

Domestic Violence and HOUSING INSECURITY

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LIVE UNITED
United Way
Tulsa Area United Way
Partner Agency

Overcoming violence and abuse ♦ 918.7HELP.ME ♦ dvis.org

AGENDA

- Domestic Violence Overview
- Types of Abuse
- Confidentiality
- Safety Planning Techniques
- Emergency Transfer Plan
- Best Practices in Victim Services



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DOMESTIC VIOLENCE is...



PATTERN of abusive behaviors used to gain and maintain **COERCIVE POWER AND CONTROL** over another person in a relationship.

Intimate Partnership Violence (IPV) may be current or ex-partner.

HOMELESS WOMEN are often victims of domestic violence – over **50%** reported having experienced it in the last Point in Time Count (2023).

1 in 4 women and **1 in 9 men** experience severe intimate partner physical violence, and that risk increases among those experiencing housing insecurity.



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THE CYCLE OF VIOLENCE



Tension-building phase

Acute / Crisis Phase

Calm / Honeymoon Phase

(Repeat)



Defining **the PROBLEM**



Oklahoma is **2nd in the nation** for the number of **women murdered by men.**¹

DV homicides in Oklahoma have **not declined in the last 20 years**, and Tulsa County's DV death rate is **2x higher** than Oklahoma County.²

Children who witness DV are **3x more likely** to engage in violent behavior and are more likely **to become the victim or perpetrator** in their own future intimate partner relationships.

In 2021, **19 children were killed** in DV-related incidents (much higher than Oklahoma County). **Children are present in 30% of all DV-related events.**³

¹ Violence Policy Center's When Men Murder Women: An Analysis of 2020 Homicide Data

² Oklahoma Domestic Violence Fatality Review Board 2022 Annual Report

³ 17th Annual Domestic Violence Counts Report: Oklahoma Summary

Types of ABUSIVE BEHAVIOR



- Physical
- Emotional/Verbal
- Sexual
- Financial
- Religious
- Stalking
- Digital



Effects of IPV on INDIVIDUALS



Psychological

Reproductive

Behavioral

Physical Health

Social

Anxiety
 Depression
 PTSD symptoms
 (post-traumatic
 stress disorder)
 Antisocial
 behavior
 Suicidal behavior
 in females
 Low self-esteem

Asthma
 Cardiovascular
 disease
 Fibromyalgia
 Irritable bowel
 syndrome
 Chronic pain
 syndromes
 Central nervous
 system disorders
 Gastrointestinal
 disorders
 Migraines and
 headaches

Gynecological
 disorders
 Pelvic inflammatory
 disease
 Sexual dysfunction
 STIs including
 HIV/AIDS
 Unintended
 pregnancy
 Delayed prenatal care
 Preterm delivery
 Low birth weight
 babies and perinatal
 deaths

Restricted access
 to services
 Strained
 relationships
 with health care
 providers and
 employers
 Isolation from
 social networks
 Homelessness

High-risk sexual
 behavior
 Unprotected sex
 Early sexual
 initiation
 Having unhealthy
 and/or multiple
 partners
 Using harmful
 substances
 Abusing alcohol
 Unhealthy diet-
 related behaviors
 Overuse of health
 services



Effects of IPV on CHILDREN



- More aggressive and anti-social behaviors
- More fearful and inhibited behaviors
- Lower social competence
- Poorer academic performance
- High correlation between IPV and child abuse



LETHALITY Factors



Many factors increase the **DANGEROUSNESS** of a situation:

STRANGULATION

SEXUAL ASSAULT

INCREASING VIOLENCE

SUBSTANCE ABUSE

UNEMPLOYMENT

SUICIDAL IDEATION



CONFIDENTIALITY



The obligation of professionals to respect the privacy of clients and the information they provide. Victim rights laws protect the identity and information of survivors. Written/digital consent must be obtained in order to share information



Starting **RIGHT**



MAINTAIN CONFIDENTIALITY

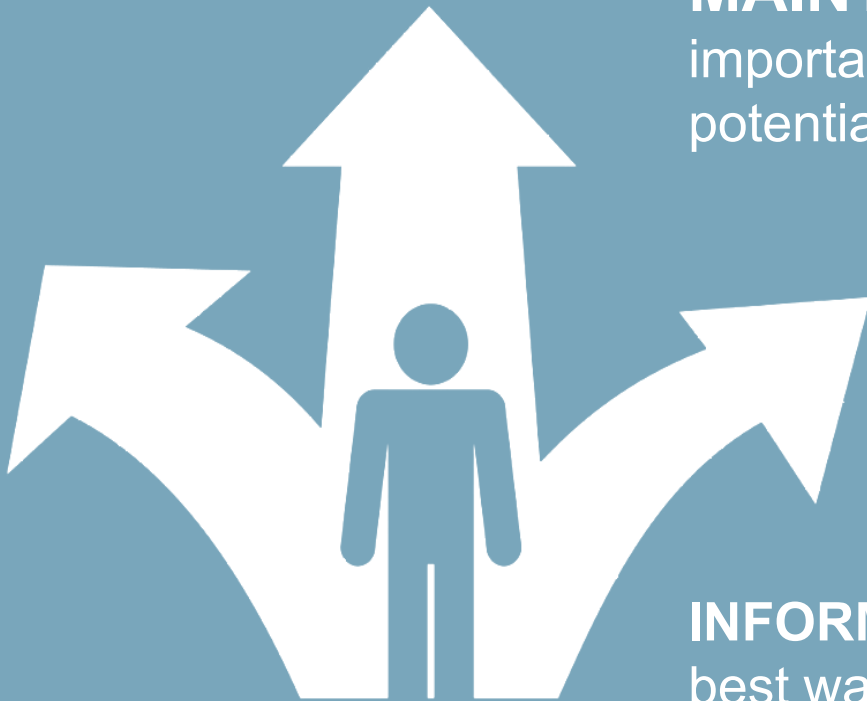
important in building trust and protecting from potential harm

PROVIDE INFORMATION

adequate and continuous info regarding treatment
assist with making informed decisions

INFORMED CONSENT

best way to protect clients



SAFETY PLANNING

Tailored strategies to keep survivors safe



CONSIDER:

Which person or people might be a threat to you or your children's safety?

What are some ways they might gain access to you? (phone calls, following you, asking friends / family, etc.)

What could you do to decrease the risk of your abuser finding you?

Identify 3 people (who you can trust) to keep copies of your important papers, to talk to if needed, and to notify in an emergency.

What emergency numbers can you or your children call if your abuser shows up unexpectedly?

Which area of town would you avoid to decrease the risk of running into your abuser or mutual friends?

What is the most likely way your abuser could cause you harm, and how can you plan to keep yourself out of that situation?



SAFETY PLANNING

Helpful numbers



911

for
EMERGENCY
POLICE, FIRE,
or MEDICAL

918-596-9222
non-emergency

**DVIS Shelter &
24-hr HOTLINE:**

**918-743-5763
918-7HELP-ME**

C.O.P.E.S.
918-744-4800
for
mental health
emergencies

DVIS Legal
918-742-7480
for
PROTECTIVE
ORDERS

located in the
Family Safety Center
Mon-Fri, 8-5



Emergency Transfer Plan from AWH4T Service Standards



TO REVIEW Section 2.12.1 – 2.12.5

Key components in making a plan:

- IDENTIFY THE THREAT
- MOBILIZE RESOURCES
- SECURE A SAFE LOCATION

2.12.1 Emergency Transfer Qualifications

A client qualifies for an emergency transfer if:

1. The client is a survivor of domestic violence, dating violence, sexual assault or stalking;
2. The client expressly requests the transfer; *and*
3. The client either:
 - a, reasonably believes there is a threat of imminent harm from further violence, or
 - b, the client is a survivor of sexual assault, with the sexual assault occurring on the premises during the 90-calendar-day period preceding the date of the request for transfer.

Emergency Transfer Plan from AWH4T Service Standards



2.12.2 Emergency Transfer PROCESS

- **SUBMIT REQUEST**
- **COORDINATION**
internal/external/both
- **RENTAL ASSISTANCE**
- **STEPS TO SECURE**
SAFE UNIT

2.12.2 Emergency Transfer Process

Participants may submit an emergency transfer request directly to program staff. The program must communicate with the Coordination Center to inform them that an emergency transfer request has been made and whether the request is for an internal transfer (a transfer where the client would not be categorized as a new applicant), external transfer, or both. Participants may seek an internal and external emergency transfer at the same time if a safe unit is not immediately available. If the participant receives tenant-based rental assistance, the program will take reasonable steps to support the participant in securing a new safe unit as soon as possible and a transfer may not be necessary.

Emergency Transfer Plan from AWH4T Service Standards



2.12.2.1 INTERNAL Transfer

- IMMEDIATE STEPS if safe unit available
- SAME PRIORITY
- EXPLAIN OPTIONS if unit not available:
 - Wait
 - Request external
 - Pursue both

2.12.2.1 INTERNAL Transfer

Where a participant requests an internal emergency transfer, the program should take steps to immediately transfer the participant to a safe unit if available. Requests for internal emergency transfers should receive at least the same priority as the program provides to other types of transfer requests. If a safe unit is not immediately available, program staff will inform the participant and explain their options to:

1. Wait for a safe unit to become available for an internal transfer,
2. Request an external emergency transfer, and/or
3. Pursue both an internal and external transfer at the same time in order to transfer to the next available safe unit in the CoC.

Emergency Transfer Plan from AWH4T Service Standards



2.12.2.2 EXTERNAL Transfer

- **PRIORITIZED OVER ALL OTHER APPLICANTS**
- **REFERRED TO VERY NEXT UNIT through *All Doors Open***
- **HOUSEHOLD MAINTAINS HOMELESS STATUS**

2.12.2.2 EXTERNAL Transfer

If a participant requests an external emergency transfer, the participant has priority over all other applicants for housing assistance, provided the household meets all eligibility criteria required by the program.

After the agency communicates the participant's emergency transfer request to the Coordination Center, the Coordination Center will facilitate referral of the participant to the next available appropriate unit through the All Doors Open.

The household retains their original homeless or chronically homeless status for purposes of the transfer.

Emergency Transfer Plan from AWH4T Service Standards



2.12.3 DOCUMENTATION / RECORDS

- WRITTEN REQUEST include any additional documents
- RETAIN FOR 5 YEARS
- REPORT TO HUD ANNUALLY

2.12.2.3 DOCUMENTATION and Record Keeping

To request an emergency transfer, the participant should submit a written request to program staff, certifying that they meet the emergency transfer qualification requirements. The program may – but is not required to – request additional documentation of the occurrence for which the participant is requesting an emergency transfer. No other documentation is required. Programs must retain records of all emergency transfer requests and their outcomes for a period of five years following the grant year of the program in which the household was a participant. CoC-funded programs must report emergency transfer requests to HUD annually.



Emergency Transfer Plan from AWH4T Service Standards



2.12.4 CONFIDENTIALITY

- **STRICT MEASURES**
- **NO ACCESS OR DISCLOSURE**
- **DISCLOSURE REQUESTS:**
in writing, required for legal proceedings, or by applicable law
- **NO ONE OUTSIDE AGENCY**
including landlords

2.12.2.4 Emergency Transfer CONFIDENTIALITY

Programs will ensure strict measures are in place to prevent disclosure of the location of the client's new unit to a person who committed or threatened to commit an act of domestic violence, dating violence, sexual assault, or stalking against the client.

Any information provided by a client when requesting an emergency transfer, including the fact that domestic violence occurred, must be kept in strict confidence by the program. No employees or contractors may have access to confidential information unless explicitly authorized by law.

Information must not be entered into any shared database or disclosed to anyone unless the disclosure is:

2.12.2.4 continued

1. Requested or consented to in writing by the individual in a time-limited release;
2. Required for use in an eviction proceeding or hearing regarding termination of assistance; or
3. Otherwise required by applicable law.

Besides the program staff person receiving the request and anyone else at the agency who absolutely must know in order to fulfill the obligation to report to HUD (if applicable), no one must know about any details related to the emergency transfer. The landlord does not have a right to know the details related to the emergency transfer either.



Emergency Transfer Plan from AWH4T Service Standards



2.12.5 FAMILY SEPARATION

- RETAIN RENTAL ASSISTANCE
- PROGRAM SUPPORT

2.12.5 Family Separation

Where a family receiving tenant-based rental assistance separates as part of the emergency transfer, the family member(s) receiving the emergency transfer will retain the rental assistance when possible.

The program will work with AWH4T and the household to support an effective transfer in situations where the program is not a good fit for the family member(s) receiving the emergency transfer.



BEST PRACTICES

Trauma-Informed & Victim Centered Services



PROVIDE INDIVIDUAL CARE

Show **compassion**, meet the client's **needs**, and show interest, but do not promote or encourage a relationship that leads to dependence.

Be mindful of **cultural and ethnic** characteristics. Utilize a **person-centered approach** – each individual has the right to self-determination.

USE GOOD COMMUNICATION SKILLS

Be **flexible, empathetic, respectful, non-judgmental** and **committed**.

Embrace and **validate an individual's experience**, provide harm reduction options, and have unconditional regard for those we are assisting to improve their health to embrace safety, well-being, and permanence.



QUESTIONS?



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FROM MAYA...



I'm not sure if resilience is ever achieved alone. Experience allows us to learn from example. But if we have someone who loves us – I don't mean who indulges us, but who *loves us enough to be on our side* – then it's easier to grow resilience; to grow belief in self; to grow self-esteem. And it's self-esteem that allows a person to stand up.

Maya Angelou

Poet Laureate and Survivor



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Do you need help?

918.7HELP.ME

24 hours a day / 7 days a week

Or TEXT after hours:

207-777

8:00 p.m. – 1:00 a.m.

