

# Safety planning in crisis situations with and for Aboriginal women experiencing domestic and family violence: a practice guide

#### **ABOUT THIS GUIDE**

This guide has come from research with three independent women's specialist services and the work they do with and for Aboriginal women experiencing domestic and family violence (DFV). In the course of the research, Aboriginal women contributed as workers, board members, clients, and community members.

The guide shares learning from the research. It is not a checklist. The learning comes from two regions in Australia—central Australia and Canberra. The learning focuses on helping Aboriginal women as victims/survivors of DFV but may also be useful for victims/survivors from other backgrounds.

This guide focuses on the practice of safety planning in crisis situations, but also discusses a general approach to safety planning that may also be useful and relevant to non-crisis situations. Other guides discuss advocacy and outreach. In reality, there is a lot of overlap to how these three practices are used within women's specialist services with and for Aboriginal women. The practices should be grounded in services that are committed to continual learning, building understanding of and involvement with local contexts, and being culturally informed. Women's specialist services are generally independent and focus primarily on helping women and children. They include shelters, crisis lines, outreach, case management, and advocacy services, among others.

## Thinking about crisis

By its very nature domestic and family violence (DFV) creates and maintains states of crisis. Crisis can mean different things depending on perspective. Service users and services may have different understandings of crisis and different views as to how the situation came to be, what should be done and how those involved ought to behave.

A crisis can be an event, a situation or a way of responding to something. It can be time-specific or situation-specific. Viewed from the service user's perspective, a crisis may stimulate a request for outside help, guidance or something more directive. Viewed from the service position, a crisis requires a *response* (at the least) and can (but not always) give rise to an *action* (something more proactive). It will almost certainly trigger a range of professional and organisational concerns related

to the nature, duration, and possible consequences of the identified risks embedded within the crisis.

Responses to the crisis will depend on the function of the service, its mandate, its resources, its relations with others in a service system, and its disciplinary underpinnings. It will also depend on its location and the ancillary services available. Services and workers focused on crisis response may or may not have a pre-existing relationship with the woman.

## Safety planning, domestic and family violence, and crisis services

Safety planning is a central part of how specialist DFV services work with women. Safety planning with women experiencing DFV and who use crisis services is highly responsive to assessment about the nature, type, and consequence of the violence, and who else is affected (such as children). Safety planning is also highly responsive to the personal or family environment, and to assessments about the risks posed by the person using the violence.

Every situation is so different: from some people living in a caravan to some people living in a house, some on a farm. Depending on their situation we do a basic safety check, where they are, who they are with. (Crisis worker, Canberra)<sup>1</sup>

Service workers can undertake safety planning whether or not a woman recognises or discloses she is experiencing abuse, and whether or not she raises safety issues. In these circumstances, it is critical to place safety planning firmly within an overall strategy of building trust with the individual.

For a woman experiencing DFV, being "safe" may not be a single or static moment. A realisable objective of safety planning is to help make women *safer* (Davies & Lyon, 2014, p. xviii). A woman's "space for action" to *become safer* is constrained by violence, lack of support, and her having few supportive resources. Her "space for action" to *become safer* is expanded by others² constraining or seeking to constrain the violence (that is, making the perpetrator responsible and accountable for his behaviour). It is also expanded by increasing her resources (emotional, social, financial, practical, and so forth) and increasing the support to and with her at the time and over time (Kelly, Sharp, & Klein, 2014). Safety planning to expand a woman's space for action therefore is not just about physical safety. It is also about growing her resources and supporting the life she chooses.

When people don't have much, dignity and kindness are valued almost like it is treasure, more than anything else. (Service manager, remote Central Australia)

Working with a woman to help her become safer is in large part to help secure and restore personal dignity (Kelly & Meysen, 2016; Richardson & Wade, 2010). Safety planning is strongly linked with advocacy (practice guide 1) and outreach (practice guide 3).

#### What is safety planning?

Safety planning begins with "an understanding of the needs, resources, perspectives and culture of each victim" and centralises the woman's own perspective (Davies, 2009, 5).

Safety planning is different to, though often linked with, risk, danger, or lethality assessments.<sup>3</sup> It is a practice framework and a practice tool. Safety planning is not done to a woman but with her. It is less about expert assessment and more of a collaboration. It is a union of expertise.<sup>4</sup>

Safety planning is ongoing, dynamic, and responsive. It should not be viewed as a plan that is static. It is not a contract between a woman and a service in which she is made responsible (for protecting herself or others).

Safety planning works to understand the personal and family connections a woman lives with, is sustained by, or may wish to escape from. These connections may, at different times and in different contexts, produce risk and may also be protective. Therefore checking and re-checking with her about these connections is vitally important.

#### Safety planning:

...may be around who supports her, who doesn't in the house, in the family and community, where she can go at any point it time, what happens to the kids in those situations, how far they understand what's happening, how far she feels responsible for what's happening to them, what she needs to consider if they need to get out of the way, if child protection need to be involved what needs to be considered there. We do that by building a relationship with the client. (Case advocate, remote Central Australia)

Safety planning can involve drawing, painting, mapping, and prioritising. As a practice, safety planning is primarily conversational: workers describe the doing of safety planning as "chatting", "talking", "identifying", "responding", "helping", "supporting", "listening" and as "putting heads together". They are "going at [the client's] pace", working with different timeframes and circumstances; that is, they are pacing planning for times of actual violence to preventive planning to post-violence actions.

All quotations derive from the new research undertaken for this project (Putt, Holder, & O'Leary, 2017).

<sup>2 &</sup>quot;Others" who may constrain violent behaviour could range from family members and bystanders, to mental health or other services, to police or probation officers for example.

There are a lot of different risk instruments that draw on different information and with a different focus. Median Ariza, Robinson, & Myhill (2016) review police risk assessments, and Dutton & Kropp (2000) have discussed the debates on content and validation.

<sup>4</sup> We are grateful to an ANROWS anonymous reviewer for these words.

### Safety planning and Aboriginal women

Services working with and for Aboriginal women experiencing DFV say that they have learned from women that:

- Confidentiality is a big concern, including not wanting gossip or to be made to feel "shame".
- Kindness, concern and demonstrable respect help establish and sustain a relationship.
- Practical help (provided directly or with brokerage funds) is crucial.
- Responding as immediately as possible to requests helps to build trust.
- Information that is specific to the woman's circumstance and needs (especially in relation to police, court, or other legal systems) is more helpful than general information.
- Taking extra time and care to talk about safety for children, knowing how frightened and distrustful women are about child protection services.
- Understanding that reticence to engage is not necessarily resistance. This includes reticence with a service, but also deep caution with government and justice agencies.
- Safety and safety planning is highly contextualised, temporal, and fluid. Safety is not everything. It needs to be tempered with the woman's wishes, capacity, hopes for the relationship(s), and with her other priorities and concerns.
- The importance of safe and welcoming respite (which may include emergency accommodation).
- The pervasiveness of victim-blaming that undermines women's sense of self and hope.
- Using creative community development approaches opens doors between services and women.

### Safety planning in time and space

Safety planning can be viewed as steps or phases. These are not necessarily sequential and are intermingled. Being transparent and collaborative about these steps with women helps to build trust.

- **Opening up**—is listening and gently asking questions: What's happened, what's happening, and what would you like to happen now, later?
- Understanding context and connections—is about the location (specific and general) and who is who in a woman's living situation: Who speaks up for her, who is there for the kids, and who will speak to him (and has the authority to do so)?
- Time and space—when did this happen and when may it happen again? Where? What risks are at that time, that place? What safe spaces are there? When?
- Generating options and possibilities—these should be real, realistic, possible, doable, and not overwhelming. It is checking fears and past actions, and reality-checking about outside help. It asks what can be added to her basket of resources and taken out of her backpack of worries. It seeks to draw on diverse surrounding services and resources. In some circumstances of imminent risk of serious violence, these options will narrow.
- Contemplating futures is embedded in practices that try to understand how a woman sees her life and its possibilities, with or without violence, with or without the abuser. It is practice that attempts to open windows to the woman's hopes and dreams. This is perhaps the most important aspect of safety planning. It works with the individual as a whole person. It is a collaboration to figure out how the woman can sustain her connections with her communities and live as she is able to choose.
- Sustaining connections focuses on keeping in touch with a woman beyond the crisis to help build her safety and her resources, but also focuses on nurturing the service and workers' links with communities and community organisations.

### Safety planning tools and resources

The most important tools and resources to safety planning are the woman herself and a skilled, knowledgeable, and engaged specialist worker. Workers ask questions about what has been happening, who has been helping and who hasn't, when, and how. They ask what the woman wants to see happen and how she sees that being achieved. Safety planning encompasses different actions and activities (see box).

Examples of safety practices used by workers in women's specialist DFV services:

- Assistance with protection order (check if still current, applying for new one);
- accommodation (making referrals, providing immediate emergency accommodation);
- listening carefully and sharing knowledge about risks, "putting heads together", being non-judgemental;
- provide safe phone and tech safety;
- police action (alerts, statement, report);
- accessing other services (warm referrals, money);
- security upgrades and site security;
- emergency food and financial assistance; and,
- safe transport (taxi);

Source: Putt, Holder, & O'Leary, 2017.

The services' and workers' own knowledge about the woman's personal situation, her community context, and the local resources are critical. Just as critical is the ability to forge an empathetic connection as well as maintain analytic thinking. Common resources for crisis safety planning are helpful others, such as family or neighbours (at the scene and to intervene); emergency plans previously made; safe phones and safe use of other social media; and emergency transport, finance, and accommodation.

Workers focus both on helping a woman identify threats and risks as well as helping her make her own decisions about these. In practice, there is considerable tension between validating a woman as "expert" in her own situation, and being concerned for her understanding of the dangers. One worker described clients as "good at describing situation, exploring, but [we] come back to concerns of safety. Sometimes [women] work it out for themselves but [they] can minimise" (Crisis worker,

Canberra). Working with a woman to build on her strengths and resistance to violence demands careful listening to the contexts of her words and her actions.

#### **Boundaries and limits**

Safety planning is being client-centred rather than client-led. Workers responding to crisis need to be "in the moment" and "present", and always listening and "sussing out". They ask how present is the violence, what it looks like, and make rapid assessments of likely harm and injury. It is precisely these moments where the specialist worker is being asked to contribute her knowledge and expertise: information, options, processes, contacts, scenario-setting, planning, and referrals (see practice guide 1 describing different "positions" that workers may adopt with clients).

These are situations where workers share the limits that their organisation may have set to confidentiality or negotiate those limits with the woman. At these times, discussions with a woman are likely to be detailed about what could or should be said, to whom, with what intent and possible consequence, and how ongoing advocacy with her may contribute to protecting her rights and interests as well as her safety. These are situations when the knowledge and experience of specialist services about violence, the damage it does and the burdens it places on women's agency and choice come into play. At these crisis moments, however, specialist workers always work to identify strengths and coping skills; to privilege the client's voice and to negotiate proposed actions, timing and how the actions may be done.

And specialist service workers are always working to ensure that the woman feels able to call or contact the service again in the future.

#### Resources and sources

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### Prepared by

Dr Robyn Holder, Griffith Criminology Institute, Griffith University

Dr Judy Putt, School of Behavioural, Cognitive, and Social Sciences, University of New England

Ms Cath O'Leary, School of Behavioural, Cognitive, and Social Sciences, University of New England

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## **Acknowledgement of Country**

ANROWS acknowledges the traditional owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander elders past, present and future; and we value Aboriginal and Torres Strait Islander history, culture, and knowledge.

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