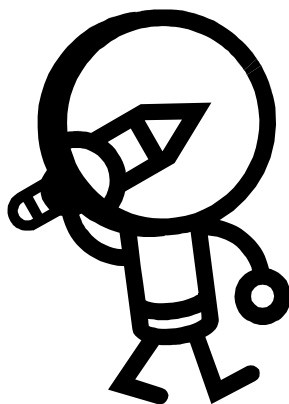# Changing the Script:
Thinking about our relationships with shelter residents

By Margaret Hobart for
The Washington State Coalition Against Domestic Violence
September 2006

Inside Scoop

Changing the Script:
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Does this **respect** the survivor's decisions?

Does this advance the **accountability** of individuals and groups to stop domestic violence?

Does this **change** the conditions that allow domestic violence to happen in our communities?

ABC Advocacy-based counseling means the involvement of a client with an advocate counselor in an individual, family, or group session with the primary focus on **safety planning** and on **empowerment** of the client through reinforcing the client's **autonomy** and **self-determination**. Advocacy-based counseling uses **non-victim-blaming problem-solving methods** that include: (1) Identifying the barriers to safety; (2) Developing safety checking and planning skills; (3) Clarifying issues; (4) Providing options; (5) Solving problems; (6) Increasing self-esteem and self-awareness; and (7) Improving and implementing skills in decision making, parenting, self-help, and self-care.

-Washington Administrative Code 388-61A-0145

Relationship Models

At the WSCADV trainings on shelter rules in June, it became clear to me that so much of how we approach our day-to-day work depends on how we conceive of our relationship to the people using our programs. How we characterize those relationships, and our vision for how they can be successful, reflects our values and aspirations. How we think about our relationships with residents can (consciously or unconsciously) influence how we go about communicating and trying to solve problems in a group living environment.

What is the best analogy for your relationship with the survivors of abuse using your program? Is it Parent/Child? Teacher/Student? Drill Sergeant/Recruit? Employer/Employee? Rescuer/Victim? Or is it Teammate/Teammate?

Most of us don't articulate our relationships this way; the underlying model only becomes clear when we look deeply at the way we handle day-to-day tasks and conflicts. One way to get at this is to look at how our shelters handle our most persistent problems by asking "What kind of relationship are we creating/modeling with our response?"

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Parent/Child

How to spot it: When a parent/child model dominates, staff may talk about making sure that participants in the program know that if rules are not followed, there are "consequences." Staff become overly concerned about how residents learn about those consequences. Rule infractions can take the form of discipline. Staff communication to (and about) residents may imply that residents could not function as responsible adults.

How it is problematic: When advocates come from a parent/child model, we underestimate residents' ability to analyze their situation, problem solve and take responsibility for their actions. It is a fact of life that where power is exerted, resistance arises. Thus, when we insist on exercising parental power over residents, we may encounter what feels like childish resistance. Residents might be interpreting the many rules and authoritarian communication as a signal that the advocates think they cannot take responsibility for themselves. In that environment, who among us could resist exercising some form of power to hold on to our sense of dignity?

Teacher/Student

How to spot it: When this model dominates, staff-resident interactions may be dominated by staff "teaching" the residents: about domestic violence, group living, how to parent, how to get help. Staff may routinely assume that residents make particular choices as a result of lack of knowledge rather than some other legitimate reason which, if known, could be addressed or respected.

How it is problematic: It is certainly our job as advocates to have more information about domestic violence and community resources than the average person. However, the risk of the teacher/student dynamic is that we will forget that the women using the program have much to teach us. We may become complacent in our expertise and miss opportunities to expand our own learning.

Our movement is rooted in listening to the life experiences of battered women and creating an analysis of violence and the community's complicity in that violence. If we do not continue to listen as learners, we may end up creating services and approaches to domestic violence based on old information or theory instead of grounded in survivors' current experiences of abuse. We may impose our understanding of the problem on survivors instead of hearing their experience.

Part of what we have to offer women using our program is information about how to get resources. However, many of the survivors who come to us already have their own expertise, born of necessity, regarding making ends meet, where to get help and how to work the system. If we interact with them solely as teachers and not learners, we may miss getting information that could enable us to help the next woman.

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Drill Sergeant/Recruit

How to spot it: In the military, boot camp is a process of breaking down and remaking the individual so that each person can fulfill their role. Expectations are clear and consequences for not meeting them are harsh. In boot camp, someone else controls when and what you eat, when and how long you sleep, how you accomplish basic tasks like hygiene and housekeeping, and when and where you are allowed to go. When we have fantasies of "remaking" residents (get them to stop eating junk food, watch too much TV, engage in this or that problematic behavior), using our rules about how they have to live while in our programs, we risk taking on the boot camp sergeant role. Overly controlling shelter rules about meal times, bedtimes, wake-up times, and so on can also put us in the role of drill sergeant.

How it is problematic: When we are acting in the drill sergeant role, we assume that our way is the best way, and if the residents would only follow our directions, they would see the benefits that would result. Our efforts become focused on getting residents to conform to "our way" versus supporting them in finding their own way, or in working on the residents' own goals regarding housing and obtaining support.

We also risk creating a situation in which the survivors staying with us feel they must lie to us about their everyday lives, and this undermines the possibility of good advocacy. Rules and programming aimed at improving residents' eating, smoking, hygiene and other health habits may be well intentioned. For example, we all know junk food is bad for us, but when a woman is in shelter and her life is in crisis, that isn't the best time to take on the difficult work of re-thinking eating habits. If shelter residents do manage to conform to rules aimed at forcing them to revamp their lifestyle, it does not necessarily mean we have done them any favors. People can and will do a lot of things to avoid violence and homelessness. But that doesn't mean they appreciate the "lessons" they are learning, or that they are the most important lessons for them to learn.

For a few people, a lot of structure can be a good experience. Some residents seem to do well in a highly structured, rule-bound environment, but that setting may not help them gain the skills they need to function in less structured environments. And many more do *not* do well; they resent the control and opt out of shelter in order to hold on to their sense of dignity and being an adult.

Employer/Employee

How to spot it: An employer/employee model can result in residents having work plans they must complete, along with evaluations and reviews. This model can be particularly apparent around rules regarding cleanliness. If your staff feels that staying at the shelter is the "pay" residents get in exchange for cleaning the shelter, then cleaning and other chores become a central

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part of the shelter stay. Residents' timeliness and thoroughness in completing these "jobs" can become a key point of evaluation and potential conflict. Many shelters institute a system of warnings and "write-ups," which can result in a resident being "fired" or "exited" if chores are not properly completed.

How it is problematic: We all appreciate a clean environment. However, opportunities for meaningful support and advocacy are lost when the dominant dynamic between advocates and residents becomes one of advocates asking survivors if they have completed their tasks versus having two-way communication. The employer role, like the teacher and drill sergeant roles, creates a dynamic in which the women using our programs are accountable to us for various assignments, but we are not accountable to them.

Rescuer/Victim

How to spot it: In the rescuer role, we expect ourselves to have all the answers and to do everything we can to save the women in our program. If we don't have the answer, either we have failed or the answer does not exist (because no one else could possibly have it either). We expect the participants using our program to conform to our idea of "innocent" victims. This can include an unstated understanding that "real" victims have not committed crimes or perpetrated violence. Sometimes rescuers also assume that those in the victim role do not have the skills and information to be assertive or solve the problems they are facing, and thus feel they must take on enormous responsibility to try to manage things for that person.

How it is problematic: When we are in this relationship with the survivors we serve, we set ourselves up to fail. Trying to rescue people cuts off the possibility of ongoing learning and collaboration, and it can interfere with survivors' ability to get in touch with their own power. When we expect the people using our programs to conform to the idea of a "victim," it can lead to thinking they cannot or should not demonstrate independence and competence. (If someone is competent, then they cannot be a "victim.") If we think this, consciously or not, we may think that women who assert their power or are clearly competent are actually taking advantage of us or our program, since "real" victims would not act that way.

We may also expect survivors to be grateful for being saved and find ourselves surprised when they are resentful of the rules and control we impose on them in the process of rescuing them. In turn, we may become resentful towards them, because they don't appreciate all that we are doing for them. While rescuing people, we may inadvertently communicate a message that we don't believe they could accomplish the tasks we are doing for them on their own. This can breed self-doubt and lack of confidence in the very people we hope to empower.

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What *should* we be striving for in our relationships with residents?

Having a sustained conversation in your agency about the organization's core values can help clarify the sorts of relationships we want to have with people who use our programs. An organization's core values should indicate its priorities in how staff and volunteers approach their work with program participants.

Teammember/Teammember

One possible model for the relationships we create with residents is workers on the same team. Typically, people on teams (whether sports teams or workgroup teams) have different strengths and roles. Teamwork is characterized by several things: shared learning, mutual accountability and respect, and minimized power imbalance.

In her excellent book, *Parenting in Public*, Donna Haig Friedman sees teamwork as essential to what she calls a "Family Support Framework" for providing services to families. As she explains:

> A family support framework emphasizes mutual accountability between helpers and families, leading to adult-to-adult interactions and shared responsibility for reaching desired goals. Using this model, helpers build on family strengths and provide parents and children with individualized support. Empirical evidence from the fields of child development and maternal and child health strongly suggests that a family support approach to service produces favorable outcomes, including parents having higher levels of perceived control over resources, more positive assessments of relationships between themselves and helpers, and a heightened sense of their own competencies. [1]

Shared learning: When advocates see themselves as learners, they bring that intention to their conversations with residents. This can help bring out the wisdom of survivors in the shelter. An ethic of shared and continuous learning enriches the program by creating an environment in which everyone can admit their areas of ignorance without shame. This allows growth, and it places the focus on *learning* from situations, rather than controlling them.

The Northwest Network of Bi, Trans, Lesbian and Gay Survivors of Abuse in Seattle has developed a set of guiding values for their agency's work. As an example of a way to frame the idea of shared learning, their value of "Learning" is articulated as follows:

> It is by cultivating our receptiveness — our skills of making relaxed, caring spaces for people to share experiences, analyses, challenges and visions — that

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[1] Donna Haig Friedman, *Parenting in Public: Family Shelter and Public Assistance*, Columbia University Press, 2000, p. 138.

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we create the conditions necessary for Learning. When we have the humility to ask, "What can I learn in this moment?" we become open to and grateful for situations that before may only have confounded, angered or hurt us. Learning renews, invigorates and expands our capacity for social and personal change. It connects us to our many histories and helps us imagine our possible futures.[2]

An ethic of shared learning also highlights the possibility that the residents of our programs may have something to teach us about abuse, living together, resources, problems in the system or our programs, and our communities. When we listen as people who have things to learn as well as information to share, we increase the space for the other person's dignity, intelligence and competency in the conversation.

Mutual accountability and respect: When we see ourselves working as a team with the residents, using our program to help them get what they need for their families, it becomes clear that responsibility and accountability go two ways. Residents have the right to expect that advocates will follow through with their part of the game plan. Working from a mutual accountability model, both parties can have expectations of each other, and both can ask each other about progress with agreed-upon tasks.

This sort of environment minimizes the power differentials so prevalent in parent/child or student/teacher type relationships. Holding ourselves accountable as advocates, and creating a space in which residents have the ability to hold us accountable, can form the foundation of honest, respectful relationships. Mutual accountability affords each person in the interaction dignity and respect, and this tends to bring out the best in people.

We can demonstrate our commitment to mutual accountability in numerous small and large ways. For example, an environment of mutual accountability and respect does away with any double standard about who is allowed to keep whom waiting. If we expect residents to be on time for particular meetings, then it is reasonable for residents to expect staff to be on time, and for staff to apologize and make amends when we are not.

Minimizing power differentials: Teamwork, mutual respect and shared learning cannot completely erase power differentials between staff and residents. As advocates, we hold power over the survivors who stay with us, because we make decisions about their ability to stay in the desperately needed housing that we provide. The goal is to *minimize* the impact of this power differential on our relationships and interactions with residents. The first step in minimizing power differentials is to make sure that the threat of being forced to leave the program does not hang over everything a resident does while in the program. For this reason,

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[2] View all eleven of The Northwest Network's guiding values on their website: http://www.nwnetwork.org/values.html.

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WSCADV's *Model Policy on Shelter Rules*[3] suggests that the threat of eviction should only be connected to three or four very problematic/dangerous behaviors (e.g., physical violence, using drugs in the building). Everything else (such as expectations we may have of residents about cleaning, attending meetings, and so on) is expressed as an expectation and can be addressed in the context of advocacy instead of punishment.

Advocacy as teamwork

Teamwork and mutual accountability do not require that everybody be the same, or have the same amount of skills, power, knowledge or access to resources. Teamwork is not about erasing differences in power or information. Instead, the model of teamwork speaks to the process we use with each other and the positive regard we have for one another as we seek to accomplish mutually agreed tasks. Teamwork means both the advocate and resident figuring out how to use their information and skills in complementary ways to achieve the goals set by the resident.

People on teams often bring different assets to the task at hand. Advocates bring information about community resources and domestic violence. Sometimes advocates bring established relationships with other agencies or systems in the community. The resident brings information about her specific needs and the needs of her children, survival strategies that have worked and failed in the past, what is likely to be safe, what feels dangerous, and a particular set of survival skills. One hallmark of good teamwork is that the team has been able to accomplish something that none of the individuals involved could have done by themselves. In terms of advocacy, that might mean combining the advocate's information about the intricacies of Section 8 or transitional housing with the resident's willingness to do the necessary footwork in order to secure safe housing after she leaves shelter.

Teamwork builds confidence and competence. With teamwork as the goal, advocates must be thoughtful about when and how to help, and how to support residents in taking active steps to help themselves. Together, an advocate and resident create a plan for achieving goals in which both have clear roles. The trick for the advocate is to find the balance between rescuing (doing everything) and expecting the resident to do it all on her own. The goal is to actively support people to do what they can for themselves, and then step in when they aren't able to do something on their own, but to provide the help in a way that allows the resident to learn and build a sense of competency for the next time. As an advocate, that may mean providing modeling (having the resident sit with you while you make a phone call on their behalf), coaching (talking through the various ways a meeting with a social worker might go and how to respond), information sharing (telling her what you know about how an agency sets its priorities

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[3] Available at www.wscadv.org/Resources.

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for who they serve), or support (sitting with the resident while they make a difficult phone call).

Creating relationships based on teamwork requires having the time to connect with the women using our programs and making sure services are individualized — meaning we are providing the services the resident wants and needs rather than something generic and pre-packaged. Shelter staff and administrators may worry that providing individualized services rather than offering one-size-fits-all services will be costly. Concerns about money can limit our thinking about how to make changes. But as Anne-Marie Zell Schwerin of the Walla Walla YWCA pointed out during the shelter rules training, we would never tell the women we work with: "You haven't got money? Sorry, there's no hope of making any change in your life." Instead, we encourage them to be creative, re-think priorities, access resources, and so on. We need to model this attitude and have the same expectations for ourselves and our agency. Program administrators need the courage and the support to analyze the domestic violence program's current situation, the desired outcome, and how to get there. This includes assessing both tangible (financial) and intangible (staff and resident morale, for example) costs and benefits of doing nothing or making changes.

Revisiting our priorities and being creative can be useful. For example, some programs have found that hiring a housecleaner to come in to the shelter one or two times a week (or even daily) means that their advocacy staff spend much less time enforcing rules regarding cleaning. This results in more time for individualized advocacy. Advocate turnover can go down because the work is more satisfying, which means less time spent on hiring and training, which leads to longer-serving advocacy staff with more skills and experience. Also, an examination of programming may reveal that a higher percentage than necessary focuses on managing the shelter environment rather than residents' priorities, or consists of services or information that residents do not see as a priority. Critical evaluation of this imbalance can allow a shift in energy and resources.

We also must recognize that advocates need appropriate support to work as team members. As Mary Lewis, an advocate for homeless families, writes in *Parenting in Public*:

> Shelter staff need to be allowed, encouraged and paid to take courses, attend workshops, and have access to adequate supervision and consultation. From many studies, it is clear that frontline shelter staff are underpaid and often lack an adequate educational background and job experience as well as on the job training and support. Without these supports, it is impossible to develop the kind of practice framework that allow for both clear boundaries and mutual,

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supportive help giving. . . . Staff [also] need time to process the stresses, successes and failures of their work. They need to learn and grow from their experiences. The creation of a shelter team that can evaluate, support and call its members to task when necessary is critical. This must be done in a safe and respectful manner, which takes time and the willingness to work through the process.[4]

Providing good support for advocacy staff should be part of the routine practices of all domestic violence agencies. When advocates are supported, they are able in turn to engage more effectively in the challenging work of providing individual, flexible support to battered women.

Conclusion

When we can clarify the type of relationship we want to build with the battered women who use our programs, then we can work together to create organizational environments that support those relationships, and thus make the best possible use of our talent and dedication. And, when we recognize the roles we *don't* want to take on, and notice when we are accidentally playing them, we can stop and ask ourselves, our colleagues and the survivors we work with how we can change the script.

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[4] Friedman, *Parenting in Public*, p. 182.

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