

# **Engage to Protect: Foundations for Supervised Visitation and Exchange**

## **Informing the Practice of Supervised Visitation**

### **Authors**

Melanie Shepard, Jane Sadusky, and Beth McNamara



Praxis International, Inc.

This project was supported by Award #2006-WT-AX-K040 awarded by the Office on Violence Against Women. The opinion, findings, conclusions or recommendations expressed in this training guide are those of the author(s) and do not necessarily reflect the view of the U.S. Department of Justice.

## Acknowledgments

This paper draws on eight years of wide-ranging discussions involving the Office on Violence Against Women, Praxis and other technical assistance providers, and visitation programs of all sizes and at all stages of development. We benefited from the contributions of many people who have a long history of working, researching, and training on issues related to domestic violence and to supervised visitation and the ways in which they intersect. In particular, the early work and experiences of the Safe Havens Demonstration Initiative sites—the South Bay Area, California; the City of Chicago, Illinois; the City of Kent, Washington; and the State of Michigan—helped focus our attention on the importance of learning about the quality and impact of supervised visitation practices from participants, staff, and community partners.

We cannot begin to adequately thank the women who participated in focus group discussions and helped us explore the many facets and needs related to safety after leaving an abusive partner. We dedicate this work to them, and to the children, mothers, and fathers who everyday enter the doors of a visitation center. May our contribution help expand the possibilities of nonviolence and harmony for each family.

© 2009 Praxis International. All rights reserved.

## Praxis International



206 West 4<sup>th</sup> St., Suite 207  
Duluth, MN 55806-1604  
Ph 218-525-0487  
Fax 218-525-0445

179 Robie Street East, Suite 260  
St. Paul, MN 55107  
Ph 651-699-8000  
Fax 651-699-8001

**[www.praxisinternational.org](http://www.praxisinternational.org)**

# Informing the Practice of Supervised Visitation

Melanie Shepard, Jane Sadusky, and Beth McNamara

© 2009 Praxis International, Inc.

*This project was supported by Award #2006-WT-AX-K040 awarded by the Office on Violence Against Women. The opinion, findings, conclusions or recommendations expressed in this publication, conference agenda, or product, are those of the author(s) and do not necessarily reflect the view of the U.S. Department of Justice.*

## ***Learning from program participants, staff, and community partners***

Each day visitation centers face difficult decisions about how to best meet the needs of victims of abuse and enhance their safety. A center's policies and procedures can have a profound influence on the lives of the families using its services. Even relatively small decisions, such as how to decorate the walls or how to greet families when they arrive, can influence the quality of their experience. Broader decisions about how to identify and address each family member's needs and how to interact with other community partners require careful consideration from different perspectives. While these decisions can be challenging, a visitation center does not have to make them in isolation, nor should it. Learning from program participants, staff, and community partners is a critical element in informed decision-making.

This paper reviews six approaches to learning about the quality and impact of supervised visitation practices from participants, staff, volunteers, and community partners. They include: questionnaires, interviews, focus groups, check-ins, case file reviews, and case consultations.

The six methods of informing visitation center practices have different strengths and applications. Rather than relying on a single approach, visitation programs are encouraged to develop a plan that utilizes multiple tools and asks:

- What do we want to know?
- Who could teach us?
- What methods could we use?
- How do we ensure safety and respect in the process?

Engaging participants, staff, and community partners in examining supervised visitation practices has multiple benefits in shaping and guiding a center's work. It can improve communication, build trust, and strengthen a center's ability to fulfill the Office on Violence Against Women (OVW), Safe Havens: Supervised Visitation and Safe Exchange Grant Program's Guiding Principles.<sup>1</sup> This

---

<sup>1</sup> The Guiding Principles include: (1) Equal Regard for the Safety of Child and Adult Victims; (2) Valuing Multiculturalism and Diversity; (3) Incorporating an Understanding of Domestic Violence into Center Services; (4) Respectful and Fair Interaction; (5) Community Collaboration; and, (6) Advocacy for Child and Adult Victims. Published by OVW, *Guiding Principles – Safe Havens: Supervised Visitation and Safe Exchange Grant Program* (December 2007), is available at [www.praxisinternational.org](http://www.praxisinternational.org).



approach to informing the practice of supervised visitation and exchange helps us guide initial planning decisions, evaluate services, continually assess the effectiveness of current practices, determine whether goals and objectives are being met, and demonstrate accountability to program participants and funding sources. It is a way to document how services have been delivered and identify ways to improve them. With a plan in place and in use, we can better identify unanticipated problems and quickly correct them, thereby enhancing the safety of adult and child victims using visitation services.

The act of learning from key stakeholders promotes collaboration by strengthening communication. It helps community partners understand and support program services and helps improve working relationships. By listening to others, the center is in a better position to offer its own perspective to community partners and contribute to long-term safety strategies for adult victims of battering and their children.

### ***Accounting for culture and unique life experiences***

Accounting for people's cultures and unique life experiences is a central element in informing visitation center practices. The mothers, fathers, and children who come through the door of a visitation center come from many different places in life, with different experiences and aspects of culture, identity, and social position. There is no single, universal visitation center client.

There are cultural dimensions and impacts to everything a center does. Learning from people about visitation services, as well as providing those services, requires attention to the cultural dimensions and impacts of those interactions and practices. Conversations with mothers and fathers using the center, professionals and experts in the field, and community organizations can help a center examine the "cultural construction" of its forms and processes. How might those forms and processes impose a point of view that discounts the cultural frameworks of the families coming through the door?

The following strategies will help develop a plan for informing visitation practices that is responsive to people's unique cultures and life experiences, as well as help a visitation program conduct its day-to-day work in such a manner.

- Ground your work in the historical context of people's experiences and understand how different groups have been excluded, silenced, denied, marginalized, and oppressed.
- Examine every inquiry, form, and procedure and question its cultural framework, assumptions, language, and privilege.
- Learn about the communities the center is or will be serving; make connections, find those who can teach you, and teach yourself.
- Form and maintain consultation partnerships that involve diverse communities in crafting and defining your practices, not just commenting on them.
- Never ask a single individual, a single voice, to represent an entire community.
- Talk with people in their *first voice*, in their first language.



Seek the guidance of program participants, staff, volunteers, and community partners to ask and answer: Does this practice draw in or exclude people of particular cultures and life experiences? How do we talk with and learn about people of different cultures and backgrounds? How do we recognize and account for people's experiences living with oppression? How can we make supervised visitation and exchange an experience with minimal barriers? How can we make our programs welcoming, respectful, and aware of the lives of everyone who comes through the door?

### ***Including children***

Most of us carry statements such as “children should be seen and not heard” and “adults know best” somewhere in our thinking. Our ethical concerns, fears, and the overall status of children in our society have stopped many of us from talking with and hearing from children who use our visitation centers. We need to challenge ourselves to talk with children rather than speak for them or assume that we know what they need and want. Learning from program participants is as much about learning from children as it is learning from their parents.

Individual interviews, group discussions, and check-ins will be the best fit in talking with children, adapted according to age, development, language, and comprehension. Using an activity can be an even more productive approach. For example, you might allow children to create a drawing of what they want say or finish your sentence verbally or in writing. They could produce a newspaper advice column; or use a pair of “talking glasses” where each child takes a turn when wearing the glasses. You can ask children how they would design or run the visitation center if they were charge. Inquire about what they like and what “bugs” them. Ask how you can help other children when they come to the center.

In planning for feedback from children you will need to consider: (1) when individual or group interviews would be used; (2) the protocol around consulting with each child's parents; (3) articulating your goal in talking with children/youth about center services; and (4) how you will inform parents and children of what you are doing, why you are asking the questions you are asking, what you will do with the information, the extent and limitations of confidentiality and anonymity, and the voluntary nature of participation, including the right to stop at anytime or refuse to answer any question.

### ***Considerations in planning and approach***

Each of the six methods described in this paper brings something different to the process of informing visitation center practices. In combination they provide a well-rounded and fairly cost-effective way of collecting useful information. Because each approach has different strengths, it is important to match the method with what you want to know, how you plan to use the information, and how much time and resources you have available. For example, if you want in-depth feedback from center participants, interviews may be the best way to go, but if you are short on time a focus group may be a better choice. No single method provides a complete picture. Multiple approaches are necessary in order to locate and close the gaps between what people need and what the visitation center provides. The Appendix is an overview of each method and its audience, advantages, and limitations.



### *Timing*

Collecting information from program participants at different points in time (e.g., orientation, during the period of visitation or exchange, upon exit from the program, and later follow-up) can help a center track practices and changes over time. Once or twice a year may be more economical and feasible, however. For example, a center may decide to hold a “survey week” every few months or solicit information in annual focus groups with community practitioners. Any re-examination or proposed change in center policies or service delivery should include feedback from participants, staff, and partners.

Center staff and families often do not know ahead of time that services will be ending, making exit surveys or interviews difficult to conduct. A follow-up telephone interview or mailed questionnaire might be useful, although interest in completing it is likely to wane rapidly once a family is no longer associated with the center. If a family member calls to notify the center that they will not be returning, this may be the best time to learn about their experience because locating them later can be difficult.

### *Confidentiality and consent*

Anyone completing a questionnaire or participating in an interview, focus group, or check-in should be clearly informed of the purpose of the activity and how the information collected will be used. Individuals receiving visitation or exchange services must understand that their participation is voluntary and that refusing to talk with you or otherwise provide information will have no impact whatsoever on their ability to use the center and its programs now or in the future. Treat personal information confidentially and collect it in such a way that individual respondents are not identified in any written reports (unless you have clear, specific permission to do so).

### *Safety for victims of battering*

As you develop a plan for learning from visitation program participants, consider the implications for safety with each approach you consider. Victims of battering should not be contacted in any way that might put them at risk for further abuse. Prior to contacting them outside the center, make sure that you have permission to do so and have discussed safe ways to do this. For example, when contacting victims by phone or mail, consider who else is present in the home and has access to mail and phone messages. In general, it is best to collect feedback at the center in a private setting.

### *Quality*

Create an environment for learning from participants, staff, and partners that maximizes the quality of information obtained and respondents’ comfort level. For example, as it fits the method and circumstances, provide snacks and childcare, use interviewers from a variety of cultural backgrounds, and build feedback sessions into standard meeting times for practitioners or routine check-ins with center users. If you ask program participants to provide feedback in a venue that exceeds the time that would be routinely spent at the agency, such as a focus group, compensate them in some way for the extra time and travel expenses.



Keep an open mind and listen carefully to what people are saying. Avoid the trap of listening for what you want to hear and discounting what you do not want to hear. Negative comments can be disappointing and often the tendency is to dismiss them or explain them away. Take the time to dig deeper and further explore any feedback you receive, particularly that which you immediately want to reject.

### ***Method: questionnaires***

A questionnaire is an inexpensive option for surveying a large number of people around specific issues. Many people are more open in their responses because of the impersonal and anonymous format. A questionnaire can be designed so that it is easy to fill out and questions can be asked in a uniform way that makes it easy to tabulate and summarize responses. Many people are familiar with giving feedback in this way and there is no middle person (i.e., interviewer) bias.

On the downside, questionnaires can have a low return rate, particularly if they are mailed or emailed. Their impersonal nature may mean that recipients are not motivated to fill them out. There is no opportunity to ask for clarification or follow-up questions so the level of detail is not as rich as some other formats. Questionnaires can be incompletely or incorrectly filled out for a variety of reasons, including poor reading skills or misunderstanding the wording or context of a question.

In designing a questionnaire, consider the purpose for collecting the information. Do you want to know if services are being delivered as intended and opinions about how well this is being done? Then a satisfaction survey that asks people to rate a list of questions may be most appropriate. If you want to know whether there have been changes or improvements in program participants' lives, focus the questions more on desired outcomes for services, such as increased safety or improved well-being.

How the questions are worded can be very important. Certain assumptions are made about how individuals are likely to respond in how questions are framed. Response choices that provide opportunities for open-ended comments can help address this limitation, but only the most motivated people fill them out in any depth. For example: "If yes, why?" "Please explain." "Do you have any additional comments?"

### ***Method: individual interviews***

The strengths of an interview format for collecting feedback from center users or practitioners are generally the reverse of those of questionnaires. Individual interviews allow you to explore topics in more depth, ask follow-up questions to clarify responses, and observe non-verbal cues. The personal contact can mean that people feel more engaged and motivated to respond, which can improve the overall quality of the information. On the other hand, interviews are more time-consuming and expensive and usually result in fewer participants. Individuals who are generally reluctant to participate in any format may be even more unwilling to take the time to participate in an interview or they may see a one-on-one interview as less confidential. Interviewers can also bring their own personal biases, which can shape the content and quality of responses.

Carefully consider who would be best to conduct the interviews. Interviewers should have good communication skills and be able to put others at ease about sharing their thoughts and ideas. It is





important that they avoid inserting their own opinions so as not to influence the feedback provided.<sup>2</sup> It can be desirable to use interviewers who are of a similar cultural background or identity as those they will be interviewing. Interviewers must understand domestic violence issues and be attuned to related safety issues.

There is no one answer to the question of whether it is better to use visitation center staff to conduct interviews or use someone who is not directly connected to the center. Board members or college student volunteers might encourage more open responses than center staff, particularly in talking with program participants. Community practitioners may be less guarded in providing feedback to individuals they do not interact with on a regular basis. On the other hand, busy practitioners may be less interested in taking the time to talk with someone unfamiliar to them. Center staff is more likely to have a better understanding of the key issues that need to be explored and can conduct interviews with program participants as a part of routine practice.

Interview formats can consist of structured questions or may follow a more open format. Structured questions provide a clear guide for the interviewer, allow participants to respond to the same questions, and can be easier to summarize in reports. Semi-structured interviews consist of some specific questions but allow more opportunity to ask general probing questions (e.g., what was your first appointment like?) that can allow ideas and thoughts to more freely emerge. An interview guide that includes general questions followed by sample probing responses can be helpful.

Careful notes will help you get the most out of interviews. Jot down the key points during the interview and set time aside immediately after to review and expand upon them. If others are present during the interview, review your notes and clarify your impressions with them. You may choose to record interviews (more often with practitioners), but keep in mind that a recorder can inhibit people and transcribing recordings can be exceedingly time consuming. You must clearly explain the purpose for recording an interview and have the person's explicit permission.

### ***Method: focus groups***

A focus group is a kind of group interview. A small number of people (ideally, seven to ten) are brought together in a purposeful way to share feedback about a topic of mutual concern. The one- to two-hour structured discussion is guided by a facilitator.

Focus groups allow you to learn from several individuals at once in a less time-consuming way than individual interviews. Focus groups are best for collecting general feedback about center practices or for exploring different experiences or points of view. They are not as useful for collecting information about program outcomes because they do not track the experiences of individuals over time. One advantage of the focus group approach is that members can interact with one another and generate information and ideas that they might not think of during an individual interview. Victims of abuse can also find it supportive and powerful to talk with others who have had similar experiences and to share their perspectives on policies and services.

---

<sup>2</sup> In some situations it may be helpful once the interview is completed for the interviewer to offer an opinion or comment. For example, to acknowledge how difficult it may have been for a victim of battering to protect herself and her children; or, to comment on changes that could be made in the legal system to provide better protection for victims of battering.





Keep in mind that with a focus group you are hearing only from those individuals in front of you. Any focus group represents just a snapshot of the perspectives that exist. Conducting several focus groups will help you identify common themes that are not unique to one particular group.

Advance planning and effective group facilitation skills will help address limitations in the focus group approach. Some individuals may not feel as comfortable as others in speaking out so their viewpoints may not be heard, while others may freely speak up or dominate the discussion. A skilled facilitator can recognize when this is happening and attempt to draw out diverse perspectives and opinions. Poorly planned focus groups, such as those put together on short notice or with limited recruitment, can result in few individuals showing up or a group that does not reflect the range of people you want to hear from.

Focus group facilitators can be found through word of mouth from social services agencies, higher education institutions in the community, or from within the center by staff or board members who have group facilitation skills. It is ideal to have two co-facilitators to plan and carry out the focus group. In deciding who will conduct the focus groups, think about who will be able to encourage participants to talk freely and comfortably. In some settings, using focus group facilitators who have had previous working relationships with group members may hinder the discussion. In some settings it may be most productive to use facilitators who are of a similar racial and ethnic identity as focus group participants. All facilitators should understand domestic violence issues and be attuned to safety considerations.

Recruiting focus group participants also requires advance planning. What is your target audience? Do you want to talk with specific community practitioners, such as advocates or attorneys? Do you want to hear from a specific kind of center participant (e.g., custodial parents during the last six months) or do you want to recruit more generally (e.g., battered women in the community)? Personal contact can be invaluable in recruiting participants, whether it comes directly from the center or via someone trusted by the community you want to learn from, such as hiring an advocate from the community who will help recruit battered women. Aim for a balance of individuals who will bring a range of perspectives and experiences to the discussion. Maximize the convenience of time and location

Along with personal contact, flyers or posters can be helpful in recruiting participants from the center or community. Offering a monetary stipend for center users or community members can boost participation, as can child care and transportation, either directly or via reimbursement. Providing refreshments or a light meal to any focus group also helps acknowledge their contribution.

Safety is a consideration at each step. For example, the poster might not include the time and location of the event, but a contact person and number to call for details. Prescreening those who express an interest in participating can help you identify any safety issues and ensure that your participants represent the target group you most want to reach. For example, recruiting for visiting parents without prescreening could lead to a focus group composed of men who have used battering and women who are being battered. Recruiting single gender focus groups will help maximize the safety and well-being of victims of battering. One caveat, however, is to further refine single gender groups and conduct separate groups for custodial and noncustodial parents. For example, it can be difficult for women who have lost custody of their children to participate in a



discussion with women who have not experienced losing their children. It can also be tricky to sort out their different experiences into solid themes. Open any focus group with a clear explanation of the purpose, the voluntary nature, the right to withdraw or decline to participate, and how the information will be recorded and used.

Generally, avoiding yes-no kinds of questions or a lengthy list of preset questions will be the most productive approach. Use open-ended questions that get participants talking about how some practice or experience has come about or affected them. You can also use scenarios or brainstorming questions to generate discussion. As with individual interviews, attention to note taking will help you get the most out of focus groups. Determine in advance how you will track the discussion. Will you have a note taker who can follow along and take notes on a laptop? Will the co-facilitators trade off leading the discussion and taking notes? As with individual interviews, audio or video recording can inhibit people and requires careful attention to permission and confidentiality.

Be aware that focus group participants often linger for some time after the formal discussion is over, particularly when the group involves battered women. They may express interest in connecting with each other again in the future; they may want to meet again in person or, if they traveled long distances, they may want to meet via conference call. It may be the first time they have ever spoken with other women who have had similar experiences. In its continuing efforts to help reduce the isolation and shame that many battered women experience, a center can be prepared to facilitate ways for women to stay connected. This is an opportunity to strengthen connections with community-based advocates and explore the ways in which women can be linked with one another through drop-in discussion groups; informal social events such as meeting for coffee at a set time and place; or more organized support groups.

### ***Method: check-in***

A “check-in” is an informal but intentional process of touching base with someone. It involves asking “How you are doing?” and conveying that you really want to know the answer. Visitation center staff can develop routine ways to check in with parents, children, staff, and community practitioners who have regular contact with the center.

This brief, frequent process of learning about someone’s experience exemplifies a program philosophy of respectful and fair interaction. For many of the families visiting a center, checking in helps to build relationships with staff and provides opportunities to express their needs, and how those needs may change over time. Checking in helps enhance safety, build trust, and establish a relationship of respect. When practiced regularly, it can offer victims of abuse and children a way to communicate their concerns about center practices or actions outside the center that impact their safety. Check-ins with men who batter can be an avenue for developing non-colluding relationships based upon trust and respect. Check-ins with staff during meetings or individual supervisory sessions can provide a forum to offer feedback about program issues.

Check-ins can provide immediate feedback about a given situation, but not as much reliable information about more general issues and concerns. As a loosely structured process, it should not be the only way for a center to learn about people’s experiences with the center or related issues. It is important to gauge whether an individual’s more urgent or extreme situation warrants a center-wide change in policy or practice, beyond attention to person’s specific circumstances. For example,



if your check-ins with women during a given day revealed two situations involving significant safety concerns at the time of an exchange, it might be tempting to react by changing security measures across the center. The individual experiences may be the extreme and rare in actual occurrence, however, and a center-wide change may not be the best decision.

A center can set the stage for regular check-ins during its orientation with each parent and child. This includes information about limits to confidentiality, reporting requirements, and legal obligations. Staff can express their equal regard for the safety of children and battered women and their interest in supporting and addressing their needs. Check-ins can be a tool for preparing for visits and identifying risk and safety concerns. A routine process of checking in can occur before, during, and/or after visits or exchanges.

During staff meetings and supervisory sessions, encourage staff to share comments about what is working well and what could be improved. Discussion topics could include: improving daily operations, training needs, and effective use of feedback from center participants. Encourage staff to check in with one another to offer support and share information. Staff can also find ways to check in with community practitioners, either during casual phone conversations or multi-agency meetings. Checking in can set the tone that a center wants and will use the feedback provided to it.

Staff check-ins also present opportunities to identify systemic gaps for battered women and their children. Working directly with families is a vantage point for seeing reoccurring gaps or problematic areas beyond the visitation center, such as in the legal system. Staff check-ins provide a forum to share such observations and explore the center's role in the wider community response.

### ***Method: case consultations***

Each family offers unique challenges and needs that a visitation center must address. Case consultations provide an opportunity for staff to share information and perceptions about individual cases, identify problems in center policies and practices, and develop ways to more effectively respond to the needs of battered women and their children. We have a tendency when dealing with a family where something is not going well to put the responsibility on the family members and miss problems in the center's practices that cause or contribute to the problem. The focus of this kind of case consultation is to look for problems located in center policy and practice, not the individual family members' personalities or behaviors.

Meaningful case consultations require dedicated time at regular staff meetings, and sufficient time for staff to share updates about families, debrief about difficult issues, and receive feedback from each other about how to work most effectively with families. Case consultations offer a time to critically examine: (1) how cases are being handled; (2) what women, men and children are telling staff they need; (3) current safety needs; (4) where and how aspects of safety get lost in center practices; and (5) where the needs of women, men, and children are not being met. For example, it is not uncommon for men who use violence to attempt to change the rules for their own personal advantage or manipulate staff to create conflict. Case consultation time can be used to develop a unified and consistent message that promotes the safety of battered women and their children.

Case consultations require advance preparation in order to make sure that key staff members will be present, someone has read and can summarize the case, and check-ins have occurred to collect



needed information. Keep in mind that staff may not have all the information or may be unaware of the differing perspectives of family members or other practitioners.

As a way of learning from participants, staff, and community partners, case consultations provide an avenue for staff to directly consider the implications of policies and practices on center users. Case consultations can be used to better address the needs of individual families, but can also be translated into broader program changes when gaps have been identified.

### ***Method: case file review***

A visitation center case file might include registration forms, custody and visitation orders, copies of the order for protection, wage statements, release forms, correspondence with physicians, Guardian ad Litem contacts, observation notes, reports to the court, a psychologist's evaluation report, and similar documents. The file is organized under an individual's name and is needed and used by agency employees in their official capacities as visitation center staff.

A case file analysis is a close, careful reading of everything that constitutes an official visitation center "case" in order to examine how its construction and documentation centralize safety. It is a way of exploring whether and how the administrative processes reflected in the case file direct center workers to pay equal regard to the safety of adult victims of battering and their children. For example, a center might conduct a case file analysis and discover that its documentation related to visitation contains many references to what children wore or ate and what games they played, but pays no apparent attention to who needs protection from whom, and in what ways.

Case file analysis can be a low-cost, readily accessible method of examining visitation center practices. It uses material that is already routinely collected and available. Within the center, several files can be copied for a work group or staff meeting. The analysis and discussion can be scheduled for a single meeting or over a sequence of meetings. Because the case file analysis focuses on routine practices and how the various documents organize and coordinate the staff to take certain actions, it does not require reviewing every file. A great deal can be learned by looking at a half-dozen examples.

A center can also redact case information and invite community partners to participate in case file analysis. This approach adds the perspective of community-based advocates, for example, who can bring their experience working with battered women to the discussion. Including court partners or others knowledgeable about family law proceedings, such as a legal services attorney, can contribute information about judicial decision-making and referrals. Involving someone outside of the visitation center, however, requires careful attention to confidentiality and requires redacting or making anonymous personal identifying information for each family member.

It can be challenging in a case file analysis to stay focused on the goal of protection, rather than on how efficiently or completely a form is filled out. Case file analysis requires the participation of staff or community partners who are well-grounded in understanding battering and other forms of domestic violence.



### *Using what you learn from participants, staff, and community partners*

None of the methods outlined above, whether alone or in combination, is of much value if you do not make sense of what you have learned and put that knowledge to use. The following steps will help you analyze what you have learned and shape findings that will support change.

1. Gather the notes or documentation from your information gathering.

Individual interviews and focus groups, for example, are likely to have more complete, formal notes or reports. With the other methods – check-ins, case consultations, and case file reviews – return to notes of staff discussions about what you learned.

2. Review the material and identify themes.

What did you learn from program participants? From staff? From community partners? What surprised you in what you learned? What made you wonder about whether and how a visitation practice or policy should be changed?

3. Identify strengths.

Where and how does the center best support safety for adult victims of battering and their children? Where and how does the center fulfill its mission and the Guiding Principles?

4. Identify gaps.

What do you need to change and why? How is it a gap in safety, and whose safety? How are you meeting the Office on Violence Against Women, Safe Havens: Supervised Visitation and Safe Exchange Grant Program Guiding Principles? How are you fulfilling your mission? Be as concrete as possible with examples that illustrate the areas of potential change.

5. Plan for change to address the gaps.

What needs to change in order to close the gaps you have identified? Do you need to reexamine or refresh your center's mission and purpose? Will it be important to explore the conceptual practices that shape the idea and practice of supervised visitation? Do you need new center policy language? What about changes in administrative procedures, such as a change in forms, documentation, or the ways in which you communicate with parents? Is it a matter of resources, including staff time or technology? Will it help to be linked in different ways, staff to participant, staff to staff, and agency to agency? Do you need to develop or provide additional training? Does the center need to be accountable in new ways to its participants, staff, and community partners?

6. Follow-up with feedback to participants.

Which participants would benefit from knowing how their input shaped a change in practice? How can you inform them of this change? Will you prepare a written summary or report? Will you bring community partners back together to present the findings and action



steps? Have you asked program participants if they would like a copy of any report or other findings? If you are informing program participants, how can you ensure their confidentiality and safety?

Build in time during meetings with center staff and with community partners to discuss the implications of your findings and how to use the information. How can you improve the services? What does this mean for the safety and well-being of battered women and their children? Do you need to know more before making a policy or practice decision? What steps should you take to use the information? What might be the unintended, harmful consequences of what information gets shared beyond the center, and how it gets shared?

For example, consider how summary types of reports, i.e., reports that count or tally certain items, might be misinterpreted by others or used in unintended ways. If you determined that four out of ten mothers brought their children to a visit so late that the visit had to be cut back or cancelled, your center may see that as a call to address barriers such as transportation and hours of availability. Released to courts and other referral sources, however, it could promote more punitive consequences for late or missed visits. Depending on the nature of the community collaborative, such information could prompt community allies to address systemic gaps in access to visitation services. Consider the possible implications, both negative and positive, in deciding when and how to report the result of your work.

When interpreting the information you have collected, consider a variety of explanations and ask more questions if necessary. For example, questionnaires can turn out to be based on faulty assumptions. Women might be asked whether they feel safer now that they are using the center. This question is based on the assumption that women are using the center because they are not safe. You may find that more women than expected responded “no” to this question, leading you to conclude that they do not feel safe as a result of using the center. In reality, some women may not consider safety as a major reason for using the center or may have felt safe before using the center. Explore the issue further rather than jumping to a negative or positive conclusion about the center’s visitation and exchange services.

Hearing about what is good and positive in our work is encouraging and supportive. Critical commentary about our work can be uncomfortable to recognize and hear, but the process of identifying unanticipated problems can be more useful in promoting positive change by challenging and stimulating us to do better.

## **Appendix: Informing the Practice of Supervised Visitation: Overview**





## Informing the Practice of Supervised Visitation: Overview

Essential ingredients for all methods: confidentiality, respect, and safety

No single method provides a complete picture. Multiple approaches are necessary in order to locate and close the gaps between what people need and what the visitation center provides.

Method /Audience	Advantages	Limitations & Considerations
<b>Questionnaires</b>  ✓ Program participants ✓ Referral sources ✓ Program staff ✓ Other practitioners ✓ Community partners	<ul style="list-style-type: none"> <li>• Low cost</li> <li>• Less time consuming</li> <li>• Reach more people</li> <li>• Maximize anonymity</li> <li>• Uniform questions</li> <li>• More time to consider answers</li> <li>• Easy to complete</li> <li>• No third-party involved</li> <li>• Easy to tabulate</li> <li>• Familiar format for many people</li> </ul>	<ul style="list-style-type: none"> <li>• Low response rate</li> <li>• Incomplete answers</li> <li>• Lack of personal contact</li> <li>• Unable to probe responses</li> <li>• Unable to clarify questions</li> <li>• Low motivation to respond</li> <li>• Limited flexibility in delivery</li> <li>• Cultural bias and assumptions</li> <li>• Reading skill and comprehension</li> </ul>
<b>Individual Interviews</b>  ✓ Program participants ✓ Referral sources ✓ Program staff ✓ Other practitioners ✓ Community partners	<ul style="list-style-type: none"> <li>• Address the topic in depth</li> <li>• Respond in own words</li> <li>• Clarify answers</li> <li>• More engaged = higher quality information</li> <li>• Observe non-verbal responses</li> </ul>	<ul style="list-style-type: none"> <li>• Too personal for some people</li> <li>• Reluctance to respond openly</li> <li>• Interviewer biases or lack of understanding about the topic</li> <li>• Cost: time-consuming to schedule, conduct, and analyze</li> <li>• Fewer respondents</li> </ul>
<b>Focus Groups</b>  ✓ Program participants ✓ Community members ✓ Other practitioners ✓ Community partners	<ul style="list-style-type: none"> <li>• Less time-consuming than individual interviews</li> <li>• Zero in on perceptions of and experiences with the center</li> <li>• Identify themes across participants</li> <li>• Group discussion = more interaction and ideas</li> <li>• Hear from those who are under-represented and under-served</li> <li>• For program participants: atmosphere and avenue of support for survivors</li> <li>• For practitioners: opportunity to share ideas and experiences</li> </ul>	<ul style="list-style-type: none"> <li>• Cost: may require stipends, food, childcare, and transportation for program participants or community members</li> <li>• Need multiple groups</li> <li>• Time to recruit, organize, and conduct</li> <li>• Require good facilitation and note-taking</li> <li>• Poor match for consistently tracking program outcomes over time</li> <li>• Reluctance to share ideas in a group</li> <li>• Dominant talkers can leave other views unexpressed</li> <li>• Participants do not show up</li> </ul>





Method / Audience	Advantages	Limitations & Considerations
		<ul style="list-style-type: none"> <li>• Difficult to recruit and conduct if center lacks connections with communities it wants to hear from</li> </ul>
<b>Check-in</b>  ✓ Program participants ✓ Program staff ✓ Community partners	<ul style="list-style-type: none"> <li>• Quick</li> <li>• Low cost</li> <li>• Conduct via phone or in person</li> <li>• Immediate response</li> <li>• Builds trust</li> <li>• Attention to ongoing safety concerns</li> <li>• Respond in own words</li> <li>• Observe non-verbal responses</li> <li>• Support engaged participant-center relationship</li> <li>• Adapt to changing and unique circumstances and safety needs</li> </ul>	<ul style="list-style-type: none"> <li>• Account for limitations on protecting confidentiality</li> <li>• Too personal for some people</li> <li>• Reluctance to respond openly</li> <li>• Guard against appearing or being coercive</li> <li>• Build comfort level over time</li> <li>• Balance venting with constructive action</li> <li>• May be biased toward more urgent or extreme situations</li> </ul>
<b>Case Consultation</b>  ✓ Program staff	<ul style="list-style-type: none"> <li>• Get staff members ‘on the same page’</li> <li>• Avenue for support and guidance</li> <li>• Better identify and respond to families’ needs</li> <li>• Collective problem solving</li> </ul>	<ul style="list-style-type: none"> <li>• Requires dedicated meeting time</li> <li>• Assembling all of the information</li> <li>• Requires that everyone with needed information is present</li> <li>• Be alert to capacity of abusive partners to manipulate even seasoned workers</li> <li>• Keep the focus on center practices and policy, not family members’ personalities and behaviors</li> </ul>
<b>Case File Analysis</b>  ✓ Program staff ✓ Community partners	<ul style="list-style-type: none"> <li>• Low cost</li> <li>• Easy to access</li> <li>• Use information that is routinely collected</li> <li>• Examine how a visitation “case” gets identified and processed</li> <li>• Question what is documented and why</li> <li>• Focus documentation and other practices on safety</li> </ul>	<ul style="list-style-type: none"> <li>• Advance attention to confidentiality if involving community partners</li> <li>• May need to redact materials</li> <li>• Grounded in solid understanding of battering and other forms of domestic violence</li> <li>• Keep focus on goal of protection</li> </ul>







Between 2002 and 2010, Praxis International worked in partnership with the Office on Violence Against Women to provide technical assistance and training to grantees in the Supervised Visitation Program. The following resources were developed during that partnership and are available at [www.praxisinternational.org](http://www.praxisinternational.org).

*Safe Passage: Supervised Safe Exchange for Battered Women and Their Children*, Jane Sadusky, March 2010

*Engage to Protect: Foundations for Supervised Visitation and Exchange*, 2009

“Recognizing and Understanding Battering,” Ellen Pence and Jane Sadusky

“Engaging with Battered Women,” Maren Hansen-Kramer, Julie Tilley, Beth McNamara, and Jane Sadusky

“Engaging with Men Who Batter,” Maren Hansen-Kramer, Julie Tilley, Beth McNamara, and Jane Sadusky

“Informing the Practice of Supervised Visitation,” Melanie Shepard, Jane Sadusky, and Beth McNamara

“Crafting Policies that Account for Battering – Beyond Cut-and-Paste: 9 Tips to Successful Program and Service Policies,” Ellen Pence and Jane Sadusky

*On Safety’s Side: Protecting Those Vulnerable to Violence – Challenges to Notions of Neutrality in Supervised Visitation Centers*, Martha McMahon and Ellen Pence, 2008

*New Perspectives on Supervised Visitation and Safe Exchange: Orientation*, Jane Sadusky, 2008

*Building Safety, Repairing Harm: Lessons and Discoveries from the Safe Havens Demonstration Initiative*, Jane Sadusky, 2008

*Building the Practice of Orientation in Supervised Visitation and Safe Exchange: A Trainer’s Guide*, Ellen Pence, Val Kalei Kanuha, Maren Hansen-Kramer, Jennifer Rose, Beth McNamara, Julie Tilley, and Jane Sadusky, 2008

The reports of the Safety and Accountability Audits conducted by the Safe Havens Demonstration Initiative sites, which addressed the following questions:

City of Kent, WA: How does a victim of battering who might benefit from supervised visitation services identify and access them? January 2007

South Bay Area, CA: How does the work of a visitation center produce or not produce safety for everyone involved? July 2004; Rev. February 2006

City of Chicago, IL: How does a visitation center account for peoples’ unique cultures and identities? December 2005

State of Michigan: What is the role of a supervised visitation center? July 2004



