised statements, like, "domestic abuse impacts on children's social and emotional development", whereas what there wasn't was a real look at how specific types of coercive control impacted on an individual child in a specific family.

When it came to assessing best practice around case plans, we found that there was a real focus on separation, moving home and calling the Police as being the primary route to safety for children.

It's not to say these actions don't provide safety in certain circumstances, but it was a one size fits all approach and it really became our definition of what a protective parent was, which meant that we weren't recognising some of the other things that the non-offending parent, usually the mother, is doing on a day to day basis to provide stability, healing, safety and nurturance for their children.

What we found was that the actions rested primarily with the survivor and there was not as much engagement or expectations placed on the perpetrator of the domestic abuse, and this is where we really find there's gender double standards of parenting, where we have really quite high expectations of mothers and where we maybe have less expectations of fathers, and to try and be thinking about how domestic abuse is a parenting choice that the perpetrator is making and holding them responsible within our case plans.

So, that was one of the main learnings that we had in the audit and when we decided to use the Safe and Together model, we found it really fitted a lot of the practice issues that were identified in the case file audit.

So, the model helps practitioners to build skills in partnering with the survivor and recognising their strengths, so really recognising the things they're doing on a day to day basis for their children.

It helps us really understand how the perpetrator's pattern of coercive control impacts on the child, on the child's safety and on family functioning and also interferes with the protective parent's parenting capacity.

It helped us to assess the multiple pathways to harm that there are from the domestic abuse perpetrator's pattern of coercive control, and really think widely about the adverse impact of these behaviours on children.

So, moving away from, "did they see it, did they hear it, were they in the same room, were they being held?", but really thinking more widely about how does the perpetrator's pattern of coercive control impact on their ability to have their friends round after school or how moving home might impact on their ability to have after school activities or contact with wider family members, so it's really aligning with thinking about wider wellbeing.

It also created perpetrator focused case plans which were really honed in on how a particular pattern of coercive control impacted on the child, and made us really think about what are the main things that we are worried about in terms of the child's safety and how can we ensure that the perpetrator is held accountable for that in plans, and how can we make it easier to evaluate whether change is happening.

So, it really put the child at the centre of all of the interventions we were doing, and we did a subsequent case file audit in 2017 after the training, and we found there was a really big improvement in the assessment and case planning, partnering with survivors, and interestingly, it wasn't just within the people who had been trained in the model, but was also throughout the wider team.

So, what we were beginning to see was a change in how people reviewed the issue and a change in systems and discourses around domestic abuse within these settings.

**J: Can you talk a little bit about how the model or if the model takes substance and alcohol misuse and mental health into consideration?**

A: It's a really one of the best models I have seen to help us understand the intersection of domestic abuse, mental health and substance misuse. A critical component of the model is the intersections of domestic abuse for these issues, but it starts to move away from the idea of thinking about these issues as core occurring, and us being able to be a bit more descriptive and analytical about how these issues intersect with each other.

So, what we found, for example, in the case file audit was that where a survivor had substance misuse or mental health issues, there may have been some feelings of her culpability in the abuse or where a perpetrator had substance abuse or mental health issues, that somehow the abuse would stop if they received support for these other issues.

What the model really tries to do is help us think a bit more critically about these intersections, so for example, it would help us describe how the perpetrator's pattern of abuse has caused the survivors mental health and substance misuse issues, how it's exacerbated pre-existing issues, but also how the perpetrator may prevent the survivor from healing from substance abuse and mental health by, for example, stopping them accessing services, undermining their healing or encouraging substance abuse.

So, it's a lot more nuanced in the assessment of how substance abuse and mental health and domestic abuse intersect.

**J: How has the model been received in Scotland and the wider UK?**

A: The model's been received really positively, particularly in Scotland. After the case file audit in Edinburgh and the implementation in Edinburgh began, there was a lot of interest from other Local Authority areas about how we were using it, and there's no over 30 Local Authorities in Scotland, which is about a third of the Local Authorities, who have undertaken training in Safe and Together and there are some areas in England that have also picked up the model.

It's really been quite a grass roots movement in Scotland where individual workers have really taken a leadership role in trying to encourage and support their Service Managers to understand the need for the training to take place and to try and access resources for it.

There's also been a lot of buy in and commitment to the model from national organisations who have created a consortium where we're really thinking about how we can develop the model and embed the model in a more strategic way in Scotland, so it's really important that there's a top down and bottom up buy in to Safe and Together, and that individual workers practice needs to be supported by systems change at the wider level.

**J: Have there been any challenges with the implementation of the model?**

A: One of the biggest challenges has been whether or not services and organisations understand how detrimental a failure to protect narrative is to engaging with families. It can be really difficult when there hasn't been an agreed model or a shared understanding of best practice for people to really understand that having a failure to protect narrative can impact on whether people engage with our services.

So, sometimes the model might not be something that people look at if they don't really understand the problem with current practice. So, people having an ownership of the model can be a challenge and also finding the resources to be able to make those kinds of changes in practice.

But it's not just about changing practice, it's not just about training, there needs to be the systems change so the top down as well as the bottom up.

National organisations, like, Scottish Women's Aid, Bernardo's, The Improvement Service, Social Work Scotland and a number of Scottish Universities have really been quite critical in championing the model at a national level and we're really hopeful that the UK will embrace the Safe and Together model and see the way that it can help us work differently with families affected by domestic abuse and create better outcomes for them.

**J: What are the next steps then?**

A: The next steps, well, immediately there's going to be a conference in Sterling on the 6<sup>th</sup> and 7<sup>th</sup> of June; that's really exciting, it's the first European Safe and Together conference that's been held; there's been conferences in North America and Australia for a number of years but this is the first one in Europe and it's followed very soon after by core training, which is available in July in Sterling.

The Safe and Together Institute has a commitment of running yearly conferences, core training and certification in the UK, which is just really exciting and there's hundreds of practitioners using the model but this could really help those practitioners to get more of a deep dive into different aspects of the model as well as trying to get new people involved in working in the Safe and Together way.

Another thing that is being utilised more and more is e-learning. It can be really useful for helping people understand the basics of the model as well as getting a lot deeper into some of the critical components and different aspects of the model.

The Safe and Together Institute is always producing new materials and working in new ways and innovating, and I have been really impressed by their commitment to trying to take account of local needs when they're implementing the model.

At the same time, understanding that this is a global issue and that we can all learn and support each other across the world has been a big learning for me. Having attended some of the conferences in Australia and North America, there are issues that are different in local areas but there's so much that's the same, and having a global network of professionals, communities and systems is so critical to us being able to work together and support each other to learn how to change practice in relation to domestic abuse.

**J: Thank you for telling us more about the Safe and Together model, Anna, and good luck with the conference and your new role.**

A: Thank you very much.