

**ATS  
NB**



**NB  
ASW**



# **“Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives”**

**Evaluation Report  
for**

**“Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene: A Train-the-Trainer Program”**

**Submitted to:**

**New Brunswick Association of Social Workers**

**and**

**Muriel McQueen Fergusson Centre for Family Violence Research**

**By:**

**HAN MARTIN  
ASSOCIATES**



**May 2013**

Prepared by:

Reni Han and Najat Abdou-McFarland

Han Martin Associates

PO Box 354, Station A

Fredericton, NB

E3B 4Z9

Tel: (506) 363-4641

Fax: (506) 363-1022

Email: [hanmartin@nb.aibn.com](mailto:hanmartin@nb.aibn.com)

## **Acknowledgements**

Our appreciation goes to the members of the Evaluation Committee who guided the evaluation process, provided valuable input and discussion and assisted with data collection with participants for this evaluation: Miguel LeBlanc, Executive Director of the New Brunswick Association of Social Workers; Rina Arseneault, Associate Director of the Muriel McQueen Fergusson Centre for Family Violence Research at the University of New Brunswick; Luc Theriault, Professor and Acting Chair of the Department of Sociology, Faculty of Arts at the University of New Brunswick; and Martine Paquet, Social Work Consultant with the New Brunswick Association of Social Workers. Our thanks as well to Chantal Abord-Hugon who assisted with data collection for the Women Survivors of IPV and to Christine Wakeham of the Muriel McQueen Fergusson Centre for Family Violence Research for her assistance with the formatting of figures for the final report. Finally, many thanks go to the participants who contributed their time and thoughts towards this evaluation.

# Table of Contents

Glossary.....	vii
Executive Summary.....	x
1 Introduction .....	1
2 Background .....	2
2.1 Development of <i>Understanding the Impact of IPV – Helping Social Workers to Better Intervene</i> Train-the-Trainer Program.....	2
2.2 Delivery of the <i>Train-the-Trainer</i> Program .....	4
3 Evaluation .....	5
3.1 Evaluation Goals.....	6
3.2 Logic Model and Evaluation Framework.....	6
3.3 Methodology.....	7
4 Findings .....	10
4.1 Key Informants .....	10
4.1.1 Vision of IPV Training Program .....	10
4.1.2 Clarity of Training Objectives .....	10
4.1.3 Implementation of Training .....	11
4.2 Trainers.....	13
4.2.1 Recruitment of Trainers .....	13
4.2.2 Clarity of Workshop Objectives .....	13
4.2.3 Appropriateness of Content.....	16
4.2.4 Appropriateness of Delivery .....	21
4.2.5 Overall Evaluation of Train-the-Trainer Workshop.....	24
4.2.6 Self Reflection .....	24
4.2.7 Trainers Preparation to Deliver Training .....	26
4.2.8 Trainers’ Delivery of IPV Educational Training.....	29
4.2.9 Impacts of Participating in the Train-the-Trainer Workshop.....	31
4.3 Trainees.....	32
4.4 Women Survivors of IPV .....	35

4.4.1	Importance of the Train-the-Trainer Program Content and Social Worker Self-Awareness.....	35
4.4.2	Skills and Competencies Required by Social Workers .....	38
4.4.3	Trainers Self-Awareness and Competencies.....	43
5	Discussion and Recommendations .....	45
5.1	Limitations.....	45
5.2	Workshop Title .....	46
5.3	Overall Objectives of the Training Program.....	46
5.4	Content of the Educational Training Program .....	47
5.5	The Train-the-Trainer Program .....	50
5.6	Impact of the Train-the Trainer Training Program.....	52
5.7	Empowering Social Change.....	52
6	Conclusion.....	53
	References .....	54

Appendix A: *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene* – Contents of the Train-the-Trainer Manual

Appendix B: Social Worker Trainers Logic Model; Trainees Logic Model; Evaluation Framework

Appendix C: Department of Social Development Core and Mandatory Training for Child Welfare Social Workers

Appendix D1: English Data Collection Tools and Workshop Evaluation Form

Appendix D2: French Data Collection Tools and Workshop Evaluation Form

Appendix E: Supplementary Tables and Figures for Trainers, Trainees and Women Survivors of IPV

## List of Figures

Figure 1: Trainers Workshop Evaluation - Clarity of Workshop Purpose and Objectives .....	14
Figure 2: Trainers Online Evaluation Survey - Clarity of Workshop Objectives.....	14
Figure 3: Trainers Workshop Evaluation - Appropriateness of Content .....	16
Figure 4: Trainers Online Evaluation Survey - Appropriateness of Content.....	17
Figure 5: Trainers Workshop Evaluation - Appropriateness of Training Delivery .....	21
Figure 6: Trainers Online Evaluation Survey - Appropriateness of Training Delivery .....	22
Figure 7: Trainers Workshop Evaluation - Overall Evaluation of Trainer Workshop.....	24
Figure 8: Trainers Online Evaluation Survey - Self-Reflection and Self-Care.....	25
Figure 9: Trainers Online Evaluation Survey - Preparation to Deliver Training.....	27
Figure 10: Trainers Online Evaluation Survey – Self-Perception of Ability to Deliver Training....	30
Figure 11: Trainees Workshop Evaluation .....	32
Figure 12: Trainees Online Evaluation Survey .....	33
Figure 13: IPV Survivors - Importance of Training Content and Social Worker Self-Awareness..	36
Figure 14: IPV Survivors – Importance of Trainers Self-Awareness .....	44

## List of Tables

Table 1: Data Sources and Collection Methods.....	9
Table 2: Trainers Online Evaluation Survey - Clarity of Objectives .....	15
Table 3: Trainers Online Evaluation Survey - Appropriateness of Content .....	18
Table 4: Trainers Online Evaluation Survey - Appropriateness of Training Delivery.....	23
Table 5: Trainers Online Evaluation Survey - Self-Reflection and Self-Care.....	25
Table 6: Trainers Online Evaluation Survey - Preparation to Deliver Training .....	27
Table 7: Trainers Online Evaluation Survey – Self-Perception of Ability to Deliver Training .....	30
Table 8: Trainees Workshop Evaluation .....	33
Table 9: Trainees Online Evaluation Survey.....	34
Table 10: IPV Survivors - Importance of Training Content and Social Workers Self-Awareness .	36

## Glossary

**Average** – The arithmetic average of all values in a sample. The average is also known as the mean.

**Department of Social Development** – Refers to the Government of New Brunswick's Department of Social Development that is responsible for Child Welfare services in the province.

**Descriptive Statistics** - Statistical techniques used to summarize and describe a set of data and the types of measures used in these summaries. Measures of tendency (average or mean and median) and variation (range and standard deviation) are the main descriptive statistical measures used.

**Evaluation Framework** – An evaluation strategy or plan that identifies aspects of how an evaluation will be conducted such as key evaluation questions to be explored during the evaluation; indicators which determine progress towards results; sources of data for the evaluation; types of data collection methods to be used; timeframes and responsibility for data collection; communication requirements.

**Focus Group** - A group of interacting individuals with some common interest or characteristics who are brought together by a facilitator as a way to gain qualitative information about participants' beliefs, opinions, perceptions and attitudes on an issue, product or service. The facilitator uses a structured questionnaire to focus the discussions.

**Intimate Partner Violence (IPV)** - The term intimate partner violence encompasses all forms of relationship violence. For example, heterosexual couples, same-sex couples, dating violence, etc.

**IPV Educational Program** – Program designed to teach knowledge and skills about IPV to social workers and other professionals dealing with IPV.

**Key Informants** – Individuals who provided background information and context about the development of *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene* train-the-trainer program. These included representatives from the sponsoring organizations of the program: the New Brunswick Association of Social Workers; the Muriel McQueen Centre for Family Violence Research at the University of New Brunswick;

the Government of New Brunswick Department of Social Development; and individuals involved in the project's Advisory and Working Committees.

**Likert Scale** – A type of scale frequently used in surveys, evaluations and questionnaires. The scale was named after Rensis Likert, the organizational psychologist who developed the scale.

A typical scale would take the following format:

- 1 = Strongly disagree
- 2 = Disagree
- 3 = Neither agree or disagree
- 4 = Agree
- 5 = Strongly agree.

**Logic Model** – A graphical description of the logical relationships between a program's resources (inputs), activities, products or services (outputs) and intended outcomes. Logic models are most commonly used during the evaluation stage of a project but can also be used during planning and implementation. Logic models are also known as logical frameworks or theories of change.

**Mode** - The value that occurs most frequently in a population or a sample. It could be considered as the single value most typical of all the values.

**Online survey** – Surveys that were administered online using SurveyMonkey and completed by Trainers and Trainees to obtain quantitative data for this evaluation.

**Standard Deviation** – The standard deviation is a measure of dispersion. It measures how much scores in a data set tend to spread out from the mean.

**Train-the-Trainer Program** – Training program designed to teach social workers how to be effective trainers on the topic of IPV.

**Trainees** – Individuals who participated in a training workshop delivered by social workers who had previously completed the train-the-trainer program.

**Trainers** – Social workers who completed the train-the-trainer program to deliver training on IPV to their peers.

**Trainee Workshop Evaluation** – The evaluation form completed by Trainees immediately following completion of their educational workshop.

**Trainer Workshop Evaluation** – The evaluation form completed by Trainers immediately following completion of the train-the-trainer program.

**Women Survivors** – Women who participated in *Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives*. This project was developed to help women survivors define and understand IPV, and to build and maintain healthy self-esteem and leadership skills in their personal and community lives. These women provided input and feedback on aspects of the social worker train-the-trainer program for IPV.

# Executive Summary

## Background

Intervening in situations of intimate partner violence (IPV) is one of the most difficult aspects of social work practice and social workers often encounter victims/survivors during their years of practice. Recognizing this, the New Brunswick Association of Social Workers (NBASW) in partnership with the Muriel McQueen Fergusson Centre on Family Violence Research (MMFC) at the University of New Brunswick; the Government of New Brunswick's Department of Social Development; and the Government of New Brunswick's Women's Issues Branch of the Executive Council Office developed *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene*, a train-the-trainer program for social workers in New Brunswick. This program was designed to “assist those who are in a position to deliver training to social workers about the impact of and effective responses to intimate partner violence; in other words, to build the capacity of social workers to effectively intervene in situations of intimate partner violence” (*Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene: A Train-the-Trainer Manual for Delivering Training on Intimate Partner Violence to Social Workers*, p.3).

An Advisory Committee comprised of social workers from diverse workplaces was created to guide the overall development of the content and to ensure that generally, the information contained in the manual would be useful to social workers in all fields of practice. A Working Committee comprised of social workers from different fields of practice was formed to provide specific input on the content of *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene*.

MMFC initially delivered the train-the-trainer workshop to four social workers. These four individuals subsequently piloted the educational program with a cohort of 18 social workers practicing in diverse fields who provided feedback on how the educational program could be adjusted and improved. Adjustments were made to the curriculum based on their feedback.

MMFC then worked with the Department of Social Development to identify and recruit the first set of social workers to be trained through the program. Thirty-three social workers were trained in English and French in early 2010. Seventy-eight percent of these participants worked with the Department of Social Development and the remaining 22% were from First Nations communities, community agencies or other government departments. Subsequently, five of these individuals implemented workshops for their peers and other professionals.

## Evaluation

The evaluation of *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene* train-the-trainer program occurred more than a year after the delivery of the program. The delay was caused by the need to secure resources to complete the evaluation. In 2010, the NBASW in partnership with the MMFC applied for and received funding from Status of Women Canada for the project, *Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives*. A very important component of *Action for Change* was the fact that women survivors/victims of IPV had the opportunity to volunteer to provide input and feedback for the evaluation of *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene*.

An Evaluation Committee was formed and committee members worked collaboratively with the Evaluator on various aspects of the evaluation such as determining the evaluation goals, the evaluation framework, the logic model for the initiative, the design of data collection instruments, the data collection, the data analysis, the final evaluation report and the evaluation recommendations.

## Evaluation Goals

The evaluation goals were to:

- 1) Determine whether or not the social worker train-the-trainer program:
  - a) Delivered the right content to prepare social workers to train their peers;
  - b) Was delivered in an appropriate way;
  - c) Provided social workers with the skills and confidence to deliver training on IPV to their peers.
- 2) Determine improvements needed for the train-the-trainer program for future deliveries.
- 3) Assess whether the social worker Trainers effectively delivered training on IPV to their peers.
- 4) Assess the impact of the peer delivered IPV training on social workers in New Brunswick working in the formal support system.

## Methodology

Background and project documentation on the train-the-trainer program were reviewed for the evaluation, including Workshop Evaluation Forms administered immediately after the train-the-trainer workshop and Workshop Evaluation Forms completed by participants at the end of workshops delivered by these Trainers.

Data collection instruments were designed for:

- **Key Informants** – semi-structured interview questionnaires. The Key Informants provided background information on the development and implementation of the train-the-trainer program;
- **Social Worker Trainers** – interview guides for semi-structured interviews or focus groups and online surveys. The Trainers were participants in the train-the-trainer program;
- **Trainees** – online surveys. The Trainees were individuals who subsequently participated in an IPV educational workshop delivered by the Trainers who had completed the train-the-trainer program;
- **Women Survivors of IPV** – semi-structured interview questionnaires that also contained quantitative questions. As part of the *Action for Change* project, these women participated in the workshop, *Achieving Our Potential: A Workshop for Survivors of Intimate Partner Violence*.

Interviews or focus groups were conducted in participants' language of preference by telephone or in-person. Online surveys were administered through SurveyMonkey and were available in English and French. The following participated in the evaluation:

- 7 Key Informants
- 16 Trainers participated in interviews and 5 completed the online survey
- 9 Trainees
- 13 Women Survivors of IPV.

Data from the Workshop Evaluation Forms completed by 32 Trainers and 10 Trainees immediately after they completed their training was also analyzed and reported on. Descriptive statistics was used to analyze quantitative data and emergent themes were identified for qualitative data.

The Evaluator prepared a draft report and recommendations which were reviewed by the Evaluation Committee. Their feedback was incorporated into the final product.

## Findings

The evaluation of *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene* train-the-trainer program is influenced by the prevalence of social workers from the Department of Social Development who participated in the train-the-trainer workshop and their voices are prominent in the findings. This section is organized according to the groups of participants who participated in the evaluation – Key Informants, Trainers, Trainees and Women Survivors of IPV.

### Key Informants

#### Clarity of Objectives

Almost all the Key Informants identified that the *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene* program was to increase basic understanding, knowledge and interventions of social workers in all fields of practice when dealing with situations of IPV.

#### Implementation of Training

Key Informants felt that the train-the-trainer program had been implemented as intended. However, there appeared to be some confusion on the part of Trainers on whether they were receiving training on how to deliver the IPV educational program to their peers or receiving training on how to intervene in situations of IPV. Key Informants also identified other challenges associated with delivering the IPV train-the-trainer program and considerations for developing social workers as trainers, such as:

- Trainers being unclear about the expectations on them after receiving the training;
- The likelihood that some Trainers would be less confident or experienced with delivering training
- The possibility that some Trainers would be less comfortable delivering content that required participants to be self-reflective than delivering material that was more factual;
- Changes that were occurring within the Department of Social Development. The Department was shifting its philosophy and practice with respect to child protection to a more family centred approach as well as undergoing a period of fiscal restraint similar to other government departments.

Key Informants also identified challenges that existed with implementing the educational program in the Department of Social Development:

- The training was designed for social workers practicing in a range of sectors. As a result, the training met some needs of social workers from the Department but not all of them;
- There can sometimes be resistance when experienced social workers are required to take training in topics where they feel they already have the required knowledge and experience;
- There was some concern among supervisors that modifying the training to better suit the needs of regions would be moving away from the consistency promoted to ensure minimum standards were met.

## **Trainers**

### **Clarity of Objectives**

The Workshop Evaluation Form administered right after the train-the-trainer program and the online survey that was part of the data collected for this evaluation indicated that Trainers were clear about workshop objectives prior to taking the training. However, after completing the training, there was less certainty. Some Trainers felt that:

- The objectives did not entirely convey the purpose and outcomes of the train-the-trainer workshop. Although generally Trainers from the Department of Social Development understood they were expected to provide educational workshops to their colleagues, almost half the Trainers were expecting to receive training on intervention skills;
- They felt that the title of the training was inaccurate;
- They were unclear about who they would be delivering training to, that is, whether the IPV training was aimed at just social workers or also professionals and para-professionals in other sectors as health, justice or community agencies.

### **Appropriateness of Content**

Immediately after the workshop, Trainers felt the workshop content and skills being taught were applicable to their jobs. Trainers appreciated the existing content. However, more than a third stated they would have liked more time on how to deliver or adapt the training or gain a better understanding of the exercises.

Data collected for this evaluation through interviews with 16 Trainers found that:

- A quarter of the Trainers felt the content was excellent, contained a range of information and exercises to engage different groups of people and would be useful for newer social workers in the Department of Social Development. These Trainers were working in different sectors, including Child Protection;

- Half of the Trainers felt the content was a good review of IPV but that more in-depth content and additional intervention tools were needed. All of these Trainers worked in Child Protection with the Department of Social Development.

Suggestions for improving the content included:

- More advanced and practical materials on diverse families to examine the complexities of their circumstances in-depth;
- More intervention techniques and tools. For example, techniques for assessing and intervening with children and youth; grids to evaluate risk;
- More information on:
  - The effects of abuse;
  - Men who are victims of IPV;
  - Community resources;
  - Systemic issues faced by victims of IPV;
- Additional tools for educating clients about IPV;
- Additional videos that focused on intervention;
- More ideas for practical applications of the theoretical information presented.

### **Appropriateness of Delivery**

Overall Trainers felt that the facilitators for the train-the-trainer workshop were effective, the training was delivered in an appropriate manner and the activities were clear and relevant. Trainers commented on the usefulness of visual aids.

Suggestions for improvement include:

- Emphasizing how to deliver the training rather than the content itself;
- Adjusting the length of the train-the-trainer workshop to better accommodate learning on how to deliver the workshop;
- Delivering the educational workshop first followed by the training on how to deliver the material later so that participants could focus on learning one thing at a time (intervention strategies or delivery methods).

### **Self-Reflection and Self-Care**

Almost half the Trainers interviewed stated that the training did make them examine their own practice and reflect on their professional experiences with IPV. It had made them:

- More sensitive or empathetic to women dealing with IPV and the challenges they face;
- More observant with clients and how their interventions could have been better;
- Eager to continue doing their own research on IPV;

- More aware of personal biases or how personal experiences could influence their own social work practice.

Other Trainers stated that the training had not stimulated self-reflection or thinking about self-care or were unaware this was an aspect of the training.

### **Trainers Preparation to Deliver Training**

Trainers generally felt that the train-the-trainer workshop was well structured and that some of the tools provided would be useful to transfer learning. Trainers from the Department of Social Development commented that the structure and the materials provided a basis for adapting future training for the specific needs of Child Welfare social workers.

Two Trainers outside of the Department of Social Development had adapted materials and were prepared to deliver training. Seven Trainers in the Department of Social Development had adapted materials and were prepared to deliver the training but the Department of Social Development's central office informed them that the training had been put on hold for the time being.

Trainers from the Department of Social Development were not clear about the reasons for the delay. They suggested that clearer direction from the Department was required regarding the parameters of how the training could be modified to meet the unique needs of regions yet uphold a standardized approach across the Department.

### **Trainer's Delivery of IPV Educational Training**

Three Trainers who were interviewed had delivered educational workshops numerous times to their peers in Social Development or with professionals or para-professionals in other sectors or community based agencies. They identified an additional two Trainers who had co-delivered these workshops with them. The three Trainers who were interviewed had adapted the training in several ways by:

- Asking participants ahead of time which aspects of the training they wanted to focus on;
- Identifying and including other tools and resources;
- Modifying language and approaches for a First Nations cultural context;
- Adjusting the duration of the training.

Trainers suggested continually updating the training module content and tools and then distributing it to them to ensure continuous learning and the latest knowledge.

## **Impacts of Participating in the Train-the-Trainer Workshop**

Trainers identified several ways in which the training had impacted them:

- The training increased awareness of why colleagues would react to the issue of IPV in different ways, especially if they were coming from different cultural backgrounds;
- Through the delivery of IPV educational workshop to community partners, the training provided new opportunities for partnership and collaboration for the Department of Social Development;
- The training provided a good foundation from which to deliver future workshops on IPV;
- Trainers were being assigned more cases involving IPV since taking the training.

## **Trainees**

Trainees who participated in an IPV educational workshop delivered by Trainers stated that they found the workshops and the opportunity to network with colleagues from different sectors extremely valuable. Trainees identified that:

- Workshop objectives were clear;
- The content was useful;
- The workshops had been delivered effectively;
- The workshops had provided opportunities for self-reflection and discussions about self-care.

Trainees learned about:

- Biases, stereotypes and myths related to IPV;
- Empathy and providing support to victims of IPV;
- Barriers to leaving a situation of IPV and the continued risks after leaving;
- Safety planning;
- Tools that could be used to educate their clients about IPV.

They provided some suggestions for additions to the content, such as information on interventions with children, the mental health impacts of IPV and survivor testimonials.

## **Women Survivors of IPV**

Women Survivors of IPV who contributed to this evaluation all felt that the existing content of the program, *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene*, was very appropriate and important. They suggested that presentations or

testimonials from survivors of IPV would enhance existing content. The Women Survivors of IPV shared personal experiences of systemic issues they had faced such as:

- Conflicting requirements, directives or criteria between two different regions in the Department of Social Development;
- Conflicting requirements, directives or criteria between the Department of Social Development and the Family Court;
- Challenges with the legal system;
- Lack of assistance for women who were not receiving social assistance because of ineligibility for certain services and supports.

They thought it was important for social workers to be aware of systemic issues faced by victims of IPV.

They also felt that it was very important for social workers to be aware of their own biases and perceptions about IPV in either their roles as interveners with clients or as trainers on IPV. They stated that regardless of their perceptions, social workers should be supportive, non-judgemental, empathetic and knowledgeable when dealing with victims of IPV.

## **Discussion**

Social workers in all fields of practice would benefit from training on the issue of IPV. The train-the-trainer program was developed with this intention. However, 78% of participants in the train-the-trainer program were from Child Protection in the Department of Social Development and their voices are prominent in this discussion.

### **Limitations**

The reliability and the validity of the data in this evaluation should be used with caution because of a number of factors:

- The train-the-trainer program was developed for social workers in all fields of practice. However, since more than three quarters of the participants in the train-the-trainer program worked in Child Protection in the Department of Social Development, many of the views and responses received during this evaluation may not be typical of social workers in general.
- The sample sizes of the groups evaluating the train-the-trainer program were very small (7 Key Informants, 21 Trainers and 9 Trainees, and 13 Women Survivors of IPV).

- The evaluation was conducted more than a year after the completion of the delivery of the train-the-trainer program. This had an impact on respondents' recollections of their experiences and their views are impressions that have lasted. The lapse in time also affected Trainers' willingness to participate in the evaluation and contact information was no longer valid for some Trainers.

### **Workshop Title**

Some participants in the train-the-trainer program thought the title of the program, *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene*, was misleading and led to some confusion on the purpose and objectives of the workshop. Because of the title, many Trainers were expecting to gain intervention tools and techniques, which likely influenced their expectations and experience of the train-the-trainer program.

### **Overall Objective of the Training Program**

Although Trainers indicated they were clear about the train-the-trainer program objectives in their initial evaluations of the program, comments received by almost half of the Trainers during interviews or focus groups indicated that they expected the workshop to increase knowledge and understanding of IPV. Others were not clear about the requirement that they were to deliver training or of the intended target audience for their training workshops (social workers only or social workers, other professionals and para-professionals in the formal helping system).

It is difficult to incorporate two very different types of learning in one program. The first type of learning is for social workers to become more effective in their interventions in situations of IPV (the educational IPV program). The second type of learning is to become trainers who deliver this training (the train-the-trainer program). Therefore, it is advisable to separate the two types of training. MMFC could modify their approach to develop a training program that would allow participants to focus on enhancing intervention skills in IPV situations. If organizations need trainers specifically for their workplace, MMFC could train and mentor these individuals to enhance knowledge and competencies related to facilitating the IPV educational program for their peers in their workplaces. The objective of the educational and train-the-trainer programs should be clearly differentiated to minimize confusion on the part of participants.

### **Content of the Educational Training Program**

Overall, the content of the materials that already exist for the train-the-trainer program is appropriate for a general IPV educational program for social workers from diverse fields. This

was confirmed by Trainees who received this content during their participation in an IPV education workshop delivered by their peers; Women Survivors of IPV; Key Informants; and several Trainers. However, half of the Trainers felt that the content provided a good review of IPV but that more advanced content and additional intervention tools would be useful. All of these Trainers worked in Child Protection with the Department of Social Development. They provided several suggestions for additions to enhance the content.

### **The Train-the-Trainer Program**

Generally, respondents provided favourable feedback about the organization and delivery of the train-the-trainer program, stating that facilitators were dynamic, organized and motivating. Three Trainers who participated in the evaluation and who had delivered an IPV educational program felt confident about delivering the training and received favourable evaluations from their participants. This indicated that the knowledge and skills they gained through completing the train-the-trainer program had been effectively applied.

However, one third of the Trainers identified that they would have liked more time and content on how to deliver the training. Some comments also suggested that the train-the-trainer experience was sometimes confusing for Trainers as they were learning about IPV and how to deliver training on this topic at the same time. Trainers suggested extending the length of the train-the-trainer workshop to allow for more content and discussion on delivery of an IPV educational program.

Social workers who elect to become trainers already possess useful skills for delivering the educational program. Some of the information and strategies for training are currently included in the train-the-trainer manual but content could be added which would focus more extensively on delivery of training. MMFC could provide the train-the-trainer program through a combination of workshops and a mentoring process to help enhance and consolidate the learning of how to train on issues of IPV.

Recruitment and selection of trainers to deliver the IPV educational workshop should come from participants who have completed the educational program and have moderate to advanced experience dealing with IPV in their professional roles. This will ensure trainers can bring their own familiarity and experience of dealing with the complexities of IPV.

### **Impact of the Train-the-Trainer Program**

It is still too early to assess the impact of the train-the-trainer program on the formal support system in New Brunswick and social workers' effectiveness in responding to IPV. The number of people who have completed this program is still extremely small when considering the

numbers of social workers practicing in New Brunswick. In the future, assessing the impact of the train-the-trainer program will be more feasible as future training is rolled out.

### **Empowering Social Change**

When seeking improvements to intervening effectively in situations of IPV at an organizational level, having the right organizational policies to support the long-term goal of improved system capacity to assist victims of IPV must be in place. The Women Survivors of IPV who participated in this evaluation identified numerous systemic issues that still exist in New Brunswick when it comes to assisting victims of IPV. MMFC and the NBASW should continue to approach other government departments and service agencies to ensure that their policies support the improved responses and interventions of social workers.

## **Conclusion**

The train-the-trainer program is an effective concept to improve IPV interventions and capacity in the New Brunswick formal support system. As part of this evaluation, Key Informants, Trainers, Trainees and Women Survivors of IPV identified several strengths and potential improvements to the train-the-trainer program. The findings suggest that with the creation of an IPV educational program and modifications to the train-the-trainer program, there is the potential to achieve the desired outcome of improved social work interventions in situations of IPV. With a wider reach, the train-the-trainer program for social workers and the peer delivered IPV educational program can have a positive impact on the capacity of social workers and other professionals in the formal support system to improve their interventions to victims and survivors of IPV in New Brunswick.

## Summary of Recommendations

- 1) MMFC change the title of the train-the-trainer program to accurately reflect the content and purpose of the training program.
- 2) MMFC to separate and differentiate the objectives for the educational and train-the-trainer programs.
- 3) MMFC in partnership with NBASW:
  - a) Promote the delivery of the IPV educational program to a wider audience to ensure that participation includes social workers from all fields of practice.
  - b) Develop an educational program on IPV for social workers from diverse fields of practice in collaboration with various organizations.
  - c) Deliver an educational program on IPV for social workers in diverse fields of practice.
- 4) MMFC enhance the content of the IPV educational program to include more advanced information and tools.
- 5) The Government of New Brunswick, Department of Social Development, include in their mandatory training the educational training program on IPV to all new Child Protection social workers.
- 6) MMFC in partnership with NBASW, and with the collaboration of specific organizations or departments, develop and deliver more specific educational programs on IPV for specific fields of social work practice when requested.
- 7) MMFC develop an evaluation form for the educational training program on IPV to assess whether the different learning outcomes for the program have been achieved and to capture suggestions for improvements to future deliveries.
- 8) MMFC, in collaboration with interested organizations, train trainers specifically for their workplaces.
- 9) Candidates that are interested in becoming trainers should have professional experience dealing with IPV situations and have completed the IPV educational program as a prerequisite.

- 10) MMFC explore the possibility of creating a repository where trainers can contribute and access training tools and resources.
- 11) MMFC and the NBASW continue to work with other government departments and service providers to ensure that organizational policies support the development of improved supports and interventions for victims of IPV.

# 1 Introduction

Social workers in New Brunswick work in a variety of settings including government departments; community based organizations; educational institutions; and private counselling practices among others. In all of these venues, social workers encounter families, or possibly co-workers, who are experiencing intimate partner violence (IPV). Recognizing that intervening in situations of IPV is one of the most difficult aspects of social work practice and that social workers often encounter victims/survivors during their years of practice, the New Brunswick Association of Social Workers (NBASW) in partnership with the Muriel McQueen Fergusson Centre for Family Violence Research (MMFC) at the University of New Brunswick (UNB), the Government of New Brunswick's Department of Social Development and the Government of New Brunswick Women's Issues Branch of the Executive Council Office developed *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene*, a train-the-trainer program for social workers in New Brunswick. This program was designed to “assist those who are in a position to deliver training to social workers about the impact of and effective responses to intimate partner violence; in other words, to build the capacity of social workers to effectively intervene in situations of intimate partner violence.” (*Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene: A Train-the-Trainer Manual for Delivering Training on Intimate Partner Violence to Social Workers*, p. 3).

Through these partnerships two committees were formed to ensure that the training program was specific to social workers. First, an Advisory Committee comprised of social workers from diverse workplaces was created and secondly, a Working Committee was formed with a smaller number of social workers. Input for the development of the train-the-trainer program was also gathered from social workers that agreed to be part of a pilot training in September 2009. Thereafter, the train-the-trainer program was delivered to one Anglophone (February 2010) and one Francophone (May 2010) group of social workers.

In order to determine if the train-the-trainer program was effective, the NBASW in partnership with the MMFC applied for and received funding from Status of Women Canada in 2010 for the project *Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives*. The intention was to evaluate the train-the-trainer program through this project and whether it would have an impact on victims or survivors of IPV. As such, the primary objectives of this project were:

- To create a process by which women victims/survivors of IPV are empowered to lead healthier and safer lives.

- To help develop a strategy via a gender lens and from the input received by women victims/survivors of IPV that would evaluate how the formal helping system conveys their care.

This project was developed to help women survivors define and understand IPV, to build and maintain healthy self-esteem and leadership skills in their personal and community lives. This also included providing the women with knowledge on evaluating projects and giving them the opportunity to volunteer to provide input and feedback on the train-the-trainer evaluation for social workers.

This report presents the evaluation findings and recommendations related to the initial delivery of the train-the-trainer program, *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene*. Section 2 provides background information about the initiative's development and delivery to the first cohort of trainers. Section 3 outlines more details about the evaluation, such as the evaluation goals, evaluation questions and methodology. Section 4 contains the evaluation findings from four sources of respondents – Key Informants; social workers who participated in the train-the-trainer program (Trainers), social workers and other professionals who received training from these Trainers (Trainees) and Women Survivors of IPV. As well, data is included from Workshop Evaluation Forms completed by Trainers immediately after they completed the train-the-trainer workshop and Trainees when they participated in the IPV educational workshops. Section 5 discusses the limitations of the evaluation, the findings of the evaluation and the recommendations that resulted from the evaluation. Finally, Section 6 concludes this report.

## **2 Background**

### **2.1 Development of *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene* Train-the-Trainer Program**

In 2008, the MMFC developed and implemented an IPV train-the-trainer program specifically designed for police officers. When the police trainers began delivering this program, professionals from other related fields, such as social workers, parole officers and probation officers, were interested in attending the training. Social workers in all sectors encounter clients dealing with IPV and its impacts. Due to the high demand from social workers, MMFC developed the train-the-trainer program for social workers, *Understanding the Impact of*

*Intimate Partner Violence – Helping Social Workers to Better Intervene*, in partnership with the NBASW, the Department of Social Development and the Women’s Issues Branch of the Executive Council.

An Advisory Committee comprised of representatives from various provincial government departments and community agencies oversaw the process. Their role was to guide the overall development of the content to ensure that the information contained in the manual would be useful to social workers in all fields of practice.

A Working Committee comprised of social workers from various fields such as mental health, addictions, child protection and working in various community and government settings was also formed. This Working Committee provided input on the modifications needed to the training program originally designed for police officers to make it suitable for social workers.

*Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene* was developed to provide social workers with a better understanding of:

- The nature, impact and reality of intimate partner violence;
- The role of social workers in intervening in intimate partner violence situations;
- The impact of intimate partner violence on the private and professional lives of social workers.

As stated in the training manual, *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene: A Train-the-Trainer Manual for Delivering Training on Intimate Partner Violence to Social Workers* (p.3):

The purpose of this training is to have a significant and positive impact on social workers’ ability to effectively respond to intimate partner violence. More specifically, participants will gain a greater understanding of:

- Intimate partner violence and its impact on victims and children;
- Recognize the prevalence and severity of intimate partner violence;
- Respond to diversity issues and unique barriers faced by victims;
- Appreciate the importance of their professional role in intervening effectively;

- Learn about and apply specific policies and procedures when dealing with intimate partner violence;
- Learn about resources in the community and the importance of collaborative action to discuss ways to prevent intimate partner violence;
- Learn about the impact of IPV on the private and professional lives of social workers.

The social workers who completed the train-the-trainer program would receive knowledge on IPV as well as gain the skills and confidence to deliver this training workshop to their peers or colleagues.

The training program and an accompanying manual, *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene: A Train-the-Trainer Manual for Delivering Training on Intimate Partner Violence to Social Worker* were developed. The manual included:

- **Section 1: Introduction to the Train-the-Trainer Manual** – Contains general suggestions and considerations for delivering a workshop on IPV and establishing the right environment.
- **Section 2: Overview of the Training Modules** – This section provides an overview of the five modules on IPV that the Trainers are expected to deliver.
- **Section 3: Facilitating Training** – Includes information on facilitation, ice-breakers, and other suggestions for delivering the training.
- **Section 4: Modules** - Contains handouts and materials for delivering the five modules on IPV.

A more detailed list of the contents of the Modules included in the manual can be found in Appendix A.

## **2.2 Delivery of the *Train-the-Trainer* Program**

The MMFC initially delivered the train-the-trainer workshop to four social workers. These four individuals subsequently piloted the educational program with a cohort of 18 social workers

practicing in diverse fields who provided feedback on how the educational program could be adjusted and improved. MMFC was present at this training workshop as an observer. The curriculum was adjusted accordingly.

After the pilot, MMFC worked with the Department of Social Development to identify and recruit social workers to be trained through the train-the-trainer program. Social workers who were already familiar with delivering training and also with the issue of IPV were to attend this training. Notices about the training were sent from the Department's central office to supervisors working in the Department of Social Development and MMFC gave a presentation on the train-the-trainer program to supervisors. Directors of Child and Family Services in First Nations communities were also notified about the training via the Department of Social Development. Social workers in other fields of practice heard about the training through word-of-mouth. The MMFC also held an official launch for the training program on November 19, 2009 that was publicized in various newspapers in New Brunswick.

The train-the-trainer program was then delivered to an additional 33 social workers in February 2010 in English and in May 2010 in French. Twenty-six (78%) of these participants worked in Child Protection, Department of Social Development, at the time the training was delivered. The remaining seven social workers (21%) worked in First Nations communities, community agencies or other government departments such as the Department of Public Safety and the Department of Health. Subsequently, four of these Trainers implemented workshops for their peers and other professionals. This evaluation is influenced by the fact that the majority of social workers participating in the train-the-trainer program came from the Department of Social Development.

### **3 Evaluation**

The evaluation of the train-the-trainer program took place more than a year after the delivery of the train-the-trainer workshops for social work trainers. The delay was caused by the need to secure resources to complete the evaluation. In 2010, the NBASW in partnership with MMFC applied for and received funding from Status of Women Canada for the project, *Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives*. As a component of *Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives*, participating women survivors of IPV had the opportunity to volunteer to provide input and feedback for the evaluation of *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene*.

An Evaluation Committee to help evaluate the train-the-trainer program *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene* was formed comprised of representatives from the NBASW, MMFC, and a faculty member from the Department of Sociology with the Faculty of Arts at the University of New Brunswick who has experience in social work education and evaluation research. Han Martin Associates was hired as the Evaluator to lead the evaluation process. A participatory approach was employed for the evaluation. The Evaluation Committee and the Evaluator worked collaboratively to complete various aspects of the evaluation process to:

- Determine the evaluation goals;
- Develop the evaluation framework;
- Develop the logic models for the initiative;
- Provide input into data collection instruments and data analysis;
- Provide input and feedback on the evaluation report and its recommendations.

### **3.1 Evaluation Goals**

The goals of the evaluation were to:

- 1) Determine whether the social worker train-the-trainer program:
  - a) Delivered the right content to prepare social workers to train their peers;
  - b) Was delivered in an appropriate way;
  - c) Provided social workers with the skills and confidence to deliver the training on IPV to their peers.
- 2) Determine improvements needed for the train-the-trainer program for future deliveries.
- 3) Assess whether the social worker Trainers effectively delivered training on IPV to their peers.
- 4) Assess the impact of the peer delivered IPV training on social workers in New Brunswick working in the formal support system.

### **3.2 Logic Model and Evaluation Framework**

The logic model for social worker Trainers who participated in the train-the-trainer workshop was developed in collaboration with the Evaluation Committee. A second logic model was developed for Trainees (participants who received training from these Trainers). This second

logic model was developed to clarify the outcomes to be achieved by this group as these would be reflective of whether the Trainers effectively delivered the training on IPV to their peers.

An evaluation framework was also developed in collaboration with the Evaluation Committee. Seven evaluation questions were identified:

- 1) Was the content of the train-the-trainer program appropriate?
- 2) Was the train-the-trainer program delivered in an appropriate manner?
- 3) Do social worker Trainers have a better understanding of how their reality and perceptions can impact the effectiveness of their training delivery and interventions?
- 4) Did social worker Trainers feel prepared to deliver training to their peers?
- 5) Was the peer training program delivered in an effective manner?
- 6) Was the content of the peer training program on IPV appropriate?
- 7) Are social workers more effective in responding to IPV?
  - a. Are social workers better equipped to understand IPV and its impact on victims and children?
  - b. Are social workers better equipped to respond to diversity issues and unique barriers faced by victims?
  - c. Are social workers better informed about and know when to apply specific policies and procedures when dealing with IPV?
  - d. Are social workers better informed about resources in the community and the importance of collaborative action in prevention of IPV?
  - e. Do social workers have a better understanding of how their reality and perceptions can impact the effectiveness of their interventions?

The logic model developed for social worker Trainers who participated in the train-the-trainer workshop, the logic model for Trainees and the evaluation framework are included in Appendix B.

### **3.3 Methodology**

A research ethics application was submitted for this evaluation and approval was received from the University of New Brunswick's Research Ethics Board.

The Evaluator reviewed background information and other available project documentation. This included:

- Email correspondence between MMFC and the Department of Social Development;
- Notices about the training;
- Project documentation such as terms of reference for the Trainers;
- The manual for the train-the-trainer program;
- Completed trainer evaluation forms from the delivery of the train-the-trainer program in French and English;
- Completed trainee evaluation forms from a training workshop co-delivered by two Trainers in English.

Based on the evaluation framework, a number of data collection tools were designed for:

- **Key Informants** – Questionnaires for semi-structured interviews were developed.
- **Social Worker Trainers** – Interview guides for semi-structured interviews or focus groups and an online survey using Likert scale responses with opportunities to provide qualitative comments were developed;
- **Trainees** – An online survey using Likert scale responses with an opportunity to provide qualitative comments was developed;
- **Women Survivors of IPV** - A semi-structured interview questionnaire that also included several questions with Likert scale responses was developed.

The invitation letters, consent forms, data collection instruments and a debriefing letter for the Women Survivors of IPV were translated into French. Interviews or focus groups were conducted in participants' language of preference by telephone or in-person. Online surveys were available in English or French. Copies of the English and French data collection instruments are included in Appendix D.

Telephone or in-person interviews were conducted with seven Key Informants to gather background information and perspectives on the development and implementation of the train-the-trainer program.

Contact information for Trainers who took part in the train-the-trainer workshop was verified to ensure it was still applicable as some time had lapsed since the delivery of the training. Similarly, Trainers who had delivered the training assisted in locating contact information for Trainees.

All Trainers were contacted via telephone and/or email to participate in a focus group in either English or French. At least three attempts were made to contact Trainers. Trainers participated in one English and two French focus groups. Those who were not able to attend the focus

groups but were willing to be interviewed participated in telephone interviews. Additionally, all Trainers were invited via email to participate in an online survey about the train-the-trainer training they had participated in. This survey was administered through SurveyMonkey. Sixteen Trainers participated in telephone interviews or focus groups and five completed the online survey.

Trainees who had participated in a workshop delivered by the Trainers were invited via emails to participate in an online survey administered through SurveyMonkey. Ten Trainees completed this survey.

Thirteen Women Survivors of IPV volunteered to be interviewed via telephone, providing quantitative and qualitative feedback on content that would be important for social workers receiving training on IPV. They also provided insights on what they perceived to be required competencies for social workers providing services to victims of IPV or trainers who were delivering IPV training to their peers. These women had participated in the project *Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives* project. Contact information for these Women Survivors of IPV was provided by MMFC with the permission of the individuals.

Table 1 summarizes the data sources and data collection methods that were part of this evaluation. Surveys were compiled and analyzed using descriptive statistical methods and qualitative data was analyzed for emergent themes.

**Table 1: Data Sources and Collection Methods**

Source	Data Collection Method	Number of respondents
Key Informants	In-person or telephone interviews	7
Trainers	Focus groups or interviews	16
Trainers	Online survey	5
Trainees	Online survey	9
Women Survivors of IPV	Telephone interviews	13
Project Documents	Workshop Evaluation Forms	32

A draft report of the evaluation of *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene* was prepared and reviewed by the Evaluation Committee. The Committee provided input into the report including the data analysis, discussion and recommendations. The Committee decided to exclude the literature review for the final version. This final report was prepared incorporating their feedback.

## 4 Findings

The findings presented in this section are from the following participants:

- **Key Informants** – Seven interviews;
- **Trainers**
  - Thirty two workshop evaluation forms completed immediately after Trainers participated in the train-the-trainer workshop;
  - Qualitative data from the 16 Trainers who participated in interviews or focus groups for this evaluation;
  - Quantitative data from the five online survey conducted as part of this evaluation;
- **Trainees** – Data from nine online surveys;
- **Women Survivors of IPV** – Thirteen interviews.

### 4.1 Key Informants

Key Informants were interviewed to obtain background information about the development and implementation of the train-the-trainer program.

#### 4.1.1 Vision of IPV Training Program

Key Informants hoped that the IPV training program would provide a degree of standardized knowledge about IPV and appropriate interventions for social workers in New Brunswick. As well, they expected that social workers would be able to debrief, share best practices and reflect on self-care and their intervention practices.

#### 4.1.2 Clarity of Training Objectives

Almost all Key Informants indicated that the intent of the training program was to increase basic understanding, knowledge and interventions of social workers in all fields of practice when dealing with situations of IPV. Other comments included:

- The training would decrease the silos of different social work fields of practice so that social workers could work collaboratively on self-care, social action and change;
- The training would use a woman centred approach that would be compatible with family conferencing.

#### **4.1.3 Implementation of Training**

Key Informants felt that the train-the-trainer program was implemented as intended. However, they reported that there appeared to be some confusion on the part of Trainers on whether they were receiving training on how to deliver the IPV educational workshop to their peers or how to intervene in situations of IPV.

Key Informants reported that training initiatives like this IPV training will become mandatory for new Child Welfare social workers in the Department of Social Development. Through their practice, they would effect cultural and systemic change in the department and effect how the system intervenes in situations of IPV.

Key Informants stated that there were other challenges associated with delivering the IPV train-the-trainer training program and considerations for developing social workers as trainers:

- Trainers who had taken the train-the-trainer program were not always clear about the expectations on them after receiving the training. For example, if Trainers from the Department of Social Development were from one region, were they also expected to deliver training in other regions?
- It is possible that not all of the trained social workers were as comfortable or experienced with delivering training.
- Some Trainers might not be as comfortable delivering content that required participants to process emotions and be self-reflective as opposed to factual content.
- This train-the-trainer program was being implemented at a time when the Department of Social Development was undergoing several changes. For example, the Department was shifting from a child-centred approach in Child Protection to one that was more family focused. New approaches such as Family Conferencing and Structured Decision Making had been introduced in recent years. This required social workers in the

Department working in Child Protection to shift their perspectives and practice. The Department was also undergoing a period of fiscal restraint, similar to other provincial government departments. The train-the-trainer training, as well as the educational program to follow, were being implemented in this context of rapid change.

- The Department of Social Development has a standardized process for developing trainers. New trainers are shadowed and mentored until the third stage when they finally deliver training on their own. By this stage, they are competent trainers on that topic.

Key Informants also identified that challenges existed with implementing the educational program in the Department of Social Development:

- The training was designed for social workers practicing in a range of sectors. As a result, some social workers in Child Protection in the Department of Social Development felt the content related to IPV was not as practical or useful to them in their daily work. The training met some needs of social workers in the Department of Social Development but not all of them.
- Even though all social workers would benefit from a training program, resistance sometimes occurs when experienced social workers are required to take training in topics where they feel they already have the required knowledge and experience, even though they still benefit from the training. In these training situations, skilled trainers must ensure that experienced social workers are able to act as resources for other less experienced colleagues in the workshop.
- Social Development has promoted consistency in training to ensure minimum standards are met. There was some concern among supervisors from various regions about the responsibility of modifying the training to better suit the needs of social workers in their region as this would mean that content, approaches and delivery methods would vary across the province. They had expressed that further guidelines were needed on which aspects of the training could be modified and the extent to which modifications could be made so that there was still a consistent approach between regions.

## 4.2 Trainers

Data from Trainers in this section are from two different timeframes:

- The Workshop Evaluation Forms administered immediately after the train-the-trainer program. These forms contained questions using a Likert scale of 1 to 5 with some opportunities for qualitative responses. Thirty-two Evaluation Forms were reviewed and analyzed. This data is referred to as workshop evaluation data.
- Data was collected as part of this evaluation a little more than a year after the train-the-trainer workshops were completed using the following methods:
  - Online survey - An evaluation survey administered online used a Likert scale of 1 to 7 with some opportunities for qualitative responses. Five Trainers participated in the online survey but the responses from one individual were not included in data analysis as they appeared to be outliers compared to the other responses. Data from this source is referred to as Trainers Online Evaluation Survey.
  - Individual interviews - Data from this source is referred to as interviews.
  - Focus groups - Data from this source is referred to as focus group data.

### 4.2.1 Recruitment of Trainers

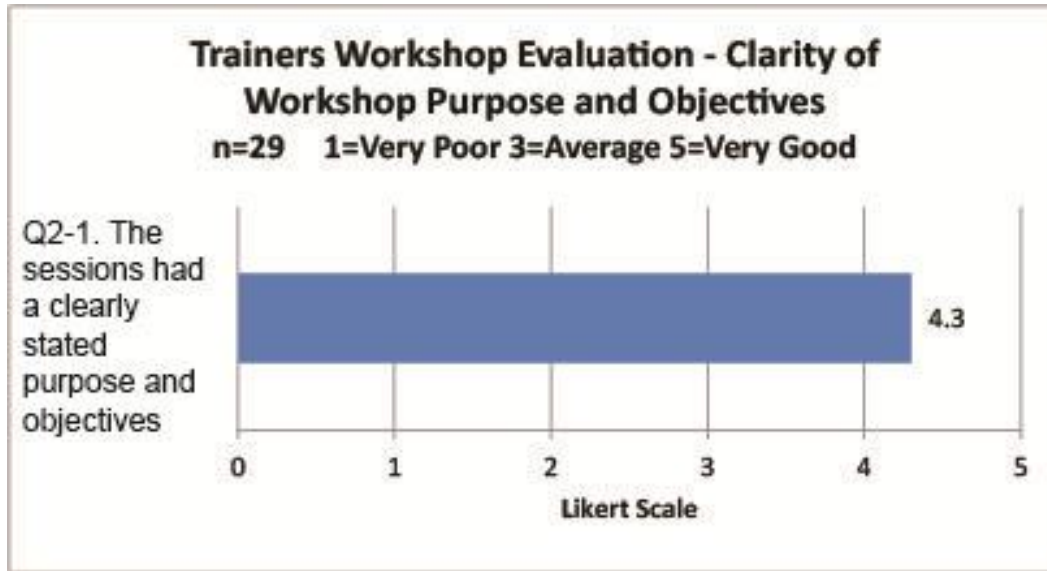
When asked, social workers who participated in the train-the-trainer program indicated that they heard about the program in the following ways:

- Their supervisors informed them about the training and referred them;
- They received a notice at work about the training; or
- They learned about it through other avenues, such as the NBASW.

### 4.2.2 Clarity of Workshop Objectives

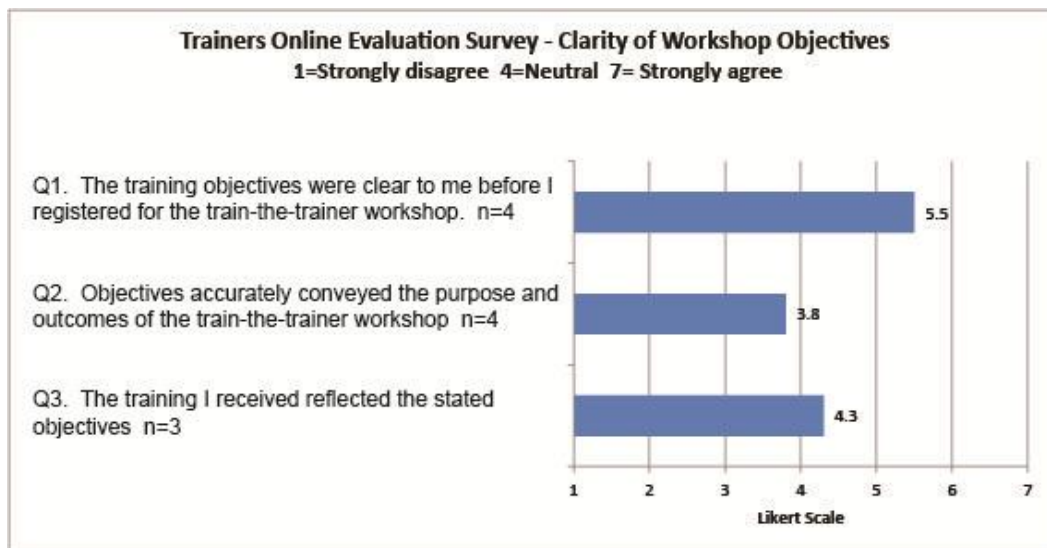
Immediately after the train-the-trainer workshop, Trainers felt that the clarity of the workshop purpose and objectives were clear, as evidenced by the overall average score of 4.3 on a Likert scale of 1 to 5 (see Figure 1). The standard deviation for this average was 0.9 with the mode being 5.

**Figure 1: Trainers Workshop Evaluation - Clarity of Workshop Purpose and Objectives**



Approximately a year after the training, Trainers were asked about the clarity of the workshop objectives as part of the surveys administered for the evaluation. Trainers felt that the training objectives were quite clear prior to completing the workshop (average score of 5.5). However, scores were lower when asked whether the objectives accurately conveyed the objectives of the workshop (average 3.8) and if the training received reflected the stated objectives (average 4.3) (see Figure 2).

**Figure 2: Trainers Online Evaluation Survey - Clarity of Workshop Objectives**



The Trainers overall average for clarity of workshop objectives was 4.7 on a Likert scale of 1 to 7. The standard deviation for the overall average was 1.6 and the mode was 6 (see Table 2).

**Table 2: Trainers Online Evaluation Survey - Clarity of Objectives**

Trainers Online Evaluation Survey - Clarity of Objectives				
Trainers	Q1 n=4	Q2 n=4	Q3 n=3	Average
Respondent #1	6	2	2	3.3
Respondent #2	5	2	5	4
Respondent #3	5	5	6	5.3
Respondent #4	6	6		6
Average	5.5	3.8	4.3	4.7
SD	0.6	2.1	2.1	1.6
Mode	6	2	N/A*	6

\*Sample size was too small to detect a pattern to identify the mode.

During focus groups and interviews, there was a varying degree of understanding among Trainers about the workshop objectives:

- Generally, the social workers from the Department of Social Development understood they were expected to provide workshops on IPV to their colleagues. However, seven Trainers were expecting that they would learn how to intervene better, how to interview women about IPV and that the training would supplement the Core training offered through the Department of Social Development;
- One Trainer commented that the description of the train-the-trainer program was misleading since it was not provincial training and the content had to be adapted for different regions.
- One Trainer felt that many of her colleagues were very unclear about the objectives of the training:

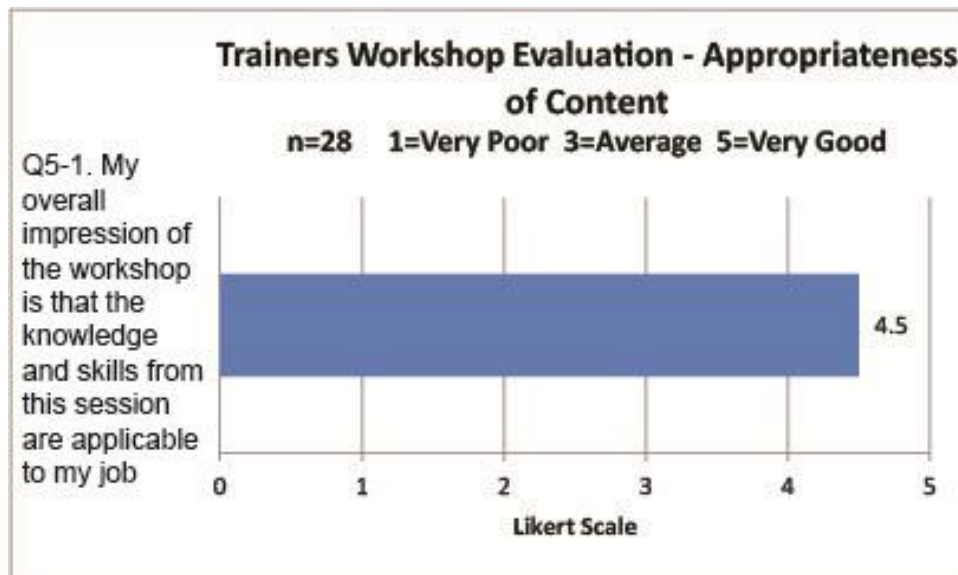
Part of the issues with the training was that some of the participants didn't go there to present information. They expected to learn about IPV. They expected to get new information about IPV rather than knowing how to present it so that people are generally working with the same information and with networks and how to deal with IPV.

- Two Trainers commented that the title of the training and the modules were not accurate. They falsely implied that participants would improve their interventions and receive more tools to work with.
- Three of the Trainers were unclear about who they would be delivering training to, that is, whether the IPV training was aimed at just social workers or social workers, other professionals/colleagues or para-professionals in various community agencies.

### 4.2.3 Appropriateness of Content

Immediately after the workshop, Trainers felt that the workshop content and skills being taught were applicable to their jobs. The average score for appropriateness of content was 4.5 with a standard deviation of 0.7. The mode for this question was 5 (see Figure 3).

**Figure 3: Trainers Workshop Evaluation - Appropriateness of Content**



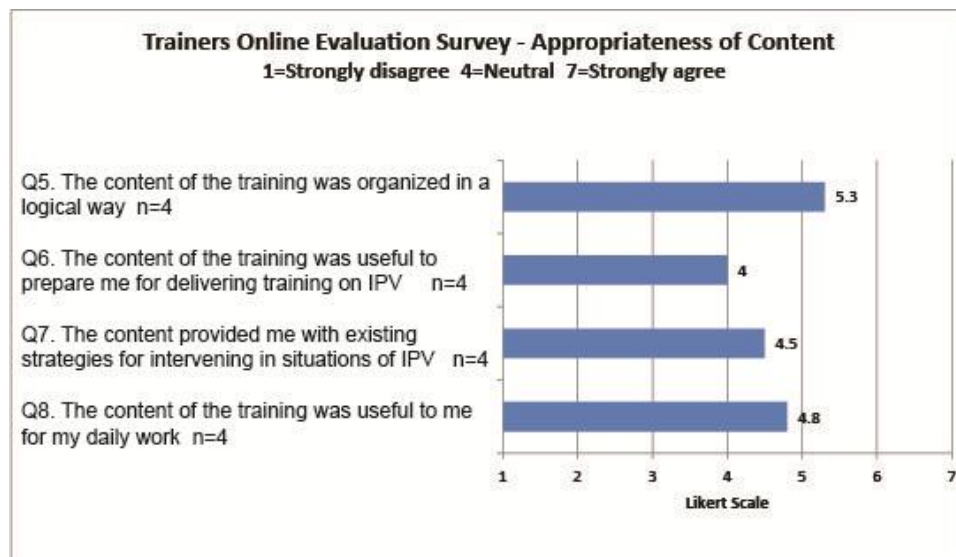
However, 13 Trainers stated they would have liked more time on how to deliver the training, how to adapt the training or how to effectively use the exercises rather than on the topic of IPV. Five Trainers suggested that the length of the training should be increased to accommodate this.

Aspects of the content which the Trainers appreciated were:

- That the content provided a good review of IPV and its issues;
- The feminist perspective on IPV;
- The Power and Control Wheels;
- Information on biases and stereotypes;
- The impacts of IPV on children;
- Including men in IPV interventions;
- A better understanding of IPV, its complexities and how to better serve clients;
- The leaving process;
- Content on IPV and social workers;
- Practical information on how to deliver training. For example, how to set up training or how to engage participants.

For the Trainers Online Evaluation Survey a year after the workshop, average responses to individual questions pertaining to the appropriateness of content ranged from 4 to 5.3 (see Figure 4).

**Figure 4: Trainers Online Evaluation Survey - Appropriateness of Content**



The Trainers' overall average score for appropriateness of content was 4.6 on a Likert scale of 1 to 7. There was a wide variation in response scores as the standard deviation is 1.8. The mode was 6 (see Table 3).

**Table 3: Trainers Online Evaluation Survey - Appropriateness of Content**

Trainers Online Evaluation Survey – Appropriateness of Content					
Trainers	Q5 n=4	Q6 n=4	Q7 n=4	Q8 n=4	Average
Respondent #1	5	3	2	2	3
Respondent #2	3	1	5	4	3.3
Respondent #3	6	6	5	6	5.8
Respondent #4	7	6	6	7	6.5
Average	5.3	4	4.5	4.8	4.6
SD	1.7	2.4	1.7	2.2	1.8
Mode	N/A	6	5	N/A	6

During interviews and focus groups, there was a wide range of views regarding the content of the workshop:

- Three Trainers felt the content was excellent and contained a range of information to reach different groups of people. The exercises were an excellent supplement to the theory and were good tools to stimulate discussion and to provide experiential learning. As well, the material identified that there were many different approaches to viewing IPV. Two of these Trainers were working in fields other than child protection. A fourth Trainer who was with the Department of Social Development commented that this training would be useful for approximately 200 social workers in the Department who were newer.
- Four Trainers identified that they found the information on how to deliver an educational workshop useful. The content on delivering an IPV workshop provided ideas on how to deliver the training and the manual provided useful handouts.
- Eight of the sixteen Trainers felt that the content provided a good review of IPV but was too basic for their needs. All of these Trainers worked in Child Protection with the Department of Social Development.

Trainers from the Department of Social Development provided the following comments about the content of the modules:

- **Module 2: Recognizing and Responding to Diversity and Unique Barriers** – The content in this module was useful because it provided deeper insight into the diverse circumstances that affect victims of IPV and the factors they must weigh in their situations. However, more advanced and practical materials on diverse families and in-depth examination of the complexities present in diverse families would be useful:

More information on diverse situations, cultural differences... With the diverse populations we're seeing, there would be a benefit in family group conferencing, cross-cultural communication, looking at the complexities. Right now it's a bit theoretical. We then need to know how to apply it - the practical part.

One Trainer felt this module would be especially relevant for police officers, nurses or teachers. Two Trainers felt the module did not need to be covered in much depth, either because these diverse populations were not present in a region (e.g., military families, seniors, Aboriginal or immigrant families) or because experienced social workers in Child Protection would already know this information. Two Trainers commented that they would not be prepared to deliver this content to their colleagues as it was too basic.

- **Module 3: Understanding the Impact of IPV on Children and Adolescents** – Three Trainers were looking for additional techniques and tools for assessing and intervening with children and youth. They wanted more in-depth information in this section.
- **Module 4: Social Workers Interventions to IPV** – Many participants appreciated this module but seven Trainers were looking for additional tools. For example:
  - Tools that could be provided to clients to learn about IPV;
  - Additional interventions;
  - Effects of abuse (rather than what constitutes abuse);
  - Resources in the community;
  - Resources and interventions for men who were victims or abusers;
  - Tools for interviewing children or parents;
  - Grids to evaluate risk.

- **Module 5: The Impact of IPV on the Private and Professional Lives of Social Workers –** Trainers provided varied comments about this module. One Trainer saw its relevance in the workplace and that it provides social workers with the opportunity to reflect on how things could be handled if colleagues were personally affected by IPV. One Trainer did not understand its focus on social workers as a profession and thought it would be better as a generalized discussion on IPV in the workplace.

...I understood Module 5 like something similar to speaking about sexual harassment at work. How do we detect it? How do we combat it? Something similar to that.

One Trainer was unclear whether risk assessments were intended for oneself or for the workplace. One Trainer thought that there was too much emphasis on this module. Six Trainers could not see themselves delivering this module to their peers.

Two Trainers commented that there was too much content for the amount of delivery time available. Francophone Trainers stated that the French translation of materials needed to be improved. It was mentioned that some of the tools presented could be useful intervention tools with clients, although this was not the intended use of these tools in the workshop.

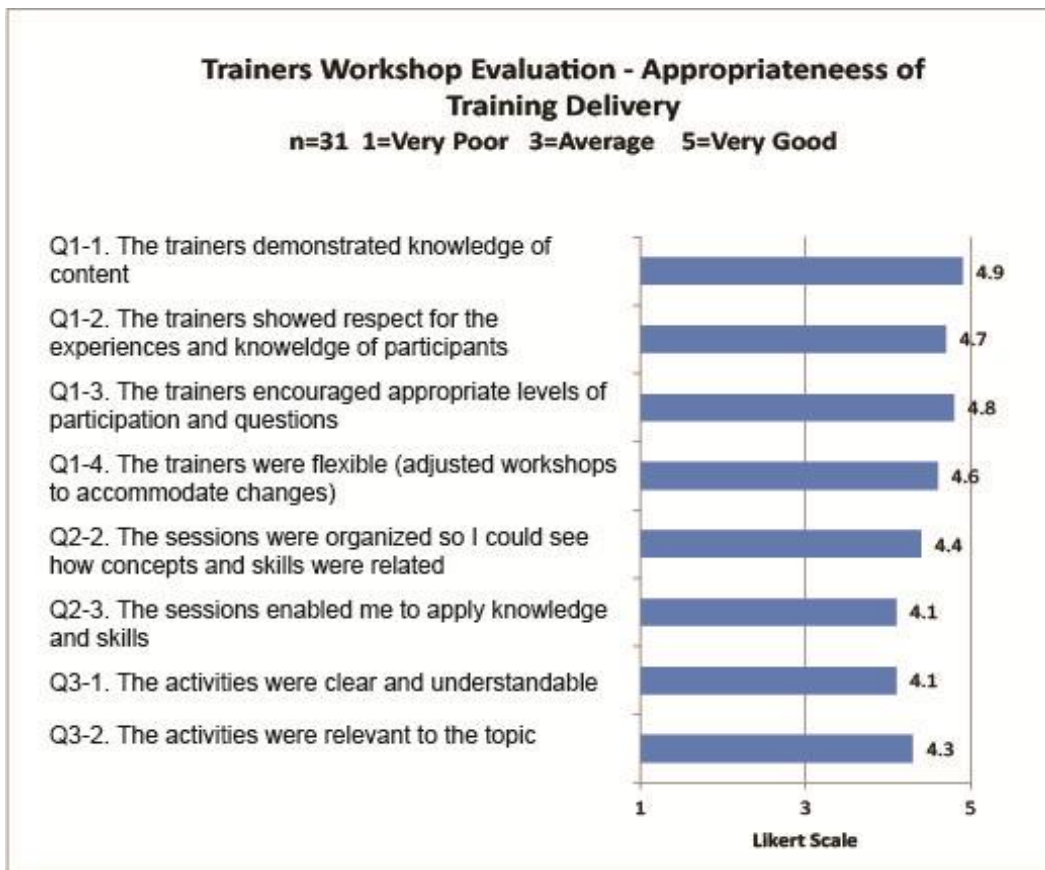
Additional suggestions for improving the content of the workshop were:

- Increased emphasis on Modules 3 and 4 and less focus on the other modules;
- More tools and quick, practical guides;
- Additional up-to-date videos that focused on intervention in both French and English;
- Additional content that is specific for First Nations, such as *The Healing Journey* resource kit developed by Gignoo Transition House and the Public Legal Education and Information Service of New Brunswick (PLEIS-NB);
- Content on the issue of men who are victims of IPV;
- Content on the systemic issues faced by victims of IPV through their dealings with various sectors such as child protection and justice and their re-victimization as a result;
- More ideas for practical applications of the theoretical information presented.

#### 4.2.4 Appropriateness of Delivery

Overall, Trainers felt that the facilitators for the train-the-trainer workshop were effective, the training was delivered in an appropriate manner and the activities were clear and relevant. The overall average for appropriateness of training delivery from the Trainers Workshop Evaluation data was 4.5 on a Likert scale of 1 to 5. The standard deviation was 0.7 and the mode was 5 (see Figure 5). More detailed data is available in Table E1, Appendix E.

Figure 5: Trainers Workshop Evaluation - Appropriateness of Training Delivery



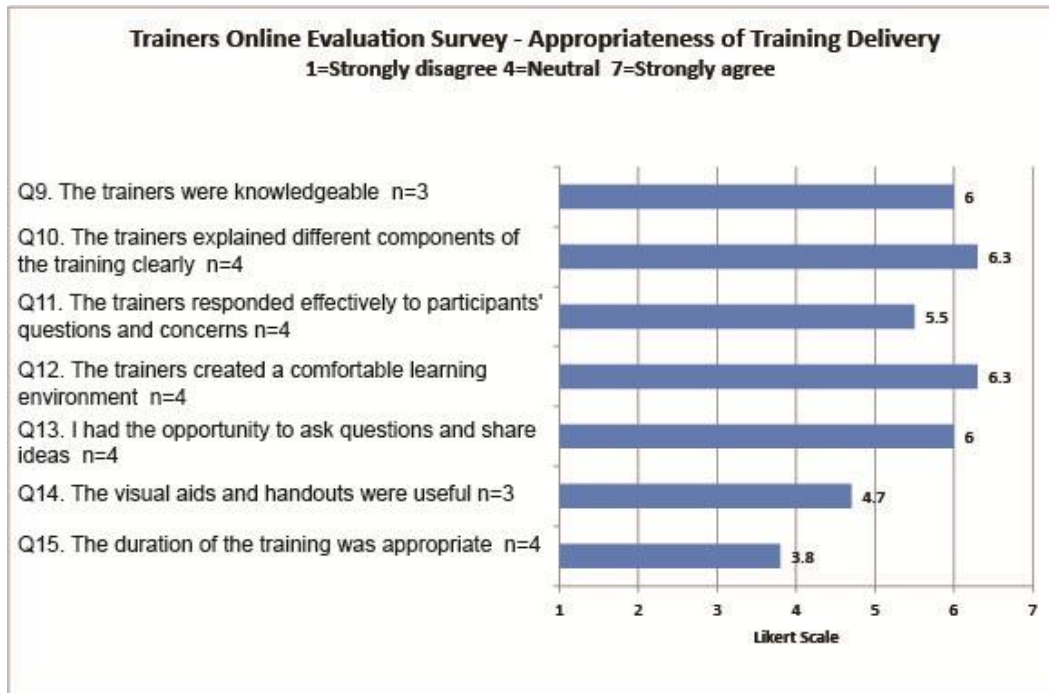
Overall, Trainers felt that the facilitators were knowledgeable, provided good examples and were excellent presenters. The visual materials and the video, *Spousal Abuse...A Matter That Concerns Us All* which was produced by the Beauséjour Family Crisis Resource Centre, were very useful and aided learning. Having two facilitators provided a change in style throughout the training. Suggestions for improvement included:

- Respect lunch and break times;
- Provide more activity based learning during the workshop;

- Provide materials at the beginning of the training so participants can follow along and relate presentations to the manual;
- Emphasize how to deliver the training rather than the content itself.

In the Online Evaluation Survey, Trainers felt that the training had been delivered well overall, with the exception of the duration of the training workshop (see Figure 6).

**Figure 6: Trainers Online Evaluation Survey - Appropriateness of Training Delivery**



The Trainers' overall average in the Online Evaluation Survey for Appropriateness of Training Delivery was 5.5 on a Likert scale of 1 to 7. The standard deviation was 1.7 indicating a wide range of responses and the mode was 7 (see Table 4).

**Table 4: Trainers Online Evaluation Survey - Appropriateness of Training Delivery**

Trainers Online Evaluation Survey – Appropriateness of Training Delivery								
Trainers	Q9 n=3	Q10 n=4	Q11 n=4	Q12 n=4	Q 13 n=4	Q14 n=3	Q15 n=4	Average
Respondent #1	5	5	3	4	6	2	1	3.7
Respondent #2		6	6	7	4		3	5.2
Respondent #3	6	7	6	7	7	5	4	6.0
Respondent #4	7	7	7	7	7	7	7	7.0
Average	6	6.3	5.5	6.3	6	4.7	3.8	5.5
SD	1	1.0	1.7	1.5	1.4	2.5	2.5	1.7
Mode	N/A	7	6	7	7	N/A	N/A	7

Similar to comments immediately after the workshop, Trainers felt overall that the training delivery was excellent, the training was well structured and that the visual aids were useful.

Comments for suggested delivery improvements included:

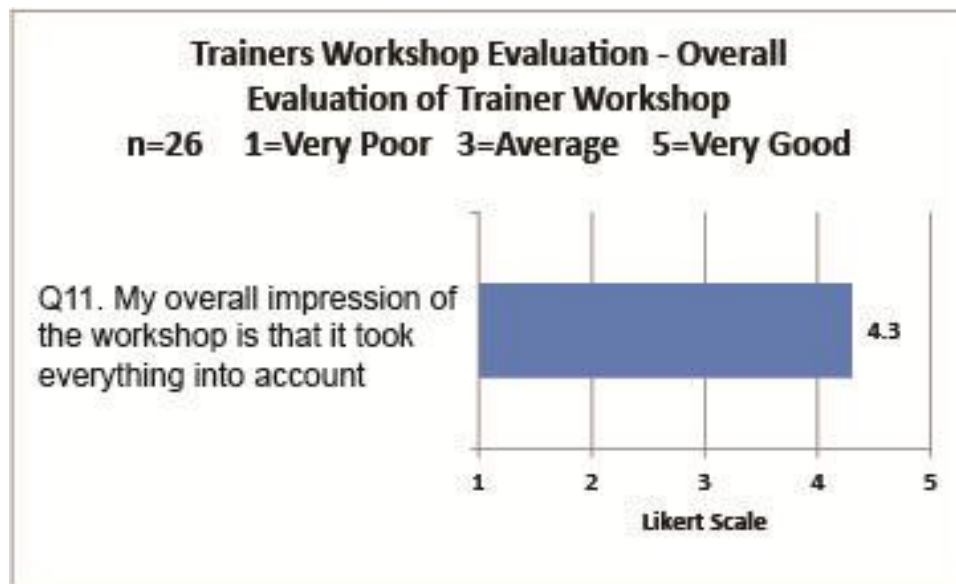
- Increase the duration of the workshop to allow a moderate pace for training and also sufficient time to share ideas;
- An alternate view that the delivery time could have been shortened to one day as some materials did not have to be covered as extensively;
- Suggestions that the delivery of the content take place first, followed by training on how to deliver the material at a later date. Participants could then focus on learning one thing at a time (intervention strategies in the first session and delivery methods in the second session). One Trainer stated:

One problem is that the training on the content had to be interrupted every five minutes about questions regarding possible delivery issues in a particular region or context. It was like running after two rabbits at once. Perhaps this needs to be done on two separate times, one focusing on content and one focusing of delivery in our region.

#### 4.2.5 Overall Evaluation of Train-the-Trainer Workshop

Immediately after the workshop, Trainers were asked about their overall impressions of the workshop and whether it “took everything into account.” The overall average for this question was 4.3 on a Likert scale of 1 to 5 (see Figure 7). The standard deviation was 0.8 and the mode was 5 (see Table E4, Appendix E for more detailed data).

**Figure 7: Trainers Workshop Evaluation - Overall Evaluation of Trainer Workshop**

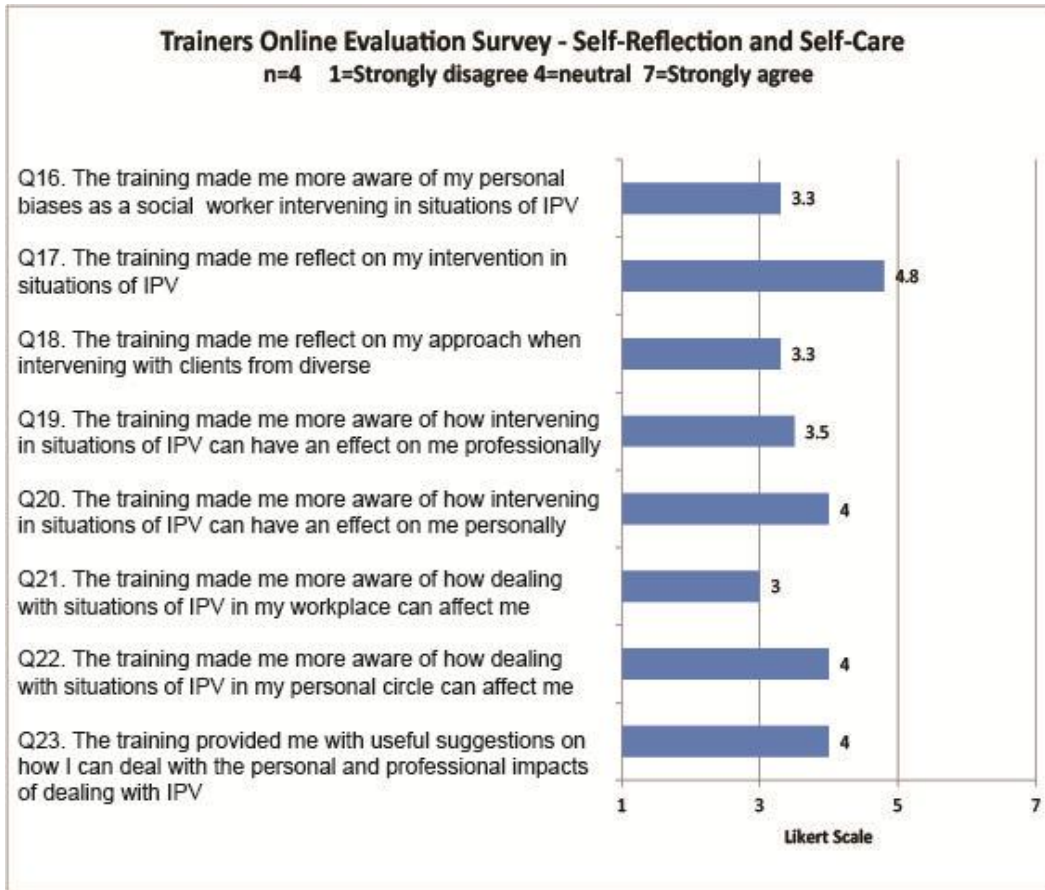


#### 4.2.6 Self Reflection

The Trainers Workshop Evaluation, which was administered immediately after the train-the-trainer workshop, did not ask about self-reflection or self-care specifically. The results presented below are from the Trainers Online Evaluation Survey.

Trainers average scores for the questions pertaining to self-reflection and self-care ranged from 3 to 4.8 on a scale of 1 to 7 (see Figure 8).

**Figure 8: Trainers Online Evaluation Survey - Self-Reflection and Self-Care**



The overall average for Trainers’ perceptions of whether the workshop stimulated self-reflection and suggestions for self-care was 3.8 on a Likert scale of 1 to 7. The standard deviation for scores was 1.6, again indicating a wide range in scores and the mode was 5 (see Table 5).

**Table 5: Trainers Online Evaluation Survey - Self-Reflection and Self-Care**

Trainers Online Evaluation Survey - Self-Reflection and Self-Care									
Trainers	Q16 n=4	Q17 n=4	Q18 n=4	Q19 n=4	Q20 n=4	Q21 n=4	Q22 n=4	Q23 n=4	Average
Respondent #1	2	2	2	2	3	2	2	2	2.1
Respondent #2	2	5	2	2	3	2	3	3	2.8
Respondent #3	4	5	5	5	5	3	5	5	4.6
Respondent #4	5	7	7	5	5	5	5	6	5.6
Average	3.3	4.8	4	3.5	4	3	3.8	4	3.8
SD	1.5	2.1	2.4	1.7	1.2	1.4	1.5	1.8	1.6
Mode	2	5	2	2	3	2	5	n/a	5

During interviews and focus groups, seven Trainers stated that the training did make them examine their own practice and reflect on their professional experiences with IPV. The train-the-train program made them:

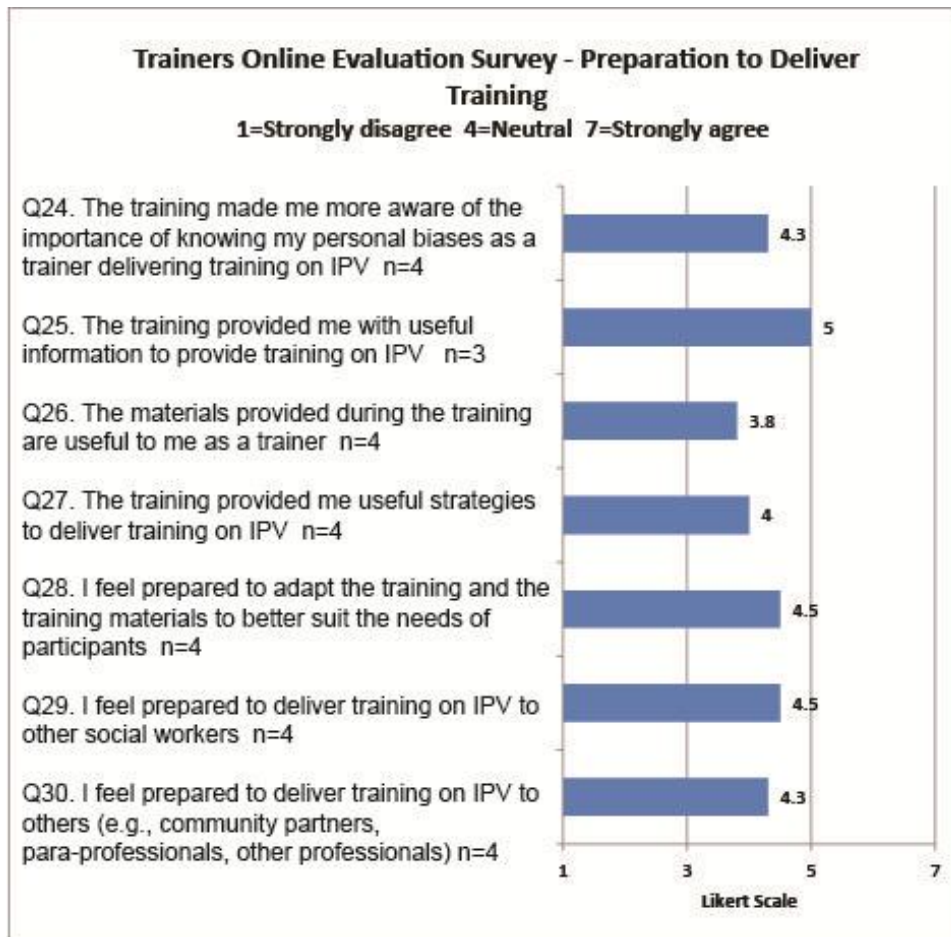
- More sensitive or empathetic to women dealing with IPV and the challenges they face;
- More aware of how they might have handled situations differently and more effectively in the past or in the present. For example, using better approaches to ask questions, being more cautious about jumping to conclusions, obtaining more complete picture of the family;
- Eager to continue doing their own research and learning in the area of IPV;
- More observant in home visits;
- More aware of personal biases and how past experiences might contribute to areas of “being stuck” or not being able to see certain things with a client.

Four Trainers stated that the training had neither stimulated self-reflection on their personal approaches or their views about IPV nor provoked further thinking about self-care. Five Trainers expressed that they were aware that this was an aspect of the training but two did not realize that this was a component of the training.

#### **4.2.7 Trainers Preparation to Deliver Training**

Trainers average scores on questions about their preparation to deliver IPV educational training ranged from 3.8 to 4.5 on a scale of 1 to 7 (see Figure 9).

**Figure 9: Trainers Online Evaluation Survey - Preparation to Deliver Training**



With respect to preparation for delivering IPV training to their colleagues, the overall average score in the Trainers Online Evaluation Survey was 4.2 on a Likert scale of 1 to 7. The standard deviation was high at 1.9 and the mode was 5 (see Table 6).

**Table 6: Trainers Online Evaluation Survey - Preparation to Deliver Training**

Trainers Online Evaluation Survey – Preparation to Deliver Training								
Trainers	Q24 n=4	Q25 n=3	Q26 n=4	Q27 n=4	Q28 n=4	Q29 n=4	Q30 n=4	Average
Respondent #1	3	4	4	2	6	6	5	4.3
Respondent #2	3		1	3	1	1	1	1.7
Respondent #3	5	5	5	5	4	4	4	4.6
Respondent #4	6	6	5	6	7	7	7	6.3
Average	4.3	5	3.8	4	4.5	4.5	4.3	4.2
SD	1.5	1	1.9	1.8	2.6	2.6	2.5	1.9
Mode	3	n/a	5	n/a	n/a	n/a	n/a	5

In interviews and focus groups, Trainers generally felt that the train-the-trainer workshop was well structured and that some of the tools provided would be useful to transfer learning. Trainers from the Department of Social Development commented that the structure and the materials provided a basis for adapting future training for the specific needs of Child Welfare social workers.

One Trainer working with an agency other than the Department of Social Development had adapted materials and delivered the educational training to their colleagues. Seven Trainers working with the Department of Social Development had adapted materials and were prepared to deliver the training. Two of these Trainers had delivered the training to their colleagues but Trainers were then informed by the Department of Social Development's central office that the training had been put on hold for the time being. Trainers also identified an additional two Trainers who had co-delivered training with them but who could not be reached for interviews as part of this evaluation.

Trainers thought that the roll out of the training was halted because:

- The cost of delivering the training can be expensive and it had not yet been authorized. Further, there was already a lot of other mandatory training for Child Welfare social workers taking place and the addition of IPV training concurrently was not realistic:

We have like 30 workers, perhaps more. So it is expensive to give this training and it has not been authorized yet. At the time the workers were already receiving a lot of [other] training on the second phase of the Child Welfare reform, so that was also a reason why we did not give it.

- There were government cutbacks to the number of educational hours allowed for social workers;
- Further discussions were needed within the Department of Social Development to determine how to balance the requirement of standardized provincial training with more specific regional needs.

Trainers suggested that clearer direction from the Department of Social Development's central office was required regarding the parameters of how the training could be modified to meet the unique needs of regions yet uphold a standardized approach across the Department. There were also some comments that suggested the content and tools provided in the training modules should be continually updated and distributed.

Dialogue between participants in one focus group illustrates some of these perspectives:

Participant A:

So the problem is that we understood that things could now be added or subtracted from the training. That is not logical because it is to be a provincial training but with different things added or removed depending on the region. So that is no longer a provincial training.

Participant B:

I think this is why it was put on hold... But at the time the workers were already receiving a lot of other training so the timing was not good and they could feel like they were wasting their time.

Participant C:

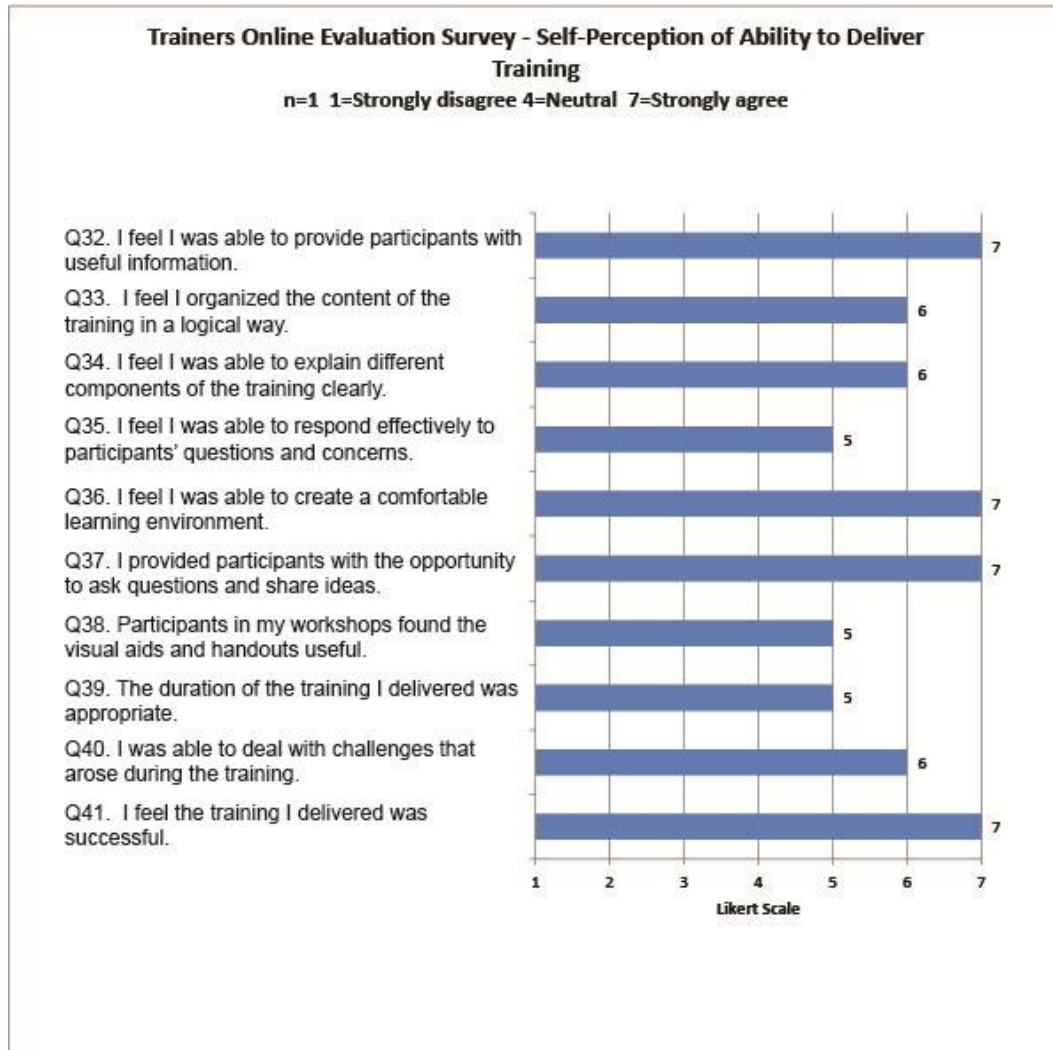
For me to be able to give it [the training], and I am willing, I need to know now from the Province if I need to give it as is or if I am free to make changes and modifications.

Three Trainers from the Department of Social Development had attended the training workshop but had no intentions of delivering the training from the outset or had no concrete plans to deliver it in the future.

#### **4.2.8 Trainers' Delivery of IPV Educational Training**

One Trainer who had delivered the educational workshop after completing the train-the-trainer program completed the online survey. Responses for questions pertaining to this dimension ranged from 5 to 7 on a Likert scale of 1 to 7. This individual had an overall average score of 6.1 when asked to self-rate their ability to deliver the training effectively (see Figure 10 and Table 7).

**Figure 10: Trainers Online Evaluation Survey – Self-Perception of Ability to Deliver Training**



**Table 7: Trainers Online Evaluation Survey – Self-Perception of Ability to Deliver Training**

Trainers Online Evaluation Survey – Self-Perception of Ability to Deliver Training											
Trainer	Q32 n=1	Q33 n=1	Q34 n=1	Q35 n=1	Q36 n=1	Q37 n=1	Q38 n=1	Q39 n=1	Q40 n=1	Q41 n=1	Avg.
Respondent #1	7	6	6	5	7	7	5	5	6	7	6.1

In total, three Trainers had delivered the training numerous times after completing the train-the-trainer workshop – some to only social workers in Child Protection and others to groups of mixed participants consisting of social workers from Child Protection; professionals in other sectors such as health; and para-professionals in community based agencies dealing with IPV. These Trainers had adapted the training in several ways:

- Presenting participants with the workshop agenda and topics ahead of time and asking them to identify which aspects they wanted to spend more time on.
- Identifying and including other tools and resources. For example:
  - Information on the development of babies to teens and the potential impacts of IPV on development;
  - An audio recording of a 911 call;
  - Resource people were brought into the workshop to augment content and address particular concerns identified by participants. For example, an individual came to speak about developing safety plans based on past experiences; other resource people took part such as RCMP officers.
- Modifying language and approaches to suit a First Nations cultural context.
- Adjusting the duration of the training. For example, training materials were eliminated or adapted and the training was delivered in a half day, or the training was delivered over four half-day workshops to make it easier for people to attend.

Trainers suggested continually updating the training module content and tools and then distributing it to them to ensure continuous learning and current content.

#### **4.2.9 Impacts of Participating in the Train-the-Trainer Workshop**

Trainers identified several ways in which the training had impacted them:

- One Trainer identified that the training made her more aware of why her colleagues would react to the issue of IPV in different ways, especially if they were coming from different cultural backgrounds.
- The training provided new opportunities for partnership and collaboration for the Department of Social Development through the delivery of IPV educational workshops to community partners. For example, opportunities to co-facilitate a program with community partners; more referrals from community agencies or other professionals who gained a better idea of when a client's situation turns into a child protection issue. One Trainer learned how different agencies have varying approaches to dealing with situations of IPV.

- The training provided a good foundation from which to deliver future workshops on IPV.
- More cases involving IPV were being assigned to Trainers since taking the training.

### 4.3 Trainees

This section provides responses from Trainees (individuals who had participated in IPV workshops delivered by peer trainers). The Trainees completed the same Workshop Evaluation Form as Trainers immediately after their participation in workshops. They were also asked to complete an online survey as part of this evaluation some time after they completed the workshops. More detailed figures and tables detailing average responses to each question are included in Appendix E (see Figures E1 and E2, Tables E5 and E6).

There were 10 Trainee respondents who completed the Workshop Evaluation Forms. Their scores from the Workshop Evaluation Forms range from 4.3 to 4.6 for various dimensions in the evaluation form, such as clarity of objectives, appropriateness of training content, appropriateness of training delivery and overall workshop evaluation (see Figure 11).

**Figure 11: Trainees Workshop Evaluation**



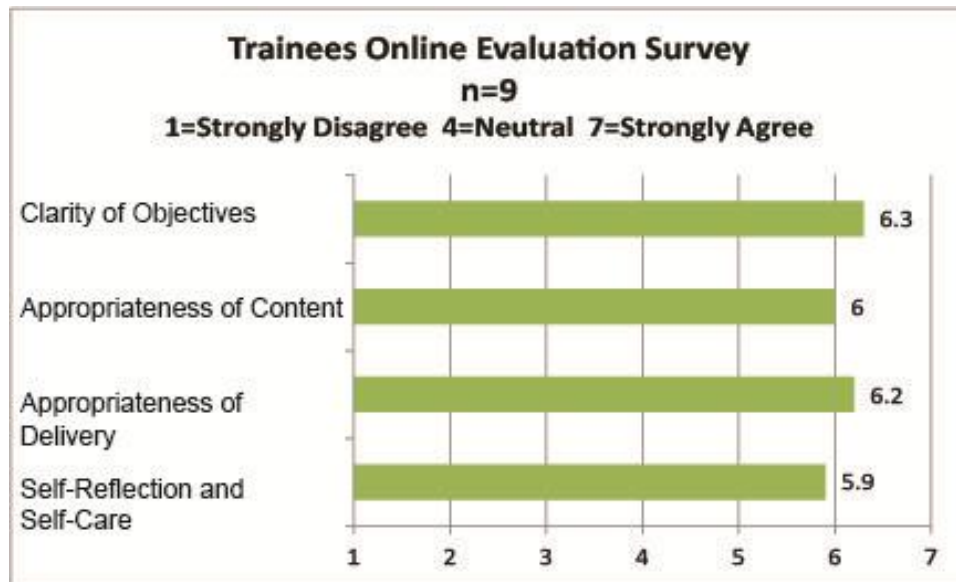
Standard deviations were consistently 0.5 for all dimensions and modes were either 4 or 5 (see Table 8).

**Table 8: Trainees Workshop Evaluation**

Trainees Workshop Evaluation			
	Avg. Score	SD	Mode
Clarity of Objectives	4.6	0.5	5
Appropriateness of Training Content	4.3	0.5	4
Appropriateness of Training Delivery	4.5	0.5	4
Overall Workshop Evaluation	4.4	0.5	4

Nine Trainees completed the Trainees Online Evaluation Survey as part of the data collected for the evaluation some time after they had completed the workshop. The nine Trainees had average scores of 5.9 to 6.3 on a Likert scale of 1 to 7 for the various dimensions in the online survey (see Figure 12).

**Figure 12: Trainees Online Evaluation Survey**



Standard deviations for each dimension ranged from 0.9 to 1.3 and the mode for all the dimensions was 7 (please see Table 9).

**Table 9: Trainees Online Evaluation Survey**

Trainees Online Evaluation Survey			
	Avg. Score	SD	Mode
Clarity of Objectives	6.3	0.9	7
Appropriateness of Content	6	1	7
Appropriateness of Delivery	6.2	0.9	7
Self-Reflection and Self-Care	5.9	1.3	7

Trainees expressed that they had learned several things during the workshops, such as:

- Biases and stereotypes related to IPV;
- Empathy and how to provide support to victims of IPV;
- Myths about IPV;
- Barriers to leaving a situation of IPV;
- Continued risks of IPV after leaving an abusive relationship;
- Safety planning;
- Tools that could be used to educate clients about IPV, such as the various Power and Control Wheels showing the dynamics of abuse for different populations.

Trainees found that learning about community resources, having guest speakers who were working in the field of IPV present during the workshops and the opportunity to network with colleagues from different sectors was extremely valuable.

Trainees commented that they would like more:

- Information on interventions for children;
- Information on the mental health impacts of IPV;
- Testimonials from survivors of IPV;
- Time to cover all of the material.

## **4.4 Women Survivors of IPV**

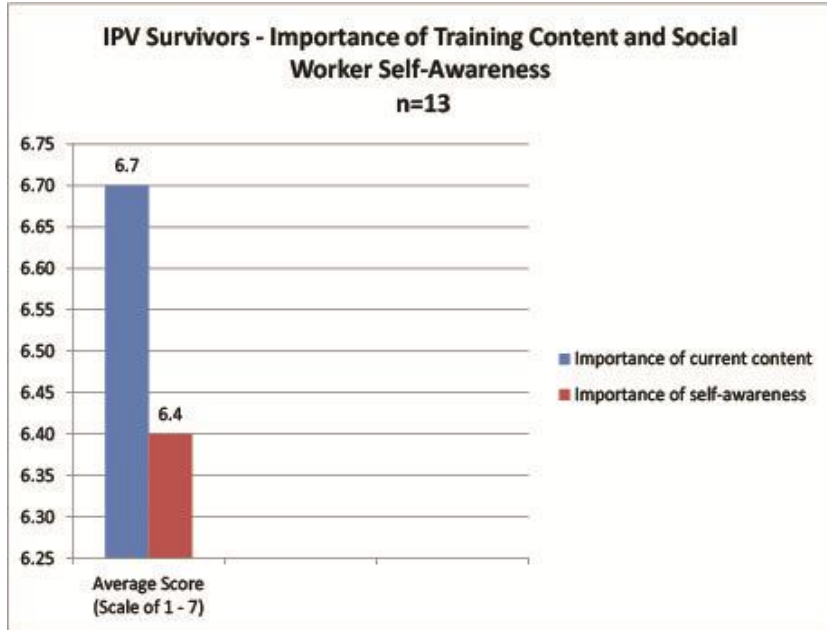
It was also important to receive feedback from survivors of IPV on the content of the train-the-trainer program. Therefore, safe spaces were created where women survivors of IPV came together to identify their needs, build on their strengths, expand their knowledge and tools, and increase their abilities to empower themselves and others to become leaders in their own lives and in their communities. They were offered a three-day workshop through the project *Action for Change: Empowering Women Victims of Intimate Partner Violence to Build Healthier and Safer Lives*. One workshop was offered to women survivors of IPV in English (June 2012) and one in French (August 2012).

This section of the report summarizes the responses from Women Survivors of IPV who had participated in the workshops. The Women Survivors of IPV provided perspectives on the content of the manual, *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene: A Train-the-Trainer Manual for Delivering Training on Intimate Partner Violence to Social Workers*, on social workers intervening in situations of IPV and on trainers delivering training on IPV.

### **4.4.1 Importance of the Train-the-Trainer Program Content and Social Worker Self-Awareness**

The average score for the importance of the topics currently included in the train-the-trainer program manual was 6.7 on a Likert scale of 1 to 7. For the importance of social worker self-awareness, the overall average was 6.4 on a Likert scale of 1 to 7 (see Figure 13. For further details, please see Figure E3, Tables E7 and E8 in Appendix E).

**Figure 13: IPV Survivors - Importance of Training Content and Social Worker Self-Awareness**



For the importance of training content, the standard deviation was 0.7 and the mode was 7. For the importance of social worker self-awareness, standard deviation was 1.0 for the responses provided and the mode was 7 (see Table 10. For further details, see Figure E3, Tables E7 and E8 in Appendix E).

**Table 10: IPV Survivors - Importance of Training Content and Social Workers Self-Awareness**

IPV Survivors – Importance of Training Content and Social Worker Self-Awareness			
	Avg. Score	SD	Mode
Training Content	6.7	0.7	7
Social Worker Self-Awareness	6.4	1	7

During the interviews, Women Survivors of IPV identified that all the topics currently included in the IPV training were important for social workers as they needed a good understanding of the complexities of IPV situations in order to provide effective interventions. Two Women Survivors of IPV offered that including testimonials by survivors or having a survivor participate as a resource person for a portion of the workshop would be an important component of training on IPV so that social workers could learn from these women’s experiences.

Women Survivors of IPV stressed that social workers should be aware of their personal attitudes and perceptions of IPV as these can affect their interactions and interventions.

Several women mentioned that regardless of social workers' personal perspectives, social workers should be able to provide effective and supportive services to women living in IPV situations. One Woman Survivor of IPV expressed that an unsupportive attitude made her think about returning to her abusive partner:

I kept reaffirming that I worked, but I had just left this man and I kept on saying how unhealthy this relationship was. I saved my money, got my first month's rent, my grandmother filled my fridge. I got a plan together for the first month. My old job was shift work [so I couldn't continue to work after I left because of my son]. She said, "You should have planned better." That was not fun.

I was treated like any help I did get was coming directly from the social worker's pocket. She made me get a note from my doctor for a service available to anyone on social assistance – but she made me get a note for it. I found out that you don't need a doctor's note...

...There is an emergency fund to help me get set up a little bit. For example, a voucher for a bed from Salvation Army for my son. I went to get free clothing at places, but sometimes they didn't have sizes for my son. I could have gotten a bit of help with clothing. There was some stuff she could have assisted me with....

...[The social worker told me,] "Welfare is supposed to be a last resort. It's not supposed to be there to pay your bills." I'm 27 years old, I've worked all my life and I'm putting myself through school with a child. I'm still working when I can but do you really think I'm trying to milk the system? If she knew I was abused...it almost seemed as if she was using that because she knew I wouldn't ask for things. It made me feel like I wanted to go back. Even though I wasn't able to have money when we were together, everything was paid on time – rent, hydro. I might have to beg for a haircut but I would eventually get a haircut....

...Especially when I was on assistance. I told her, “I only need it for a couple of months till I go back to school.” Then she told me I wasn’t eligible if I was in school. There’s already a negative connotation of assistance anyway and then you have to justify it. I had to leave – there’s no other choice. There’s nowhere else to go and he controls the money. You already feel bad for taking assistance and they make you feel worse. I got off it much sooner than I should have. I felt she was handing me that cheque right out of her pocket.

#### **4.4.2 Skills and Competencies Required by Social Workers**

The following is a list of the skills, competencies and areas of expertise needed by social workers to intervene in cases of IPV. The Women Survivors of IPV identified these based on their own experiences.

##### ***Communication and Support***

- Be supportive, sensitive, compassionate, empathetic and positive. When a woman is trying to leave an IPV situation, encountering a social worker who is “bureaucratic” or judgmental can be the deciding factor for the woman to return to a violent situation as she would feel there is no support. It was mentioned by almost all the Women Survivors of IPV that the qualities of being supportive, sensitive, compassionate, empathetic and positive were also important for a woman to regain her independence and confidence.

If a social worker doesn’t actually take the time to listen to me, then I’m going to just get it [the visit] done, and I might leave and might not go back for help. It’s not really verbal or spoken – it’s their energy, body language. I don’t mean for them to be overly attentive either. They need to help you do this together, encourage you – so you get a sense that maybe you’re worth listening to, and smart. It’s good to have a social worker that is a professional sit with me and make me feel good about what I’m doing. That side of it is really important.

- Be non-judgmental.

- Understand that the leaving process is complex and that the woman may still be emotionally attached to her abusive partner.
- Know how to provide support to women with complex needs, such as mental health issues or addictions and know how to prevent crises in these situations. For example:
  - Averting a mental health crisis because of missed medications;
  - Knowing about prevention, awareness and rehabilitation around substance abuse.
- Be able to understand and deal with IPV on the part of both the victim and the perpetrator.
- Be able to assist with safety planning.

#### ***Awareness of Legalities and Community Resources***

- Understand the legal aspects of IPV.
- Know how to assist with legalities. For example, arrangements with courts, Legal Aid, obtaining SIN numbers.
- Be aware of resources and services available to victims or survivors of IPV and make the appropriate referrals. For example, opportunities for training so a woman can secure employment; subsidized housing.
- Provide information about the New Brunswick Woman Abuse Protocols so victims of IPV are better able to navigate the different formal systems.

#### ***Personal and Professional Development***

- Keep up-to-date with professional knowledge and skills related to IPV.

#### ***Self-Awareness and Personal Attributes***

- Possess some life experience and maturity – social workers dealing with IPV should not be newly graduated from university as younger individuals may not be able to understand IPV adequately.

- Know how to keep safe when entering situations involving IPV. One Women Survivor of IPV provided an example:

You also don't know what they're told about their safety. [During my studies] one of our instructors told us about things. For example, don't accept food or water, or take your shoes off. I had a friend who took her shoes off and put her coat in the closet. She couldn't leave but she had to get out of the house. Her cell phone and her keys were in a pocket in her jacket in another room. She had to leave to get out. I've offered social workers a drink – but it could be poisoned.

### ***Awareness of Systemic Issues***

Several women perceived they had experienced systemic issues and stated that it is important for social workers to be aware of these challenges and to avoid placing women in these types of situations to avoid re-victimization. Examples of the types of circumstances they had faced included:

- Conflicting requirements directives or criteria between two different regions in the Department of Social Development. As one woman expressed, "In Saint John, it doesn't matter [if a woman is on income assistance], you get a set-up allowance, but in Fredericton you don't."
- Conflicting requirements, directives or criteria between the Department of Social Development and the Family Court. As one woman expressed:

Social Services have certain protocols and Family Court has certain protocols. They really need to know what those are. The social workers say kids have to be protected and the Family Court says there should be visitation. It's still a daily thing that a woman has to deal with – because of the way the two systems work.

To make it even more difficult, every district does things differently. I live in [name of town] but my ex lives in [name of different town]. If something happens, the two departments don't work together. They need to understand that even an hour

away makes a big difference and the impact it has on clients. Even if they let clients know, it would reduce frustrations.

They blame the person who is trying to protect the children. The social workers tell you not to send them, but the court order says a woman has to respect visitation. The two systems are not in sync.

- Challenges within the legal system. One woman spoke of the lack of coordination between the Criminal and Family Courts which made her legal proceedings in Family Court more complex. She felt that this had an impact on her custody case. She lost custody of her children and had not been able to see her children for over a year and a half:

The Criminal Court and the Family Court don't share information back and forth. There needs to be unity between those two. You get lost in the judicial system. The abuser could have many criminal charges but if you're going to Family Court, those charges are not relevant. No information is heard on what this person is capable of. This is absurd. It can be a person that has threatened, assaulted, had weapons, done hideous things and yet in Family Court, no one knows anything and that information isn't allowed. But it speaks of their character. If Social Development is aware of the different types of abuse and they're aware they should be allowed to say that but it's not said. Also vice versa – a family situation should be relevant in Criminal Court.

Women end up giving up because they can't afford it. If there was unity between the two, they [the Courts] could see that this is your character. This is the way you are. It will make it easier for the judge to understand who is really being honest. It would save a lot of heartache. Maybe free up the courts a bit.

Another woman spoke of the challenges she faced in her legal proceedings when she went through a mediation process:

The biggest problem I had was in respect to receiving services like mediation. I should not have been a candidate for mediation. Not knowing this, I was pretty much told - the social worker doing it told me, "Any judge is going to make you do mediation before you do it [go to court]." I understood that any judge would dismiss my case without it. I was trapped in a teeny, tiny room with him and the mediator for three hours over three sessions. The mediator was a social worker too. She explained her credentials to me, "I'm a social worker and I've been doing this for x number of years." No matter what type of duress I was under, she made me continue. I had this huge [court] order with nothing in it for me. If you're a social worker, you should know those things.

I had just left him. I didn't know what to do but I knew I had to get something in place legally for our child. I found out much later that there's no way I should have been in mediation. I had to leave mediation in the middle of it because I got so stressed I went and vomited and I didn't want to go back, because he was being abusive again. She just gave me some water and let me back in the room.

- Lack of support for IPV survivors who are not on social assistance because they are ineligible for certain services and supports. Yet a woman who has left an IPV situation may have no resources of her own to access.

One woman stated:

Everything was more about paper work and criteria. What about a health card? There should be a buffer or something. One girl had a \$1,500 power bill written off by Welfare. There's got to be something.....

...I tried to get help through mental health for counselling for the kids. Nope. "We can't help you because you're not on welfare." A year and a half later they still don't have counsellors....

...Services are only for income assistance recipients. It took a while to find someone who could facilitate visitation. I had to pay someone \$50 for pick up and drop off. I wasn't asking them [Social Development] to pay for it. I was just asking if I could hire their people. My income and budget are basically the same as if I was on support, but I couldn't get any services. Others could get a set-up allowance. But I made \$47 more than on assistance and I couldn't get any help.... There's not very much help for people who aren't on income assistance.

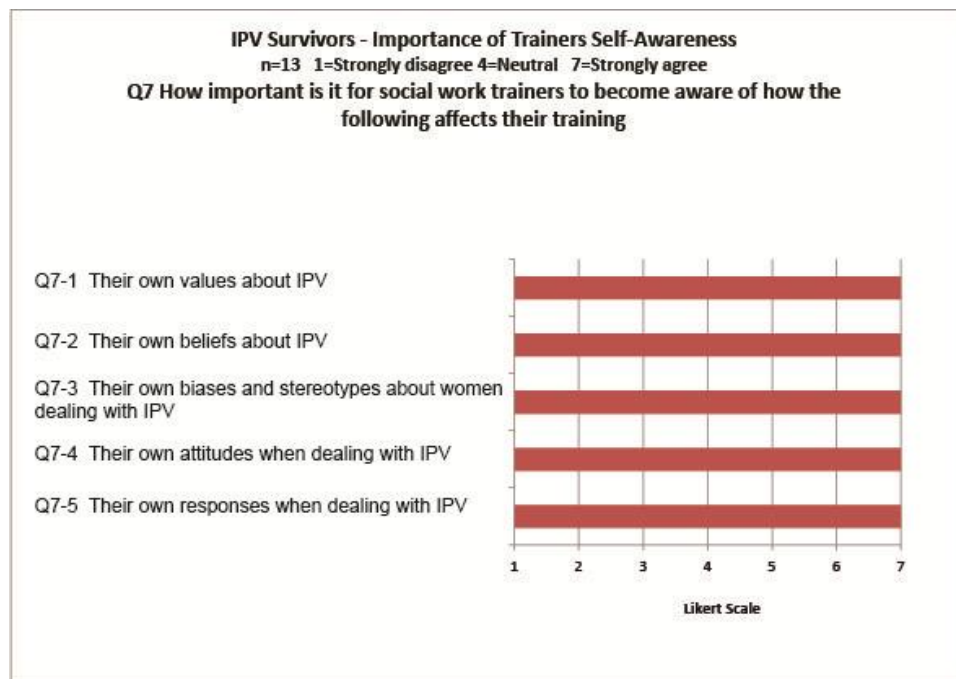
Another woman explained:

Resources – an issue is that no matter what, the person or income bracket – status, income bracket, gender or race – don't treat someone differently because they're in a lower or higher income bracket. That happened to me – I am in a higher income bracket. They [social workers] think I'm doing ok.

#### **4.4.3 Trainers Self-Awareness and Competencies**

The Women Survivors of IPV felt strongly that social workers who deliver training should be aware of their biases and attitudes, as demonstrated by the average scores of 7 pertaining to this topic (see Figure 14).

**Figure 14: IPV Survivors – Importance of Trainers Self-Awareness**



Women Survivors of IPV felt that trainers need to present a neutral facade and teach the material in an objective and professional way. As well, there needs to be a balance between being personable (sharing relevant experiences) and being professional.

Competencies for trainers delivering workshops on IPV identified by Women Survivors of IPV include:

- Know the theoretical knowledge associated with IPV as well as experience in dealing with various types of IPV.
- Practice self-care and self-reflection.
- Be sensitive to non-verbal cues from workshop participants (e.g., know when a break is needed).
- Possess excellent presentation, communication and facilitation skills, including the ability to encourage participation.
- Be comfortable dealing with “taboo” subjects.

- Maintain contact with workshop participants in order to provide updates and refreshers.

## 5 Discussion and Recommendations

Social workers in all fields of practice would benefit from training on the issue of IPV. The train-the-trainer program was developed with this intention. In this section you will find the discussion and recommendations from Key Informants, Trainers, Trainees, and Women Survivors of IPV who evaluated the train-the-trainer program. While the train-the-trainer program was developed for social workers in all fields of practice, 78% of the Trainers that evaluated the train-the-trainer program were from Child Protection in the Department of Social Development, and their voice is prominent in the discussion. Many of these social workers provided suggestions for improving the current train-the-trainer program.

### 5.1 Limitations

The reliability and the validity of the data in this evaluation should be used with caution because of a number of factors:

- As mentioned previously, the train-the-trainer program, *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene*, was developed for social workers in all fields of practice. However, 78% of the participants in the train-the-trainer program worked in Child Protection in the Department of Social Development. Consequently, many of the views and responses received during this evaluation may not be typical of social workers in general.
- The sample sizes of the four groups evaluating the train-the-trainer program were very small (7 Key Informants, 21 Trainers, 9 Trainees, and 13 Women Survivors of IPV).
- This evaluation was conducted more than a year after the completion of the delivery of the train-the-trainer program. This had an impact on:
  - Respondents' recollections of their experiences and perspectives. The views are the impressions that have lasted for Key Informants, Trainers and Trainees.

- The ability to contact all of the former train-the-trainer program participants (some respondents' contact information was no longer valid) and their willingness to take part in this evaluation.

## 5.2 Workshop Title

Some participants in the train-the-trainer program thought that the title of the program, *Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene*, was misleading and led to some confusion on the purpose and objectives of the workshop. Because of the title, many Trainers were expecting to gain intervention tools and techniques for working with their clients, such as approaches to questioning children, interventions with abusers, risk assessment tools, etc. This likely influenced their expectations and experience of the train-the-trainer program. A different title for the IPV train-the-trainer program would clarify this distinction.

### Recommendation 1:

**MMFC change the title of the train-the-trainer program to accurately reflect the content and purpose of the training program.**

## 5.3 Overall Objectives of the Training Program

The overall objective of the current train-the-trainer program is to “support those who are in a position to deliver training to social workers about the impact of/and effective response to intimate partner violence” (*Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene: A Train-the-Trainer for Delivering Training on Intimate Partner violence to Social Workers*, p. 2). In other words, to build the capacity of social workers to effectively deliver training on IPV.

Although participants indicated they were clear about the train-the-trainer program objectives in their initial evaluations of the program, comments received by almost half of the Trainers (7 respondents) during interviews or focus groups indicated that they expected the workshop to increase their knowledge and understanding of IPV. Three were not clear about the requirement that they were to deliver the training. As well, three Trainers were not clear about the intended target audience for their training (social workers only or social workers, other

professionals and para-professionals in the formal helping system). This contributed to the frustration expressed by some participants in the train-the-trainer program.

Cognitively, emotionally and experientially, it is difficult to incorporate two very different types of learning in one program. The first type of learning is for social workers to become more effective in their interventions in situations of IPV (the educational IPV program). The second type of learning is to become trainers to deliver this training (the train-the-trainer program). Therefore, it would be advisable to separate the two types of training. MMFC could modify their approach to develop a training program that would allow participants to focus on the different knowledge and skills required for intervening in IPV situations. The overall objective of the IPV educational training program would be to enhance the intervention of social workers when responding to situations of IPV. When and if organizations need trainers specifically for their workplace, they could be trained and mentored to enhance knowledge and competencies related to facilitating the IPV educational program to their peers in their workplace. The objectives for the educational and train-the-trainer programs should be clearly differentiated to minimize confusion on the part of participants.

#### **Recommendation 2:**

**MMFC separate and differentiate the objectives for the educational and train-the-trainer programs.**

### **5.4 Content of the Educational Training Program**

Overall, the content of the materials that already exists for the train-the trainer program is appropriate for a general IPV educational program for social workers from diverse fields. This was confirmed by the participants in the evaluation:

- Trainees who completed a workshop delivered by their peers indicated that they were very satisfied with the content of their workshop. They also suggested that they would like more information on interventions for children, the mental health impacts of IPV and testimonials from survivors of IPV.
- Women Survivors of IPV echoed the views of Trainees by identifying that all components of the existing curriculum are very important. They suggested that the addition of testimonies/case studies of IPV survivors would improve the content. Women Survivors of IPV also identified systemic issues that would be important for social workers to be

aware of. For example, receiving conflicting instructions from different regions of the Department of Social Development or from two different systems (Child Protection and Family Court).

- Key Informants commented that there were many new social workers in Child Protection, Department of Social Development, and that this training would be useful to them.
- Trainers suggested that they received useful information that was pertinent to their work. They also gained various perspectives and tools. Half of the Trainers felt that the content provided a good review of IPV but it was too basic for their needs. Three Trainers felt the content was excellent and provided materials and tools to stimulate discussion and learning about IPV for a range of audiences. When asked for suggestions to improve the content of the train-the-trainer program, Trainers provided a great deal of comments about what should be included in the curriculum. It was suggested that the following topics should be enhanced or added to the content:
  - Self-care;
  - Intervening with men as victims and abusers;
  - Intervening with children;
  - Impacts of IPV on various ages of children and youth;
  - Cross-cultural communication;
  - Risk assessments for workplaces;
  - Systemic re-victimization and barriers for victims of IPV;
  - Testimonials from women survivors of IPV.
- Trainers also suggested supplementing the educational program training with additional audio visual content as well as more complex case studies for discussion.
- Comments on the usefulness of the reflection portion of the IPV training were divided among Trainers. However, this suggests that there is still a need among social workers to discuss, reflect and strategize on their own practice and how to deal with the complex situation of assisting peers who are abusers or victims of IPV.

Seventy-eight percent of the participants in the train-the-trainer program worked in Child Protection with the Department of Social Development. However, social workers in many different fields of practice, such as justice, addictions or health, are also likely to deal with IPV.

Therefore, it is important for all social workers to have a good foundation on the issue of IPV and how to intervene.

### **Recommendation 3:**

#### **MMFC in partnership with NBASW:**

- a) Promote the delivery of the IPV educational program to a wider audience to ensure that participation includes social workers from all fields of practice**
- b) Develop an educational program on IPV for social workers from diverse fields of practice in collaboration with various organizations.**
- c) Deliver an educational program on IPV for social workers in diverse fields of practice.**

Remembering that 78% of the Trainers who participated in the evaluation were from Child Protection, Department of Social Development, half of these Trainers felt that the content was too basic for their specific department. Several social workers had many years of experience and were looking for more extensive content about interventions and tools for working with clients. These social workers wanted more content and tools for *Module 3: Understanding the Impact of IPV on Children and Adolescents* and *Module 4: Social Workers Interventions to IPV*. Presently, and even more so in the near future as existing social workers retire, newer social workers in the Department of Social Development will not have the same level of knowledge or experience with IPV. It will be especially important for social workers in Child Protection to have a solid foundation on the topic and they too will require more advanced content and tools.

Social workers from specific fields of practice other than child protection may also require more extensive knowledge on particular topics pertinent to their different fields. MMFC in partnership with NBASW and in collaboration with specific organizations or departments should identify, prepare and deliver more advanced training when requested. As part of this process, existing training provided by specific organizations should be considered so that the advanced training on IPV can further build on participants' knowledge.

With the adjustments to the objectives and content of the educational training program on IPV, the evaluation form should also be adjusted. This evaluation form should assess whether learning objectives and outcomes were achieved as well as provide useful information for improving future training.

**Recommendations 4:**

**MMFC enhance the content of the IPV educational program to include more advanced information and tools.**

**Recommendation 5:**

**The Government of New Brunswick, Department of Social Development, include in their mandatory training the educational training program on IPV to all new Child Protection social workers.**

**Recommendation 6:**

**MMFC in partnership with NBASW and with the collaboration of specific organizations or departments develop and deliver more specific educational programs on IPV for specific fields of social work practice when requested.**

**Recommendation 7:**

**MMFC develop an evaluation form for the educational training program on IPV to assess whether the different learning outcomes for the program have been achieved and to capture suggestions for improvements to future deliveries.**

**5.5 The Train-the-Trainer Program**

Generally, respondents provided favourable feedback about the organization and delivery of the train-the-trainer program, stating that facilitators were dynamic, well organized and motivational. Having two different facilitators also provided participants with an opportunity to observe and experience different styles of training delivery. Three Trainers who participated in this evaluation and who had delivered an educational IPV program felt confident about delivering the training and received favourable evaluations from their participants. This indicated that the knowledge and skills they gained through completing the train-the-trainer program had been effectively applied.

However, one third of the Trainers identified that they would have liked more time and content on how to deliver the training. Some comments also suggested that the train-the-trainer experience was sometimes confusing for Trainers as they were learning about IPV and how to

deliver training on this topic at the same time. These comments were heard again during interviews and focus groups with Trainers stating that the number of days for the training needed to be extended to allow for more content and discussions on delivery of an IPV educational program.

In order to alleviate the confusion, it is recommended that MMFC, in collaboration with the organizations that are interested, train trainers specifically for their workplace when requested by the organization. The overall objective of this training would be to enhance knowledge and competencies related to delivering IPV educational program to their peers.

Social workers who elect to become trainers already possess useful skills for delivering the educational program. Some of the information and strategies for training are already included in the train-the-trainer manual under *Section 1: Introduction to the Manual* and *Section 3: Facilitating Training*. The content of the training would focus more extensively on delivery of training. For example, very basic information on educational and learning theory; conducting a learner needs assessment; adapting training materials and delivery methods; and, an opportunity to review the content of the educational training program from the perspective of delivering the training. The training process could include additional opportunities for trainers to reflect and problem solve on how they would deliver the IPV training.

Trainers identified by their workplace would receive training on delivering IPV training accompanied by a mentoring component where they would shadow MMFC during delivery of an educational program on IPV. The option could also be there to co-facilitate the training. This mentoring phase would help to transfer and consolidate the learning of how to train on the issues of IPV. It would also allow trainers to address concerns and overcome any obstacles they encounter when facilitating a workshop for their peers.

#### **Recommendation 8:**

**MMFC, in collaboration with interested organizations, train trainers specifically for their workplaces.**

Recruitment and selection of trainers to deliver the IPV training program should come from participants who have completed the educational program and have moderate to advanced experience dealing with IPV in their professional roles. This will ensure that trainers can bring their own experience of dealing with the complexities of IPV and familiarity with the subject matter so they can effectively respond to questions posed by participants in the IPV educational workshops they deliver.

**Recommendation 9:**

**Candidates that are interested in becoming trainers should have professional experience dealing with IPV situations and should have completed the IPV educational program as a prerequisite.**

If possible, MMFC can explore being a repository for training tools and resources. Trainers delivering the IPV educational program could contribute relevant materials that they find, adapt or use so that other trainers can access these. Permission of authors and MMFC will be required before any material could be placed in a repository. If feasible, these could be available online to provide easy access.

**Recommendation 10:**

**MMFC explore the possibility of creating a repository where trainers can contribute and access training tools and resources.**

**5.6 Impact of the Train-the Trainer Training Program**

It is still too early to assess the impact of the train-the-trainer training program on the formal support system in New Brunswick and social workers' effectiveness in responding to IPV. The number of people that have completed this program is still extremely small when considering the numbers of social workers practicing in New Brunswick. In the future, assessing the impact of the train-the-trainer program will be more feasible as future training is rolled out.

**5.7 Empowering Social Change**

When seeking improvements to intervening effectively in situations of IPV at an organizational level, having the right organizational policies to support the long-term goal of improved system capacity to assist victims of IPV must be in place. Experiences reported by the Women Survivors of IPV participating in this evaluation clearly indicate that systemic issues still exist in New Brunswick when it comes to assisting victims of IPV. MMFC and NBASW should continue to approach other government departments and service agencies to ensure that their policies support the improved responses and interventions of social workers in their sectors dealing with IPV.

#### **Recommendation 11:**

**MMFC and the NBASW continue to work with other government departments and service providers to ensure that organizational policies support the development of improved supports and interventions for victims of IPV.**

## **6 Conclusion**

The train-the-trainer program is an effective concept to improve interventions and the capacity of the New Brunswick formal support systems to respond effectively to IPV. As social workers and other professionals complete IPV educational programs delivered by the Trainers who completed the train-the-trainer program, *Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene*, they will improve their interventions with victims and survivors of IPV. Coupled with policies and process adjustments to eliminate the systemic barriers present for victims of IPV, the formal support system will increase its ability to assist victims of IPV.

As part of this evaluation, Key Informants, Trainers, Trainees and Women Survivors of IPV identified several strengths and potential improvements to the train-the-trainer program. The findings suggest that with the creation of an IPV educational program and modifications to the train-the-trainer program, there is the potential to achieve the desired outcome of improved social work interventions in situations of IPV. Curriculum for the IPV educational program could be extended to include advanced materials for social workers experienced in dealing with IPV. Curriculum and delivery approaches for the train-the-trainer program can be adjusted to deepen its focus on the concepts and skills associated with delivering training on IPV. Since social workers encounter IPV in many fields of practice, it is important for social workers in all sectors to have the opportunity to participate in this training. With a wider reach, the train-the-trainer program for social workers and the peer delivered IPV educational program can have a positive impact on the capacity of social workers, other professionals and para-professionals in the formal support system to improve their interventions for victims and survivors of IPV in New Brunswick.

## References

Blaney, E., Arsenault, R., Ruff, L. in collaboration with Taylor, G. (2009). *Understanding the Impact of Intimate Partner Violence - Helping Social Workers to Better Intervene: A Train-the-Trainer Manual for Delivering Training on Intimate Partner Violence to Social Workers*. Fredericton, New Brunswick: Muriel McQueen Fergusson Centre for Family Violence Research.

**Appendix A:**

***Understanding the Impact of Intimate Partner Violence – Helping  
Social Workers to Better Intervene***  
**Contents of the Train-the-Trainer Manual**

# ***Understanding the Impact of Intimate Partner Violence – Helping Social Workers to Better Intervene***

## **Contents of the Train-the-Trainer Manual**

### **Module 1: Introduction to Intimate Partner Violence**

1. Defining Intimate Partner Violence
2. Types of Intimate Partner Violence
3. Prevalence of Intimate Partner Violence
4. Severity of Violence
5. What Causes Intimate Partner Violence?
6. Spousal Abuse – A Matter that Concerns Us All
7. Cycle of Violence
8. Exploring Power and Control
9. Understanding the Victim
10. Barriers and Significant Factors to Leaving an Abusive Relationship
11. The Leaving Process

### **Module 2: Recognizing and Responding to Diversity and Unique Barriers**

12. Seniors Living with Intimate Partner Violence
13. New Immigrant Experiences of Intimate Partner Violence
14. Teen Dating Violence
15. Violence in Same-Sex Relationships
16. People Living with Disabilities and Intimate Partner Violence
17. First Nations Victims of Intimate Partner Violence
18. The Military Community and Intimate Partner Violence
19. People who Identify as Minority Ethnic and Intimate Partner Violence
20. Intimate Partner Violence and Sex Trade Workers
21. Intimate Partner Violence and Rurality

### **Module 3: Understanding the Impact of Intimate Partner Violence on Children and Adolescents**

22. The Impact of Intimate Partner Violence on children and Adolescents
23. What Children May Think and Feel
24. The Impact of Intimate Partner Violence on Parenting
25. Children and Adolescent Disclosure of Intimate Partner Violence

26. Child Protection Legislation Regarding Exposure to Intimate Partner Violence
27. Duty to Report Child Abuse
28. Duty of Professionals to Report
29. Failure to Report
30. Practice Considerations for Social Workers

#### **Module 4: Social Workers Interventions to Intimate Partner Violence**

31. Exploring Personal Values, Responses and Beliefs
32. Impact of Commonly Held Beliefs and Assumptions
33. Woman-Centred Framework
34. Introduction to the Woman Abuse Protocols
35. Legal, Ethical & Policy Aspects of Social Work Intervention in IPV in New Brunswick
36. Types of Social Work Interventions
  - Assessing Risk and Protective Factors
  - Safety Planning
  - Report Writing for Social Workers
37. Support for Women with Complex Needs
38. Engaging Men

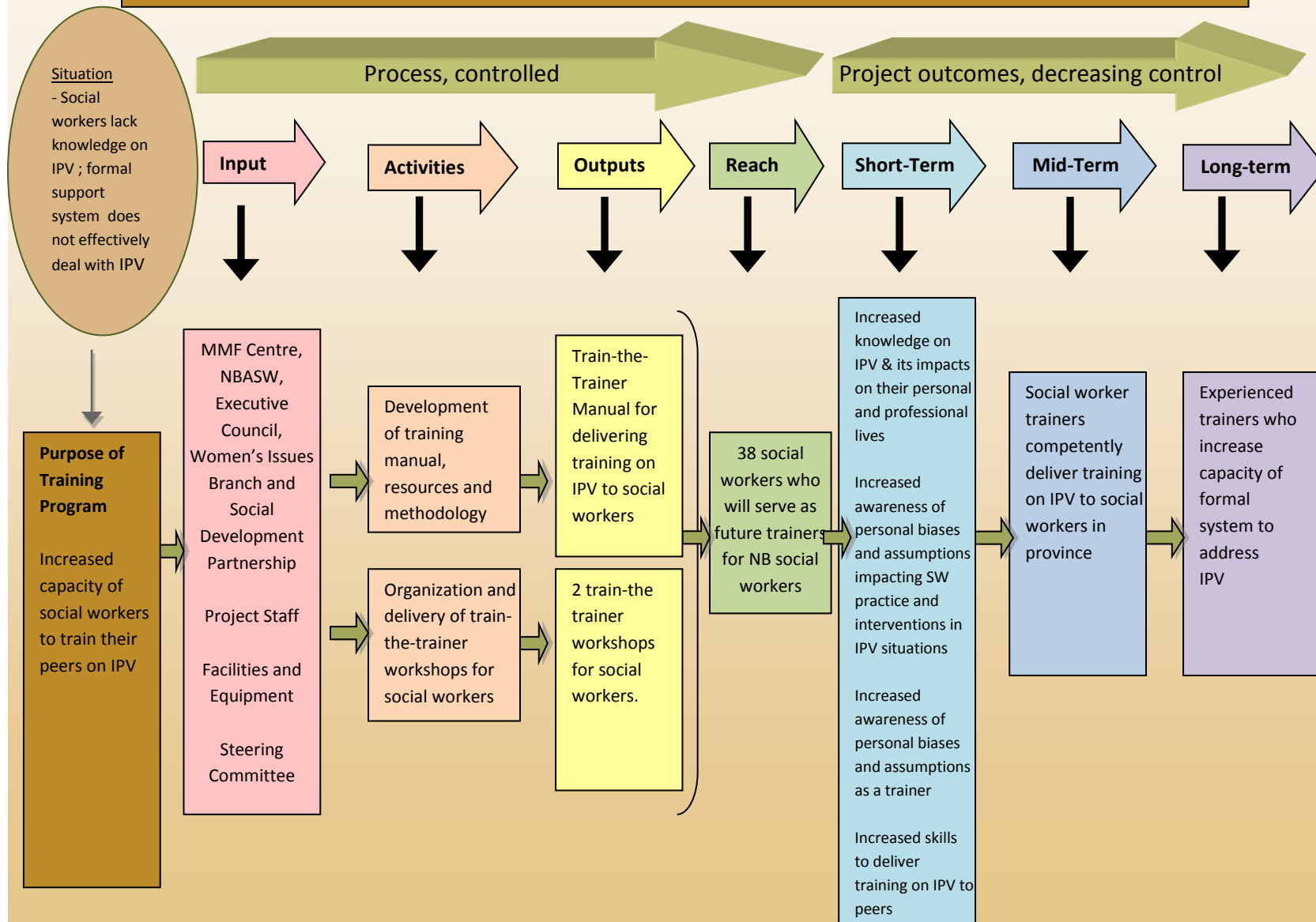
#### **Module 5: The Impact of Intimate Partner Violence on Social Workers**

39. Violence in the Lives of Social Workers
40. Why Social Workers May Not Report Intimate Partner Violence
41. If a Social Worker is in a Relationship with a Violent Partner – What You Can Do
42. Helping a Friend/Family Member/Another Social Worker who is in a Violent Relationship
43. Intimate Partner Violence is a Workplace Issue: Suggestions for Employers
44. Intervening in Intimate Partner Violence: Personal Change and Social Action
45. The Wellness Wheel
46. Summary and Closure of Training

**Appendix B:**

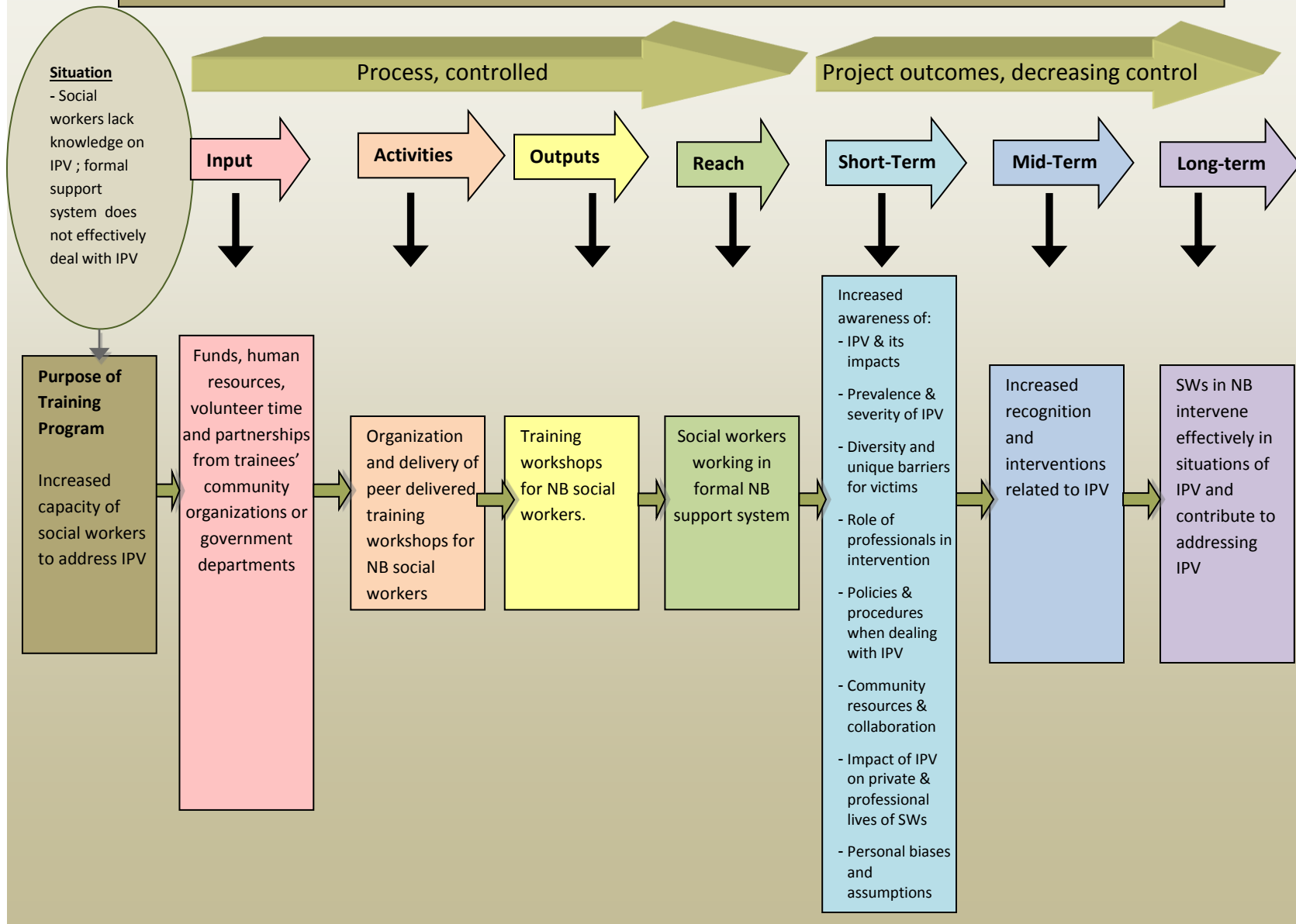
**Social Worker Trainers Logic Model  
Trainees Logic Model  
Evaluation Framework**

## Understanding the Impact of IPV - Helping Social Workers to Better Intervene Logic Model for Social Worker Trainers



## Understanding the Impact of IPV - Helping Social Workers to Better Intervene

### Logic Model for Social Work Trainees



## ***Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene***

### **Evaluation Goals**

The goals of the evaluation were to:

- 1) Determine whether or not the social worker train-the-trainer program:
  - a) Delivered the right content to prepare social workers to train their peers
  - b) Was delivered in an appropriate way
  - c) Provided social workers with the skills and confidence to deliver the training to their peers.
- 2) Determine improvements needed for the train-the-trainer program for future deliveries.
- 3) Assess whether the social worker Trainers effectively delivered training on IPV to their peers.
- 4) Assess the impact of the peer delivered IPV training on social workers in New Brunswick working in the formal support system.

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
<b>1. Was the content of the train-the-trainer program appropriate?</b>	<ul style="list-style-type: none"> <li>- 75% social worker (SW) Trainers perceive content of train-the-trainer:</li> <li>- Provided relevant information</li> <li>- Provided suggestions for effective instructional methods</li> <li>- Provided useful handouts they could use to train their peers</li> <li>- Provided opportunities to explore potential training challenges</li> <li>- Was useful for delivering training to their peers</li> <li>- Prepared them to deliver peer training on IPV</li> </ul>	SW Trainers	Survey to all SW Trainers (incl. those who participate in focus group)  Focus Groups/Interviews	Evaluation Committee	Oct - Nov 2011

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	<p>(For survey: score of 5 or more on a 1-7 scale)</p> <ul style="list-style-type: none"> <li>- Perception of SW Trainers about content of training program</li> <li>- Extent to which there are similar successes and gaps raised</li> </ul>				
<p><b>2. Was the train-the-trainer program delivered in an appropriate manner?</b></p>	<ul style="list-style-type: none"> <li>- 75% SW Trainers perceive:               <ul style="list-style-type: none"> <li>- Content was logically organized</li> <li>- Clearly explained</li> <li>- Provided opportunities for discussion</li> <li>- Provided opportunities for them to ask questions</li> <li>- Provided opportunities to share ideas on</li> </ul> </li> </ul>	<p>SW Trainers</p>	<p>Survey to all SW Trainers (incl. those who participate in focus group)</p> <p>Focus group/Interviews</p>	<p>Evaluation Committee</p>	<p>Oct - Nov 2011</p>

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	<p>training strategies</p> <ul style="list-style-type: none"> <li>- Used appropriate visual and material supports</li> <li>- Duration of training was appropriate</li> </ul> <p>(For survey: score of 5 or more on a 1-7 scale)</p> <ul style="list-style-type: none"> <li>- Perception of SW Trainers about delivery of training program</li> <li>- Extent to which there are similar successes and gaps raised</li> </ul>				
<p><b>3. Do SW Trainers have a better understanding of how their reality and perceptions</b></p>	<p>75% of SW Trainers increased their awareness of their:</p> <ul style="list-style-type: none"> <li>- Perceptions of IPV</li> <li>- Personal</li> </ul>	<p>SW Trainers</p>	<p>Survey to all SW Trainers (incl. those who participate in focus group)</p>	<p>Evaluation Committee</p>	<p>Oct - Nov 2011</p>

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
<p><b>can impact the effectiveness of their training delivery and interventions?</b></p>	<ul style="list-style-type: none"> <li>experience with IPV related issues</li> <li>- Personal responses to IPV</li> <li>- Personal challenges in addressing IPV</li> <li>- Personal strengths in addressing IPV</li> <li>- Experiences with IPV and how these impact their effectiveness as trainers</li> <li>- Personal experiences and how these impact their social work practice (For survey: score of 5 or more on a 1-7 scale)</li> <li>- Perception of SW trainers of whether the training increased their awareness of how their personal experience with</li> </ul>		<p>Focus group/Interviews</p>		

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	IPV impacts their training delivery and professional practice				
<b>4. Did SW Trainers feel prepared to deliver training to their peers?</b>	75% of SWs perceived they: <ul style="list-style-type: none"> <li>- Understood the information and handouts in the manual</li> <li>- Were comfortable with facilitating discussions during the training</li> <li>- Were confident in leading small group activities</li> <li>- Were confident they could manage group learning dynamics</li> <li>- Were prepared for challenges during their training delivery</li> <li>- Were prepared for questions during their training delivery</li> </ul>	SW Trainers	Survey to all SW Trainers (incl. those who participate in focus group)  Focus group/Interviews	Evaluation Committee	Oct - Nov 2011

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	<ul style="list-style-type: none"> <li>- Drew on the experience of their train-the trainer program to deliver peer training</li>   <li>(For survey: score of 5 or more on a 1-7 scale)</li>   <li>- Perception of SW trainers whether training prepared them to deliver training on IPV</li> </ul>				
<p><b>5. Was the peer training program delivered in an effective manner?</b></p>	<ul style="list-style-type: none"> <li>- 75% SW Trainees perceive:               <ul style="list-style-type: none"> <li>- Content was logically organized</li> <li>- Clearly explained</li> <li>- Provided opportunities for discussion</li> <li>- Provided opportunities for them to ask questions</li> <li>- Provided</li> </ul> </li> </ul>	SW Trainees	Survey <ul style="list-style-type: none"> <li>- Quantitative</li> <li>- Opportunity for qualitative responses</li> </ul>	Evaluator	January 2012

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	<p>opportunities to share ideas on intervention strategies</p> <ul style="list-style-type: none"> <li>- Used appropriate visual and material supports</li> <li>- Duration of training was appropriate</li> </ul> <p>(For survey: score of 5 or more on a 1-7 scale)</p>				
<p><b>6. Was the content of the peer training program on IPV appropriate?</b></p>	<p>75% of SW Trainees perceived the content:</p> <ul style="list-style-type: none"> <li>- Was relevant to their professional realities</li> <li>- Provided relevant examples of situations</li> <li>- Offered useful information</li> <li>- Provided useful handouts</li> </ul>	<p>SW Trainees</p> <p>Women Survivors of IPV</p>	<p>Survey</p> <ul style="list-style-type: none"> <li>- Quantitative</li> <li>- Opportunity for qualitative responses</li> </ul> <p>Interviews</p>	<p>Evaluator</p>	<p>January 2012</p> <p>May – June 2012</p>

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	(For survey: score of 5 or more on a 1-7 scale)				
<b>7. Are SWs more effective in responding to IPV?</b>	75% of SW Trainees perceive: <ul style="list-style-type: none"> <li>- They are better able to recognize types of IPV among their clients</li> <li>- They are better able to assess risk to their clients dealing with IPV</li> <li>- They can develop safety plans for clients</li> <li>- They are able to offer better interventions to victims of IPV</li> <li>- Are able to identify community resources for their clients</li> <li>- Are able to</li> </ul>	SW Trainees	Survey <ul style="list-style-type: none"> <li>- Quantitative</li> <li>- Opportunity for qualitative responses</li> </ul>	Evaluator	January 2012

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	<p>collaborate with other agencies to provide options for their clients</p> <p>(For survey: score of 5 or more on a 1-7 scale)</p>				
<p><b>7a. Are SWs better equipped to understand IPV and its impact on victims and children?</b></p>	<p>75% of SW Trainees perceive they have increased knowledge of:</p> <ul style="list-style-type: none"> <li>- Types of IPV and its impacts on victims</li> <li>- The causes of IPV</li> <li>- The cycle and dynamics of violence</li> <li>- The barriers to leaving a violent situation for victims</li> <li>- The prevalence of IPV</li> </ul> <p>(For survey: score of 5 or more on a</p>	<p>SW Trainees</p>	<p>Survey</p> <ul style="list-style-type: none"> <li>- Quantitative</li> <li>- Opportunity for qualitative responses</li> </ul>	<p>Evaluator</p>	<p>January 2012</p>

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

<b>Evaluation Question</b>	<b>Indicators</b>	<b>Data Sources</b>	<b>Methods</b>	<b>Responsibility</b>	<b>Timeframe</b>
	1-7 scale)				
<b>7b. Are SWs better equipped to respond to diversity issues and unique barriers faced by victims?</b>	<p>75% of SW Trainees are aware of:</p> <ul style="list-style-type: none"> <li>- The prevalence of violence among different diverse groups</li> <li>- Unique barriers and challenges for different diverse groups</li> <li>- Community resources to address the unique needs of diverse groups</li> </ul> <p>(For survey: score of 5 or more on a 1-7 scale)</p>	SW Trainees	<p>Survey</p> <ul style="list-style-type: none"> <li>- Quantitative</li> <li>- Opportunity for qualitative responses</li> </ul>	Evaluator	January 2012
<b>7c. Are SWs better informed about and know when to apply specific policies and procedures when dealing with IPV?</b>	<p>75% of SW Trainees have increased their awareness of:</p> <ul style="list-style-type: none"> <li>- Woman abuse protocols</li> <li>- Ethical</li> </ul>	SW Trainees	<p>Survey</p> <ul style="list-style-type: none"> <li>- Quantitative</li> <li>- Opportunity for qualitative responses</li> </ul>	Evaluator	January 2012

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	considerations in situation of IPV - The law as it relates to IPV - Appropriate interventions to use for different situations involving IPV  (For survey: score of 5 or more on a 1-7 scale)				
<b>7d. Are SWs better informed about resources in the community and the importance of collaborative action in prevention of IPV?</b>	75% of SW Trainees: - Are aware of community resources relevant to IPV - Have referred clients to these resources - Are collaborating with other agencies to address IPV  (For survey: score of 5 or more on a	SW Trainees	Survey - Quantitative - Opportunity for qualitative responses	Evaluator	January 2012

**Understanding the Impact of IPV: Helping Social Workers to Better Intervene  
Evaluation Framework**

Evaluation Question	Indicators	Data Sources	Methods	Responsibility	Timeframe
	1-7 scale)				
<b>7e. Do SWs have a better understanding of how their reality and perceptions can impact the effectiveness of their interventions?</b>	75% of SW Trainees increased their awareness of their: <ul style="list-style-type: none"> <li>- Perceptions of IPV</li> <li>- Personal experience with IPV related issues</li> <li>- Personal responses to IPV</li> <li>- Personal challenges in addressing IPV</li> <li>- Personal strengths in addressing IPV</li> <li>- Experience with IPV and how these impact their social work practice</li> </ul> (For survey: score of 5 or more on a 1-7 scale)	SW Trainees	Survey <ul style="list-style-type: none"> <li>- Quantitative</li> <li>- Opportunity for qualitative responses</li> </ul>	Evaluator	January 2012

**Appendix C:**  
**Department of Social Development**  
**Core and Mandatory Training for Child Welfare Social Workers**

## **Department of Social Development**

### **Core and Mandatory Training for Child Welfare Social Workers**

Social workers working in Child Welfare with the Department of Social Development in the province of New Brunswick are supposed to take a series of modules as part of their Core or mandatory training. The social workers working in Child Welfare include those working in Child Protection, Family Enhancement, Children with Special Needs, Child Care (Permanent Wards) and Adoption. Once a module has been completed, the supervisor schedules a “transfer of learning lab” for a team of social workers where Social Development trainers deliver a review on-site as well as help the team overcome or address any obstacles to implementing the practice competencies. In this setting, the social workers have a chance to present challenging cases.

Social workers working in First Nation communities are invited to participate in the training but this is not mandatory. Social workers in Adult Services with the Department of Social Development (Senior Services, Adults with Special Needs under the Age of 65 and Adult Protection) are not required to take any of this training.

The mandatory modules required of Child Welfare social workers are:

- Core 101 – which provides training on the foundations of child welfare practice;
- Core 102 – focusing on Family Centred Practice; Engaging Families in Solution Focused Assessment and case planning;
- Core 103 – that looks the developmental consequences of child abuse and neglect;
- Core 104 – regarding topics and issues related to child placement; loss and permanency;
- Core 105 – which covers law and the Family Services Act as these relate to child welfare;
- Structured Decision Making (SDM);
- Solution-Focused Interviewing Skills;
- Event Writing;
- Forensic interviewing;
- Working with Children and Families with FASD Characteristics (being developed);
- Specialized Domestic Violence Modules – a series of five modules specific to the assessment and case planning needs of child protection social workers to be ready by Fall 2013.

IPV is included in the curriculum of several modules. The dynamics of IPV is covered in Core 101 and 103, including reflection on their own values and how they impact intervention in child welfare; case planning for domestic violence as well as safety planning would be covered in

Core 102; and SDM covers the assessment of domestic violence and safety planning for children (such as whether a mother can be part of the safety plan for the children, or whether safety planning for the children must take place without her). A description of these mandatory modules follows. (This description was received through personal communications, December 27, 2012; January 2, 2013 with L. Tracey, Department of the Social Development.)

### **Core 101**

This curriculum establishes a base for child welfare practice. It defines and describes the child welfare service process in a family-centered model; explores social work and child welfare values; teaches the identification and assessment of abuse and neglect; teaches the philosophy of a risk/ safety assessment and thorough family assessment; reviews issues of cultural competence; and defines the role and responsibility of child welfare services within the department and the social worker to provide family-centered, culturally competent child welfare practice. This module and the subsequent Core 100 Series modules have been designed to be highly interactive and participatory in nature.

### **Core 102**

This module stresses the importance of joint case planning by the social worker and the family to assure timely, high quality, culturally relevant services to families. The module helps the social workers learn to engage and involve families in the service planning and delivery process, rather than relying solely on their prescribed authority. Casework is taught as the intervention method that best promotes family preservation, strengthens and empowers families, assures permanence for children and promotes lasting positive change. The curriculum also teaches the proper techniques for establishing a casework relationship; completing an individualized family assessment; completing the case plan, including developing appropriate goals, objectives, and activities; understanding the dynamics of “resistance” and interviewing strategies and their proper use.

### **Core 103**

This module of the Core Curriculum for Child Welfare social workers explores the developmental consequences of child abuse and neglect, establishes a framework for the early recognition of developmental problems and stresses the importance of including developmental and remedial services in child welfare case plans. Strategies to promote the healthy development of children who have been abused and neglected are presented.

### **Core 104**

This module addresses the knowledge and skills required for child welfare social workers to provide services related to child placement. The content includes the proper use of a risk and

safety assessment, the traumatic effects of separation on children and their families, placement prevention, the proper way to place children to prevent trauma, involving families in the placement process, choosing the proper placement, working with foster families as part of the service team, strategies to promote timely reunification, and the importance of permanence for all children.

### **Core 105**

This module is intended to offer the social worker a general understanding of what the law is, how it is made and implemented, and why social workers require this information. Topics covered in this module will provide the participant with a basic knowledge to know when it is appropriate to use the court as a tool in child welfare practice, and the skills to institute proceedings in the Court of Queen's Bench of New Brunswick, Family Division. The module will offer an overview of the Family Services Act, the legal mandate for child welfare practice, and the legal statuses available for children. It will look at the primary participants and their roles in a court case; issues involving evidence, witnesses, and how to prepare to testify in court.

### **Structured Decision Making System (SDM)**

In this three-day session, participants will learn about the Structured Decision Making (SDM) System for Child Protection as developed by the Children's Research Center in close partnership with the New Brunswick Department of Social Development. Participants will learn the 1) background and history of the SDM model as well as the development process that took place in New Brunswick, 2) the research and evidence that supports use of the model, and 3) how each of the assessments are completed within the context of your day to day practice with families. The training session will provide opportunities for interactive discussion and practice with case examples.

### **Finding Solutions: Solution-Focused Interviewing Skills for Child Protection Social Workers**

Child Welfare social workers will learn skills, abilities and knowledge of a solution-focused/ strength-based approach, as well as specific strategies that underpin the provision of child welfare services within a solution-focused / strength-based framework.

As a result of attending the workshop, participants will also be able to implement concepts such as looking for exceptions, scaling and the use of the miracle question, in their interventions in working with children and families involved in child welfare cases.

### **Event Writing**

Child Welfare workers will learn the correct way to log in events in their case files using objective bias-free language.

### **Forensic Interviewing**

Social workers complete this module in 3 series of modules. Dr John Yuille provides Module 1 of this series; Julie Kenniston from the FBI trains the second module; and, Social Development trainers deliver the third module. Staff must have completed Core 100 series prior to registration for this module.

**The following two modules are still under development and therefore, as of today have not been offered:**

### **Working with Children and Families with FASD Characteristics**

This 3 day module is being co-authored by one of our trainers and a Consultant from Department of Health in consultation with the FASD Centre of Excellence for FASD. The Consultant from Health is the Coordinator for the Centre of Excellence. This will be a module focusing on strategies to engage and work more effectively with children and adults who exhibit characteristics of FASD spectrum. Module should be developed by Summer 2013 and piloted to regional staff in Fall 2013.

### **Specialized Domestic Violence Module Series For Child Protection Social Workers**

This will be a series of 5 modules specific to the assessment needs and case planning needs of the child protection social worker. We hope to have this module built and approved for roll out by late Fall 2013. Social workers will have had to complete the core 100 series and have completed Solution-Focused Interviewing prior to registration for this series.

**Appendix D1:**

**English Data Collection Tools  
and  
Workshop Evaluation Form**

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

**MURIEL McQUEEN FERGUSSON**  
**CENTRE FOR FAMILY VIOLENCE RESEARCH**  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

## Key Informants

### Consent Form

I (full name) \_\_\_\_\_ have spoken with the evaluator and I understand that:

1. The interview is to obtain background information and context about the development and implementation of the train-the-trainer training program “Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene”
2. My participation is entirely voluntary and I can withdraw from the interview, and withdraw any data pertaining to me at any time.
3. My responses during the interview will be typed up. My input will be kept confidential. There will be no names on the typed manuscripts. All files will be kept secured in a locked filing cabinet at the Muriel McQueen Fergusson Centre.
4. Only my signed consent form will bear my name and it will be kept in a locked location, separate from the notes of the interview.
5. In any written or oral presentation of the results of this study, my identity will be protected. No one will be able to trace any comments back to me.
6. **Any disclosures about the abuse of a minor are required by law to be reported by the researchers to authorities. Please keep this in mind during the interview.**
7. On the detachable form below, I can indicate whether I wish to receive a summary based on the research findings.

Finally, I understand that if I have any concerns about this evaluation, I can call the Director of the Muriel McQueen Fergusson Centre for Family Violence Research, Dr. Carmen Gill at (506) 453-3595 or the Chair of the UNB Research Ethics Board, Dr. Steve Turner at 506 458 7433, by email at [turner@unb.ca](mailto:turner@unb.ca). Also, if I have any questions, I can either call the Muriel McQueen Fergusson Centre at (506) 453-3595 and leave a message for one of the researchers, or I can write either of the researchers by e-mail: [rinaa@unb.ca](mailto:rinaa@unb.ca) or Miguel LeBlanc: [mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca)

**Thank you for reading this form and for considering your participation in this study.**

## IPV Social Work Train-the-Trainers Evaluation

### Statement of Participant Consent

I agree to participate in a telephone interview for the above described study.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

### Participant Request of Summary

Yes, I wish to receive a summary on the research findings.

Name \_\_\_\_\_ Email \_\_\_\_\_

Other Contact Information (if email is not provided):

\_\_\_\_\_  
\_\_\_\_\_

**Please fax the signed consent form to:**

**Reni Han  
Evaluator  
MMF-IPV SW Training  
Fax No: (506) 363-1022**

**Thank you.**

***Understanding the Impact of Intimate Partner Violence: Helping Social Workers  
to Better Intervene  
Evaluation***

***Key Informant Semi-Structured Interview Questionnaire***

- 1) How did you come to be involved in this initiative?
- 2) What is your understanding of the goals of this training initiative?
- 3) What was your vision of this initiative? (*Prompts: trainer participants, trainees, content, timeframe, other*)
- 4) What were some of the factors or drivers that led to the development or implementation of this training? Why is this training important?
- 5) What was your role or your organization's role in the development and implementation of this training initiative?
  - a. Is this the usual role that you or your organization undertakes for social work training initiatives?
- 6) Did the implementation of this training initiative proceed as intended. Please explain.
- 7) What is the plan for the future implementation of this training initiative?
- 8) Are there particular things you would like to find out through this evaluation?

Thank you.

---

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

**MURIEL McQUEEN FERGUSSON**  
**CENTRE FOR FAMILY VIOLENCE RESEARCH**  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

## **Information Letter – Social Work Trainers (Focus Group)**

Date:

Re : Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene – Train-the-Trainer Training Program

Dear,

Intervening in situations of intimate partner violence is one of the most difficult aspects of social work practice and social workers often encounter victims/survivors during their years of practice. Successful interventions rely on effective practices. In New Brunswick, although social workers have always sought to address the unique challenges of each client, there are many barriers to intervening with victims of IPV. First and foremost, many social workers had never received formal training on the complexities of IPV and how it encompasses a wide range of abusive behaviours in addition to physical violence which can lead to helpless situations. Social workers are not always able to recognize the signs of IPV, particularly when their role involves counselling for a completely different issue. For these various reasons and many others, abused women may not have disclosed the violence to the formal helping system including social workers and do not receive the help they need to live free of violence.

Thank you for participating in the train-the-trainer training program “Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene “ that was delivered in 2010 by the Muriel McQueen Fergusson Centre for Family Violence Research. This training provided social workers with a better understanding of the dynamics of intimate partner violence, such as what it is, why it occurs, the process of ending violence, and the impact that it has on the lives of individuals (victims, violent partners, and children).

I am pleased to inform you that the NB Association of Social Workers and Muriel McQueen Fergusson Centre have received funds to evaluate the training program “Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene.” We would like to know if you are willing to participate in a group discussion to obtain feedback on the

training and its content. We hope to organize three discussion groups across the province. These discussion groups will be facilitated by a researcher and a research assistant. Please be ensured that any identifying information will be kept confidential. Audio tapes of group discussions will be transcribed and “sanitized” so that no identifying information can be traced back to you. For example, in the transcripts, names of participants will be replaced by a code number.

If you are interested in being part of the group discussion or would like to find out more about this project, you can either call or email Rina Arseneault, Associate Director, MMFC or Miguel LeBlanc, Executive Director, NBASW.

Rina Arseneault, RSW                      &  
Associate Director, MMFC  
[rinaa@unb.ca](mailto:rinaa@unb.ca)  
(506) 458-7137

Miguel LeBlanc, RSW  
Executive Director, NBASW  
[mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca)  
(506) 459-5595

---

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

**MURIEL McQUEEN FERGUSSON**  
**CENTRE FOR FAMILY VIOLENCE RESEARCH**  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

## **Information Letter – Social Work Trainers (Interviews)**

Date:

Re : Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene – Train-the-Trainer Training Program

Dear,

Intervening in situations of intimate partner violence is one of the most difficult aspects of social work practice and social workers often encounter victims/survivors during their years of practice. Successful interventions rely on effective practices. In New Brunswick, although social workers have always sought to address the unique challenges of each client, there are many barriers to intervening with victims of IPV. First and foremost, many social workers had never received formal training on the complexities of IPV and how it encompasses a wide range of abusive behaviours in addition to physical violence which can lead to helpless situations. Social workers are not always able to recognize the signs of IPV, particularly when their role involves counselling for a completely different issue. For these various reasons and many others, abused women may not have disclosed the violence to the formal helping system including social workers and do not receive the help they need to live free of violence.

Thank you for participating in the train-the-trainer training program “Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene “that was delivered in 2010 by the Muriel McQueen Fergusson Centre for Family Violence Research. This training provided social workers with a better understanding of the dynamics of intimate partner violence, such as what it is, why it occurs, the process of ending violence, and the impact that it has on the lives of individuals (victims, violent partners, and children).

I am pleased to inform you that the NB Association of Social Workers and Muriel McQueen Fergusson Centre have received funds to evaluate the training program “Understanding the

Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene.” We would like to know if you are willing to participate in a telephone interview to obtain feedback on the training and its content. Please be ensured that any identifying information will remain confidential.

If you would like to find out more about this project, you can either call or email Rina Arseneault, Associate Director, MMFC or Miguel LeBlanc, Executive Director, NBASW.

Rina Arseneault, RSW &  
Associate Director, MMFC  
[rinaa@unb.ca](mailto:rinaa@unb.ca)  
(506) 458-7137

Miguel LeBlanc, RSW  
Executive Director, NBASW  
[mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca)  
(506) 459-5595.

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

MURIEL MCQUEEN FERGUSSON  
CENTRE FOR FAMILY VIOLENCE RESEARCH  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

## Social Workers (Trainers)

### Consent Letter and Form - Interviews

I (full name) \_\_\_\_\_ have read the Information Letter and I understand that:

1. The telephone interview is regarding the effectiveness of the train-the-trainer training program “Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene”
2. My participation is entirely voluntary and I can withdraw from the interview, and withdraw any data pertaining to me at any time.
3. My responses during the interview will be typed up. My input will be kept confidential. There will be no names on the typed manuscripts. All files will be kept secured in a locked filing cabinet at the Muriel McQueen Fergusson Centre.
4. Only my signed consent form will bear my name and it will be kept in a locked location, separate from the notes of the interview.
5. In any written or oral presentation of the results of this study, my identity will be protected. No one will be able to trace any comments back to me.
6. **Any disclosures about the abuse of a minor are required by law to be reported by the researchers to authorities. Please keep this in mind during the interview.**
7. On the detachable form below, I can indicate whether I wish to receive a summary based on the research findings.

Finally, I understand that if I have any concerns about this evaluation, I can call the Director of the Muriel McQueen Fergusson Centre for Family Violence Research, Dr. Carmen Gill at (506) 453-3595 or the Chair of the UNB Research Ethics Board, Dr. Steve Turner at 506 458 7433, by email at [turner@unb.ca](mailto:turner@unb.ca). Also, if I have any questions, I can either call the Muriel McQueen Fergusson Centre at (506) 453-3595 and leave a message for one of the researchers, or I can write either of the researchers by e-mail: [rinaa@unb.ca](mailto:rinaa@unb.ca) or Miguel LeBlanc: [mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca)

**Thank you for reading this form and for considering your participation in this study.**

# IPV Social Work Train-the-Trainers Evaluation

## Statement of Participant Consent

I agree to participate in a telephone interview for the above described study.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

## Participant Request of Summary

Yes, I wish to receive a summary on the research findings.

Name \_\_\_\_\_ Email \_\_\_\_\_

Other Contact Information (if email is not provided):

\_\_\_\_\_  
\_\_\_\_\_

**Please fax the signed consent form to:**

**Reni Han  
Evaluator  
MMF-IPV SW Training  
Fax No: (506) 363-1022**

**Thank you.**

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

**MURIEL MCQUEEN FERGUSSON**  
**CENTRE FOR FAMILY VIOLENCE RESEARCH**  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

## **Social Workers (Trainers)**

### **Consent Letter and Form – Focus Groups**

I (full name) \_\_\_\_\_ have read the Information Letter and I understand that:

1. The group discussion is regarding the effectiveness of the train-the-trainer training program “Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene” and will take no more than 2 hours. This group discussion will take place in a meeting room at \_\_\_\_\_.
2. My participation is entirely voluntary and I can withdraw from the group discussion, and withdraw any data pertaining to me at any time.
3. The group discussion will be tape-recorded and later typed up. My input will be kept confidential. There will be no names on the typed manuscripts. All files will be kept secured in a locked filing cabinet at the Muriel McQueen Fergusson Centre and all tapes will be destroyed 1 year after the end of the project.
4. If for any reason I am not comfortable with the group discussion being tape-recorded, my concerns will be met and the group discussion will be recorded only by the hand of the research assistant, whose notes will also be secured in a locked filing cabinet at the Muriel McQueen Fergusson Centre.
5. Only my signed consent form will bear my name and it will be kept in a locked location, separate from the tapes and notes of the group discussion.
6. In any written or oral presentation of the results of this study, my identity will be protected. No one will be able to trace any comments back to me.
7. Each participant, including myself, is asked to agree not to discuss who was in the group or what was said in the session with anyone outside the group.
8. I understand that my identity and my opinions will be known to other participants in the group and that therefore absolute confidentiality cannot be guaranteed.
9. **Any disclosures about the abuse of a minor are required by law to be reported by the researchers to authorities. Please keep this in mind when sharing in the group.**
10. On the detachable form below, I can indicate whether I wish to receive a summary based on the research findings.

Finally, I understand that if I have any concerns about this evaluation, I can call the Director of the Muriel McQueen Fergusson Centre for Family Violence Research, Dr. Carmen Gill at (506) 453-3595 or the Chair of the UNB Research Ethics Board, Dr. Steve Turner at 506 458 7433, by email at [turner@unb.ca](mailto:turner@unb.ca). Also, if I have any questions, I can either call the Muriel McQueen Fergusson Centre at (506) 453-3595 and leave a message for one of the researchers, or I can write either of the researchers by e-mail: [rinaa@unb.ca](mailto:rinaa@unb.ca) or Miguel LeBlanc: [mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca)

**Thank you for reading this form and for considering your participation in this study.**

## IPV Social Work Train-the-Trainers Evaluation

### Statement of Participant Consent

I agree to participate in the group discussion for the above described study.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

### Participant Request of Summary

Yes, I wish to receive a summary on the research findings.

Name \_\_\_\_\_ Email \_\_\_\_\_

Other Contact Information (if email is not provided):

\_\_\_\_\_  
\_\_\_\_\_

**Please fax the signed consent form to:**

**Reni Han  
Evaluator  
MMF-IPV SW Training  
Fax No: (506) 363-1022**

**Thank you.**

---

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

MURIEL McQUEEN FERGUSSON  
CENTRE FOR FAMILY VIOLENCE RESEARCH  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

## ***Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene***

### **Social Worker Trainers – Interview Questionnaire**

#### **Introduction**

Thank you for agreeing to participate in this interview. You participated in the train-the-trainer program, *Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene*. I am \_\_\_\_\_ and I am a member of the evaluation team that is undertaking the evaluation of the train-the-trainer program.

#### **Background**

Intervening in situations of intimate partner violence is one of the most difficult aspects of social work practice and social workers often encounter victims/survivors during their years of practice. Successful interventions rely on effective practices.

The Muriel McQueen Fergusson Centre for Family Violence Research (MMFC) partnered with the New Brunswick Association of Social Workers (NBASW), the Executive Council, Women's Issues Branch, and the NB Department of Social Development to develop a train-the-trainer program tailored to the needs of social workers. Discussion groups were held around the province in English and in French to ensure that the training was tailored to social workers. The process was also guided by two important committees composed of social workers - a working committee and an advisory committee.

This training program provided social workers with a better understanding of the dynamics of intimate partner violence, such as what it is, why it occurs, the process of ending violence, and the impact that it has on the lives of individuals (victims, violent partners, and children). With the help of our first four trainers, a pilot training was offered in September 2009. To date the training has been offered in English in February 2010 and in French in May 2010.

In order to evaluate the effectiveness of the train-the-trainer training program *Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene*, we would like to get your feedback on the training program and its impacts.

We want to assure you that the information discussed here is confidential and that no names will be attached to this information. We also would like to remind you that **when sharing, any disclosure about the abuse of a minor must be reported by us to the authorities, thus please keep this in mind during the interview.**

We will be taking notes so that we can capture the issues that emerge from the interview and-with your permission-we may also tape the discussion as a backup set of notes.

Do you have any questions before we start with the interview?

- 1) How did you become involved in this training?**
  
- 2) What was your understanding of the objectives of this train-the-trainer program?**
  
- 3) If you recall, the train-the-trainer program did not focus on information related to IPV, but more on training strategies and tools for delivering training on IPV to your peers. What do you think about the content of the train-the-trainer program?**

*Prompts:*

*Was it relevant?*

*Did it provide suggestions for effective instructional methods?*

*Were handouts useful?*

*Help to prepare you for delivering training to your peers?)*

- 4) What do you think about the delivery of the program?**

*Prompts:*

*Was it organized logically?*

*Was it clearly explained?*

*Did it provide you with opportunities to ask questions and share ideas on training strategies?*

*Were the visual aids and material supports appropriate?*

*Was the duration appropriate?*

- 5) How did the train-the-trainer program help to prepare you for delivering IPV training to your peers?**
  
- 6) How many training sessions have you delivered to your peers? If zero go to question 8. If positive, go to question 6a.**
  - a. How many participants attended these sessions?**
  
  - b. How can we reach these participants so that we can invite them to be part of this evaluation?**

- 7) How was the experience of delivering the IPV training program to your peers?
- a. Did you encounter anything unexpected?
- 8) Did you encounter any barriers to delivering your training?
- a. Do you have suggestions for overcoming these barriers?
- 9) Were you aware that an aspect of this training was to reflect on your own social work practice as it relates to intimate partner violence?
- 10) Did the train-the-trainer program make you more aware about your personal perceptions and experiences of intimate partner violence?  
*(if yes, proceed to 10a. If no, proceed to 10b)*
- a. If so, how did it make you more aware?
  - b. If not, what suggestions do you have for future deliveries so that participants can gain this awareness?
- 11) What did you gain from your participation in the train-the-trainer program?
- 12) How did the train-the-trainer program impact the way you delivered the training to your peers?
- 13) How has the train-the trainer program impacted your social work practice?  
*(Prompts: interactions with clients, intervention approaches, collaboration with other agencies, etc.)*
- 14) How do you plan on using the training you received in the future?
- 15) Do you have any suggestions for improving the train-the-trainer program?
- 16) Would you be willing to complete a survey related to this evaluation?
- Yes       No

Thank you again for participating in this interview.

---

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

**MURIEL McQUEEN FERGUSSON**  
**CENTRE FOR FAMILY VIOLENCE RESEARCH**  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

## ***Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene***

### **Social Worker Trainers – Semi-Structured Focus Group Questionnaire**

#### **Introduction**

Thank you for agreeing to participate in this group discussion. All of you participated in the train-the-trainer program, *Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene*. I am \_\_\_\_\_ and I will be facilitating the group discussion. I am a member of the evaluation team that is undertaking the evaluation of the train-the-trainer program. I would also like to introduce you to \_\_\_\_\_ who is also a member of the evaluation team and who will be taking notes during our discussion.

#### **Background**

Intervening in situations of intimate partner violence is one of the most difficult aspects of social work practice and social workers often encounter victims/survivors during their years of practice. Successful interventions rely on effective practices.

The Muriel McQueen Fergusson Centre for Family Violence Research (MMFC) partnered with the New Brunswick Association of Social Workers (NBASW), the Executive Council, Women's Issues Branch, and the NB Department of Social Development to develop a train-the-trainer program tailored to the needs of social workers. Discussion groups were held around the province in English and in French to ensure that the training was tailored to social workers. The process was also guided by two important committees composed of social workers - a working committee and an advisory committee.

This training program provided social workers with a better understanding of the dynamics of intimate partner violence, such as what it is, why it occurs, the process of ending violence, and the impact that it has on the lives of individuals (victims, violent partners, and children). With the help of our first four trainers, a pilot training was offered in September 2009. To date the training has been offered in English in February 2010 and in French in May 2010.

In order to evaluate the effectiveness of the train-the-trainer training program *Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene*, we would like to get your feedback on the training program and its impacts.

During this group discussion, we are interested in hearing the range of opinions and information that each of you can provide. We want to ensure that everyone will have a chance to speak and we ask that you speak one at a time.

We want to assure you that the information discussed here is confidential and that no names will be attached to this information. **Although we thrive to ensure confidentiality, we remind you that your** identity and opinions will be known to other participants in the group and therefore we cannot guarantee absolute confidentiality. We ask participants to respect this confidentiality and to not discuss identifying information outside of this focus group. We also would like to remind you that **when sharing with the group, any disclosure about the abuse of a minor must be reported by us to the authorities, thus please keep this in mind when sharing with the group.**

We will be taking notes so that we can capture the issues that emerge from the group discussion and-with your permission-we will also tape the discussion as a backup set of notes. This discussion group should last no more than two hours.

Do you have any questions before we start with our discussion questions?

- 1) **How did you become involved in this training?**
  
- 2) **What was your understanding of the objectives of this train-the-trainer program?**
  
- 3) **If you recall, the train-the-trainer program did not focus on information related to IPV, but more on training strategies and tools for delivering training on IPV to your peers. What do you think about the content of the train-the-trainer program?**

*Prompts:*

*Was it relevant?*

*Did it provide suggestions for effective instructional methods?*

*Were handouts useful?*

*Help to prepare you for delivering training to your peers?)*

- 4) **What do you think about the delivery of the program?**

*Prompts:*

*Was it organized logically?*

*Was it clearly explained?*

*Did it provide you with opportunities to ask questions and share ideas on training strategies?*

*Were the visual aids and material supports appropriate?*

*Was the duration appropriate?*

- 5) How did the train-the-trainer program help to prepare you for delivering IPV training to your peers?
- 6) How many training sessions have you delivered to your peers? If zero go to question 8. If positive, go to question 7.
  - a. How many participants attended these sessions?
  - b. How can we reach these participants so that we can invite them to be part of this evaluation?
- 7) How was the experience of delivering the IPV training program to your peers?
  - a. Did you encounter anything unexpected?
- 8) Did you encounter any barriers to delivering your training?
  - a. Do you have suggestions for overcoming these barriers?
- 9) Were you aware that an aspect of this training was to reflect on your own social work practice as it relates to intimate partner violence?
- 10) Did the train-the-trainers program make you more aware about your personal perceptions and experiences of intimate partner violence?  
*(if yes, proceed to 10a. If no, proceed to 10b)*
  - a. If so, how did it make you more aware?
  - b. If not, what suggestions do you have for future deliveries so that participants can gain this awareness?
- 11) What did you gain from your participation in the train-the-trainer program?
- 12) How did the train-the-trainer program impact the way you delivered the training to your peers?
- 13) How has the train-the-trainer program impacted your social work practice?  
*(Prompts: interactions with clients, intervention approaches, collaboration with other agencies, etc.)*

**14) How do you plan on using the training you received in the future?**

**15) Do you have any suggestions for improving the train-the-trainer program?**

**16) Would you be willing to complete a survey related to this evaluation?**

Yes

No

**Thank you again for participating in this discussion group.**

***Understanding the Impact of Intimate Partner Violence:  
Helping Social Workers to Better Intervene***

**Social Work Trainers Survey**

In 2010, you participated in a train-the-trainer program, *Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene*, offered through the Muriel McQueen Fergusson Centre for Family Violence Research. The Centre recently received funding to evaluate the training initiative and the following survey is part of the data collection process for the evaluation. You may have also participated in an interview or focus group as part of the evaluation process.

Your responses will remain anonymous. Thank you for taking the time to complete the survey.

I am a social worker working in:

- NB Department of Social Development
- Another provincial government department (Please specify: \_\_\_\_\_)
- Community non-profit agency
- First Nation community or agency
- Other (please specify); \_\_\_\_\_

I am a designated trainer for my organization or have delivered training before:

- Yes
- No

**Training Objectives**

The objectives of the train-the-trainer program were to “have a significant and positive impact on social workers’ ability to effectively respond to intimate partner violence (IPV). More specifically, participants would gain a greater understanding of:

- Intimate partner violence and its impact on victims and children;
- Recognize the prevalence and severity of intimate partner violence;
- Respond to diversity issues and unique barriers faced by victims;
- Appreciate the importance of their professional role in intervening effectively;
- Learn about and apply specific policies and procedures when dealing with intimate partner violence;
- Learn about resources in the community and the importance of collaborative action to discuss ways to prevent intimate partner violence;

- Learn about the impact of IPV on the private and professional lives of social workers.

On a scale of 1 to 7, with 1 being “totally disagree” and 7 being “completely agree,” please could you respond to the following three questions:

1. The training objectives were clear to me before I registered for the train-the-trainer workshop.

1      2      3      4      5      6      7

2. The objectives accurately conveyed the purpose and outcomes of the train-the-trainer workshop.

1      2      3      4      5      6      7

3. The training I received reflected the stated objectives.

1      2      3      4      5      6      7

4. Before I registered for the workshop, I was aware I was expected to deliver training on IPV after my participation in the workshop

Yes       No

### Training

On a scale of 1 to 7, with 1 being “totally disagree” and 7 being “completely agree,” please could you respond to the following questions:

5. The content of the training was organized in a logical way.

1      2      3      4      5      6      7

6. The content of the training was useful to prepare me for delivering training on IPV.

1      2      3      4      5      6      7

7. The content provided me with existing strategies for intervening in situations of IPV

1      2      3      4      5      6      7

8. The content of the training was useful to me for my daily work.

1 2 3 4 5 6 7

9. The trainers were knowledgeable.

1 2 3 4 5 6 7

10. The trainers explained different components of the training clearly

1 2 3 4 5 6 7

11. The trainers responded effectively to participants' questions and concerns.

1 2 3 4 5 6 7

12. The trainers created a comfortable learning environment.

1 2 3 4 5 6 7

13. I had the opportunity to ask questions and share ideas.

1 2 3 4 5 6 7

14. The visual aids and handouts were useful.

1 2 3 4 5 6 7

15. The duration of the training was appropriate.

1 2 3 4 5 6 7

### **Self-Reflection and Self-Care**

16. The training made me more aware of my personal biases and assumptions as a social worker intervening in situations of IPV.

1 2 3 4 5 6 7

17. The training made me reflect on my intervention in situations of IPV.

18. The training made me reflect on my approach when intervening with clients from diverse backgrounds.

19. The training made me more aware of how intervening in situations of IPV can have an effect on me professionally.

1      2      3      4      5      6      7

20. The training made me more aware of how intervening in situations of IPV can have an effect on me personally.

1      2      3      4      5      6      7

21. The training made me more aware of how dealing with situations of IPV in my workplace can affect me.

1      2      3      4      5      6      7

22. The training made me more aware of how dealing with situations of IPV in my personal circle can affect me.

1      2      3      4      5      6      7

23. The training provided me with useful suggestions on how I can deal with the personal and professional impacts of dealing with IPV.

1      2      3      4      5      6      7

### **Preparation to Deliver Training**

24. The training made me more aware of the importance of knowing my personal biases as a trainer delivering training on IPV.

1      2      3      4      5      6      7

25. The training provided me with useful information to provide training on IPV.

1      2      3      4      5      6      7

26. The materials provided during the training are useful to me as a trainer.

1      2      3      4      5      6      7

27. The training provided me useful strategies to deliver training on IPV.

1      2      3      4      5      6      7

28. I feel prepared to adapt the training and the training materials to better suit the needs of participants.

1      2      3      4      5      6      7

29. I feel prepared to deliver training on IPV to other social workers.

1      2      3      4      5      6      7

30. I feel prepared to deliver training on IPV to others (e.g., community partners, para-professionals, other professionals)

1      2      3      4      5      6      7

### **Training Delivery**

31. Since participating in the train-the-trainer program, I have delivered training on IPV.

Yes               No

*If yes, go to Q 32; If no, go to Q42*

32. I feel I was able to provide participants with useful information.

1      2      3      4      5      6      7

33. I feel I organized the content of the training in a logical way.

1      2      3      4      5      6      7

34. I feel I was able to explain different components of the training clearly.

1      2      3      4      5      6      7

35. I feel I was able to respond effectively to participants' questions and concerns.

1      2      3      4      5      6      7

36. I feel I was able to create a comfortable learning environment.

1      2      3      4      5      6      7

37. I provided participants with the opportunity to ask questions and share ideas.

1      2      3      4      5      6      7

38. Participants in my workshops found the visual aids and handouts useful.

1      2      3      4      5      6      7

39. The duration of the training I delivered was appropriate.

1      2      3      4      5      6      7

40. I was able to deal with challenges that arose during the training.

41. I feel the training I delivered was successful. *Go to Q 44.*

1      2      3      4      5      6      7

42. I will be delivering a workshop on IPV in the next six months.

Yes               No               Don't know

43. What were the reasons that you have not delivered the training?

---

---

---

44. Do you have any other comments or suggestions regarding the train-the-trainer program?

---

---

---

Thank you.

***Understanding the Impact of Intimate Partner Violence:  
Helping Social Workers to Better Intervene***

**Social Work Trainee Survey**

In 2011, you participated in a training program, *Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene*. The trainers for this workshop received training from the Muriel McQueen Centre for Family Violence Research at the University of New Brunswick. The Centre recently received funding to evaluate the training initiative and the following survey is part of the data collection process for the evaluation. We would greatly appreciate it if you would complete the short survey as your responses are important to the evaluation.

Your responses will remain anonymous. Thank you for taking the time to complete the survey.

I am a social worker working in:

- NB Department of Social Development
- Another provincial government department (Please specify: \_\_\_\_\_)
- Community non-profit agency
- First Nation community or agency
- Other (please specify); \_\_\_\_\_

**Training Objectives**

The objectives of the training program are to “have a significant and positive impact on social workers’ ability to effectively respond to intimate partner violence (IPV). More specifically, participants would gain a greater understanding of:

- Intimate partner violence and its impact on victims and children;
- Recognize the prevalence and severity of intimate partner violence;
- Respond to diversity issues and unique barriers faced by victims;
- Appreciate the importance of their professional role in intervening effectively;
- Learn about and apply specific policies and procedures when dealing with intimate partner violence;
- Learn about resources in the community and the importance of collaborative action to discuss ways to prevent intimate partner violence;
- Learn about the impact of IPV on the private and professional lives of social workers.

On a scale of 1 to 7, with 1 being “totally disagree” and 7 being “completely agree,” please could you respond to the following questions:

1. These training objectives were clear to me before I registered for the workshop.

1      2      3      4      5      6      7

2. The objectives accurately conveyed the purpose and outcomes of the workshop.

1      2      3      4      5      6      7

3. The training I received reflected the objectives.

1      2      3      4      5      6      7

### **Training**

4. The content of the training was organized in a logical way.

1      2      3      4      5      6      7

5. The content provided me with information on existing strategies for intervening in situations of IPV.

1      2      3      4      5      6      7

6. The content of the training was useful to me for my daily work.

1      2      3      4      5      6      7

7. The trainer(s) were knowledgeable.

1      2      3      4      5      6      7

8. The trainer(s) explained different components of the training clearly.

1      2      3      4      5      6      7

9. The trainer(s) responded effectively to participants’ questions and concerns.

1      2      3      4      5      6      7

10. The trainer(s) created a comfortable learning environment.

1      2      3      4      5      6      7

11. I had the opportunity to ask questions and share ideas.

1      2      3      4      5      6      7

12. The visual aids and handouts were useful.

1      2      3      4      5      6      7

13. The duration of the training was appropriate.

1      2      3      4      5      6      7

### **Self-Reflection and Self-Care**

14. The training made me more aware of my personal biases and assumptions as a social worker intervening in situations of IPV.

1      2      3      4      5      6      7

15. The training made me reflect on my intervention in situations of IPV.

1      2      3      4      5      6      7

16. The training made me reflect on my approach when intervening with clients from diverse backgrounds.

1      2      3      4      5      6      7

17. The training made me more aware of how intervening in situations of IPV can have an effect on me professionally.

1      2      3      4      5      6      7

18. The training made me more aware of how intervening in situations of IPV can have an effect on me personally.

1      2      3      4      5      6      7

19. The training made me more aware of how dealing with situations of IPV in my workplace can affect me.

1      2      3      4      5      6      7

20. The training made me more aware of how dealing with situations of IPV in my personal circle can affect me.

1      2      3      4      5      6      7

21. The training provided me with useful suggestions on how I can deal with the personal and professional impacts of dealing with IPV.

1      2      3      4      5      6      7

22. Do you have any other comments or suggestions regarding the workshop program?

---

---

---

Thank you.

University of  
New Brunswick  
Fredericton

678 Windsor Street  
P.O. Box 4400  
Fredericton, NB  
E3B 5A3

**MURIEL McQUEEN FERGUSSON**  
**CENTRE FOR FAMILY VIOLENCE RESEARCH**  
TEL: 506 453-3595  
FAX: 506 453-4788



webpage: [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

### IPV Survivors Consent Letter and Form

I (full name) \_\_\_\_\_ have read the Information Letter and I understand that:

1. The telephone interview is regarding the effectiveness of the train-the-trainer training program “Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene”
2. My participation is entirely voluntary and I can withdraw from the interview, and withdraw any data pertaining to me at any time.
3. My responses during the interview will be typed up. My input will be kept confidential. There will be no names on the typed manuscripts. All files will be kept secured in a locked filing cabinet at the Muriel McQueen Fergusson Centre.
4. Only my signed consent form will bear my name and it will be kept in a locked location, separate from the notes of the interview.
5. In any written or oral presentation of the results of this study, my identity will be protected. No one will be able to trace any comments back to me.
6. **Any disclosures about the abuse of a minor are required by law to be reported by the researchers to authorities. Please keep this in mind during the interview.**
7. On the detachable form below, I can indicate whether I wish to receive a summary based on the research findings.

Finally, I understand that if I have any concerns about this evaluation, I can call the Director of the Muriel McQueen Fergusson Centre for Family Violence Research, Dr. Carmen Gill at (506) 453-3595 or the Chair of the UNB Research Ethics Board, Dr. Steve Turner at 506 458 7433, by email at [turner@unb.ca](mailto:turner@unb.ca). Also, if I have any questions, I can either call the Muriel McQueen Fergusson Centre at (506) 453-3595 and leave a message for one of the researchers, or I can write either of the researchers by e-mail: [rinaa@unb.ca](mailto:rinaa@unb.ca) or Miguel LeBlanc: [mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca)

**Thank you for reading this form and for considering your participation in this study.**

## IPV Social Work Train-the-Trainers Evaluation

### Statement of Participant Consent

I agree to participate in a telephone interview for the above described study.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

### Participant Request of Summary

Yes, I wish to receive a summary on the research findings.

Name \_\_\_\_\_ Email \_\_\_\_\_

Other Contact Information (if email is not provided):

\_\_\_\_\_  
\_\_\_\_\_

**Please fax the signed consent form to:**

**Reni Han  
Evaluator  
MMF-IPV SW Training  
Fax No: (506) 363-1022**

**Thank you.**



## ***Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene***

### ***IPV Survivor Questionnaire***

*Recently you attended a leadership workshop for women survivors of intimate partner violence (IPV). The last module discussed leadership through evaluation. We would appreciate your help in providing us feedback on things we should consider as we evaluate a train-the-trainer program on intimate partner violence for social workers in the province.*

*Women facing IPV might have to deal with social workers through different types of organizations and at different times, e.g. while they are still in an abusive relationship, when they initially leave a relationship, or later on as they make a new life. They might also have to deal with social workers because of their children.*

*In order to help social workers to intervene in situations of IPV, a training program was developed by the Muriel McQueen Fergusson Centre on Family Violence Research with input from a Steering Committee. The Steering Committee was made up of social workers working in different fields who may have to help clients dealing with intimate partner violence. The training program is to train some social workers so that they in turn can train their colleagues on matters related to IPV. It is also to help them explore their attitudes on IPV so they can be more self aware when they are assisting women who are dealing with IPV.*

*We would like to have your input on both the train-the-trainer program trainers received, as well as the content of the training they will be delivering to other social workers.*

*First, we'd like to get your input on the content of the training for social workers in the field.*

8. If social workers receive training related to intimate partner violence, what types of knowledge should they gain?
  
9. Do you think it's important for social workers in the field to be aware of their own attitudes about intimate partner violence? Please explain.

10. I'm going to ask you 21 questions where you can indicate how important you feel a topic is as part of the training. On a scale of 1 to 7, with 1 being not important at all and 7 being extremely important, how important is it for social workers to:

Learn about the behaviours involved in intimate partner violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Understand different ways of thinking about intimate partner violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Understand the dynamics involved in the cycle of violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Learn about the impact of intimate partner violence on victims

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Understand the difficulties of leaving a violent relationship

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Recognize the needs and unique barriers of women from different backgrounds and cultures, e.g. seniors, immigrant women, Aboriginal women, women with disabilities, military families, etc.

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Respond to women from different backgrounds and cultures

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Be familiar with the Provincial Woman Abuse Protocols

1	2	3	4	5	6	7
Not						Extremely
Important						Important





important at all and 7 being extremely important, how important is it for social work trainers to become aware of how the following affect their training delivery:

Their own values about intimate partner violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Their own beliefs about intimate partner violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Their own biases and stereotypes about women dealing with intimate partner violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Their own attitudes when dealing with intimate partner violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

Their own responses when dealing with intimate partner violence

1	2	3	4	5	6	7
Not						Extremely
Important						Important

15. Do you have any other suggestions about the train-the-trainer program on IPV for social workers?

Thank you for your time.

## Workshop Evaluation Form

The following workshop evaluation form was completed by:

- Trainers – immediately after they attended the train-the-trainer workshop;
- Trainees immediately after they attended IPV educational workshops facilitated by trainers.

Completed forms were reviewed, compiled and analyzed for this evaluation.

## EVALUATION

### Understanding the Impact of Intimate Partner Violence: Helping Social Workers to Better Intervene

- If a question or item is not relevant or does not apply, please check NA at the end of the corresponding line.
- Please include as many written comments as you can. If you need more space, use the other side of the paper.
- All information on this form is confidential.

<b>1. The Trainers:</b>	<b>Very Poor</b>	<b>Poor</b>	<b>Average</b>	<b>Good</b>	<b>Very Good</b>	<b>N/A</b>
• Demonstrated knowledge of content	1	2	3	4	5	N
• Showed respect for the experiences and knowledge of participants	1	2	3	4	5	N
• Encouraged appropriate levels of participation and questions	1	2	3	4	5	N
• Were flexible (adjusted sessions to accommodate changes)	1	2	3	4	5	N

Comments:

<b>2. The Sessions:</b>	<b>Very Poor</b>	<b>Poor</b>	<b>Average</b>	<b>Good</b>	<b>Very Good</b>	<b>N/A</b>
• Had a clearly stated purpose and	1	2	3	4	5	N

objectives

- |  |   |   |   |   |   |   |
|--|---|---|---|---|---|---|
| • Were organized so I could see how concepts and skills were related | 1 | 2 | 3 | 4 | 5 | N |
| • Enabled me to apply knowledge and skills                           | 1 | 2 | 3 | 4 | 5 | N |

Comments:

<b>3. The Activities:</b>	<b>Very Poor</b>	<b>Poor</b>	<b>Average</b>	<b>Good</b>	<b>Very Good</b>	<b>N/A</b>
• Clear and understandable	1	2	3	4	5	N
• Relevant to this topic	1	2	3	4	5	N
Comments:	1	2	3	4	5	N

#### **4: What were the three most important things you learned?**

(1)

(2)

(3)

The most effective part of the training in helping me to understand intimate partner violence was:

<b>5. Overall impression</b>	<b>Very Poor</b>	<b>Poor</b>	<b>Average</b>	<b>Good</b>	<b>Very Good</b>	<b>N/A</b>
• The knowledge and skills from this session are applicable to my job	1	2	3	4	5	N
• Taking everything into account	1	2	3	4	5	N

The piece of information that will be the most useful in my professional role was:

What questions are still unanswered after completing the training program? What additional exercises would you have liked to discuss?

## 6. Additional Comment

**Appendix D2:**

**French Data Collection Tools\***  
**and**  
**Workshop Evaluation Form**

\*Note: The Key Informant Consent Form, Key Informant Questionnaire and the Trainee Survey were not translated into French as respondents available for this evaluation participated in English.



## **Lettre d'information – travailleuses et travailleurs sociaux**

Objet : Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux — Formation des formateurs

Monsieur, Madame,

Intervenir dans des situations de violence conjugale est l'un des aspects les plus difficiles du travail social. Souvent, les travailleuses et travailleurs sociaux rencontrent des victimes et des survivants d'une telle violence au cours de leurs années de pratique. Les interventions réussies reposent sur des pratiques efficaces. Au New Brunswick, même si les travailleuses et travailleurs sociaux ont toujours cherché à relever les défis particuliers auxquels doit faire face leur clientèle, il y a beaucoup d'obstacles à surmonter en intervenant auprès d'une victime de violence conjugale. Tout d'abord, bon nombre de travailleuses et de travailleurs sociaux n'ont jamais reçu de formation officielle en vue de s'occuper de la situation complexe des victimes de violence conjugale, qui peuvent être victimes d'une vaste gamme de mauvais traitements en plus de la violence physique. Les travailleuses et travailleurs sociaux ne peuvent pas toujours reconnaître les signes de violence conjugale, surtout dans les cas où le counselling qu'ils assurent porte sur une toute autre question. Pour ces raisons et beaucoup d'autres aussi, les femmes victimes de violence conjugale ne divulguent pas toujours la violence au système de soutien officiel, qui comprend le travail social, et ne reçoivent pas l'aide dont elles ont besoin pour vivre une vie sans la violence.

Nous vous remercions d'avoir participé au programme de formation des formateurs intitulé *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux*, qui a été assuré en 2010 par le Centre Muriel McQueen Ferguson pour la recherche sur la violence familiale. Cette formation a permis aux travailleuses et aux travailleurs sociaux de mieux comprendre la dynamique de la violence conjugale, la nature de la violence, les raisons pour lesquelles elle se produit, le processus pour y mettre fin et les répercussions sur la vie de chaque personne touchée, qu'elle soit victime, agresseur ou enfant.

J'ai le plaisir de vous informer que l'Association des travailleurs sociaux du Nouveau-Brunswick et le Centre Muriel McQueen Ferguson pour la recherche sur la violence familiale ont obtenu

un financement pour évaluer le programme de formation *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux*. Nous voudrions vous inviter à participer à une discussion de groupe pour donner votre opinion sur la formation et le contenu. Nous espérons organiser trois discussions de groupe à l'échelle de la province. Les discussions seront animées par un chercheur et une adjointe à la recherche. Toute information qui pourrait permettre de vous identifier demeurera confidentielle. L'enregistrement sur bandes sonores est transcrit et nettoyé de toute information permettant de vous identifier. À titre d'exemple, les noms de personnes qui participent aux discussions seront remplacés par un numéro de code dans la transcription.

Pour participer à une discussion de groupe ou obtenir de plus amples détails sur le projet, veuillez communiquer par téléphone ou par courriel avec Rina Arseneault, directrice adjointe du CMMF, ou avec Miguel LeBlanc, directeur général de l'ATSNB.

Rina Arseneault, TSI  
Directrice adjointe du CMMF  
[rinaa@unb.ca](mailto:rinaa@unb.ca)  
(506) 458-7137

Miguel LeBlanc, TSI  
Directeur général de l'ATSNB  
[mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca)  
(506) 459-5595



## Travailleurs sociaux

### Formulaire de consentement

Je soussigné (e) (prénom et nom de famille) \_\_\_\_\_ consens librement à participer à la recherche intitulée : «Évaluation du programme de Formation - Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux — Formation des formateurs ».

J'ai pris connaissance de la lettre d'information et je comprends que

1. Le but du groupe de discussion est d'évaluer l'efficacité du programme de formation des formateurs *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux*. Cette discussion ne devrait pas durer plus de deux heures.
2. Vous êtes libre de participer à ce groupe de discussion. Vous pouvez aussi mettre fin à votre participation sans conséquence négative ou préjudice et sans avoir à justifier votre décision. Pour faciliter la transcription, le groupe de discussion nous enregistrerons les discussions. Toute information qui pourrait permettre de vous identifier demeurera confidentielle. L'enregistrement sur bandes sonores sera transcrit par l'assistante en recherche. La transcription des discussions sera gardé sous clé au Centre Muriel McQueen Ferguson et les bandes sonores seront détruites un an après la fin de la recherche.
3. Si pour quelques raisons, vous n'êtes pas confortable avec le fait que les groupes de discussions soient enregistrés, nous respecterons votre décision et l'assistante de recherche prendra des notes. Ces notes seront gardé sous clé au Centre Muriel McQueen Ferguson.
4. Seulement le formulaire de consentement contiendra votre nom et ce formulaire sera gardé sous clé au Centre Muriel McQueen Ferguson et dans un endroit différents que les bandes sonores et les transcriptions des groupes de discussion.
5. Pour assurer la confidentialité des renseignements fournis par les participants, les noms des participants ne paraîtront dans aucun rapport; les divers documents de la recherche seront codifiés et seul le chercheur aura accès à la liste des noms et des codes; les résultats individuels des participants ne seront jamais communiqués.

6. Nous demandons aux participants, incluant moi-même, de respecter la confidentialité et d'éviter de parler ailleurs des renseignements qui peuvent permettre d'identifier une autre personne.
7. Je comprends que même si nous nous efforçons d'assurer la confidentialité, que les autres personnes qui participent au groupe connaissent mon nom et mes opinions et, par conséquent, nous ne pouvons pas garantir la confidentialité
8. Nous voudrions vous rappeler également que nous sommes obligés de signaler aux autorités toute divulgation de mauvais traitement d'un mineur, et nous vous demandons d'en tenir compte lorsque vous participez aux discussions.
9. un court résumé des résultats de la recherche sera expédié aux participants qui en feront la demande en indiquant l'adresse où ils aimeraient recevoir le document, juste après l'espace prévu pour leur signature.

Enfin, je comprends que toute plainte ou critique à propos de cette évaluation, peuvent être rapportées à la directrice par intérim du Centre Muriel McQueen Fergusson pour la recherche sur la violence familiale (CMMF), Madame Nancy Nason-Clark, PhD. (506) 4458-7440 ou au président du Comité d'éthique de la recherche de l'Université du Nouveau-Brunswick, Monsieur Steve Turner, PhD., 506 458 7433, par courriel [turner@unb.ca](mailto:turner@unb.ca). Si vous avez des questions ou vous aimeriez obtenir de plus amples détails sur le projet, veuillez communiquer par téléphone avec le CMMF (506) 453-3595 et laisser un message pour un des chercheurs ou vous pouvez communiquer par courriel avec Rina Arseneault, directrice adjointe du CMMF, ou avec Miguel LeBlanc, directeur général de l'ATSNB.

**Nous vous remercions d'avoir lu ce formulaire et de considérer participer dans cette étude.**

## Consentement

Je consens librement à participer à la recherche intitulée Évaluation de l'efficacité du programme de formation des formateurs *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux*

\_\_\_\_\_  
Signature du participant, de la participante

\_\_\_\_\_  
Date

Nom (imprimé) : \_\_\_\_\_

## Court résumé

Oui je veux un court résumé de l'étude

Nom \_\_\_\_\_

Courriel : \_\_\_\_\_

Ou encore adresse postale)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ***Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux***

### **Formateurs des travailleuses et travailleurs sociaux – Groupe de discussion semi-structuré Questionnaire**

#### **Introduction**

Merci d'avoir accepté de participer à cette discussion de groupe. Vous avez tous participé au programme de formation des formateurs *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux*. Je m'appelle \_\_\_\_\_ et je vais animer la discussion de groupe. Je fais partie d'équipe chargée de l'évaluation du programme de formation des formateurs. J'aimerais aussi vous présenter \_\_\_\_\_, qui fait partie de l'équipe d'évaluation aussi et qui va prendre des notes pendant nos discussions.

#### **Contexte**

Intervenir dans des situations de violence conjugale est l'un des aspects les plus difficiles du travail social. Souvent, les travailleuses et travailleurs sociaux rencontrent des victimes et des survivants au cours de leurs années de pratique. La réussite des interventions dépend de l'efficacité des pratiques.

Le Centre Muriel McQueen Fergusson pour la recherche sur la violence familiale (CMMF), l'Association des travailleurs sociaux du Nouveau-Brunswick (ATSNB), la Direction des questions féminines du Bureau du Conseil exécutif et le ministère du Développement social du Nouveau-Brunswick ont collaboré à la création d'un programme de formation des formateurs qui est adapté aux besoins des travailleuses et travailleurs sociaux. Des groupes de discussion se sont réunis dans l'ensemble de la province, et des discussions en anglais et en français avaient comme objectif de faire en sorte que la formation réponde aux besoins des travailleuses et travailleurs sociaux. Deux comités composés de travailleuses et travailleurs sociaux ont guidés la démarche, soit un comité de travail et un comité consultatif.

Cette formation a permis aux travailleuses et aux travailleurs sociaux de mieux comprendre la dynamique de la violence conjugale, la nature de la violence, les raisons pour lesquelles elle se produit, le processus pour y mettre fin et les répercussions sur la vie de chaque personne touchée, qu'elle soit victime, agresseur ou enfant. Grâce à l'aide fournie par nos quatre premiers formateurs, un projet pilote de formation a été assuré en septembre 2009. Depuis lors, la formation a été assurée en anglais en février 2010 et en français en mai 2010.

Afin d'évaluer l'efficacité du programme de formation des formateurs *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux*, nous aimerions connaître vos impressions sur le programme de formation et ses répercussions.

Nous espérons entendre pendant les discussions du groupe toutes les opinions et les idées que vous pouvez nous offrir. Nous tenons à faire en sorte que tout le monde ait l'occasion de prendre la parole et nous vous demandons de parler une personne à la fois.

Nous voulons vous assurer que tous les renseignements discutés ici sont confidentiels et qu'aucun nom ne sera attaché à de tels renseignements. **Même si nous nous efforçons d'assurer la confidentialité**, nous vous rappelons que les autres personnes qui participent au groupe connaissent votre nom et vos opinions et, par conséquent, nous ne pouvons pas garantir la confidentialité absolue. Nous demandons aux participants de respecter la confidentialité et d'éviter de parler ailleurs des renseignements qui peuvent permettre d'identifier une autre personne. Nous voudrions vous rappeler également que **nous sommes obligés de signaler aux autorités toute divulgation de mauvais traitement d'un mineur, et nous vous demandons d'en tenir compte lorsque vous participez aux discussions.**

Nous allons prendre des notes afin de bien saisir les questions qui sont soulevées par le groupe, et — avec votre permission — nous enregistrerons les discussions pour faciliter la transcription. Les discussions ne devraient pas durer plus de deux heures.

Avez-vous des questions avant de commencer?

**1) Comment en êtes-vous arrivé à participer à la formation?**

**2) Quelle était votre vision des objectifs du programme de formation des formateurs?**

**3) Si vous vous en souvenez, le programme de formation des formateurs ne mettait pas l'accent sur les renseignements relatifs à la violence conjugale, car le programme visait plutôt des stratégies et des outils qui vous permettraient d'assurer la formation à vos pairs. Que pensez-vous du contenu du programme de formation des formateurs?**

Guides:

Le contenu a-t-il été pertinent?

A-t-il permis de formuler des suggestions de méthodes pédagogiques utiles?

Les documents distribués étaient-ils utiles?

Le contenu vous a-t-il aidé à vous préparer en vue d'assurer la formation à vos pairs?

**4) Que pensez-vous de la manière dont la formation a été dispensée?**

Guides:

La formation a-t-elle été organisée de manière logique?

A-t-elle été expliquée clairement?

Avez-vous eu la possibilité de poser des questions et d'échanger des idées sur les stratégies de formation?

Les aides visuels et la documentation afférente ont-elles été pertinentes?

La durée a-t-elle été convenable?

**5) Comment le programme de formation des formateurs vous a-t-il aidé à vous préparer en vue d'assurer à vos pairs la formation sur la violence conjugale?**

**6) Combien de séances de formation avez-vous assurées à vos pairs?**

**a. Combien de personnes ont participé à ces séances de formation?**

**b. Comment pouvons-nous communiquer avec les participants pour les inviter à participer à l'évaluation?**

**7) Comment était l'expérience d'assurer à vos pairs la formation sur la violence conjugale?**

**a. Quelque chose d'imprévu s'est-il produit au cours des séances que vous avez assurées?**

**8) Avez-vous connu des difficultés en assurant la formation?**

**a. Pouvez-vous suggérer des moyens de vaincre de telles difficultés?**

**9) Saviez-vous que la formation vise, entre autres, à vous inviter à songer à votre pratique du travail social relativement à la violence conjugale?**

**10) Le programme de formation des formateurs vous a-t-il sensibilisé davantage aux perceptions personnelles et aux expériences de la violence conjugale?**

(Si la réponse est « oui », veuillez passer à la question 10a. Si la réponse est « non », veuillez passer à la question 10b.)

**a. Si oui, de quelle façon le programme vous a-t-il sensibilisé?**

**b. Si non, quelles suggestions pouvez-vous formuler pour permettre de mieux sensibiliser de futurs participants au programme?**

**11) Qu'avez-vous retiré de votre participation au programme de formation des formateurs?**

**12) Quelles répercussions le programme de formation des formateurs a-t-il eues sur la façon dont vous avez assuré la formation à vos pairs?**

**13) Quelles répercussions le programme de formation des formateurs a-t-il eues sur la façon dont vous pratiquez le travail social?**

Guides : interactions avec la clientèle, démarches en matière d'intervention, collaboration avec d'autres organismes et ainsi de suite

**14) Quelles mesures prévoyez-vous prendre pour profiter de la formation dans l'avenir?**

**15) Avez-vous des suggestions à formuler pour améliorer le programme de formation des formateurs?**

**16) Accepteriez-vous de participer à un sondage lié à l'évaluation?**

Oui       Non

**Nous vous remercions encore une fois d'avoir participé à la discussion.**

***Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux***

**Sondage pour les formateurs en travail social**

En 2010, vous avez participé au programme de formation des formateurs intitulé *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux* offert par le Centre Muriel McQueen Fergusson pour la recherche sur la violence familiale. Le centre a obtenu récemment un financement permettant d'évaluer l'initiative de la formation, et le sondage qui suit fait partie du processus de collecte de données pour l'évaluation. Vous avez peut-être participé aussi à une entrevue ou à un groupe de discussion dans le cadre de l'évaluation.

Vos réponses demeureront anonymes. Nous vous remercions d'avoir pris le temps de répondre au sondage.

Je suis travailleuse sociale ou travailleur social occupant un poste :

- au ministère du Développement social du Nouveau-Brunswick
- dans un autre ministère de la province (veuillez préciser) \_\_\_\_\_
- dans une agence communautaire sans but lucratif
- dans une collectivité ou une agence d'une Première nation
- dans un autre organisme (veuillez préciser) \_\_\_\_\_

Je suis un formateur désigné au sein de mon organisme ou j'ai déjà offert une formation.

- oui                       non

**Objectifs de formation**

La formation des formateurs vise à avoir un effet positif important sur la capacité des travailleuses et travailleurs sociaux d'intervenir efficacement en cas de violence conjugale. Plus précisément, la formation permettrait aux participants de :

- mieux comprendre la violence conjugale et ses effets sur les victimes et les enfants ;
- reconnaître la fréquence et la sévérité de la violence conjugale ;
- aborder des questions de diversité et des obstacles particuliers qui se posent aux victimes ;
- tenir compte de l'importance de leur rôle professionnel dans les interventions efficaces ;
- se renseigner sur les politiques et procédures précises relativement aux interventions

- dans les situations de violence conjugale et les appliquer ;
- se renseigner sur les ressources communautaires et l'importance de la collaboration pour discuter des façons de prévenir la violence conjugale ;
- se renseigner sur l'impact de la violence conjugale sur la vie privée et la vie professionnelle des travailleuses et travailleurs sociaux.

À une échelle de 1 à 7 où 1 indique que vous êtes tout à fait en désaccord et 7 indique que vous êtes tout à fait d'accord, veuillez répondre aux trois questions suivantes :

1. Je connaissais les objectifs de la formation avant de m'inscrire à ce programme de formation pour les formateurs.

1      2      3      4      5      6      7

2. Les objectifs ont correspondu exactement aux buts et aux résultats de ce programme de formation pour les formateurs.

1      2      3      4      5      6      7

3. La formation que j'ai reçue a répondu aux objectifs fixés.

1      2      3      4      5      6      7

4. Avant de m'inscrire à ce programme de formation, je savais que je devais offrir de la formation sur la violence conjugale après avoir participé à la formation.

oui       non

### **Formation**

À une échelle de 1 à 7 où 1 indique que vous êtes tout à fait en désaccord et 7 indique que vous êtes tout à fait d'accord, veuillez répondre aux questions suivantes :

5. Le contenu de la formation a été organisé de manière logique.

1      2      3      4      5      6      7

6. Le contenu de la formation m'a préparé de manière utile pour offrir de la formation sur la violence conjugale.

1 2 3 4 5 6 7

7. Le contenu de la formation m'a fourni des stratégies pour intervenir dans les situations de violence conjugale.

1 2 3 4 5 6 7

8. Le contenu de la formation a été utile pour mon travail quotidien.

1 2 3 4 5 6 7

9. Les formateurs étaient compétents.

1 2 3 4 5 6 7

10. Les formateurs ont expliqué clairement les divers éléments de la formation.

1 2 3 4 5 6 7

11. Les formateurs ont répondu de manière efficace aux questions et aux préoccupations des participants.

1 2 3 4 5 6 7

12. Les formateurs ont créé un milieu propice à l'apprentissage.

1 2 3 4 5 6 7

13. J'ai eu la possibilité de poser des questions et d'échanger des idées.

1 2 3 4 5 6 7

14. Les aides visuelles et la documentation afférente ont été pertinentes.

1 2 3 4 5 6 7

15. La durée de la formation a été convenable.

1 2 3 4 5 6 7

### **Autoréflexion et soins de soi**

16. La formation m'a sensibilisé davantage à mes propres croyances et suppositions en tant qu'intervenant dans des situations de violence conjugale.

1 2 3 4 5 6 7

17. La formation m'a fait réfléchir sur la manière dont j'interviens dans des situations de violence conjugale.

1 2 3 4 5 6 7

18. La formation m'a fait réfléchir sur la manière dont j'interviens auprès des clients de milieux différents.

1 2 3 4 5 6 7

19. La formation m'a sensibilisé davantage à la manière dont les interventions dans des situations de violence conjugale peuvent toucher ma vie professionnelle.

1 2 3 4 5 6 7

20. La formation m'a sensibilisé davantage à la manière dont les interventions dans des situations de violence conjugale peuvent toucher ma vie personnelle.

1 2 3 4 5 6 7

21. La formation m'a sensibilisé davantage à la manière dont les interventions dans des situations de violence conjugale dans mon milieu de travail peuvent me toucher.

1 2 3 4 5 6 7

22. La formation m'a sensibilisé davantage à la manière dont les interventions dans des situations de violence conjugale dans mon milieu personnel peuvent me toucher.

1 2 3 4 5 6 7

23. La formation m'a donné des suggestions utiles sur la façon dont je peux composer avec les répercussions personnelles et professionnelles des interventions dans des situations de violence conjugale.

1 2 3 4 5 6 7

**Préparation en vue d'offrir de la formation**

24. La formation m'a sensibilisé davantage à l'importance de connaître mes propres croyances et suppositions en tant que personne qui offre de la formation sur la violence conjugale.

1 2 3 4 5 6 7

25. La formation m'a fourni des renseignements utiles sur la façon dont je peux offrir de la formation sur la violence conjugale.

1 2 3 4 5 6 7

26. Le matériel fourni pendant la formation m'est utile en tant que formateur.

1 2 3 4 5 6 7

27. La formation m'a fourni des stratégies utiles pour offrir de la formation sur la violence conjugale.

1 2 3 4 5 6 7

28. Je me sens prêt à adapter la formation et le matériel de formation pour mieux répondre aux besoins de mes collègues.

1 2 3 4 5 6 7

29. Je me sens prêt à offrir de la formation sur la violence conjugale à d'autres travailleuses et travailleurs sociaux.

1 2 3 4 5 6 7

30. Je me sens prêt à offrir de la formation sur la violence conjugale à d'autres personnes, telles que des partenaires communautaires, des paraprofessionnels et d'autres professionnels.

1 2 3 4 5 6 7

### **Prestation des services de formation**

31. J'ai offert de la formation sur la violence conjugale après avoir participé au programme de formation des formateurs.

oui       non

*Si oui, passez à la question 32 ; si non, passez à la question 42.*

32. Je pense que j'ai pu offrir des renseignements utiles à mes collègues.

1 2 3 4 5 6 7

33. Je pense que j'ai pu organiser le contenu de la formation de manière logique.

1 2 3 4 5 6 7

34. Je pense que j'ai pu expliquer clairement les divers éléments de la formation.

1 2 3 4 5 6 7

35. Je pense que j'ai pu répondre de manière efficace aux questions et aux préoccupations de mes collègues.

1 2 3 4 5 6 7

36. Je pense que j'ai pu créer un milieu propice à l'apprentissage.

1 2 3 4 5 6 7

37. J'ai donné à mes collègues la possibilité de poser des questions et d'échanger des idées.

1 2 3 4 5 6 7

38. Mes collègues ont trouvé pertinentes les aides visuelles et la documentation afférente.

1 2 3 4 5 6 7

39. La durée de la formation que j'ai offerte a été convenable.

1 2 3 4 5 6 7

40. J'ai pu relever les défis qui se sont posés pendant la formation.

1 2 3 4 5 6 7

41. J'estime que la formation que j'ai offerte a été un succès. *Passez à la question 44.*

1 2 3 4 5 6 7

42. Je donnerai une formation sur la violence conjugale au cours des six mois à venir.

oui       non       je ne sais pas

43. Quelles sont les raisons pour lesquelles vous n'avez pas offert une formation sur la violence conjugale?

---

---

---

44. Avez-vous d'autres observations ou suggestions sur le programme de formation des formateurs?

---

---

---

Merci.



Page Web : [www.unb.ca/arts/CFVR](http://www.unb.ca/arts/CFVR)

***Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux***

Survivantes de violence dans les relations intimes

Lettre et formulaire de consentement

Je , (nom complet) \_\_\_\_\_ déclare que j'ai lu la lettre d'information et que je comprends que :

1. Je vais aider à évaluer l'efficacité du programme de formation des formateurs intitulé *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux* en participant à une entrevue téléphonique individuelle.
2. Ma participation est entièrement volontaire et je peux décider à tout moment de me retirer de l'entrevue et de retirer toutes les données à mon sujet.
3. L'entrevue sera transcrite. Tout ce que je dirai sera confidentiel. Aucun nom ne sera inscrit aux manuscrits dactylographiés. Tous les dossiers seront conservés dans un classeur verrouillé au Centre Muriel McQueen Fergusson.
4. Seul le formulaire de consentement signé portera mon nom, et ce formulaire sera mis sous clé dans un lieu distinct des notes de l'entrevue.
5. Dans toute présentation écrite ou orale des résultats de l'étude, mon identité sera protégée. Personne ne sera capable de retracer mes observations jusqu'à moi.
6. **Les chercheurs sont légalement tenus de signaler aux autorités toute divulgation de mauvais traitement d'un mineur, et nous vous demandons d'en tenir compte lorsque vous participez à l'entrevue.**
7. Sur le formulaire détachable ci-dessous, je peux indiquer si je veux obtenir un résumé des conclusions des recherches.

Enfin, je comprends que, si j'ai des préoccupations au sujet de l'étude, je peux téléphoner à la directrice du Centre Muriel McQueen Fergusson pour la recherche sur la violence familiale, M<sup>me</sup> Carmen Gill, au (506) 453-3595, ou au président du comité d'éthique de la recherche de UNB, M. Steve Turner, au (506) 458 7433 (courriel : [turner@unb.ca](mailto:turner@unb.ca)). En outre, si j'ai des questions à poser, je peux téléphoner au Centre Muriel McQueen Fergusson pour la recherche sur la violence familiale, au (506) 453-3595, et laisser un

message pour les chercheurs, ou je peux communiquer avec eux par courriel, au [rinaa@unb.ca](mailto:rinaa@unb.ca) ou au [mleblanc@nbasw-atsnb.ca](mailto:mleblanc@nbasw-atsnb.ca) (Miguel LeBlanc).

**Nous vous remercions d'avoir lu ce formulaire et d'avoir envisagé de participer à l'étude.**

**Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux**

**Déclaration de consentement de la participante**

J'accepte de participer à l'entrevue personnelle pour l'étude décrite ci-dessus.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Nom (en lettres moulées) \_\_\_\_\_

Numéro de téléphone : \_\_\_\_\_ Courriel : \_\_\_\_\_

**Demande de résumé pour la participante**

Oui, je veux obtenir un résumé des conclusions de l'étude.

Nom \_\_\_\_\_ Courriel \_\_\_\_\_

Autres coordonnées (si l'adresse électronique n'est pas fournie) :

\_\_\_\_\_  
\_\_\_\_\_

Veillez faire parvenir le formulaire de consentement signé, par télécopieur, à :

**Reni Han**  
**Évaluatrice**  
**MMF-IPV SW Training**  
**Télécopieur: (506) 363-1022**

Si vous ne pouvez pas envoyer par télécopieur votre formulaire de consentement, veuillez l'envoyer par courriel à Reni Han au [hanmartin@nb.aibn.com](mailto:hanmartin@nb.aibn.com) en transmettant aussi la déclaration suivante ou les déclarations suivantes :

« Je, \_\_\_\_\_(nom), déclare que j'ai lu la lettre et le formulaire de consentement pour les survivantes de violence dans les relations intimes et que j'accepte de participer à une entrevue personnelle pour l'évaluation du programme de formation des formateurs intitulé *Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux*. »

**Si vous voulez obtenir un résumé des conclusions de l'étude, veuillez signaler que vous voulez le recevoir.**

**Merci.**



## ***Comprendre les répercussions de la violence conjugale : améliorer l'intervention des travailleurs sociaux***

### **Sondage pour les survivantes de la Violence Conjugale**

*Vous avez participé récemment à un atelier sur le leadership pour des survivantes de violence conjugale intitulé « Atteindre son potentiel. ». Dans le cadre du dernier module, vous avez discuté de l'importance de pouvoir évaluer les programmes et les services.. Nous apprécierions votre aide pour nous faire part de vos observations quant aux aspects sur lesquels nous devrions nous pencher en évaluant le programme de formation des formateurs sur l'intervention des travailleurs sociaux de la province dans les situations de violence conjugale.*

*Les femmes victimes de violence conjugale peuvent profiter de l'intervention des travailleurs sociaux de divers organismes à diverses étapes de leur processus : par exemple, lorsqu'elles sont toujours dans une relation violente, tout de suite après le départ ou plus tard lorsqu'elles commencent à bâtir une nouvelle vie. Elles peuvent aussi profiter de l'intervention d'un travailleur social en raison de leurs enfants.*

*Afin d'aider les travailleurs sociaux à mieux intervenir dans des cas de violence conjugale, le Centre Muriel McQueen Ferguson pour la recherche sur la violence familiale a créé un programme de formation en collaboration avec un comité consultatif. Le comité consultatif était composé de travailleurs sociaux qui travaillent dans divers domaines et qui peuvent être appelés à venir en aide aux clientes qui sont aux prises avec la violence conjugale. Le programme vise à former des travailleurs sociaux afin que ceux-ci puissent, à leur tour, former leurs collègues sur les différents aspects de la violence conjugale. Le programme vise aussi à les aider à examiner leurs propres attitudes à l'égard de la violence conjugale pour leur permettre de devenir plus conscients d'eux-mêmes lorsqu'ils viennent en aide aux femmes victimes de violence conjugale.*

*Nous aimerions entendre ce que vous avez à dire sur le programme de formation que les formateurs ont suivi, ainsi que sur le contenu de la formation qu'ils offriront à d'autres travailleurs sociaux.*

*Tout d'abord, nous vous demandons de nous donner vos observations sur le contenu du programme de formation pour les travailleurs sociaux.*

1. Si les travailleurs sociaux reçoivent une formation relative à la conjugale, quels types de connaissances devraient-ils acquérir?

2. Pensez-vous qu'il est important que les travailleurs sociaux soient conscients de leurs propres attitudes envers la violence conjugale? Veuillez expliquer.
  
3. Je vais vous poser 21 questions qui vous permettront d'indiquer l'importance que vous accordez à chaque aspect de la formation. À une échelle de 1 à 7 où 1 indique que l'aspect n'est pas important et 7 indique que l'aspect est extrêmement important, veuillez indiquer dans quelle mesure il est important que les travailleurs sociaux :

découvrent les comportements associés à la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

comprennent les différentes manières de penser à la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

comprennent la dynamique liée au cycle de la violence.

1	2	3	4	5	6	7
pas						extrêmement
important						important

prennent connaissance des répercussions sur les victimes de la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						Important

comprennent la difficulté de quitter une relation violente.

1	2	3	4	5	6	7
pas						extrêmement
important						Important

reconnaissent les besoins et les obstacles uniques qui se posent aux femmes issues de cultures et de milieux différents : par exemple, personnes âgées, immigrantes, femmes autochtones, femmes handicapées, familles militaires, et ainsi de suite.

1	2	3	4	5	6	7
pas						extrêmement
important						Important

répondent aux besoins des femmes issues de cultures et de milieux différents.

1	2	3	4	5	6	7
pas						extrêmement
important						important

connaissent les protocoles provinciaux relatifs à la violence contre les femmes.

1	2	3	4	5	6	7
pas						extrêmement
important						important

comprennent les aspects juridiques des interventions dans des situations de violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

comprennent les aspects éthiques des interventions.

1	2	3	4	5	6	7
pas						extrêmement
important						important

connaissent les politiques relatives aux interventions.

1	2	3	4	5	6	7
pas						extrêmement
important						important

puissent évaluer les risques liés à une situation.

1	2	3	4	5	6	7
pas						extrêmement
important						important

soient capables d'aider une victime à établir un plan de sécurité.

1	2	3	4	5	6	7
pas						extrêmement
important						important

puissent appuyer les femmes ayant des besoins complexes — par exemple, des femmes aux prises avec des dépendances ou des problèmes de santé mentale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

comprennent les répercussions sur les enfants de la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

connaissent les ressources et les services locaux offerts aux femmes qui sont aux prises avec la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

se rendent compte de leurs propres valeurs relatives à la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

se rendent compte de leurs propres croyances relatives à la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

se rendent compte de leurs propres préjugés et stéréotypes concernant les femmes qui sont aux prises avec la violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

se rendent compte de leurs propres attitudes lorsqu'ils interviennent dans une situation de violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

se rendent compte de leurs propres réponses lorsqu'ils interviennent dans une situation de violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

*Nous portons maintenant notre attention sur les travailleurs sociaux qui suivent une formation en vue de devenir formateurs.*

4. En tant que travailleurs sociaux qui reçoivent une formation pour devenir des formateurs, quels types de connaissances devraient-ils viser? (*question incitative : s'agit-il des mêmes connaissances mentionnées ci-dessous? Les formateurs auraient-ils besoin d'autres connaissances pour offrir de la formation?*)
5. Quelles compétences les travailleurs sociaux devraient-ils viser à acquérir au moyen de la formation des formateurs? (*exemples : animer des discussions de groupe, évaluer les besoins des participantes en matière d'apprentissage, aider les participantes à faire de la réflexion personnelle, stimuler les groupes ou adapter le contenu pour mieux répondre aux besoins des participantes*).
6. Pensez-vous qu'il est important que les travailleurs sociaux qui donnent une formation se rendent compte de leurs propres attitudes envers la violence conjugale et de la manière dont ces attitudes peuvent avoir une influence sur la formation qu'ils offrent? Veuillez expliquer.
7. Je vais vous poser cinq questions qui vous permettront d'indiquer l'importance que vous accordez à chaque aspect du programme de formation des formateurs. À une échelle de 1 à 7 où 1 indique que l'aspect n'est pas important et 7 indique que l'aspect est extrêmement important, veuillez indiquer dans quelle mesure il est important que les travailleurs sociaux se rendent compte des aspects suivants lorsqu'ils assurent une formation :

leurs propres valeurs relatives à la violence conjugale.

1	2	3	4	5	6	7
pas important						extrêmement important

leurs propres croyances relatives à la violence conjugale.

1	2	3	4	5	6	7
pas important						extrêmement important

leurs propres préjugés et stéréotypes concernant les femmes qui sont aux prises avec la violence conjugale.

1	2	3	4	5	6	7
pas important						extrêmement important

leurs propres attitudes lorsqu'ils interviennent dans une situation de violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

leurs propres interventions lorsqu'ils interviennent dans une situation de violence conjugale.

1	2	3	4	5	6	7
pas						extrêmement
important						important

8. Avez-vous d'autres suggestions à faire au sujet du programme de formation des formateurs visant à aider les travailleurs sociaux à intervenir dans des situations de violence conjugale?

Nous vous remercions pour le temps que vous avez consacré à répondre au sondage.

# Évaluation de la Formation

Les formulaires d'évaluation de la formation ont été complétés par :

- Les formateurs immédiatement après avoir assisté à l'atelier de la formation des formateurs;
- Les collègues immédiatement après avoir assisté aux ateliers facilités par les formateurs

Ces formulaires dûment remplis ont été compilés et analysés pour cette évaluation.

## ÉVALUATION

### Comprendre les répercussions de la violence conjugale : Améliorer l'intervention des travailleurs sociaux

- Si un des points ne s'applique pas, veuillez cocher S.O (sans objet).
- Vos commentaires sont grandement appréciés. Si vous manquez d'espace, utilisez le verso du formulaire.
- Tous les renseignements qui figurent sur ce formulaire sont confidentiels.

#### 1. Le formateur :

	Très Médiocre	Médiocre	Bien	Passable	Très bien	S.O.
• possédait bien la matière	1	2	3	4	5	
• respectait les expériences et les connaissances des participants	1	2	3	4	5	
• encourageait les participants à contribuer et à poser des questions	1	2	3	4	5	
• faisait preuve de souplesse (en adaptant l'horaire en fonction des besoins)	1	2	3	4	5	

Commentaires :

---

---

---

---

---

**2. Les séances de formation :**

	Très Médiocre	Médiocre	Bien	Passable	Très bien	S.O.
• avaient des objectifs clairs	1	2	3	4	5	
• étaient organisées de façon à montrer les liens entre les concepts et compétences	1	2	3	4	5	
• permettaient de mettre en pratique les connaissances et compétences acquises	1	2	3	4	5	

Commentaires :

---

---

---

---

---

**3. Les activités :**

	Très Médiocre	Médiocre	Bien	Passable	Très bien	S.O.
• étaient claires et faciles à comprendre	1	2	3	4	5	
• étaient en relation avec le sujet traité	1	2	3	4	5	

Commentaires :

---

---

---

---

---

**4. Quelles sont les trois choses les plus importantes que vous avez apprises?**

(1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(3) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

La partie de la formation qui m'a le plus aidé(e) à comprendre la violence conjugale était :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Impression générale:**

	Très Médiocre	Médiocre	Bien	Passable	Très bien	S.O.
• Les connaissances et compétences acquises durant la formation peuvent m'aider dans mon travail	1	2	3	4	5	
• Impressions globales de l'atelier	1	2	3	4	5	

L'information qui me sera le plus utile dans mes fonctions professionnelles est :

---

---

---

---

---

Y a-t-il des questions qui restent sans réponse à la fin de cette formation? Quels autres points auriez-vous aimé aborder?

---

---

---

---

---

**6. Autres commentaires :**

---

---

---

---

---

**Appendix E:**  
**Supplementary Tables and Figures for Trainers, Trainees and Women  
Survivors of IPV**

## Trainer Workshop Evaluation Forms: Supplementary Tables and Figures

**Table E1: Trainers Workshop Evaluation – Appropriateness of Training Delivery**

Trainers Workshop Evaluation - Training Delivery									
Trainers	Q1 n=30	Q2 n=30	Q3 n=30	Q4 n=30	Q6 n=29	Q7 n=29	Q8 n=27	Q9 n=27	Averages
Respondent #1	5	5	5	5	5	5	5	5	5
Respondent #2									
Respondent #3	5	5	5	5	5	5	4	4	4.8
Respondent #4	5	5	5	5	5	4	5	5	4.9
Respondent #5	5	4	4	5	4	4	4	4	4.3
Respondent #6	5	5	5	5	5	5	4	5	4.9
Respondent #7	5	5	5	5	5	5	5	5	5
Respondent #8	5	5	5	5	5	5			5
Respondent #9	5	5	5	5	5	3			4.7
Respondent #10	5	4	3	3	4	3	3	4	3.6
Respondent #11	5	5	5	5	5	3	4	5	4.6
Respondent #12	4	3	4	4	4	3	4	4	3.8
Respondent #13	5	5	5	4	3	4	4	4	4.3
Respondent #14	5	5	5	5	5	4	4	4	4.6
Respondent #15	5	5	5	5	4	4	4	4	4.5
Respondent #16	5	5	5	5	4	4	4	4	4.5
Respondent #17	5	5	5	5	5	5	4	4	4.8
Respondent #18	5	5	5	5	5	5	5	5	5
Respondent #19	5	5	5	5	4	4	4	4	4.5
Respondent #20	5	5	5	5	5	5	3	3	4.5
Respondent #21	5	4	5	3	5	5	4	5	4.5
Respondent #22	5	4	5	4	4	4	4	4	4.3
Respondent #23	5	5	4	5	5	4	5	4	4.6
Respondent #24	5	5	5	5	5	5	4	5	4.9
Respondent #25	5	5	5	5	3	3	3	4	4.1
Respondent #26	5	5	5	5					5
Respondent #27	5	5	5	5	4	4	5	5	4.8
Respondent #28	5	4	4	3	4	4	4	5	4.1
Respondent #29	5	5	4	3	4	3	3	4	3.9
Respondent #30	4	5	5	4	4	4	5	4	4.4
Respondent #31	4	4	5	5	3	3	3	4	3.9
Respondent #32									
Average	4.9	4.7	4.8	4.6	4.4	4.1	4.1	4.3	4.5
Standard Deviation	0.3	0.5	0.5	0.7	0.7	0.8	0.7	0.5	0.7
Mode	5	5	5	5	5	4	4	4	

**Table E2: Trainers Workshop Evaluation – Clarity of Objectives**

Trainers Workshop Evaluation – Clarity of Objectives	
Trainers	Q5 n=29
Respondent #1	5
Respondent #2	
Respondent #3	5
Respondent #4	5
Respondent #5	4
Respondent #6	5
Respondent #7	5
Respondent #8	5
Respondent #9	5
Respondent #10	4
Respondent #11	5
Respondent #12	4
Respondent #13	4
Respondent #14	5
Respondent #15	4
Respondent #16	5
Respondent #17	5
Respondent #18	5
Respondent #19	4
Respondent #20	3
Respondent #21	2
Respondent #22	3
Respondent #23	4
Respondent #24	5
Respondent #25	3
Respondent #26	
Respondent #27	5
Respondent #28	3
Respondent #29	5
Respondent #30	4
Respondent #31	3
Respondent #32	
Average	4.3
Standard Deviation	0.9
Mode	5

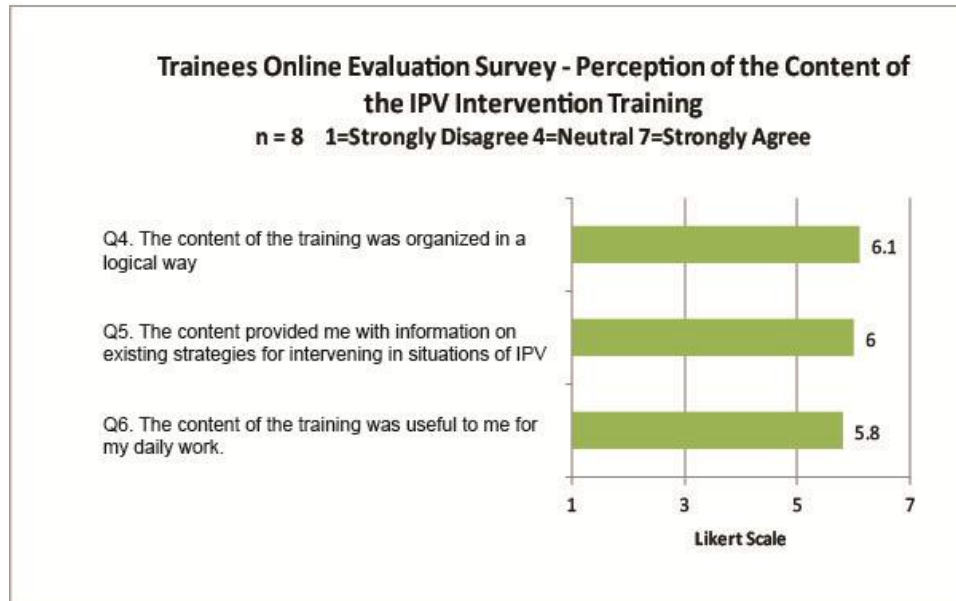
**Table E3: Trainers Workshop Evaluation – Appropriateness of Content**

Trainers Workshop Evaluation – Appropriateness of Content	
Trainers	Q10 n=28
Respondent #1	
Respondent #2	5
Respondent #3	5
Respondent #4	5
Respondent #5	5
Respondent #6	5
Respondent #7	5
Respondent #8	5
Respondent #9	5
Respondent #10	4
Respondent #11	4
Respondent #12	4
Respondent #13	5
Respondent #14	5
Respondent #15	4
Respondent #16	4
Respondent #17	5
Respondent #18	5
Respondent #19	4
Respondent #20	5
Respondent #21	3
Respondent #22	5
Respondent #23	4
Respondent #24	5
Respondent #25	
Respondent #26	
Respondent #27	4
Respondent #28	5
Respondent #29	2
Respondent #30	
Respondent #31	4
Respondent #32	
Average	4.5
Standard Deviation	0.7
Mode	5

**Table E4: Trainers Workshop Evaluation –  
Overall Evaluation of the Train-the-Trainer Workshop**

Trainers Workshop Evaluation - Overall Evaluation of the Trainers Workshop	
Trainers	Q11 n=26
Respondent #1	
Respondent #2	5
Respondent #3	5
Respondent #4	5
Respondent #5	5
Respondent #6	5
Respondent #7	5
Respondent #8	5
Respondent #9	5
Respondent #10	3
Respondent #11	4
Respondent #12	3
Respondent #13	5
Respondent #14	
Respondent #15	4
Respondent #16	4
Respondent #17	4
Respondent #18	5
Respondent #19	4
Respondent #20	3
Respondent #21	3
Respondent #22	5
Respondent #23	5
Respondent #24	5
Respondent #25	
Respondent #26	
Respondent #27	4
Respondent #28	4
Respondent #29	3
Respondent #30	
Respondent #31	3
Respondent #32	
Average	4.3
Standard Deviation	0.8
Mode	5

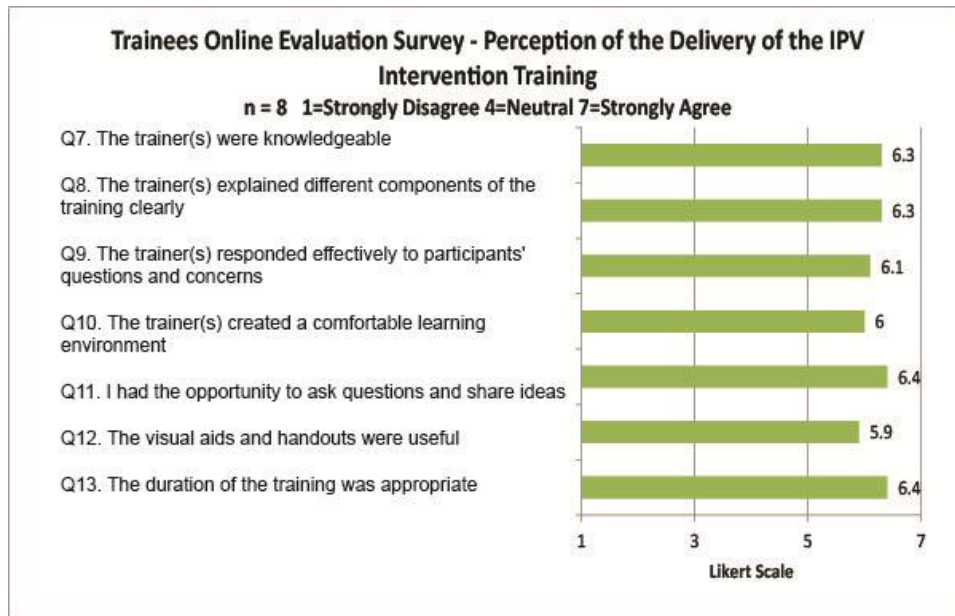
**Figure E1: Trainees Online Evaluation Survey – Perception of the Content of the IPV Intervention Training**



**Table E5: Trainees Online Evaluation Survey – Perception of the Content of the IPV Intervention Training**

Trainees Online Evaluation Survey – Perception of the Content of the IPV Intervention Training			
Trainees	Q4 n=8	Q5 n=8	Q6 n=8
Respondent #1	7	7	6
Respondent #2	7	7	7
Respondent #3	7	7	7
Respondent #4	6	5	5
Respondent #5	7	6	6
Respondent #6	4	6	6
Respondent #7			
Respondent #8	5	4	4
Respondent #9	6	6	5
Average	6.1	6.0	5.8
SD	1.1	1.1	1.0
Mode	7	7	6

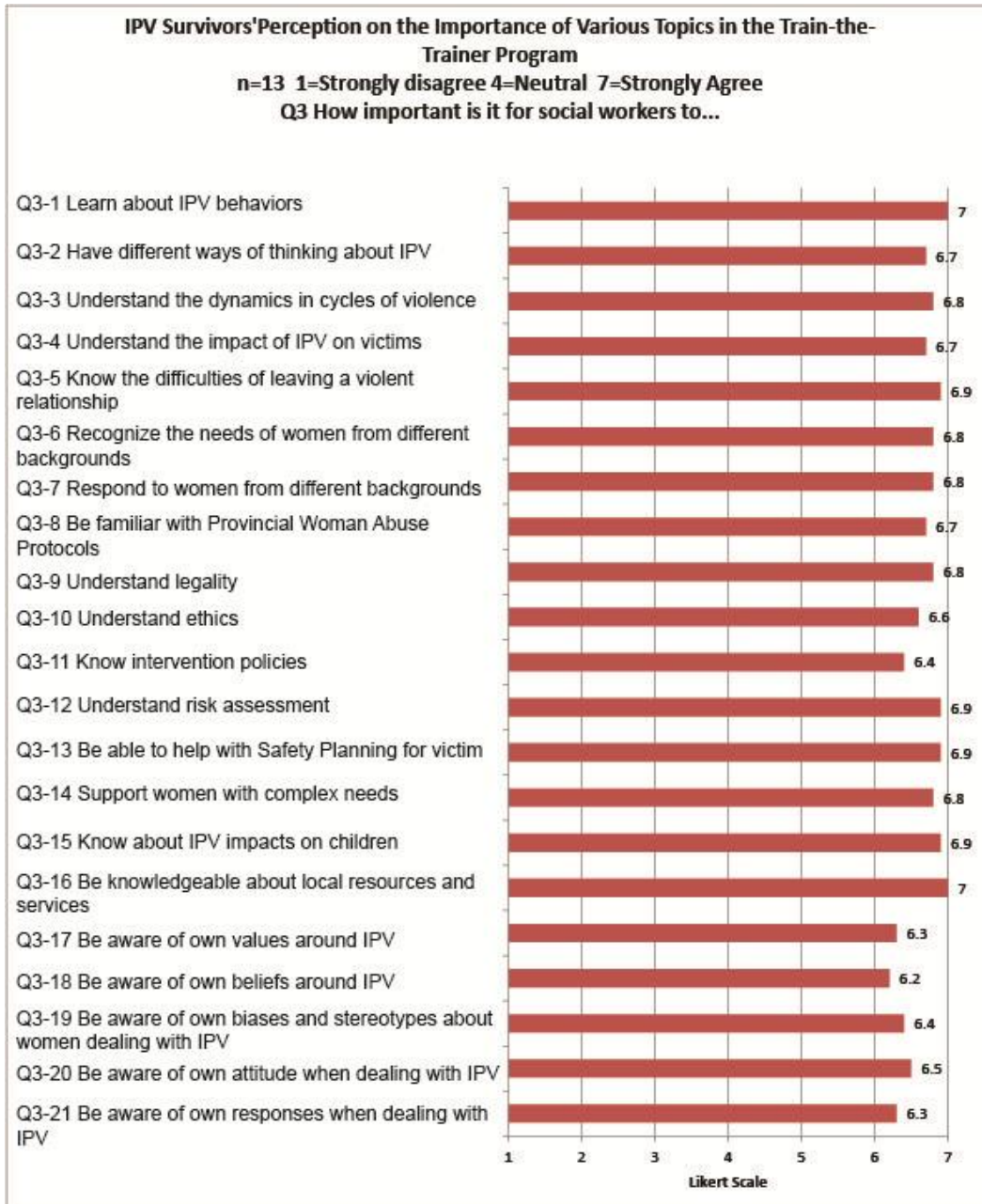
**Figure E2: Trainees Online Evaluation Survey – Perception of the Delivery of the IPV Intervention Training**



**Table E6: Trainees Online Evaluation Survey – Perception of the Delivery of the IPV Intervention Training**

Trainees Online Evaluation Survey - Perception of the Delivery of the IPV Intervention Training							
Trainees	Q #7 n=8	Q #8 n=8	Q #9 n=8	Q #10 n=8	Q #11 n=8	Q #12 n=8	Q #13 n=8
Respondent #1	7	7	7	7	7	7	7
Respondent #2	7	7	7	6	7	7	7
Respondent #3	7	7	7	7	7	7	7
Respondent #4	6	6	6	5	6	6	6
Respondent #5	6	6	6	6	7	7	7
Respondent #6	6	6	6	6	7	4	6
Respondent #7							
Respondent #8	5	5	5	5	5	3	5
Respondent #9	6	6	5	6	5	6	6
Average	6.3	6.3	6.1	6.0	6.4	5.9	6.4
SD	0.7	0.7	0.8	0.8	0.9	1.6	0.7
Mode	6	6	7	6	7	7	7

**Figure E3: IPV Survivors Perception of the Importance of Various Topics in the Train-the-Trainer Program**



**Table E7: IPV Survivors Perception of the Importance of Various Topics in the Train-the-Trainer Program**

IPV Survivors' Perception of the Importance of Various Topics in the Train-the-Trainer Program n=13																						
IPV Survivors	Q3-1	Q3-2	Q3-3	Q3-4	Q3-5	Q3-6	Q3-7	Q3-8	Q3-9	Q3-10	Q3-11	Q -12	Q3-13	Q3-14	Q3-15	Q3-16	Q3-17	Q3-18	Q3-19	Q3-20	Q3-21	Average
Respondent #1	7	7	6	7	7	6	6	7	6	6	6	6	7	6	7	7	5	5	6	6	6	6.3
Respondent #2	7	6	7	6	6	6	7	6	6	6	6	7	7	6	6	7	5	5	5	5	5	6.0
Respondent #3	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7.0
Respondent #4	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7.0
Respondent #5	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7.0
Respondent #6	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7.0
Respondent #7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7.0
Respondent #8	7	6.5	6	7	7	7	7	6	6	6	6	7	6	7	7	7	5	5	6	6	6	6.4
Respondent #9	7	4.5	7	7	7	7	7	5	7	7	2	7	7	7	7	7	5	5	4	4	4	5.9
Respondent #10	7	7	6	4	7	7	6	7	7	6	7	7	7	7	7	7	5	6	7	5	6.5	
Respondent #11	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	6	7	7	7	7	7.0
Respondent #12	7	7	7	7	7	7	6	7	7	6	7	7	7	7	7	7	7	6	7	7	7	6.9
Respondent #13	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7.0
Average	7	6.7	6.8	6.7	6.9	6.8	6.8	6.7	6.8	6.6	6.4	6.9	6.9	6.8	6.9	7.0	6.3	6.2	6.4	6.5	6.3	6.7
SD	0	0.7	0.4	0.8	0.3	0.4	0.4	0.6	0.4	0.5	1.3	0.3	0.3	0.0	0.3	0.0	0.9	0.9	0.9	0.9	1.0	0.7
Mode	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7

**Table E8: IPV Survivors Perception of Trainers Various Personal Factors in Delivering Training**

IPV Survivors Perception of Trainers Various Personal Factors in Delivering Training						
IPV Survivors	Q7-1	Q7-2	Q7-3	Q7-4	Q7-5	Average
Respondent #1	6	6	6	6	6	6
Respondent #2	5	5	5	5	6	5.2
Respondent #3	7	7	7	7	7	7
Respondent #4	7	7	7	7	7	7
Respondent #5	7	7	7	7	7	7
Respondent #6	7	7	7	7	7	7
Respondent #7	7	7	7	7	7	7
Respondent #8	5	5	5	7	6	5.6
Respondent #9	4	4	4	4	4	4
Respondent #10	5	5	5	7	7	5.8
Respondent #11	7	7	7	7	7	7
Respondent #12	7	7	7	7	7	7
Respondent #13	7	7	7	7	7	7
Average	6.2	6.2	6.2	6.5	6.5	6.4
SD	1.0	1.0	1.0	0.9	0.8	1.0
Mode	7	7	7	7	7	7