



Hope Shores Alliance

CORE
COMPETENCIES
OF ADVOCACY

In a Multi-Service Agency

Developed by the Core Competencies Committee
In conjunction with the Office on Violence Against Women

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The Core Competencies of Advocacy are a testament to the growth and change that has occurred within the agency through our work with the SADI project, as well as a statement to how we communicate with survivors, fellow advocates, community partners and others when doing advocacy work.

A team of agency staff carefully drafted each competency with the intention of creating a document that articulates our agency's *beliefs, values, goals, and vision for what we believe every survivor should expect to encounter when accessing our services.*

This living document will guide our intra-agency trainings development, policy development, our work within our communities, our interactions with our colleagues and is our agency's blueprint for providing advocacy and support services to survivors.

Explanations for terms and concepts have been included below each competency, which will help us to continue our discussions as an agency about how we can continue to improve and develop our advocacy programs to meet the needs of a diverse group of people in a trauma-informed and inclusive way.

Thank you to all of you for participating in the many meetings and discussions over the course of the SADI project, as your input has been crucial to the creation of the Core Competencies of Advocacy.

This is Hope Shore's Alliance; this is what we BELIEVE.

Core Competencies of Advocacy

1. We understand sexual violence, domestic violence, stalking, dating violence and trauma. We understand the impacts of each among all populations as they occur across the lifespan and intersect along the spectrum of violence.
2. We collaborate with survivors and support their right to self-determination and autonomy.
3. We are a support person to survivors. We honor the survivor's unique walk of life as we move forward with them in the healing process. We do this by remaining open and providing empathy, active listening, and reflective listening to understand the individual survivor's lived experiences and needs.
4. We create and maintain safe spaces where we acknowledge, reflect, support and believe survivors' experiences.
5. We are ambassadors of safe spaces in our communities at large. We understand and promote a culture of care when working with survivors, co-workers and volunteers, community members, and organizational partners.
6. We understand the impact of vicarious trauma on advocates and support you in caring for yourself by providing options and encouragement for self-care.
7. We understand and explain all of Hope Shores Alliance's services available for survivors.
8. We understand and communicate the connections between oppression, rape culture and sexual violence – and how these linkages are perpetuated in society and the ways that we can mitigate this by building egalitarian resiliency in our communities. Most people understand that rape or child sexual abuse are wrong. However, other behaviors like street harassment or telling rape jokes are more accepted in our culture, even though they connect along the same continuum of sexual violence.
9. We have the skills and knowledge necessary to provide support to all survivors within our communities.
10. We act in an ethical manner and maintain confidentiality as required by Federal and Michigan law and VAWA 2013.



- 1. We understand domestic violence, dating violence, stalking, sexual violence, and trauma. We understand the impacts of each among all populations as they occur across the lifespan and intersect along the spectrum of violence.**

DOMESTIC VIOLENCE

A pattern of behaviors intentionally and willfully carried out by a person in a relationship to maintain power and control over the other person.

Domestic violence perpetrators utilize some of the following tactics as mechanisms to gain control over another individual:

- Physical Assaults
- Sexual Assaults
- Emotional Abuse
- Verbal Abuse
- Social Isolation
- Financial Abuse
- Stalking
- Threats
- Intimidation

The relationships where domestic violence occurs are not easily defined by a set of circumstances or characteristics. People experiencing domestic violence may be married to their partner, formerly married, dating, living with their partner, have a child in common, separated or otherwise in a relationship with each other.

We are open to understanding the dynamics of domestic violence in a comprehensive manner. We will stay informed of changes and the sharing of best-practices in the movement as we work to increase ours and our communities' awareness of the issues.

DATING VIOLENCE

Dating violence, like domestic violence, is a pattern of behaviors intentionally and willfully used by an intimate partner to gain or maintain control over the other person in the relationship. The abuser uses physical and sexual violence; emotional, verbal, and financial abuse; social isolation; stalking, or any sort of threats or intimidation. A dating relationship could mean a current or past dating partner, monogamous or not, serious or casual. Dating violence can effect anyone—it does not see gender identity, sexual orientation, race, religious preferences, economic class, etc.



STALKING

Stalking is willful conduct directed at a specific person to cause them to feel frightened, harassed, or otherwise emotionally distressed. These behaviors can include but are not limited to being followed or watched at home, work, or elsewhere; unwanted phone calls, texts, letters, email, gifts, or visits; belongings are stolen, replaced, or moved; intimidation or harassment of family and friends, etc. Often, stalking is connected with a relationship, beginning either during the course of the relationship or after it has ended. In these cases, the stalker may be attempting to regain or maintain power and control over their partner. Many survivors who are stalked by a current or former intimate partner also report having been physically or sexually assaulted by the same person who stalked them.

SEXUAL VIOLENCE

Occurs any time a person is forced, coerced, or manipulated into any unwanted sexual activity; or when **consent** to participate (whether actively or passively) in a sexual activity is not freely and willfully given.

CONSENT

Means not only that someone agrees to participate in a certain behavior, but also that they have the physical and mental capacity to consent and to do so free from threats, pressure and coercion. If sexual boundaries are crossed, sexual violence is happening; it is never an accident or a misunderstanding.

Sexual violence does not happen because of intimacy or sexual desire; it is motivated by various forms of power and control. Physical features, sex organs, gender identity, sexual orientation, abilities, clothing choices, prior sexual encounters, using intoxicating substances, etc., are not qualifiers or disqualifiers for sexual violence.

Sexual violence can occur across the life span ranging from childhood to adolescence to adulthood and older adulthood. Sexual violence violates a person's trust, autonomy and feeling of safety.

The impact of domestic and sexual violence on an individual will be as unique as the survivor who experienced it. However, survivors often experience trauma because of domestic and sexual violence.

TRAUMA

The unique experience of an event or enduring conditions in which:

- An individual's ability to integrate their emotional experience is overwhelmed; and
- An individual experiences a threat to life, bodily integrity or sanity



“TRAUMA IS NOT A DISORDER BUT A REACTION TO A KIND OF WOUND. IT IS A REACTION TO PROFOUNDLY INJURIOUS EVENTS AND SITUATIONS IN THE REAL WORLD, AND INDEED, TO A WORLD IN WHICH PEOPLE ARE ROUTINELY WOUNDED. TRAUMA IS A CONCRETE PHYSICAL, COGNITIVE, AFFECTIVE, AND SPIRITUAL RESPONSE BY INDIVIDUALS AND COMMUNITIES” (BURSTOW, 2003).

We do not limit our definition of domestic or sexual violence, but rather work to expand our knowledge as ours and survivors’ experiences develop. It is our responsibility as advocates to stay informed about the ever-changing topics related to domestic and sexual violence as well as gender politics on local, national, and global levels. We also strive to be educators on domestic and sexual violence and its impact within our community and systems.

2. We collaborate with survivors and support their rights to self-determination and autonomy.

As we collaborate with survivors:

- Our role is not to fix anyone’s past, present or future
- Our role is to validate and honor their experience
- Through active listening, we can help to identify choices in healing
- Survivors determine the services that Hope Shores Alliance provides to meet their needs
- We support autonomy during and beyond crisis occurrences; throughout a survivor’s lifetime and healing journey
- We support survivors engaged as leaders within the agency and community (i.e. Board of Directors, as volunteers, as advocates working with other survivors, etc.)

We know that survivors are creative, resourceful whole human beings who are *not* broken. We believe there is value in each survivor’s story, for themselves and for others. We believe that survivors have within them the answers to questions or the solutions to problems they are facing. When we engage with survivors we are acting as a sounding-board providing non-judgmental support, validation, and options.

3. We honor each survivor’s unique walk of life as we move forward with them in the healing process by remaining open and providing empathy, active listening, and reflective listening to understand lived experiences and needs.

EMPATHY

Empathy is the ability to see the world as another person, to share and understand another person’s feelings, needs, concerns, or emotional state. Being empathetic requires two basic components—**effective communication** and a **strong imagination**.



- Deeper understanding is the result of effective communication. This involves overcoming the various barriers to communication, active listening, and reflective listening
- In order to empathize with another person, we need to be able to remain open minded and see the world from their perspective, what their perspective is based on and why they may see it differently from us
- Empathizing does not mean we personally agree with or share in what the survivor is saying. It means we are putting ourselves in their shoes in order to better understand their perspective
- Empathy is not sympathy. Sympathy implies feeling *for* someone. Empathy involves meeting a person where they are at, validating what they are saying, and feeling *with* them
- Providing empathetic support builds trust and respect, enables survivors to release their emotions, reduces tensions, and creates a safe environment that encourages sharing and is conducive to collaborative problem solving

ACTIVE LISTENING

Whenever we engage in communication with survivors, fellow advocates, community partners or others, we model respect and understanding with active listening skills. Active Listening is a conscious effort on behalf of the listener to hear not only the words the speaker says, but the message that is being sent both verbally and non-verbally. Active listening involves listening with all senses, as well as visually demonstrating your full engagement with the speaker.

- Interest can be conveyed to the speaker by using both verbal and non-verbal messages such as maintaining eye contact, nodding your head and smiling, agreeing by saying 'Yes' or simply 'Mmm hmm' to encourage the speaker to continue
- Defer judgment and allow the speaker to finish each point they are discussing before responding
- Honor silence in the conversation-- allow survivors to direct where the discussion goes from there; allow the survivor to maintain control of the conversation

REFLECTIVE LISTENING

Reflective listening is a communication strategy involving two key steps: seeking to understand a speaker's idea by practicing active listening, then offering the idea back to the speaker to confirm that we, the listener, has understood the idea correctly.

- Mirror the mood of the speaker, reflecting their emotional state with words and nonverbal communication. This requires us to quiet our mind and fully focus on the mood of the survivor. The mood will be demonstrated in word choices, tone of voice, posture, and other nonverbal cues given by the survivor



- Summarize what the survivor said using your own words. This is different from paraphrasing, where words and phrases are moved around and replaced to mirror what was said. In reflective listening, the listener recaps the message using their own description
- Respond to the survivor's specific point without digressing to other subjects

4. We create and maintain safe spaces where we acknowledge, reflect, support and believe survivors' experiences.

One dimension of creating safe spaces is within relationships. Individuals bring unique, lived experiences into outlets where they may seek support. Safe spaces acknowledge, reflect and support survivors as creative, resourceful and whole human beings who are experts in their own situation with the right to self-determination.

- Safe spaces are individually defined. Survivors create and shape how a space becomes safe or unsafe for them. We can understand what those components may be by implementing empathy, active listening, and reflective listening skills
- We can help establish a safe space by remaining judgment-free, confidential, and respectful—not just in the moments someone is disclosing or in crisis, but for as long as they receive services from us
- Defined boundaries are essential to constructing a safe space. It is important that we provide support that does not endanger, ostracize, or foster co-dependency. Likewise, professional boundaries help curb vicarious trauma and burnout that can so easily manifest in this work

Another dimension of safe spaces involves cultivating trauma-informed physical and environmental work areas. This includes but is not limited to: easily accessible exits, soothing color schemes, culturally inclusive décor, and soft lighting. Refer to “Hope Shores Alliance’s Trauma-informed Work Space Checklist” for a complete list of suggestions.

5. We are ambassadors of safe spaces who understand and promote a culture of care when working with survivors, co-workers, agency volunteers, community members, organizational partners, and others in our communities at large.

CULTURES OF CARE

Based in valuing, honoring and respecting one another. This is equally true for supporting survivors as it is for supporting staff. We achieve this by considering and embodying the following tenets:

- How we communicate with our colleagues
- We acknowledge the need to be authentic with one another. We keep each other in check through naming behaviors that marginalize us, give or receive an



invitation to dialogue about the issue when those involved feel comfortable doing so, and providing education when appropriate

- How we ask for colleagues time and expressing what that time is for
- How we accept or deny requests for our time and what are the next steps
- We value debriefing and seek to create opportunities for debriefing conversations for and with one another
- We honor and recognize survivorship. It is common for survivorship to exist within staff
- We are all secondary survivors as a result of bearing witness to and empathizing with another's story
- We honor the need for self-care and access to confidential support
- We maximize collaboration, share power, and invest in each other's success; we know that empowering one another helps to better empower others
- Safe spaces are venues where meaningful conversations can take place. We will bring our open, empathic and authentic selves along with our active listening skills to those venues and conversations

6. We understand the impact vicarious trauma can have on advocates and support each other in caring for ourselves by providing options and encouragement for resiliency.

VICARIOUS TRAUMA (secondary trauma)

Occurs as a result of bearing witness to someone else's traumatic experience. The Sexual Assault Demonstration Initiative describes it as "the experience of having exhausted hearts, minds, bodies, and souls from helping survivors through their painful experiences." These are normal reactions to doing emotionally and physically demanding anti-violence work. There is nothing wrong with us!

RESILIENCY

Certain tools and skills can help mitigate the effects of vicarious trauma. There are many ways to practice self-care; fellow staff can work with us to create a self-care plan that fits our needs. We can also begin integrating self-care practices on our own that will help us live out our workdays feeling capable and renewed. Self-care practices build the foundation for resiliency as we continue our advocacy and violence prevention work. When we walk the walk by promoting and practicing self-care we can be better at our jobs.

Confidential support is available outside the agency for staff experiencing trauma, whether vicariously or otherwise. We encourage one another to work with a colleague, supervisor or sister-agency to talk through experiences of vicarious trauma.



7. We understand and can explain all of Hope Shores Alliance's services available for survivors.

Hope Shores Alliance provides free services to survivors of domestic violence, sexual violence, stalking and dating violence regardless of race, age, creed, national origin, ethnicity, color, ancestry, religion, sex, gender, gender identity, gender expression, sexual orientation or preference, language ability, hearing or deaf identity, class, economic status, education, immigration status, marital status, physical or mental abilities, HIV status or substance use.

Hope Shores Alliance values the importance of providing free, confidential and consistent services to all survivors while recognizing both the uniqueness of survivors' needs and the importance of flexibility to those unique needs.

Consistency in providing services is a vital component of providing fair, equitable and effective advocacy, intervention, resources and support and is a core principle of the agency. Services offered to survivors of violence are determined to be either Core Services, Enhanced Services or Complex Services.

CORE SERVICES

Core Services are those that are essential and fundamental to providing assistance to survivors of violence. Hope Shores Alliance guarantees these services to survivors in Alcona, Alpena, Iosco, Montmorency and Presque Isle Counties.

24 Hour Availability:

- 24/7 Help and Support Line (1-800-396-9129)
 - Providing active listening support
 - Providing information, support and listening regarding survivor's options
 - Local inter-agency, intra-agency and other community agency referrals for support, services or resources as determined by the survivor
- Medical Accompaniment:
 - To local hospitals during sexual assault nurse exam, forensic exam, to be treated for injuries or to otherwise receive medical care as the result of sexual violence occurrence(s)
 - To local hospitals to seek medical response and/or care pertaining to domestic and/or dating violence occurrence
- Response to Law Enforcement Agencies
 - For emergency incident response related to domestic violence, sexual violence, stalking or dating violence
- Short-Term Safe-Home Placement
 - Temporary Emergency Shelter at Alpena Safe House (as space allows)
 - Hotel Voucher Options for Short-Term Emergency Shelter



Scheduled Availability:

- **Counseling**
 - Individual
 - Support Groups (for both primary and secondary survivors of domestic violence, sexual violence, stalking or dating violence as well as loved ones/significant others of survivors)
 - Therapeutic
 - Psycho-Educational
 - Peer-Based
- **Individual Advocacy**
 - Active Listening Support (Topics are Survivor Identified)
 - Trigger Planning
 - Discuss planning for triggers when survivors talk to us about instances of past triggers or are concerned about future triggers. Trigger plans can be helpful when discussing upcoming family events, topics of study in educational classes, medical appointments, traveling to areas where potential triggers are a concern, etc.
 - Safety Planning
 - Planning with a survivor when they identify a concern for their physical or emotional safety
 - Discuss the availability of Economic Justice in assisting with safety and trigger plans
 - Explanation, Demonstration and Information Regarding Healing Exercises
 - Breathing Techniques
 - Finger Holds
 - Tai Chi Movements
 - Body Work
 - Emotional Freedom Techniques
 - Others as Determined by a Survivor
- **Medical Advocacy**
 - Medical, Dental or Vision Appointments Accompaniment
 - Follow-Up Medical Care Accompaniment (post-incident)
- **Legal Advocacy**
 - Survivor-Initiated System Coordination
 - Survivor Initiated System Advocacy
 - Access to and Assistance with Crime Victim Compensation Forms
 - Criminal Justice System
 - Law Enforcement Interviews
 - Court Appearances
 - Personal Protection Order
 - Forms Access
 - Forms Review



- Assistance with Petition and Statement
- Process Explanation
- Hearing Appearance In-Person Support
- Legal Services/Legal Aid Referral
- Local Attorney List
- **Housing Advocacy**
 - Referral for Community Housing Resources
 - Application Assistance
 - Assistance Navigating Barriers to Housing
- **Educational Advocacy**
 - Accompaniment to Educational Systems Appointments
 - Navigation Through Educational System Relief and Options

ENHANCED SERVICES

Enhanced Services are significant and secondary assistance to survivors of violence that either Hope Shores Alliance offers along with other service providers or Hope Shores Alliance offers when resources allow. We do not guarantee these services, but do make every effort to provide them.

- Transitional Supportive Housing Program
- Court Accompaniment During Civil Hearings and Trials
- Accompaniment During Case Management Meetings that do not pertain directly to domestic violence, sexual violence, stalking or dating violence specific circumstances
- Mental Health Appointment Accompaniment
- Economic Justice/Specific Assistance
- Transportation
 - To and from appointments directly related to the recovery and impact of violence
- Support in Locating Alternative Healing Options
- Referrals, Information and/or Vouchers to Trauma Informed Service Providers such as:
 - Movement and Fitness Professionals
 - Yoga and Body Work Classes
 - Massage Therapists
 - Acupressure
 - Drumming and Music Therapy Opportunities
 - Martial Arts Classes
- In-Service Trainings Facilitation for Allied Professionals and Community Partners

COMPLEX SERVICES

Complex Services are those services that may already exist via other area programs but where Hope Shores Alliance can provide a trauma-informed lens. This assistance is provided on a short-term or long-term basis as determined by the wishes of the survivor and



the ability of Hope Shores Alliance to respond to the request, and is based on our scope of expertise and availability of resources.

It is the goal of our advocacy program to leverage as many community resources as possible to help provide more holistic healing options for survivors in an effort to foster resiliency in our communities. Some examples of complex services include:

- Substance Use and Addiction Support Services
- Civil Legal Services Referrals and Appointment Accompaniment
- Temporary Re-Homing Options for Pets
- Transportation
 - To and from appointments not directly related to a violent incident prompting services

Note: Core, Enhanced and Complex Services definitions are not meant to imply the valuing of one type of service over another, but rather to guide the agency in determining areas where resources allow and to ensure consistency in the availability of all of our services to every person accessing our support.

8. We understand and can communicate the connections between oppression, rape culture and violence; and how these linkages are perpetuated in society. We are able to identify the ways that we can mitigate this by encouraging egalitarian resiliency in our communities.

Most people believe that rape and child sexual abuse are wrong. However, other behaviors that connect along the continuum of violence and spectrum of sexual violence (see Appendix A) such as street harassment or telling rape jokes are widely tolerated in our culture. All of these behaviors share the same root-cause: oppression.

OPPRESSION

Oppression marginalizes groups of people and when the larger culture accepts or condones this behavior, it creates systems that exclude or devalue certain populations; hence marginalization.

A person can be oppressed based on characteristics like gender identity, sexual orientation, age, ability, spiritual beliefs, race or ethnicity, or the language they speak. Oppression supports conditions in which a person decides to violate another person's right to safety and autonomy. Sexual violence thrives in this oppression framework and creates barriers for a person seeking help after experiencing violence.



RAPE CULTURE

Rape culture is a term used to describe a dominant socio-cultural environment or context where sexual violence is pervasive, normalized, and eroticized as a result of oppressive, patriarchal attitudes about sexuality and gender. It works to favor and validate the experiences of offenders while inherently blaming and shaming survivors.

EGALITARIAN RESILIENCE

Egalitarianism is the belief that all humans are equal in fundamental worth and supports equity for all people, especially in social, political and economic life.

Resilience is the capacity—or elasticity—to recover from adversity or difficulties.

As advocates and ambassadors of safe spaces we commit to building egalitarian resilience in our communities by supporting those who are affected by violence and oppression through:

- An intersectional approach to prevention and services that address the root causes of oppression. We challenge oppression through education and by speaking out against unjust social norms
- Promoting outreach and educational discussions about oppression and its collective weight on people in our culture
- Work to educate our community on the myths and stereotypes attached to groups of people
- Valuing all human beings by celebrating and promoting individuality
- Dismantling oppression within the organization. We are willing to ask for support and guidance regarding cultures, identities or beliefs we may not understand
- We acknowledge the privilege that we may carry with us into interactions with others (survivors, colleagues and others) – and we understand the importance of establishing spaces where equality exists in our interactions with each other

9. We have the skills and knowledge necessary to provide support to all survivors within our communities.

- We take our time listening to, believing, and validating a survivor's story. It is important to stay in the moment with a survivor before offering services or resources
- We always remember that confidentiality is our primary ethical obligation
- We assist in assessing safety risks and possible solutions, including safe housing, door lock or phone number changes, personal protection orders or any other option based on the survivor's disclosed experience or needs
- We understand state and federal laws related to sexual assault, domestic violence, and crime victim rights



- We respect and honor cultural diversity and what that means when working with survivors who are members of marginalized groups
- Systems navigation: We understand and can explain
 - i. the Sexual Assault Forensic Examination to survivors for each medical facility that advocates may respond to or that survivors may encounter
 - ii. the processes for opening a criminal investigation for survivors who are considering pressing charges
 - iii. the course for filing, serving, and enforcing a PPO for each county in our service area
 - iv. various human service agencies and community organizations
 - v. we advocate for the survivor's choice to participate in the above and the rights they have

10. We act in an ethical manner and maintain confidentiality as required by Michigan state law and VAWA 2013.

CONFIDENTIALITY

The **Violence against Women Act (VAWA)** and the **Family Violence Prevention and Services Act (FVPSA)** contain strong confidentiality provisions that limit the sharing of victims' personally identifying information, including entering information into public records and public databases.

These provisions affirm confidentiality practices that protect the safety and privacy of victims of domestic violence, dating violence, sexual assault, and stalking.

VAWA and FVPSA prohibit sharing personally identifying information about victims without informed, written, reasonably time-limited consent. VAWA and FVPSA also prohibit programs from asking survivors to share personally identifying information as a condition of service.

However, confidentiality can be waived by a survivor when the survivor consents, in writing, to their personal confidential information being shared by a victim service provider. This waiver is done through a written release that must be for a specific purpose that is determined by the survivor and is time limited.

The release of information (specific and time-limited) must be for services requested by the survivor. The survivor, before signing a written release, must be fully informed of all possible consequences of disclosure, as well as alternative ways to obtain the service they are requesting.



VAWA and FVPSA also permit limited sharing when mandated by state law or a valid court order. However, in either circumstance the VAWA/FVPSA-funded program must protect the survivor's information as much as possible.

SEXUAL ASSAULT OR DOMESTIC VIOLENCE COUNSELOR

A person who is employed at or who volunteers service at a sexual assault or domestic violence crisis center, and who in that capacity provides advice, counseling, or other assistance to victims of sexual assault or domestic violence and their families.

CONFIDENTIAL COMMUNICATION

Information transmitted between a victim and a sexual assault or domestic violence counselor, or between a victim or sexual assault or domestic violence counselor and any other person to whom disclosure is reasonably necessary to further the interests of the victim, in connection with the rendering of advice, counseling, or other assistance by the sexual assault or domestic violence counselor to the victim.

Except as provided by section 722.631 of the Michigan Compiled Laws (*reporting for suspected child abuse*), a confidential communication, or any report, working paper, or statement contained in a report or working paper, given or made in connection with a consultation between a victim and a sexual assault or domestic violence counselor, shall not be admissible as evidence in any civil or criminal proceeding without the prior written consent of the victim.

MANDATORY REPORTING OF CHILD ABUSE AND NEGLECT

While complying with *confidentiality* is central to our work and required under contractual obligations, and Michigan and Federal Law (VAWA, FVPSA, HIPAA) it is also important to understand that there are exceptions to confidentiality when it comes to suspected child abuse or neglect.

Michigan law requires that we file a report when we have *reasonable cause* to suspect *child abuse or neglect*.

We ensure that all survivors know from the outset of services that all agency employees are mandated reporters of suspected child abuse and/or neglect. This means that when we first meet with a survivor, we will go over the mandatory reporting law with them in detail as per the agency **Mandated Reporting Policy**. We will communicate our role and we will adequately answer any questions that they have regarding mandatory reporting. (who, what, when, how) This applies to both residential and nonresidential survivors.

Further explanation, details and instructions for compliance with all Confidentiality and Mandated Reporter agency policies and state and federal statutes can be found in the SOP under "Confidentiality" and "Mandated Reporting".