# Family Violence, Sexual Violence and Violence within Whānau:

WORKFORCE CAPABILITY FRAMEWORK JUNE 2017

New Zealand Government

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## Foreword

## A consistent, integrated and effective response to family violence and sexual violence

Aotearoa New Zealand has one of the highest reported rates of family violence and sexual violence (FVSV) in the developed world. These forms of violence have a devastating impact on our communities, families and whānau. The FVSV workforce (the workforce) tasked with providing services for victims and perpetrators is large and complex. The workforce, which includes government, professionals, practitioners, organisations and volunteers, currently has a wide range of different practices and understandings, resulting in varying degrees of effectiveness in outcomes for victims, perpetrators, their families and whānau.

The Government is committed to establishing a common understanding of FVSV among the workforce and providing an integrated, consistent and effective response to victims, perpetrators, their families and whānau. It's crucial we improve the workforce's skills and competency through better education, training and professional development.

The Family Violence, Sexual Violence and Violence within Whānau Workforce Capability Framework (the Framework) is the foundation document that will support the achievement of these goals. The Framework is the result of the collaboration of government representatives and non-government experts in family violence and/or sexual violence and valuable feedback from government agencies, NGOs, professional associations and academics.

The Framework sets a vision for excellence in the FVSV workforce. It identifies the knowledge, skills and behaviours needed for a safe and competent FVSV workforce in New Zealand. It will enable individuals and organisations to adapt and grow and continuously improve to achieve the highest standards of practice.

Placing the Framework at the core of the FVSV system will deliver integrated, consistent and effective services to victims, perpetrators, their families and whānau; increase the quality of knowledge, skills and behaviours of the workforce; decrease revictimisation and reoffending; and promote continuous improvement within the workforce.

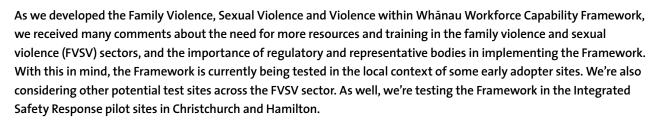
We would like to acknowledge the Workforce Expert Design Group for their pivotal role in co-designing the Framework and the FVSV sector for recognising the need for the Framework and contributing their knowledge and expertise during the consultation process. The focus will now shift to implementing the Framework, which together with other initiatives such as the Family Violence Risk Assessment and Management Framework, will create a more sustainable and integrated national system of services that provides people with the right help at the right time.



Hon Amy Adams Minister of Justice Hon Anne Tolley Minister for Social Development

Co-Chairs, Ministerial Group on Family Violence and Sexual Violence

# Introduction



As early adopter sites give us their feedback about using the Framework, we're developing an Implementation Plan that will enable a capability lift across the entire family violence and sexual violence workforce. The Plan will identify pathways for current and future workforces to obtain necessary knowledge and continuously improve their skills.

We would like to acknowledge the commitment, experience and wisdom that exists among the family violence and sexual violence workforce. Thank you to everyone who shared their insights and welcomed us into their organisations and communities. Also, thank you to everyone who contributed their time in reviewing the Framework.

This is a living document and we look forward to continuing to further develop and review the Framework as the sector begin to utilise and refer to it. It is our hope that we create a capability framework that enables the family violence and sexual violence workforce to provide victims and perpetrators of violence a way forward to wellness and wholeness.

This is a beginning weave. We must dare to dream and systematically sequence a new way of dealing with family and sexual violence in Aotearoa New Zealand. We can champion this – the future weave includes you.

The Expert Design Group

June 2017

'Kua tawhiti ke to haerenga mai, kia kore e haere tonu; he tino nui rawa ou mahi, kia kore e mahi tonu. We have come too far not to go further, we have done too much not to do more!'

- Sir James Henare.

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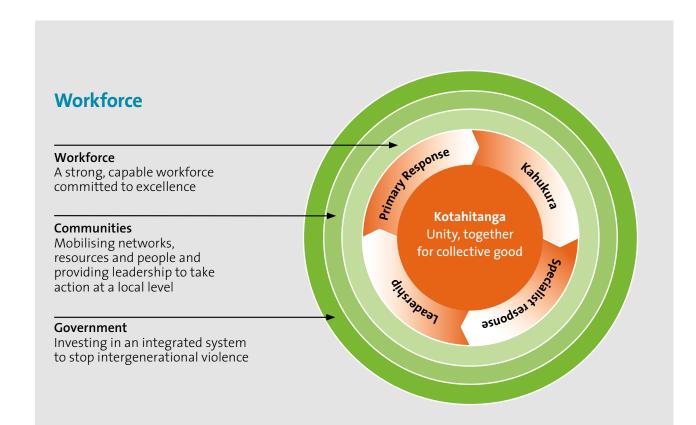
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# Workforce Capability Framework

# PURPOSE

To build workforce and community sector capability to respond safely and respectfully to people experiencing, affected by, and perpetrating family violence, sexual violence and violence within whānau.



MINISTERIAL GROUP ON FAMILY VIOLENCE AND SEXUAL VIOLENCE | Family Violence, Sexual Violence and Violence within Whānau Workforce Capability Framework



# The importance of a common understanding and consistent approach

#### Family violence, sexual violence and violence within whānau

Aotearoa New Zealand has one of the highest reported rates of family violence and sexual violence (FVSV) in the developed world. Our FVSV workforce ('the workforce') is large and complex; it includes government, professionals, practitioners, organisations and volunteers. The workforce has a wide range of different practices and understandings, resulting in varying degrees of effectiveness in outcomes for victims, perpetrators, their families and whānau.

The government seeks to establish a common understanding of FVSV among the workforce and providing an integrated, consistent and effective response to victims, perpetrators, their families and whānau. Improving the workforce's skills and competency through better education, training and professional development is crucial.

# The family violence and sexual violence system

We envisage an integrated FVSV system in which the workforce:

- has a common understanding of family violence, sexual violence and violence within whānau and is enabled to provide a consistent, effective and integrated response to victims, perpetrators, their families and whānau
- has appropriate cultural knowledge, practice, strategies and alliances
- can respond safely and respectfully
- takes collective responsibility to maximise the safety and support of victims
- has shared practice principles that support them to work together safely.

#### Workforce Capability Framework

The Expert Design Group (EDG)\* has co-designed the Family Violence, Sexual Violence and Violence within Whānau Workforce Capability Framework (the Framework). The Framework:

- defines the skills, knowledge and actions needed to provide a consistent, effective and integrated response to victims and perpetrators of FVSV, their families and whānau
- provides a guide to safe practice throughout the FVSV system
- brings to life the intent of proposed reforms to family violence laws in Aotearoa New Zealand
- enables the proposed practice principles in the Family and Whānau Violence Legislation Bill to be actioned
- links to the other workstreams of the Ministerial Group's work programme.

#### Capability vs competency

A competency framework sets the minimum standards of competence. A capability framework sets out how individuals and organisations need to adapt, grow and continuously improve to achieve the highest standards of practice. During its development, the Framework evolved from a competency to a capability Framework as the workforce made it clear to the EDG that it needed to focus on the capability of New Zealand's FVSV sector. Consequentially, the Framework identifies and outlines a base level capability across the sector.

#### Vision

The Framework will:

- enable the Family Violence and Sexual Violence workforce to provide a consistent, effective and integrated response to eliminate family violence, sexual violence and violence within whānau in Aotearoa New Zealand
- inform and be modelled in other practice frameworks used in this country's family violence and sexual violence system.

#### **Purpose**

The Framework will give the workforce a common understanding of family violence and sexual violence, enabling the workforce to provide a consistent, effective and integrated response to victims, perpetrators, their families and whānau. Placing the Framework at the foundation of the FVSV system will result in:

- an increase in the quality of the workforce's knowledge, skills and capabilities when working with victims, perpetrators, their families and whānau affected by family violence, sexual violence and violence within whānau
- earlier and more effective identification of, and response to, whānau and a corresponding decrease in the level of revictimisation and reoffending of FVSV
- clear processes and structures for the collection and sharing of evidence to inform effective practice and update competencies
- a common understanding and consistent practice in FVSV nationwide and understanding of how the quality of practice affects people's safety outcomes.

\* At its meeting on 2 March 2016, the Ministerial Group on Family Violence and Sexual Violence agreed to the establishment of an EDG to co-design a competency framework that would enable the workforce to have a common understanding and consistent approach to FVSV. The EDG is made up of experts in FVSV appointed by the Ministry of Social Development.

# Principles

As New Zealanders, we take pride in being inclusive of all diversity, including all cultures, ethnicities, sexualities and genders. With this in mind, the Framework is underpinned by universal principles that fit the context of Aotearoa New Zealand. These principles will enable the workforce to transcend cultural differences and build relationships that extend beyond the transactional. The principles of the Framework and their definitions (within this context) are:

#### Ūkaipō

#### (To recognise the origins of the voice and the story)

Ūkaipō is the recognition of context and identity. The place people call home should be a place of safety, comfort and nurturance where they feel spiritually, physically and emotionally safe; home should bring a sense of belonging. Children, women and mothers (as the bearers of life) are valued down through the generations.

#### Rangatiratanga (Your voice is heard)

Rangatiratanga is about quality leadership, advocacy and service relationships. Its practice is evidenced by humility, knowledge and knowing the limits of knowledge, skills, use of language and applications that actively enhance mauri ora (the call to claim the right to speak). In this sense, rangatiratanga is mana-enhancing, self-determining, respectful in relationships, mindful of cultural uniqueness, and acknowledges cultural and socio-cultural identity.

#### Whanaungatanga

# (Acknowledge the implications of your actions on your whānau)

Whanaungatanga refers to the practice of actively strengthening, meaningful, sustainable, and purposeful relationships. It acknowledges instances where family and whānau play a key role in perpetrating family or sexual violence, preventing disclosures and denying the harm and suffering caused, thereby negatively affecting a person's recovery. It also recognises the disruption caused to other loving and meaningful family and whānau relationships and seeks to repair these, while ensuring all parties are safe.

#### Aroha (The voice of compassion and empathy)

Aroha in this context refers to the initial acceptance of a person's experience, suspension of judgement, and focusing on strengths to build on for the future while being clear about harm done.

#### Kaitiakitanga (The process will respect you as a whole person)

Kaitiakitanga is about ensuring the vulnerable – the victims or survivors of violence and their family and whānau – are protected.

#### Manaakitanga (your story is acknowledged)

Manaakitanga is behaviour that acknowledges the mana of others as equally or more important than one's own, through the expression of aroha, hospitality, generosity and mutual respect. In this sense it ensures safe space, is respectful, acknowledges boundaries, meets obligations and is mana-enhancing.

#### Kotahitanga

#### (Unity/together for collective good)

Kotahitanga emphasises a collective whole-ofwhānau approach. It refers to unity, being at peace, at one together and the collective good.

# Structure

#### The principles underpin the 6 domains around which the Framework is organised:

#### Domain 1:

Understanding people's experiences of family violence, sexual violence and violence within whānau.

This refers to how people and practitioners understand family violence, sexual violence and violence within whānau frames their responses. Understanding people's experiences (individual and collective) of violence and structural inequities is a prerequisite for safe practice.

#### Domain 2:

Upholding the dignity, values and beliefs of people and their diverse cultural identities.

This refers to the need for people and practitioners to have appropriate knowledge of cultural and other diversities to ensure practice, strategies and alliances to support all victims of family violence, sexual violence and violence within whānau.

It also provides responses to those engaging in harm to maximise engagement and increase internal motivations to change.

#### Domain 3:

#### Enabling disclosures and response to help seeking.

This highlights the need for people and practitioners to recognise victims' help seeking and respond safely and respectfully. Many victims are proactive help seekers; the problem is often with people's responses to their help seeking. Victims may also fear for their own and their children's safety, feel ashamed, and worry that people will not believe them.

When children are experiencing child abuse and neglect or violence within their whānau, they require adults to intervene to ensure their safety and wellbeing. It also recognises help seeking from those engaging in harm who wish to change.

## Domain 4:

#### Using collective action to create safety for victims.

This highlights how the safety and wellbeing of victims is the collective responsibility of agencies, communities, whānau and families. People and practitioners work together to maximise safety and support for victims.

#### Domain 5:

## Using collective action to sustain safe behaviours of perpetrators.

This highlights that a victim's safety depends on the workforce's response to the perpetrator. The workforce engages respectfully with perpetrators, supports them to stop their violence, contains abusive behaviours and escalates the consequences if they continue their violence.

#### **Domain 6:** Working as part of an integrated team.

This highlights the importance of a common understanding and consistent practices that support the workforce to work together effectively.

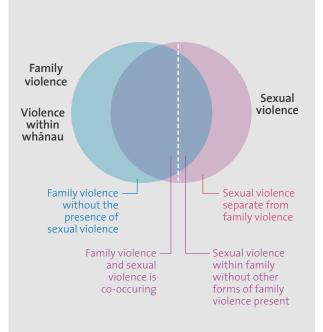
#### Setting the practice direction

The Framework describes the required knowledge, excellence benchmarks and requisite actions expected of the workforce, appropriate to their expertise and role. Each domain has a set of reflective questions to prompt practitioners, leaders and kahukura (community leaders/people who inspire change) to consider their own practice – collectively or individually – reflect on its quality and appropriateness, and note opportunities for improvement so they can provide the most effective assistance for their client.

The Framework complements and supports the practice direction for other frameworks and initiatives including:

- the Family Violence Risk Assessment and Management Framework
- the Children's Workforce Core Competency Framework (under the Children's Action Plan)
- the proposed Oranga Tamariki Agency Framework
- the Social Worker's Registration Board's competencies
- the E tu Whānau Programme of Action
- the Nga Vaka o Kaiga Tapu Pacific Family Violence Training Programme
- the Victims Code (2015)
- the Good Practice Principles for Sexual Harm Intervention released by the NGO sector in collaboration with TOAH-NNEST (Te Ohaakii a Hine: National Network Ending Sexual Violence Together).

# The scope of the Framework



#### Family violence, sexual violence and violence within whānau

The Framework identifies the skills and knowledge needed to give the workforce a common understanding of family violence, sexual violence and violence within whānau, and a consistent, effective and integrated approach to victims, perpetrators, their families and whānau.

#### **Family violence**

Family violence includes all forms of abuse between family members. The three main forms of family violence are child abuse and neglect, intimate partner violence and intrafamilial violence.

#### **Sexual violence**

Sexual violence are sexual acts committed against someone without that person's freely given consent and are generally perpetrated by men, mostly against women and children. It's well documented that most people who perpetrate family violence or sexual violence were exposed to family violence, trauma and poor attachment in childhood. However, we should be cautious in assuming that both types of violence are always committed together, as research would suggest otherwise.

The diagram shows the intersection of family violence and sexual violence, and incidences of sexual violence outside the family.

#### Prevention of sexual violence

The Framework aims to increase capability for the workforce and community sector to respond safely and respectfully to people who have experienced, or are affected by family and/or sexual violence.

The Framework does not yet currently include a practice framework specifically designed for or incorporating those involved in sexual violence prevention work. As at April 2017 it is acknowledged that the Sexual Violence Prevention Advisory Board has endorsed a piece of work that will create sexual violence primary prevention standards which will be aligned with, and reinforce, the standards in the Framework. This work also aims to foster a culture of learning and shared understanding among those working in sexual violence prevention to continue to build capability, infrastructure and consistency of practice.

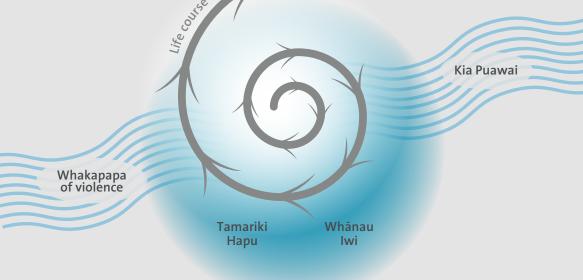
#### Violence within whānau

The Framework takes a wide view of family violence and includes family violence and violence within whānau. This is an important distinction as Māori per capita continue to be over-represented in family violence statistics as both victims and perpetrators.

Similar to other colonised indigenous peoples, the causes of violence within whānau are a complex mix of historical and contemporary factors. An effective response to violence within whānau must consider these factors. Multi-level approaches to prevention and intervention that incorporate Māori cultural imperatives are recommended. Understanding the difference between violence that occurs within whānau and family violence is critical in terms of any prevention and intervention practices, policies and legislation.

The Framework acknowledges that whānau are important vehicles for healing and change – even amid their complex lives and trauma. To be vehicles for change, they need culturally-informed help, support and approaches tailored to their unique histories and requirements. Invariably this involves restoring and strengthening their cultural identity and connections to bring back the protectiveness cultural traditions offer. Disrupting and transforming violence within whānau is about building safe and supportive communities, and growing safe and healthy whānau that are culturally connected. (Wilson D, 2016)





All violence has a whakapapa (genealogy), and a trauma informed process acknowledges the historical and contemporary implications of this. As we (tangata katoa - all peoples) journey through this process, Whakaaro Rangatira that are informed by a broad spectrum of theoretical and practice understandings from Te Ao Māori (the Māori world) and Te Ao Pakeha (the European world) are applied to the issues and behaviours. The transformative outcome of safety, restoration, healing and development that should follow is Kia Puawai (Blossoming).

#### Levels of the workforce

The Framework categorises the workforce's responses into 3 levels: primary response, specialist response and leadership. The Framework also takes into consideration the integral role of kahukura and community champions in communities. The community section outlines examples of current programmes that recognise the interface and role the community have in preventing and responding to family violence, sexual violence and violence within whānau.

- **Primary Response:** an informed response by a person who is not a specialist in the fields of practice encompassed by the Framework. This level of response includes generalist social services agency staff, Police, health professionals, teachers, Courts staff, social workers and counsellors. It also includes specialist practitioners working outside their area of specialisation, such as family violence workers providing a first response to survivors of sexual violence.
- **Specialist Response:** a highly-skilled response by a person who has specific training and experience in a particular field of practice encompassed by the Framework, supported within an agency that has expert knowledge of that field of practice embedded at all levels of the organisation.
- Leadership: supervisors, team leaders, senior managers, general managers, CEOs etc in any agency that comes into contact with people who may be experiencing sexual violence, family violence, or violence within whānau, and who are responsible for supporting staff to provide a safe, well-informed response.
- Kahukura and Community Champions: leaders and champions who might be found in communities, iwi, hapu, whānau, neighbourhoods, schools, churches, etc who inspire change.

#### Reframing our view of gendered patterns of violence

Throughout the literature, family violence and sexual violence are often presented as gendered issues in that most perpetrators are male and most victims are women and children. While this analysis is correct, this focus can lead to male victims and female perpetrators becoming 'invisible' in the literature and to services.

It's more helpful perhaps to 'reframe' our view to see family violence and sexual violence as a violation that negatively impact on all victims – including boys and men – who suffer this abuse. This view acknowledges the gendered nature of family violence and sexual violence but allows a broader parameter when defining 'victim/survivor' or 'perpetrator'.

Kahukura – the people who inspire change in families, whānau and communities.

#### The rights of children

Children are born into a family or whānau and derive their identity partly from being a member of that family or whānau. However, children aren't just an extension of their parents; they're human beings who have moral status, a distinctness, and an individuality growing towards autonomy.

The United Nations Convention on the Rights of the Child sets out 54 articles on the basic human rights of every child. These include survival; protection from harmful influences, abuse and exploitation; and full participation in family, cultural and social life. The key articles of the Convention in relation to the Framework are Article 3, 12 and 19 (Referred to in the Glossary).

#### TAPU: cultural construct for the protection of mokopuna

A fundamental principle for Māori in the traditional raising of their young was the underlying belief that children were gifts from Atua (spiritual deity) and Tūpuna (ancestors) through their geneology. This meant they were tapu – or sacred, special, protected – and specific rules applied to them. Any negativity expressed to them was breaking that tapu. The whole whānau put mokopuna at the centre of their lives. (Eruera. M and Ruwhiu, L.,2015)

#### Children are mana tamaiti/tamariki

The Framework and its principles are intended to align with the Oranga Tamariki Agency Framework currently in development, and the following three overarching principles in context of dealing with vulnerable tamariki/mokupuna in Phase two legislation reform of the Children, Young Persons, and Their Families (Oranga Tamariki) Legislation Bill (224-1) <u>http://www.legislation.govt.nz/bill/government/2016/0224/</u> latest/DLM7064516.html:

- Mana tamaiti/tamariki
- Whakapapa
- Whanaungatanga

...children aren't just an extension of their parents; they're human beings who have moral status, a distinctness, and an individuality growing towards autonomy.

# A system level capability framework

#### A system level framework requires activation and coherence at each layer of the system to embed the shift in practice articulated in the Workforce Capability Framework

#### Safe practice is enabled in an integrated system where:

- People around the table agree safe strategies
- Strategies are implemented by a body of skilled practitioners

Legislative level

#### Organisational level

Organisational practice frameworks direct safe practice Safe and sustainable organisations enable safe practice

Workforce level A capable workforce Skilled practitioners respond as appropriate to their workforce role

> Practitioner level Individual practitioners respond safely

- Skilled practitioners work within safe and supportive organisations
- Safe legislation directs and mandates safe organisations, safe workforces, and safe practice

#### The Family and Whānau Violence Legislation Bill proposes

- Practice principles support decision-making and responses outlined in the Framework
- Codes of practice reflect practice detailed in the framework
- Information sharing requirements enable safe practice detailed in the Framework

#### Informs the development of consistent and coherent practice frameworks and accreditation processes

- Ministry of Vulnerable Children (Oranga Tamariki) Practice Frameworks
- Family Violence Risk Assessment and Management Framework
- Ministry of Justice Restorative Justice and Non Violence Programmes guidelines
- Specific cultural frameworks, for example: E Tū Whānau, Nga Vaka o Kaiga Tapu
- Revision of existing practice guidelines in the future (for example, the Ministry of Health Violence Intervention Programme guidelines)
- Social Workers Registration Board new competencies
- CareerForce training schedule (for example, Level 5 Health and Wellbeing Diploma)

#### Informs Ministry of Social Development family violence and sexual violence provider contracting

Contracting arrangements specify safe practice requirements as detailed in the Framework

#### Informs procurement processes to address identified service capacity issues

#### Informs workforce capability development plans

- Integrated Safety Response (ISR) pilot testing and ISR multi-agency training
- Single agency training and development needs, for example, NZ Police
- Influence foundational learning within tertiary education facilities

#### Supports consistency in safety actions taken by practitioners

· ISR pilots: practitioners/safety teams make safe decisions informed by the framework

#### Reflective practice questions support safe practice

- ISR context
- Individual, peer and practice leader review, multi-agency, and governance boards

**Community** mobilised to prevent family violence, sexual violence and violence within whānau

# Organisational capability

Organisations have a responsibility to provide a supportive environment which enable their practitioners to continuously lift their capability and safely respond to victims and perpetrators seeking help. For safe practice, organisations should provide support structures and opportunities for supervision for their practitioners. Here are a few questions to prompt organisations when reflecting on their responsibilities.

Organisational responsibilities	Reflective practice questions
<ul> <li>The organisation's:</li> <li>leadership team regularly reviews the areas of education (knowledge) and training (development of skills) they need to provide practitioners to respond safely and respectfully to people affected by family violence, sexual violence and violence within whānau.</li> </ul>	<ul> <li>Does your organisation provide training to ensure sound understanding of the dynamics and effects of family violence, sexual violence and violence within whānau at all levels of the organisation?</li> <li>Is ongoing professional development available, supported and encouraged?</li> </ul>
<ul> <li>The organisation:</li> <li>the organisation works to ensure equitable and non-discriminatory services are available and accessible to all who need it</li> <li>undertakes work with other agencies and key stakeholders to increase understanding of and responsiveness to service users' needs and to address any discriminatory practices</li> <li>has genuine feedback processes for people working with the organisation which safely seek their experiences of the services and the wider systemic response.</li> </ul>	<ul> <li>Does service user feedback demonstrate that service users feel listened to and believed?</li> <li>How does your organisation ensure the language and practice in the organisation is anti-discriminatory?</li> <li>Is there a robust complaints procedure in place to challenge racism and other forms of discrimination?</li> </ul>
<ul> <li>The organisation:</li> <li>has a focus on supporting and safeguarding its own practitioners who are experiencing or perpetrating family violence, sexual violence and violence within whānau</li> <li>takes steps to ensure practitioners are suitably skilled and equipped to work with people experiencing or perpetrating violence and their families and whānau before beginning work with them</li> <li>has named people within the organisation with expertise in family violence, sexual violence and violence and violence and violence and violence within whānau, whom practitioners can consult with and be mentored by.</li> </ul>	<ul> <li>Are there helpful and practical policies and procedures in place that support safety for practitioners and people experiencing or perpetrating family violence, sexual violence and violence within whānau?</li> <li>How does your organisation balance the development of resources or procedures to help practitioners avoid mistakes with considering what resources are needed to help practitioners build expertise?</li> </ul>

Organisational responsibilities	Reflective practice questions
<ul> <li>The organisation:</li> <li>employs managers with responsibility for case management who have a minimum of three years' relevant experience and specialist knowledge</li> <li>uses assessment tools which emphasise the recording of uncertainties and potential concerns, contextual issues and structural inequalities, as well as actual and concrete factors</li> <li>understands case management as a continuous dynamic process in which decisions are taken and previous decisions are reviewed regularly in order to best manage the risks posed by people perpetrating violence and maximise the safety of victims (child and adult)</li> <li>provides regular supervision for practitioners, which provides the opportunity for critical reflection and evaluation of their work, support in the emotional nature of the work and cultural supervision.</li> </ul>	<ul> <li>Are clinical practitioners mentored and supervised by managers/senior practitioners with advanced understanding of the dynamics and effects of family violence, sexual violence and violence within whānau?</li> <li>How do you ensure that sufficient time and resources are provided to help practitioners know how to collect the information required by the assessment form, and how to analyse the information collected?</li> <li>Is clear, timely and precise documentation of clinical work expected at all times?</li> <li>Are clear boundaries in place about working hours and workload to reduce the risk of burnout?</li> <li>Are your clinical practitioners well trained, well resourced, and well supervised?</li> </ul>
<ul> <li>The organisation:</li> <li>understands the challenge of multi-agency working is much wider than the practitioners involved</li> <li>can evidence its contribution to integrative working with other agencies.</li> <li>The organisation's senior leadership team:</li> <li>support the clarification of multi-agency roles and responsibilities</li> <li>behave in ways which secure commitment, engender trust and mutual respect between agencies (NGO and statutory)</li> <li>work to foster understandings between agencies.</li> </ul>	<ul> <li>Is there a culture of consultation, both internally and externally?</li> <li>Are your practitioners engaged in information-sharing forums to ensure consistent and safe management of high-risk people?</li> <li>Is there an established culture across agencies of giving feedback about actions taken in response to referrals, whether by individuals or multi-agency panels?</li> <li>If your organisation referrers a case to a service, how do you know they have engaged with the client, family, whānau?</li> <li>Are there agreed processes for addressing problematic practice? How often do agencies feedback about good practice?</li> <li>Do you have community and statutory links at all levels of the organisation?</li> </ul>

# Domain 01

Understanding people's experiences of family violence, sexual violence and violence within whānau

#### **OVERVIEW**

How people and practitioners understand family violence, sexual violence and violence within whānau (victimisation and/or perpetration) frames their responses. Understanding people's experiences (individual and collective) of violence and structural inequities is a prerequisite for safe practice.

01

Knowledge of:		Excellence is:	Your actions are:
Primary and specialist response	<ul> <li>Family violence, sexual violence and violence within whānau as a gendered pattern of harm:</li> <li>concepts of primary victim and predominant aggressor (intimate partner violence)</li> <li>women's use of violence</li> <li>range of victims</li> <li>why some people are targeted for sexual violence</li> </ul>	<ul> <li>Practitioners understand:</li> <li>social patterns of harm reflect the fact that structural inequity and community values and beliefs support the perpetuation of male violence against women</li> <li>the predominant aggressor is the person who is the principal aggressor and who has a pattern of using violence to exercise coercive control. The primary victim is the person experiencing ongoing coercive and controlling behaviours from their partner</li> <li>women's use of violence in heterosexual relationships within the wider context of men's violence against women is often aimed at resisting their male partner's violence in an attempt to keep themselves and their children safe</li> <li>intimate partner violence occurs in rainbow partnerships and the needs and dynamics of victims and perpetrators in rainbow relationships may be slightly different to heterosexual ones</li> <li>men can be victims of their female or male partner</li> <li>children experiencing violence are always considered victims whether physically harmed or not</li> <li>sexual violence is mainly committed by males; youth and adults against children and/or adults</li> <li>myths about rape include ideas that victims ask to be sexually abused, that if they didn't run away fast enough to avoid the offender then they must have wanted it, that children and women lie about sexual assault, and that it doesn't really hurt people</li> <li>breaking gender norms may make people, particularly sexuality and gender diverse adults and children, a target for violence</li> </ul>	<ul> <li>Identify the person who is the principal aggressor and who has a pattern of using coercive control</li> <li>Use accurate language which makes visible how women's use of violence in heterosexual relationships is different in intent, meaning and impact to men's violence against women</li> <li>Always address the safety and wellbeing needs of children</li> <li>Support Rainbow identities in families and do not allow them to be used as an excuse for violence (Note this is particularly important for children as research shows children who break gender norms are more likely to be targeted for violence within families, including child sexual abuse).</li> <li>Identify the "rape myth" which has been used to groom, keep a person quiet and to isolate the person. Do this in such a way that it can make sense to the victim why they have responded in the way that they have.</li> </ul>
	<ul> <li>Intimate partner violence and the concepts of:</li> <li>self-determination</li> <li>coercive control</li> <li>entrapment</li> <li>resistance</li> </ul>	<ul> <li>Practitioners understand:</li> <li>intimate partner violence as a crime against a person's autonomy (mana) and self determination (rangatiratanga)</li> <li>coercion involves the use of force or threats to intimidate or hurt victims and instil fear, and control tactics are designed to isolate the victim and foster their dependence on the abusive partner</li> <li>the cumulative effect of an abusive partner's behaviour entraps victims and impedes their ability to be self-determining</li> <li>victims can also be entrapped by their social context, and the multiple inequities they may be experiencing</li> <li>victims resist their partner's violence but their resistance most often cannot stop the violence</li> <li>abusive partners anticipate and sabotage victims' acts of resistance, this further entraps the victims</li> </ul>	<ul> <li>Document the abuse history</li> <li>Use accurate language, which highlights the victims' resistance and reveals the levels of entrapment they are experiencing</li> <li>Ensure adult victims who are parents (most often the mother) are not held responsible for the abusive partner's violence and its cessation</li> <li>Act as a 'safety ally' with adult victims and identify what actions you can take to maximise their and their children's safety</li> <li>Ensure individual children's safety and wellbeing needs come first and are considered and actioned accordingly.</li> </ul>

Knowledge of:	Excellence is:	Your actions are:
<ul> <li>Forms of child abuse and neglect</li> <li>children and young people's experiences of intimate partner violence</li> <li>cumulative harm</li> <li>Intimate partner violence and child abuse and neglect as entangled forms of abuse</li> <li>community values and understanding of child abuse and neglect</li> <li>child sexual abuse is often perpetrated by those who are not seen as violent or neglectful of their children, but rather as upstanding parents and members of the communitypeople perpetrating child sexual abuse target children who are isolated and therefore vulnerable</li> <li>breaking gender norms may make children vulnerable to being targeted for child abuse and neglect</li> </ul>	<ul> <li>Practitioners understand:</li> <li>child abuse and neglect includes all forms of physical and emotional ill-treatment, sexual abuse, neglect and exploitation that actually or potentially harm a child's health, development or dignity</li> <li>cumulative harm refers to the effects of patterns of circumstances and events in a child or young person's life which diminishes their sense of safety, stability and wellbeing. Cumulative harm is compounded experiences of multiple episodes of abuse or layers of neglect. Constant daily impact on the child or young person can be profound and exponential, covering multiple dimensions of their life</li> <li>intimate partner violence and child abuse and neglect are not separate co-existing forms of violence</li> <li>an act directed towards one individual is at the same time intended to affect another or others in order to keep and/or increase control over both, that is, hitting/threatening a child in front of their mother</li> <li>the entangled nature of intimate partner violence and child abuse and neglect shifts the focus from assessing the protectiveness of adult victims to assessing the level of risk and danger a partner's/ parent's abusive behaviour poses to both child and adult victims</li> <li>an adult's reputation as a parent and community member should not undermine your response to a child disclosing abuse, or a child who has said or done something that would normally lead you to question whether sexual abuse might have occurred</li> </ul>	<ul> <li>Distinguish the 5 sub-types of child abuse and neglect: physical abuse, sexual abuse, neglect, emotional abuse and exploitation</li> <li>Identify children and young people that are experiencing or at risk of child abuse and neglect and respond quickly and effectively</li> <li>Make it clear in your work that the decision to abuse an intimate partner who is a parent is a parenting decision that affects the children</li> <li>Identify the impact of the abusive partner's/parent's behaviour on the family and whānau</li> <li>Support children and young people who break gender norms, including those from Rainbow communities, to be treated with respect inside families</li> <li>Investigate all concerns about child sexual abuse.</li> </ul>

Knowledge of:	Excellence is:	Your actions are:
<ul> <li>Family violence and sexual violence, and violence within whānau in rainbow communities</li> <li>sex, sexuality and gender-diverse people</li> </ul>	<ul> <li>Practitioners understand:</li> <li>violence occurs in Rainbow partnerships, recognising the different features and dynamics of intimate partner violence in these partnerships and how to adapt responses accordingly</li> <li>Rainbow identified family members may be at heightened risk of being victims of family and sexual violence because of their identity</li> </ul>	<ul> <li>Mainstream family violence services demonstrate they are safe and welcoming spaces to sex, sexuality and gender diverse people experiencing or perpetrating violence</li> <li>Sexual violence services are clear about what services they can offer people, and provide good referral systems if they are not able to provide a service</li> <li>Mainstream practitioners are responsive to the needs of to sex, sexuality and gender diverse people experiencing or perpetrating violence</li> <li>Demonstrate knowledge of specific forms of abuse inside Rainbow relationships</li> <li>Demonstrate knowledge of minority stress and the impacts of stigma, exclusion and discrimination on people from Rainbow communities and the impacts this may have on help-seeking</li> <li>Demonstrate openness to follow victim's or perpetrator's lead on describing their relationships and gender identity, including appropriate pronoun use</li> <li>Guard against pathologising Rainbow community members through assuming abuse is linked to, or has caused their sexuality or gender identity.</li> </ul>
'Honour'-based violence	<ul> <li>Practitioners understand:</li> <li>the honour code that means women must follow rules that are set at the discretion of male relatives and which are interpreted according to what each male family member considers acceptable</li> <li>breaking the rules is seen as destroying the good name of the family and is deserving of punishment</li> <li>honour crimes are not solely about individual men controlling the lives of individual victims (often women); rather they are about community norms, social policing and collective decisions</li> <li>difficulties and trauma associated with honour-based violence and forced marriage are exacerbated by language barriers</li> <li>sexual violence is often at the heart of this violence and it is often the last to be disclosed</li> </ul>	<ul> <li>Believe victims when they say they will be punished for perceived/or actual transgressions of the family's `honour code'</li> <li>Do not speak with the victim's family's members, unless they have told you which family members are supportive and safe</li> <li>Interpreters if required must be independent, and not from within the victim's locality and have an understanding of the culture of the linguistic community they are interpreting for</li> <li>Seek the assistance of specialist family violence services</li> <li>Be aware that sexual violence might have formed part of the violence, but do not directly ask about this unless you can fully support the person through a disclosure of sexual violence and immediate access to appropriate services.</li> </ul>

Knowledge of:		Excellence is:	Your actions are:
Primary and specialist response	<ul> <li>Sexual violence and the concepts of:</li> <li>grooming</li> <li>silencing</li> <li>rape myth</li> </ul>	<ul> <li>Practitioners understand:</li> <li>sexual violence is a crime against a person's autonomy and self-determination and that it impacts on one's physical, cognitive, emotional and spiritual self</li> <li>grooming can include: <ul> <li>developing a loving relationship with a person who does not have enough close relationships</li> <li>threatening harm to the victim or to others that the victim loves</li> <li>physically restraining</li> <li>gradually encroaching on the person's sense of personal space and bodily integrity.</li> </ul> </li> <li>sexual offenders target those who won't tell or won't be believed, or use other means to silence them</li> <li>those who sexually harm others use "rape myth" to groom, to</li> <li>quiet, and to isolate their victims</li> </ul>	<ul> <li>Support the survivor's actions to take back self- determination</li> <li>identify grooming and act against this, listen for rape myth being used by the victim to blame themself or by their family to blame them and challenge this when sufficient alliance has been developed to do this safely and effectively.</li> </ul>
	Violence in gang affiliated families	<ul> <li>Practitioners understand:</li> <li>gang association has very different risks, dangers and consequences for women and children compared to men. Gangs can be environments where members have collectively compounded and exacerbated assumptions about women's roles and justifications for violence against women and that there is a heightened risk of experiencing intimate partner violence for women involved with gangs</li> <li>trauma histories may be present for many gang members and gang-involved women. People who have experienced abuse in childhood, lived amidst violent and, frequently, deprived communities, and who have previous histories of abuse, can be at risk of gang association</li> </ul>	<ul> <li>Demonstrate an understanding of the risks for child and adult victims living in gang environments</li> <li>Adapt your practice to address people's lived experience so you can respond effectively.</li> </ul>

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Knowledge of:		Excellence is:	Your actions are:
Primary and specialist response	<ul> <li>Sexual violence specifics</li> <li>sexual violence occuring within family violence and non-family violence contexts</li> <li>sexual violence and the correlation to historic abuse</li> <li>harmful sexual behaviours</li> <li>dynamics of grooming and secrecy in relation to harmful sexual behaviours</li> <li>issues relating to collective shame and culturally sanctioned responses to sexual violence</li> <li>dynamics of sexual violence and the impact for victims (including family and social groups)</li> <li>sexual violence inside Rainbow communities</li> </ul>	<ul> <li>Practitioners understand:</li> <li>sexual violence is one of the causes of greatest harm in our society, with impacts ranging through life-long anxiety and social withdrawal, disabling levels of shame and self-blame, suicide alcohol and drug use, drop in socio-economic status, teen pregnancy and parenting, relationship and sexual difficulties family violence and involvement in crime</li> <li>a responsive sector that understands the impacts of sexual violence also understands the impacts of rape myths, can stand against them, and collectively act against the sexual objectification and degradation of women and children and others of low social power</li> <li>sexual violence often leads to anxiety and depression. Victims of sexual violence are highly likely to develop post traumatic stress disorder which can have a deteriorating course leaving people unable to function in family, work or community across their lifetime</li> <li>recovering from sexual violence is made difficult because it is not able to be talked about in most contexts, our society subscribes to much rape myth which blames the victim, and our culture is saturated with media which sexually objectifies and demeans women and children</li> </ul>	<ul> <li>Commit to develop your understanding about sexual violence dynamics</li> <li>Recognise how the deeply embedded experiences of shame, and the complex nature of intrafamilial offending may preclude truth-telling regarding sexual violation</li> <li>Avoid pathologising Rainbow identities as the cause or consequence of sexual violence.</li> </ul>
	<ul> <li>The cumulative and compounding impact of trauma</li> <li>historical trauma</li> <li>intergenerational family violence</li> <li>how inequities affect people's experiences of violence, including minority stress resulting from stigma, exclusion and discrimination</li> <li>high rates of revictimisation of sexual violence, both inside and outside the family</li> </ul>	<ul> <li>Practitioners understand:</li> <li>the cumulative and compounding impact of trauma from multiple forms of violence, how this can affect people individually and collectively, and how the transmission of trauma can occur across generations</li> <li>how inequities (including inequity arising from ages, sex, sexuality or gender diversity and status of individuals within the family and whānau) affect people's experience of violence and the resources available to them</li> <li>the cultural context of sexual violence which means that a person doesn't recover from this as from other traumas as it is usually not able to be talked about and that it is not a discrete event limited to either time or offender</li> </ul>	<ul> <li>Demonstrate an understanding of how people make sense of their lives in the context of exposure to violence and trauma</li> <li>Adapt your practice to address people's lived experiences and respond to the inequities they may be experiencing</li> <li>Be informed by an understanding of the cultural context of sexual violence and its capacity to retraumatise and revictimise.</li> </ul>

Knowledge of:		Excellence is:	Your actions are:
Primary and specialist response	Historical trauma and trauma derived from cultural alienation	<ul> <li>Practitioners understand:</li> <li>how trauma is made worse by people's disconnection from ancestral lands or from their cultural identity, and can support their development of or search for systems and resources for coping</li> </ul>	<ul> <li>Demonstrate you recognise the impact of trauma on people and its impact on their ability to heal</li> <li>Demonstrate that victims can feel safe and confident with you walking alongside them helping them to access the appropriate community and agency supports which will enhance their safety and wellbeing</li> <li>Ensure victims' voices are the loudest and most significant ones.</li> </ul>
	<ul> <li>Trauma-informed and violence-responsive practice:</li> <li>children and young people</li> <li>adults</li> <li>family and whānau</li> </ul>	<ul> <li>Practitioners understand:</li> <li>trauma affects the whole person: their mind, brain, body, spirit and relationships with others. Manifestations of trauma are largely socially constructed, and conventional approaches to trauma are ethno-centric; non-European victims show trauma differently and may not respond to conventional European approaches to trauma</li> <li>trauma-informed responses need to address the safety and wellbeing needs for those experiencing and perpetrating violence</li> <li>trauma in childhood impacts on every aspect of development with life long consequences (Atwool, 2000)</li> </ul>	<ul> <li>Commit to developing your knowledge about the understandings and manifestations of trauma within different cultures so you can communicate, engage and practice in a culturally responsive trauma-informed manner</li> <li>Use trauma-informed practices to bring compassion and empathy to your work with people experiencing and perpetrating violence</li> <li>Engage with children using trauma-informed practices and approaches</li> <li>Recognise and address the trauma experienced by children and take steps to prevent their revictimisation.</li> <li>(Refer to Oranga Tamariki Trauma Informed Practice Framework)</li> </ul>
	Family violence and sexual violence as a person's pattern of abusive/ harmful behaviour that can encompass multiple victims (child and adult)	<ul> <li>Practitioners anticipate the possibility of multiple victims including hidden and future:</li> <li>current partner(s)/victims of the person perpetrating violence and their children</li> <li>future victims and their children if the person's violent/ harmful behaviour is not addressed</li> <li>other children to which the alleged offender might have access through work, family, friends or clubs</li> </ul>	<ul> <li>Identify if there are multiple victims (children and adults) whose safety and wellbeing needs to be addressed.</li> </ul>

Knowledge of:	Excellence is:	Your actions are:
Primary and specialist response	<ul> <li>Practitioners understand:</li> <li>substance abuse and mental health issues aggravate the abusive person's behaviour, but do not cause abuse</li> <li>victims who already have depression or major mental health disorders are more vulnerable to intimate partner violence victimisation and revictimisation. Their mental health issues are exacerbated and perpetuated by the abuse they experience</li> <li>victims can use substances to block out the trauma and violence experienced on a daily basis – often without help or support</li> <li>substance use and mental health are a consequence of experiencing minority stress caused by stigma, exclusion and discrimination relating to homophobia, biphobia and transphobia</li> </ul>	<ul> <li>Develop an understanding of substance misuse and mental health appropriate to your role</li> <li>Recognise violence and substance abuse issues are co-occurring not causative issues. They need to be addressed together</li> <li>Adapt safety strategies to address mental health and/or substance abuse issues.</li> </ul>
Importance of using accurate language	<ul> <li>Practitioners understand how language can be used to conceal the person's use of violence and shift the blame onto the victim by:</li> <li>concealing the person's use of violence through the use of mutualisation, euphemisms and generalisations, that is, <i>they have a volatile relationship, just ongoing domestics, they both get physical, gay relationships are always like that</i></li> <li>concealing victims' resistance, that is, <i>she appears to have difficulty separating herself from him, she is not acting protectively, she has no motivation or insight into her needs</i></li> <li>mitigating the responsibility of the person perpetrating violence, that is, <i>he was just drunk and frustrated but he is now very remorseful, he admitted he has anger issues, he just found out she was trans</i></li> <li>shifting the blame onto the victim, that is, <i>she was drunk and dressed like a slut, she goes from one violent partner to another, she is demonstrating victim-like behaviour.</i></li> <li>portraying a victim's or perpetrator's sexuality or gender identity as causative for abuse, for example <i>she bats for both teams so who knows what was going on? it must be hard to date a tranny</i></li> </ul>	<ul> <li>Use accurate language which:</li> <li>avoids mutualisation, euphemisms and generalisations exposes the full extent of the person's violence</li> <li>clarifies the responsibility of the person perpetrating violence</li> <li>reveals victims' responses and resistance (for example, I tried to pull his hand away from my throat)</li> <li>contests the blaming of victims</li> <li>understands the 'cultural imperatives' that inform 'meaning making' frameworks of the victim</li> <li>supports a survivor's right to have not given consent for a sexual act which has been perpetrated against them.</li> </ul>

wledge of:	Excellence is:	Your actions are:
Examples of Current Programmes		
<ul> <li>It's not OK</li> <li>family violence is not only physical – it also includes psychological, emotional, verbal, financial, and sexual abuse as well as neglect</li> <li>anyone can experience family violence, or be abusive, though most abuse is perpetrated by men against women due to social norms that support dynamics of male power and control</li> <li>family violence is usually about a pattern of behaviour over time rather than one-off isolated incidents</li> <li>most sexual violence happens within the context of familiar relationships</li> </ul>	<ul> <li>the whole community, including children, understand and participate in public campaigns and community responses which address the gendered nature of family violence, sexual violence and violence within whānau</li> <li>open conversations can be held regarding issues of family violence and sexual violence (FVSV) and community responses are one of belief, support and collective action</li> <li>peoples within communities are able to enquire without fear about FVSV when they have concerns and/or notice signs</li> <li>It's Not OK messages are actively supported in faith and sports Communities</li> </ul>	<ul> <li>Understand and promote the It's not OK messages and effective ways of informal helping</li> <li>Provide public education forums on sexual violence and harmful sexual behaviour</li> <li>Increase awareness of FVSV and support services availa</li> <li>Link Rainbow community groups into local violence prevention networks.</li> </ul>
<ul> <li>E Tū Whānau</li> <li>E Tū Whānau values:</li> <li>aroha, kōrero awhi, whakapapa, whanaungatanga, mana/manaaki, tikanga</li> <li>E Tū Whānau principles:</li> <li>kaupapa Māori: Māori lens</li> <li>ki te whaiao: community-led change</li> <li>mātauranga Māori: traditional and contemporary knowledge</li> <li>whānau transformation</li> <li>kahukura: people who inspire and lead change</li> <li>E Tū Whānau messages:</li> <li>all violence towards whānau is unacceptable within Te Ao Māori:</li> <li>violence against wāhine and tamariki within whānau is not part of Māori cultural tradition</li> <li>acts of violence are considered a transgression that breach the mana and tapu of the individual, their whānau and their entire whakapapa</li> </ul>	<ul> <li>trauma has been caused to groups and communities because of major historical events. If unaddressed, such trauma is transmitted from generation to generation, resulting in contemporary lifetime trauma, chronic stress, discrimination and family violence</li> <li>whānau develop environments, conversations and tools to find their own solutions for eliminating violence and preventing further violence</li> <li>mokopuna are involved in conversations so they clearly understand that violence is not part of Māori cultural tradition and have the confidence to be fully involved in whānau solutions</li> </ul>	<ul> <li>Identify Kahukura (for example in communities, iwi, hap whānau, neighbourhoods and schools)</li> <li>Strengthen the voices of child and adult victims.</li> </ul>

Kno	owledge of:	Excellence is:	Your actions are:
Community	Nga Vaka o Kaiga Tapu for Pacific Peoples A conceptual framework for addressing family violence in 8 Pacific communities in Aotearoa New Zealand. Each framework is grounded in the key concepts, values and beliefs that are relevant and appropriate to addressing violence in diverse settings and circumstances. The 8 frameworks are: • Samoa O le Tofā Mamao • Cook Islands Turanga Māori • Tonga Fofola e Fala kae Talanoa e Kāinga • Fiji Vuvale Doka Sautu • Niue Fakatupuolamoui he tau Magafaoa Niue • Tokelau Kāiga Māopoopo • Tuvalu Toku Fou Tiale • Kiribati Boutokaan te mweeraoi	<ul> <li>Pacific peoples are leading the change of 'Our families, our people, our responsibility' through strengths-based cultural messages and creating environments for honest conversations</li> </ul>	<ul> <li>Enable and equip Pacific communities with the skills, knowledge and tools to lead the change of 'Our families, our people, our responsibility'</li> <li>Strengthen communication mechanisms nationally, regionally and locally to enable honest conversations and storytelling led by and among children, youth, women and men and, across this, people with disabilities, in settings that work for them that will effect sustainable change</li> <li>Ensure lessons are continuously integrated into practitioner development and associated practice.</li> </ul>

## **Reflective practice questions**

#### **Primary and specialist**

- What are my beliefs/assumptions regarding family violence, sexual violence, violence within whānau and whom it affects? Are they helpful or misguided? Who could I test these with?
- Are our philosophies around victims and people who perpetrate violence congruent?
- Do I understand people's social and cultural context and their experiences?
- Am I judging the victim(s)?
- Have I considered if there are multiple adult and child victims (past, present and future) whose safety needs to be addressed?
- Does everyone understand the value, sanctity and dignity of the child/children?
- Have I got a clear understanding of who holds the power in this family?
- Do I know enough about the alliances, rules, secrets and lies in this family to work safely with the children?
- Have I sought out the views of children and young people in the family? Do I understand their expereince of the violence occuring in the family?
- How do I avoid reinforcing self-perceptions of shame or socially-ascribed notions of fault or guilt of survivors/ victims of sexual violence?
- Do I understand the nature of grooming for sexual abuse?
- Do I understand the nature of rape myth and the way that it can distort responses to survivors of sexual violence?
- Have I asked about the genders and sexualities represented in this family or whānau?
- Have I demonstrated acceptance and inclusive language around sex, gender and sexuality?
- Have I checked any assumptions about relationships or identities which may unintentionally act as a block to disclosure?

#### Leaders

- Is training on the signs and indicators, risks and effects of child abuse and neglect, including the effects on children of violence, provided for staff? And for managers and supervisors?
- Is training on the signs and indicators, risks and effects of child abuse and neglect, including the effects on children of violence within whānau, provided for staff? And for managers and supervisors?
- Am I and my staff aware of the different risks and challenges for children? How do we address their needs?
- Am I and my staff aware of the different risks and challenges for rainbow people and communities? How do we respond to their needs?
- Do you use reflective practice questions with staff in supervision and team meetings?
- Am I and my staff aware of the different risks and challenges for people with disabilities? How do we respond to their needs?
- Am I and my staff sufficiently aware of the dynamics of sexual violence to mean that I can provide services which do not replicate these dynamics, for example not seeking consent?

#### Kahukura and Community Champions

(Leaders who might be found in communities, iwi, hapū, whānau, neighbourhoods, schools, churches etc who inspire change)

- How do I make sure conversations about people's experience of violence are open and safe?
- How do I make sure the voices of the victims are the strongest voices in the conversations?
- How do I refrain from dominating the conversations?
- How am I ensuring whakapapa and Whanaungatanga are maintained?
- Am I the greatest example in my community of E Tū Whānau, Nga Vaka and It's Not OK?
- How do I ensure the voices of children and young people are heard?
- Do I know enough about sexual violence to hold these conversations without a person with specialist knowledge standing beside me?
- How do I demonstrate acceptance of diverse sexes, sexualities and genders?

# Domain 02

Upholding the dignity, values and beliefs of people and their diverse cultural identities

### **OVERVIEW**

People and practitioners have appropriate knowledge of cultural and other diversities to ensure practice, strategies and alliances support all victims of family violence, sexual violence and violence within whānau

Knowledge of:	Excellence is:	Your actions are:
<ul> <li>Prinary and specialist responses</li> <li>The bicultural partnership in Aotearoa New Zealand, underpinned by Te Tiriti O Waitangi and the rights of Māori to participate in their cultural practices and language</li> <li>whakapapa and whanaungatanga</li> <li>models and theories of healing, whānau wellness and practice that emanate from Te Ao Māori, that is, E Tū Whānau, Mana Enhancing Practice, Mauri Ora Frameworks etc</li> </ul>	<ul> <li>Practitioners understand:</li> <li>the bicultural relationship that exists in Aotearoa New Zealand between Tangata whenua and Tauiwi</li> <li>how the contribution of cultural narratives and wisdom embedded in Māori ideological and philosophical beliefs are a solution to the cessation of whānau violence including sexual violence</li> </ul>	<ul> <li>Reflect upon your own values and the impact they have on practice</li> <li>Demonstrate an appreciation of the practice of Māori beliefs and values; collective practice</li> <li>Refer to and work in partnership with appropriate services, kaumatua, kuia, and cultural advisors</li> <li>Identify pathways to culturally appropriate networks that enhance the safety of victims and responsibility of those perpetrating violence</li> <li>Know who the leaders in whānau, hapū and iwi are that support safety and responsibility and get to know them</li> <li>Support the establishment of kaupapa Māori services.</li> </ul>
<ul> <li>The multiplicity of diverse values, beliefs and worldviews and the need for cultural and ethnic competency in all its contexts</li> <li>cultural belongings may relate to ethnicity, faith, place, disability or sex, sexuality or gender identity</li> <li>range of cultural contexts (for example, deaf culture)</li> <li>diversity among people who abuse others is sensitive to cultural differences</li> <li>importance of respectful engagement and hierarchies within diverse communities</li> <li>importance of respectful engagement with Rainbow communities</li> </ul>	<ul> <li>Practitioners understand:</li> <li>to provide culturally responsive and appropriate support for victims, people perpetrating violence and their families and whānau, they need to develop skills which enable them to be responsive to cultural difference and diversity</li> <li>family violence, sexual violence and violence within whānau happen in all cultures and is not acceptable</li> <li>there is often a myriad of cultural, historical and environmental issues present</li> <li>everyone has the right to dignity, safety and self-determination but these rights may have different meanings and require differential responses</li> <li>effective cultural interventions focus on solutions for safety and responsibility and act in the best interests of victims</li> </ul>	<ul> <li>Commit to developing your cultural capabilities and knowledge so you can communicate, engage and practice in culturally appropriate way</li> <li>Where identified by the person through informed choice, seek to pair provider with person in a way that is culturally responsive while recognising some people may prefer accessing mainstream services</li> <li>Refer and work in partnership with appropriate cultural and diversity supports and services</li> <li>Work from a strength-based approach and use strength- based language</li> <li>Write reports which accurately detail cultural and contextual information that supports a 'mana enhancing' response, including person identified goals, strengths and assets</li> <li>Work collaboratively at all levels to enhance cultural safety (in all contexts) and responsibility.</li> </ul>

Knowledge of:		Excellence is:	Your actions are:
Primary and specialist responses	Strengths-based approaches	<ul> <li>Practitioners understand:</li> <li>basic physiology of trauma and recognise variance in experiences of trauma according to culture</li> <li>trauma and abuse, illness and struggle may be injurious but they may also be sources of challenge and opportunity</li> <li>that they should not assume they know the upper limits of the capacity for individuals to grow and change</li> <li>they have the courage and fortitude to ask hard and challenging questions</li> <li>the need of survivors of sexual violence to heal and if counselling or psychotherapy to this end can not be provided, establish good referral pathways to specialist services</li> <li>they should celebrate and demonstrate respect for sex, sexuality and gender diversity in adults, young people and children</li> </ul>	<ul> <li>Focus on the ways through which transition from trauma to growth can be facilitated</li> <li>Ask the hard questions that take individual, group and community aspirations seriously</li> <li>Collaborate with victims as a safety ally and ensure they are in control of as much as possible i.e. ask them who could help, when and how. Either act on their suggestions or – if you can't – acknowledge that you would like to act and explain why you can't</li> <li>Understand strengths based approaches as appropriate to your role</li> <li>Provide specialist counselling or psychotherapy to support healing if this is within your area of qualification, or refer to a specialist sexual violence service that can provide this.</li> </ul>
	<ul> <li>Sex, Sexuality and Gender</li> <li>impact of homophobia, biphobia and transphobia</li> <li>specific vulnerabilities of bisexual and trans women to partner and sexual violence</li> </ul>	<ul> <li>Practitioners understand:</li> <li>people in Rainbow communities may be unlikely to seek help from 'mainstream' violence services as may not receive appropriate responses due to some people's homophobia, biphobia and transphobia</li> <li>people in Rainbow communities may prefer to access a mainstream service rather than a Rainbow specific one. They should still be able to access culturally competent and appropriate services when doing so</li> <li>Rainbow community may be more likely to be targeted by those who perpetrate sexual violence</li> <li>Practitioners and services need to:</li> <li>develop responsive mainstream services which are safe, appropriate and accessible for Rainbow people</li> <li>build relationships with their local Rainbow communities so people know where to go to get help and there is clarity on who will receive help</li> </ul>	<ul> <li>Commit to developing your rainbow diversity capabilities and knowledge so you can communicate, engage and practice in a way which respects sex, sexuality and gender diversity</li> <li>Build strong relationships with your local Rainbow communities</li> <li>Refer and work in partnership with appropriate rainbow supports and services</li> <li>Identify and participate in training and development opportunities.</li> </ul>

(nowledge of:	Excellence is:	Your actions are:
<ul> <li>Sexual violence specifics</li> <li>• traditional patriarchal views of status and gender</li> <li>• survivor informed use of culturally specific services</li> </ul>	<ul> <li>Practitioners understand:</li> <li>traditional patriarchal views of status and gender may still be held by individuals, whānau and communities, and how this leaves women and children more vulnerable to family violence and sexual violence than men and older boys. These traditional patriarchal views are often shielded by people's interpretations of religious values or understandings of cultural heritage. Victims who live within communities where such traditional standpoints are expressed may experience shame, blame themselves, and suffer social isolation to protect perpetrators and be fearful of seeking help from services for a number of reasons</li> <li>respectful practice involves survivors' choice to use culturally specific services where survivors can be supported in their own language and through practices that reflect the beliefs and practices of their culture with regards to relationships, harm and healing</li> <li>how whakama, shame and blame occur in relation to sexual violence and varied cultural responses (of the survivors? of practitioners towards survivors?)</li> <li>values, beliefs and culture can constrain disclosure and help-seeking regarding sexual violence</li> <li>the cultural use of body and 'artifacts' as expressions of need/ emotion/call to support</li> <li>sexual violence from a systemic lens rather than an individualistic approach</li> <li>the history of criminalisation and stigma, exclusion and discrimination for sex, sexuality and gender diverse people may complicate help-seeking for Rainbow community members</li> <li>Rainbow people can be targeted for sexual violence as punishment for breaking sexuality and gender norms</li> <li>the importance of chosen family inside Rainbow communities and utilising chosen family as support mechanism</li> </ul>	<ul> <li>Participate in cross-cultural training and education regarding cultural responses to sexual violence</li> <li>Vigilantly maintain that all victims are offered an alternative standpoint to those justifying violence</li> <li>Where identified by the person through informed choic seek to pair provider with person in a way that is cultural responsive while recognising some people may prefer accessing mainstream services</li> <li>Write reports which accurately detail cultural and contextual information that supports a 'mana enhancin approach to response, including person identified goals, strengths and assets</li> <li>Recognise that trans and gender diverse people may fin sexual violence traumatic as a result of gender identity eg having parts of their bodies being targeted which are associated with a gender they do not identify with.</li> </ul>

Kn	owledge of:	Excellence is:	Your actions are:
Community	Examples of Current Programmes		
	<ul> <li>It's not OK</li> <li>family violence – It's not OK</li> <li>culture is no excuse for abuse</li> </ul>	<ul> <li>communities speaking out, having targeted awareness strategies and mana enhancing responses to help seeking</li> </ul>	• Provide access to available resources that are appropriate to the audience to support these messages, for example, in a range of languages, written for rainbow communities, shared in accessible formats.
	<ul> <li>E Tū Whānau</li> <li>E Tū Whānau values:</li> <li>aroha, kõrero awhi, whakapapa, whanaungatanga, mana/manaaki, tikanga</li> <li>E Tū Whānau principles:</li> <li>kaupapa Māori: Māori lens</li> <li>ki te whaiao: community-led change</li> <li>mātauranga Māori; traditional and contemporary knowledge</li> <li>whānau transformation</li> <li>kahukura: people who inspire and lead change</li> <li>E Tū Whānau messages:</li> <li>all violence towards whānau is unacceptable within Te Ao Māori:</li> <li>violence against wāhine and tamariki within whānau is not part of Māori cultural tradition</li> <li>acts of violence are considered a transgression that breach the mana and tapu of the individual, their whānau and their entire whakapapa</li> </ul>	<ul> <li>whānau actively supported to do all it takes to ensure all members are safe from people perpetrating violence, and those perpetrating violence are actively supported to initiate and sustain the necessary behaviour change</li> </ul>	<ul> <li>Co-design tools and strategies with whānau so they are supported, educated and informed in a culturally appropriate way that grows their ability to build Te Mana Kaha o te Whānau and help eliminate violence</li> <li>Access training and development opportunities.</li> </ul>
Community	<b>Nga Vaka o Kaiga Tapu for Pacific peoples</b> A conceptual framework for addressing family violence in eight Pacific communities in Aotearoa New Zealand. Each framework is grounded in the key concepts, values and beliefs that are relevant and appropriate to addressing violence in diverse settings and circumstances. The communities are Samoa, Tonga, Cook Islands, Fiji, Niue, Tokelau, Tuvalu and Kiribati	<ul> <li>Pacific influencers, families and communities are supported and equipped to lead and respond accordingly to ensure that members of their families and communities are safe and know where to go for further help for both family violence and sexual violence</li> </ul>	<ul> <li>Implementation of the Nga Vaka o Kaiga Tapu Family Violence Training Programmes to Pacific practitioners and influencers and mainstream practitioners working with Pacific peoples.</li> </ul>

# **Reflective practice questions**

#### **Primary and specialist**

- How do my cultural identity, beliefs and values shape my practice? What are my assumptions concerning ethnicity and culture? What strategies can I undertake to verify or confirm my thoughts, feelings and what I know are appropriate about cultures and peoples?
- Is my cultural knowledge acceptable and of a standard to offer improvement to people's situation? How can it enhance safety and responsibility?
- How do I regularly reflect on my level of cultural knowledge and develop my cross-cultural literacy and fluency?
- Are there cultural responses to sexual violence that are not aligned with evidence based practice? If so how might this be managed in a way that upholds peoples dignity?
- What cultural philosophies or understandings may be a barrier to the safety of children?
- How do I reaffirm and validate cultural practices?
- Have I done enough to identify barriers and opportunities? What networks are available that can support the safety of this person?
- Who will ensure that cultural intervention will be effective and responsive to the needs of this person? How will I maintain engagement?
- Do I have access to the relevant services or agencies? What is my role? Does it enhance safety and responsibility?
- Do I know when I need to draw on the expertise of others?
- How might our agency support or inhibit help seeking from minority community groups and what is being done to address that? How might my own beliefs and values support or hinder my capacity to uphold the dignity/ identity of this person/family/whānau?
- When do I call someone a 'victim' or a 'survivor'?

- What is my motivation for doing my work. How does the way I work support victims/survivors?
- Am I asking people what pronoun they prefer, and using that in my practice?
- Have I taken responsibility for understanding and learning about Rainbow identities and experiences of minority stress?
- How might my own beliefs and values support or hinder my capacity to uphold the dignity and identity of this person, their family and whanau?
- How might my agency support or inhibit help seeking from minority community groups? What are we doing to address that?

#### Leaders

- Is access to cultural support and cultural supervision available for my staff? And for myself as manager or practice supervisor?
- What bicultural, multicultural and cultural responsiveness training in relation to risk, safety, responsibility and solutions is provided for staff? And for a manager or practice supervisor?
- What shared cultural framework(s) of agreed assessment and risk management tools does my agency use?
- What relationships, alliances and memoranda of understanding has my organisation developed with cultural specialists/agencies that support safety and responsibility?
- What training about working with people with disabilities who are experiencing or perpetrating violence is available to my staff? And myself as manager or practice supervisor?
- What training about working with abuse in rainbow communities is available to my staff? And myself as manager or practice supervisor?

- As a mainstream service how do we improve our cultural effectiveness, cultural knowledge and the availability of culturally appropriate responses?
- As a mainstream service, how do we develop alliances and strategies that help support and repatriate victims back to safe and culturally relevant communities?
- What ongoing professional development and education in the areas of culture and leadership have I sought?

#### Kahukura and Community Champions

(Leaders who might be found in communities, iwi, hapū, whānau, neighbourhoods, schools, churches etc. who inspire change)

- How do I mitigate the impact of my own values, culture and beliefs on victims' ability to heal?
- How do I mitigate the impact of other people's values, culture or beliefs on victims' ability to heal?
- Who do I need around me to ensure I respect cultural and other traditions while also making sure intergenerational patterns of violence are broken?
- How do I ensure the people supporting the victim, their whānau and I are well supported?
- How do I challenge my own beliefs and values around sex, sexuality and gender diversity?

# Domain 03

Enabling disclosures and response to help-seeking

### **OVERVIEW**

People and practitioners need to recognise victims' help seeking and respond safely and respectfully. Many victims are proactive help seekers; the problem is often with people's responses to their help seeking. Victims may also fear for their own and their children's safety, feel ashamed and worry that people will not believe them.

When children are experiencing child abuse and neglect, they require adults to intervene to ensure their safety and wellbeing. It also recognises help seeking from those engaging in harm who wish to change.

Knowledge of:		Excellence is:	Your actions are:
Primary response	<ul> <li>Managing:</li> <li>children's disclosures of abuse and/or neglect</li> <li>young people's disclosures of abuse and/or neglect</li> </ul>	<ul> <li>Practitioners understand:</li> <li>that children's disclosures of violence and abuse are more likely to be through their behaviour and indirect disclosures, rather than direct verbal disclosures</li> <li>that routine enquiry with children in services about child abuse and neglect is not recommended, however practitioners need to understand and be alert for signs and symptoms that might be indicative of violence and abuse</li> <li>when there are indicators of abuse, children should be asked about 'secrets'</li> </ul>	Be alert to children's and young people's signs and symptoms that are indicative of violence and abuse. [Refer to the Ministry of Health Violence Intervention Programme guidelines]
	Forms of violence towards Rainbow people	<ul> <li>Practitioners understand:</li> <li>forms of abuse that are specific to Rainbow relationships (for example misgendering, hiding hormones, threatening to out someone or isolating them from Rainbow community groups) or used towards children and young people who are breaking gender norms (for example requiring young people to attend religious re-orientation counselling or workshops)</li> <li>that sexual violence inside Rainbow communities includes being targeted for breaking gender and sexuality norms, including by strangers</li> </ul>	<ul> <li>Creating spaces and services that use inclusive language and do not make assumptions about sexuality or gender identity</li> <li>Celebrate diverse sexes, sexualities and genders</li> <li>Be alert to the vulnerabilities of children who break gender norms inside families and whānau who do not value Rainbow identities.</li> </ul>
	How to create safe spaces which can enable disclosures	<ul> <li>Practitioners understand:</li> <li>the safety of a space is conveyed through the physical environment, people's attitudes and body language, and the visibility of cross-cultural and rainbow references. All sector workplaces are developed to make all people, including children and young people, feel welcome and to enable safe disclosure of violence and abuse</li> </ul>	<ul> <li>Make your work environment a safe space:</li> <li>through visible messaging about how your agency responds to violence</li> <li>by staff knowing how to engage safely and respectfully with victims and</li> <li>cross-cultural and rainbow references so people of different cultures, and sex, sexuality and gender diversity feel safe and acknowledged.</li> </ul>



Knowledge of:	Excellence is:	Your actions are:
Prinary response	<ul> <li>Practitioners understand:</li> <li>how to engage safely and respectfully with victims, and how to be receptive to both direct and indirect disclosures of violence. Practitioners are prepared to enquire about intimate partner violence and capable of doing so safely</li> <li>when enquiring about intimate partner violence, it is best to use simple, direct questions, asked in a non-judgemental manner</li> <li>setting up the enquiry appropriately is important. Options for introducing the topic include: enquiring about intimate partner violence as part of a wider psycho-social assessment, or using framing statements that explain the relevance of the query to the consultation context can facilitate disclosure</li> <li>enquiring about sexual violence requires you to have privacy, and the capability and capacity to respond appropriately to a disclosure and the distress which might accompany this</li> </ul>	<ul> <li>Do not ask direct questions in the presence of the person perpetrating violence (or other people who may be reporting back to the person perpetrating violence)</li> <li>Ask the adult victim direct questions about all major types of violence: physical violence, sexual violence, psychological/emotional abuse and controlling behaviours</li> <li>Be receptive to indirect disclosures, record these and follow them up</li> <li>Know where to refer survivors of sexual violence before you ask the question.</li> </ul>

Knowledge of:	Excellence is:	Your actions are:
<ul> <li>Victims help seeking approaches</li> <li>the importance of relational engagement</li> <li>listening with your eyes, ears and heart</li> </ul>	<ul> <li>Practitioners understand: <ul> <li>the multiple ways victims seek help, overtly and covertly</li> <li>how their responses can either compound the harm victims are experiencing or maximise their and their children's safety</li> <li>that victims' help seeking approaches are shaped by: <ul> <li>their cumulative abuse histories</li> <li>the actions and retaliatory responses of the abusive partner person/people</li> <li>the reality of their lives</li> <li>previous experiences of help-seeking from services</li> <li>the emotional reserves they have available to cope with more violence and trauma</li> </ul> </li> <li>that listening is the most important part of good communication and the basis of first-line support (care for emotional and practical needs). It involves more than just hearing the victim's words. It means: <ul> <li>being aware of the feelings behind her words</li> <li>hearing both what she says and what she does not say</li> <li>paying attention to body language – both hers and yours – including facial expressions, eye contact, gestures</li> <li>sitting or standing at the same level and close enough to the woman to show concern and attention but not so close as to intrude</li> <li>through empathy, showing understanding of how the woman feels</li> </ul> </li> <li>Learn to listen with your</li> <li>Eyes – giving them your undivided attention</li> <li>Ears – truly hearing their concerns</li> <li>Heart – with caring and respect</li> <li>how to respond to the unique needs of victims, and be skilled in listening, reflecting and summarising</li> </ul> </li> </ul>	<ul> <li>Be responsive to help-seeking approaches by any person</li> <li>Listen with your eyes, ears and heart</li> <li>Validate their experiences and their reality</li> <li>Believe victims when they share previous experiences of help seeking</li> <li>Demonstrate empathy and respond in a supportive and non-judgemental manner</li> <li>Ask what issues are most important to her right now. "What would help the most if we could do it right away?"</li> <li>Know how you can support them</li> <li>Be prepared to take action in the best interests of the victim and/or their children</li> <li>Know where to refer that on to if the survivor of sexual violence wants healing, and is not your role.</li> </ul>



Kr	nowledge of:	Excellence is:	Your actions are:
Primary response	Managing self-disclosures from perpetrators	<ul> <li>Practitioners understand:</li> <li>when responding to self-disclosure from perpetrators, practitioners are respectful but establish openly the safety of the victim(s) is the primary concern</li> </ul>	<ul> <li>Respectfully listen to their disclosure and life experiences</li> <li>Inform them of your professional responsibilities with respect to victim(s) safety</li> <li>Consult within your agency and specialist services on how to address the safety of the victims</li> <li>Clarify the support available to the person perpetrating violence</li> <li>Refer to specialist services who support people perpetrating violence (NGO and statutory as required).</li> </ul>
Specialist response	<ul> <li>Talking with and responding to child victims</li> <li>creating safe places for children</li> <li>asking children about possible abuse and/or neglect</li> <li>asking young people about possible abuse and/or neglect</li> <li>asking about secrets</li> <li>vulnerabilities of children and young people who break gender rules</li> </ul>	<ul> <li>Practitioners understand:</li> <li>that children are to be honoured as distinct human beings and provided with safe spaces and opportunities to express their views on how they have been treated and to say what they think should happen (balanced with addressing safety concerns), with the language and the customs of their families and whānau</li> <li>when a child makes these indications, children need to be encouraged to explore what it means to feel safe. There are a range of bodily sensations, colours and feelings they might describe to show what safety and "not safe" means to them. Children might more readily draw a picture to show situations when and who they feel unsafe with</li> <li>children are unlikely to spontaneously disclose during the time when abuse is being experienced. When they do disclose they may do so in oblique ways</li> <li>when asked in a safe space, a child may be able to talk about unsafe behaviours within their family</li> <li>adults need to be alongside children and create safe spaces in which disclosure can take place</li> </ul>	<ul> <li>Engage specialist services for children and key specialist cultural people</li> <li>Validate sexuality and gender diversity for children and young people</li> <li>Assess the risk of the child with the child, and the risk of others in their family</li> <li>Develop a safety strategy with the child</li> <li>Explore support for families of sex, sexuality or gender diverse children or young people so they can create a safe environment</li> <li>Identify and consider "Five eyes" that is, five protective people identified who know what's going on and can potentially intervene/seek help to promote safety.</li> </ul>

Kn	owledge of:	Excellence is:	Your actions are:
Specialist response	Sexual violence specifics Supporting disclosures from survivors of sexual violence	<ul> <li>Practitioners understand:</li> <li>women generally feel more able to talk about sexual matters with other women then with other men (excepting partners)</li> <li>following sexual assault by a male, many women are scared of men and therefore find it difficult to engage with male providers</li> <li>some men feel safer working with women especially in the context of emotional repression and relationship struggles</li> <li>how to respond to the whole person and whānau not just the 'perpetrator'</li> <li>others need the opportunity to explore issues of sexuality, masculinity/vulnerability and sexual behaviour with men</li> <li>gender choice is significant for survivors of diverse sex, gender identity and sexual orientation</li> <li>all safety decisions made and strategies taken by practitioners with or on the child's behalf are explained to them before actions are taken</li> </ul>	<ul> <li>Ask survivor if they have a preferred gender of these who support them</li> <li>Wherever possible offer gender choice</li> <li>If no choice available, acknowledge the lack of choice.</li> </ul>
	<ul> <li>Managing disclosures from people perpetrating sexual violence</li> <li>the importance of a strengths based approach that acknowledges the person perpetrating violence – strengths, assets and protective factors, without minimising risk</li> <li>understanding dynamic risk</li> </ul>	<ul> <li>Practitioners understand:</li> <li>taking the time to understand the other people who are attending with the client given they may hold views that do not support help seeking or change, either because they hold values and beliefs that may endorse harmful behaviour and victim blaming, or because of the levels of shame often associated with being victimised, and the often-witnessed reluctance to risk judgment or blame from family members or friends who learn about the sexual violence</li> <li>the skills to work with the denial of sexual offence(s), and having an understanding of the importance of using empirical measures to estimate the risk of sexual recidivism, and that responses should be designed and delivered in a way that is proportionate to the risk the person poses</li> <li>the person should be understood and responded to in their entirety and not just their perpetration</li> </ul>	<ul> <li>Ask questions of victims while alone where possible</li> <li>Engage in a confident and paced manner</li> <li>Use a motivational interpersonal style that is warm and empathic, re-enforcing and direct</li> <li>Be mindful of responsivity factors such as age, culture, developmental level and motivation</li> <li>Address the safety of the victim(s).</li> </ul>

03

Kn	owledge of:	Excellence is:	Your actions are:
Cor	Examples of Current Programmes		
Community	<ul> <li>It's not OK</li> <li>most people want help from those around them rather than services, so informal helpers can make a difference</li> <li>be aware of the danger signs and contact crisis response services, for example the Police when someone is at risk</li> </ul>	<ul> <li>a community where open conversations regarding issues of family violence/sexual violence can take place and community responses are ones of belief and support</li> <li>people are able to enquire (without fear) about family violence/sexual violence when they have concerns or notice potential warning signs, and family violence/sexual violence awareness and 'It's not OK' messages are actively supported in faith communities and sports communities</li> </ul>	<ul> <li>Understand and promote the It's not OK messages and effective ways of informal helping</li> <li>Link to community responses to family violence to help create a pathway from informal helpers to specialist services</li> <li>create opportunities for learning from people who can share from survivor and/or former abuser experiences about what helped them become safe.</li> </ul>
	<ul> <li>E Tū Whānau</li> <li>all violence towards whānau is unacceptable within Te Ao Māori</li> <li>violence against wāhine and tamariki within whānau is not part of Māori cultural tradition</li> <li>acts of violence are considered a transgression that breach the mana and tapu of the individual, their whānau and their entire whakapapa</li> </ul>	<ul> <li>communities, whānau, hapū and iwi networks and neighbourhoods actively create places and environments of safety for victims during and post disclosure</li> </ul>	<ul> <li>Ensure you know what attempts have previously been made to seek help in community, whānau, hapū, iwi and neighbourhood settings</li> <li>Monitor progress with recovery and healing for victims, perpetrators and their whānau.</li> </ul>
	<b>Nga Vaka o Kaiga Tapu for Pacific Peoples</b> A conceptual framework for addressing family violence in eight Pacific communities in Aotearoa New Zealand. Each framework is grounded in the key concepts, values and beliefs that are relevant and appropriate to addressing violence living in diverse settings and circumstances	<ul> <li>Pacific influencers, families and communities are supported and equipped to lead and respond accordingly to ensure that members of their families and communities are safe and know where to go to for further help</li> </ul>	• Implementation of the Nga Vaka o Kaiga Tapu Family Violence Training Programmes to Pacific practitioners and influencers and mainstream practitioners working with Pacific peoples.

## **Reflective practice questions**

#### Primary

- Have I shared power and allowed the person to tell their story in their own words and their own time?
- Have I responded appropriately and fully about the disclosure?
- Has the victim and their support network been informed of the processes regarding privacy and confidentiality?
- Is the disclosure environment safe for all concerned?
- Am I able to validate and reaffirm the viewpoints of this person?
- Have I been alert to signs and indicators of potential child abuse and neglect?
- Have I approached this family without assumptions about people's sex, sexuality or gender identity?
- Have I made it clear that people from Rainbow communities are welcome in this service?

#### Specialist

- Are there characteristics and/or behaviours that are constraining my ability to find 'likable' qualities in this person? How might I address this?
- Do I believe this person is capable of change?
- Might I be over or under-estimating their motivation for change based on my own biases and stereotyping?

#### Before talking with children:

- Do I understand with which parent the children align themselves, and why?
- Is it safe to talk to the children together, or do I need to talk to each one separately first?
- Is there a risk of the children being interrogated after our talk by the parent who has used abuse?
- Do the children understand fully and clearly that what they say may be shared with others?

- Would the child be more comfortable and safe talking to me with a safe and protective adult present and who would this be? What would be the adults position on the violence?
- What is likely to happen to the children if they make any disclosures and what do I need to do to support their wellbeing and safety?

#### When talking with children:

- Do I routinely encourage free narrative when talking with children?
- Do I prompt the conversation by asking open questions rather than leading questions?
- Do I avoid asking children questions starting with "why" (why did you ...), and focus on questions starting with "what" (what happened next?), when (when did you hear that?), who (who else was around?)"?
- Do I have good calming strategies prepared if a child becomes distressed?
- Is there anything more children are willing to tell you about the the topic: "What else can you tell me about..."
- Have I ensured that children are never made to be the 'Police' of safety plans?

#### Leaders

- How can I provide support to practitioners in our organisation with regards to their physical environment when they support victims? What other opportunities are there for improvement?
- How can I improve what my organisation does to enable disclosures and respond to victims?
- How is privacy and confidentiality understood and practiced within my agency?
- What is my understanding of the effects of working with

violence and trauma on practitioners in this field?

- What strategies are in place in my agency to support practitioners working with people experiencing or perpetrating violence?
- Are there clear boundaries in place to keep work and home life separate?
- How do I prioritise to staff their alertness and vigilance for child safety in all situations of family violence?

#### Kahukura and Community Champions

(Leaders who might be found in communities, iwi, hapū, whānau, neighbourhoods, schools, churches etc who inspire change)

- How do I make sure conversations about people's experience of violence are open and safe?
- How do I make sure the voices of child and adult victims are the strongest voices in the conversations?
- What support can I provide to help people to find the right solutions for themselves?
- How do I refrain from dominating the conversations?
- Do I lead by example the tenets of E Tū Whānau, Nga Vaka and It's Not OK?

# Domain 04

Using collective action to create safety for victims

### **OVERVIEW**

The safety and wellbeing of victims (child and adult) is the collective responsibility of agencies, communities, whānau and families. People and practitioners work together to maximise safety and support for victims

Knowledge of:	Excellence is:	Your actions are:
<ul> <li>Working with children and young people</li> <li>seeking the views of children and young people</li> <li>don't make children or young people the 'police' of safety plans.</li> <li>Emphasise that experiencing violence is not just seeing it, it's being around it, hearing it, knowing it's happening etc.</li> </ul>	<ul> <li>Practitioners understand:</li> <li>children and young people experience violence in multiple ways</li> <li>children and young people will often try to protect their family (including perpetrators sometimes), and this will influence what they disclose, especially if no real relationship has been built yet</li> <li>wherever possible, seeking the support of other safe adult family members when making a report of concern about a young person who is at risk of sexual abuse</li> <li>if a child or young person's sexuality or gender identity is in conflict with family values that this will make them more vulnerable to being targeted for violence</li> </ul>	<ul> <li>Always think about the children's lived experience of family violence</li> <li>Ask children and young people what they think</li> <li>Build relationships as part of engagement (where possible, this will be role dependent)</li> <li>Account for age and developmental capacity.</li> </ul>
<ul> <li>Risk factors for different forms of violence</li> <li>family violence (intimate partner violence, child abuse and neglect)</li> <li>whānau violence</li> <li>sexual violence</li> </ul> Safe risk assessment processes	<ul> <li>Practitioners understand:</li> <li>intimate partner violence lethality risk factors, are prepared to ask specific child risk factor questions, and are capable of undertaking risk assessment. Sexual violence practitioners should be able to understand the different risk factors for being targeted for sexual abuse within the family and outside of the family</li> <li>the purpose of risk assessment is to anticipate what may occur (not to predict who may be hurt/killed). Anticipatory awareness helps you prepare to act. Risk assessment is an opportunity to understand the victims' experiences and provide information to them helps you as a safety ally to prepare a safety strategy that assists the victims. The assessment of risk relies on gathering information from valid risk assessment tools, practitioner expertise, the abusive person's history and the victim's perception of risk. It is a dynamic process which takes account of changes in the victim's, abusive person's and family and whānau circumstances</li> <li>with respect to children, practitioners are knowledgeable of the multiple ways the abusive partner/parent's behaviour poses risks to children's safety</li> <li>legislation and policy about the care and protection of children (the safety of children is paramount in all decision-making)</li> </ul>	<ul> <li>Undertake a risk assessment in response to disclosures of abuse or concern for victims' safety [Refer to Risk Assessment and Management Framework and Oranga Tamariki Frameworks]</li> <li>Respond according to the level of risk identified, for example variable, elevated or extreme [Refer to Risk Assessment and Management Framework]</li> <li>Follow your organisation's child protection policies and procedures, and if required make a report to the Ministry of Vulnerable Children, Oranga Tamariki, or refer to the Police or an appropriate specialist service.</li> </ul>

Knowledge of:	Excellence is:	Your actions are:
Primary response	<ul> <li>Examples of specific child risk factor questions</li> <li>Female victim: <ul> <li>Are you pregnant?</li> <li>Have you ever been assaulted by () while pregnant?</li> </ul> </li> <li>Adult victim: <ul> <li>Do you have a child who is not the child of ()?</li> <li>Does () threaten to harm your child/children?</li> <li>Do you believe () will harm your child/children?</li> <li>Is there conflict over child care or contact?</li> <li>Has violence occurred in front of the child/children?</li> <li>Has your child directly intervened in episodes of violence?</li> <li>Has your child been abused physically, sexually or emotionally?</li> <li>Is your child frightened of ()?</li> </ul> </li> <li>Has () ever threatened/attempted to take the child/ children from your care?</li> <li>Does your child have a disability?</li> </ul>	
Responsible seeking and sharing of information <ul> <li>victims' safety and/or escalating risk</li> </ul>	<ul> <li>Practitioners understand:</li> <li>why victims may share different experiences with different services for a variety of reasons and that reported information about the abusive person's history of violence against the victim or multiple victims could be known to multiple agencies. This is why responsible seeking and sharing of information is required for safe practice</li> <li>under the Family and Whānau Violence legislation, concerns for victims' safety take precedence over confidentiality and privacy issues. Seeking the consent of the victim is desirable, but may not always be practicable (for example, in extreme risk situations). Practitioners may need to engage in responsible information sharing for previously undisclosed harmful sexual behaviour in order to access support for victims</li> </ul>	<ul> <li>Purposefully seek information from multiple sources (other agencies, the victim and/or the person using violence) to inform the assessment processes</li> <li>Check you have understood the information shared with you</li> <li>Analyse the information gathered and come to a view about the meaning</li> <li>Decide what actions to take, preferably after talking with a colleague</li> <li>Share information responsibly</li> <li>Document your actions.</li> </ul>

Kn	owledge of:	Excellence is:	Your actions are:
Primary response	How to maximise victims' safety in 'face to face' meetings with people perpetrating violence, family and whānau members	<ul> <li>Practitioners understand:</li> <li>the effects of people's violence on the victim's negotiation of everyday life and why specialist victim services need to be involved in the planning of any 'face-to-face' meetings between perpetrators and victims</li> <li>victims resist the person's violence but their violence can effectively limit victims' choices in crucial ways. An understanding of coercive control should caution against assumptions that victims can freely tell their stories in 'face-to- face' meetings, such as restorative justice/couple counselling contexts</li> <li>at the 'point of offer' when a meeting is first proposed, victims can face dilemmas of not wanting to attend, but also not wanting to be seen as the 'uncooperative party'. Victims are often very fearful of their partners/people perpetrating violence. Fear will constrain victim's ability to participate freely, so they will frequently negotiate for what they think they can get. Victims can feel intimidated into making agreements (that is, to reconcile) which do not protect theirs or their children's interests</li> </ul>	<ul> <li>Practice from a clearly defined set of principles which prioritise victims' safety (child and adult), victims' informed choice, the responsibility of the person perpetrating violence and your responsibilities to victims</li> <li>Engage specialist victim services in the planning of any 'face to face' meetings</li> <li>Plan how you will address the safety of victims before, during and after meetings</li> <li>Involve specialist organisations that work with sexual violence before putting a perpetrator and a victim in the same space or process</li> <li>Recognise the importance of chosen family for Rainbow community members in terms of safety planning.</li> </ul>
	How the decision to abuse a victim who is a parent is a parenting decision and will affect how the victim will parent	<ul> <li>Practitioners understand:</li> <li>that safety and wellbeing for child and adult victims can only be achieved by practitioners, communities, families and whānau acting as safety allies with child and adult victims. To protect children, practitioners must also act protectively and collaboratively towards adult victims</li> <li>adult victims are parenting under siege. Abusive behaviour towards a partner/parent is an attack on the relationship between the adult victim and her children and thwarts her ability to provide for her children's basic needs. Support is needed to rebuild the parenting relationship between adult victims and their children</li> <li>parents with Rainbow identities may have concerns about homo/ bi/transphobic responses which may act to inhibit help-seeking</li> </ul>	<ul> <li>Acknowledge the victim's parenting is affected by her abusive partner's parenting decisions</li> <li>Recognise the need for support to rebuild the parent/child relationship</li> <li>Be a safety ally, work in partnership with adult victims, and take supportive actions to maximise the safety of child and adult victims</li> <li>Engage specialist victim services.</li> </ul>

Kr	owledge of:	Excellence is:	Your actions are:
Primary response	<ul> <li>Your role in a 'safety partnership'</li> <li>developing a basic safety strategy</li> <li>progressing safety actions</li> </ul>	<ul> <li>Practitioners understand:</li> <li>the importance of your partnership role in developing and progressing victims' safety plans. Victim safety is a collective responsibility. To become better helpers, all practitioners need to start by having conversations with victims about safety strategies they have previously tried</li> <li>Examples of asking about past and current safety strategies</li> <li>What has she tried? How did it work?</li> <li>Would she try it again? If not, why not?</li> <li>What personal, public and social/cultural resources can she rely on?</li> <li>How does she think her partner will react?</li> <li>What fears does she have for her children?</li> <li>What would it take for her to feel safe?</li> <li>children are at the centre of all responses and plans and the need for the involvement of specialist children services to appropriately and effectively respond to and support child victims of violence</li> <li>the limits of their agency's skill to address the dynamics that exist between perpetrators of family violence, sexual violence</li> </ul>	<ul> <li>In partnership with the victim:</li> <li>develop a safety strategy based on what and who the victim has identified as being helpful</li> <li>address the child/children's safety and wellbeing needs</li> <li>Enact basic safety strategy actions:</li> <li>confirm the actions you will progress</li> <li>take action to address the risks identified</li> <li>Where there are extreme (high-risk) concerns for victims, a multi-agency safety strategy needs to be developed:</li> <li>consult within your organisation and engage statutory services (Oranga Tamariki, Police) and specialist family violence and sexual violence services.</li> <li>[Refer to Risk Assessment and Management Framework]</li> </ul>
	Your role in reviewing safety actions <ul> <li>circular referral loops</li> </ul>	<ul> <li>and violence in whānau, and children and when to refer children to specialist services</li> <li>Practitioners understand: <ul> <li>to follow up referrals to see if they are supporting the victim, and also to inform the referrer and/or other appropriate services if there are escalating risk issues. Practitioners regularly review</li> </ul> </li> </ul>	<ul> <li>Follow up any referrals made (for children and adults) and/ or stay engaged with the victim</li> <li>Regularly discuss and monitor the safety strategy within your agency's team/peer review processes</li> </ul>
		safety strategies they are part of with other practitioners	<ul> <li>Referral services are responsible for informing the referrer if they:</li> <li>are unable to engage the victim/abusive person/ family and whānau</li> <li>are no longer engaged and if there are any escalating risk issues.</li> </ul>

## L DOMAIN

Knowledge of:

looking for strengths in context

welfare contexts)

supporting and strengthening

How to undertake a strengths-based

parenting assessment of adult victims

(especially in care and protection and child

Excellence is:

#### Practitioners understand:

 they must start from the premise that the adult victim is more likely to be an ally to child welfare and protection services.
 Practitioners should partner with the adult victim to support and strengthen their ability to act in ways that are supportive of child, family and whānau functioning, this includes focusing on the Perpetrator

#### Safety: physical & emotional strengths-based examples

- Attempting to manage the household to reduce children's experiences and exposure to violence
- Sending the children away (other room, other house, relatives and whānau members, after school activities)
- Verbally or physically intervening to protect the children
- Getting a protection order (where safe to do so)

#### Healing from trauma strengths-based examples

- Talking to children
- Supporting the children to engage in therapeutic services (for example, counselling)
- Attempting to provide normalcy/routine/enjoyable activities
- Engaging family and whānau members in the lives of children
- · Stability and nurturance strengths-based examples
- · Attempting to make sure the household continues to function
- Maintaining the children's basic needs
- Informing the children about any changes in the household
- they must undertake a strengths-based assessment in relation to the adult victim, and look for strengths in contexts critical to the development of more effective case plans and the safe reduction of the number of out-of-home placements for the children

#### Your actions are:

Articulate the specific actions the adult victim has taken to promote the safety and wellbeing of the children (her resistance) and family and whānau functioning in response to her partner's pattern of abusive behaviour

- assessments address the safety and wellbeing needs of each individual child in the family and whānau
- · affirm; ask; assess; validate; plan; document
- **build partnerships with adult victims** to enable better assessments of her strengths and the development of effective and protective safety strategies.



owledge of:	Excellence is:	Your actions are:
<ul> <li>Developing comprehensive victim safety assessments that address:</li> <li>risks (danger posed by abusive person's pattern of behaviour)</li> <li>complexity of support needs</li> <li>protective factors</li> <li>immediate, short and long-term safety needs</li> </ul>	<ul> <li>Practitioners understand:</li> <li>the importance of holistic assessment that identifies and responds to the level of risk, complexity of need and protective factors present ensures appropriate victim identified cultural frameworks are used and holds the importance of whānau wellness central to assessment and victim and whānau plans</li> <li>Examples of complexity of needs and support <ul> <li>Person perpetrating violence</li> <li>Intellectual/physical disability</li> <li>Child abuse and trauma history</li> <li>Substance abuse (is also an intimate partner violence risk factor for increase in severity of violence used)</li> <li>Mental health issues</li> <li>Limited whānau or community support</li> <li>Socially disconnected</li> <li>Level of marginalisation/poverty/homelessness</li> <li>Victim(s)</li> <li>Intellectual/physical disability</li> <li>Child abuse and trauma history</li> <li>Substance abuse (isability</li> <li>Child abuse and trauma history</li> <li>Intellectual/physical disability</li> <li>Child abuse and trauma history</li> <li>Intellectual/physical disability</li> <li>Child abuse and trauma history</li> <li>Intellectual/physical disability</li> <li>Child abuse and trauma history</li> <li>History of being victimised by previous partners</li> <li>Isolation (social and geographical)</li> <li>Substance abuse issues</li> <li>Mental health issues</li> <li>Limited whānau or community support</li> <li>Limited whānau or community support</li> <li>Limited whānau or community support</li> <li>Limited access to money</li> <li>Level of marginalisation/poverty/homelessness</li> <li>Gang association (most likely from abusive partner)</li> <li>Insecure immigration status</li> <li>Child victim's age, step-child, intellectual/physical disability</li> <li>Minority stress due to stigma, exclusion and discrimination from sex, sexuality or gender identity</li> </ul> </li> </ul>	<ul> <li>The practitioner assesses the risks with the victims:</li> <li>including lethality and risks to children</li> <li>serial perpetration by abusive partner</li> <li>The practitioner develops a culturally responsive high risk safety strategy which:</li> <li>addresses the multiple issues victims and their family and whānau may be experiencing</li> <li>involves agencies in responding to the abusive person's violence</li> <li>The level of responsibility for taking action corresponds to the level of risk and need:</li> <li>the higher the risk the higher the level of response required</li> <li>the more complex the needs of the people involved the higher the level of response required</li> <li>the fewer protective factors the higher the level of response required</li> <li>Be aware that protective factors do not cancel out risk factor</li> <li>Consider how the level of risk may impede the ability of supportive people to be protective.</li> </ul>

Kn	owledge of:	Excellence is:	Your actions are:
Specialist response		<ul> <li>Examples of protective factors</li> <li>constraints have been placed on the abusive person's ability to be abusive</li> <li>abusive person is engaged and is monitored by service(s), safe family and whānau and/or community members that can take protective action (list who and what actions they will take)</li> <li>primary victim's confidence and trust in organisations name agencies they are engaged with (child and adult)</li> <li>services engaged are aware of the violence and what actions they need to take to escalate any concerns</li> <li>connection to communities of belonging (eg Rainbow community groups)</li> </ul>	
	Your role as part of a 'safety team' approach	<ul> <li>Practitioners understand:</li> <li>the specific skills and actions your agency can contribute to the safety team approach and contributing those skills and actions to the development of a multi-agency safety strategy, which addresses the needs of child and adult victims, the person perpetrating violence and their family and whānau members</li> <li>all members of a safety team participate in monitoring and reviewing high risk safety strategies and creating and maintaining safety zones for child and adult victims at home and in the community</li> </ul>	<ul> <li>The specialist service:</li> <li>stays engaged with the adult and child victims (or specialist services involved with children)</li> <li>engages with key specialist cultural people with respect to Māori, and includes restoration of mana and tapu, and building key cultural relationships with specialist providers</li> <li>arranges forensic medical and mental health assessments as appropriate</li> <li>works in partnership with other specialist services involved with the child and adult victims, and services involved in the risk management of the abusive person</li> <li>keeps other practitioners updated about any changes</li> <li>regularly reviews the victims'/abusive person's/ family's and whānau's progress at their agency's/agencies' case review meetings and within multi-agency case management processes</li> <li>The safety team create and maintain safety zones for victims:</li> <li>making safe spaces for victims – at home, in their communities, school, work and places of worship.</li> </ul>
	<ul><li>Sexual violence specifics</li><li>risk assessment for child and adult victims</li></ul>	<ul> <li>Practitioners understand:</li> <li>they must be vigilant in determining whether violence is gendered and/or sexual in nature so that appropriate specialist services can be engaged as early as possible to assist victims of sexual violence</li> </ul>	<ul> <li>Assess sexual violence risks and share relevant information pertaining to risk and need</li> <li>consider "risk" from the perspective of the person who could be harmed by sexual violence, not just from the person who has previously caused harm by sexual violence.</li> </ul>

Knowledge of:		Excellence is:	Your actions are:
Cor	Examples of Current Programmes		
Community	It's not OK <ul> <li>Individuals can be helpers and/or influencers within their families and networks</li> </ul>	<ul> <li>communities understand the influence of the collective upon individual members at the cultural level, in condoning or not condoning violence, and actively come together to ensure violence is not condoned participation in public campaigns and community responses which address the gendered nature of family violence, sexual violence, and violence within whānau</li> <li>communities offer a believing response, overt support and 'no fault' messaging</li> </ul>	<ul> <li>Develop community partnerships that support the capacity of community networks to proactively seek safety support for victims as appropriate to the severity of abuse</li> <li>Provide public education forums on sexual violence and harmful sexual behaviour</li> <li>Link to community responses to family violence to help create a pathway from informal helpers to specialist services</li> <li>Be aware of the danger signs and contact crisis response services such as the Police where someone is at risk.</li> </ul>
	<ul> <li>E Tū Whānau</li> <li>all violence towards whānau is unacceptable within Te Ao Māori</li> <li>violence against wāhine and tamariki within whānau is not part of Māori cultural tradition</li> <li>acts of violence are considered a transgression that breach the mana and tapu of the individual, their whānau and their entire whakapapa</li> </ul>	<ul> <li>whānau are supported, educated and informed in a culturally appropriate way that builds Te Mana Kaha o te Whānau and helps eliminate violence</li> </ul>	<ul> <li>Develop partnering opportunities with communities, iwi, hapū, whānau, neighbourhoods, schools</li> <li>Co-design with whānau any collective action.</li> </ul>
	<ul> <li>Nga Vaka o Kaiga Tapu for Pacific peoples</li> <li>a conceptual framework for addressing family violence in eight Pacific communities in Aotearoa New Zealand</li> <li>each framework is grounded in the key concepts, values and beliefs that are relevant and appropriate to addressing violence living in diverse settings and circumstances</li> <li>the communities are Samoa, Tonga, Cook Islands, Fiji, Niue, Tokelau, Tuvalu and Kiribati</li> </ul>	<ul> <li>Pacific families and communities are supported and given the relevant tools, skills, knowledge and experience to develop and maintain safe family and community environments for victims</li> </ul>	<ul> <li>Service models of good practice led by communities are supported</li> <li>Co-design with Pacific communities actions they can lead to support individuals and families.</li> </ul>

## **Reflective practice questions**

#### Primary

- Do I have sufficient information to fully understand the context of the violence?
- Where could I seek more information, who else is relevant to this issue and in what way, who else may know what I don't know?
- Who will be affected by actions that I take in relation to this victim(s), family and whānau? Who else needs to know what I know?
- Am I listening to others' concerns? Have I understood the information they are sharing with me? What actions have I taken in response to their concerns?
- Have I asked the victims about safety strategies she has previously tried, how they worked and what she would try again?
- How do I know the collective action is appropriate?
- How is whakapapa being upheld as collective action is taken?
- What actions am I contributing to maximise the safety of victims (children and adults)? How do I ensure the safety of any children?
- Who has spoken to the children? What do the children need?
- How do I know when I have reached the limits of my knowledge/expertise and I need to refer to specialist services?
- What have we done to keep the children and young people in the family safe?

#### Specialist

- Who is responsible for taking the majority of safety actions to maximise victims' safety and curtail the predominant aggressor's violence?
- Does this match the level of risk/concern held for victims?
- Are there multiple sets of eyes monitoring victims' safety? Who?
- What is the strength of the concurrent safety strategy, i.e. what will I do if they cannot contact the victim?
- What shifts might still need to occur for the wider family and whānau in order to better support victims' ongoing safety?

#### Leaders

- What regular case management processes do we have that support safe decision-making by practitioners?
- Who can practitioners seek support from in our organisation for guidance on maximising victims' safety?
- How do managers regularly support our practitioners to review and monitor safety strategies?
- How am I fostering integrative and culturally responsive practice in our agency?
- Does my agency provide the necessary tools and resources to ensure comprehensive risk assessment and safety strategising is undertaken and documented?
- Do our policies and procedures specify safe practices to ensure the confidentiality of victims' information and the limits of confidentiality?
- Are circular referral loops built into our processes?
- How do I support practitioners to be responsible for agreed safety actions? Does their workload capacity enable them to do this?
- How does my organisation safeguard against the potential for retaliatory violence against victims for the interventions we may be implementing?

#### Kahukura and Community Champions

(Leaders who might be found in communities, iwi, hapū, whānau, neighbourhoods, schools, churches etc who inspire change)

- How do I make sure the voices of the victims are the strongest voices in the conversations?
- How do I make sure victims are free from further harm?
- What networks exist specifically to aid long term healing?
- How do I bring all the agencies and/or actors in the situation together so we understand each other's contribution to helping victims?
- Am I leading by example the tenets of E Tū Whānau, Nga Vaka and It's Not OK?

# Domain 05

Using collective action to sustain safe behaviours of perpetrators

### **OVERVIEW**

Victims' safety is dependent on responses to the people perpetrating violence. People and practitioners engage respectfully with perpetrators, support them to stop using violence, contain abusive behaviours and escalate consequences for continued abuse.

Kr	owledge of:	Excellence is:	Your actions are:
Primary response	How denial, blame and minimisation are often used by people perpetrating violence to avoid responsibility	<ul> <li>Practitioners understand:</li> <li>the concepts of 'healthy scepticism' and 'respectful uncertainty', the impact collusion has on victims' safety and the risk of conflating the perpetrator's desire to change with their ability to change in the required timeframes</li> <li>the significant distinction between the acknowledgement of violence occurring and responsibility for the violence. Responsibility goes further than acknowledgement in recognising that the choices made to perpetrate violence were wrong and should not have happened</li> </ul>	Use accurate language, which describes the unilateral nature of violence – actions by one person against the will and wellbeing of another and others.
	How mental health and drug and alcohol issues aggravate rather than cause abusive behaviour	<ul> <li>Practitioners understand:</li> <li>when speaking with perpetrators, practitioners maintain that violence is intentional behaviour not caused by their mental health or drug and alcohol use</li> <li><i>Co-occurring not causative</i></li> <li>Alcohol consumption is strongly associated with intimate partner violence where a person using violence: <ul> <li>already holds attitudes condoning violence,</li> <li>attitudes condoning violence against women</li> </ul> </li> <li><i>Co-occurrence theory fits with what is known about intimate partner violence</i></li> <li>violence is a deliberate choice and not caused by factors such as stress, anger, or alcohol consumption</li> <li>there are relationships in which: both partners drink and no one becomes abusive</li> <li>both partners drink but only one becomes abusive</li> <li>abusive partners are violent when drinking and when sober</li> </ul>	Refer people using violence to specialist services for people perpetrating violence.
	How the decision to abuse a child's parent is a parenting decision	<ul> <li>Practitioners understand:</li> <li>that the decision to abuse a partner who is a parent is a decision about how to parent and it will affect how the victim will parent. Abusive behaviour towards a partner who is a parent has a significant impact on family and whānau functioning</li> <li>the impact of the partner's/parent's abusive behaviour on the overall family and whānau functioning requires assessment of housing security, maternal mental health and substance abuse, child mental health and substance abuse, extended family, whānau and community support, health care, employment and educational stability</li> </ul>	<ul> <li>Recognise the need for a comprehensive assessment of the impact of the partner's/parent's abusive behaviour on the overall family and whānau functioning</li> <li>Work in partnership with specialist services for people perpetrating violence to have an assessment undertaken.</li> </ul>



Kn	owledge of:	Excellence is:	Your actions are:
Primary response	How to respectfully and safely engage with perpetrators	<ul> <li>Practitioners understand:</li> <li>they must engage with people perpetrating violence in a manner that builds respect, holds them responsible for their harmful behaviour and places child and adult victims are at the centre of all responses and plans</li> <li>all practitioners place responsibility for violence inside cultural context (using a broad definition of culture) but do not use culture as an excuse for abuse</li> </ul>	<ul> <li>Engage people in a manner that builds respect/trust and holds them responsible for their harmful behaviour</li> <li>Recognise limits of your agency's skill set and refer people perpetrating violence to specialist services</li> <li>Work in partnership with these services as appropriate.</li> </ul>
	Your role in reviewing risk management actions Circular referral loops	<ul> <li>Practitioners understand:</li> <li>they must follow up on their referrals to ensure specialist agencies have engaged with perpetrators of violence and risk to their victims is minimised</li> <li>that ensuring children's safety is paramount when a child sexual offender who might have hurt them, or who could hurt them, is being released from a custodial sentence</li> </ul>	<ul> <li>Follow up any referrals made for the person perpetrating violence and child and adult victims</li> <li>Regularly discuss and monitor the risk management strategy within your agency's team/peer review processes</li> <li>Referral services are responsible for informing the referrer if they are: <ul> <li>unable to engage the person perpetrating violence and their family and whānau</li> <li>no longer engaged, and if there are any escalating risk issues.</li> </ul> </li> </ul>
Specialist response	How to respectfully and safely engage with perpetrators	<ul> <li>Practitioners understand:</li> <li>how to acknowledge people's own experiences as a victim of violence, while holding them responsible for their use of violence</li> <li>Examples of skills related to working with people perpetrating violence</li> <li>Ability to: <ul> <li>ask what is it like to take responsibility for hurting others even when you have been hurt yourself?</li> <li>introduce concerns related to abuse in a non-judgmental, respectful manner</li> <li>keep conversations focused on the abusive person's behavior and its impact on children, family and whānau</li> <li>ask questions which explore his own perception of the problem and its impact on himself and others</li> <li>present and document family violence as factor starting with a description of the abusive person's behaviour.</li> </ul> </li> </ul>	<ul> <li>Engage people in a manner that builds respect/trust, supports them, and holds them responsible for ceasing their harmful behaviour</li> <li>Work in partnership with and take the lead around safety and responsibility from specialist victim services.</li> </ul>

owledge of:	Excellence is:	Your actions are:
Safe assessment of perpetrators who are parents or have contact with children	<ul> <li>Practitioners:</li> <li>have higher expectations of men as parents and fathers, and see family violence perpetration as a parenting choice. Setting high standards for him as a parent requires increased practitioner assessment of, and engagement with abusive partners/parents in the child protection context to address the risks they pose</li> <li>ensure child safety when a person who has caused harm by sexual violence is being released from custodial sentence</li> <li>make necessary links to treatment for all of those who have caused sexual harm and ensure that treatment is of an appropriate duration to meet the needs of the individual perpetrator and the needs of their family</li> <li>Examples of assessment areas</li> <li>Perpetrator's pattern</li> <li>coercive control toward adult survivor</li> <li>actions taken to harm children</li> <li>Children's trauma &amp; safety</li> <li>victim of physical abuse</li> <li>seeing, hearing or learning about the violence</li> <li>Effects on family and whānau functioning</li> <li>loss of contact with extended family and whānau</li> <li>loss of income</li> <li>housing instability</li> <li>educational and social disruptions</li> <li>Effect on partner's parenting</li> <li>depression, post traumatic stress disorder, anxiety, substance abuse</li> <li>loss of authority</li> <li>energy goes to addressing perpetrator instead of children</li> <li>interference with day to day routine and basic care</li> <li>Harm to child</li> <li>behavioral, emotional, Social and cultural, educational</li> <li>developmental</li> <li>physical Injury</li> </ul>	<ul> <li>Recognise the perpetrator's decision to be abusive and controlling as a parenting decision</li> <li>Assess his: <ul> <li>parenting skills</li> <li>substance abuse, mental health</li> <li>relationship choices</li> <li>ability to meet his children's basic needs (food, medical, see shelter, education)</li> <li>strength of his family and whānau network</li> <li>employment choices, childcare choices and co-parenting relationship.</li> </ul> </li> <li>Assess: <ul> <li>the perpetrator's behaviour: not the relationship or the adult survivor's behaviour</li> <li>the connection between the perpetrator's behaviour and child safety and family and whānau wellbeing: not just t impact on the adult victim</li> <li>Assess "risk" to the safety of the child from the child's perspective, not just the "risk" perspective attached to th person who has sexually offended.</li> </ul> </li> </ul>

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Knowledge of:	Excellence is:	Your actions are:
Specialist response	<ul> <li>ensure child safety assessments clearly identify the abusive person's behaviors as the source of family violence risk to children instead of adult survivors' behaviour</li> <li>focus on behaviours (in terms of the risk to child safety and wellbeing – whether the couple are together or not and whether there is a protection order or not)</li> <li>articulate the impact of the perpetrator's behaviour on the child and family and whānau functioning</li> <li>do not focus on the relationship status or geography</li> <li>remember that victims are responding to the abusive person's entire pattern of behaviour, so if we make this pattern visible we can understand victims' responses and protect child and adult victims</li> </ul>	

Kn	owledge of:	Excellence is:	Your actions are:
Specialist response	Risk assessment and risk management of perpetrators	<ul> <li>Practitioners understand:</li> <li>how to undertake comprehensive assessment of risk, safety and protective factors, are aware of the resources and services for people perpetrating violence, and can articulate dangers related to other interventions, eg. family/couples counselling and the interrelationship of mental health and substance abuse services</li> <li>Example of a child welfare/protection risk management checklist <ul> <li>has the perpetrator been interviewed?</li> <li>can we describe the perpetrator's pattern of coercive control and actions taken to harm the children?</li> <li>can we describe the non-offending parent's efforts to protect the children?</li> <li>does the case plan involve specific steps and expectations for the perpetrator?</li> <li>do these specific steps address the perpetrator?</li> <li>is there coordination between criminal court, child protection and/or other systems regarding the perpetrator?</li> <li>is the perpetrator being referred to appropriate resources, e.g. evaluation and treatment?</li> <li>is court/child protection agency outlining the changes they expect the perpetrator to make?</li> <li>is the perpetrator being held equally accountable as parent or parental figure for the safety and wellbeing of their children?</li> </ul> </li> </ul>	<ul> <li>[Refer to Risk Assessment and Management Framework]</li> <li>Develop a case plan that focuses on measureable behaviour change goals related to coercive control and other identified issues</li> <li>Set child centred expectations for the person perpetrating violence as part of case plans</li> <li>stop identified abusive and controlling behaviours</li> <li>parenting specific expectations</li> <li>support for other parent's parenting</li> <li>compliance with court orders including child support/custody</li> <li>support for children's basic needs</li> <li>support for recommended children's therapeutic needs (when necessary)</li> <li>support children's gender expression</li> <li>engage in treatment/intervention specifically designed to address identified pattern</li> <li>engage in other treatment/services (when necessary)</li> <li>Address the case plan with the perpetrator</li> <li>Evaluate changes in their behaviour.</li> </ul>

Kn	owledge of:	Excellence is:	Your actions are:
Specialist response		<ul> <li>Example questions to evaluate changes in his behaviour</li> <li>is his behaviour different? Specifically related to his pattern of coercive control</li> <li>is he able to focus on the needs of his children versus his own needs?</li> <li>is able to support the children's relationship with their mother?</li> <li>does he identify his abusive behaviour as being wrong?</li> <li>can he describe the impact of his abusive behaviour on his children?</li> </ul>	
	The concepts of risk, need and responsivity	<ul> <li>Practitioners understand:</li> <li>the principles of risk, needs and responsivity when assessing a person's abusive behaviour and identify the risk they pose to their victim(s), address the factors related to their abusive behaviour and provide interventions at the right intensity and frequency</li> <li>responses to violence should be designed and delivered in a way that is proportionate to the risk posed by the person perpetrating violence</li> </ul>	<ul> <li>Use effective risk measures and understand the limits of confidentiality</li> <li>Monitor dynamic risk and respond to escalation appropriately and in a timely manner.</li> </ul>
	<ul> <li>Developing culturally responsive high risk management strategies which:</li> <li>are person-centred and family and whānaucentred</li> <li>address the multiple issues the person perpetrating violence and their family and whānau may be experiencing</li> </ul>	<ul> <li>Practitioners understand:</li> <li>the importance of holistic assessment that identifies and responds to the level of risk, complexity of need and protective factors present, ensures appropriate person identified cultural frameworks are used, and holds the importance of whānau wellness central to assessment and whānau plans</li> <li>the use of different strategies and culturally appropriate frameworks to engage people perpetrating violence and collaborate in multi-agency risk management to ensure people perpetrating violence</li> </ul>	<ul> <li>The specialist service:</li> <li>respectfully engages the person to address their use of violence</li> <li>engages with key cultural people re: restoration of mana and tapu and builds key cultural relationships with specialist providers</li> <li>undertakes proactive outreach where required</li> <li>leads the support and risk management of the person perpetrating violence and keeps other practitioners updated about any changes</li> <li>monitors the person perpetrating violence intensively until he makes sustainable changes</li> <li>recognises the importance of chosen family for people in the Rainbow community</li> <li>assesses how to include chosen family as a protective mechanism.</li> </ul>

Knowledge of:	Excellence is:	Your actions are:
Role as part of a 'safety team' approach	<ul> <li>Practitioners understand:</li> <li>that when working in partnership with other agencies in a Safety Team approach, all practitioners establish the specific skills/ actions they contribute and are accountable for in the safety strategy of victims and engagement with perpetrators</li> </ul>	<ul> <li>The specialist service:</li> <li>arranges mental health and substance abuse assessments as appropriate</li> <li>works in partnership with other specialist services involved with the child and adult victims, and the person perpetrating violence</li> <li>ensures the person perpetrating violence plans and goals are in line with child and adult victims' safety</li> <li>engages with his family and whānau as part of the responsibility solution</li> <li>engages with the community as part of the responsibility solution</li> <li>regularly reviews the person perpetrating violence and their family and whānau progress at their agency's/ agencies' case review meetings and within multi-agency case management processes.</li> </ul>
<ul> <li>Sexual violence and harmful sexual behaviours specifics</li> <li>Tactics often employed by people perpetrating harmful sexual behaviours, including: blame, hostility, minimisation, defensiveness and over compliance with safety plans and treatment requirements</li> <li>how to identify potential changes to dynamic risk (sexual violence specific) and therapeutically manage these</li> <li>empirical risk measures relating specifically to sexual pre-occupation and behaviour</li> <li>of dynamic risk and 'the Good Lives' Model</li> <li>the importance of combining risk management and the development of prosocial attitudes and skills</li> <li>knowledge of effective risk measures and understanding of confidentiality and limitations</li> <li>responses will be delivered in a way that decreases resistance and increases engagement with the person's support network is key</li> </ul>	<ul> <li>Practitioners understand:</li> <li>effective risk measures</li> <li>confidentiality and limitations</li> <li>how to deliver responses in a way that decreases resistance and increases engagement and internal motivation. Engagement with the person's support network is key</li> <li>all responses to violence must be delivered in ways that effectively meet resistance and increase engagement and the internal motivation of the perpetrator to take responsibility for their actions and develop strategies for change</li> <li>sexual violence responses as specialist responses and the need for strong, across-sector linkages to ensure a full range of services is available and made accessible (alcohol and other drugs, mental health, Stopping Violence Services etc)</li> <li>that sex, sexuality and gender diverse people are targeted for sexual violence because they break gender norms</li> <li>perpetrators from the Rainbow community will require understanding of Rainbow cultural context</li> </ul>	<ul> <li>See and enquire beyond the harmful sexual behaviours and to address the person in their totality</li> <li>Engage the person's support network</li> <li>Work closely with the person's support network to provide specialist training on harmful sexual behaviours and limitations of treatment.</li> </ul>

Knowledge of:		Excellence is:	Your actions are:
Cor	Examples of Current Programmes		
Community	<ul> <li>It's not OK</li> <li>family violence – It's not OK</li> <li>many people who are being abusive can change if they are willing and accountable, and have support over the long-term</li> </ul>	<ul> <li>community partnerships that develop the capacity of community networks to support and sustain safe behaviours, and supports individual/collective transformation</li> <li>speaking out, actively naming behaviours and shaming 'locker room' banter and ideas of sexually coercive behaviour as 'normal'</li> <li>challenging victim-blaming when it operates to minimise harmful sexual behaviour</li> </ul>	<ul> <li>Promote messages that change is possible for people who are being abusive, if they are willing and accountable, and have support over the long-term</li> <li>Create opportunities for learning from people who can share from former abuser experiences about what helped them become safe and stay safe.</li> <li>Link to community responses to family violence to help create a pathway from informal helpers to specialist services.</li> </ul>
	<ul> <li>E Tů Whānau messages</li> <li>all violence towards whānau is unacceptable within Te Ao Māori:</li> <li>violence against wāhine and tamariki within whānau is not part of Māori cultural tradition</li> <li>acts of violence are considered a transgression that breach the mana and tapu of the individual, their whānau and their entire whakapapa</li> </ul>	<ul> <li>members of whānau, hapū, iwi, community and society stand up, speak out and stop any transgressions</li> </ul>	<ul> <li>Reinforce and use collective action language</li> <li>Refer to and support reciprocal responsibilities and obligations of whānau</li> <li>Support Kahukura.</li> </ul>
	<b>Nga Vaka o Kaiga Tapu for Pacific peoples</b> A conceptual framework for addressing family violence in eight Pacific communities in Aotearoa New Zealand. Each framework is grounded in the key concepts, values and beliefs that are relevant and appropriate to addressing violence living in diverse settings and circumstances	<ul> <li>Pacific influencers, families and communities are supported and equipped to lead and respond accordingly to ensure that members of their families and communities are safe and know where to go for further help</li> </ul>	<ul> <li>Service models of good practice led by communities are supported</li> <li>Co-design with Pacific communities actions they can lead to support individuals and families.</li> </ul>

## **Reflective practice questions**

#### Primary

- Am I maintaining the perpetrator's responsibility for the use of violence and its cessation
- Have I verified the person perpetrating violence selfreport with other services and people?
- Am I using accurate language that makes the person's violence visible to other practitioners and does not minimise it?
- Are victims voices being held 'front and centre' in relation to decisions regarding the monitoring/freedoms of the person perpetrating violence?
- Have I unintentionally colluded with the person perpetrating violence?
- What are the impacts of collusion on victims' safety?
- Is my relational focus clouding potential risk factors and therefore compromising victims' safety?
- Who is most likely to be harmed from an overestimation of behaviour change?

#### Specialist

- What sustained changes demonstrate the person's behaviour is becoming safer? Is this change enough to enable safety for child and adult victims?
- What shifts might still need to occur for the wider family and whānau in order to better support and sustain the abusive person's behaviour change?
- What is the risk of the person's progress, however small, overshadowing the ongoing risks and harmful impact of his use of violence on his children and partner?
- Have I assessed the risk of the perpetrator, what factors need to be addressed to reduce their abusive behaviour and at what intensity and frequency should an intervention occur?

#### Leaders

- How am I supporting my staff to build professional knowledge and expertise in sexual violence/abuse work?
- How am I ensuring my staff can maintain work/life balance and the organisation is providing a supportive work context with appropriate workloads?
- How am I assessing the quality of my staffs' decision making and responses?
- What comprehensive training and practice mentoring have care and protection social workers had on effectively and safely working with abusive fathers and stepfathers?
- Am I providing quality supervision to my staff?
- Do staff regularly get the opportunity for critical reflection and evaluation of their work, support in the emotional nature of the work, and cultural supervision?
- Do my staff safely share information with victims' services and children's services?
- How am I letting government know about the changes that need to happen to increase community safety from sexual violence?

#### Kahukura and Community Champions

(Leaders who might be found in communities, iwi, hapū, whānau, neighbourhoods, schools, churches etc who inspire change)

- How do I make sure the voices of the victims are the strongest voices in the conversations?
- What networks exist specifically to support and sustain people's safe behaviours?
- How do I bring all the agencies and/or actors in the situation together so we understand each other's contribution to helping people perpetrating violence sustain safe behaviours?
- Who do I need around me to ensure I respect cultural and other traditions while also making sure intergenerational patterns of violence are broken?
- How do I create a network of whānau, hapū, iwi, neighbourhoods, schools and communities to support perpetrators in changing the attitudes and behaviours that produce violence?
- Do I lead by example the key messages and tenets of E Tū Whānau, Nga Vaka and It's Not OK?"

# Domain 06

Working as part of an integrated team

### OVERVIEW

A shared understanding of and agreed practice principles that support practitioners and agencies to work together safely

Kn	owledge of:	Excellence is:	Your actions are:
Primary response	<ul> <li>Clarity of roles and responsibilities</li> <li>local resources, specialist and generalist agencies and multi-agency response pathways</li> <li>cultural specialist providers, for example lwi and Pasifika and Rainbow communities</li> </ul>	<ul> <li>services know and understand each other's remit and services provided, and spend time establishing relationships with service providers</li> <li>recognise people holding specialist knowledge in underresourced communities, including Rainbow communities, may be providing information, support and advice in an unpaid capacity. Support their engagement through arranging meetings at times they can attend and making financial or other contributions for their time if possible</li> </ul>	<ul> <li>Build key relationships with NGOs, statutory services, Iwi, Māori and communities</li> <li>Meet with appropriate providers and professionals identified in the safety strategy by the practitioner and the person, family and whānau</li> <li>Take the lead from specialist providers working with the victims i.e. acknowledging they are the experts in their areas</li> <li>Know whom to access for cultural guidance and intervention.</li> </ul>
	Interpersonal communication skills	<ul> <li>agencies provide training to their practitioners on interpersonal skills of communicating, such as monitoring what and how one conveys information, how one listens to another practitioner and how other practitioner's messages are interpreted</li> </ul>	<ul> <li>Commit to interpersonal skills and communication training as part of your professional development strategy annually</li> <li>Within performance review structure, ensure you receive feedback on your monitoring, listening and interpretation skills.</li> </ul>
	<ul> <li>Multi-agency critical reflection and reflective practice processes</li> <li>addressing difference of opinions and professional hierarchies</li> <li>referral procedures and cultures of feedback</li> </ul>	<ul> <li>an established culture of feedback across all agencies and positive acknowledgement of feedback about actions taken in response to referrals, and about both safe and problematic practice</li> <li>recognising the occupational hierarchies that can impact on what voices can be heard and the articulation of concerns. Junior staff or 'lower status' staff may feel inhibited from challenging a senior or 'high status' professional's understanding of the situation. These same professional hierarchies can also occur within multi-agency working environments</li> <li>practitioners need to explore why agencies may have reached different risk and safety judgments. Openly exploring differences requires a shared culture in which it is acceptable for practitioners to query each other's assessments. Such a process (intra-agency as well as interagency) helps guard against 'group think', which is a powerful dynamic which encourages conformity to the prevailing points of view</li> </ul>	<ul> <li>Practitioners:</li> <li>query each other's assessments, irrespective of their role</li> <li>follow up referrals</li> <li>regularly provide feedback on safe and problematic practice.</li> </ul>



Knowledge of:	Excellence is:	Your actions are:
<ul> <li>Key legislation</li> <li>Domestic Violence Act 1995</li> <li>Privacy Act 1993</li> <li>Vulnerable Children Act 2014</li> <li>Care of Children Act 2004</li> <li>Children, Young Persons and their Families Act 1989</li> <li>Human Rights Act 1993 (relevant as prohibits discrimination towards people on the basis of gender or sexual orientation)</li> <li>Sex crimes in the Crimes Act</li> </ul>	<ul> <li>practitioners have read, adhere to and actively raise awareness within the whole of the community the key legislations that define human rights, provide protection against discrimination, define family violence as a crime, and define the responsibilities of agencies and government to protect human rights in Aotearoa New Zealand</li> </ul>	<ul> <li>Use legislation appropriately (including within memoranda of understanding) to maximise the safety of victims and manage the risks posed by people perpetrating violence</li> <li>Sharing of information in a manner that is safe for the victims and centres on holding the person perpetrating violence responsible for stopping their violence.</li> </ul>
<ul> <li>Cultural frameworks</li> <li>cultural specialist providers, for example, lwi and Pacific</li> <li>Kaupapa Māori – Tikanga, Mana and cultural concepts</li> <li>Nga Vaka o Kaiga Tapu – Pacific conceptual frameworks to address family violence for Pacific peoples</li> <li>building key cultural relationships with specialist providers</li> <li>knowing who to access for cultural guidance and intervention</li> <li>Rainbow competencies</li> </ul>	<ul> <li>all practitioners have built networks with enough diversity in leadership and expertise so that all cultural groups within the local community, including rainbow communities, can be catered for with appropriate strategies, concepts and practices</li> </ul>	<ul> <li>Access local cultural expertise that is supported by the family and whānau</li> <li>Adhere to and be respectful of local cultural tikanga, kawa and kaupapa</li> <li>Follows the lead from cultural specialists around cultural concepts and practices</li> <li>Ensure a cultural framework of whānau wellness is central to the ongoing assessment and whānau plans</li> <li>Ensure that the tapu (sacredness) of the whānau is upheld at all stages of interaction</li> <li>Integration of the Pacific family violence training programmes.</li> </ul>
<ul> <li>Integrative practice opportunities</li> <li>Non-hierarchical practice (NGO and statutory), which prioritises an interdisciplinary team approach guided by: <ul> <li>consensus building</li> <li>mutual respect</li> </ul> </li> </ul>	<ul> <li>all practitioners are inclusive, inviting interagency engagement where appropriate and remaining non-hierarchical once integrative practice is undertaken</li> <li>a shared purpose of addressing violence that permits each practitioner and the person, family and whānau to contribute their particular knowledge and skills within the context of a shared safety strategy</li> </ul>	<ul> <li>Identify opportunities for joint interagency engagement and assessment processes with people, families and whānau</li> <li>Invite practitioners from different services to participate in your agency's multidisciplinary team meetings, or case review processes</li> <li>Invite practitioners from different services to work from your agency's office, and spend time with your agency to better understand the way you work so you can strengthen how you can work together.</li> </ul>

Kr	nowledge of:	Excellence is:	Your actions are:
Specialist response	Working as a member of a multi-agency 'safety team'	<ul> <li>the roles of leadership, monitoring, response, feedback and evaluation are understood by all members so that the needs of all the family members are properly met to ensure safety and minimise risk</li> <li>occupational hierarchies can impact on what voices can be heard and the articulation of concerns. Junior staff may feel inhibited from challenging a senior professional's understanding of the situation. These same professional hierarchies can also occur within multi-agency working environments</li> <li>practitioners need to explore why agencies may have reached different risk and safety judgments. Openly exploring differences requires a shared culture in which it is acceptable for practitioners to query each other's assessments. Such a process (intra-agency as well as interagency) helps guard against 'group think', which is a powerful dynamic which encourages conformity to the prevailing points of view</li> </ul>	<ul> <li>The safety team leader makes the family's and whānau situation explicit for the whole team and clarifies the safety priorities. The team leader creates space for the whole team's contribution. Together the team:</li> <li>Anticipate <ul> <li>What should happen – what are our expectations for this person, family and whānau?</li> <li>What could happen – what risks and challenges do we see?</li> </ul> </li> <li>Monitor: How would we know if things were on track or changing?</li> <li>Respond: How would we respond to emerging risks we see? And to unexpected events?</li> <li>How do we speak up if we have concerns?</li> <li>Once we see a change in the situation or a new problem, how can we speak up about it? What if our concerns aren't being responded to?</li> <li>ENQUIRE: to ensure that there is a shared understanding of the situation</li> <li>ADVOCATE: for a different approach; challenge; curious question</li> <li>ASSERT: the need to do things differently; call for help; take over</li> </ul> <li>Understanding usual work – why things worked well, not just how and why they go wrong</li> <li>What did we have to work around and what made it safe?</li> <li>Consider the timing of support when people present with a range of complex issues such as mental health, alcohol and Drugs. Ensure not to overburden people and set them up for failure.</li>



Knowledge of:		Excellence is:	Your actions are:
Specialist response	How to apply the principles of Ata in practice	<ul> <li>Āta focuses on our relationships, negotiating boundaries, working to create and hold safe space with corresponding behaviours</li> <li>Āta gently reminds people of how to behave when engaging in relationships with people, kaupapa and environments</li> <li>Āta intensifies people's perception in the following areas: <ul> <li>it accords quality space of time (wā) and place (wāhi)</li> <li>it demands effort and energy of participants</li> <li>it conveys the notion of respectfulness</li> <li>it conveys the requirement of reflection, the prerequisite to critical analysis</li> <li>it conveys the requirement of discipline</li> <li>it ensures that the transformation process is an integral part of relationships</li> </ul> </li> <li>Āta incorporates the notion of strategising</li> </ul>	<ul> <li>Consciously use the principle of Āta in your practice</li> <li>Consciously use te reo and its bodies of knowledge to inform your practice.</li> </ul>
	<ul> <li>Sexual Violence specifics</li> <li>the principles of Risk Needs Responsivity and the importance of individualised/case by case treatment delivery</li> <li>understands specialist response and roles/ responsibilities</li> <li>clear delineation of roles, shared goals/ outcomes specific to the reduction of sexual violence and information sharing</li> <li>strong interagency and across sector linkages that ensure interventions that reduce risk and increase pro-social interaction and motivation to change</li> <li>regular system reviews that explore from various perspectives the persons progress, motivation, and engagement in treatment</li> </ul>	<ul> <li>strong interagency and across sector linkages that ensure interventions that reduce the risk of sexual violence and increase pro-social intimate partner interaction</li> <li>understanding sexual violence responses as specialist responses. Having strong across sector linkages to ensure a full range of services is available (e.g. Mental Health, alcohol and other drugs, Stopping Violence Services)</li> <li>shared safety plans towards family reconciliation across agencies working with survivors and agencies working with offenders</li> </ul>	<ul> <li>Demonstrate strong inter-agency communication skills and values the importance of collaborative practice</li> <li>Participate in shared training and supervision specific to sexual violence intervention</li> <li>Provide focused interventions that support the development of pro-social connections and monitoring.</li> </ul>

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owledge of:	Excellence is:	Your actions are:	
Examples of Current Programmes			
<ul> <li>It's not OK</li> <li>family violence – It's not OK</li> <li>anyone can experience family violence, or be abusive, though most abuse is perpetrated by men against women due to social norms that support dynamics of male power and control</li> <li>most people want to help but are not sure how to do so effectively</li> <li>communities of all types can play an important role in helping change attitudes and behaviours to prevent family violence</li> <li>individuals can be helpers and/or influencers within their families and networks</li> </ul>		<ul> <li>Develop community partnerships that support the capacity of community networks to proactively seek safety support for victims as appropriate to the severity of abuse</li> <li>Resource community initiatives focused on preventing violence (re)occuring and changing attitudes and behaviours that condone violence against women and children</li> <li>Identify and support community leadership and champions.</li> </ul>	
<ul> <li>E Tū Whānau messages</li> <li>all violence towards whānau is unacceptable within Te Ao Māori:</li> <li>violence against wāhine and tamariki within whānau is not part of Māori cultural tradition</li> <li>acts of violence are considered a transgression that breach the mana and tapu of the individual, their whānau and their entire whakapapa</li> </ul>		<ul> <li>Strengthen relationships with whānau, hapū, iwi and communities</li> <li>Co-design practice principles and practice frameworks with whānau.</li> </ul>	
<b>Nga Vaka o Kaiga Tapu for Pacific peoples</b> A conceptual framework for addressing family violence in eight Pacific communities in Aotearoa New Zealand. Each framework is grounded in the key concepts, values and beliefs that are relevant and appropriate to addressing violence living in diverse settings and circumstances	<ul> <li>Pacific influencers, families and communities are supported and equipped to lead and respond accordingly to ensure that members of their families and communities are safe and know where to go to for further help</li> </ul>	<ul> <li>Service models of good practice led by communities are supported</li> <li>Co-design with Pacific communities actions they can lead to support individuals and families.</li> </ul>	
<ul> <li>The role of support networks</li> <li>Help councils, community, whānau, hapū and iwi networks and neighbourhoods are working together to actively create places and environments of safety for victims</li> </ul>	<ul> <li>councils, community, whānau, hapu and iwi networks and neighbourhoods work together to actively create places and environments of safety for victims</li> </ul>	Bring community, whānau, hapū, iwi and neighbourhood resources together to provide safe places where victims' experiences can be shared.	



## **Reflective practice questions**

#### **Primary and Specialist**

- Is there a shared culture in which it is acceptable and even desirable to query each other's assessments?
- How am I regularly reviewing the quality of the analytical work involved in decision-making and the quality of the responses?
- Does my practice advance, enhance and support the victim and whānau plan as advised by the lead provider and whānau?
- What are the strengths of the concurrent safety strategies, i.e. what will practitioners do if they cannot contact the victim?
- Are plans that are made to include services and goals for child safety obtainable and accessible?
- Will safety goals include culturally appropriate accessible services for children?
- Who are the practitioners and community agencies who can support whānau in the achievement of their immediate and long-term goals?
- Have I communicated with partner agencies to provide feedback regarding their responses what worked well and what didn't work so well? What other opportunities are there for improvement?
- How could my current service responses allow for a more integrated response to the whole family or whānau?
- How do I apply principle led practice in all circumstances and environments?
- Have I assessed capacity to change?
- Am I making use of and supporting protective whanau and whanau resources? How do we resolve differences?
- Have I supported a specialist response if it is from a community or unpaid specialist role?

#### Leaders

- Are there clear agreements in place about sharing information with other agencies?
- Do my staff know what information they can share, when they can share it, and how to document their reasons for sharing or not sharing information?
- Do my staff assume full personal responsibility for 'their client' or family and whānau, or do they see the work as a shared responsibility? How does my agency guard against isolated and siloed practice?
- Have I provided on-going professional learning and development opportunities for my staff through cross agency training?
- How do I apply principle led practice in all circumstances and environments?
- How are leaders supported, resources are made accountable for their role in supporting multi-agency collaboration?

#### Multi-agency Governance/Leaders

- How do victims, people perpetrating violence and their families and whānau experiences shape local services? How do you know about their experiences?
- Are there multi-agency protocols in place based on a shared philosophy and an agreed set of practice principles and regular review, which all agencies endorse?
- How regularly do multi-agency groups review their collective practice, and how they are working together? Does everyone feel safe to raise issues; are everyone's concerns listened to and responded to?
- How well do government agencies share power with NGO partners?
- How is learning fed back into the system to promote continuous improvement?
- Importance of knowing each other:

- How are you ensuring that practitioners from your agency understand the range of actions each agency can initiate? What opportunities are there for face to face meetings?
- Do practitioners understand the difference between specialist services (victim and people perpetrating violence) and non-specialist services? Who is available to respond to the immediate safety of victims?
- Is there regular shared multi-agency training provided?
- What opportunities are there to collaborate and partner with other agencies? Are there co-location opportunities?
- How well do government agencies and NGO agencies understand each others' roles and levers?

#### Kahukura and Community Champions

(Leaders who might be found in communities, iwi, hapū, whānau, neighbourhoods, schools, churches etc who inspire change)

- What support do I provide to practitioners?
- How do I make sure conversations about people's experience of violence inform the design process?
- What support can I provide to help people to find the principles and frameworks that work for themselves?
- How do I support tailored solutions?
- How do I apply principle led practice in all circumstances and environments?

## Glossary

Child abuse and neglect	Child abuse and neglect includes all forms of physical and emotional ill-treatment, sexual abuse, neglect and exploitation that actually or potentially harms a child's health, development or dignity. Within this broad definition, five sub-types can be distinguished – physical abuse, sexual abuse, neglect, emotional abuse and exploitation. Children's exposure to intimate partner violence is psychological (emotional) abuse of the child and is therefore included in the definition of child abuse and neglect.
	The Children, Young Persons and their Families Act, 1989, defines child abuse as "the harming (whether physically, emotionally, sexually), ill-treatment, abuse, neglect, or deprivation of any child or young person".
Chosen Family	Families of origin may be crucial support systems and places of belonging for many Rainbow people, particularly those who are Māori, Pasefika, migrant or from other ethnicities. But Rainbow people will often also need support from friends and community. It is important to acknowledge chosen family in the Rainbow community – friends, partners, peer support groups and online support groups.
Culture	Used in this document to refer to community of belonging and shared experience centered around, for example, ethnicity, faith, geographical place, sexuality and gender diversity or disability experience.
Education	Education promotes knowledge about family violence, ie, dynamics of family violence and intimate partner violence lethality risk factors.
Entrapment	The manner in which intimate partner violence inhibits a victim's resistance to, or escape from, the abuse. The use of coercive and controlling tactics (including isolation, threats and violence) by abusive partners entraps victims, preventing them from keeping themselves and their children safe (prior to or post-separation) or, in some instances, from leaving the relationship.
	With regards to sexual violence entrapment can also include restraint, isolation, threats and violence against both known and stranger victims.
	Entrapment can also have social and structural dimensions. The quality of agencies' responses to victims' help- seeking and the inequities victims may be living with can compound their entrapment.
	Entrapment can be experienced individually and collectively.

Elevated risk level	(could also be referred to as escalating risk) would refer to any dynamic changes in risk that are deemed to enhance the likelihood of reoffending. (eg: a person who has engaged in harmful sexual behaviours against children would move from moderate risk to high risk due to a new relationship where the partner has children) Elevated risk does not necessarily mean extreme risk.
Extreme risk level	This refers to risk factors that place a person at immediate risk of engaging in harmful behaviour and are mitigated by very few protective factors. (eg: a person discloses to a counsellor that they intend to harm their ex by 'going her with an axe'. They have an axe in their car and storm out of the session in an agitated state saying "I'm going to kill her"). Extreme risk requires immediate protective action and an enhanced safety response.
'Face to face' meetings	This encompasses restorative justice conferences, counselling and mediation contexts , and family group conferences
Family Violence and Sexual Violence is co-occuring	This is when sexual violence is a component of coercive controlling tactics. Can include physical and sexual violence towards children in the home.
Family Violence without the presence of sexual violence	This includes psychological, physical , emotional violence. Primarily directed at intimate partner but inclusive o Child Abuse and Neglect
Good Lives Model	The Good Lives Model is a strengths based approach developed within the Harmful Sexual Behaviour space and focuses on the acquisition of human goods goals. As a person acquires these goals it is envisaged they move away from harmful pathways, develop a new self-narrative, and are better placed to maintain desistance
Hidden and future victims	Hidden victims are those people who are affected by family violence (such as children living in a home where they are exposed to an abusive partner's behaviour) but whose experiences of abuse have not been identified by the agency or practitioner who is responding to violence within the family and whānau.
	Future victims are future partners or children (such as those in future relationships or the next generation) of a person who has a known history of perpetrating family violence.

Historical trauma (inclusive of cumulative trauma and intergenerational trauma)	Trauma caused to groups and communities because of major historical events. For example, the processes and actions associated with the colonisation of indigenous people. If unaddressed, such trauma is transmitter from generation to generation, resulting in contemporary lifetime trauma, chronic stress, discrimination and family violence. Also that trauma is cumulative in that if a person experiences multiple traumas across time and is unable to process these to a recovery then the ensuing trauma will have a compounding effect on their health and wellbeing.
'Honour' based violence	Violence committed within the context of the extended family which are motivated by a perceived need to restore standing within the community, which is presumed to have been lost through the behaviour of the victim.
Integrated service response	Understanding of roles and responsibilities across providers, and able to demonstrate a holistic approach to client needs based on shared understandings, outcomes, and resources.
Intimate partner violence	Coercive and controlling behaviours within an intimate relationship (including current and/or past live-in relationships or dating relationships).
	Coercion involves the use of force or threats to intimidate or hurt victims and instil fear. Control tactics are designed to isolate the victim and foster dependence on the abusive partner. Together these abusive tactics inhibit resistance and escape.
	Coercion tactics:
	<ul> <li>Violence – assaults, severe beatings, strangulation, sexual violence and use of weapons and objects to inflic injury or death.</li> </ul>
	<ul> <li>Intimidation – threats, jealous surveillance, stalking, shaming, degradation and destruction of property. This can include violence directed at children and pets/animals.</li> </ul>
	Control tactics:
	<ul> <li>Isolation – restricting the victim's contact with family, whānau, friends and networks of support, monitorin their movements and restricting their access to information and assistance.</li> </ul>
	<ul> <li>Deprivation, exploitation and micro-regulation of everyday life – limiting access to survival resources (such food, money, and cell phones) or controlling how victims dress.</li> </ul>

Intrafamilial Violence (IFV)	Intrafamilial Violence (IFV) is a broad term that includes all forms of abuse between family members other than intimate partners or adult family members/parents abuse of children. It includes the abuse/neglect of older people, violence perpetrated by a child against their parent, violence perpetrated by a parent against an adult child and violence among siblings.
Kahukura	Leaders who might be found in communities, iwi, hapū, whānau, neighbourhoods, schools etc. who inspire change
Māori Cultural Imperatives	The use of cultural imperatives: for example, whakapapa, tikanga, wairua, tapu, mauri, and mana, has the potential to inform wellbeing in intimate partner and whānau relationships, transform behaviours and provid alternatives to violence. Using these imperatives can guide transformative practices and inform strategies for whānau violence prevention and whānau wellbeing. They can also be seen as protective factors within whānau, hapū and iwi.
Mana tamaiti/ tamariki	In relation to a person who is Māori, means their intrinsic worth, wellbeing, and capacity and ability to make decisions about their own life.
Meaning making	Meaning making relates to how someone constructs and makes sense of their world i.e. relationships, events etc. We each have our own individual meaning making frameworks that we use to navigate those relationships, events and contexts.
Principle led practice	Principled practice (Nga Takepū- applied principles) are those positionings (i.e. ethics) and contexts from whic the practitioner will talk back to his or her practice (Hohou Te Rongo Kahukura – Outing Violence).
Rainbow	Rainbow seeks to include all people in Aotearoa New Zealand under the sex, sexuality and gender diversity umbrellas, this includes people who identify as aka'vaine, asexual, bisexual, fa'afafine, fakafifine, fakaleiti, female to-male, gay, gender fluid, gender-neutral, gender nonconforming, genderqueer, gender variant, hinehi, hinehua, intersex, lesbian, mahu, male-to-female, non-binary, palopa, pansexual, polysexual, queer, questioning, rae rae, tangata ira tane, takatāpui, (tongzhi), trans man, trans woman, transfeminine, transgender, transmasculine, transsexual, vaka sa lewa lewa, whakawahine and more (http://hbv-awareness.com/faq/#ten).
Rape myth	Inaccurate beliefs and attitudes about how and why rape and sexual abuse happens and about victims' culpability for being abused.

Risk, Need, Responsivity Model	Where level of risk dictates level of intervention, treatment is tailored to client specific need, and providers are able to tailor interventions in a way that maximises engagement and increases internal motivation to change (responsivity).
Safety	<ul> <li>Safety is a long-term collective process, which encompasses:</li> <li>the ongoing support of child and adult victims by agencies, safe whānau and community members</li> <li>addressing the multiple issues many victims, people using violence, families and whānau are struggling with</li> <li>sustaining safe behaviours by people who use violence and sexually harmful behaviour</li> <li>upholding the dignity of people and their cultural identities</li> <li>providing opportunities for healing from trauma and violence to all family and whānau members.</li> </ul>
Safety ally	A practitioner working in a safety partnership manner with victims, where they also take supportive actions to maximise victims' safety (children's and adults). Good intentions do not matter if there is no action against the victim's oppression and having power with rather than power over.
Safety partnership	Practitioners asking questions (instead of giving safety advice) about what victims have previously tried, how it worked, what they would try again, fears for their children and what level of social and cultural support they have. Then informed by who and what is helpful for victims, developing a basic safety strategy, progressing some safety actions themselves and following up these actions, i.e., any referrals made, reviewing the strategy at their team meetings.
Safety team	Multi-agency members contribute their agency's specific skills/actions to the development of a comprehensive multi-agency safety strategy, which addresses the needs of all family and whānau members (child and adult victims, and the abusive person). This includes proactive outreach and risk management of abusive people– how agencies plan to curtail and respectfully challenge their abusive behaviour and keep them connected and in sight. The team maintains safety zones for victims by curtailing the abusive person's violence. Team practice is characterised by dynamic actions and regular feedback loops. There is regular team review of safety strategies and safety zones. Safety is maximised through connection – services, safe family, whānau and community members weave a network of support around the victims (child and adult).

Safety zone	The concept of separation gives a sense of distance from the abusive partner and their behaviours, which in reality does not really exist. Victims can sometimes experience periods of physical separation from their abusive partner/father in some zones of their life. However, they are not 'separated' from the ongoing abuse. Agencies and communities needed to make the zones of safety in victims lives larger by making safe spaces for victims – at home, at school and work in their communities.
Sexual violence	Sexual act committed against someone without that person's freely given consent. It includes behaviours, attitudes and beliefs that include elements of force, non-consent, and power to gain sexual gratification and/ or control over another person/s and includes both contact and non-contact behaviours.
Sexual violence separate from family violence	All forms of sexual violence outside of primary family relationships. This includes Friend, Stranger and acquaintance sexual violence, 'people just met,' and computer assisted sexual violence.
Sexual Violence within family without other forms of family violence present	Can include sexually coercive behaviour in primary relationship and/or sexual abuse of children by parent/ caregiver/siblings/relatives. Often in secret and unknown to others in the home.
Specialist family violence, sexual violence and violence within whānau provider	A non-governmental organisation (NGO) whose core focus is family violence and which offers wrap-around services that address the safety needs of children and youth, adults and/or families/whānau experiencing violence. Managers and advocates have knowledge, skills and expertise in family violence. Service provision car include working with abusive partners/parents or working in partnership with services engaged with those using family violence.
Training	Training focuses on the development of skills that can be used in practice, ie, the interpersonal skills of communicating, which include monitoring what one conveys by way of information, how one listens to another practitioner and how other practitioners' messages are interpreted.

Trauma informed practice	Importance of paced, client centred responses based on an understanding of traumatic impact (fight flight freeze) and subsequent coping mechanisms including interpersonal dynamics. Also, understanding the cumulative impact of multiple trauma across the lifespan (including intergenerational trauma) and the importance of safe relational responses.
The United Nations convention on the Rights of a child	Sets out 54 articles on the basic rights of every child. The key articles of the convention for the framework are • Article 3 In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.'
	• Article 12 Children have the right to say what they think should happen, when adults are making decisions that affect them, and to have their opinions taken into account.'
	• Article 19 State parties shall take all appropriate legislative, administrative, social and educational measures to protec the child from all forms of physical or mental violence, injury or abusewhile in the care of parent/s, legal guardian/s or any other person who has the care of the child.'
Variable risk level	Risk is to be understood in both static and dynamic terms. While some aspects of risk are historic and fixed (static), overall risk is determined by dynamic (variable factors) that are changeable according to circumstance and environment.
Victims Code (2015)	The principles and rights in the Victims Code provide a supportive context for the aims and outcomes envisioned in the Framework, especially as they relate to services that help with the effects and consequences of criminal victimisation.
	The principles in part 1 of the Code send a strong message to service providers.
	In addition, the specific rights in part 2 of the Code provide victims in the criminal justice process with clear expectations about the quality and consistency of support from specific justice sector agencies.
	Although developed separately, the alignment between the Code and the Framework is strong and demonstrate a consistent approach to providing the right support to victims of family violence and sexual violence.

The concept of Violence within Whānau in the Framework acknowledges that Whānau are important vehicles for healing and change – even amid their complex lives and trauma. To be vehicles for change, they need culturally- informed help and support and approaches tailored to their unique histories and requirements. Invariably this involves restoring and strengthening their cultural identity and connections to bring back the protectiveness cultural traditions offer. Disrupting and transforming violence within whānau is about building safe and supportive communities, and growing safe and healthy whānau that are culturally connected. (Wilson D,)
The causes of violence that occurs within whānau are acknowledged as complex mix of both historical and contemporary factors. Understanding the difference between violence that occurs within whānau and family violence is critical in terms of any prevention and intervention practices, policies and legislation
In relation to a person, means the multi-generational kinship relationships that help to describe who the person is in terms of their mātua (parents), and tūpuna (ancestors), from whom they descend
In relation to a person, means:
(a) the purposeful carrying out of responsibilities based on obligations to whakapapa:
(b) the kinship that provides the foundations for reciprocal obligations and responsibilities to be met:
(c) the wider kinship ties that need to be protected and maintained to ensure the maintenance and protection of their sense of belonging, identity, and connection

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Building Team Resilience Framework

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## **Multi Agency Team**

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