

# Victim-Centered Strategies for Effective Working Relationships

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Hello and welcome. My name is Sarah. I'm with the National Council of Juvenile and Family Court Judges. I am helping to facilitate today's presentation. Before we begin, I want to provide you with a brief overview of how our webinar system works and how you can interact with today's presenters and with each other. To the right of the PowerPoint, we have our Q&A box. Feel free to leave any questions you might have here. Please note that names of individuals will be removed from this section in the final version of this recording. You will also find a PDF copy of today's presentation as well as another document in the resources box below. To download, simply select the file and click the download file button. A new browser window will open. Once you confirm, your download will begin. At the end of this webinar, you will be redirected to complete a brief evaluation. We ask that participants please stay in the room until the webinar closes and the evaluation should come up automatically on your screen. If you experience any technical or audio issues, please let me know the Q&A box and I will contact you directly. Think you again for joining us. I will turn it over to our presenter so we can get started.

Thank you. Welcome to the National Criminal Justice Training Center webinar, Victim-Centered Strategies for Effective Relationships. This will be presented today by Dr. Anjali Nandi. I'm Greg Brown. I will moderate today. Before we begin today's presentation, here are some items that need to go over. This project was supported by a grant awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this program are those of the authors and do not necessarily reflect the views of the department of justice, office on violence against women. During the webinar, all attendees will be muted. Questions, comments, technology questions can be submitted via the Q&A box. Questions may be saved until the Q&A portion of the presentation or asked throughout the webinar. All questions and comments submitted are subject to be read aloud. But confidentiality will be maintained. A PDF handout of this presentation and full presenter biographies can be found in the resources section of the webinar platform. A short evaluation will appear at the conclusion of the webinar. We offer a certificate of attendance for participants who complete the evaluation and attend the live webinar. Certificates will be sent via email in the coming weeks. Poll questions will be asked during the webinar. Please respond probably as poll questions are only open for a short period of time. With that, let's try our first poll question. The question is which of the following best describes your role.

I'm going to close the poll question in 3, 2, 1.

Thank you for your participation. On pleased to introduce to you, oops, go ahead.

Sorry. I was just going to share the results are interesting and I know everybody can see them but I just wanted to point out that we have quite a few victim services and victim advocates on the call. So throughout this webinar, we will really work hard to make it relevant for everyone. But in particular, we will do that for victim services and victim advocates.

Thank you. I'm pleased to introduce our presenter, Dr. Anjali Nandi. Dr. Anjali Nandi is an associate with the national criminal Justice training Center and the chief probation officer for the state of Colorado. She is a published author having co-authored nine books. My name is Greg Brown. I will moderate today's webinar. I'm a program manager at the National Criminal Justice Training Center. I have about 30 years and probation experience including supervising a victims advocate unit as well as other specialized programming in corrections. I want to thank everyone today for joining us. And the time is now yours, Dr. Anjali Nandi.

Thank you. I noticed some folks are having audio issues. I want to cover that quickly. If you experience audio issues and connected to computer, you can call in using the telephone number. It is in the Q&A pod. The telephone number is 1-800-832-0736. Our access code is 999-8597. That information can also be found in a variety of different places. It is on the closed captioning and up at the top when you click on what looks like a phone. You will have that information there as well. If you have any other questions, please do not hesitate to use the Q&A box. You can ask merchants throughout the webinar. Greg and I will do our best to address them as we are talking or we will save them for the end. Please do not hesitate. I will start by going over some learning objectives I hope we can get to today. I will talk about the importance of effective relationships. Then we will work on the components of those effective relationships and how we develop them. In order to pay attention to the relationships we have both with just the victims but also the folks who have victimized them, then we will talk about, biases and the impact on interactions we have with folks.

Starting with the importance of relationships, we know based on a variety of different research that relationships really matter. It matters and influencing the outcome of whatever we are getting into in the conversation. If the relationship is strong, the likelihood that we will achieve our goal in the conversation is high. If our relationship is not, then it makes achieving our goal a lot harder. So if you are having a conversation with somebody who has been victimized by crimes and they have a particular goal in mind, your gold maybe, if the relationship is strong, it increases the likelihood that you both will be able to come to an agreement or a mutually agreed-upon solution. What this slide talks about is how we attribute different outcomes of conversations. The biggest driver of the is the person you are speaking with, of course the second biggest driver is relationships. The relationship really matters. We will spend a lot of time talking about what we mean by relationships, what it looks like, what the important pieces are. So that's about 30% of the outcome. That 50% is what we call placebo effect which is the expectation that folks have in the conversation, how they expect things to work. Then the last piece is the actual intervention that we use. So it's important to be paying attention to what relationship we are developing with that individual. Let's move to talking about some strategies to support relationships and to support structure within the relationship. It all starts with empathy. That means that empathy is the fastest way to convey to somebody that you care. As soon as a person if you care, they are

willing to work with you, they are willing to see your perspective. But they have to believe that you care about their perspectives. They have to believe that it matters. So empathy is the fastest way we can get there. The second piece to pay attention to his boundaries. Let's talk a little bit about boundaries. Boundaries mean clarity in the relationship. That means what is okay and what is not okay. It is about clear structure and clear expectations. We clarify boundaries not just when there's a problem but throughout. As part of clarifying boundaries is clarifying what the role is, what the expectations are, that they can have of you, and what expectations you have of them. There are times when we get into this really difficult situation when we are providing efficacy for victims or supporting them getting her needs met when sometimes they think we can do a lot more than we actually can. They think that our purview extends further than it actually does so just clarifying those kinds of things is really helpful. Having clear direction and the conversation which means both of you are clear on what is the goal of the conversation. There are three additional strategies that really support effective relationships. One is role clarification which I talked about a second ago. To go deeper into that, it is clarifying what the negotiables are and what the nonnegotiable czar. So what are things that we can have a conversation about and maybe come to a mutual agreement. What are things that are really nonnegotiable meeting that we really cannot find a way to agree to certain things so we will provide some examples of that as well. And then provided positive -- provided positive reinforcement as weekly as possible in the conversation, really helping people, catching them doing things right, so when you are having a conversation with somebody, let's say they are worried about something, they are worried about the person who victimized them and maybe they are not being supervised adequately or whatever their worry is, and in a conversation, anytime they demonstrate a positive skill like regulating themselves or making a report or something like that, jump on it, provide positive reinforcement because it strengthens that relationship. And be a guide. We will talk a lot about this piece which is really important. We will talk about the rescuer teacher triangle and how you can fall into certain traps and we will talk about how important is to be a guide in the relationship. We covered all the strategies and curious about areas that you struggle most with. If you think about these, think about empathy, boundaries, providing clear direction, maybe role classification, maybe reinforcement, being a guide, when you work with victims or whomever you are working with because we have other people on the call as well, where places you find yourself struggling the most? I will ask Sarah to start the poll question.

As we look at the results, I will keep the poll question up for a few more seconds so I can interpret the results. Most of us or a quarter of us struggle with reinforcement and boundaries. Those are the two big pieces. Empathy is the one we struggle with the least which is wonderful. Thank you, Sarah, for putting up the poll question. We can close it now and that would be great. Thank you. We struggle with boundaries a lot. It is difficult sometimes to establish clear boundaries. Sometimes we talk about it in terms of boundary deputy. -- Boundary the -- boundaried empathy. We are not saying it will be okay for that we will do something for them, we will take care of it. We are not making promises we cannot keep. Nor are we saying that anyone's behavior is okay. All we are doing is conveying understanding. This is the rub. It's easy when we convey understanding to then slide into the role of having to fix it. Sometimes we slide into the role of having to fix it for them. So it's really helpful to have clear boundaries and to know what is my to work on and what is theirs. What is their responsibility to fix and what is mine? We

will come back to this when we talk a little bit more about our victim rescuer prosecutor triangle sometimes called the drama triangle.

Let's understand why it is that it's hard to have these conversations with victims in particular, where they are coming from, and how easy it is to get caught in a tough loop with them. When somebody has been victimized in some way, no matter what way it is, somebody stole from them, somebody assaulted them, whatever the issue is, when they have been a victim of something else's behavior, they have suffered a particular kind of trauma. We call that particular kind of trauma interpersonal trauma. They suffered relational trauma, and impact or hit on interpersonal relationships. Unfortunately, that harm does not just apply to them and the person who harmed them. That hurt gets generalized across different relationships. I hope I am saying this clearly enough. What I'm trying to get across is that we need to pay attention to focusing on the relationship because the hurt happen to the relationship to the healing has to happen in the relationship. I will positive because I believe we have some audio issues happening. Sarah, can you help us out with this, please?

Yes. Thank you. I'm sorry, everyone. We are trying to troubleshoot on the backend as we move along with the presentation. Please sit tight. Please stop commenting in the Q&A box. It is overwhelming as we cannot respond to everyone individually. We are aware that there are audio issues. We are working with Adobe on the backend. We may have to pause and restart the audio so that everyone can hear. So please sit tight with us and please do not leave the webinar. We want you all to stay here.

I would say, Sarah, this is Greg, we will have a full recorded version of this webinar. So if you are in and out, it will be available to you. Just bear with us while we sort out these audio issues in the background. Thank you.

Thank you, Greg.

Okay. Just give me a couple of minutes while we figure this out. We might have to stop audio and restart it. So give us about two minutes to figure this out.

[ pause ]

Okay, everyone. I am testing audio. If someone can type into the Q&A box, it's not any better, okay. Okay. So it looks like half of you are saying it sounds great and half saying it is still scratchy. If it is scratchy, please call in using the 1-800 number. And connect on the phone if that's an option for you.

Sarah, are you ready for us to start again or do you want us to wait until people get a better connection?

I would say continue. That would be great. We can get everything recorded for you. It looks like half are saying that it is understandable, half saying it is not. We will troubleshoot the phone number on the backend and I would say go ahead and continue.

We will continue. And there will be a clear recording of this webinar. If it is unbearable for you, we understand that we will have this recording out and it will be clear and cover all the material. If you want to stick with us, please stick with us and the time is back to you, Dr. Anjali Nandi.

Thank you. I'm so sorry that this is, that audio is giving us so much trouble. That's no fun. So I will keep talking. I love the last comment somebody made. It's 2020. [laughter] So true. All right. I will keep rambling on. And we will keep an eye on the comments as well. All right. We were talking about being victimized. When we are victimized by somebody else, no matter what it is, somebody stole our car or somebody assaulted us, whatever it is, the impact on us is trauma. And trauma is an interpersonal work relational trauma. The problem with relational trauma is that it impacts the rest of our relationships. Unfortunately, the way we are as human beings, we do not separate between a trauma that happens in one relationship and a trauma that happens in another. Maybe you recognize these in your personal life as well. If you have had a bad relationship somewhere, you will carry that with you until you heal it. And so healing happens in the context of relationships if it is relational trauma, healing has to happen in relationships, not the same relationship with the hurt happened, but somewhere. And so this is important because we are trying to pay attention to this relationship and sometimes the only positive relationship that that particular person has is with you.

So when we have a relational trauma, it impacts a very particular part of our brain. It impacts our emotional brain also called our limbic system. Our limbic system is kind of in the center of our brain. On the slide, you will see it kind of highlighted in a very light blue color. The emotional brain focuses on the past. It refers back to that relational trauma. There are times when you might be having a conversation with somebody and it is really not going well not because of what you are doing necessarily the because the person cannot get out of their living system and you keep referring back to this old trauma. So what we are trying to do is help people get out of that emotional brain focus and get into their logical brain which is the frontal cortex, the forward-looking brain, the intellectual brain. One of the fastest ways to do that is to establish safety first. As soon as the brain, I am using the word conflict, but really, as soon as the brain does not feel safe, we have to establish safety first. And if we don't, the person's brain gets stuck and they are not able to hear us as well. They cannot engage in creative problem-solving. So we might say something like what are some solutions and they cannot go there. Their sense of humor is limited. It is harder for them to see complexity. They cannot remember a single instance of positivity. So the positive memory is compromised as well. Our job then is to help them get out of this. Whatever there's a question of safety, we start with the relationship that we start with empathy. The safety questions are about entering and staying in the conversation. So for the person you are talking with, for the victim, let's say, in the conversation, to enter is for them to believe that you have shared purpose with them. By that, I mean that you both are working on a similar goal. That is why they enter the conversation. So very quickly in a conversation, you need to establish that you are both working on the same goal. And remind them of that throughout the conversation. And then staying in the conversation is about them feeling empathy, for them to feel respected by you. Entering is not shared purpose and staying is about them feeling respected. Anytime you notice that they are feeling unsafe in the conversation, they are getting stuck in their living system, they are repeating themselves, they are talking about how nothing is ever going to work, nobody understands them, any of that, get out of the content and get back into establishing safety. A video to a friend. It's really helpful. -- Empathy is your friend. It's really helpful. Learn what exactly is this person asking. Sometimes all people are asking for is to be heard. Other times, what they are asking for is a solution.



We are talking about solutions. You do not have to come up with all the solutions. You do not have to come up with or be the one providing the solutions. You do not have to be executing the solution. They can be involved in that two -- and I also. Work hard to establish safety. What it takes sometimes as an apology, I'm sorry, it seems like I've upset you buy what I said, and it was really not my intention. That might be the apology. Contrast helps to establish safety by saying what the conversation is and is not about. So contrast is what the conversation is or is not about. And then establishing mutual purpose goes back to inviting them into the conversation. They are entering with a shared goal or mutual purpose in mind.

That's about paying attention to safety. And the way we focus on safety is by noticing when people are not feeling safe, when they kind of, when they flipped their lid. I just noticed a question where somebody says what was the brain and conflict. I would just go back for a second. When a brain is in conflict, it focuses on safety first. It's hard to hear so we get diminished hearing. We literally cannot hear the other person well. We lose our creativity. We lose our ability to problem solve. We get stuck in the past. We keep referring to the past. We lose our sense of humor. So those are some clues that 70 is, that there brain is stuck in this oh, my gosh I don't feel safe. And so ways to establish safety is to notice when this is happening and noticed what we call a flipped it. Some of you who have been on webinars with may have heard me talk about this. But a flipped lid is where we lose connection with the frontal cortex with of our thinking brain and we get stuck in the living system. So on the screen, if you can see the little hand, the sum is your living system and your fingers are the frontal cortex of the frontal cortex is the thinking part of your brain and the thumb or the living system is the emotional part of your brain and we get stuck in our emotional place. That is a flipped lid. And so signs of a flipped lid our signs of abraded conflict, they are reacting, there is a lack of humor or creativity, they are not able to process things really well, maybe there are big emotions or maybe the opposite as well, they are feeling numb, they are not being terribly logical, all of those are signs of a flipped lid.

As soon as you notice flipped lid, establish empathy as quickly as possible. Respect and empathy will be the fastest way to get somebody's way back down. What you are doing there is you are conveying care and concern and understanding. It's really hard to do this if you, yourself, do not feel calm. Sometime I say before we can really be there for somebody else, we have to be there for ourselves. We have in our brains these things called mirror neurons which pick up on the emotions that are happening with the other person, whether they are on the phone or in person with you or on the screen. Mirror neurons will pick up what is happening for them, the emotion. And so you want your neural or nervous system and check so that they are not picking up any worry from you. So it starts with you getting your system in check and then being there for somebody else. And so grounding techniques really help both keep the client calm and help keep you call as well, whoever you are talking with. And grounding techniques are about feeling your feet on the floor, wiggling her toes, essentially being present, being in the here and now, breathing health, exhaling, in particular, really helped, observing things in the room, naming things, talking about really concrete things, all of that is what helps people ground and helps reestablish safety. Let's talk a little bit about the drama triangle. For I do that, I will check in with Greg quickly to see if he has any questions that are popping up or any issues before I continue with the drama triangle.

I think trauma has come up a little bit. What can we expect, a person who is a victim or a survivor of a crime, what can we expect with respect to trauma and how might we, and maybe will cover this a little bit later, how might we recognize that with the flipped lid, can you talk a little bit about that how might we recognize that and what would be some strategies that we employ or even corrections people who have direct victim services responsibilities?

Great question. Anytime you're talking with anyone in the criminal justice world, the likelihood that there is some history of trauma is pretty high, whether they are victims or people who have harmed other people, there is a saying about hurt people. Just noted come from that lens. Frequently all the folks that we are working with have experienced some kind of trauma. You know that you are working with somebody who is currently experiencing trauma or stuck in their living system because of the way they show up. So when they show up with you, referencing the past repeatedly, like, this is not going to work because in the past he did not know the last person that I talked to was no help at all, how should I believe you because the last person who I talked with, you know, really messed things up, that is a great indicator that you have somebody who's brain is struggling right now. You do not have to be a trauma expert to be able to pick some of these things up. So they are kind of repeating himself, expecting the past, it's really hard for them to problem solve, and maybe they are also being, they have big emotions, they are being almost overreactive about things. Their emotion doesn't quite match the situation. That is another good indicator that you have, that you potentially have trauma on the table. Sometimes they are big reactions and sometimes there is no reaction at all to something you would have thought would have been a big reaction so the emotion does not quite match. So those are some of the things that you are paying attention to just know, is trauma what is the primary presenting issue and again I do not need to suggest that you need to be trauma experts or any of that. Is just really helpful for you to have that lens. And that lens helps us not make harsh judgments about people. So on my that days, on my grubby days, or days that I am exceptionally tired, it is very easy for me to jump to not helpful places when I'm having a conversation with somebody. I very quickly jump to, oh, my gosh, this person is so entitled, or oh, my gosh, they are being so defensive or they are being reader they are being borderline or all of these names that I would call the other person. And yet if I have my trauma lens, they are not actually doing all of those things. They are just working hard to keep themselves safe. And at that moment, that is all the brains can do. Having that frame. Sometimes having a trauma lens is really important because it allows to be more empathic with the person I'm talking with. I hope that helps. I know some of you are still struggling with audio. I'm sorry. Some of you seem to be hearing okay so we will just keep trudging along and, at some point, let's hope this all resolves itself. Greg, was the anything else before I continue with the drama triangle?

There's a question about substance abuse and the interplay. I think what reminded me of that question was you talking about kind of reserving judgment and having your victim services and impact lens on and the interplay there and some things we might want to pay attention to.

Substance use is hugely problematic for a variety of different reasons. A huge majority of that is because of the impact on our brains. Unfortunately, there are similar problematic impacts on our brains ended and had some of those experiences. By that, I mean that we get stuck in his need for immediate gratification. It is hard to delay gratification. So maybe some of you have

had a conversation with a victim calls and urges another part there is a need for you to think but fix it right now. That is an indication that there is something going on here where I want what I want right now. And that's a really common piece that you will see with addiction. So there is definitely an overlap. Thank you for bringing that up. Let's talk a little bit about the drama trying the drama triangle is quite old right now but it's so relevant in the role we fall into. We fall into these roles on an ongoing basis in her life. This is not just roles that clients or people we work with only to pick these are really common. So I would love for you to approach this first from a personal place and then we can talk about were. So if you think about your personal life, there are time where we see things like, oh, my gosh, why is this happening to me, nobody understands how hard I work, nobody gets how much I'm doing, the world feels like it's out to get me, why is this happening to me again, right? Those are victim statements. They fall into the drama triangle, the top of the pyramid you see on the screen that says victim. Most of us have had maybe on this call, we have had experiences like that where we have felt really, like everybody else is out to get me, why is this happening to me. And then perhaps we have also been in the rescuers shoes where we see that somebody is really struggling but the world does seem out to get them and we fall into the trap of saving for, oh, my gosh, how can I help you, what can I do, how can I make this better, don't worry, I've got this, I can take it, no problem. And even though it might be a problem and even though I might have a lot of my plate, we still, when we fall into the rescuer mode, we really take on more and more. So it's really helpful to pay attention to what am I falling into with that rescuer mode. Then there is the persecutor mode. Persecutor mode is, you know what, you get what's coming for you. You would have listened to, this would not be happening. So now here we go. Suck it up. This is what is going to happen. I'm washing my hands this. You should have listened anyway. It's my way or the highway. That's kind of getting in that role. And I imagine that we have all been in all of these different roles. That we have our preferred roles. If you are on the call, the likelihood that you reach for that rescuer mode is pretty high. For all of us in the helping profession, so to speak, it's an easy trap to fall into. Here's the thing. When we fall into these roles, we keep other people in those roles as well. So let me try to explain that a little bit more.

Let's say I have a propensity to fall into the rescuer role. If I come across somebody who is playing the victim, poor me, et cetera, it's very easy for me to fall into the rescuer role. You parking, how can I help you, what can I do, don't worry, I will take care of it. What we do is inadvertently keep them stuck in the victim role. It's really important for us to stay out of any of these three roles. Instead, invite the person to step out of the role. People who fall into the victim trap actually need is to feel empowered. They need to feel safe. Safe and and powered. By us rescuing, we actually end up disempowering. It is really unfortunate. But when we fall into the rescuer trap with somebody and victim mode, we do exactly the opposite of what they need. It's helpful to say how can I help. Really make sure to stay out of rescuer mode and if they ask you for something you are not willing to do or if it's not within the bounds of your role, you say no. It's really important. That's the blunt part. The other pieces you can also ask what do you need to do, so not just how can I help, but what do you need to do. And both these questions has of the person in the victim role doing the problem-solving so they are the ones working on it as opposed to you trying to come up with all of the solutions.



If you find yourself in the rescuer role, that's helpful. Just know that the fundamental need when somebody is in the victim role is to feel safe and feel empowered. So that is what we are trying to do, whether we are the rescuer or prosecutor, that is what we should try to do because unfortunately, what happens, it's very easy for us to be assigned the role in the relationship and for us to actually be flipped in the role, I will give you an example. Let's say somebody is talking to you as victim advocate and they are talking to you and you are trying to provide services and they are saying you really need to do this that and the other and you are working your heart is to get them what they need. And let's a part of it is getting involved with the treatment provider, for example, because they are struggling with trauma issues. So you get in touch with the treatment of her writer and then suddenly the victim looks at you and says why are you forcing me to do treatment, this is all your fault, right, and suddenly, you bump into the persecutor role so it's really important to kind of stay out of either of these roles and empower the other person, asking questions like what else is really helpful and then truly listening to what they are asking for is incredibly helpful. So moving on, yes, Greg?

We have a question that came in. Withdrawing changing strategies, if the client is not responding to empathy, what do you do?

Great question. I wish we could have follow-up. When the questioner is asking, the client is not responding, I'm curious what they mean not responding. So I will make it up. Maybe say not responding means the person continues to be really upset with you, they continue to be disrespectful in the conversation. What do you do next? Clear boundaries with deputy. Respect and empathy never go away no matter what the situation is. But boundaries might be to increase so I will give you a silly example. A client walked into the office and through paperwork on my desk. He says you have to fill this out. The client was frustrated, upset, stressed out, et cetera, but it doesn't make that behavior okay. So I took the paper, stood up, and I said I really hear that you are wary right now about the situation. I will have you asked me again in a way that would most likely get me to say yes. So try it again because unfortunately, the way you just asked me was not the most helpful or respectful so try it again, try it with me again. So what I'm doing is having very clear boundaries but doing so with a tremendous amount of respect for the client. Respect and empathy don't go away. What you might have to increase structural boundaries because what might be happening is the client is continuing to engage in whatever the problematic behavior is that's really not being helpful. So I hope I got to with the questioner is asking. Was there anything else?

I think I heard you talk a lot about it may take time for this relationship. We do not know exactly how this has impacted them and just be a resource for them but also modeling how we expect to be treated and you are example reminded me of that.

There is a so much modeling we are doing that is very true. Very true. Good. Okay. Let's talk a little bit about accountability versus blame. It is an interesting we sometimes have. We are not blaming the person for what has happened to them. Even though there might be times where internally we are thinking, oh, my gosh, what makes you keep going back to this individual who keeps assaulting you, right, we have to just in our language be careful about the difference between holding people accountable and blaming them for what is happening. Accountability language is what you want to have happen that is different and what do you need to do differently

in order to make that happen. So really distinguishing between the two and making sure our language, particularly when working with victims that we avoid victim blaming and that we really support accountability because the unfortunate thing is that if somebody is in a pattern of being victimized, whether it is right with you or your down the road, if they do not learn how to work on that pattern of theirs, then they will end up somewhere involving themselves in a similar pattern that pattern is because of trauma. We, when we have a traumatized person, we will repeat the same pattern until we have healed it. So it is really important that that we use every opportunity we can to help people heal that particular wound back so they are learning how can we really understand and get empowered and change the pattern that I am fighting myself engaged in. So really sort of address the accountability piece and be very careful to stay out of blaming focus. For me, when I am having conversations with folks, sometimes conversations are really easy conversations and sometimes I know that I really need my skills in this particular conversation so here is how you know that you need to be on your game. Anytime emotions are high, you need to be on your game. That's whether it is just their emotions, even if your emotion is not high, if their emotion is high, we need all the skills. If the stakes are high, it is really important that I bring all my skills. Especially when my opinion is different than the person I am talking with, if we have differing opinions, it's really important that I bring all my skills and it's not just opinions. It's even difference is that we have, so it's really important to kind of enter the conversations with all of the skills I can bring to the conversation. It starts with getting myself together, being mindful, being present in the conversation, and asking myself what do I need. What is the story I'm telling about this individual that I might need to let go of? Maybe there are stories I'm telling that are not accurate for this individual. Maybe there are some assumptions or biases that I'm coming in with that are not accurate for this particular situation. So what is that story? I use story loosely. But I mean assumptions, biases. What are things I need to acknowledge and let go of before have this conversation? It starts by getting myself together, being mindful and present, what do I need to stay mindful and present in this conversation and what story do I need to let go of for what assumptions and biases do I need to be aware of so that I can walk into this conversation as cleanly as possible? There's a question somebody posed around serving victims across racial boundaries. I hope that starts to answer that question. When people are different from us in whatever way they are different, whether it is race or gender or sexuality or whatever it is, however the difference, even in the way that they talk, the way that they think the problem solve, when people act different from us and the stakes are high what the emotions are up, it is way too easy for us to other them. I hope I said it clearly enough. It becomes easy to make them the other person. It's really important that we be careful of the process of othering, meaning they become the other problematic one, we tell stories about them, we have assumptions and biases. Unfortunately, when we do not check assumptions and biases, influences our behavior and we engage sometimes in unhelpful or problematic behavior with folks. It's something to pay attention to. And I believe I have another slide and I will come back to that. I first get myself together and to consider certain things when the stakes are high. Is the timing right for this conversation? Am I talking about the right topic at the right level? Are we addressing the issue of the right level? Have I wished that we both have a mutual goal? Are we working on the right thing at the right time? Some time you might need to prioritize in the conversation and delay parts of the conversation for later. What are some emotions and coming in with? Do I need to name some of these emotions? Is the emotion about safety? Is there a particular outcome that I'm hoping for

that I have not been honest about? Lighting specific enough? Let's make sure the end of the conversation that there is some follow-up. We talked about some kind of follow-up, how will we know if this has been successful, whatever plan we come up with next these are things to consider and keep in mind as we have some of these really tough conversations. Let's come back to biases for a minute. We all have biases. We all have unconscious or implicit biases. Is what makes us human. It is how our brains operate. We have biases because, in our living system, that center of our brain, we have to make a lot of quick decisions. Yes or no, in or out, when you go to the ice cream shop and you have 30 flavors in front of you, you have to make some quick decisions. Do I want this or that? Chocolate, strawberry? Our brain sorts the really quick decisions. The problem is sometimes biases are inaccurate. When biases about other people are inaccurate, but we still believe them, it influences how we act toward them. I will give you a simple example. Let's say you are driving at 70 cuts you off. If your bias, your immediate thought is, oh, my gosh, they did it on purpose, right, they did it just to kiss me off, that will influence how I behave toward them. It influences my action. I might chase after them. I might honk. I might use a particular finger, et cetera. It will influence my action. So these biases are really important to check. It is important to ask yourself the question why am I responding this way especially when I respond differently to other people. So there's a lot of neuroscience that has gone into your biases were these quick decisions that we make. The quick decisions we make are also called heuristics. When we engage in some of these quick decisions, we also use another strategy called confirmation bias to confirm that we were actually right. So the person cut me off, that's because they were out to get me where they did it on purpose or they are just rude, they go about confirming the bias. Want the person to drive a little while longer, the customer deals off, and we say, see, rude person. Right? That is confirmation bias. And we engage in confirmation bias in many different ways. It's normal and natural but we need more awareness around it. We have a few more slides then we will open up for questions. When you have conversations, there are certain things that are helpful and certain things that are not so helpful. It's not helpful to give advice when it is not solicited. Weight for the person to ask and for us to give them feedback, wait for the person to say I would love some advice here so please help me. It doesn't work to shame. Shame is one of those immediate lip slippers. -- Lid flippers. It is not helpful to provide discrepancy, tell people, well, if only you did this, then this other thing would not have happened or don't you see the problem in your behavior, any of those kind of statements immediately cause defensiveness. If you show indifference meaning you do not care it's really unhelpful. If you talk about extreme consequences that are probably not going to happen, the person stops believing you. What does seem to work is helping them develop their own discrepancy. Clearly you do not like what is happening here so what do you want to have happen that is different, what solution do you want to work toward and how can I help? Heightening awareness of the situation and their power in the situation, providing information when asked, being curious about them, help me understand, those kinds of questions, and then providing options, where do you want to go, how do you want to approach this, so those are some strategies that help in these conversations. And when you are having a conversation, it is helpful to be curious about certain things like what are they concerned about, what is able to do, how do they want things to be better, what are some worst-case scenarios they are trying to avoid because sometimes that is what is driving it. There may be fear underneath that is driving their worries. What are the benefits they are getting out of it or the downside, what are the

possibilities, what are the possible solutions, and that what do they intend to do? Those things to stay curious about. We have one last poll question here. It's about things we have mentioned. Do you need additional training and? The concept of safety we keep talking about, psychological safety, feeling safe in the relationship, engaging and difficult conversations, balancing empathy with boundaries, feedback, or is it all of its? Where do you feel you need more training?

The place we are favoring is engaging in different conversation -- difficult conversations. That is where people feel they could really use help. The second place was all of it. That is awesome. I frequently feel like that as well. Thank you for doing that. We will move into the Q&A session. I'm worried that Greg might be struggling with audio. I will look at some of these questions --

I am back if you can hear me.

Fantastic.

Yes. So I've got a few questions. And if you have questions, please put them into the question-and-answer pod. And we will submit those to Anjali . Confidentiality is maintained. Questions not addressed will be included in the Q&A resource that will be posted on the website along with the recording of the webinar. If we don't get to other questions, we will get to them. As professionals not specifically trained in trauma or understanding victimization, I'm thinking it looks like it refers to probation officers, victim services people, people who where a victim services hat, oftentimes there is reluctance to talk with people because they do not want to do any harm so could you comment on that and talk a little bit about how we might make sure that we are doing harm and really what people need?

Great question and tough question. I love that the person is worrying about harm because it is something that as practitioners we should be paying attention to but we can cause inadvertent harm. Sometimes the inadvertent harm comes from our lack of awareness of what's going on for ourselves. So there have been times where I've said something or done something that is more harsh than normal. Those are times where I have to pay attention to what else is going on for me. The do no harm pieces starts with an increased self-awareness. My challenge for all of us and this is true for every, single one of us who are practitioners, no matter how long we have been in the field, and no matter how much work we've done, it starts with us, really asking the question first how am I contributing to whatever is happening. The second piece is we know we are doing harm because the relationship will tell us. When things are not going so well, there have been clues in the process that will give us an indication that something is missing. I'm not saying it's always our responsibility but we start with just checking ourselves first before we look to what is the other person doing so we kind of just pay attention to that piece first. Greg, I noticed a few additional questions in the chat. Before I moved to those, is there anything else you had on your mind before you look at the checks?

I have several more questions and will continue to compile those if you want to pull some out of the chats. That's great. Or I can give you more questions as well.

I see a question requesting more information about the concept of discrepancy which is a great question. So discrepancy is the discomfort within a person. When we have discovered, that is when we are motivated to change. So we want to highlight this comfort. We want to highlight

when a person has discrepancy. Discrepancy is discomfort. I want this thing but I'm doing this other thing. An easy example, I want to look good but I consumed a whole bag of potato chips. Discrepancy. Work related example, I want a positive relationship with my family but I keep using sub since. I want to stay safe from this individual but I keep texting him. Right? So those are examples of discrepant. And so in terms of the context of discrepancy, we just highlight it. We do not blame or shame. We do not say what's wrong with you, why are you texting him. We say things like help me understand how it helps you or how it serves you to engage whatever the behavior is. So we approach it from a real empathic and curious place. So that's the piece around discrepancy. Another question was how would you suggest protecting victim survivors who are now employed as victim advocates. This is a fantastic question. I will refrain just a tad. The question is if I am of it to myself, how do I protect myself when I am now surrounded by people with all kinds of trauma. It reflects how important it is for us to take care of ourselves first. One of the first pieces that is really important notice is just acknowledging my stuff comes up when I'm talking with this individual that I need to pay attention to so self-care is huge, building resilience is really important. We have several different webinars focus on trauma, self-care, wellness strategies. Building resilience is hugely important and it is the responsible thing to do. I appreciate your insightfulness in a question. When working with sex offenders who have also been victimized, how should you all them accountable and acknowledge their trauma? I find some focus too much on one of the other. Info question as well. Essentially what we are talking about is, as human beings, we frequently have both sides, both the victim and the victimizer. If we broaden the whole thing, we contain both. What's really helpful is to have both empathy and accountability. What this person does actually is answers the question herself so beautifully. You are right. We both acknowledge the trauma and attend to it. We also hold them accountable for their action. That's really important. A simple example is a reminder that a getting myself is just because I understand why you did it, it doesn't make it okay. That's the reminder, the accountability reminder that I keep in my brain.

One of the things that has come up is our work with departments that are including more sophisticated risk assessment and being able to tap into mental health professionals, behavioral health professionals is the idea that goes back to the question you just answered around there is victimization here but there's also criminal conduct and behavior that harms others and we do the cases in individuals with atomic so pronounced that it actually has to be handled before anything else can be handled. That may be the sex of any behavior, that maybe the substance abuse behavior but those are definitely things that we hope some of these webinars help you with this lens on try to ask those questions of the professionals you are working with and trying to tease that out or sort out which came first, you know, the substance abuse of the trauma, the trauma or the substance abuse, or the acting out behavior.

True. Sometimes we cannot make progress attend to some of these things. Yes. Very accurate. What do you recommend when it comes to clients who do not respect boundaries? Sometimes if we are in a bad space clients are not respect boundaries, it's easy for me to get angry. I work hard not to show it but I have an immediate reaction. Here's the thing. When clients do not respect boundaries, they give us a clear message saying my need isn't getting that and this is the only way I know how to get it. Maybe it is a learned behavior. I will give you a quick example. When my kid was really young, I was a working mom, try to work, she would come to me and



try to get my attention I would push her away and she would try to get my attention and be louder and even louder and then she would, you know, get really loud and then I would have to pay attention to her and I'm giving you that example because, in such a silly way, I was teaching her a really problematic thing. I was teaching her, in order to get your needs met, you need to be really loud, you need to misbehave. So of course, had to correct that quickly but that example comes to mind with a lot of my clients. It is as if they learned that the only way to get their needs met is it to be disrespectful or get into trouble or misbehavior be really big and loud or do something big to get somebody's attention. So when people continue to be disrespectful, I back up a second and think to myself what is the need I'm not hearing and sometimes I will even ask that and say, client, I noticed that what's happening right now is not really working and I'm trying to hear you and yet you keep pushing back in a way that's making it hard for me so can we pause for a second and tell me what is it you are trying to achieve here, what is it that you want out of this conversation, even if you think it's not going to happen, just state it and tell me what it is. So in a way, I'm trying to get at the need and I've been clear that what they're doing is not helpful.

Other things we can do to make our office space or where we meet with victims more comfortable and more welcoming for them for things we should be paying attention to?

I had a client walk into my office and I shut the door behind him and I inadvertently slammed the door and he jumped out of his skin. I felt so horrible about it. But it was such a great moment of learning for me. Have to be so careful about things. Sometimes I'm not really paying attention. So we can make the space more welcoming or we can make it more problematic. Some things to think about, distance and spacing, how far were close in my sitting with somebody, it is really important to respect the other person space so that I don't get too close to them. Of course now in the days of the pandemic, we are definitely keeping our distance from folks. Those are some things to think about, spacing, like that. Also pay attention to what things you have on your walls and does it convey a certain message, does it convey a message of welcoming, that everyone is welcome here, or does it somehow give an inadvertent judgmental message? That something to think about. What are the things you have on your walls that people notice? And lighting is also important, noticing lighting. Sometimes we have no control over this. We work in a particular building and there is particular lighting and we have no control. But there are some folks were bright lights can be scary. It's something to pay attention to and think about. How do I create MySpace? Do I have a desk in between me and the person? Is there kind of a barrier? There are things to think about in your own environment and how to make it a little more comfortable. If there is a desk and there's no way to get around it, you can sit at the corner so you are at an L shape versus across the table from each other, sometimes being side to side is a little more palatable to folks than being right in front of them. Those are some ideas regarding spacing. Great question.

How do we stay healthy and this? We will have a webinar on this in several months but how do we, just for short answer, stay healthy in this? I know you talked in the past about blind sitting your coworkers and having tertiary trauma related to your secondary trauma so if you talk a little bit about that, that would be great.

I would try to give a short answer. Yes. We need to pay attention to taking care of ourselves. Part of that is making sure that we disengage fully from work. There might be some of you on all who work all the time even though you're technically off. You check your phone, your email, you think about work. You engage with work friends after work or you watch television that is all about work. You never get a chance to fully disengage and do something entirely different, even if it's for one hour in the day. Ideally we have at least some time, an hour in the day, where we are truly disengaged, whether that means an hour of exercise or we are cooking or taking the dog for a walk or staring at the ceiling or gardening or whatever it is, but it's something that is not work. It's really important. Focus on paying attention to having a positive mind space. Focus on gratitude. Gratitude helps rewire our brain and calms down the living system. It allows the frontal cortex to get back in gear and connects the two parts of her brain. Just having some kind of a ritual around gratitude could mean a gratitude journal, starting today with things you are grateful for ending the day that way or just having practice where you are working hard to know that there are things you are appreciating or just grateful for the people. Gratitude seems to help one last thing, there are so many other strategies, but one additional strategy is social connection. The reason I bring it up, especially now, is because it's even more important in this covert time, in the time of this pandemic, that we pay attention to connecting socially. Now we may not be allowed to see all of her friends but I then maybe calling them on the phone or using Zoom or whatever platform you are using but are we really working hard to still stay socially connected because there is something about laughing together and hang out together and doing something together, even if it is virtually that's really nourishing for us as social beings. It releases chemicals that are helpful in terms of recovery. Those are a few things you can do. Ways to stay healthy in conversation is making sure you have clear boundaries during the conversation, not visualizing something people are talking about, maybe even after the conversation, washing your hands, moving around, stepping outside, and then being really careful to not pass on the trauma to somebody else, so let's say you just got done listening to a really awful story. Be careful about running into somebody else's office and saying, my gosh, you would not believe what I just heard, remember letting it all because essentially it is not transferring the trauma to somebody else . not saying don't reach out. Even just asking 70 permission allows their nervous system to get in gear so that they are not negatively impacted by what you are about to say. Those are some things to think about. Sorry that was such a long answer. I know you said keep it short.

I know we have a webinar at the end of the series where we will focus on taking care of ourselves. I have one last question for you. You have been a consultant for many years in criminal justice. You've worked with drug court programs and run a treatment agency and now you're working in probation. Could you talk about what a victim centered effective relationship looks like in a few words?

I will try. Then I hope you can add to it. Fundamentally, it means we are not inadvertently creating additional victims. As a system, we are paying attention to the different ways that systems can continue to victimize other people. We work really hard not to perpetuate those things within our own system.

That's great. That something we will can continue in the remaining parts of the series. One of the things he talked about his our system does some things very well, excellent at protecting individual rights of those accused, it's pretty good at getting at the truth, but it's not very good at taking care of people involved in the system or addressing the harm, the way our system is set up. So a lot of that falls to professionals in victim services, probation, community-based corrections, treatment providers, all of those professionals, to really pick that piece up and make sure that we are tending to it. That will close out our Q&A portion for today's webinar. This webinar is the first in a series that has been developed by OWW grant focused on enhancing victim centered strategies and community corrections. Our next webinar focuses on what does it mean to be victim centered and it will include a brief and production to the product in a round table discussion where you can ask the panel experts. We have webinars and sessions scheduled through August 2021. Watch your inbox for registration detail. Visit NCJTC .org to view information on the series. I also remind you that there are tons of resources so we welcome you to watch the webinars for free. Be sure to complete your evaluation for the webinar. If you would like the certificate of attendance, completing the evaluation is required and he will be sent via email in the coming weeks. You will notice in the evaluation that we ask for ideas on future training topics. Please take time to be specific on what you are looking for.'s grant is funded through 2022 and we have a lot more in person activities that we will do an advertising. In the meantime, it's all online. There is technical assistance available via Or other platform for specific organizations. A recording of this webinar will be available in the next few weeks at NCJTC .org. This concludes the webinar for today. Thank you for the excellent presentation. Thank you for attending. We hope to see you next month for the ask the expert session. Have a wonderful day. Thank you.