

Collaborating to Improve Responses to Domestic Violence in Home Visitation Programs

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This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program FY'15 Competitive Grant (grant D89MC28269, \$9,400,000) to the Kansas Department of Health and Environment (KDHE). This information or content and conclusions are those of the author and should not be construed as the official position of policy of, nor should any endorsements be inferred by KDHE, HRSA, HHS, or the U.S. Government. 1

Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program

- Federal program created in 2010
- KDHE – lead agency
- To support evidence-based home visiting services for at-risk pregnant women and parents with young children birth to kindergarten entry
- Improve coordination of services and outcomes for families who reside in at-risk communities in a comprehensive, high-quality early childhood system that promotes maternal, infant, & early childhood health, safety, development, and strong parent-child relationships

Targeted At-Risk Communities

- Southeast Kansas Counties
 - Montgomery, Labette, Cherokee, Neosho, Wilson
- Wyandotte County
 - Kansas City, KS

MIECHV Partners

- Early Head Start – Home-based
- Healthy Families America
- Parents as Teachers
- TIES (Team for Infants Exposed to Substance Abuse)
- Coordinated Outreach & Referral Systems

State level:

- Kansas Coalition Against Sexual & Domestic Violence
- KU Center for Public Partnerships & Research – evaluation and coordination support

Needs & Challenges

Home visitors overwhelmed with domestic violence issues presented by families:

- Skills, experience, competence, comfort level
- Boundaries, roles as a home visitor
- Impact on ability to address other areas of child development, parenting, family wellness
- Impact on infant/early childhood mental health
- Safety – home visitor, mom/family and children
- Accessibility and use of domestic violence services
- Coordination and understanding between HV & DV
- Keeping families engaged in home visiting and other services

MIECHV Benchmark Measures

- Screening for Domestic Violence
- Of families identified for presence of DV:
 - Referrals to relevant DV services
 - Completed safety plan

State HV/DV Collaboration

- Prior training approaches
- Initial collaborative meeting in Nov. 2013 and workgroup formation
- Statewide survey April 2014
- MIECHV competitive grant award beginning March 2015

Objective and Strategies

Improve outcomes for at-risk families engaged in home visiting services through better linkages to targeted interventions that specifically address identified areas of need in domestic violence

- Implement training and technical assistance with home visiting staff and local domestic violence advocates to improve domestic violence screening, referral, and safety plans
- Pilot in MIECHV communities then statewide

April 2014: Statewide Survey of HV/DV Programs

- Focused on collaboration between home visiting and domestic/sexual violence programs
- Sent to PAT, EHS, HFA, Part C & MIECHV networks
- 124 respondents
- 80 percent of respondents represented home visiting programs

HV/DV Collaboration

- 90% rated collaboration as important or very important
- 45% indicated collaboration was excellent or good
- 31% felt collaboration efforts were not so good
- 24% indicated collaboration was poor or non-existent

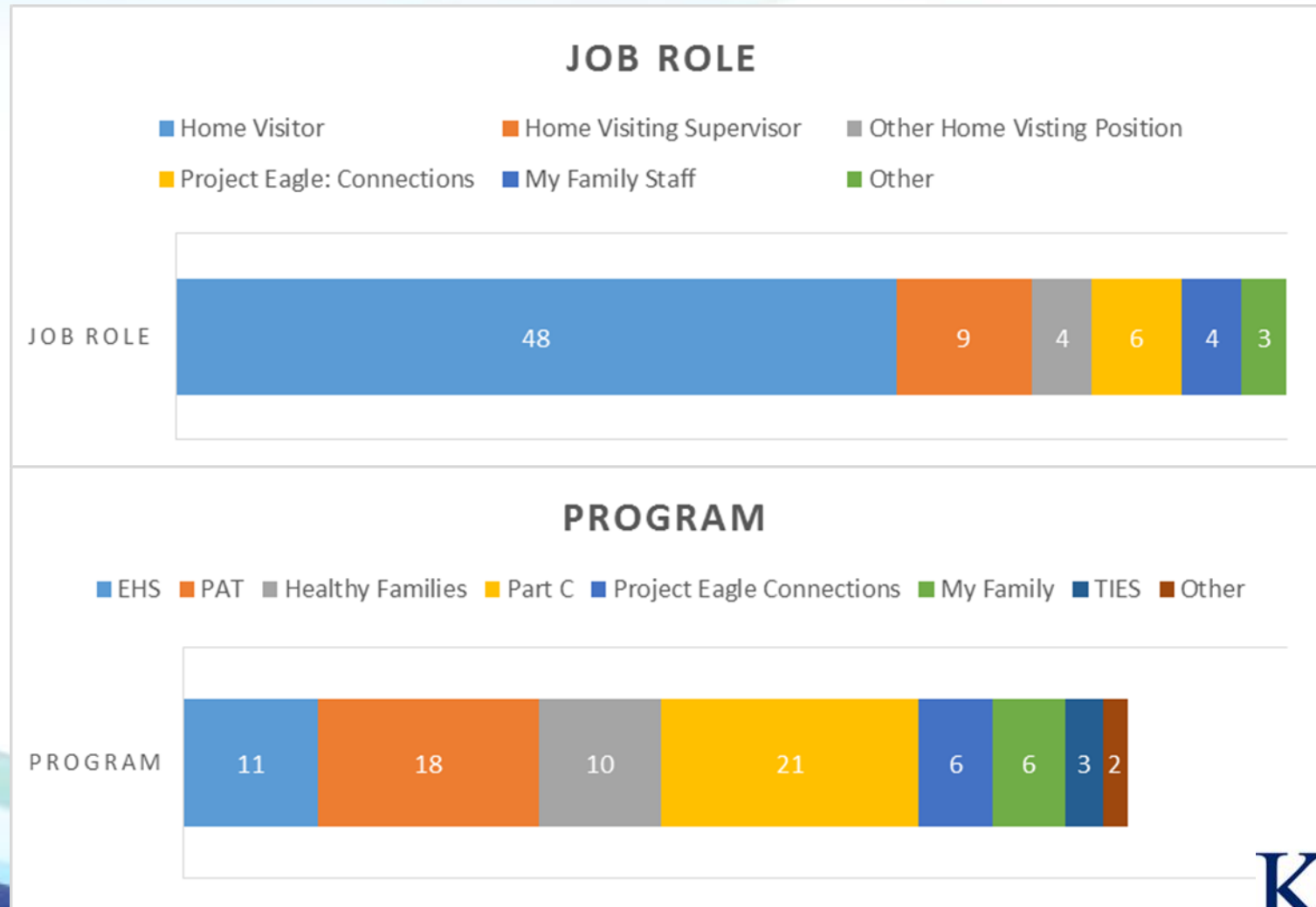
HV/DV collaboration most frequently occurs...

- Making and receiving referrals
- During cross-program training
- Serving together on community coalitions

Barriers to collaboration

- Time
- Resources
- Client confidentiality
- Lack of domestic/sexual violence partners in the community
- Lack of understanding about each other's program

November 2015: Survey of MIECHV Program Partners



Home visitors indicated they...

- Are not confident they can identify the signs of domestic and sexual abuse
- Don't know what to do when they suspect a client may be suffering from abuse
- Don't have a method for following up a referral to a domestic or sexual violence program

Home visitors identified training needs

- Screening
- Referral process
- Kansas laws regarding domestic violence
- Domestic/sexual violence programs and resources
- Confidentiality and mandated reporting
- When & how to make an appropriate referral
- Creating safety plans
- Personal safety for staff

Referral Process

- 63% of home visiting programs don't have a defined process for making DV referrals
- 36% of home visitors are unsure how to make a referral or are uncomfortable making referrals

Barriers to making a referral

- Family refusal
- Losing home visitor-family trust
- Client confidentiality
- Unsure of referral process or appropriateness of referral

Connecting with domestic/sexual violence programs

- 62% network with domestic/sexual violence programs in their community
- 20% report no interaction
- 90% want to better understand how HV/DV programs can support each other
- 77% believe it would be helpful to build relationships with domestic/sexual violence victim advocates

MIECHV Connection



KDHE Partnered with KCSDV in 2015

To provide:

- Resources to assist with training home visitors.
- Technical assistance.
- Collaboration development.
- Resource development for home visitation providers on best practices related to sexual and domestic violence.

Develop Training Materials for Home Visitation Providers

Materials are designed to help home visiting programs increase understanding of domestic violence and how to effectively coordinate with program services.

Futures Without Violence *Healthy Moms, Happy Babies* curriculum:

This curriculum is focused on best practices for home visitation providers to address domestic violence.

Full-Day Training for Home Visitors

Designed for home visitors to screen for, recognize, effectively respond to domestic violence and to understand appropriate services available.

Develop Training for Domestic Violence Providers

Designed to help domestic violence advocates increase understanding of home visitation programs, gain referral knowledge and how to effectively coordinate with program services.

Home Visiting and Domestic Violence Training: Evaluation of Training

Training Participants

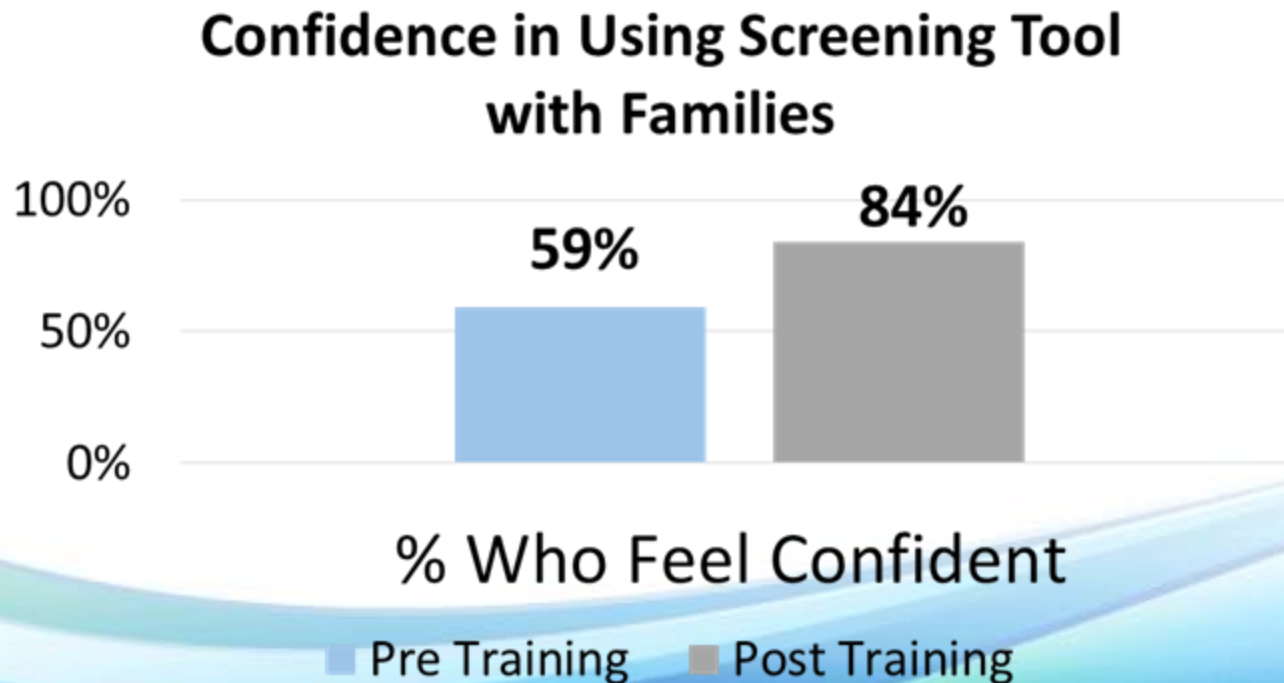
- Wyandotte County and Southeast Kansas Communities
- 87 Participants:
 - 77% Home Visitors
 - 9% Home Visiting Supervisors
 - 10% Outreach, Intake, and Referral Program Staff
 - 4% Other
- Pre and post training survey

Training Objectives

- Improve home visiting program staff skills for:
 - Screening for domestic violence.
 - Safety planning.
 - Referrals to domestic violence services.

Domestic Violence Screening

- Confidence in using screening tools in home visiting increased as a result of the training



Safety Planning

Participants felt more confident in making safety plans with clients due to the training they received.

67%

stated prior to training that they feel confident working with clients to make safety plans.

86%

stated after training that they feel confident working with clients to make safety plans.

Referrals to Domestic Violence Services

Question	Before Training	After Training
I know where to refer my clients/families for domestic violence concerns.	90%	100%
I know a staff member at my community domestic violence agency.	42%	81%

71%

stated prior to training that they feel confident referring a family to a local DV program.

94%

stated after training that they feel confident referring a family to a local DV program.

Build Sustainable Partnerships

Collaboration:



What is Collaboration?

- Collaboration:

“A mutually beneficial and well-defined relationship entered into by two or more entities to achieve results they are more likely to achieve together than alone.”

(Winer & Ray)

Collaboration

- Mutually beneficial.
- Well-defined relationship.
- Multiple entities.
- Results more likely to achieve together.

Best Practices for Collaborations

- Define and clarify roles.
- Communicate roles and functions.
- Be consistent.
- Respect others' policies and be confident in your own.
- Everyone in the collaborative plays an important role, regardless their level of power.

Adapted from Julie Kunce Field; The Confidentiality Institute

Successful Collaboration: Key Elements

Appropriate People + Constructive
Processes + Good Information =
The Best Solution



“Alone we can do little, together we can do so much.”

– Helen Keller

Tools to Support Home Visitors



- Flip book desk reference manual.
- Shoe cards or handout cards.
- Continued technical assistance.

HOME VISITATION

Guidelines on Domestic Violence



"The emotional recovery of children who have been exposed to domestic violence appears to depend on the quality of their relationship with the non-battering parent more than on any other single factor."

– Bancroft and Silverman

This guide was developed by the Kansas Coalition Against Sexual and Domestic Violence in collaboration with the Kansas Department of Health and Environment through the Kansas Maternal, Infant, and Early Childhood Home Visiting Program.



www.futureswithoutviolence.org/health





Formerly Family Violence Prevention Fund

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Funded by the Administration on Children,
Youth and Families, U.S. Department of
Health and Human Services and the Office
on Women's Health, U.S. Department of
Health and Human Services.

**National hotlines can connect
you to your local resources and
provide support:**

For free help 24 hours a day, call:

National Domestic Violence Hotline
1-800-799-SAFE (1-800-799-7233)
TTY 1-800-787-3224

Teen Dating Abuse Hotline
1-866-331-9474

**Rape, Abuse, Incest,
National Networks (RAINN)**
1-800-656-HOPE (1-800-656-4673)





Home Visitation and Domestic Violence: Enhancing Safety and Support for Children & Families

4 regional trainings:

Possible locations: Hays, Garden City, Wichita,
and Lawrence

July & August 2017 (exact dates TBD)

Questions?



Resources

- Futures without Violence
Healthy Moms, Happy Babies
 - www.futureswithoutviolence.org
- Local domestic violence & sexual assault programs
 - <http://www.kcsdv.org/find-help.html>
- KCSDV
 - www.kcsdv.org
- Kansas Crisis Hotline
 - 1-888-END ABUSE (1-888-363-2287)
- National Domestic Violence Hotline
 - 1-800-799-SAFE (7233)

Contact Information

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Thank You!