



YWCA Community Safe Visitation Program

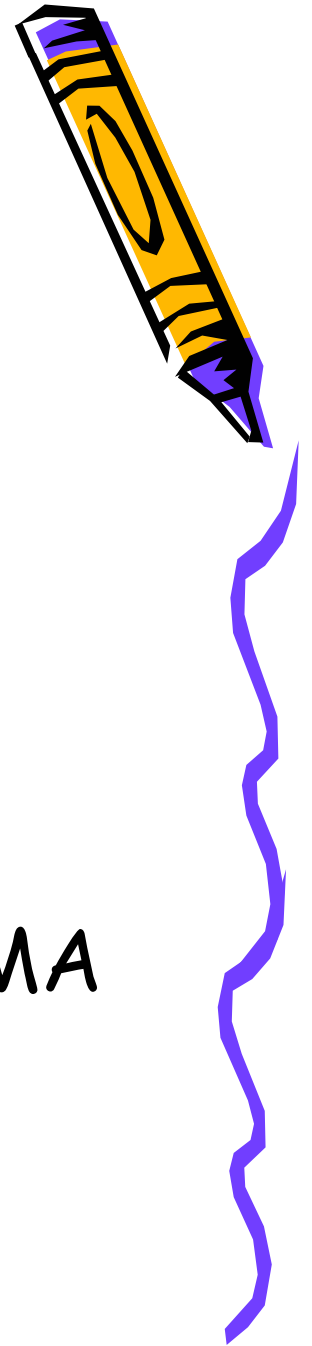
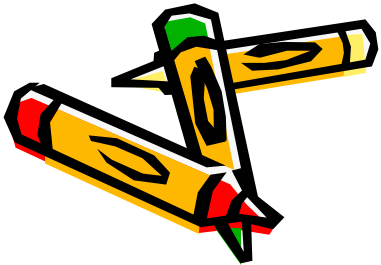
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World Conference on Family Violence,
Banff, Alberta, 2005



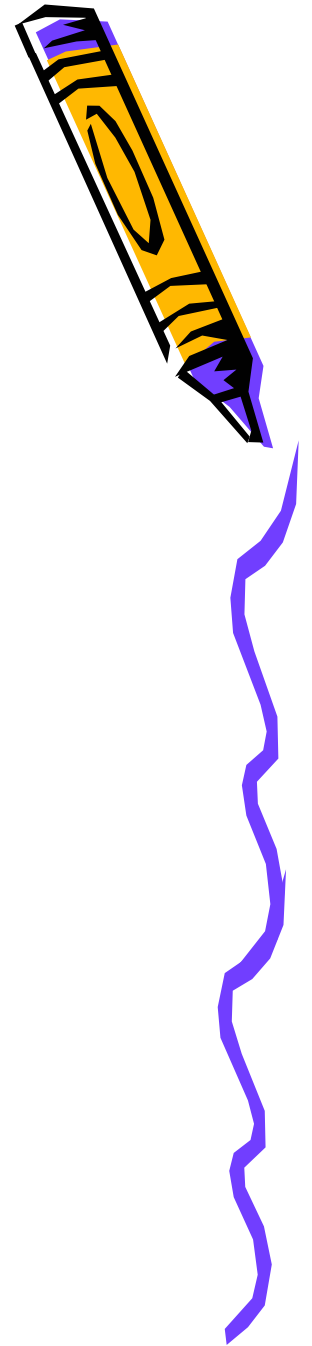
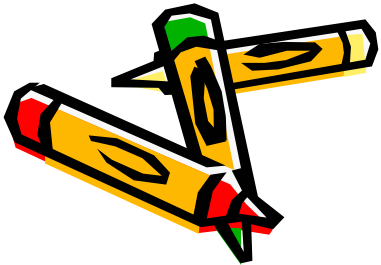
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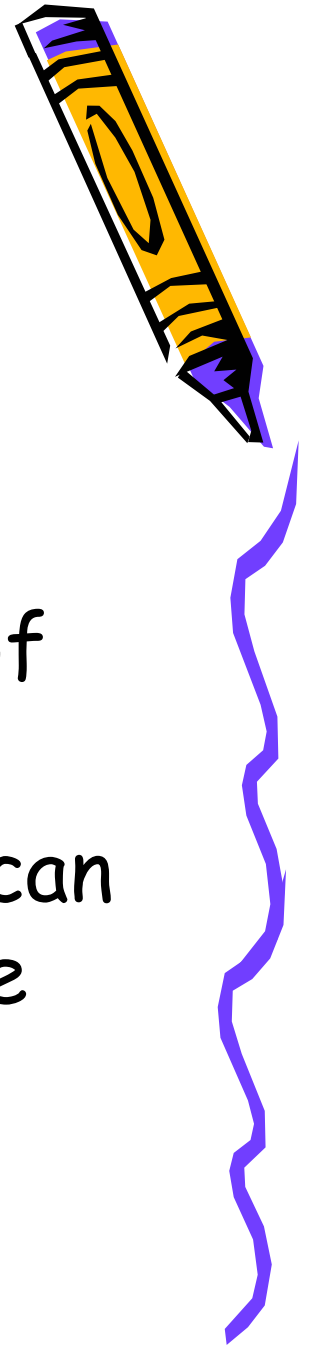
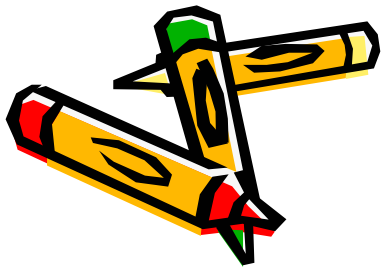
Funding

- Project Funding:
 - HomeFront
 - The City of Calgary MATCH Solutions
 - RBC Financial Securities
 - TransCanada Pipelines
 - Gail and David O'Brian
- Research Funding:
 - The Calgary Foundation



The Need for Safe Visitation Programs

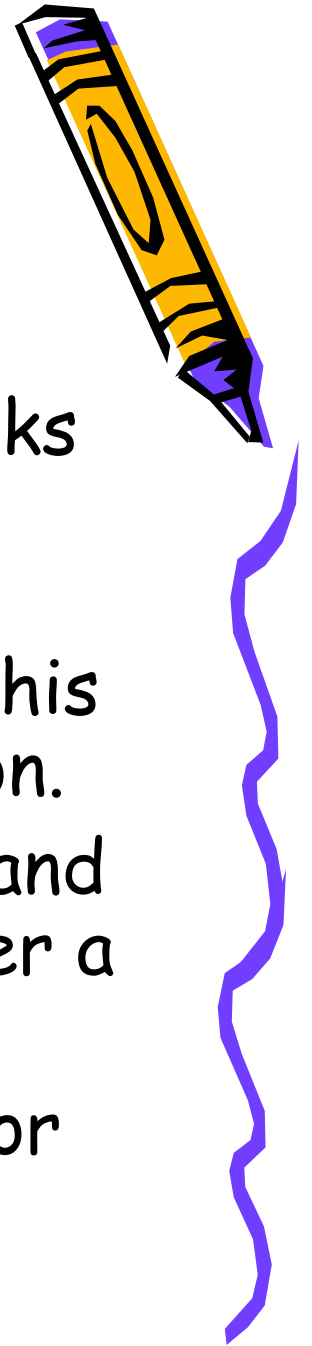
- When partner abuse occurs in a couple, the victim (typically the woman) can be at significant risk of further abuse after separation.
- Court-ordered access to children can create circumstances when abusive men re-victimize women.



Two Alberta Tragedies

- Two recent tragedies exemplify the risks to children and women during custody disputes.
- One father shot and killed himself and his toddler during an unsupervised visitation.
- Another father shot and killed his son and ex-partner when returning the boy after a weekend visit.
- Both times the mothers were fearful for their own and their child's safety.

World Conference on Family
Violence, 2005



Monitored Exchange

Safe and conflict-free transfer of children from the custodial adult to the visiting adult for the purpose of access visits without the need for contact between the adults.



- Children may have been physically or emotionally abused by their non-custodial parent, raising the need for supervised visits.
- Sexual abuse also suggests the need for such supervision.

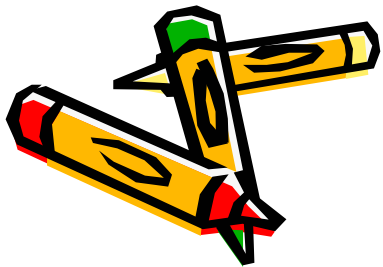
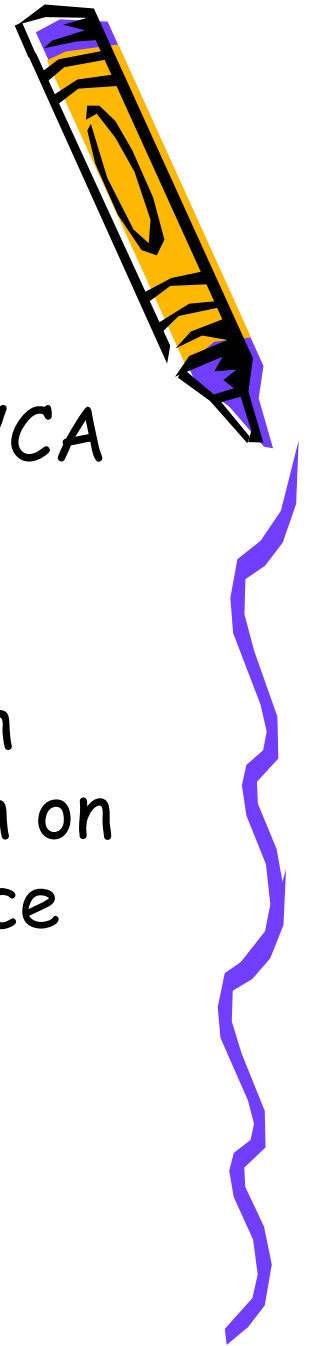


Supervised Visitation

"Contact between a child and adult(s), usually a parent or an adult in a parenting role, that takes place in the presence of a third person who is responsible for ensuring the safety of those involved"
(Strauss, 1995)

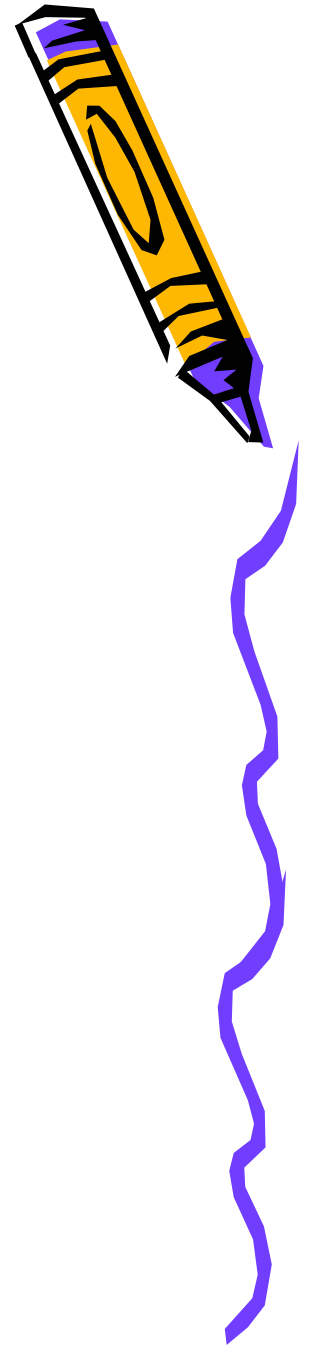


- The Safe Visitation Program at the YWCA Sheriff King is the first in Alberta
- While numerous visitation and access centres have been opened across North America, there has been little research on their efficacy and whether they enhance safety to family members.



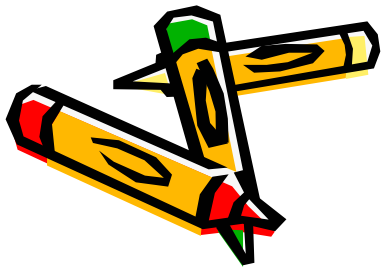
Guiding Principles for Safe Visitation

1. The safety of all children and adults, including Safe Visitation staff is of primary importance and guides all decisions.
2. The child's best interest is the first priority in any decisions made.
3. Safe Visitation does not provide assessments for family court.



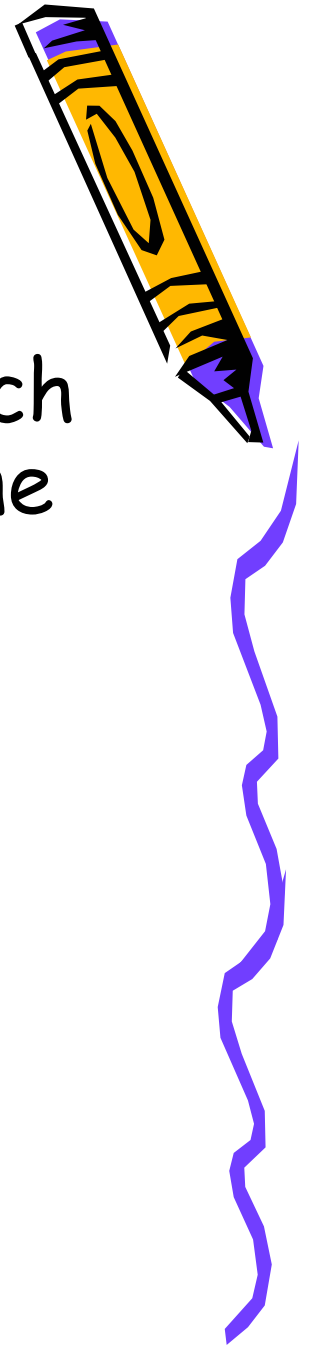


4. Staff persons act as impartial observers, but do not tolerate abusive behaviour.
5. All program participants are held accountable for their behaviour.
6. Safe Visitation retains the right to discontinue services if adequate safety cannot be reasonably assured.

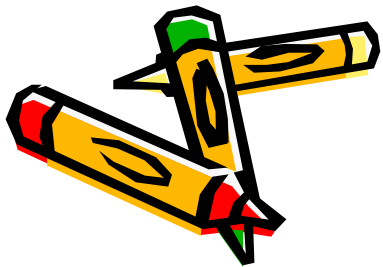
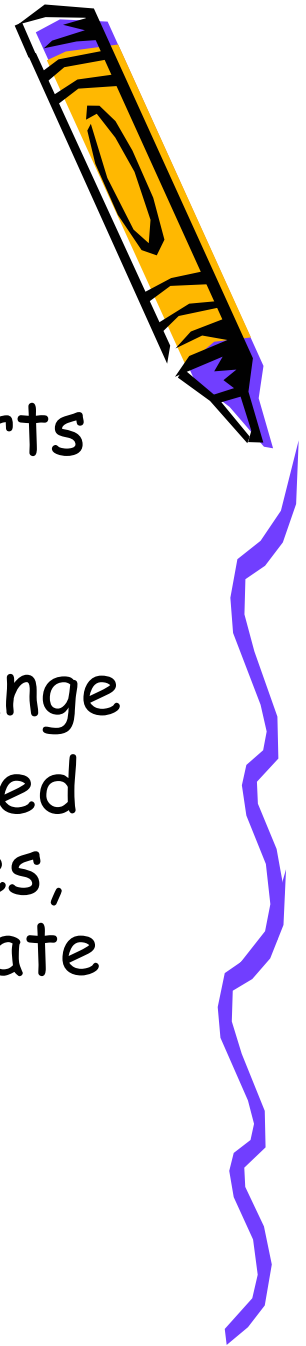


Services Provided

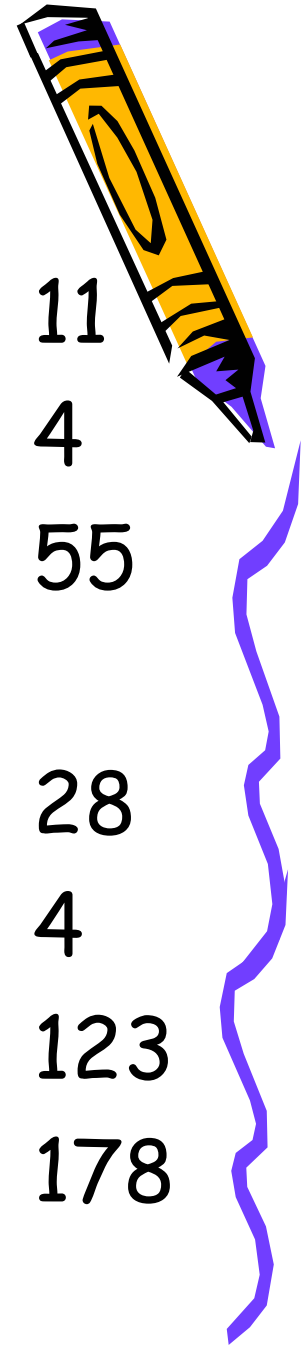
- Assessing risk factors with each participating adult to determine whether services can proceed safely
- Supervised visitation on site
- Monitored exchange on site



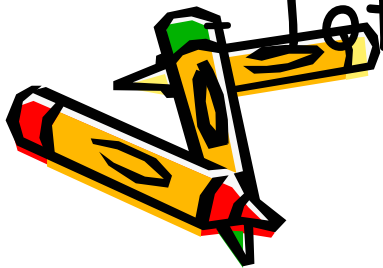
- Written record and observation reports of visits and exchanges
- Preparatory sessions with adults and children preceding visitation or exchange
 - If preparatory counselling is required in anticipation of visits or exchanges, clients will be referred to appropriate services.



Program Statistics



• Current Supervised Visits	11
• Current Monitored Exchanges	4
- Total Number of Current Clients	55
• Closed Supervised Visits	28
• Closed Monitored Exchanges	4
- Total # of Discharged Clients	123
Total # of Clients Served	178

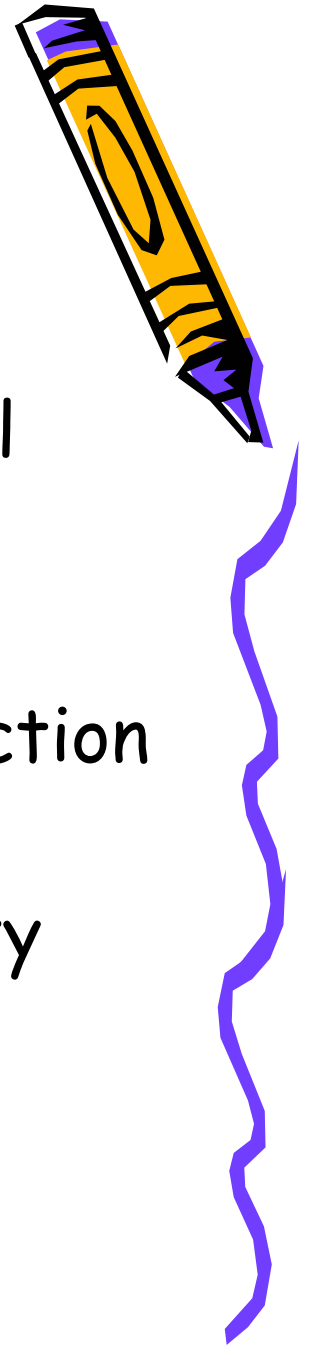


Neutrality

- The quality or state of being neutral
- The policy of not taking part in a quarrel (contest or war)

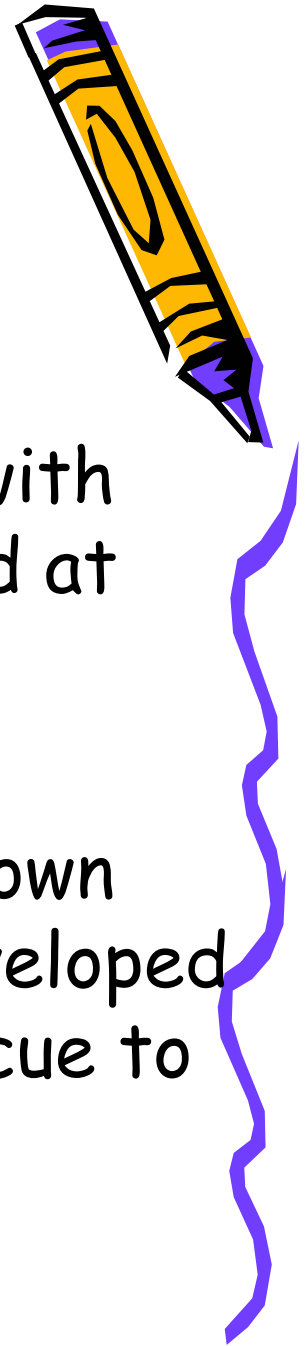
Safe Visitation staff and volunteers function with this definition of neutrality

The primary goal is to focus on the safety and well-being of the child.



Screening & Intake Procedures

- Staff conduct separate, face-to-face interviews, including a risk assessment, with each parent. Appointments are scheduled at separate times.
- Children are not present during intake.
- Depending on age, children attend their own preparatory session. A safety plan is developed with the child that includes a nonverbal cue to use if he/she feels unsafe.

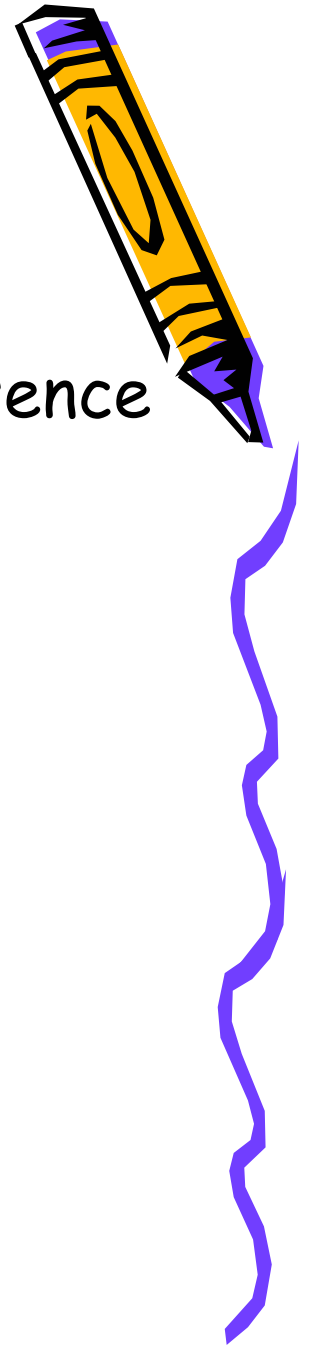


Prohibited Activities during Custodial and Visiting/Exchanges

- No alcohol or drug use prior to or during a visit
- No Smoking
- No abusive or threatening behaviour (including abuse directed towards the child(ren), staff or volunteers, other clients) in or around Safe Visitation
- No discussing negative/inappropriate topics including access issues

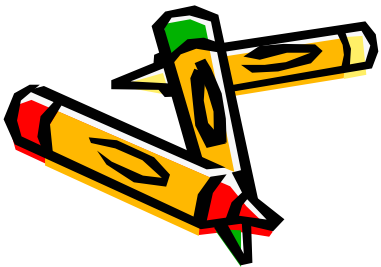


- No discussing the other parent in the presence of the child(ren)
- No discussing court proceedings
- No whispered conversation
- No physical discipline of the child(ren)
- No using cell phones or pagers during the supervised visit
- No weapons



Declining Requests for Service

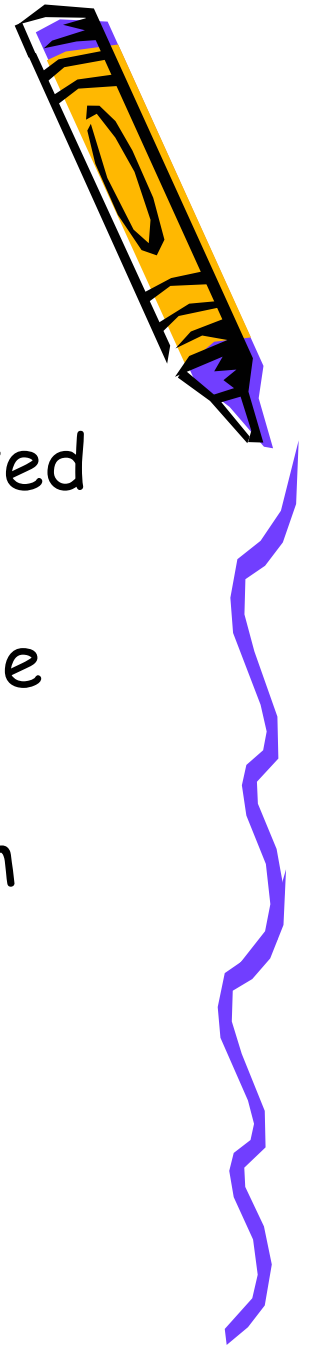
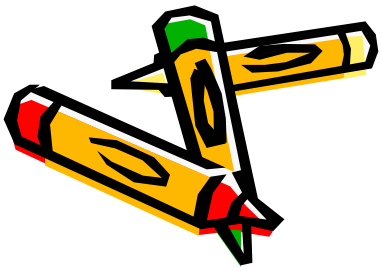
- Current risk factors are beyond what can reasonably be managed by Safe Visitation
- The Service Contract is not signed by all adults requesting services
- The Authorization of Release of Information is not signed by all adults requesting services
- An adult requesting services is unwilling (refuses) to provide information requested during intake



Evaluation Protocol

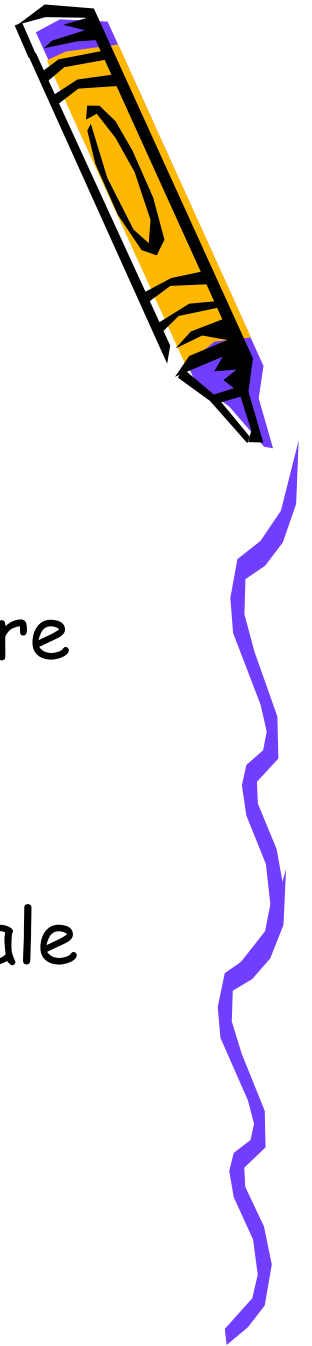
Parents and children complete standardized measures at several points:

- Pretest (before starting or within one week);
- 6-8 months or on leaving the program



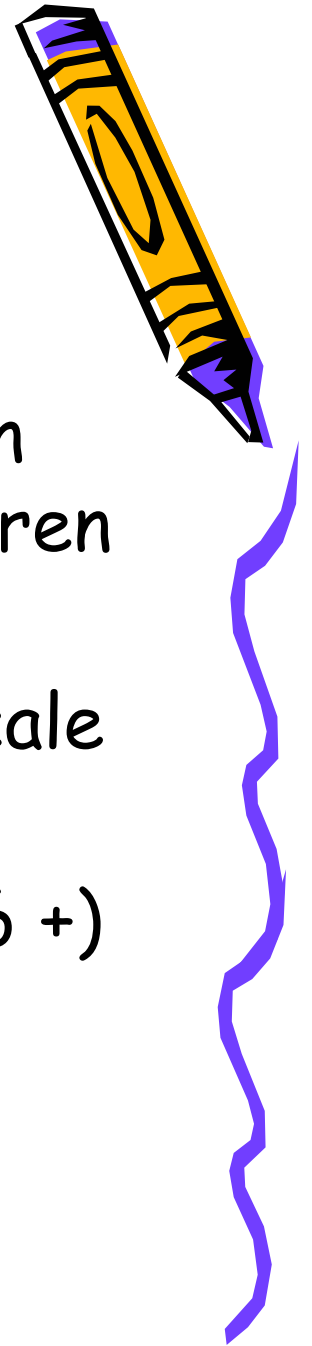
Parent Evaluation Measures

- Parenting Stress Index Short form (Abidin)
- Strengths and Difficulties Questionnaire (25 items on their child's behaviours)
- Life Stress Questionnaire
- Marlowe-Crowne Social Desirability Scale



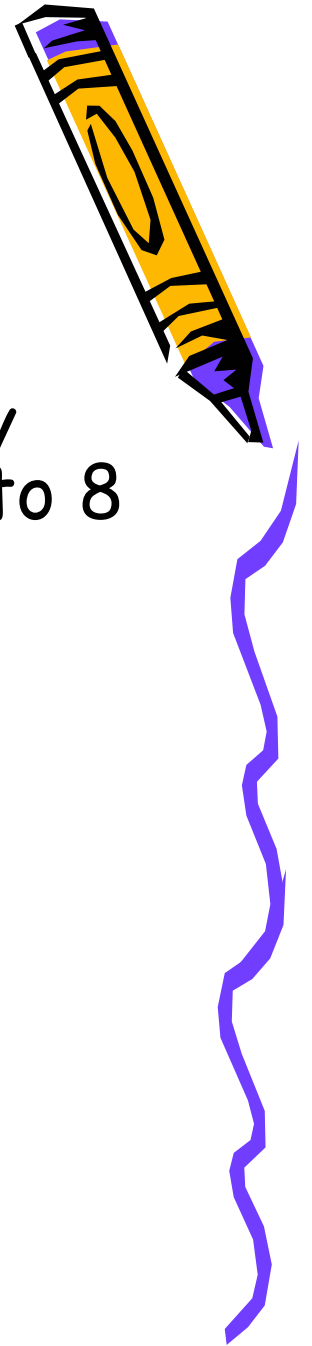
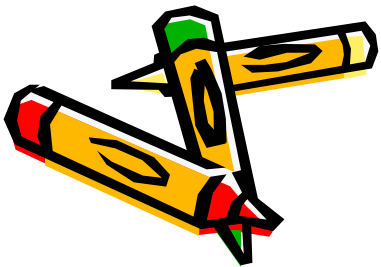
Children's Measures

- Trauma Symptom Checklist for Children (TSCLC) (Briere, 1996) (54 items, children aged 8 to 16)
- Revised Children's Manifest Anxiety Scale (37 items) (for children 6 to 19)
- Children's Depression Inventory (ages 6 +)

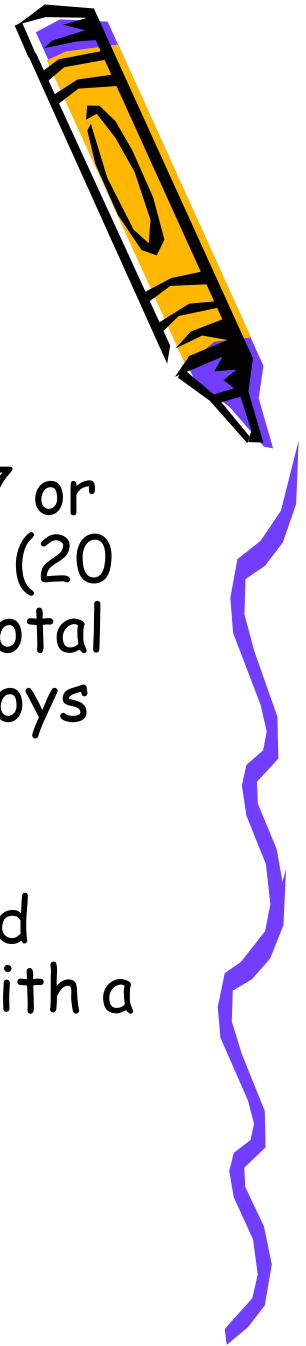


Qualitative Interviews

- 22 parents were interviewed separately soon after beginning program and at 6 to 8 months
- Questions included:
 - Have you tried other ways to manage visitation?
 - How is the program going so far?
 - What is working well for you and your children?
 - Have you had any problems?
 - Do you feel safe?
 - Do your children feel safe?

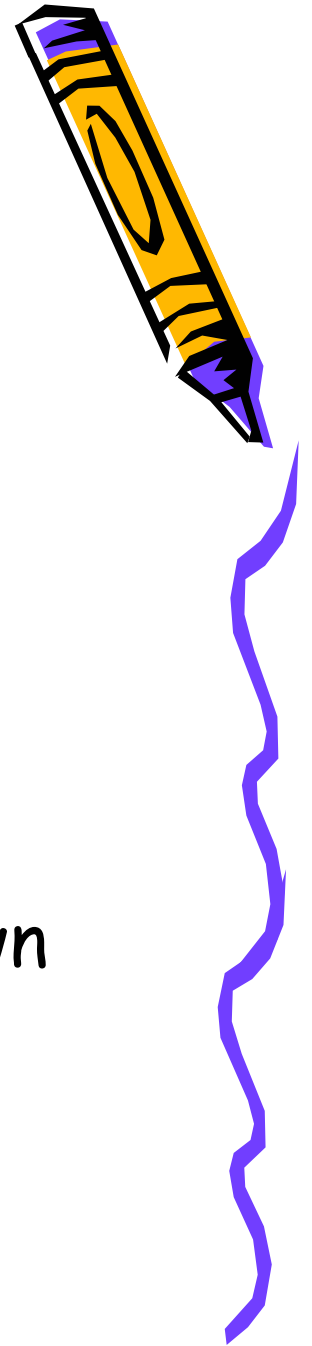
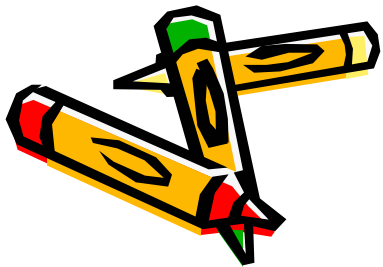


- Of the 27 families that continued in Safe Visitation after intake, the majority (23 of 27 or 85.1%) used the Supervised Visitation service (20 custodial mothers; 3 custodial fathers for a total of 46 adults) with a total of 33 children (21 boys or 63.6% and 12 girls or 36.4%).
- Four families (14.9%) used the Monitored Exchange service (three custodial mothers and one custodial father for a total of 8 adults) with a total of seven children (6 boys and 1 girl).



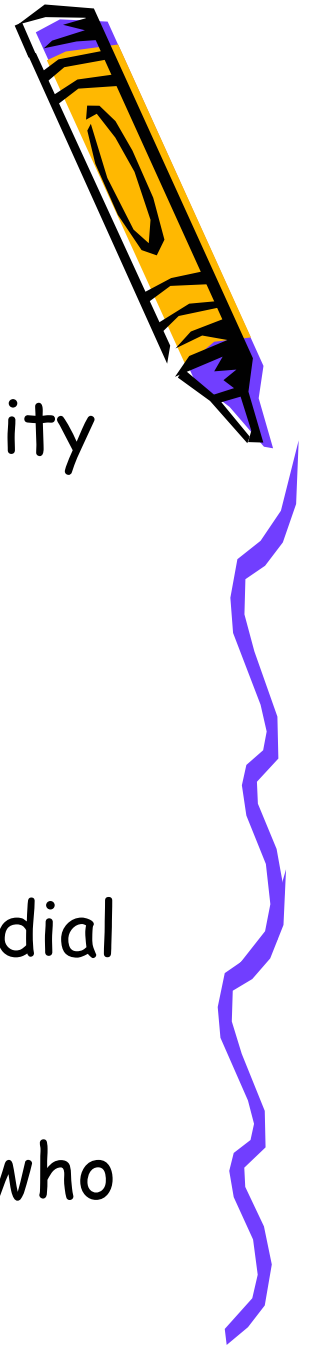
Evaluation Results

- The evaluation noted a number of statistically significant findings with respect to the Supervised Visitation service.
- Three statistically significant t-tests differentiated custodial from non-custodial parents at the program start with respect to perceptions of their own stresses and symptomatology and parenting stresses.

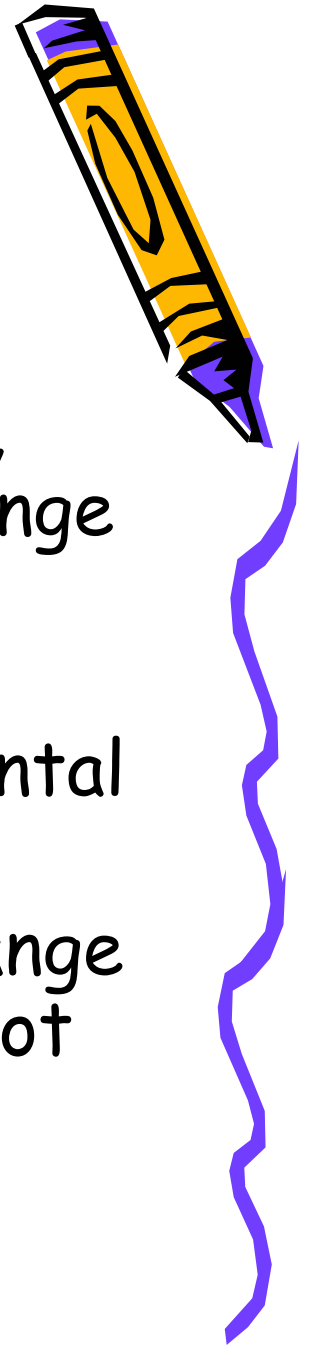


Custodial vs. Non-Custodial Parents

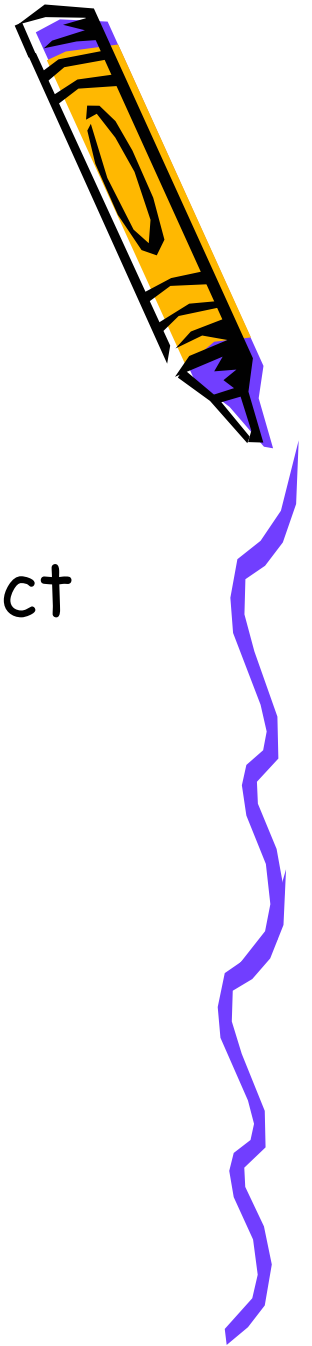
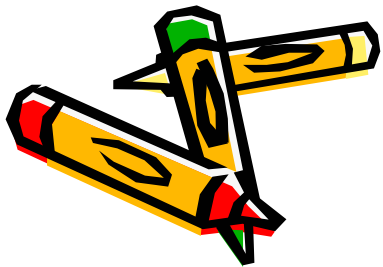
- Custodial parents reported more Hostility (annoyance, irritability & anger) and "Phobia" (fear in a variety of situations such as open spaces, crowds & feeling nervous when alone).
- The custodial parents were also significantly more likely than non-custodial parents to perceive their children as behaving in difficult ways. This latter finding is consistent with Dunn (2002) who reported a similar pattern.



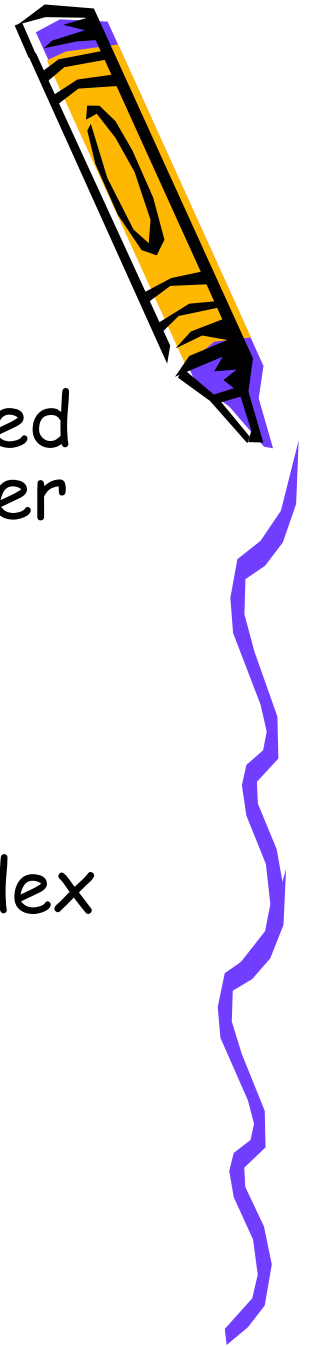
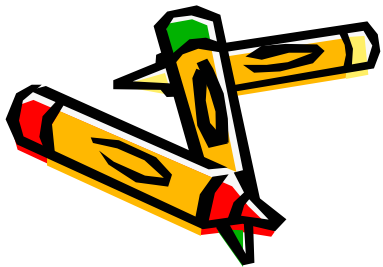
- Both at program start and at 6 months, 45% of 12 parents fell in the clinical range on the Brief Symptom Inventory.
- None of the research reviewed had examined pre-post differences on parental functioning, so this result is unique.
- While some moved out of the clinical range after 6 months, this improvement did not reach statistical significance.



- Also at the program start, custodial parents saw their oldest children as demonstrating significantly more conduct problems than did the non-custodial parents
- However neither parent perceived the behavioural problems at a level that warranted clinical intervention, again consistent with Dunn (2002).

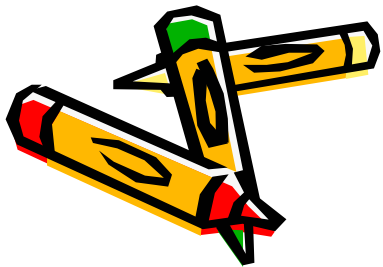


- Two subscales rated by parents improved to a statistically significant degree after 6 months:
- The BSI Interpersonal Sensitivity (feelings of personal inadequacy, particularly in comparison with others)
- the BSI Positive Symptom Distress Index that provides information about the average level of distress.



Parents' Perceptions of the Children

- At program start, parents did not perceive their children's behaviour as falling within the Strengths and Difficulties (S&D) Questionnaire's clinical levels, consistent with Dunn (2002).
- All S&D subscales improved in the desired direction by 6 months or when the program was completed.
- The only statistically significant improvement was an average increase in prosocial behaviours on the part of the second oldest children.

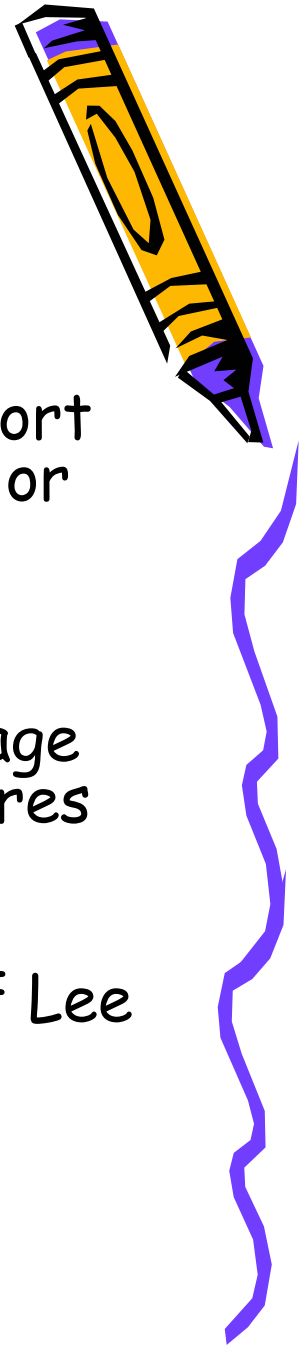


- At program start, parents did not perceive their relationships with their children as stressed.
- Afterwards, parents reported statistically significant improvements in Parental-Child Dysfunctional Relationship and PSI Total Stress.
- The parents perceived their relationships with children as much improved at program conclusion. Likewise, they experienced considerably less stress being a parent. None of the reviewed research focused on stress related to parenting.



Children's Self Reports

- A small sample of children completed self-report measures at both the start and at six months or on completion of the Supervised Visitation service.
- The scores for the entire sample at pretest indicated no depression (T-scores in the average range) on the CDI, no clinically significant scores on the RCMAS (anxiety) or on the Trauma Symptom Checklist (TSCC).
- This finding is congruent with the research of Lee et al. (1995) and Dunn (2002).

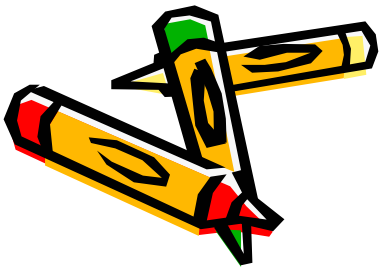
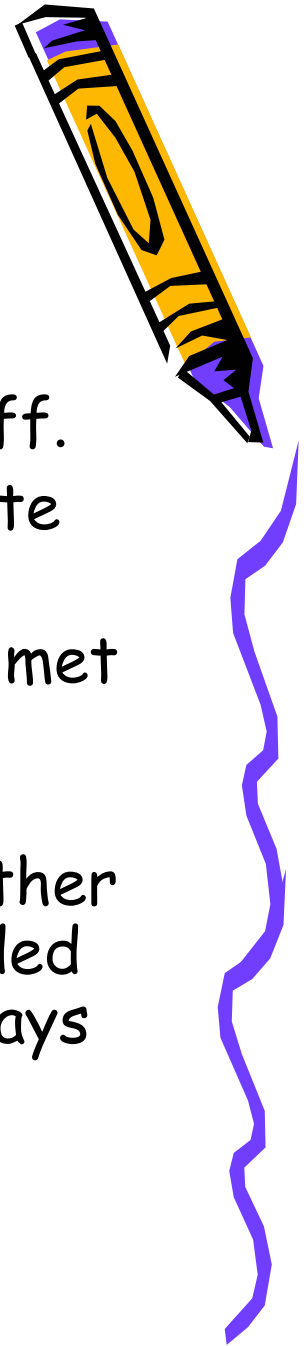


Qualitative Findings

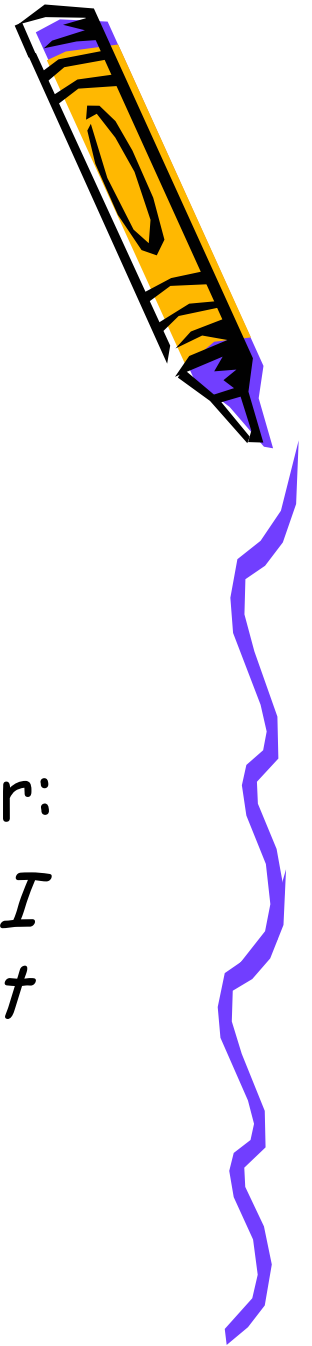
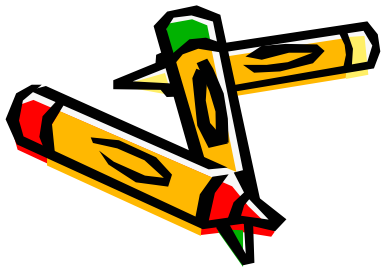
- The parents' expectations of Safe Visitation were typically met.
- The program decreased their fears of and/or experiences of domestic violence.
- Generally speaking, parents considered Safe Visitation to have had a positive impact on their children.
- Their most commonly noted concerns were timing and scheduling issues, and the perceived differential treatment of parents based on custody status and feeling stigmatized.



- Parents were impressed with the program staff.
- They considered the intake process appropriate and approved of the location and building.
- Overall, they considered the program to have met their needs in providing safe access for non-custodial parents' visits with their children.
- They believed that the service prevented further incidents of domestic violence and recommended expanding it with respect to times of visits, days open and delivery sites.



- All parents, both custodial and non-custodial, stated that they would definitely recommend the service to a friend who was experiencing domestic violence with their spouse or ex-partner:
- *(I would recommend it) in a heartbeat. I believe strongly in it. I have nothing but praise for it, nothing.*



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