

# **SPDAT Suite of Tools and Its Application with Survivors of Domestic and Intimate Partner Violence: *Guidance***

OrgCode would like to thank the many Domestic and Intimate Partner Violence experts working in agencies and communities across North America that continue to implement the SPDAT suite of products to enhance safety and healing-centered care. For their continued guidance on improving community-based practices as well as OrgCode tools and trainings, we applaud your courage and tenacity.

We hope that this knowledge-sharing document will assist in the optimization of these tools with VAW/DV survivors in the future. Any errors identified within the document are the sole responsibility of OrgCode Consulting, Inc.



## Introduction

OrgCode acknowledges that the SPDAT products – as imperfect as they are – have been developed and tested to improve local efforts to prevent and end homelessness. Recognizing that no one tool can meet the needs of all people served by agencies and communities, it is the goal of this guidance document to share how these products have been successfully implemented by Violence Against Women/Domestic Violence (VAW/DV) agencies to promote safety and resilience within a system of care serving survivors.

This document has been created to share information regarding the use of the SPDAT suite of tools by VAW/DV agencies and homelessness response partners to increase the delivery of interventions that first focus on safety and risk assessments and secondly promote the delivery of housing and related supports to promote a return to housing stability within the community. In person-centered systems of care, safety screening is completed with all individuals and families that connect with community access points for service. With the identification of VAW/DV concerns, front line service providers activate/reactivate a referral to specialized VAW/DV crisis responsive services, where applicable and available. Secondly, once able to investigate re-housing options that are safe and appropriate within the community, the SPDAT suite of products can assist in ensuring that service delivery and service referrals available to survivors incorporate resilience promoting and housing focused supports.

Within a community care structure that promotes safety planning and customized housing-based support services, partner agencies have witnessed enhancements in their dedicated work to improve wellness and community integration for survivors of domestic and intimate partner violence, including human trafficking. Building a strong foundation across homelessness and VAW/DV responsive sectors to facilitate a comprehensive approach to housing, homelessness and VAW/DV provides the greatest opportunity for healing and stability for individuals and families.

Since the 1990's, research has identified the experience of violence as the leading cause of entry into homelessness for women<sup>1</sup>. It is also known that housing

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<sup>1</sup> Kannah, M., Singh, N., Nemil, M., & Best, A. (1992). Homeless women and their families: Characteristics, life circumstances, and needs. *Journal of Child and Family Studies*, 1, 155-165. doi:10.1007/BF01321283; Jasinski, J. L., Wesely, J. K., Mustaine, E., & Wright, J. D. (2002). The experience of violence in the lives of homeless women: A research project. Washington, DC: U.S. Department of Justice (NCJRS 211976); Wilder Research Center. (2007). Overview of homelessness in Minnesota 2006: Key facts from the

instability and crises is four times more likely for women who have experienced domestic and intimate partner violence compared to other women<sup>2</sup>. Based on the prevalence of violence in the experience of homelessness for so many women and their children, it is not surprising that VAW/DV agencies have struggled to meet the community needs for their specialized services.

Perhaps the [2019 research by the California Policy Lab](#) on the realities of unsheltered people provides the most stark illumination on the need for intersectoral work between the VAW/DV and the homelessness response sectors however. This research project which incorporated a large dataset of VI-SPDAT prescreens identified that significant proportions of both sheltered (34%) and unsheltered people (46%) reported that the experience of abuse and/or trauma had caused their current experience of homelessness. Unsheltered women reported abuse and/or trauma as the cause of their homelessness at much higher rates (80%) than either sheltered women (34%) or unsheltered men (38%)! Such a high prevalence of abuse and/or trauma as the driver of homelessness in unsheltered women demonstrates the need for improvements in both the VAW/DV and homelessness response sectors since even with our best efforts, both sectors have been unable to properly support women and their children from trauma of violence and homelessness. Perhaps an intersectoral approach holds the key for improved service delivery pathways and enhanced impacts in the future.

This document shares some of the approaches that have elevated the trauma responsive and housing supports happening in North American communities. Beyond the sharing of current approaches, OrgCode hopes that this document leads communities and agencies to investigate opportunities to optimize healing centered practices and approaches for a collective goal of ending homelessness and violence for women and children in Canada and the United States.

### **Approaches that have improved service pathways for VAW/DV survivors**

- The incorporation of safety screening at all entry/access points in communities has increased the likelihood of VAW/DV survivors receiving referrals and connections to specialized supports locally;

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statewide survey. Saint Paul, MN: Wilder Research.

<sup>2</sup> Pavao, J., Alvarez, J., Baumrind, N., Induni, M., & Kimerling, R. (2007). Intimate partner violence and housing instability. *American Journal of Preventive Medicine*, 32(2), 143–146. doi:[10.1016/j.amepre.2006.10.008](https://doi.org/10.1016/j.amepre.2006.10.008)

- The VI-SPDAT and SPDAT products investigate housing options and supports that would be of benefit to assist in the individual's/family's return to housing stability. Such housing focused tools should therefore rarely be administered upon first contact with clients. The use of the VI-SPDAT pre-screen too early in the engagement of participants, especially those that are new to homelessness or in the midst of a safety crisis, will not be helpful for individuals and families;
- Streamlined communication and referral processes between VAW/DV crisis hotlines and homelessness response partners has ensured that VAW/DV survivors gets to the right resource at the right time to assess their danger/risk and activates enhanced safety planning;
- In communities where VAW/DV shelter options are not readily available due to capacity issues, VAW/DV crisis counsellors have streamlined access to emergency shelter beds where women and their children can be safely sheltered within the homelessness response system. The concurrent delivery of healing centered services within the housing focused shelter can benefit survivors as long as the partnering agencies collaborate effectively;
- Coordinated Entry/Access systems prioritize women and families fleeing violence in their community prioritization processes, including the provision of housing-based supports to VAW/DV survivors that have access to specialized priority to vouchers, Social Housing and other Rent-Geared-to-Income resources locally and would benefit from housing-based case management;
- Once initial safety has been addressed and trauma responsive supports identified, the implementation of the SPDAT suite of products is optimized for needs assessment, referrals and case management supports dedicated to re-housing and long term housing stability;
- Formalized intersectoral relationships that are wrapped around shared VAW/DV survivors and promote enhanced communication and case conferencing opportunities, where possible, eliminate siloed service delivery and demonstrate successful outcomes for all survivors;
- Building capacity within all sectors of care to improve trauma informed care, cultural competence, safety planning and risk assessment must be enhanced for all front line staff.

## **Workflow that promotes safety screening at all community based entry/access points**

Coordinated Entry or Access processes ensure that people experiencing a housing crisis receive the supports and services needed to prevent and end their homelessness as quickly as possible, when safe to do so. To ensure that this approach incorporates a healing-centered strategy however, it is essential that VAW/DV agencies actively participate in the development of coordinated access/entry processes and policies locally. Coordinated entry systems that incorporate VAW/DV service providers into their design, development and implementation phases report that households experiencing domestic violence are prioritized locally, partnerships are strengthened, enhanced understanding of the VAW/DV resources and issues in the communities and more referrals for domestic violence services are made. In addition, individuals and families who seek homeless services can be screened for VAW/DV and referred to specialized supports for survivors. These communities also identify the benefits gained from cross-training opportunities for staff.

Since Coordinated Entry/Access systems primarily focus on preventing and ending homelessness as quickly as possible, it is important to ensure that community access points incorporate the following service map or workflow in their interactions with clients:



Client shares why they are seeking service.



**Safety screen**



**IMPLEMENT MOST APPROPRIATE INTERVENTION TO PREVENT & END HOMELESSNESS...**

- > Prevention;
- > Diversion;
- > Shelter;
- > Rapid Resolution;
- > Triage/Assessment of housing and support needs
- > Rapid Re-Housing;
- > Housing First/PSH



Address Immediate Safety, including 911 if required



Refer to VAW/DV Crisis Supports, if appropriate



**VAW/DV Services Provided:**

- Danger/Risk Assessment
- Shelter Options
- Trauma Responsive Supports



**VAW/DV Specific Re-Housing Supports Provided**

**AND/OR**

**Reconnect to Coordinated Entry/Access System as detailed above**



## How the VI-SPDAT questions align with supporting VAW/DV survivors

As identified earlier, the VI-SPDAT pre-screen and SPDAT assessment products were not specifically designed to investigate the experiences of individuals and families fleeing and/or recovering from domestic and intimate partner violence. Once danger/risk assessments have been completed by VAW/DV agencies, the immediate safety crisis of the household has been addressed and the household is seeking assistance with housing options, the VI-SPDAT and SPDAT products can assist in gaining housing stability in community, with or without housing-based supports. Access to specialized VAW/DV supports will likely continue in tandem to housing assistance.

In partnership with VAW/DV service agencies across North America, the following VI-SPDAT questions were specifically identified as providing insights into VAW/DV related concerns. Based on the responses to these questions, a referral to VAW/DV supports may be warranted, if not already activated, for the individual/family. These questions directly relate to investigations of support needs and case management practices incorporated into the full SPDAT assessment.

From the VI-SPDAT for Single Adults, 7 of the questions specifically identify safety risks or potential referral options:

- Most days can you:
  - Find a safe place to sleep
  - Access a bathroom when you need it
  - Access a shower when you need it
  - Get food
  - Get water or other non-alcoholic beverages to stay hydrated
  - Get clothing or access laundry when you need it
  - Safely store your stuff
- In the last 6 months, how many times have you:
  - Gone to the emergency room/department
  - Taken an ambulance
  - Been hospitalized as an inpatient
  - Used a crisis service or hotline like suicide prevention or domestic violence
  - Talked to police because you witnessed a crime, were the victim of a crime, were the alleged perpetrator of a crime, or because they asked you to move along because of loitering, sleeping in a public place or

- anything like that
- Stayed one or more night in jail, a holding cell or prison
- Since you have been homeless:
  - Have you been beaten up or assaulted
  - Have you threatened to beat up or assault someone else
  - Have you threatened to harm yourself or harmed yourself
  - Has anyone threatened you with violence or made you feel unsafe
  - Has anyone tried to control you through violence or threats of violence whether that be a stranger, friend, partner, relative or parent
- Does anyone trick, manipulate, exploit, or force you to do things you do not want to do?
- Where do you sleep most frequently?
  - Shelters
  - Transitional Housing
  - Couch Surfing
  - Outdoors
  - Car
  - Other
- Would you say that your current homelessness was caused by any of the following:
  - A relationship that broke down
  - An unhealthy or abusive relationship
  - Because family or friends caused you to lose your housing
- Has your homelessness been caused by any recent or past trauma or abuse?

In addition to the inclusion of the above questions, the VI-SPDAT for Families also incorporates an additional 5 specific and relevant questions that may provide insight into VAW/DV concerns within the family unit:

- Do you have any family legal issues like child custody, protection issues, divorce or anything like that being resolved in court or needing to be resolved in court that would impact your housing or who may live within your housing?
- At any point in the last six months, have any of your children been separated from you to live with another family member or friend?
- In the last six months, have any of the children experienced abuse or trauma?

- In the last six months, have the adults in the family changed because of a new relationship, a separation, incarceration, military deployment, or anything like that?
- Does your family have a support network for when you need help with your children or other things that come up?

### **Concluding thoughts from trauma responsive and housing focused VAW/DV partners**

Although the intersectionality between homelessness and domestic/intimate partner violence is complex, the quest to prevent and end these two traumas does not have to be completed in service siloes. Provision of collaborative and streamlined recovery oriented and healing centered services to individuals and families experiencing both housing crises and violence and/or trauma can be provided by community partners working together to enhance supports and resources for our neighbours. In fact, improved collaboration, cross-training and communication that espouses the tenets of trauma informed care into all sectors and aspects of our local system of care will better assist VAW/DV survivors regardless of their entry into care. The collective quest to incorporate survivor-driven practices that establish emotional safety; restore choice and control; facilitate survivors' connections to community supports; support coping strategies; respond to identity and context; and build strengths<sup>3</sup> will enhance both VAW/DV and homelessness response systems. Opportunities for enhanced resilience promoting and strength based assessment and support practices can indeed be optimized.

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<sup>3</sup> Goodman, L. A., Sullivan, C. M., Serrata, J., Perilla, J., Wilson, J. M., Fauci, J. E., & DiGiovanni, C. D. (2016). Development and validation of the Trauma Informed Practice Scales. *Journal of Community Psychology*. doi:[10.1002/jcop.21799](https://doi.org/10.1002/jcop.21799)