

**APPLICATIONS FOR TRAINERS TO JOIN THE
THREE-TIERED INTIMATE PARTNER AND SEXUAL
VIOLENCE TRAINING SERIES INITIATIVE**

Through Collaboration with the Office of Domestic Violence Strategies and the Behavioral Health Training and Education Network as Subject Matter Experts and Trainers

Responses must be sent by **3:00PM on Friday, June 7th, 2024** to Sarah Pallivalapil-Kararat, Behavioral Health Training Specialist, at spallivalapilkararat@bhten.com.

Questions related to this request should be submitted via e-mail to spallivalapilkararat@bhten.com.

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A. Introduction to the Three-Tiered Intimate Partner and Sexual Violence Training Series/Statement of Purpose

According to data collected by the National Intimate Partner and Sexual Violence Survey during 2016-2017, about 41% of women and 26% of men in the U.S. have experienced, at some point in their lifetimes, contact sexual violence, physical violence, and/or stalking by an intimate partner that resulted in an intimate partner violence-related impact. The same survey also found that more than half of women (54.3%) and nearly one-third (31%) of men in the United States reported some form of sexual violence victimization involving physical contact. Furthermore, the 2015 US Transgender Survey found that 54% of its 27,715 trans and nonbinary respondents experienced some form of intimate partner violence.

101 people died from domestic violence incidents in Pennsylvania in 2023.¹ Intimate partner violence and sexual violence are complex and potentially lethal issues that impact people from all cultural, socioeconomic, and religious backgrounds. Due to the widespread nature of these forms of violence, hereby referred to as IPV, and the inherent danger they present, behavioral health professionals and frontline social services staff need current, comprehensive training on the subject in order to best serve their clients and communities.

Historically, the Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIdS) has partnered with the Office of Domestic Violence Strategies and the Behavioral Health Training and Education Network (BHTEN) to offer trainings about IPV. In the 2019-20 fiscal year, a Three-Tiered IPV Training Series was proposed and planned to expand upon the existing foundational courses and to increase the capacity of the Philadelphia behavioral health community to identify and appropriately respond to IPV. After being postponed due to the COVID-19 pandemic, the series was then launched virtually in fiscal year 2020-21. In the last 4 years, the training series has reached over 1,000 providers, and expanded to offer 10 distinct trainings. In the most recent fiscal year 2023-24, 261 people participated in the training series, as of April 3, 2024.

To meet current system needs, continued expansion of the series is planned for the upcoming year, and the series will be restructured. This training series will continue to increase understanding of IPV and support appropriate prevention and clinical interventions by incorporating additional trainings on supporting survivors of sexual violence, assessing for IPV, addressing the needs of immigrant survivors of IPV, and building trauma-informed organizational policy.

Tier I will continue to offer introductory-level trainings, supporting providers to build confidence to screen for IPV and understand the basic dynamics, impacts of, and approaches to treating IPV, human trafficking, and sexual violence. Tier II will emphasize skill-building and practical application, teaching participants advanced safety planning skills, how to assess for

¹ Source: [Domestic Violence Statistics - PCADV](#)

abuse, how to support abuse survivors in individual therapy, and about the implementation of trauma-informed services for survivors through organizational policy. Finally, Tier III will expand upon the knowledge base and skills application established in Tiers I and II by educating providers on IPV as it intersects with other identities and experiences, including substance use, queerness and transness, parenting and children, disability, and immigration.

For the 2024-25 training series, BHTEN will continue to offer popular courses from previous years about IPV and will introduce multiple new courses in the selected topic areas outlined in Section G.

B. DBHIDS Organizational Overview

The Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS) oversees BHTEN and this training application and opportunity. DBHIDS is responsible for administering a broad array of treatment, intervention, prevention, and support services to individuals, families, and communities experiencing difficulties related to mental health challenges, intellectual disabilities, and substance-related conditions. The Department has a long history of providing innovative and groundbreaking services in Philadelphia for people in recovery, family members, providers and communities and has become a national model for delivering behavioral health care services in the public sector.

In 2005, DBHIDS initiated a system transformation to change service delivery for people who live with behavioral health challenges. Transformation in Philadelphia moves beyond the field's historical focus on pathology and disease to a model directed by the person in recovery's needs, wants and desires and that emphasize the individuals' culture, resilience, and unique recovery processes. A recovery/resilience-oriented system attends to the issues of symptom reduction but ultimately provides access to services, supports, environments, and opportunities that help individuals restore a positive sense of self and rebuild a meaningful and fulfilling life in their community. Through the implementation of recovery/resilience-oriented innovative, evidence-based, evidence-informed, and promising practices, the system transformation holds the potential to improve quality of care and the lives of service recipients and their families.

The core values of the transformation were drawn from the earlier work of the Recovery Advisory Committee and from the values identified in the report issued by the Mayor's Blue Ribbon Commission on Children's Behavioral Health and can be found in the Practice Guidelines for Recovery and Resilience Oriented Treatment that was issued by DBHIDS in 2011.²

² Source: <https://dbhids.org/practice-guidelines>

C. Behavioral Health Training and Education Network (BHTEN)

Philadelphia's Department of Behavioral Health and Intellectual disAbility Services (DBHIdS) has a comprehensive behavioral health system. DBHIdS is dedicated to promoting healthy behaviors and healthy communities through education and awareness building strategies. In 1996, DBHIdS founded and funded the Behavioral Health Training and Education Network (BHTEN) to support Philadelphia's behavioral health system by planning, coordinating, and providing quality educational experiences. These educational experiences are geared to a wide range of audiences, including individuals and their family members, DBHIdS staff members, behavioral health service provider organizations, and other human services and community-based organizations.

BHTEN is comprised of a diverse, innovative, and multidisciplinary team who bring an array of experience as trainers and educators, behavioral health and human service providers, family members, persons with lived experiences, and community members.

BHTEN has a robust training catalog, which includes courses on anti-violence/bullying, foundational and advanced trauma training, DBHIdS-sponsored evidence-based practices, mental health education and prevention, supervision, Department of Drug and Alcohol Programs (DDAP) regulatory trainings, and religious/spiritual outreach. BHTEN courses are offered in a variety of modalities, including: in-person classroom, e-learning, train-the-trainer, and blended formats. More information and a full list of courses offered are available on the BHTEN website (www.bhten.com).

D. Office of Domestic Violence Strategies

The Office of Domestic Violence Strategies (ODVS) works to support the City's Health and Human Service (HHS) agencies to strengthen their capacity to identify and appropriately respond to IPV and other types of gender-based violence. As the only City office dedicated solely to address this type of violence, ODVS aims to develop policies and practices that safely support families affected by IPV, sexual violence and human trafficking, ensure access to inclusive services, and create an IPV-competent HHS workforce.

E. General Disclaimer

This application process does not commit BHTEN to award training opportunities. This application and the process it describes are proprietary and are for the sole and exclusive benefit of BHTEN. No other party, including any Respondent, is intended to be granted any rights hereunder. Any response, including written documents and verbal communication, by any Applicant to this application shall become the property of and may be subject to public disclosure by BHTEN.

F. Need for Intimate Partner Violence and Sexual Violence Services in Philadelphia

There is not data currently available about IPV and sexual violence prevalence among CBH and DBHIdS consumers. Research, however, has shown that adult and youth IPV and sexual violence victimization are associated with higher prevalence of mental and physical health problems such as: heavy drinking, depression, suicidal ideation, smoking, chronic pain, difficulty with sleeping, activity limitations, etc.^{3 4 5}

In FY22, 9.8% of child abuse investigations in Philadelphia involved a family that was either experiencing domestic violence or reported having been exposed to domestic violence; when cases were specifically screened for IPV, that proportion increased to 15%. Furthermore, the Philadelphia Domestic Violence Hotline answers over 10,000 calls every year; and the number of domestic violence homicides have increased in Philadelphia from 18 in 2020 to 46 in 2022. Survivors of IPV and sexual violence and their families, as well as individuals enacting abuse, may interact with behavioral health providers for services that are not IPV or sexual violence specific. IPV and sexual violence dynamics may affect the client's ability to access, participate, and comply with services; may hinder effects of intervention; and, ultimately, deter positive outcomes for individuals and families. Individuals and families affected by IPV and sexual violence will benefit from interacting with behavioral health professionals who understand IPV and sexual violence, their overlap with trauma, and their impact on the safety and wellbeing of all family members. Furthermore, OD STAT, Philadelphia's Citywide overdose fatality review, has recommended that medical and behavioral health providers receive training on the effects of IPV and sexual trauma for both children and adults, trauma-informed interventions to support individuals and families, and implicit bias.

The Intimate Partner and Sexual Violence Three-Tier training series aims to increase the capacity of Philadelphia's behavioral health community to identify and respond appropriately to IPV and sexual violence. The goal is to enhance the expertise of Philadelphia's behavioral health workforce to provide comprehensive and safe services for individuals and families.

G. Overview of the Three-Tiered Intimate Partner and Sexual Violence Training Series

Training Plan Structure

³ Exner-Cortens, D., Eckenrode, J., & Rothman, E. (2012). Longitudinal Associations Between Teen Dating Violence Victimization and Adverse Health Outcomes. *Pediatrics*, 131(1), 71–78.

⁴ Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

⁵ [Fast Facts: Preventing Sexual Violence | Violence Prevention | Injury Center | CDC](#)

Tier	Topic	Frequency	Trainer Expectations⁶	Session Length
Tier I: Introductory	Intimate Partner Violence 101	4 sessions per year	Virtual: 4 hours facilitation + 1 hour preparation = <i>5 total hours per session</i>	Half day
	Building Provider Confidence to Screen for IPV	2 sessions per year	In-person: 6 hours facilitation + 2 hours preparation = <i>8 total hours per session</i>	Full day
	Addressing Abusive Behaviors	3 sessions per year	Virtual: 3 hours facilitation + 1 hour preparation = <i>4 total hours per session</i>	Half day
	Human Trafficking and IPV	2 sessions per year	Virtual: 4 hours facilitation + 1 hour preparation = <i>5 total hours per session</i>	Half day
Tier II: Skill-Building	Supporting Survivors of Intimate Partner Violence in 1:1 Therapy	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = <i>4-5 total hours per session</i>	Half day
	Advanced Safety Planning with Survivors of Intimate Partner Violence	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = <i>4-5 total hours per session</i>	Half day

⁶ BHTEN continues to follow current public health guidelines related to COVID-19 when scheduling virtual and/or in-person training events. Selected trainers will have the opportunity to identify their training format preferences during the application and/or planning process. BHTEN will take these preferences into consideration for all scheduling and planning.

	Assessing for Intimate Partner Violence	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = 4-5 <i>total hours per session</i>	Half day
	Trauma-Informed Organizational Policy	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = 4-5 <i>total hours per session</i>	Half day
Tier III: IPV at the Intersections	Understanding Substance Use and IPV for Professionals	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = 4-5 <i>total hours per session</i>	Half day
	LGBTQ+ IPV	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = 4-5 <i>total hours per session</i>	Half day
	Impacts of IPV on Children and Parenting: Strategies for Increased Safety and Healing	2 sessions per year	Virtual: 4 hours facilitation + 1 hour preparation = 5 <i>total hours per session</i>	Half day
	IPV & Disability	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = 4-5 <i>total hours per session</i>	Half day

	Supporting Immigrant Survivors of IPV	2 sessions per year	Virtual: 3-4 hours facilitation + 1 hour preparation = 4-5 <i>total hours per session</i>	Half day
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Each tier will include a combination of previously offered trainings and brand new additions. For the 2024-2025 series, new course proposals should be focused on these topic areas:

1. Supporting Survivors of Sexual Violence
2. Assessing for Intimate Partner Violence (i.e. discerning whether someone is experiencing or enacting abuse, and understanding the difference between abusive and unhealthy relationships)
3. Trauma-Informed Organizational Policy (implementing trauma-informed care for survivors at the organizational policy level)
4. Supporting Immigrant Survivors of IPV

Applicants may propose other IPV and sexual violence-focused training topics, with appropriate documentation as outlined in Section H, for assessment by the Applicant Review Committee. The intended audience for these courses will be clinicians and other members of behavioral health service teams (e.g. case managers). The workshops should be designed at an intermediate/advanced level to expand upon foundational knowledge learned in earlier tiers.

H. Funding

This training initiative is being funded by DBHIDS through The Consumer Satisfaction Team, Inc. Details regarding compensation will be discussed with selected applicant(s) of this application and outlined in a Presenter Agreement.

I. Expectations of Selected Trainers

Applicants applying to develop a Tier III workshop should consider their IPV and sexual violence-focused and/or clinical areas of expertise when developing content for the series, as well as any original training curricula they have previously created which may meet the qualifications for a Tier III workshop. All proposed training topics, outlines, and/or curricula will be evaluated by the Application Review Committee to determine eligibility. Selected trainers will teach the approved course(s) within the timeframe agreed upon with the Application

Review Committee. Selected trainers may seek technical assistance from ODVS and BHTEN as needed.

Facilitators who previously offered courses do not need to re-submit those workshops for approval. The Application Review Committee will notify facilitators if their existing workshop will be considered for the 2024-25 training series.

J. Eligibility for Trainers

All applications should explain the Applicant's expertise and capacity to develop educational programs that incorporate principles of Adult Learning Theory and Trauma-Informed Practice. All applications must include a description of the Applicant's understanding of IPV, its causes, and its effects on individuals and families. Qualified applicants will possess the following credentials and/or experience:

- At least 3 years of experience providing trainings to behavioral health professionals.
- At least 3 years of experience providing direct services to individuals affected by IPV and/or sexual violence, or working with an organization that provides direct services to individuals affected by IPV and/or sexual violence.
- Experience working in a clinical setting with individuals that have experienced trauma.
- Applicants are preferred to have a master's level degree in social work, counseling, or an equivalent, but applicants with commensurate experience working in the IPV or sexual violence fields will be considered.

K. Trainer Selection

The Application Review Committee will review and evaluate all applications received in full by the designated deadline. Trainers will be selected by the Application Review Committee based on the eligibility criteria outlined above. Applicants will be evaluated on their understanding of and commitment to providing educational courses that will grow the Philadelphia behavioral health community's abilities to identify and appropriately respond to IPV. Qualified applicants may participate in a pre-selection interview with the Application Review Committee, to ask targeted questions around training experience, proposed curriculum content, and discuss options for moving forward. Trainers and/or agencies will then be selected to become a part of the Three-Tiered Intimate Partner and Sexual Violence Training Series.

Please continue to the next page to complete the application.

APPENDIX A

INTIMATE PARTNER VIOLENCE AND SEXUAL VIOLENCE Trainer Application

Trainer Applicant Name(s):			
Trainer Applicant Pronouns:			
Title(s):			
Agency/Program:			
Address:			
City:		State:	Zip Code:
Phone Number:			
Email:			

1. Describe your and/or your agency's experience providing intimate partner violence and/or sexual violence-focused services in Philadelphia (include type of services, communities being served, and how this shapes your training approach).
2. Describe your clinical experience working with trauma survivors, including concrete examples of how you approach the therapeutic relationship with an understanding of trauma.
3. Describe your and/or your agency's experience creating intimate partner violence and/or sexual violence-focused training curricula for Health and Human Services professionals.
4. Describe your and/or your agency's experience creating CEU-approved training content.
5. Please identify which Tier III topic from the list on page 8 of this application you are interested in developing and facilitating, or provide a listing of workshop topics you would like to develop and facilitate and why.

APPENDIX B

Course Preparation Form

Instructions: Applicants should complete Appendix B for each proposed training workshop.

The Behavioral Health Training & Education Network (BHTEN) is committed to supporting DBHIDS and other human service systems by planning, coordinating, and providing quality learning experiences in behavioral health and related topics. Our training audiences include providers and administrators of services, individuals engaged in services, family members, and other interested community members.

The information you provide on this form will be entered into a training database and will be reviewed by the BHTEN training team.

Please include your resume/curriculum vitae. This only has to be submitted the first time you complete this form.

If you believe we already have your resume or curriculum vitae, please place an X here:

Please Complete this form in its entirety and return to a BHTEN STAFF PERSON

Fill in BHTEN staff information below:

Name:	Title:	
Email:	Phone #:	Fax #:

Please complete items # 1, 2, & 3 for each instructor

1. Full name of instructor- include degrees and/or credentials (<i>also for APA purposes, list discipline degree, current professional position and area of expertise</i>).		
Professional Biography:		
2. Complete Mailing Address:		
3. Contact Information:	Phone Number:	Email:

4. Full name of instructor- include degrees and/or credentials (<i>also for APA purposes, list discipline degree, current professional position and area of expertise</i>).
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Professional Biography:		
5. Complete Mailing Address:		
6. Contact Information:	Phone Number:	Email:

7. Training Information:	Date(s) of Presentation(s):	Start/End Time:
Training Location:	<input type="checkbox"/> Virtual/Webinar <input type="checkbox"/> In-person Classroom <input type="checkbox"/> No preference	
Maximum # of Registrations:		

5. Are there any prerequisites for this course? If yes, please explain/describe.

6. Title of Presentation: <i>For APA, Include Instructional Level (e.g. introductory, intermediate, and advanced, etc.)</i>

7. Briefly describe the purpose (overall goals) of your presentation:

8. Briefly describe the target audience:

9. Abstract or Description: *(Up to 75 words)*

10. Learning Objectives: *List at least one objective for each hour of the training.*

11. For each learning objective, please list a statement which describes, from the participant's point of view, an assessment of how well he or she can perform the stated learning objective *(see the provided sample in Addendum #2)*

BHTEN will complete this item.

12. Presentation Outline: *Attach a complete outline of your presentation with time lines and breaks (see sample in Addendum #3)*

13. Teaching methods (place an "X" next to each teaching method to be used and the amount of teaching time you will be using that method); note that a variety of teaching methods is preferable since people learn in different ways. However, you need not include all teaching methods in your class.

Didactic:	# min/hrs:	Experiential:	# min/hrs:
Role Play:	# min/hrs:	Small groups:	# min/hrs:
Story Telling;	# min/hrs:	Other:	#min/hrs:

14. Audiovisual needs (place an "X" next to any A/V needs you may have). Please note that BHTEN laptops use MS 2010 software products. Please forward any media to BHTEN staff before to your presentation, so it can be tested prior to the event.

Easel/Flipchart:		Microphone:	
LCD Projector:		Internet access:	
Laptop (please specify if you have a Mac):			

Other: please describe any additional A/V needs you may have on the lines provided below. BHTEN staff will contact you in advance of your training date if there are A/V difficulties

15. Bibliography: Include a bibliography, in APA format, of references utilized in your presentation.

APPENDIX C

Educational Assessment Form

In an effort to ascertain the degree to which educational opportunities include references to specific transformation goals, DBHIDS would like instructors to describe the degree to which the goals are included in their presentations. On behalf of DBHIDS, the staff of BHTEN appreciates your feedback.

Please indicate which of the following principles of the DBHIDS System Transformation process will be incorporated into your presentation and **briefly describe** how that inclusion will occur. Note: not all principles listed may be applicable to your presentation.

A. Diverse stakeholders have contributed to the development of the curriculum and/or are presenters:

B. Person-First concepts are incorporated throughout the training curriculum:

C. The impact of trauma is discussed:

D. Strengths-based approaches are incorporated:

E. Evidence-based approaches are incorporated:

APPENDIX D

Samples for Course Preparation

Sample verbs to be used in formulating Learning Objectives.

The verbs listed here are not exhaustive; avoid verbs which cannot be measured (as noted in Item #8 of this preparation form)

List	Describe	Recite	Write
Compute	Discuss	Explain	Predict
Apply	Demonstrate	Prepare	Use
Analyze	Design	Select	Utilize
Compile	Create	Plan	Revise
Assess	Compare	Rate	Critique

Sample Learning Objectives:

- Describe the nature of vicarious traumatization;
- Identify two techniques for assessing signs of vicarious traumatization;
- Discuss two strategies for coping with vicarious traumatization.

Sample Assessment of Learning

The verbs listed here are not exhaustive; avoid verbs which cannot be measured (*as noted in Item #8 of this preparation form*).

<input type="checkbox"/> I can define or describe what vicarious traumatization is.	Yes		No	
<input type="checkbox"/> I now know two techniques for assessing signs of vicarious traumatization.	Yes		No	
<input type="checkbox"/> I can describe two strategies to help cope with vicarious traumatization.	Yes		No	

Sample Presentation Outline

Title:	Impact of Trauma on Staff: Addressing Vicarious Traumatization (VT)
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9:00-9:45 a.m.	<ul style="list-style-type: none"> • Opening Activities – Assessing Quality of Life at Work Settings • Small Group Exercise “Write About Something Positive at Work” • Large Group Processing of Activity
9:45-10:30 a.m.	<p>Vicarious Traumatization: A Practitioner Vulnerability</p> <ul style="list-style-type: none"> • What is it? • What contributes to its occurrence? • How does it impact practitioners? • Why must it be considered?
10:30-10:45 a.m.	B r e a k
10:45-11:15 a.m.	<ul style="list-style-type: none"> • Exercise – Do I have it? • Self-assessment of Vicarious Traumatization Domains