



# Public Education

Group #5

## SUMMARY

The Domestic Violence Death Review Committee (DVDRC) recommendations (2004-2007) recognize the continuing need to better educate both the public and professionals who come into contact with victims and perpetrators of domestic violence about the dynamics of IPV and the need to take appropriate action with potential abusers, victims and their children. In particular, this education has to include an awareness of the risk factors for potential lethality.

Recommendations 2004-1, 2005-6, 2007-1, 2007-4, 2006-24

### Public education and awareness

- There is a continuing need to better educate family members, friends, and colleagues who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and the need to take appropriate action with potential abusers, victims, and their children.
- In particular, this education has to include an awareness of the risk factors for potential lethality.
- This is particularly important when the couple is going through a separation or the individual is showing signs of depression or suicidal or homicidal thoughts. The risk increases even further if the perpetrator has an addiction problem.

### General Public

2005-1, 2005-3, 2006-1, 2006-7, 2006-13, 2006-26, 2006-27, 2007-19, 2007-24, 2007-28

### Youth in Schools

2005-9, 2006-30, 2006-32, 2007-11

### Aboriginal Community

2007-10

### Other specialized groups

2004-6, 2004-20, 2005-2, 2005-16, 2006-4, 2006-8, 2006-18,

### Training for front-line professionals working with individuals and families

Recommendations 2004-8, 2005-4, 2005-7, 2006-9, 2007-17, 2007-18,

- There is a need for ongoing training in the issues of domestic violence and potential lethality for front-line professionals working with individuals and families, specifically police, social workers/counsellors, clergy, the justice community and physicians.

### Child Protective Services

2004-2, 2004-3, 2006-19

### Justice

2004-4, 2004-11

### Healthcare

2004-7, 2005-8, 2006-2, 2006-3, 2006-6, 2006-8, 2006-12, 2006-22, 2006-29, 2007-5, 2007-2, 2007-15

### Educators

2006-10, 2006-31

### Counsellors, Social Workers and Social Service workers

2006-17, 2007-29

### Police

2006-28, 2007-3, 2007-6, 2007-20, 2007-21

## **Public Education - DVDRC Recommendations**

#### **2004-1**

There is a continuing need to better educate both the public and professionals who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and the need to take appropriate action with potential abusers, victims and their children. In particular, this education has to include an awareness of the risk factors for potential lethality.

#### **2005-6**

Training workshops have to be developed and delivered by trained experts from the cultural communities being served.

#### **2007-1**

To the Ontario Women's Directorate (OWD):

It is recommended that all Government agencies involved with victims and perpetrators continue to educate the public about domestic violence including information on the dynamics and/or warning signs of domestic violence and an awareness of the risk factors for potential lethality. (Similar to recommendation #1/2002) In addition, such programs should include information on where and how to ask for help, and when to take appropriate action with potential abusers, victims, and their children. These programs should also underscore the fact that Intimate Partner Violence (IPV) and postpartum depression can have a similar negative impact on a woman's functioning and well-being.

#### **2007-4**

To the Ontario Women's Directorate (OWD):

It is recommended that OWD continue to educate both the public and professionals who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and suicide prevention. Also, OWD should provide information to help the public and professionals understand their role in assisting abusers, victims and their children. (Similar to recommendation #1/2006)

### **Public education and awareness**

#### **General Public**

##### **2005-1**

There is a need to better educate the public about the dynamics of domestic violence and appropriate responses where such dynamics are recognized in potential abusers or victims.

##### **2005-3**

The requirement for third parties to report child abuse when a child's safety and life is placed at risk needs to be more widely publicized.

##### **2006-1 and 7**

It is recommended that the Ontario Women's Directorate continue to develop and implement public education programs about Domestic Violence (e.g. The Neighbours, Friends and Families Campaign).

##### **2006-13**

To the Ontario Women's Directorate (OWD): Public awareness campaigns are needed that highlight how to recognise (and respond appropriately) when a strained relationship is becoming a potentially lethal one. Important additional risk factors are high stress situations like extreme financial pressure and imminent family breakdown. (Similar to Recommendation #1/2002)

##### **2006-26**

It is recommended that the Ontario Psychiatric Association, in conjunction with the Canadian Psychiatric Association, develop and/or promote educational materials that highlight the correlation between depression and the risks associated with intimate partner violence (IPV). (Repeat Recommendation)

##### **2006-27**

It is recommended that the Ontario Women's Directorate continue to develop and implement public education programs about Domestic Violence (e.g. The Neighbours, Friends and Families Campaign). (Repeat Recommendation)

##### **2007-19**

To the Ontario Women's Directorate (OWD):

It is recommended that the public be educated on the dynamics of domestic violence, including in same-sex relationships.

**2007-24**

To the Ontario Women's Directorate (OWD):

It is recommended that OWD continue to educate the members of the public who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and provide information on practical steps that can be taken to reduce the risk for assault and lethality. (Similar to recommendation #1/2006)

**2007-28**

To the Ontario Women's Directorate (OWD):

There is a continuing need to better educate family members, friends, and colleagues who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and the need to take appropriate action with potential abusers, victims, and their children. In particular, this education has to include an awareness of the risk factors for potential lethality. This is particularly important when the couple is going through a separation or the individual is showing signs of depression or suicidal or homicidal thoughts. The risk increases even further if the perpetrator has an addiction problem. (Similar to recommendations #1/2006, #1/2002, #1/2004, #3/2005)

## **Youth in Schools**

**2005-9**

School boards should institute curriculum-based healthy relationship programs as an essential part of the education system.

**2006-30**

It is recommended that the Ministry of Education encourage school boards to make professional development and distribution of resource material on domestic violence a priority. Ontario has available materials ranging from educators' resource guides to curriculum material on domestic violence prevention that could be implemented in a more comprehensive, consistent and integrated basis. (e.g., Handbook for Educators, Choices, 4thR). The goal of the training should be to prepare all staff to help youth/children who are victims of domestic violence (dating violence) or who have been exposed to domestic violence. Assisting these students may mean providing support, guidance and referrals to appropriate community services. Staff need to be prepared to deal with disclosures that may transpire in a formal (counseling session) or informal (after class) setting, and be prepared to follow-up with students who may be dealing with chronic problems in this area. ( Similar to Recommendation #9/2002)

**2006-32**

To the Ontario Women's Directorate and Ministry of Education: Public awareness programs (such as OWD's Neighbours, Friends and Families) and Ministry initiatives on domestic violence should include emphasis on the reality that intimate relationships in adolescence pose similar concerns as in adult relationships.

**2007-11**

To the Ministry of Education:

It is recommended that the Ministry of Education who provides funding for Adult Education, alternative education programs, and regular school programs that may involve young parents, ensure that education and training is provided to individuals who deal with young parents in such programs on how to respond to suspected or known cases of intimate partner violence among their clients.

## **Aboriginal Community**

**2007-10**

To the Ontario Women's Directorate (OWD):

Kanawayhitowin is an Aboriginal public awareness campaign that was launched in the fall of 2007 to raise awareness about the signs of woman abuse in First Nations communities, so that people who are close to at-risk women or abusive men can provide support. It reflects a traditional and cultural approach to community healing and wellness. Educational materials include brochures, public service announcements, a training video and CD-ROM. We recommend that the OWD consider making this campaign available to all Aboriginal communities across the province.

## **Other**

### **2004-6**

It is recommended that awareness and education programs address the culture of silence surrounding domestic violence and its apparent acceptance that still exists in some families and small communities.

### **2004-20**

It is recommended that, in cases of domestic violence, the police give persons proposed as surety written or video information about the risk factors for potential lethality, and that receipt of that material be confirmed on the court record

### **2005-2**

Public education should target potential victims and perpetrators of domestic violence. The education should:

- include the fact that risk of violence increases substantially during the time that a partner is leaving the relationship;
- address the needs of depressed and suicidal men who require counselling and risk reduction interventions, such as the removal of firearms from the home to prevent the escalation of the circumstances that result in the tragedies we have reviewed;
- be directed towards persons of all cultures, languages, and faiths; and
- address the need to overcome cultural barriers and the feeling of “shame” as related to mental health issues, with the goal of reducing stigma.

### **2005-16**

Every community where a domestic violence related homicide takes place should be supported to undertake a community-based education process focusing on prevention. It is recommended that a central provincial resource be identified to provide resources, support, and expertise to assist that community to use the tragedy as a catalyst for action. Ensuring that members of the local community take the lead in planning the educational process, the provincial government should provide necessary assistance, such as funding for public education materials, meetings, and other public awareness events. This provincial response to each domestic violence homicide would ensure that each community is supported in creating its own unique response that promotes collective awareness of spousal and child abuse, and can help make a difference in the prevention of future deaths.

### **2006-4**

It is recommended that creative ways must be provided to offer family members appropriate information and support in cases where they have concerns about a family member's safety. (Similar to Recommendation #1/2004)

### **2006-8**

To the Ministry of Labour: It is recommended that all workplaces design and implement a policy to address domestic violence as it relates to the workplace. The policy should include:

- Educating employees about the issues of domestic violence in order to help them identify an abusive relationship in which they may be involved, and about how to reach out to co-workers for assistance.
- Training employers and managers to identify the signs of abuse and to respond appropriately to employees who are victims and/or perpetrators of domestic violence
- Providing a resource list of appropriate referral agencies
- Providing an organized response to direct threats of domestic violence that occur in the workplace
- Developing and implementing a safety plan for the victim to ensure that a number of security measures are in place for her protection

### **2006-18**

The Ontario Women's Directorate should encourage public and private sector employers to raise awareness about their role and responsibility for domestic violence victims and perpetrators in the event that warning signs are visible in the workplace. (Similar to Recommendation #1/2004)

## **Training for front-line professionals working with individuals and families**

### **2004-8**

It is recommended that frontline service providers (police, shelter workers, paramedics, medical staff) receive training in recognizing that the effects of drug and/or alcohol addictions in the victim can sometimes cloud the assessment of underlying domestic violence

### **2005-4**

There is a need for ongoing training in the issues of domestic violence and potential lethality for police, social workers/counsellors, clergy, and physicians.

### **2005-7**

Cross-cultural and cultural competence training should be a mandatory component of all training programs for front line workers, such as police, healthcare, and social workers

### **2006-9**

It is recommended that all Government agencies involved with victims and perpetrators continue to educate the public about domestic violence and should include information on the dynamics and/or warning signs of domestic violence and an awareness of the risk factors for potential lethality. There is also a need to educate on where and how to ask for help, and when to take appropriate action with potential abusers, victims, and their children. (Similar to Recommendation #1/2002)

### **2007-17**

It is recommended that all agencies ensure adequate training and supervision in assessing domestic violence within same-sex relationships in cases where children are involved. It is also recommended that Children's Aid Societies follow-up on a referral with all parties involved with the child or children

### **2007-18**

It is recommended that social service providers, including police, physicians, and child protection services receive proper training regarding the dynamics of domestic violence in same-sex relationships.

## **Child Protective Services**

### **2004-2**

It is recommended that child welfare and protection agencies receive ongoing training to recognize the risk factors for domestic violence. Furthermore, this training should address effective interventions that promote the safety of mothers and children.

### **2004-3**

It is recommended that child welfare and protection agencies address the following issues:

- CAS/VAW Collaboration Agreement
- specialized training and education, especially on intervening directly with the offender on risk reduction and containment
- use of assessment reports that examine lethality risk
- quality assurance component
- increase skill and comfort level of workers in dealing with abusers and in supporting women at risk

### **2006-19**

To the Ministry of Children and Youth Services, and the Ontario Association of Children's Aid Societies: Efforts should be made to enhance training and protocols regarding domestic violence to ensure that a full risk assessment of victims and perpetrators is undertaken, to include assessment of the potential danger posed to children during separation. (Similar to Recommendation #25/2004)

## **Justice**

### **2004-4**

It is recommended that lawyers in family law practice receive continuing education on understanding and recognizing the dynamics of domestic violence and the risk factors for lethality associated with separation, divorce and custody and access.

### **2004-11**

It is recommended that the Ontario Court of Justice consider using high-risk cases where judicial interim releases occurred, as reviewed by the DVDRRC, as case scenarios in the ongoing educational programs for Justices of the Peace who conduct the majority of bail hearings in the province.

## **Healthcare**

### **2004-7**

It is recommended that all healthcare providers be taught to be mindful of the dynamics of domestic violence and the potential for lethality, especially when working with patients who have a history of alcohol and/or drug abuse, depression, anxiety, or suicidal ideation. When domestic violence is identified in the patient's life, the potential for lethality should be assessed by the healthcare provider or the patient should be referred to others with an expertise in making such assessments

### **2005-8**

Physicians require further education about the dynamics of domestic violence and the potential lethality, particularly where alcohol abuse, depression, anxiety, or suicidal ideation is present and diagnosed.

### **2006-2**

It is recommended that the Ontario Psychiatric Association, in conjunction with the Canadian Psychiatric Association, develop and/or promote educational materials that highlight the correlation between depression and the risks associated with intimate partner violence (IPV).

### **2006-3**

It is recommended that the College of Family Physicians of Canada actively develop and/or promote educational tools that highlight the unique role family physicians have in identifying domestic violence. (Similar to Recommendation #12/2004)

### **2006-6**

It is recommended that the College of Family Physicians of Canada, the Ontario Psychiatric Association, in conjunction with the Canadian Psychiatric Association, and the Society of Obstetricians and Gynecologists of Canada develop and/or promote educational interventions that highlight the role of physicians in identifying a history of abuse in assessing patients' health concerns. Studies indicate that minimal intervention can lead to disclosures of intimate partner violence, with resulting positive outcomes (e.g. increased use of victim services; more safety behaviours; less physical abuse). (Repeat Recommendation)

### **2006-12**

It is recommended that the College of Family Physicians of Canada develop and/or promote educational programs that highlight the dynamics and/or warning signs of domestic violence and the potential for lethality, especially when working with patients who have a history of alcohol and/or drug abuse, depression, anxiety or anger. (Similar to Recommendation #12/2004)

### **2006-22**

The College of Family Physicians of Canada should develop and/or promote educational tools that ensure that appropriate risk assessment and safety planning is undertaken whenever patients disclose ongoing intimate partner violence (IPV). (Repeat Recommendation) Rationale: The victim's doctor was aware of the abuse and apparently did not do a risk assessment or offer risk reduction strategies

### **2006-29**

It is recommended that the College of Family Physicians of Canada ensure that educational interventions for family physicians and family medicine residents on mental illness highlight the way that such problems elevate the risk for lethality in situations of ongoing IPV. (Repeat Recommendation)

### **2007-2**

To the College of Family Physicians of Canada, Canadian Pediatric Society, Society of Obstetricians and Gynecologists, College of Midwifery of Ontario:

It is recommended that organizations involved in educating health professionals, such as the College of Family Physicians of Canada, Canadian Pediatric Society, the Society of Obstetricians and Gynecologists, and the College of Midwifery of Ontario, promote educational programs that explore the dynamics and/or warning signs of domestic violence and the potential for lethality, especially when working with patients who have depression and/or anxiety. In addition, such programs need to highlight for practitioners caring for women and/or their children that IPV can lead to and/or exacerbate an underlying depression. (Similar to recommendation #12/2004 & #12/2006 & #15/2006)

### **2007-5**

To the College of Family Physicians of Canada:

It is recommended that healthcare providers be taught to be mindful of the dynamics of domestic violence and the potential for lethality, especially when working with patients who have a history of drug abuse, depression, anxiety, and suicidal ideation, particularly when there is high conflict in their marriage and a history of numerous separations. (Similar to recommendations #12/2004 & #12/2006)

**2007-15**

To the Ontario Women's Directorate (OWD), College of Family Physicians of Canada, Ontario & Canadian Psychiatric Associations:

There must be more public education regarding the risk that suicidality poses, not only to the suicidal person but also to others involved with him/her. Within the Health Care system, men who are in relationships and who threaten or attempt suicide should consistently be screened for abusive behaviour in their relationships. Part of this screening process must involve some contact with the female partner to offer information and support regarding disclosure of abuse, services and supports available, etc.

**Educators**

**2006-10**

To the Ministry of Education: It is recommended that the Ministry ensure that teachers, administrators and support staff receive ongoing training on recognition of risk factors for domestic violence, including effective intervention that promotes the safety of the child. (Similar to Recommendation #25/2004)

**2006-31**

It is recommended that The Ministry of Education mandate pre-service courses on domestic violence at Faculties of Education in Ontario in order to prepare educators for their future roles in this area such as responding to children living with domestic violence or promoting violence prevention programs. (Similar to Recommendation #5/2005)

**Counsellours, Social Workers and Social Service workers**

**2006-17**

To Universities and Community Colleges offering social work programs, and to professional associations of social workers (Ontario College of Social Workers):

Curricula should include pre-service and continuing education programs on risk assessment for victims and perpetrators of domestic violence. (Similar to Recommendation #5/2005)

**2007-29**

To the Ontario Women's Directorate (OWD):

Given the high co-occurrence between addictions and domestic violence, we expand on previous recommendations to include more education for counsellors who work with clients with addiction problems who may be perpetrators of domestic violence. We recommend routine screening in every case and where there are indicators of domestic violence, we would recommend a thorough assessment of risk and risk management of the case including contact with the victim to engage in safety planning. We would not expect addiction counsellors to become experts in domestic violence work but we would recommend that they collaborate closely with the VAW sector in their community. (Similar to recommendations #7/2004, #8/2004, #5/2002)

**Police**

**2006-28**

To the MCSCS; OACP: It is recommended that police receive ongoing training in the dynamics of Domestic Violence to assist officers with assessing situations and laying charges where appropriate. (Similar to Recommendation #4/2002)

**2007-3**

To the Ontario Association of Chiefs of Police (OACP) and Ontario Police College (OPC); Ministry of Community Safety and Correctional Services (MCSCS), Policing Standards Division:

It is recommended that there be ongoing training for police on the most effective response to domestic violence cases especially where there is a history of homicidal and suicide threats, separations, obsession with the victims, prior incidents of domestic violence and/or child abuse. (Similar to recommendation #4/2002 & #16/2004)

The development of a high-risk case management protocol specific to these complicated domestic violence cases needs to be accompanied by additional training focused on addressing the dual goals of victim safety and offender risk reduction.

**2007-6**

To the Ontario Association of Chiefs of Police (OACP); First Nations Police; First Nations Police Association & Ministry of Community Safety & Correctional Services (MCSCS) Policing Standards Division:

Recognizing the critical role that police play in responding to domestic violence calls, particularly in rural and remote communities where frequently they are the only resource available to families in trouble, police officers require ongoing training in the dynamics of domestic violence especially when faced with reluctant and ambivalent victims and perpetrators who have a history of past domestic violence, suicidal behaviour and addictions. (Similar to recommendations #7/2002, #5/2002, #4/2002, #8/2004 & #28/2006)

**2007-20**

To the Ontario Association of Chiefs of Police (OACP), Ontario Police College (OPC); Ministry of Community Safety & Correctional Services (MCSCS) Policing Standards Division:

It is recommended that there be ongoing training for police on the most effective response to domestic violence cases where there is a history of homicidal and suicidal threats, a recent separation, and where prior history includes domestic violence, serious substance abuse and/or child abuse. (Similar to recommendation #5/2004, #2/2005, #3/2005)

**2007-21**

To the Ontario Association of Chiefs of Police (OACP), Ontario Police College (OPC); Ministry of Community Safety & Correctional Services (MCSCS) Policing Standards Division:

It is recommended that police services reinforce with their members the requirements of the Domestic Violence Occurrences (LE24) and Firearm Occurrences (LE029) of the Provincial Adequacy Standard Guidelines regarding the seizure of firearms during the course of Domestic Violence Occurrences. This training should be conducted on an annual basis placing emphasis on ensuring officers are appropriately educated on their authorities to conduct weapons seizures with and without a warrant. (Similar to recommendation #15/2002)