PRAXIS INTERNATIONAL TECHNICAL ASSISTANCE ON SUPERVISED VISITATION AND SAFE EXCHANGE

Audio Conference Training

Domestic Violence and Supervised Visitation Training Series

Enhancing Our Work with Men Who Use Violence July 8, 15 & 22, 2009 4:00-5:15 PM Eastern Time

Engaging with men who are using supervised visitation services because of his use of violence against a partner is both a means of fostering safety for women and children as well as counteracting his use of battering tactics. Being involved and connected in an intentional and meaningful way with men who batter, however, poses a distinct set of challenges for center staff. This series will provide practical and useful tools for center staff to work effectively with men who use violence.

Part 2: Dealing with problematic behavior July 15, 2009 4:00-5:15 PM Eastern Time

Men who batter draw on a variety of behaviors in order to get what they want; they might be calm or hostile, compliant or rebellious, "schmoozing" or angry, etc. This session will explore how to respond to all of these behaviors while staying focused on the safety of battered women and their children.

Facilitators: Scott Hampton and Beth McNamara

Scott Hampton, Psy.D. has been working with batterers, sex offenders, victims, and child exposed to violence for 15 years. Currently, he is the Director of Ending the Violence, a Dover, NH-based organization that provides educational classes to perpetrators of domestic and sexual violence. He is also the founder of The Consexuality Project, a sexual violence prevention initiative. Dr. Hampton writes and speaks frequently on issues related to interpersonal violence having conducted hundreds of workshops in the United States, Canada and Europe. He is a past President of the National Supervised Visitation Network, Chair of Strafford County's Family Violence Council, Coordinator of the New Hampshire Network of Batterers Intervention Providers, and serves on New Hampshire's Governor's Commission on Domestic and Sexual Violence. He spends much of his time consulting with other professionals on the handling of domestic and sexual violence cases and testifying in court as an expert witness in interpersonal violence-related cases.

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Beth McNamara is a social worker who received her degree from the University of Wisconsin. Beth is currently a program manager with Praxis International and the Co-Executive Director of Inspire Action for Social Change. Beth is also consultant providing training and technical assistance with ALSO and the National Council of Juvenile and Family Court Judges, Family Violence Department. Beth has been an advocate to end violence against women for the past 22 years. She was the director of the Family Service Agency, Family Visitation Center in San Mateo, California for thirteen years. Over the course of her career in supervised visitation she planned, designed and operated five different supervised visitation centers. She was responsible for program development, sustainability, training, direct service, advocacy, and the supervision and mentoring of staff and volunteers. Beth has also worked in a psychiatric unit, as a domestic violence and sexual assault advocate, and in an inpatient and outpatient chemical dependency center.

Case study #1: Mr. Alvarez was recently referred to your visitation center. It took a month to arrange for his orientation as he needed to reschedule several times. Now that he is using the center weekly, your staff has complained that they are receiving lengthy calls from him several times each week making it difficult to keep up with their other work. In addition, during visits, he is "constantly asking about our policies, wanting us to send reports to his attorney and the courts; the requests never seem to end." You also have heard reports from the victim that she recently began receiving multiple hang up calls in the middle of the night, from an untraceable cell phone.

Case study #2: The visitation supervisor intervened with Mr. Wilkens when she saw him slap his child's hand after his child refused to put down a toy as instructed by his father. The center has a no-hit, no spank policy. Mr. Wilkens stood up and said: "I suppose you think because you're the one with the clip board that you can tell me how to raise my children. My kids know that I would never hurt them. Now, if someone else caused problems with my kids, well that would be a different story, understand?"

Case study #3: Mr. Byrd has been using the visitation center and attending a BIP for several months. Frequently, he will show up late, but always within the 15 minute window allowed in the policy. Occasionally, he will show up without the required payment, promising to send it in by mail. He usually forgets to send it in, but brings it with him to the next appointment ("I guess I'm just not that organized"). Once he "forgot" which entrance was for the non-custodial parent and mistakenly went the wrong way. He's been arrested twice for violating a restraining order, but claims that it was not his fault ("I had no way of knowing that she would be at the grocery store and restaurant at those times.") At the end of the last visit, he received a call on his cell phone and said "I have to leave before the end of my 15 minute waiting period. My

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babysitter canceled so I have to go pick up my other daughter now. I'm sure you understand." He then left just moments after his ex-wife left.

Case study #4: Mr. Williams, the non-custodial parent is also a successful businessman. "You are probably surprised to see someone like me here. My wife has some issues and is really the one who needs to be supervised." Over several weeks he brought in articles on parental alienation syndrome and the inadequate training of Guardians ad Litem. On one visit, he asks to speak to you after the visit. "I don't know why others can't see me for who I am, like you can. Could you write up a brief letter for my attorney? Nothing fancy, just that I'm doing everything you've asked and that you don't see any problems with my parenting."

Questions to explore with each case study:

- **Identify the issue**. What concerns do you have about the safety and autonomy of the adult victim and the safety of her children?
- Consult or collaborate. Is there anyone either at your visitation center or in the larger community collaborative that you would want to work with in handling the situation?
- **Intervene.** What would be a fair and respectful way for you to intervene to ensure safety?