

Washington State Coalition Against Domestic Violence Just Futures Project

Leadership Team Recommendations June 2015

Summary of Just Futures Leadership Team recommendations

PREVENTION

Presented by Andrea Piper-Wentland, Jeanne Englert, Mo Lewis, Vicci Hilty and Ward Urion

RECOMMENDATION:

Increase statewide capacity to stop violence before it has a chance to happen. Increase statewide primary prevention knowledge, assess and increase agency readiness to implement prevention strategies, and increase WSCADV's capacity to support and help develop prevention efforts with interested member organizations.

STRATEGIC INVESTMENT

Presented by Patty Wheeler and Dan Aspiri

RECOMMENDATION:

Fully evaluate how we use our resources and strategically revise our models of practice to more effectively and efficiently serve individuals, families and communities impacted by domestic violence and sexual assault in a given region.

- Dollars saved would be directed towards innovative best practice models.

TRAUMA-INFORMED CARE

Presented by Leticia Garcia, Ann Simpson, Karin White

RECOMMENDATION:

Fully implement a model of **Trauma-Informed Care** throughout DV programs in Washington State.

LEADERSHIP AND ACTIVISM

Presented by Tyra Lindquist and Nan Stoops

RECOMMENDATION:

Engage with and support leadership of young people and people in/from marginalized communities whose activism promotes racial, economic and gender equity.

PREVENTION

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RECOMMENDATION:

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RATIONALE:

Service offerings in most programs respond to violence after it has happened. By increasing capacity to undertake comprehensive prevention, we will begin to balance the current menu of advocacy services. Currently, our movement works to prevent gender-based violence from reoccurring after people leave our services. However, this is not enough to reduce the problem or prevent future victimization.

We will never arrest or shelter our way out of gender-based violence. We need to focus on preventing violence from happening in the first place.

Internally, we (advocates, supervisors, directors and board members) are getting exhausted with the same crisis response narrative and programs that only address violence after it has happened.

Externally, our funders and policy makers want to see an end to the violence.

We know the root causes and underlying conditions that allow gender-based violence to occur, and we are adept at offering support and healing to survivors. We need to shift our focus to prevent this violence from happening in the first place.

Core Strength: We have spent decades raising awareness and building positive relationships within our communities and see a readiness for social change. Our communities are ready to end the violence.

ELEMENTS:

We need to increase our knowledge of what prevention is, assess and increase our capacity to take on prevention work, and continue building positive relationships within our communities.

We can continue to conduct tertiary prevention to help prevent intimate partner/gender-based violence from reoccurring through advocates and supervisors working with individual families.

Our strength in Community Engagement is a key component of this recommendation, and is an essential building block necessary to take on meaningful and successful prevention work.

CORE STRENGTHS:

We are experts in advocacy. We know our communities. We have relationships with our community members.

INTERNAL HABITS:

Crisis response and orientation to crisis management.

Overwhelmed with work and trauma

Limited understanding of prevention

EXTERNAL BARRIERS:

Sexism, homophobia and hegemonic masculinity. Limited resources and time.

WHAT IS THE FIRST STEP FOR THE CHANGE:

1. Agreeing on definitions – what is prevention?
2. Agreeing on how to do the work – theories, etc. (9 principles, Social Ecological Model, community development model) “What basics do you need?” – Community Relations, Community Engagement is the first step...
3. Assessing readiness & capacity (utilizing assessment tools currently being used in the sexual assault prevention field) Build community readiness and capacity within communities
4. Increase coalition capacity. Some questions to ask are: How are they going to incorporate prevention into their mission? How are they going to support agencies doing prevention work? (Training, technical assistance, etc)

- Think about: How could WSCADV learn from the work WCSAP has done already? Share WCSAP’s learning, tools, resources, etc.? then create and or use an existing assessment tool which they can use?
5. Begin prevention work in a few areas, starting small, while building capacity of everyone else to prepare to begin their prevention work
6. Develop timeline for rolling this all out – within first year, first two years, etc.

WHAT IS THE BENEFIT TO "THE LAST GIRL"?:

That girl will be playing in school with a smile on her face!

She would not be vulnerable to violence

Communities hold people accountable, community-specific prevention initiatives will help us get to the last person.

(Think about – are we funding marginalized and Native populations to do this work? Knowing that we need community-specific work to be happening – larger questions to think about when funding this work.)

STRATEGIC INVESTMENT

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Fully evaluate how we use our resources and strategically revise our models of practice to more effectively and efficiently serve individuals, families and communities impacted by domestic violence and sexual assault in a given region.

- Dollars saved would be directed towards innovative best practice models.

RATIONALE:

Our services currently are mostly delivered in silos, and often begin and end at the county lines. This can cause duplication of efforts, is more costly, and may not meet the needs of those we are serving.

- As we have evolved in our thinking based on work on shelter rules, building dignity, and housing first, and through advancements in mobile advocacy we have determined that our communal living shelters are expensive and less effective ways to support survivors of domestic violence than alternative models.
- Sharing resources and expertise results in a greater outcome than is normally achieved by one and thus helps develop the whole movement.
- Program evaluation and willingness to change will improve the quality of our programs
- As we provide those services that best meet survivors' needs and reduce duplication of efforts, we should realize saving of money which could be redirected to community engagement and prevention efforts.
- "Can't do more with the same, or the same with less." We can't do more with the same practice models and the same amount of money. We have to do our work differently to effectively serve survivors and make greater impact to end violence against women and to reach the last girl.

ELEMENTS:

- Create pilot regions, similar to the housing first models.
 - Participation in any regionalization is voluntary. Programs self-select and define what "region" means to them.
- Critically evaluate current practice models and strategically shift to more effective and efficient models. Shifts could occur in the following areas:
 - Implement more mobile advocacy
 - Phase our communal shelter in favor of more trauma-informed designs
 - Promote housing first models for safe affordable housing for victims
 - Regionalize services and activities, for example, crisis line, emergency shelter, legal advocacy, staff training, prevention and fundraising

- Making community engagement and prevention activities a valued and funded part of all agencies.
- Test the approach
 - Design regionalized services and/or activities with strong and measurable goals in mind.
 - Test the success of the new approaches by designing, and carrying out evaluation tools and evaluating the data that is collected.
- Create partnerships between the three coalitions, WCSAP, WSCADV, and WCCVA to support shift to regional approaches.
- Work to build relationships with funders around the concept of consolidated services and regional service areas to ensure strong funding streams.

Note: it would be good to have some possible money saving (redirected funds) numbers here

CORE STRENGTHS:

- Programs have an abundance of passionate staff and leadership
- 40 plus years of history and experience
- Relatively stable financial standing
- Openness to evaluate ourselves
- We have “Critical Mass” for change
- Desire to do more prevention
- Good relationships between coalitions and programs and between programs

INTERNAL HABITS:

- To resort back to self-preservation and looking at only what we think is best for our programs.
- To work only with those we are comfortable with.
- Looking at regions only as county line options.
- We tend to hold to old beliefs and practices even when effective alternatives are presented.
- Moving back to scarcity thinking.

EXTERNAL BARRIERS:

- Washington Administrative codes or other funding requirements that may not allow for flexibility and/or change
- Broken relationships between community partners, and DV programs.
- Program, coalition, and funder leadership change that might not be as collaborative.

WHAT IS THE FIRST STEP FOR THE CHANGE:

- WSCADV facilitate beginning of effort through convening of interested groups.
 - Break out group at annual conference.
 - Phone conference calls for interested regional groups. (Self-identified regions)
- Self-identified regions develop communication tool to share general group progress or thinking with each other.
- Approach main funders to start the dialog about potential service shifts and how current funding rules and contracts either accommodate those shifts or what might be possible to change funding requirements so that more efficient/effective services can be funded.

WHAT IS THE BENEFIT TO "THE LAST GIRL"?:

- We believe that these changes will create savings and if allowed to shift those dollars to prevention efforts it will move us further towards reaching that last girl.
- The process of working together will result in greater creativity, cooperation and effectiveness in our work and allow us to be more strategic in reaching the last girl.

TRAUMA-INFORMED CARE

Presented by Leticia Garcia, Ann Simpson, Karin White

RECOMMENDATION:

Fully implement a model of **Trauma-Informed Care** throughout DV programs in Washington State.

RATIONALE:

- 1) *There is a clear **need**.* By the very nature of our work, DV organizations are saturated with trauma, both for survivors and the staff who serve them. Without awareness, this exposure creates unwell organizations. This can result in high turnover, martyrdom, re-traumatization of survivors, poor community relationships, and being consistently overwhelmed.
- 2) *There is a clear **desire**.* At the first All Leaders Gathering in June of 2012, 68 leaders identified “dynamic tensions” within the movement. Care for self and others was a key factor in this discussion. There was a deep desire for wellness and sustainability. Many organizations, supervisors, and staff have consistently expressed interest in doing more of this through our 2 year process.
- 3) *There is a clear **foundation**.* Many of the pieces of work we have already done as a state are parts of a Trauma-Informed Care (TIC) Model. For example, the Shelter Rules and Building Dignity projects; Advocacy-Based Counseling and Empowerment; Self-Care and Cultural Competency. It is a logical next step to really synthesize this work and learning to fully understand these things not as separate pieces, but as part of a collective whole, which is TIC.
- 4) *There is a clear **fit**.* With support from Norma Wong and in alignment with the key principles (pivots) of the Move to End Violence, the Leadership Cohort developed 4 core purpose statements. TIC fits with all those statements, more specifically with “Renewal and Sustainability,” and “Changing the Conditions that Allow Violence to Occur.” Trauma prevalence is high in many/most communities, and this includes all of us as a part of our communities. TIC seeks to reduce the negative outcomes from trauma, including toxic stress, diminished capacity and function, and interpersonal and community-wide violence.

ELEMENTS:

- 1) Initial **buy-in** at all levels of an organization that chooses to adopt or explore this model.
- 2) Initial **training** for the whole organization to understand specifically what trauma is, what it does, looks like, and results in; what is the actual model of TIC, core structures, values, practices of the model.

- 3) Utilize, modify, or develop tools to **assess** the whole organization. Identify gaps, strengths, barriers, and opportunities for each organization in the context of their work and/in their community.
- 4) Ongoing **technical assistance** to create a plan to close gaps, improve practices, sustain strengths, and maximize opportunities. May be provided by the Coalition, existing programs already using a TIC model, and/or outside experts or consultants.
- 5) Determine and **track measures and outcomes** that result from implementing the model. Can include increased positive response from program participants, program staff reports of employee satisfaction, community relationships, decreased staff turn-over, changes to use of leave time, other wellness measures.

CORE STRENGTHS:

- 1) We're already good at Advocacy-Based Counseling, client autonomy and self-determination, empowerment, and being strengths-based.
- 2) Many programs have already to be more thoughtful and intentional about wellness and addressing vicarious trauma.
- 3) We already have trauma-sensitivity in our work.
- 4) We care deeply about people and want them to thrive.
- 5) Our values are already aligned with this model.
- 6) There is no need to reinvent the wheel; we can use/modify existing tools and information.
- 7) TIC already coming to the DVHF cohorts/regions in the current phase.

INTERNAL HABITS:

- 1) Even with specific changes and structures in place, it is still very easy and "normal" to do unreasonable levels of work; we are afraid to say "no" to doing more and more, and we are sometimes unwilling to give up or share our work.
- 2) We're predisposed to think we are only accountable to external mandates; we are not always good at holding ourselves accountable for intrinsic reasons.
- 3) We have a belief we are already doing this without actually knowing what exactly "it" is.

- 4) Scarcity thinking leads us to believe that we can't afford to do this, don't have time to do it, or it seems too big to do.
- 5) We hear new things and even if we like what we hear, we still go back to the old way of doing things.

EXTERNAL BARRIERS:

- 1) We may need to make sure that this work would count toward training hours that are required in the WAC.
- 2) As grassroots organizations, funders or other community organizations may need clarification about the difference between our TIC work and other models that are clinical.
- 3) If our measures changed in some substantial way because of implementing this model, we should be prepared to address that with funders or other constituents.

WHAT IS THE FIRST STEP FOR THE CHANGE:

The first step would be the broad initial training so that programs could have enough information to decide if this is something they would like to pursue or not. There are multiple resources for this training that could be explored and engaged as needed. This could be done at the state conference or at regional meetings.

WHAT IS THE BENEFIT TO "THE LAST GIRL"?:

The Last Girl is likely the girl with the most trauma impact, highest A.C.E. score, historic trauma, at the farthest margin, with the set of circumstances where she is least likely to thrive. She will need trauma-informed interventions that understand where she and her people have been, that create resilience and opportunities to thrive that may not look like traditional definitions of success. She may be the one to break this cycle for her family, and prevent the same kind of trauma from happening to her children. The benefit is that we never know when she will show up at our door, and she might be there already. With a TIC model in place, the Last Girl will not get re-traumatized by entering our system, will not have access denied, and will not feel that she doesn't belong once she is here. She will have options and resources to decide what she wants to do for herself, without having to do so alone.

LEADERSHIP AND ACTIVISM

Presented by Tyra Lindquist and Nan Stoops

RECOMMENDATION:

Engage with and support leadership of young people and people in/from marginalized communities whose activism promotes racial, economic and gender equity.

RATIONALE:

We are in a very interesting time, right now, when activism around racism and gender justice is very present in our lives. We are called upon to be a part of this.

People - our people - are interested and paying attention.

Ending violence against women and girls is connected to addressing the multiple root causes of violence. If we truly seek to end violence we must join with efforts to end racism, sexism, homophobia, and other oppressions. A great deal of the current social justice activism is youth led. Meaningful participation in allied movements where there is leadership by youth, people of color, queer and strongly allied others will help strengthen and diversify our field.

Technology is a game changer and makes it possible to participate from anywhere. We must learn to harness the power of technology, so that we draw everyone into the conversation and into the movement.

ELEMENTS:

Identify programs that want to expand their work into broader social justice activism and have each program identify one lead person who will coordinate their efforts with WSCADV.

Compile a thorough state inventory of where youth led projects, activism and organizing are taking place. For example:

Girls and boys circle programs, etc.

College campuses, schools, churches and religious orgs, sports, community orgs

Work with youth led projects to help them self-assess the extent to which their work has directionality. Help groups discover the strength of their values around shifting the ways we live and deactivating the seeds of violence.

Provide Coalition support to assist current leadership in programs to help them pivot toward leadership from marginalized communities, toward emerging movement moments, and toward the last girl.

Connect to national opportunities – as they emerge (e.g., black lives matter).

CORE STRENGTHS:

Deep commitment to alleviate suffering and make justice possible.

Strong network of programs with willingness to try new things and trust one another.

Good leaders.

Relationships that can withstand failure – ability to pick ourselves up and try something else.

INTERNAL HABITS:

Default to risk assessment – focus on negative rather than strengths.

Fear leads us to over-process, which leads us to miss opportunities or just become too weary to carry anything out.

Reactive rather than strategic.

Ego involvement – habit of thinking about making our silo bigger as opposed to helping sister/brother organizations and leaders from other places be bigger and greater.

We would treat this as an add on – especially if it's unfunded.

We have a strong habit of neutrality/passivity. But if you are not actively working to change something for the better, we are passively supporting (or participating in) unacknowledged and unprocessed isms.

EXTERNAL BARRIERS:

(Potential) funding and policy constraints.

Isolation that makes it harder to connect – and harder to process the difficult parts of these ideas

Lack of intersectional movement identity – we don't train and reinforce for people that they are in a movement. And are not necessarily oriented toward joining with others in a strong way.

WHAT IS THE FIRST STEP FOR THE CHANGE:

Identify 5-7 programs that are ready to have a lead person serve as an "activism liaison"

WHAT IS THE BENEFIT TO "THE LAST GIRL"?:

The last girl will not only be more visible to us; she will lead us.