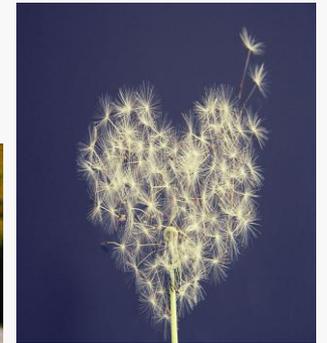




# Increasing Staff Capacity to Respond to IPV/HT During COVID 19

**January 20, 2021**

**11:00am-12:00pm PST/2:00-3:00pm EST**



# Futures Without Violence Presenters and Chat

2



**Anna Marjavi**  
Program Director



**Rebecca Levenson, MA**  
Senior Health Policy Consultant



**Kiricka Yarbough Smith**  
Human Trafficking Consultant



**Anisa Ali, MA**  
Senior Program Specialist



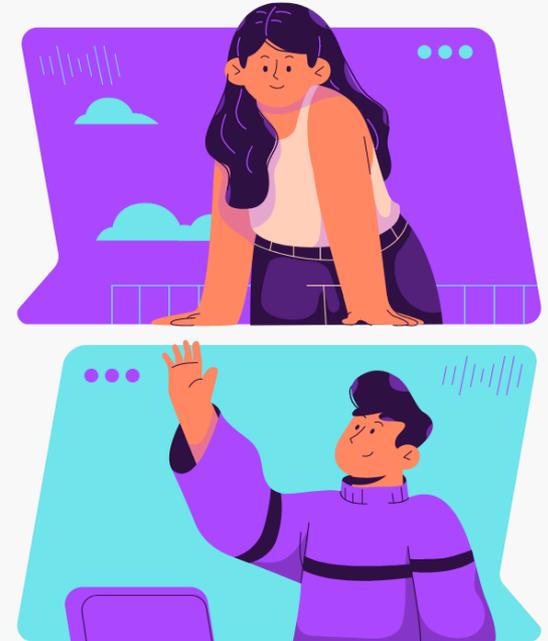
**Abby Larson**  
UC Berkeley School of Social Welfare  
MSW Intern



# Tech Welcome: Using Zoom

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- You may listen to audio through the phone or through the computer.
- All participants are muted upon entry.
- The chat box can be used for questions and comments.
- This webinar is being recorded, and the recording will be emailed to all participants attending this event.



# About the National Health Network on Intimate Partner Violence and Human Trafficking

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The **National Health Network on Intimate Partner Violence and Human Trafficking** is led by Futures Without Violence (FUTURES) to work with community health centers to support those at risk of, or surviving intimate partner violence (IPV), human trafficking (HT) and exploitation, and to bolster prevention efforts.

## Key Topic Areas:

- Increasing staff capacity and healing-centered engagement
- Assessment and universal education approaches and tools
- Building health center and community-based partnerships
- Health policy and systems change (including on new UDS measures on IPV/HT)
- Prevention approaches and ways to promote health equity and increase health and safety outcomes for those surviving IPV and HT and exploitation

Learn more: [www.futureswithoutviolence.org/health/nationalhealthnetwork](http://www.futureswithoutviolence.org/health/nationalhealthnetwork)

Email: [ipvhealthpartners@futureswithoutviolence.org](mailto:ipvhealthpartners@futureswithoutviolence.org)



# Local Partnerships are Meaningful

5

*Partnerships help promote bi-directional warm referrals for clients/patients and increase staff engagement and support.*



**DV Advocacy Partner**  
*Improve health and wellness for DV/HT survivors*



**Community Health Center Partner**  
*Improve health and safety through "CUES"*

Download a sample MOU:

<https://ipvhealthpartners.org/partner/>



# Learning Objectives

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1. Learn two ways vicarious trauma impacts health care providers and IPV/HT advocates.
2. Understand how Healing Centered Engagement builds on Trauma Informed Care as a framework for system change to support staff.
3. Understand how CUES, an evidence-based intervention for clients, also supports staff.



# About Domestic/Sexual Violence Advocacy Programs

7

**Domestic violence and sexual assault programs have vast experiences working with survivors of violence and assist them to identify ways to increase personal safety while assessing the risks.**

## **Advocates connect patients to additional services like:**

- ✓ Crisis safety planning (usually 24/hr hotline)
- ✓ Housing (emergency and transitional)
- ✓ Legal advocacy for IPV/HT, family court, immigration, labor
- ✓ Support groups/counseling
- ✓ Children's services
- ✓ Employment support



# ACF, U.S. DHHS Funded Hotlines

<https://www.acf.hhs.gov/acf-hotlines-helplines>

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800-799-SAFE (7233)  
Text LOVEIS to 22522  
Chat at [thehotline.org](http://thehotline.org)



**STRONGHEARTS**  
Native Helpline

844-7NATIVE (762-8483)  
Monday-Friday from 9am  
to 5:30pm CST  
[strongheartshelpline.org](http://strongheartshelpline.org)



800-RUNAWAY (786-2929)  
Email: [1800runaway.org/crisis-online-services/](mailto:1800runaway.org/crisis-online-services/)  
Chat at [1800runaway.org/](http://1800runaway.org/)  
Forum:  
[bulletinboards.1800runaway.org/forum](http://bulletinboards.1800runaway.org/forum)



877-565-8860  
[www.translifeline.org/](http://www.translifeline.org/)

THE **TREVOR** PROJECT  
Saving Young LGBTQ Lives

[www.thetrevorproject.org](http://www.thetrevorproject.org)  
866-488-7386 LGBTQ Youth



Let's Take A Collective Moment to Stop



# Chat Box Exercise

10



**In the chat box,  
please type a word  
that sums up your  
feelings today?**



# Let's talk about us, COVID *and everything else...*

11

- *Today's inauguration*
- *Public health challenges rolling out vaccine*
- *COVID losses, fears, grief*
- *Economic and job uncertainty*
- *Institutional and systemic racism*
- *Hope for where we are and the future*



**“Here on the pulse of this new day,  
You may have the grace to look up and out  
And into your sister's eyes, into  
Your brother's face, your country  
And say simply  
Very simply  
With hope  
Good morning.”**

- Maya Angelou



# Trauma-Informed Care

13

**Trauma-Informed Care** is moving away from “what’s wrong with you?” to “what happened to you?”

- Safety
- Trustworthiness
- Peer support
- Collaboration and mutuality
- Empowerment, voice, and choice
- Cultural, historical, and gender issues



# Vicarious Trauma

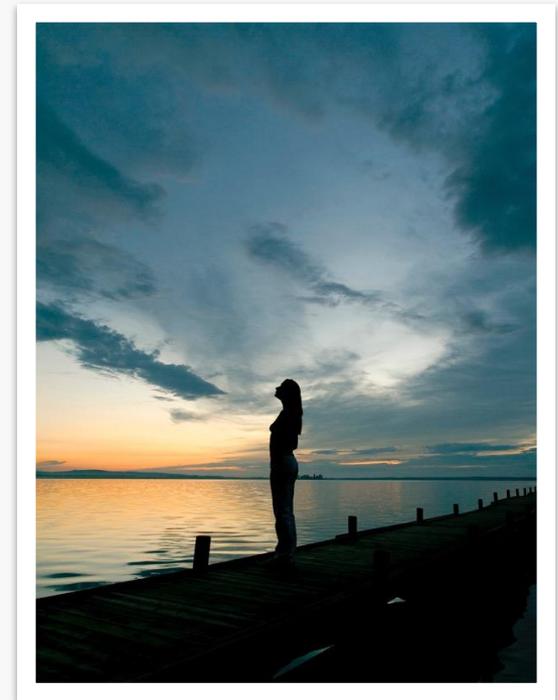
14

**Vicarious trauma** is a change in one's thinking [world view] due to exposure to other people's traumatic stories.

(David Berceci, 2007)

## May include:

- Images
- Sounds
- Details we've heard which then come to inform our worldview.



# Staff Experiences

15

“At the beginning of our IPV work we **first** offered information and resources for employees on vicarious trauma, including developing a support group just for staff, and because of that we were able to build staff resiliency before addressing IPV with patients”.

— Sara Gavin, LMFT, LPCC, Director of Behavioral Health, CommuniCare Health Centers  
(Woodland, CA)

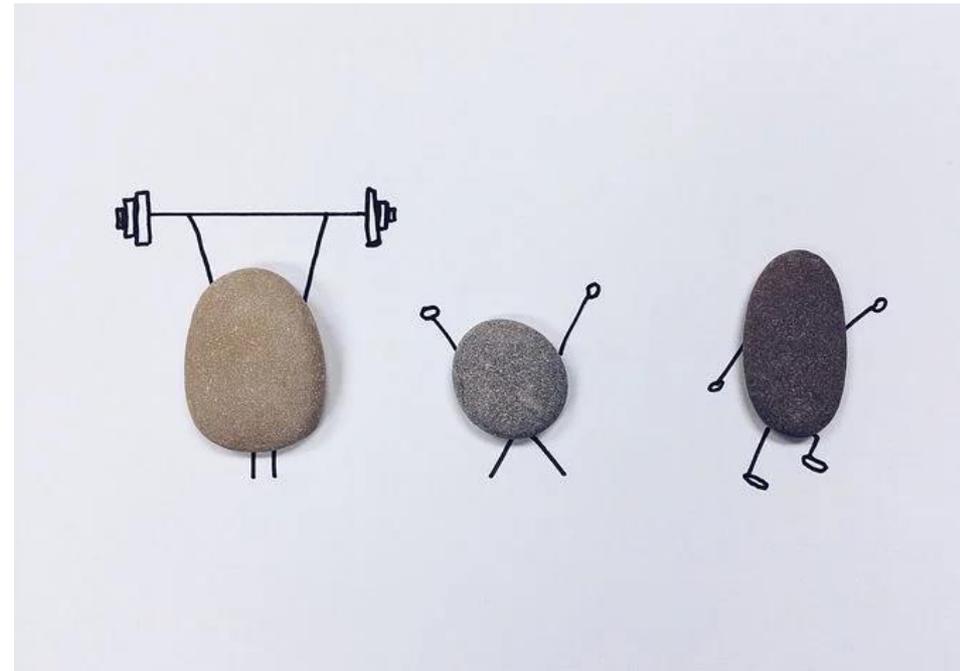
Substance Abuse and Mental Health Services Administration (SAMHSA) recognizes how trauma affects all individuals involved with the program, organization, or system, including its own workforce.

Visit: [www.samhsa.gov/nctic/trauma-interventions](http://www.samhsa.gov/nctic/trauma-interventions)

# Trauma Informed Care v. Healing Centered Engagement

16

- Trauma informed care is important, but it is incomplete
- It doesn't acknowledge that trauma is experienced collectively not just individually
- Fails to address the root causes of trauma that exist in the environment, not the individual
- Focuses on coping with symptoms rather than healing from them



(Ginwright, 2018)



# Healing-Centered Engagement

17

**“A healing-centered approach is holistic involving culture, spirituality, civic action and collective healing. A healing-centered approach views trauma not simply as an individual isolated experience, but rather highlights the ways in which trauma and healing are experienced collectively.”**



Ginwright, S. (2018). "The Future of Healing: Shifting From Trauma Informed Care to Healing-Centered Engagement," Medium.

- ✓ Supports providers with their own healing.
- ✓ Asks systems to build in structures to address the realities facing health staff
- ✓ Supporting providers helps health staff better support patients and be present
- ✓ Healing is a process we all need.



# Cost of Burnout Among Providers

18

- (Pre-COVID) More than **half of U.S. physicians** experienced substantial symptoms of burnout.
- In a study of 10,000 nurses: **43% had a high degree** of emotional exhaustion. (Dyrbye, 2017)

And now...

- According to an August, 2020 analysis led by the University of California at San Francisco:

“Amid the COVID-19 chaos in many hospitals, emergency medicine physicians in seven cities around the country experienced **rising levels of anxiety and emotional exhaustion, regardless of the intensity of the local surge.**”

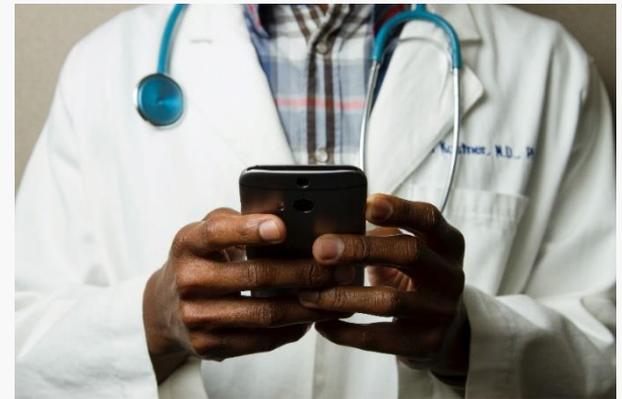


# Health Staff Experiences with Violence

19

- It is estimated that **sixty eight percent** of the healthcare workforce have experienced at least one episode of violence, abuse, or neglect—compared to their colleagues in other industries.
- They are also more likely to experience workplace violence.
- **Healthcare professionals develop vicarious, or secondary, traumatization through exposure to their patients' stories of violence and trauma.**

(Maunder, 2010)



# Self-Soothing v. Self-Care

20

- We are not talking about mani/pedi/massage or shopping
- At its core – self-care is about rituals meant to calm the nervous system
- In “A Burst of Light” Audre Lorde writes, ***“Caring for myself is not self indulgence it is self preservation and that is an act of political warfare.”***

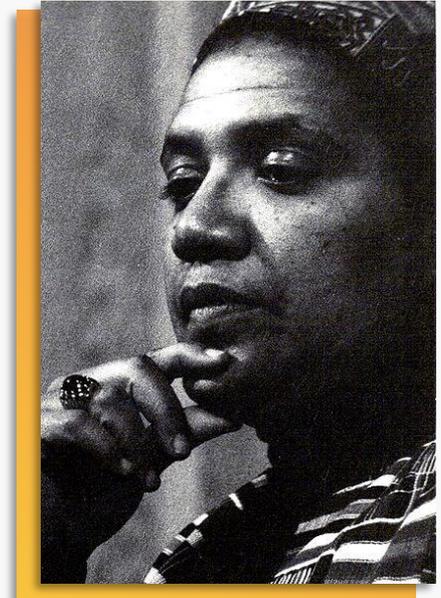


Photo by [K. Kendall](#), "Audre Lorde" from Flickr, CC BY 2.0



## Practice Consideration #1: Reflective Practice Groups for Health Care Staff Wellness

21

Reflection means stepping back from the immediate, intense experience of hands-on work and taking the time to wonder what the experience really means. What does it tell us?

- ✓ A cost-effective way to help staff with work-related stressors
- ✓ Safe, non-judgmental, and supports staff growth and self-awareness
- ✓ Provides positive regard and caring
- ✓ Is regular and reliable (monthly/bi-monthly)
- ✓ Improves team function
- ✓ Uses a strength-based approach
- ✓ Provides space for reflection



# New Concept: Vicarious Resilience

22

- Is a process of tapping into our own feelings
- Extending our thinking to how others may be feeling
- Builds empathy helping to make us more aware of our own biases and the ways our different identities influence our perceptions of others
- This in turn helps to position us to recognize power dynamics, our privileges and helps guide how we engage in our work
- As we develop these reflective skills, we become more “attuned” to contexts in which inequities exist and allows us to unpack bias



# Reading Our Own Cues

23

**What am I like  
when I am  
feeling  
balanced and  
regulated?**

**Body  
Feelings  
Thoughts  
Behavior**

**What am I like  
when I am  
feeling  
dysregulated  
and not in  
balance?**

**Body  
Feelings  
Thoughts  
Behavior**

**erikson institute**



# Mindful Self Regulation (MSR)

24

## Examples of MSR strategies:

- Breathing
- Grounding
- Self-talk
- Imagery



For short guided videos, see:  
Capacitar International  
<https://capacitar.org/>

# Clinic Example of Self Care: CommuniCare

25

- Monthly Brown Bag Lunch Meetings
- Dedicated space to meet
- Focused on Self Care and Celebration (not problems)
- This approach builds resiliency and helps providers 'see' other providers being intentional about taking a break
- Demonstrates how taking care of themselves means joining in a celebration of the resiliency and sharing that out loud.



# Show of Hands

26

- How many of you have, or know someone who has ever left something out of a medical history or intentionally misreported information to their healthcare provider?
- Why?



# Health Equity Means Social Justice in Health

27

*Health equity means that everyone has a fair and just opportunity to be as healthy as possible. To achieve this, we must remove obstacles to health — such as poverty, discrimination, and deep power imbalances — and their consequences, including lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.*

(Braveman P, Arkin E, Orleans T, Proctor D, and Plough A. What Is Health Equity? And What Difference Does a Definition Make? Princeton, NJ: Robert Wood Johnson Foundation, 2017)



# Challenging the limits of disclosure-driven practice

28

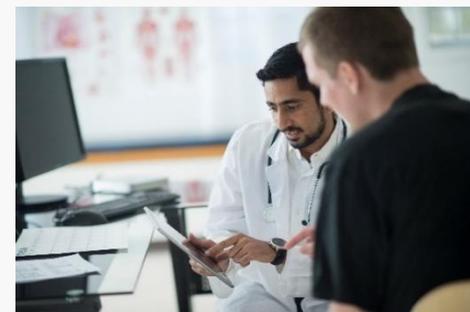
- Challenging the limits of disclosure-driven practice is part of the Heart of Healing Centered Engagement and Equity.
- It is an actionable step we can take towards achieving these goals on both an individual level and interpersonal level.



# Universal Education= Equity in Health

29

**Provides an opportunity for clients to make the connection between violence, health problems, and risk behaviors.**



***\* If you currently have IPV/HT screening as part of your health center requirements: we strongly recommend first doing universal education.***



# CUES: A Brochure-based Intervention

30



**Adolescent Safety Card**  
**Available in English and Spanish**



# CUES began with this

31

## What About Respect?

**Anyone you're with (hanging out, or hooking up) should:**

- ✓ Make you feel safe and listened to.
- ✓ Never pressure you or try to get you drunk or high, especially if they use that to hook up with you.
- ✓ Ask if it's ok to touch you, kiss you (or whatever else).

How would you want your best friend, sister, or brother to be treated by someone they were going out with? Ask yourself if the person you are seeing treats you with respect, and if you treat them with respect.



# Sex, Power, and You

32

## Sex, Power and You

- Sometimes it starts with trading sex for little things—like getting your hair and nails done or new clothes.
- Sometimes you need a place to sleep or a shower, and the only way to get that is to have sex with someone.
- Sometimes it starts with someone you feel really likes you—but they end up making you have sex with other people for money.

Maybe they hurt or are hurting you.

No matter what, ***you are not alone***. There are folks that can help.

Please call 24/7 (for yourself or a friend)—it's free and confidential:  
1 (888)-373-7888 or text "Befree" 233733



# National Health Resource Center on DV Tools

33

## Population and Setting Specific

- Adolescent Health
- American Indian/Alaska Native, and Hawaiian
- College Campus
- HIV+
- Lesbian, Gay, Bisexual, Questioning (LGBQ)
- Parents and Caregivers
- Pediatrics and Home Visitation
- Pregnant or parenting teens
- Primary Care
- Reproductive Health Settings
- Transgender/Gender Non-conforming
- Muslim Youth

## By language:

- Available in English and most in Spanish.
- Our Primary Care (General Health) safety card is available in the following languages: Armenian, Chuukese, Farsi, Hawaiian, Korean, Marshallese, Modern Standard Arabic, Simplified Chinese, Samoan, and Tagalog – [store.futureswithoutviolence.org](http://store.futureswithoutviolence.org)



# CUES: An Overview

34

## **C: Confidentiality**

See patient alone, disclose limits of confidentiality

## **UE: Universal Education + Empowerment**

***Normalize activity:***

"I've started giving two of these cards to all of my patients—in case it's ever an issue for you because relationships can change and also for you to have the info so you can help a friend or family member if it's an issue for them."

***Make the connection—open the card and do a quick review:***

"It talks about healthy and safe relationships, ones that aren't and how they can affect your health....and situations where youth are made to do things they don't want to do and tips so you don't feel alone."

## **S: Support**

"On the back of the card there are 24/7 text and hotlines that have folks who really understand complicated relationships. You can also talk to me about any health issues or questions you have."



# Case Example

35



# CUES is Healing-Centered Engagement

36

Builds Relationships

Strength-Based  
Caring Focused

Focus on Altruism

Improves Access to  
Advocacy

Empowers clients and the  
folks they care about

Shares power between  
provider and client

“...the power of social support is more about mutuality than about getting for self...that is, there is a need to give, to matter, to make a difference; we find meaning in contributing to the well-being of others.”



# CUES Supports Providers, Too

37

- **Addresses Burnout**
  - Identify the things you can and can't control at work (as a strategy to address burnout).
  - “Not having enough time with patients” being among top 3 reasons for burnout
- **CUES Scripts and tools to ease conversations**
  - Promotes meaningful connection in a brief time (30 seconds or less)
  - Promotes meaning and centers the clients needs above the system requirements (screening vs. universal ed)
  - The script help providers address conversations that might have historically been difficult for them; and helps providers feel good about providing support for something the client may not be able to talk about
  - Vicarious resilience—bolsters staff capacity; screening reproduces systems of oppression



# Webinar Recording: Addressing IPV and HT in the Health Center Setting

38

- Describes an evidence-based, trauma-informed intervention for IPV/HT (“CUES”)
- Reviews the newly included UDS data elements designed to capture IPV/HT
- Outlines considerations for privacy, safety, and equity virtual platforms
- Features promising strategies on how to utilize health IT to support quality clinical care and data collection for IPV/HT



**Link to recording, slides, and transcript:**

<https://hiteqcenter.org/Resources/HITEQ-Resources/ArtMID/718/ArticleID/1742/preview/true>



# Upcoming Webinar!

39

- Wednesday, January 27, 2021 from 10-11amPST/12-1pmCST/1-2pmEST/2-3pmAST/Puerto Rico

## **Clinical Response and Prevention Strategies to Support Migrant and Seasonal Agricultural Workers Who Have Experienced Intimate Partner Violence and Human Trafficking**

***More info and register:***

***<https://www.migrantclinician.org/trainings.html>***



Visit the **[National Health Network website](https://www.futureswithoutviolence.org/health/nationalhealthnetwork)** to find more information on upcoming webinars and learning collaboratives:

**<https://www.futureswithoutviolence.org/health/nationalhealthnetwork>**

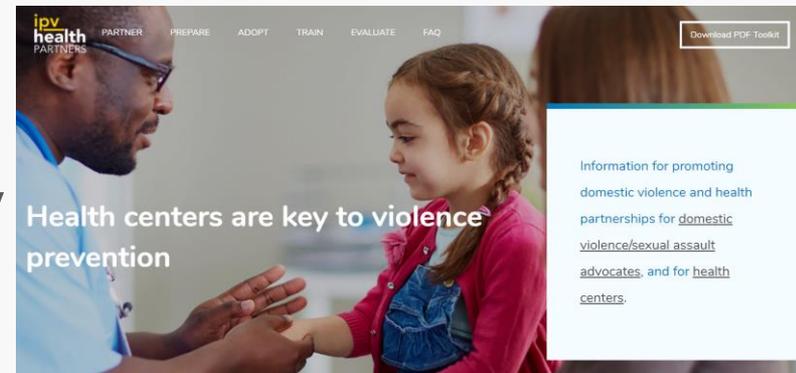


# [www.IPVHealthPartners.org](http://www.IPVHealthPartners.org) online toolkit + CUES

40

## Guidance on:

- ✓ Enhancing patient privacy
- ✓ Disclosing limits of confidentiality
- ✓ Universal education scripts
- ✓ Reaching friends and family
- ✓ Disclosures + supportive messages
- ✓ Warm referrals to local DV programs
- ✓ Safely sharing resources
- ✓ Tech privacy tips



**+ New guidance on COVID-19  
and telehealth support**

<https://ipvhealthpartners.org/covid19/>



# Additional Upcoming Learning Collaboratives

41

1. March - April 2021: [Adapting and Formalizing Health Center Protocols on Intimate Partner Violence and Human Trafficking in Partnership with Community-based DV Programs](#)
2. March - April 2021: [Strengthening Patient and Provider Responses to Intimate Partner Violence and Human Trafficking](#)
3. April - June 2021: Support Inclusive Recovery— Addressing the Intersection of Gender, Behavioral Health Services, IPV and Homelessness

**Visit:** <https://www.futureswithoutviolence.org/health/nationalhealthnetwork>

**Please email:** [ipvhealthpartners@futureswithoutviolence.org](mailto:ipvhealthpartners@futureswithoutviolence.org)





**National Network on Intimate Partner Violence and Human Trafficking**

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**Visit: [www.futureswithoutviolence.org/health/nationalhealthnetwork](http://www.futureswithoutviolence.org/health/nationalhealthnetwork)**

