I THINK WE SHOULD GET STARTED.

HELLO, EVERYONE.

MY NAME IS LONNA DAVIS.

I AM THE DIRECTOR OF THE

CHILDREN AND YOUTH TEAM AT

FUTURES WITHOUT VIOLENCE.

WE WANT TO WELCOME EVERYONE TO

THIS FIRST PART OF OUR

THREE-PART SERIES, INNOVATION ON

DEMAND.

TODAY WE'RE GOING TO BE TALKING

TO THREE GUESTS ABOUT

IMPLEMENTING CULTURALLY

RESPONSIVE AND TRAUMA-INFORMED

TELEHEALTH SERVICES IN FAMILY

CENTERED PRACTICE.

I WANT TO THANK EVERYONE FOR

COMING.

WE HAVE -- OUR NUMBERS KEEP

ROLLING UP HERE.

WE STARTED A MINUTE LATE SO MORE

PEOPLE COULD JOIN.

WE'RE AT ABOUT 600 PARTICIPANTS

RIGHT NOW AND STILL CLIMBING.

I WANT TO THANK YOU ALL FOR ALL

THE WORK THAT YOU'RE DOING, AND

WE WANT TO BE ABLE TO HEAR FROM

YOU, TOO, DURING THIS

CONVERSATION.

I WANT TO THANK OUR FEDERAL

PARTNERS AT THE CHILDREN'S

BUREAU AND THE FAMILY VIOLENCE

PREVENTION AND SERVICES

DIVISION, WHO HAVE BEEN SO

SUPPORTIVE FOR US AS A NATIONAL

ORGANIZATION TO ALSO BE CHANGING

THE WAY WE'RE DOING OUR WORK AS

WELL.

SO BEFORE WE GET STARTED, I WANT

TO SEE, JESS, IF THERE'S

ANYTHING YOU WANT TO TALK TO THE

AUDIENCE ABOUT IN TERMS OF THE

TECH.

>> SURE.

THANK YOU SO MUCH, LONNA.

HELLO, EVERYONE.

MY NAME IS JESS FOURNIER.

I AM WITH FUTURES WITH WITHOUT

VIOLENCE.

I'M JUST GOING TO GO OVER THE

TECH A LITTLE BIT.

IF YOU JOINED EARLY, YOU'VE BEEN

HEARING ME TALKING.

JUST TO REITERATE, WE'RE USING

THE ZOOM WEBINAR PLATFORM, WHICH

UNFORTUNATELY DOES NOT ALLOW

PARTICIPANTS TO SHOW THEIR VIDEO

OR TO UNMUTE THEMSELVES.

SO YOU WILL BE AUTOMATICALLY

MUTED, AND YOU WILL NOT BE ABLE

TO TURN ON YOUR CAMERA.

HOWEVER, WE WOULD LOVE TO

INTERACT WITH YOU AND WELCOME

YOU TO PUT ANY QUESTIONS THAT

YOU HAVE FOR US IN THE Q&A AT

THE BOTTOM OF YOUR SCREEN.

WE'LL BE MONITORING THAT.

AS A REMINDER, THIS WILL BE

RECORDED, AND THE RECORDING WILL

BE AUTOMATICALLY EMAILED TO YOU

IF YOU REGISTERED FOR THE EVENT

TODAY.

IT WILL ALSO BE POSTED ON OUR

WEBSITE LATER THIS WEEK.

I THINK THAT'S PRETTY MUCH

EVERYTHING.

OH, YES, THIS IS GOING TO BE

CLOSED CAPTIONED.

SO YOU SHOULD SEE POPPING UP

DOWN ON THE BOTTOM OF YOUR

SCREEN THE OPTION TO SHOW CLOSED

CAPTIONING, WHICH WILL CONTINUE

THROUGHOUT THE EVENT.

ALSO, AS A NOTE, IF YOU WANT TO

CHANGE THE VIEW ON YOUR SCREEN

IF YOU'RE JOINING ON ZOOM, IF

YOU GO TO ONE OF OUR PANELISTS,

THE LITTLE BOX WHERE IT SHOWS

YOUR FACE AND RIGHT CLICK, YOU

CAN SELECT A DIFFERENT VIEW.

IF YOU WANT TO SEE THE VIEW OF

THE PERSON WHO'S SPEAKING OR

HIDE NONVIDEO PARTICIPANTS.

THOSE ARE JUST TWO OPTIONS.

FEEL FREE TO USE THE Q&A.

AND WE LOOK FORWARD TO THE

CONVERSATION.

THANK YOU.

>> THANK YOU, JESS.

A SPECIAL SHOUT OUT TO JESS AND

D.J. AND ANIMA AND THE

CHILDREN'S TEAM FOR GETTING US

ALL HERE AND USING THIS PLATFORM

SO SMOOTHLY.

SO THANK YOU.

I WANT TO START OUT ON A SERIOUS

NOTE WITH ALL OF US TAKING A

MOMENT OF REFLECTION.

SO FOR A MINUTE, IF YOU COULD

SHUT YOUR EYES OR HAVE A SOFT

GAZE ON THE FLOOR SO WE CAN

REFLECT OR PRAY OR HOLD

INTENTION FOR THOSE OF US WHO

ARE LONELY AT THIS TIME, THOSE

OF US WHO ARE SICK, THOSE OF US

WHO ARE SCARED AT HOME, THOSE OF

US WHOSE FAMILIES HAVE PASSED.

LET'S JUST HOLD THEM IN OUR

HEARTS AND IN OUR MINDS.

OKAY, WHEN YOU'RE READY YOU CAN

START BRINGING YOURSELF BACK

INTO THE SPACE.

THANK YOU FOR HOLDING THAT SPACE

WITH US TODAY.

BEFORE WE INTRODUCE OUR GUESTS,

I WANT TO TAKE A MINUTE AND

EXPLAIN WHAT THIS SERIES IS

ABOUT.

IN DIFFERENT PARTS OF THE

COUNTRY AND AT DIFFERENT TIMES

WITHIN THE LAST COUPLE MONTHS,

MANY OF US WERE ASKED TO SHELTER

IN PLACE AND LEAVE OUR

WORKPLACES, WHILE OTHERS OF US

WERE DEEMED ESSENTIAL AND NEEDED

TO CONTINUE TO GO WORK OUTSIDE

OF THE HOME.

IN THIS SERIES, WE'RE GOING TO

HEAR FROM PEOPLE WHO ARE DOING

BOTH.

IN EACH ONE OF THESE SITUATIONS,

WE ALL HAD TO CHANGE THE WAY

THAT WE WORK.

COVID-19 PRESENTS A UNIQUE SET

OF CHALLENGES FOR THOSE OF US

WHO ARE WORKING WITH FAMILIES

WHO ARE EXPERIENCING VIOLENCE.

WE'RE ALL WORRIED ABOUT CHILD

SURVIVORS AND ADULT SURVIVORS.

WE DON'T NEED THE HEADLINES TO

REMIND US THAT THERE'S RISK

EVERYWHERE.

WE ALSO KNOW THAT NOT ALL

FAMILIES EXPERIENCE THE SAME

THING, AND SOME ARE MORE

VULNERABLE THAN OTHERS AND

EXPERIENCE OPPRESSION IN

MULTIPLE WAYS, WHICH CAN

INCREASE RISK AND WIDEN ALREADY

UNFORGIVABLE DISPARITIES.

THOSE DISPARITIES ARE BASED ON

RACE, SKIN COLOR, GENDER, AGE,

ABILITY, LANGUAGE, IMMIGRATION

STATUS, INCOME LEVELS, AND MORE.

BUT WE ALSO KNOW THAT FAMILIES

AND PEOPLE, WE, ARE RESILIENT.

SO WE'RE GOING TO HOLD ALL OF

THAT TOGETHER.

SO THIS SERIES IS ABOUT

UNPACKING ALL OF THOSE THINGS

AND LEARNING FROM EACH OTHER IN

THE SPIRIT OF MUTUAL AID.

WE'VE ASKED PRACTITIONERS FROM

THREE DIFFERENT STATES, GEORGIA,

MARYLAND, AND MASSACHUSETTS, TO

TALK WITH US AND TELL US WHAT IT

MEANS FOR THEM TO SHAPE SHIFT,

RIGHT, TO GET UP AND RUNNING

DIFFERENTLY.

THERE'S NO MAGIC HERE, JUST

THOUGHTFUL INSIGHT ABOUT PROCESS

AND STRATEGY.

WE'RE ALSO GOING TO BE LIFTING

UP WHAT WE THINK COVID-19 IS

REVEALING TO US THAT WE DON'T

WANT TO FORGET AS WE MAKE OUR

WAY TO A BETTER NORMAL.

WE HOPE YOU, OUR AUDIENCE, FIND

THIS USEFUL IN YOUR OWN

PRACTICE.

WE WANT TO HEAR FROM YOU, LIKE I

SAID BEFORE, ABOUT HOW YOU'RE

INNOVATING DURING THIS TIME.

BECAUSE ONE THING I THINK WE CAN

COUNT ON IS CHANGE IS GOING TO

KEEP HAPPENING.

SOME OF OUR NEWLY DEVELOPED

PRACTICES MAY BE WITH US FOR A

WHILE.

SO WITH THAT, THIS IS

CONVERSATIONAL IN NATURE, THIS

SERIES.

THERE'S NO NEED FOR SLIDES.

WE DIDN'T WANT TO PUT EXTRA WORK

ON PEOPLE WHO ARE ALREADY

WORKING ON TOP OF WORKING.

OUR GUESTS HAVE SMALL CHILDREN

AT HOME, TOO, AND SOME OLDER

ONES AS WELL.

SO YEAH, WE WANTED TO KEEP THIS

EASY FOR FOLKS, AS EASY AS

POSSIBLE.

SO I'M GOING TO TURN IT OVER TO

JUAN CARLOS, AND HE CAN

INTRODUCE HIMSELF.

THANK YOU, EVERYBODY.

>> THANK YOU, LONNA.

GOOD AFTERNOON TO EVERYONE.

I'M SO THRILLED TO BE WITH YOU

ALL THIS AFTERNOON AND WITH THIS

AMAZING PANEL THAT WE HAVE.

WE'RE SO GRATEFUL YOU'RE WITH

US.

THESE THREE WOMEN ARE NATIONAL

LEADERS.

MANY OF YOU PROBABLY KNOW THEM.

THEY HAVE REALLY BROKEN GROUND

FOR DECADES NOW, AND THEY HAVE

BEEN TOP PARTNERS WITH US FOR A

LONG TIME, HELPING US WITH MANY

DIFFERENT ISSUES THAT WE

ENCOUNTER.

OF COURSE, NOW WE ARE ALL

ENCOUNTERING NEW ISSUES, AS

LONNA SAID.

I DON'T THINK WE WILL GET TO A

PLACE OF PERFECT ANSWERS HERE

AND PERFECT FORMULAS BECAUSE

WE'RE ALL LEARNING, AND I THINK

THAT'S TRUE PROBABLY FOR MANY OF

THE PARTICIPANTS, TOO.

BUT WE HOPE THAT WE WILL ADVANCE

WHERE WE ARE RIGHT NOW, GIVE

FOLKS SOME IDEAS.

WE WOULD LOVE FOR YOU TO SHARE,

TOO, IN THE QUESTION AND ANSWER

BOX.

SO I'LL JUST INTRODUCE BY NAME

AND ORGANIZATION OUR THREE

PANELISTS, THEN GIVE YOU A

COUPLE OF MINUTES TO INTRODUCE

YOUR ORGANIZATIONS AND ALSO THE

COMMUNITIES THAT YOU WORK WITH,

WHAT'S YOUR DEMOGRAPHIC.

SO WE HAVE NEENA McCONNICO, THE

PROGRAM DIRECTOR FOR THE CHILD

WITNESS TO VIOLENCE PROGRAM AT

BOSTON MEDICAL CENTER IN BOSTON,

MASSACHUSETTS.

WE HAVE JESSICA NUNAN, THE

EXECUTIVE DIRECTOR OF CAMINAR

LATINO IN ATLANTA, GEORGIA.

AND WE HAVE LISA NITSCH AT THE

HOUSE OF RUTH IN BALTIMORE,

MARYLAND.

SO NEENA, WHY DON'T WE START

WITH YOU, BY YOU TELLING US A

LITTLE BIT ABOUT THE PROGRAM AND

WHAT YOU FOLKS DO.

>> SURE.

JUST GOING TO START BY SAYING

HELLO AND THANK YOU TO EVERYONE

FOR TAKING THE TIME OUT TO BE

HERE WITH US AND KIND OF LISTEN

AS WE ARE ALL TRYING TO ADAPT

OUR PRACTICES DURING THIS TIME.

WITNESS TO VIOLENCE PROJECT WAS

STARTED IN 1992 TO ADDRESS AT

WHAT THAT TIME WAS SOMETHING

THAT WASN'T TALKED ABOUT AT ALL

AND SOMETHING THAT REALLY WASN'T

UNDERSTOOD, AND THAT IS CHILD --

OR CHILDREN WHO WERE WITNESSING

INTIMATE PARTNER VIOLENCE IN

THEIR HOMES AS WELL AS CHILDREN

WHO WERE EXPERIENCING COMMUNITY

VIOLENCE.

WE HAVE EVOLVED A LOT SINCE

THEN.

WE PROVIDE DIRECT THERAPY

SERVICES TO YOUNG CHILDREN

BETWEEN THE AGES OF BIRTH AND 8

YEARS OLD WHO HAVE EXPERIENCED

SOME KIND OF VIOLENCE EXPOSURE

AND OTHER KINDS OF TRAUMA AS

WELL.

WE ALSO PROVIDE A FAIR AMOUNT OF

ADVOCACY AND TRAINING TO A

VARIETY OF AGENCIES AND ENTITIES

THAT ARE WORKING WITH YOUNG

CHILDREN WHO HAVE BEEN IMPACTED

BY THESE THINGS.

WE ARE HOUSED IN A MEDICAL

INSTITUTION, BOSTON MEDICAL

CENTER IN MASSACHUSETTS, AND

BOSTON MEDICAL CENTER IS ONE OF

THE LARGEST SAFETY NET HOSPITALS

WITHIN THE NEW ENGLAND AREA

WORKING WITH PREDOMINANTLY

CHILDREN AND FAMILIES WHO ARE

UNDERRESOURCED, MANY WHO EITHER

ARE UNDERINSURED OR WHO ARE NOT

INSURED AT ALL.

SO KIND OF REALLY BEAR THE BRUNT

OF A LOT OF THE THINGS THAT

FUTURES AND I IMAGINE ALL OF US

THAT ARE HERE PARTICIPATING IN

THIS WEBINAR ARE KIND OF

THINKING ABOUT HISTORICALLY

MARGINALIZED INDIVIDUALS AND

FAMILIES WHO ARE LIVING IN

EXTREME STRESS AND KIND OF

VULNERABLE TO ALL OF THE

SYSTEMIC AND STRUCTURAL

INEQUITIES THAT EXIST.

WE PUT A LOT OF -- WE ARE

PASSIONATE ABOUT THE WORK THAT

WE DO IN NOT ONLY KINDS OF

RAISING UP THE VOICE AND THE

ISSUES OF THE CHILDREN AND

FAMILIES WE WORK WITH EACH AND

EVERY DAY AND PUTTING OUR

PRACTICE WHERE OUR MOUTH IS AND

REALLY HOLDING UP THOSE

PRINCIPLES THAT WE CONSIDER TO

BE SO ESSENTIAL AND KIND OF EVEN

TAKING A LOOK AT OUR OWN SELVES

AND WHERE WE ARE IN THE WORK AND

OUR OWN PRIVILEGE OR OPPRESSION

KIND OF GIVEN WHATEVER

ENVIRONMENT THAT WE MAY BE IN.

I'LL CLOSE BY SAYING I AM -- AND

I THINK I CAN SPEAK FOR THE

ENTIRE CHILD WITNESS TEAM WHEN I

SAY THAT WE ARE EXTREMELY

HUMBLED EACH AND EVERY DAY THAT

FAMILIES DECIDE THAT THEY ARE

GOING TO KIND OF BRING US ALONG

THIS JOURNEY WITH THEM AND KIND

OF SHARE A LITTLE BIT ABOUT

THEIR EXPERIENCES AND THEIR

LIVES WITH US SO THAT WE CAN

REALLY PARTNER WITH THEM.

>> THANK YOU SO MUCH, NEENA.

JESSICA?

>> GOOD MORNING AND GOOD

AFTERNOON.

I THINK IN ALL TIME ZONES WE'RE

NOW GOOD AFTERNOON.

SO MY NAME IS JESSICA NUNAN.

I'M THE DIRECTOR FOR

CAMINAR LATINO, WHICH IS A

COMPREHENSIVE DOMESTIC VIOLENCE

PROGRAM BASED IN GEORGIA, EVEN

THOUGH WE DO LOCAL AS WELL AS

NATIONAL WORK.

WE ARE SO EXCITED TO BE A PART

OF THIS, AND I'M EXCITED ABOUT

KIND OF SHARING OUR STORIES AND

TO KIND OF JUST LET YOU ALL KNOW

THAT SIMILAR TO EVERYBODY ELSE,

WE'VE BEEN FIGURING IT OUT AS WE

GO.

SO EVEN THOUGH WE HAVE BEEN IN

THE COMMUNITY FOR 30 YEARS, AT

THE SAME TIME THERE ARE LOTS OF

TIMES WHERE YOU JUST HAVE TO

KIND OF USE THE IDEA ABOUT

BASICALLY LET'S JUST SEE HOW

THIS GOES.

SO FOR CAMINAR LATINO, OUR

MISSION IS THAT WE CREATE

OPPORTUNITIES FOR LATINO

FAMILIES TO TRANSFORM THEIR

LIVES AND COMMUNITIES, AND WE

WORK TO CHANGE THE SOCIAL

CONDITIONS THAT GIVE RISE TO

VIOLENCE.

SO THE WAY IN WHICH WE'RE ABLE

TO REALLY KIND OF ACHIEVE THIS

MISSION IS A THREE-PRONGED

APPROACH.

SO BASICALLY, OUR THREE PRONGS

ARE KIND OF DIFFERENT

PROGRAMMING.

FOR OUR FAMILY INITIATIVE

PROGRAMMING, WHICH IS WHAT WE'RE

KNOWN FOR OR MOST KNOWN FOR

BECAUSE OF OUR APPROACH, IS

BASICALLY THE INTERVENTION AND

PREVENTION SERVICES THAT WE

PROVIDE TO LATINO FAMILIES

BACKED BY DOMESTIC VIOLENCE.

SO WE HAVE PROGRAMMING FOR

SURVIVORS.

WE HAVE PROGRAMMING FOR THE AGES

BETWEEN 0 AND 24.

AND WE ALSO HAVE PROGRAMMING FOR

BOTH MALE AND FEMALE AGGRESSORS

WHO HAVE USED VIOLENCE.

WE ALSO WHAT WE CALL OUR

COMMUNITY INITIATIVE

PROGRAMMING, WHERE WE PROVIDE

OPPORTUNITIES FOR BASICALLY

PROGRAM ALUMNI AND OTHER

INDIVIDUALS FROM THE COMMUNITY

TO INCREASE THEIR CAPACITY IN

ORDER TO HELP INCREASE AWARENESS

ABOUT FAMILY VIOLENCE OR OTHER

ISSUES THEY THINK ARE REALLY

IMPORTANT TO BE PROVIDING

INFORMATION TO THEIR COMMUNITY.

THEN THERE'S ALSO OUR NATIONAL

ARM THAT WE LAUNCHED IN 2018.

THEY ARE THE ARM THAT DO THE

MAJORITY OF OUR TRAINING AND

TECHNICAL ASSISTANCE AS WELL AS

CONSULTING WORK.

WE REALLY TRIED TO ADDRESS THE

ISSUE OF FAMILY VIOLENCE FROM A

KIND OF INDIVIDUAL COMMUNITY AS

WELL AS SYSTEMATIC APPROACH.

SO I WILL BE MORE THAN HAPPY TO

ANSWER QUESTIONS LATER ON, OR MY

CONTACT INFORMATION WILL BE

PROVIDED.

BUT I'M JUST EXCITED TO BE A

PART OF THIS TODAY.

>> THANK YOU, JESSICA.

LISA?

>> HI, EVERYBODY.

MY NAME IS LISA NITSCH, DIRECTOR

OF TRAINING AND EDUCATION, HOUSE

OF RUTH, MARYLAND.

WE HAVE 13 LOCATIONS AROUND THE

STATE OF MARYLAND, BUT ALL OF

OUR SERVICES ARE PRIMARILY BASED

IN BALTIMORE CITY.

WE HAVE SOME SATELLITE

COUNSELING AND LEGAL SERVICES WE

DO IN OTHER PARTS OF THE STATE,

BUT WE REALLY BEGAN IN BALTIMORE

CITY, AND THAT'S KIND OF WHERE

WE CONSIDER HOME BASE.

WE OFFER EMERGENCY RESIDENTIAL

SERVICES FOR SURVIVORS.

THAT INCLUDES AN 84-BED

EMERGENCY SHELTER AND A RAPID

REHOUSING MODEL.

WE OFFER LEGAL REPRESENTATION

FOR OUR PEACE AND PROTECTIVE

ORDERS, LIMITED DIVORCE AND

CUSTODY WORK.

WE'RE CONSIDERED A MID-SIZE LAW

FIRM IN THE STATE OF MARYLAND.

IT'S A PRETTY BIG OPERATION.

INDIVIDUAL AND GROUP THERAPY FOR

SURVIVORS AS WELL AS CHILDREN

AND DOING FAMILY THERAPY

INCREASINGLY.

WE HAVE A RESIDENTIAL

CHILDCARE -- I'M SORRY, A

THERAPEUTIC CHILDCARE CENTER,

WHICH IS A UNIQUE AND HIGHLY

VALUED SERVICE THAT WE OFFER.

ALL THAT KIND OF IMPLICATES

MANAGEMENT, SERVICE

COORDINATION.

THE PIECE I'LL BE TALKING ABOUT

TODAY IS I OVERSEE OUR TRAINING

INSTITUTE, WHICH IS RESPONSIBLE

FOR OUR OWN PROFESSIONAL

DEVELOPMENT, PRESENTATIONS,

THINGS LIKE THIS, AS WELL AS

COMMUNITY EDUCATION AND

OUTREACH.

I'M DIRECTOR OF HEARTS AND MINDS

AT HOUSE OF RUTH.

THE OTHER DIRECTORS ARE FOCUSED

ON THE INFRASTRUCTURE AND MAKING

SURE SURVIVORS ARE HEALING AND

SAFE, AND I'M REALLY RESPONSIBLE

FOR TRYING TO MAKE THE WORLD A

SAFER PLACE FOR THEM TO BE IN.

SO IT'S THAT COMMUNITY EDUCATION

PIECE.

WE'RE WORKING ON A FAITH-BASED

INITIATIVE.

THEN WHERE MY HEART IS, WHERE

I'VE BEEN MY ENTIRE CAREER, I

STARTED AT HOUSE OF RUTH IN

1998, IS REALLY WORKING WITH

ABUSIVE PARTNERS.

THE WORK WE DO THERE, I THINK --

I'M DEVELOPING A CULTURALLY

RESPECTFUL PROGRAM THAT

RECOGNIZES THE MULTIPLE POINTS

OUR CLIENTS ARE REACHING.

WHEN YOU LOOK AT OUR GROUP

ROOMS, WE ARE WAY OVER

REPRESENTED WITH LOW-INCOME MEN

OF COLOR.

WE CAN TALK ABOUT WHO GETS

ARRESTED, WHO IS IN HIGHLY

POLICED AREAS, WHO GETS

PROSECUTED AND ALL THAT KIND OF

STUFF.

OUR GROUPS IN BALTIMORE CITY,

65% AFRICAN-AMERICAN.

OUR GROUP ROOM IS 85% TO 90%

DEPENDING ON THE YEAR.

ONLY 60% OF OUR PARTICIPANTS

HAVE A HIGH SCHOOL DEGREE OR

GED.

WE'RE FACING A 65% UNEMPLOYMENT

RATE, AND THAT WAS PRE-COVID.

SO THESE ARE ALL THINGS WE NEED

TO TAKE INTO ACCOUNT.

WE LOOK AT IT AS AN OPPRESSION.

WE NEED TO RECOGNIZE THE

OPPRESSION OUR PARTICIPANTS

EXPERIENCE.

WE NEED TO DO IT IN A WAY THAT'S

SENSITIVE TO LOW LITERACY RATES.

I THINK WHAT HOUSE OF RUTH

MARYLAND IS DOING NOW, PROVIDING

SUPPORTIVE SERVICES FOR THE

ABUSIVE PARTNER, SO KNOWING I'VE

GOT JACKIE CAMPBELL IN MY

BACKYARD AT JOHNS HOPKINS.

WE KNOW ABOUT HER DANGER

ASSESSMENT AND KNOWING THINGS

LIKE UNEMPLOYMENT, MENTAL

ILLNESS, AND SUBSTANCE ABUSE CAN

CONTRIBUTE TO VIOLENCE.

WE KNOW IT CONTRIBUTES TO

LETHALITY AND RATES OF INCIDENT.

WE'RE PROVIDING NOW SUPPORTIVE

SERVICES AND PARTNERING WITH

OTHER ORGANIZATIONS TO PROVIDE

EMPLOYMENT SUPPORT, MENTAL

HEALTH, SUBSTANCE ABUSE SUPPORT,

PARENTING SUPPORT FOR OUR

PARTICIPANTS IN OUR INTERVENTION

PROGRAM.

>> THANK YOU, LISA.

VERY, VERY EXCITING, EVERYBODY.

YOU CAN ALREADY SEE WHY WE

INVITED THESE AMAZING LEADERS

AND THE LEVEL OF THINKING THEY

DO ON THEIR SERVICES.

ONE NOTE FOR ALL OF US PANELISTS

IS TO SPEAK AT A SLOWER PACE

BECAUSE THIS IS BEING CLOSED

CAPTIONED.

WE HAVE TO GIVE A CHANCE TO

THEM, AMAZING PEOPLE DOING THAT

WORK LIVE.

AND IT'S OKAY.

WE HAVE TIME, SO WE CAN SPEAK A

LITTLE MORE SLOWLY.

SO IN TERMS OF -- ALL OF YOU

WERE SAYING, BUT NEENA IN

PARTICULAR, YOU WERE SAYING

ABOUT LOOKING AT THE MIRROR.

LIKE IN ORDER TO DO THIS WORK,

YOU HAVE TO REALLY LOOK AT

YOURSELF, AND THAT'S PART OF

YOUR PROCESS, I KNOW, FOR THE

OTHER FOLK.

AS LONNA SAID, WE'RE ALL WEARY

RIGHT NOW ABOUT EVERYBODY IN THE

FAMILY, BUT THE CHILDREN

SOMETIMES TEND TO BE MORE

INVISIBLE.

SO NEENA, I'LL ASK YOU FIRST,

WHAT WERE SOME OF THE QUESTIONS

THAT YOU HAD TO ASK YOURSELVES

AS AN ORGANIZATION IN ORDER TO

DO A MINDFUL AND THOUGHTFUL

TRANSITION TO REMOTE TREATMENT?

>> SO FIRST, WE HAD TO REALLY

TAKE A LOOK AND BE INTENTIONAL

ABOUT PROVIDING A SPACE FOR ALL

OF US AS A TEAM TO TAKE OUR OWN

PULSES AND THINK ABOUT WHERE WE

WERE AT AND WHAT WE WERE

EXPERIENCING BECAUSE WE ALL

HAVE -- SOME OF US HAVE YOUNG

CHILDREN.

SOME OF US, YOU KNOW, HAVE

DIFFERENT LIVING SITUATIONS, AND

FAMILIES THAT WE ARE LOOKING

AFTER, AND WE ALL COME WITH OUR

OWN LEVEL OF EXPERIENCES.

SO TAKING A LOOK AT JUST KIND OF

WHERE WE WERE AT IN THAT MOMENT

AND WHAT WE WERE THINKING, WHAT

WE WERE FEELING.

I MEAN, MASSACHUSETTS BEING ONE

OF THE HOT SPOTS FOR COVID,

THERE WERE SO MANY THINGS THAT

WERE HAPPENING AT A VERY RAPID

RATE AND KIND OF BEING INUNDATED

WITH THE MEDIA AND NEWS.

AS I SAID EARLIER, WE'RE PART OF

A MEDICAL INSTITUTION, SO ALSO

HAVING TO HOLD ALL OF THOSE

PIECES AND THINK ABOUT WHAT OUR

PRACTICE WAS GOING TO LOOK LIKE

AS WE WERE MAKING THE SHIFT INTO

DOING REMOTE WORK.

I SAY WE STARTED WITH OURSELVES

BECAUSE WE AND I TRULY BELIEVE

THAT IS WHERE THE WORK BEGINS,

AND IF YOU, AS THE PROVIDER OR

IF YOU AS, YOU KNOW, THE PERSON

WHO IS TRYING TO PROVIDE

SUPPORT, IF YOU'RE NOT OKAY AND

IF YOU DON'T KIND OF HAVE

YOURSELF IN CHECK ON EVEN WHERE

YOU STAND IN TERMS OF THINKING

ABOUT ALL THE ISSUES THAT COVID

WAS BRINGING UP, THEN THAT IS

GOING TO CREEP INTO YOUR WORK.

SO WE WERE VERY INTENTIONAL

ABOUT TAKING THE TIME TO DO

THAT.

THEN AFTER WE DID THAT, WE WERE

ASKING OURSELVES, SO NOT ONLY

WHAT WE NEEDED IN THOSE MOMENTS,

BUT WHAT DO THE CHILDREN AND THE

FAMILIES THAT WE WERE WORKING

WITH, WHAT DO THEY NEED IN THE

MOMENT?

SOMETIMES THOSE ARE COMPETING

NEEDS.

SO WE WERE REALLY JUGGLING OR

KIND OF STRUGGLING WITH THOSE

TWO THINGS.

AND THEN ONCE WE KIND OF TALKED

THROUGH THAT A LITTLE BIT, THEN

THINKING ABOUT WHERE WERE WE

GOING TO LIE AS AN ORGANIZATION

IN TERMS OF THINKING ABOUT

TELEHEALTH, THINKING ABOUT

PROVIDING SERVICES VIA ZOOM

BECAUSE I THINK THAT

TRADITIONALLY WHENEVER YOU'RE

PROVIDING ANY KIND OF CLINICAL

SERVICE, I KNOW THAT THERE ARE

FOLKS, PARTICULARLY IN MORE

RURAL AREAS WHERE ZOOM OR

VIDEO-BASED SESSIONS HAVE BEEN

HAPPENING FOR A REALLY LONG

TIME.

IT'S SOMETHING THAT WAS NEWER TO

US, AND BECAUSE WE HAVE THE

ADDED LAYER OF WE DO

ATTACHMENT-BASED WORK, WE'RE AN

ORGANIZATION THAT PROVIDES AN

EVIDENCE-BASED INTERVENTION

CALLED CHILD-PARENT

PSYCHOTHERAPY.

SEEING THAT WE'RE WORKING WITH

REALLY YOUNG CHILDREN, HAD TO

THINK ABOUT ALL OF THOSE

COMPLEXITIES, TOO.

SO THERE ARE A LOT OF OTHER

THINGS, BUT THOSE AS A STARTING

PLACE, THAT'S KIND OF WHERE WE

BEGAN BEFORE WE THEN WENT INTO

KIND OF ACTION MODE.

>> NEENA, CAN I ASK YOU A

QUESTION ABOUT -- YOU MENTIONED

COMPETING NEEDS.

CAN YOU DESCRIBE THAT?

>> YEAH, SO I THINK THAT -- SO

I'M GOING TO SPEAK AS -- SO WE

ARE A TEAM OF CLINICIANS.

BECAUSE WE ARE USED TO DOING

THERAPY OR PROVIDING CLINICAL

SERVICES WHERE WE CAN SEE

FAMILIES IN PERSON AND WE CHECK

IN WITH THEM ON A WEEKLY BASIS,

IT WAS CHALLENGING FOR US TO

THINK ABOUT THE FACT THAT WE

CAN'T ACTUALLY SEE OUR FAMILIES

RIGHT NOW.

LIKE, WE DON'T KNOW WHAT'S

HAPPENING FOR THEM.

WE DON'T KNOW IF THEY'RE SAFE,

IF THEY'RE NOT SAFE.

AND ALSO RECOGNIZING THIS WAS A

TIME WHERE PEOPLE WERE

SHELTERING IN PLACE, AND IT ALSO

MAKES OUR SURVIVING CAREGIVERS

REALLY VULNERABLE.

SO AS WE WERE KIND OF THINKING

ABOUT, YOU KNOW, DOES IT MAKE

SENSE FOR US TO DO ZOOM SESSIONS

AND KIND OF WHAT ARE ALL THE

PROS AND CONS ABOUT THAT, WE HAD

TO HAVE A LOT OF CONVERSATION

AROUND WHAT WAS DRIVING THOSE

DECISIONS AND WHETHER OR NOT IT

WAS THE THERAPIST'S OWN ANXIETY

AND NEED TO SEE THE FAMILY, OR

WAS IT REALLY ABOUT A CLINICAL

NEED AND WAS IT GOING TO MAKE

THE MOST SENSE AND ALSO THINKING

ABOUT WHAT THE FAMILY WANTED.

>> THANK YOU.

>> THANK YOU, NEENA.

WHAT ABOUT IN CAMINAR LATINO,

JESSICA?

WHAT HAS BEEN THE PROCESS THERE?

>> I THINK SIMILAR TO NEENA.

I MEAN, I REMEMBER THIS CLEAR AS

DAY, WHERE I HAPPENED TO BE OUT

OF TOWN FOR WORK, THE WEEK OF

THE 13th, MARCH 13th, WHERE

THAT'S WHERE EVERYTHING REALLY

STARTED COMING TO REALITY AND

EVERYTHING.

SO I HAD RETURNED THE DAY AFTER

WE DID OUR WEEKLY GROUPS.

WHAT ENDED UP HAPPENING, AS I

WAS TALKING WITH THE TEAM ABOUT

WHAT WAS GOING ON, I REMEMBER

HEARING THEM SAYING RIGHT THEN

WE DIDN'T HAVE AS MANY PEOPLE

COMING.

THERE WAS FEAR, EVERYTHING ELSE.

SO IT JUST KIND OF -- IT WAS

FUNNY.

IT WAS ALMOST LIKE YOU KNEW BUT

YOU DIDN'T REALLY UNDERSTAND

WHAT A BIG DEAL THIS WAS GOING

TO BE.

SO WE DID SOMETHING SIMILAR TO

WHAT NEENA AND HER COLLEAGUES

DID WHERE WE WORKED KIND OF FROM

THE INSIDE OUT.

SO AT FIRST IT WAS CHECKING IN

WITH THE TEAM, SEEING HOW THEY

WERE DOING.

ALSO, MAKING IT CLEAR THAT WE

WERE GOING TO STAND BY THE FACT

THAT WE WERE NOT GOING TO BE

PUTTING THEM IN DANGER, THAT

THEIR WELFARE AND THE WELFARE OF

THE FAMILY AND ONCE WE DID THE

ASSESSMENT THAT WAY, IT ALLOWED

US TO KIND OF, EVEN THOUGH THEY

WERE SHIFTING ROLES AND

RESPONSIBILITIES, IT WAS BASED

ON PEOPLE'S PREFERENCES AND

SITUATIONS.

SO FOR INSTANCE, THOSE WHO ARE

LIVING WITH ELDERLY PARENTS,

THEY WERE THE ONES WHO SAID, YOU

KNOW, I'M NOT ABLE TO, AND WE

COMPLETELY AND TOTALLY

UNDERSTOOD THAT.

SO THAT RIGHT THERE, EVEN THOUGH

I'VE BEEN VERY LUCKY WHERE WE

WORK WITH A CLOSE-KNIT TEAM, IT

REALLY HELPED THE TEAM TO REALLY

KIND OF UNDERSTAND THAT WE WERE

NOT GOING TO BE PUTTING THEM IN

HARM'S WAY.

THEN WE STARTED WORKING ON THE

ESSENTIALS.

YOU KNOW, WHAT WERE THE PRIMARY

THINGS THAT WE NEEDED TO MAKE

SURE.

WE KNEW THE ISOLATION WAS

NECESSARY, BUT AT THE SAME TIME,

IT WAS A VERY DANGEROUS

SITUATION FOR A LOT OF SURVIVORS

AND THE FAMILIES WE WERE WORKING

WITH.

SO THE FIRST THING WAS IS HOW DO

WE GET THE WORD OUT THAT WE'RE

STILL HERE?

BASICALLY, YOU KNOW, EVEN THOUGH

YOU MAY NOT BE ABLE TO SEE US

PHYSICALLY, THAT YOU CAN STILL

CONTACT US, EMERGENCY SERVICES,

AND WE WERE GOING TO BE THERE

WITH THEM.

SO OVER THE PAST MONTH AND A

HALF, WHAT'S ENDED UP HAPPENING

IS THAT WE KIND OF -- WHEN WE

STARTED DOING -- WE FIRST

STARTED OFF WITH JUST PROVIDING

SUPPORT OVER THE PHONE,

ADVOCACY, INFORMATION REFERRALS,

KIND OF THE STANDARD STUFF.

THEN FOR LACK OF A BETTER WORD,

WHEN WE STARTED DOING THE

SUPPORT GROUP, WHICH WAS AT THE

REQUEST OF THE SURVIVORS --

THEY'RE LIKE, HEY, GUYS, WE NEED

TO HAVE THIS -- WE STARTED OFF

WITH THE SURVIVORS WHO HAD BEEN

COMING FOR A MUCH LONGER TIME.

SO NOT THE ONES IN CRISIS BUT

ALMOST TO GIVE IT A TRY WITH

PEOPLE WHO WE FELT MORE

COMFORTABLE WITH AS WE FIGURED

OUT THE I.T. ISSUES.

SO WE DID THE SAME THING WITH

THE OLDER KIDS ALSO, WHERE I

RECEIVED A REQUEST TO HELP

CO-FACILITATE ON THE YOUTH

GROUP, TO HAVE A VIRTUAL SHARING

GROUP FOR THE KIDS, THE OLDER

GROUP, WHICH IS MINE.

AND WE STARTED WORKING OUT

KINKS.

THE OTHER THING WE DID IS WE

ALSO, REALLY EVEN THOUGH WE'VE

ALWAYS UTILIZED THIS, UTILIZING

THE HOLISTIC APPROACH.

SINCE THERE WAS SO MUCH STUFF WE

COULDN'T DO, SINCE RESOURCES

WERE SO LIMITED, AND NOW

ESPECIALLY CALLING THE POLICE

WAS NOT VERY REASONABLE.

AND LET'S TAKE AWAY OPPRESSION,

RACISM, TAKE ALL THAT OUT OF IT.

BECAUSE OF THE PUBLIC HEALTH

CONCERN AND JAILS BEING

OVERCROWDED, IT WAS EVEN LESS OF

AN OPTION.

EVEN IF THE AGGRESSOR WAS

ARRESTED, THEY WERE GOING TO BE

RELEASED EVEN MORE QUICKLY

BECAUSE OF THE FACT THAT THERE'S

A PUBLIC HEALTH CONCERN.

SO WE STARTED KIND OF WORKING

FROM THE ASPECT OF WHAT CAN WE

DO TO HELP TO KIND OF TAKE AWAY

SOME OF THE STRESSORS.

SO FOR INSTANCE, WITH THE KIDS,

ONE OF THE THINGS THAT THEY

EXPRESSED WAS BASICALLY -- AND

THE PARENTS TOO -- STRESSING

HOMEWORK.

THAT'S A VERY VALID THING.

A LOT OF PARENTS, INCLUDING

MYSELF, HAD BECOME TEACHERS

OVERNIGHT.

THERE'S A VERY, VERY GOOD REASON

WHY I NEVER WENT INTO EDUCATION.

THAT'S NOT MY STRENGTH AT ALL.

SO WHAT WE STARTED DOING WAS

SAYING, OKAY, OUR VOLUNTEERS ARE

NOT VOLUNTEERING IN OUR WEEKLY

GROUP BECAUSE THERE AREN'T ANY

RIGHT NOW.

SO WHO MIGHT BE ABLE TO PROVIDE

VIRTUAL TUTORING?

SO THAT WAY WE CAN START

UTILIZING THOSE ALGEBRA SKILLS

AND ALL THAT RANDOM SCUFF THAT

OUR VOLUNTEERS WHO ARE YOUNGER,

STILL IN COLLEGE, HAVE DIFFERENT

AREAS OF EXPERTISE.

SO WE WERE ABLE TO HELP REMOVE

THAT STRESSOR.

WE ALSO LOOKED TO SEE ABOUT

REALLOCATING SOME OF OUR GRANT

FUNDS TO BE ABLE TO PROVIDE

EMERGENCY FINANCIAL ASSISTANCE.

SO REALLY AND TRULY, IT WAS

SEEING ABOUT HOW WE COULD REUSE

THE RESOURCES BECAUSE WE KNEW

THAT MONEY AND CHILDREN BEING AT

HOME AND BEING RESPONSIBLE FOR

EDUCATION WERE ALL ADDITIONAL

STRESSORS EVEN MORE.

WE FELT LIKE ONE THING WE COULD

DO TO HELP WAS TO HELP REMOVE

THAT.

FINALLY, AND THIS WAS MORE ON MY

END, BUT WE JUST STARTED USING

OUR CONTACTS.

SO THIS IS WHERE IF IT WAS

SOMETHING THAT WE WERE NOT ABLE

TO PROVIDE, WE STARTED LOOKING

AND SAYING, OKAY, WHO DO WE KNOW

THAT MIGHT BE ABLE TO DO THIS?

ALSO, WE STARTED UTILIZING OUR

CONTACTS IN LOCAL GOVERNMENTS

WHERE WE WERE NOTICING THAT

BASICALLY THE FAMILIES WERE IN

NEED OF FOOD, BUT BECAUSE OF THE

WAY THAT STUFF WAS SET UP,

CHILDREN WERE BEING REQUIRED TO

GET THE FOOD.

AGAIN, THAT'S UNDERSTANDABLE,

BUT THEN THE KIDS WERE ALL IN

LARGE, CROWDED AREAS TOGETHER,

WHICH WAS A PUBLIC HEALTH

CONCERN.

SO THE PARENTS WERE MAKING THE

CHOICE NOT TO PUT THEIR KIDS AT

RISK FOR IT.

SO I WAS ABLE TO USE THE

CONTACTS, MY OWN CONTACTS, FOR

PEOPLE WHO ARE HIGHER UP IN

GOVERNMENT SAYING, HEY, LISTEN,

THIS IS WHAT WE'RE HEARING AND

SEEING.

I JUST WANT YOU TO KNOW THIS IS

SOMETHING WHICH YOU GUYS MIGHT

NEED TO TAKE INTO CONSIDERATION.

SO IT WAS REALLY KIND OF SEEING

ALL THE DIFFICULT WAYS AND NOT

JUST FOCUSING ON WHAT SERVICES

ARE WE PROVIDING BUT WHAT OTHER

RESOURCES, TOOLS DO WE HAVE THAT

CAN REALLY AND TRULY HELP THE

FAMILIES AND REALLY USE THAT

HOLISTIC APPROACH INSTEAD OF

JUST FOCUSING ON THAT VIOLENCE.

>> THAT'S WONDERFUL, JESSICA.

THANK YOU.

WHAT ABOUT YOU, LISA?

WHAT ABOUT HOUSE OF RUTH?

WHAT HAS THE PROCESS BEEN?

>> I REALLY APPRECIATED WHAT

NEENA WAS SAYING ABOUT STARTING

BY SORT OF SETTLING OUR OWN

TEAMS, OUR OWN STAFF.

WE HAVE 140 PEOPLE ON STAFF AT

HOUSE OF RUTH.

IT WAS A BIG THING TO SHUT IT

ALL DOWN AND GET EVERYBODY HOME

SAFE AND DECIDING, YOU KNOW,

SORT OF WHO'S ESSENTIAL AND

WHO'S NOT, WHICH COMES WITH ITS

OWN ICKINESS.

WE HAD TO REALLY DO THAT

QUICKLY.

SO IT WAS DEALING FIRST THE

SAFETY ISSUES, THE EMERGENCY

SHELTER.

WE HAD TO HAVE BACKUP POLICIES

TO OUR BACKUP POLICIES TO BE

PREPARED.

THANK GOODNESS NO ONE YET HAS

HAD ANY SYMPTOMS OR BEEN

DIAGNOSED WITH COVID-19.

GOD FORBID THAT SHOULD HAPPEN,

WE HAD TO BE PREPARED IN TERMS

OF POLICY.

AND THEN I DON'T KNOW ABOUT THE

REST OF YOU, BUT IT WAS

ANSWERING SURVEY AFTER SURVEY

AFTER SURVEY ABOUT WHAT WE

NEEDED WITHOUT A WHOLE LOT OF

RETURN ON THOSE SURVEYS AT

FIRST.

IT WAS WONDERFUL, EVERYBODY WAS

GETTING ALL THE UPDATES AND

INFORMATION.

WE FILLED OUT A LOT OF SURVEYS

AND REQUESTS AND TRIED TO GET

THE ORGANIZATION FINANCIALLY

STABILIZED, MAKING SURE WE WERE

GOING TO BE OKAY.

THEN THE TECH NEEDS OF OUR

STAFF.

WE ARE NOT A HIGHLY

PROFESSIONALIZED STAFF.

WE'RE 140 STAFF.

ABOUT 13 ARE WORKING IN THE

INTERVENTION PROGRAM.

MANY OF THEM, YOU KNOW, SOME OF

THEM DON'T HOLD COLLEGE DEGREES

AND DON'T HAVE LAPTOPS AT HOME

OR DIDN'T HAVE THE TECH TO

TRANSITION TO WORK FROM HOME.

SO WE HAD TO MAKE SURE THEY HAD

WHEY THAT NEEDED TO WORK FROM

HOME SUCCESSFULLY.

IT'S NOT JUST THE EQUIPMENT, BUT

THE LEARNING CURVE.

GETTING MY TEAM ON MICROSOFT

TEAMS IS A MONUMENTAL TASK I

WOULD LIKE TO PUT ON MY RESUME

SOME DAY.

THAT WAS A BIG THING.

AND REALLY MAKING SURE EVERYBODY

KNEW THAT OUR ESSENTIAL CORE

SERVICES, OUR EMERGENCY SHELTER

AND 24-HOUR HOTLINE WERE THE

ONLY THINGS THAT WERE

MAINTAINING NO CHANGE.

EVERYTHING WAS AS USUAL.

WE WANTED TO GET THE WORD OUT.

WE BORROWED A GREAT IDEA FROM A

PROGRAM ON THE EASTERN SHORE.

WE STARTED PUTTING STICKERS ON

PIZZA BOXES, LETTING PEOPLE KNOW

THAT THE 24-HOUR HOTLINE IS OPEN

AND WE'RE STILL AVAILABLE AND

WORKING WITH OUR LOCAL GRUBHUB

PARTICIPANTS, PARTICIPATING

DRIVERS AND MAKING SURE THEY'RE

PUTTING STICKERS ON THINGS,

WHICH WAS A GREAT SUGGESTION.

AND GETTING -- USING OUR

VOLUNTEERS WHO ARE EAGER TO

SUPPORT IN A TIME OF NEED.

BUT WE WEREN'T REALLY SURE WHAT

TO DO.

SO THEY WERE HELPING US WITH

THAT STICKER TRANSITION AND

GETTING STICKERS OUT.

SO IT FELT LIKE THEY REALLY HAD

A PURPOSE.

WE MOVED UP OUR TIMELINE FOR OUR

WEBSITE'S CHAT FEATURE.

THAT WAS SOMETHING THAT WE WERE

INTENDING TO ADD TO OUR WEBSITE.

THAT HAD TO BE SPED UP

MONUMENTALLY.

AND THEN IT WAS TIME TO LOOK AT

OUR INTERVENTION PROGRAMS.

SO HELPING FOLKS.

I'VE BEEN SAYING THIS A LOT.

THE WORLD IS FULL OF PEOPLE WHO

ARE EITHER BORED OR OVERWHELMED.

IT FEELS LIKE YOU TEND TO FALL

IN ONE OR THE OTHER.

STAYING TO THE INTERVENTION

STUFF, IT'S APPROPRIATE WE

SHOULD FIRST BE FOCUSED ON OUR

EMERGENCY SHELTER, BUT HANG IN

THERE.

YOU'RE IMPORTANT.

YOU'RE ESSENTIAL.

YOU HAVE ALL THESE OTHER

PROJECTS YOU'VE BEEN WAITING ON.

WORK ON THEM.

THEN YOU HAVE FOLKS WHO ARE

REALLY, REALLY BUSY.

THE CONFLICTS, JUST MANAGING

PEOPLE, MAKING PEOPLE FEEL

VALUED IN ALL OF THIS IS REALLY

IMPORTANT.

THEN WHEN WE STARTED LOOKING AT

THE SERVICE, LONNA, YOU OPENED

THIS SAYING RISK IS EVERYWHERE.

I THINK THAT SUMS UP OUR JOURNEY

WITH THE INTERVENTION PROGRAM.

IF YOU OFFER VIRTUAL SERVICES,

YOU HAVE A CERTAIN SET OF RISKS

YOU'RE FACING.

IF YOU DON'T OFFER VIRTUAL

SERVICES, YOU'VE GOT A CERTAIN

SET OF RISKS YOU'RE FACING INTO.

AND WE MADE THE DECISION WE WERE

GOING TO EXPLORE OFFERING.

WE'VE PARTICIPATED IN A LOT OF

NATIONAL CONVERSATIONS, SOME

GREAT WEBINARS HOSTED BY

FUTURES.

WE HAD A STATEWIDE DISCUSSION

WITH THE INTERVENTION PROGRAMS

TO SEE WHAT EVERYBODY WAS

THINKING.

WE ENDED UP MAKING THE DECISION

THAT WE WERE GOING TO ATTEMPT IT

AND THAT WE WOULD FIRST SURVEY

ALL OF OUR PARTICIPANTS AND AS

MANY OF THEIR PARTNERS AS WE

COULD REACH.

AND WE WERE GOING TO COME FROM A

PLACE OF DATA POINTS AND LISTEN

TO OUR CLIENTS, WHICH WE LEARNED

SO WELL FROM THE FOLKS AT

CAMINAR LATINO, JUST A SHOUT OUT

TO THE GUIDEBOOK ABOUT LISTENING

TO YOUR COMMUNITY AND HOW TO DO

THAT RESPECTFULLY.

KIND OF FALLING BACK ON WHAT

THEY HAD TAUGHT US ABOUT THAT.

REALLY, LET'S LET THEM GUIDE.

TRUST THE COMMUNITY KNOWS BEST.

SO THAT'S REALLY HOW WE GOT

STARTED.

>> GREAT.

THANK YOU, LISA.

WE'RE ACTUALLY GOING TO DIVE

INTO THAT WHOLE CONVERSATION

ABOUT HOW WE'RE LEARNING FROM

OUR FAMILIES AND MAKING

DECISIONS ABOUT HOW TO DO THINGS

VIRTUALLY.

WE JUST WANTED -- ONE QUESTION

THAT CAME UP FROM A PARTICIPANT

WHO I THINK WAS LISTENING TO

YOU, JESSICA, AND WONDERING IF

THERE WERE NATIONAL GROUPS FOR

YOUNG PEOPLE.

WE UNDERSTAND YOU HAVE TO WORK

WITH A CAREGIVER AND CHILDREN

AND THAT YOUR FOLKS NEED TO BE

FROM ATLANTA.

SO WE ACTUALLY DON'T KNOW OF ANY

VIRTUAL GROUPS THAT ARE

HAPPENING NATIONALLY, BUT WE'LL

CERTAINLY KEEP AN EAR OUT.

SO LET'S JUMP INTO THIS

CONVERSATION.

I'M GOING TO START WITH YOU,

JESSICA, IF I CAN.

CAMINAR LATINO HAS ALWAYS

OPERATED WITH A SIMPLE BUT

POWERFUL PHILOSOPHY, WHICH IS,

WE ASK THE COMMUNITY AND TAKE

OUR GUIDANCE FROM THE COMMUNITY.

SO WITH COVID-19, THAT DIDN'T

CHANGE, RIGHT?

CAN YOU TELL US A LITTLE BIT

ABOUT THAT?

>> SO BASICALLY, WHAT WE DID, AS

I MENTIONED BEFORE, YOU GET

THROUGH THIS -- OR WHEN WE FIRST

STARTED, OKAY, WHAT ESSENTIAL

SERVICES DO WE NEED TO DO?

LET'S MAKE SURE.

SO THE FIRST THING WE DID IS

THAT THE FIST RESPONSIBILITY OF

ALL OUR ADVOCATES WAS WE NEED TO

CHECK IN WITH THE FAMILIES.

WE NEED TO MAKE SURE THEY KNOW

WE'RE THERE, THAT REGARDLESS OF

ANYTHING ELSE THAT IS GOING ON,

WE'RE ONLY A PHONE CALL AWAY.

I WILL SAY ONE THING THAT I ALSO

HAD TO REALIZE IS THAT I FIRST

TOLD MY ADVOCATES, CONTACT

EVERYBODY.

BUT ME FORGETTING MY ADVOCATES

KNEW MUCH BETTER.

A LOT OF THE PARTICIPANTS THEY

CONTACTED, SOME OF THEM WAITED

UNTIL THE PARTICIPANT CONTACTED

THEM.

AGAIN, I (NO AUDIO).

WE STARTED GETTING FEEDBACK FROM

PARTICIPANTS ABOUT WHAT WAS

WORKING, WHAT WASN'T WORKING.

SO WE WANTED TO MAKE SURE WE

WERE SHARING THAT.

THEN AS WE BECAME MORE TECH

SAVVY, BECAUSE I'M SURE WITH

EVERYBODY THAT FIRST VIRTUAL

TEAM MEETING, THERE WERE SO MANY

SHARINGS OF SCREENS, EVERYTHING

ELSE.

SO IT TOOK A SECOND FOR ALL OF

US TO BECOME TECH SAVVY AND BE

ABLE TO ADAPT TO THIS.

BUT AFTER THAT, WE JUST WENT

BACK TO WHAT ARE THE FAMILIES

ASKING FOR?

SO AGAIN, IT WAS SURVIVORS WHO

SAID WE NEED A SUPPORT GROUP.

WE SAID, LET'S GIVE THIS A TRY.

MAKING SURE THEY WERE VERY AWARE

OF THE FACT THIS IS GOING TO BE

A TRIAL AND ERROR KIND OF THING.

THE SAME THING WITH THE KIDS.

SO AGAIN SEEING WHAT WORKED,

WHAT DIDN'T.

WE CREATED SOME VERY QUICK

TUTORIALS ABOUT HOW TO JOIN ZOOM

ON YOUR PHONES.

WE KNEW THAT FOR THE MAJORITY OF

OUR FAMILIES, THAT WAS GOING TO

BE SOMETHING THAT WAS NEEDED.

I THINK THE MOST CHALLENGING,

SCARY PART ABOUT THIS IS THAT

ONE THING WE DO IS WE HAVE A

FAMILY VIOLENCE INTERVENTION

PROGRAM WHERE NATIONALLY IT'S

STILL KNOWN AS BATTERER'S

INTERVENTION PROGRAM.

WE HAD A LOT OF RESERVATIONS

ABOUT TRYING TO DO THIS

REMOTELY, TRYING TO DO THIS

VIRTUALLY BECAUSE SOME OF THE

PARTICIPANTS WERE STILL LIVING

WITH THEIR PARTNERS, WHO THEY

WERE USING VIOLENCE AGAINST.

SO WE WANTED TO MAKE SURE THEY

WERE NOT IN ANY DANGER.

BUT WE WERE HAVING OUR WEEKLY

TEAM MEETINGS SAYING, SHOULD WE,

SHOULD WE NOT?

WE JUST WENT BACK AND SAID, YOU

KNOW WHAT, WE ALWAYS SAY WE KEEP

IN CONTACT WITH A PARTNER.

WE CONTACTED THEM.

WE CONTACTED THE SURVIVORS WHOSE

PARTNERS WERE COMING TO OUR

FAMILY VIOLENCE INTERVENTION

PROGRAMS AND SAID LISTEN, THIS

IS WHAT WE'RE THINKING.

WHAT DO YOU THINK?

YOU'RE THE ONE WHO WOULD BE MOST

AT RISK.

AND THEY SAID, WITH THE

EXCEPTION OF JUST ONE OUT OF THE

GROUP OF APPROXIMATELY I THINK

20 OR 24, ONLY ONE SAID NO, I DO

NOT FEEL COMFORTABLE.

SO BECAUSE OF THAT, THAT HAS

MADE SUCH A DIFFERENCE IN TERMS

OF US FEELING COMFORTABLE MOVING

FORWARD.

THE THING IS THAT IT'S VERY EASY

FOR US TO THINK THAT WE KNOW

WHAT'S BEST AND ESPECIALLY KIND

OF IN OUR OWN LITTLE KIND OF

RESTRICTED BUBBLE THAT WE'RE ALL

IN, IN OUR HOME.

SO IT'S EASY FOR US TO THINK WE

KNOW WHAT IS OR IS NOT A GOOD

IDEA, BUT AT THE SAME TIME, WE

FELT A LOT MORE COMFORTABLE WITH

MOVING FORWARD, WORKING WITH

ORGANIZATIONS LIKE MEN STOPPING

VIOLENCE, WHICH ALSO WORKS WITH

AGGRESSORS, AND SEEING HOW WE

CAN DO THIS.

SO LAST WEEK, WE LAUNCHED OUR

VIRTUAL FAMILY VIOLENCE

INTERVENTION GROUP.

BUT AGAIN, IT ALL COMES BACK TO

JUST CHECKING WITH THE FAMILIES

AND ASKING THEM WHAT DO THEY

NEED, WHAT WOULD BE THE BEST WAY

TO HELP.

THEN YOU FEEL A LOT MORE

CONFIDENT WHEN YOU'RE KIND OF

MOVING FORWARD.

ALSO, THE FAMILY FEELS LIKE

THEY'RE A PART OF THIS BECAUSE

THEY ARE.

>> THAT'S SUCH AN INTERESTING

POINT, JESSICA, BECAUSE AS YOU

MIGHT KNOW, THERE'S OTHER

PROGRAMS.

ALL THE PROGRAMS ARE STRUGGLING

WITH THESE SAME QUESTIONS.

THERE ARE SOME WHO ACTUALLY DID

TALK TO SURVIVORS IN OTHER PARTS

OF THE COUNTRY, AND THE MESSAGE

THEY GOT IS, NO, DON'T DO IT, OR

DON'T DO IT IF WE'RE LIVING

TOGETHER.

IT'S SUCH AN IMPORTANT THING,

THAT WE CANNOT JUST MAKE A

GENERALIZATION FROM ONE CULTURAL

GROUP OR REGION OF THE COUNTRY,

RIGHT.

WE NEED TO GO BACK TO THE PEOPLE

THAT YOU SERVE.

I'M CURIOUS ABOUT YOU, LISA,

WHAT YOUR PROCESS WAS ABOUT

THAT, THAT POSITION.

>> YEAH, WE HAD A VERY SIMILAR

FINDING TO JESSICA.

I'VE CERTAINLY HEARD FROM OTHER

NATIONAL LEADERS WHO SAID

EXACTLY WHAT YOU'RE SAYING.

THEY HAVE TALKED TO SURVIVORS,

AND UNDER NO CIRCUMSTANCES --

YOU KNOW, THEY WERE VERY CLEAR

THEY DID NOT WANT THIS OFFERED

VIRTUALLY.

WE ACTUALLY HAD THE OPPOSITE

EXPERIENCE WHEN WE LISTENED TO

THE PARTNERS OF FOLKS IN OUR

PROGRAM.

ACTUALLY, THEY PRETTY

OVERWHELMINGLY SAID, PLEASE, GET

THEM INTO A GROUP.

AND WE HAD SOME AMBIVALENCE.

BUT WE GOT MORE OFTEN THAN NOT,

PLEASE, GREAT, GET THEM INTO

THAT GROUP.

WE'RE ALSO WORKING WITH A HIGHLY

UNEMPLOYED POPULATION THAT'S

STRUGGLING FINANCIALLY ANYWAY.

YOU KNOW, THEY KNOW WHAT'S

COMING.

THEY KNOW THAT THEY'RE -- WHAT'S

THE SAYING?

AND FORGIVE ME FOR GETTING IT

WRONG.

WHEN AMERICA GETS A COLD,

AFRICAN-AMERICANS GET PNEUMONIA.

WE'RE FEELING THAT.

WE'RE GOING TO FEEL THAT IN OUR

FAMILIES.

THEY KNOW THAT THEY'RE GOING TO

STRUGGLE.

BEING ON PROBATION AND BEING

COURT MANDATED TO A PROGRAM GETS

IN THE WAY OF EMPLOYMENT, NOT

GETTING A RECORD EXPUNGED.

ALL OF THAT STUFF GETS IN THE

WAY.

OUR FOLKS ARE EAGER TO GET OFF

PROBATION, WHICH IS AN IMPORTANT

THING THAT WE ALSO -- PROBABLY A

MISTAKE, A REFRAMING I'M OFTEN

DOING WITH MY STAFF.

THIS ISN'T ABOUT GETTING CREDIT

AND GETTING OFF PROBATION

EITHER.

THAT'S DEFINITELY A REFRAMING

I'VE HAD TO DO WITH THE TEAM

FROM TIME TO TIME.

THIS IS REALLY ABOUT GETTING THE

FAMILIES THAT WE SERVE THE

RESOURCES THEY NEED TO BE AS

HEALTHY AND SAFE AS POSSIBLE.

SO WITH THAT, WE VERY CRITICALLY

THOUGHT ABOUT OUR PROGRAM.

OUR PROGRAM IS IN TWO STAGES,

MODELING AFTER THE STAGES OF

CHANGE FRAMEWORK.

OUR STAGE ONE IS ONLY ABOUT FOUR

TO SIX WEEKS.

BUT THAT'S ABOUT AS LONG AS IT

TAKES FOR FOLKS TO SAY, GOSH, I

DID SOMETHING AND THERE'S

SOMETHING I CAN WORK ON WHILE

I'M HERE.

REALLY, THE FIRST PART OF OUR

PROGRAM IS REALLY FOCUSED ON

THOSE PAST BEHAVIORS AND HARM

DONE, WHICH IS WHY WE MADE THE

DECISION NOT TO -- WE DECIDED TO

PUT OUR STAGE ONE GROUPS ON

HOLD.

THOSE FOLKS ARE VERY EARLY ON IN

THE PROGRAM.

THEY'RE NOT PEOPLE WHO WOULD

LIKELY BE COMPLETING ANY TIME

SOON.

THEY'RE JUST GETTING STARTED,

HAVEN'T CONNECTED WITH THE

STAFF.

THEY'RE HIGHLY, HIGHLY RESISTANT

AND PROBABLY LEAST LIKELY TO

PARTICIPATE IN A VIRTUAL GROUP.

SO WE DECIDED TO PUT THAT ON

OLD, NO NEW INTAKES.

BUT WE ARE MOVING FORWARD WITH

STAGE TWO WITH A MODIFIED

CURRICULUM.

WE'RE REVIEWING EVERY PIECE OF

CURRICULUM TO MAKE SURE

EVERYTHING IS FORWARD FACING.

THE WAY WE'RE SAYING IT IS EVERY

PIECE OF CURRICULUM, ASSUME

THERE'S A CHILD AND A SURVIVOR

IN THE ROOM.

THEY SHOULD BE ABLE TO

PARTICIPATE WITH THAT.

OBVIOUSLY WE'RE ASKING FOLKS TO

DO THIS WORK BY THEMSELVES IN A

PRIVATE SPACE, BUT WE'RE JUST

TRYING TO BE AS PREPARED AS

POSSIBLE.

SO WHAT WOULD IT FEEL LIKE?

WE ASK OURSELVES THAT ALL THE

TIME.

WHAT WOULD IT FEEL LIKE IF YOU

WERE A SURVIVOR SITTING IN THE

ROOM, HEARING YOUR PARTNER

PARTICIPATE?

AND MODIFY IT ACCORDINGLY.

WE'RE OFFERING AS CLOSE AS WE

CAN TO OUR STANDARD PROGRAM.

WE'RE REQUIRING PARTICIPATION,

VERBAL PARTICIPATION AND

PARTICIPATION IN POLLS, MAKING

SURE PEOPLE ARE LOGGING IN,

LOGGING OUT.

ALL THOSE THINGS WILL BE IN

PLACE.

WE DO OUR FIRST VIRTUAL GROUP

TOMORROW.

WE'VE BEEN LAYING THE FRAMEWORK

FOR THIS TO GET STARTED

TOMORROW.

WE'LL ONLY BE DOING STAGE TWO.

WE GOT OUR STAFF FAMILIARIZED

WITH USING THE TECH THROUGH

HAPPY HOURS.

EVERY OTHER THURSDAY WE HAVE AN

AGENT-WIDE HAPPY HOUR.

LAST THURSDAY WE ASKED EVERYBODY

WHAT THEIR FAVORITE SONG WAS

THAT WAS KEEPING THEM IN HIGH

SPIRITS AND CREATED A HOUSE OF

RUTH MARYLAND PLAY LIST.

I'M HAPPY TO SHARE WITH YOU ALL

IF YOU USE SPOTIFY.

BY JUST PLAYFUL WAYS TO GET

FOLKS COMFORTABLE WITH THE TECH.

THEN WE SURVEYED OUR

PARTICIPANTS.

I THINK EARLY ON, WE WERE TRYING

TO PLAN FOR EVERYTHING.

WE WERE TRYING TO BE MINDFUL OF

PEOPLE WHO DIDN'T HAVE TECH AND

PEOPLE WHO COULDN'T -- PEOPLE

WHO WERE JUST RESISTANT.

WE WERE TRYING TO GET READY FOR

EVERYTHING.

WE JUST KIND OF PAUSED, IN A BIT

OF A SPACE OF ANALYSIS

PARALYSIS.

WE JUST SAID, WHAT'S THE DATA

TELL US?

LET'S LISTEN TO OUR CLIENTS

FIRST.

AFTER WE SURVEYED OUR

PARTICIPANTS, WE HAVE ABOUT 170

TOTAL PARTICIPANTS IN ANY GIVEN

WEEK.

WE TALKED TO 111 OF THEM.

SORRY, WE HAVE 111 OF THEM IN

OUR STAGE TWO.

WE'VE SPOKE WITH 70.

65 WERE READY AND WILLING AND

EAGER TO PARTICIPATE OUT OF THAT

70.

THAT WAS MIND BLOWING TO ME.

AND THEY HAD THE TECH TO DO SO.

WE HAD ONE PERSON WHO SAID THEY

DIDN'T HAVE THE TECH TO DO IT.

WE HAD TWO PEOPLE WHO SAID THEY

WEREN'T INTERESTED.

THEY TOLD US WHAT WE COULD DO

WITH OUR PROGRAM.

AND TWO MORE SAID THEY JUST --

THEIR LIVES WERE TOO

OVERWHELMING AND DIDN'T WANT TO

DO IT.

BUT ONLY ONE SAID THEY DIDN'T

HAVE INTERNET ACCESS AND

COULDN'T PARTICIPATE, WHICH WAS

A SURPRISE.

SO GETTING THOSE DATA POINTS

ALLOWED US TO MOVE FORWARD,

KNOWING WE'RE ABLE TO -- WE'RE

CREATING A MODEL THAT COULD

SERVE MOST OF OUR PARTICIPANTS.

WE'VE DEVELOPED CONSENT FORMS

AND CONTRACT ADDENDUMS, WHICH I

THINK YOU MAY BE SHARING.

FOLKS ARE WELCOME TO USE THEM,

OR I'M HAPPY TO SHARE.

AND THE OTHER ISSUES WE HAD TO

WORK OUT WERE THINGS LIKE

PAYMENT.

WE'RE NOT REQUIRING PAYMENT TO

PARTICIPATE.

WE ARE REQUIRING PAYMENT FOR

CREDIT FOR A GROUP SESSION.

WE ARE PUTTING IT ON HOLD THAT

YOU CAN GET CAUGHT UP AND GET

CREDIT.

WE UNDERSTAND SORT OF PEOPLE ARE

HAVING FINANCIAL STRUGGLES.

BUT WE ALSO, FRANKLY, CAN'T

AFFORD TO OPERATE FOR FREE.

FOR THOSE OF YOU IN THE

INTERVENTION FIELD, YOU KNOW HOW

HARD IT IS TO FUND THIS WORK.

THERE'S NOT A LOT OF PUBLIC

SUPPORT FOR IT.

SO AT THE END OF THE DAY, WE

STILL NEED A SALARY.

SO WE HAD TO FIGURE OUT WHAT

WE'RE GOING TO DO.

WE REALLY EMPHASIZED THAT WE

WANT YOU IN THE GROUP ROOM,

REGARDLESS OF WHAT YOU CAN PAY.

SO IF YOU CAN'T ATTEND A VIRTUAL

MEETING, YOU KNOW, YOU STILL

COME IN.

YOU'RE STILL WELCOME.

YOU CAN'T GET CREDIT.

WE DON'T WANT PEOPLE PUT IN A

FINANCIAL HOLE THEY CAN'T GET

OUT OF, BUT WE WANT THEM FEEL

WELCOME TO THE COMMUNITY.

SO FACILITATORS ARE TRYING TO

CALL, SAY WE STILL WANT YOU PART

OF THE COMMUNITY.

SO WE'RE REALLY EMPHASIZING THAT

RIGHT NOW.

>> GREAT, LISA.

THANK YOU SO MUCH.

YOU HIT ON SO MANY THINGS.

YOU TALKED ABOUT ADAPTATIONS TO

YOUR CURRICULUM.

YOU TALKED ABOUT WHAT IT SORT OF

MEANS TO JUST ALWAYS ASSUME

THERE'S A SURVIVOR IN THE ROOM.

YOU TALKED ABOUT PRACTICAL

ISSUES OF JUST DEVELOPING

CONSENT FORMS.

NEENA, I KNOW YOU'VE DONE THAT

AS WELL.

WE WANT TO DIVE INTO THAT.

WE TALKED ABOUT FEES.

AND YOU TALKED VERY FAST.

WE NEED TO SLOW YOU DOWN JUST A

LITTLE BIT.

>> I'M SO SORRY.

>> IT'S OKAY.

IT'S AMAZING.

THERE'S SO MUCH GOOD

INFORMATION.

SO I WANT TO TAKE A SECOND AND

POST THIS TO ALL OF YOU,

ACTUALLY.

WE'LL MAYBE START WITH NEENA.

SO LISA SAID ALWAYS REMEMBER

THAT, YOU KNOW, THERE'S A

SURVIVOR IN THE ROOM.

YOU'RE COMING IN LOOKING AT YOUR

PRIMARY CLIENT AS BOTH THE CHILD

AND THE CAREGIVER, RIGHT.

SO IT'S NOT ONE OVER THE OTHER.

SOME FAMILIES, YOU'RE ASSUMING

THAT THE PERSON CAUSING HARM IS

ALSO IN THE HOUSE, SOMETIMES NOT

IN THE HOUSE.

LOTS OF FOLKS AROUND THE COUNTRY

ARE REALLY WORRIED ABOUT CHILD

ABUSE RIGHT NOW BECAUSE THERE'S

NO DAY CARE, NO SCHOOL, AND FOR

SOME FOLKS, YOU KNOW, DAY CARE

AND SCHOOL IS KIND OF

SURVEILLANCE AND CONTROL.

FOR OTHER FOLKS, IT'S LIKE

RELIEF, FOR PRIVILEGED WHITE

FAMILIES.

BUT I KNOW THAT YOU THINK --

YOU'VE BEEN THINKING SUPER

CAREFULLY ABOUT HOW TO VIRTUALLY

GO INTO SOMEONE'S HOME AND SEE

CHILDREN WITH A LOT OF HUMILITY.

SO I'M WONDERING IF YOU CAN TALK

ABOUT THAT.

WHAT'S BEEN HARD, AND WHAT'S

BEEN WORKING WELL?

>> YEAH, I THINK THAT FOR US, IT

HAS BEEN SO MANY THINGS.

I THINK THIS EQUITY PIECE AROUND

THINKING ABOUT MORE SO A

VIDEO-BASED SERVICE.

RECOGNIZING THAT NOT ALL OF OUR

FAMILIES HAVE THE SAME ACCESS TO

TECHNOLOGY AS OTHERS.

THERE ARE QUITE A FEW OF OUR

FAMILIES THAT MAY NOT

NECESSARILY HAVE TABLETS OR

SMARTPHONES.

IF THEY DO, SOME OF THOSE PLANS

ARE -- YOU KNOW, THEY HAVE TO

PAY FOR EVERY MINUTE THAT

THEY'RE ON THE PHONE.

SO WE'VE REALLY BEEN GRAPPLING

AROUND THIS IDEA OF SO THEN

DURING THIS TIME, IF WE HAVE THE

ABILITY TO BE ABLE TO PROVIDE

THESE VIDEO-BASED SERVICES WHICH

WE VIEW AS A PRIVILEGE, IT GETS

BACK TO THAT QUESTION OF THEN

WHO GETS ACCESS TO KIND OF WHAT

SOME MIGHT CONSIDER TO BE MORE

HIGH-QUALITY CARE THAN OTHERS.

AND THAT'S BEEN A STRUGGLE FOR

US.

I'LL SAY VERY OPENLY THAT THAT

CONTINUES TO BE SOMETHING WE

REALLY GRAPPLE WITH.

BUT THINKING ABOUT THE ZOOM

BASED OR VIDEO-BASED SESSIONS,

WE WERE REALLY FEELING -- I

THINK, AGAIN, BECAUSE

MASSACHUSETTS, BEING ONE OF

THOSE COVID HOT SPOTS, THERE

WERE A LOT OF THINGS, KIND OF

ACTIVITY AND VARIOUS PROGRAMS

MOVING VERY QUICKLY AROUND US TO

SAY, MY GOSH, WE JUST GOT TO GET

IN THERE.

IT'S UNETHICAL NOT TO BE

PROVIDING SOME KIND OF SERVICE.

SO WE NEED TO JUST GO AHEAD AND

GO STRAIGHT TO THESE VIDEO-BASED

SESSIONS.

WE REALLY TOOK THE STANCE OF

WE'RE GOING TO SLOW DOWN A

LITTLE BIT.

WE ARE IN CONTACT WITH OUR

FAMILIES VIA PHONE, CHECKING IN

WITH THEM, TRYING TO FIGURE OUT

WHAT THEIR NEEDS ARE, WHAT THEY

FEEL COMFORTABLE WITH, AND

CONNECTING THEM WITH VARIOUS

THINGS AROUND CONCRETE NEEDS AND

ALL OF THOSE THINGS.

BUT REALLY WANTED TO BE VERY

INTENTIONAL ABOUT CREATING A

CONSENT FORM THAT WAS GOING TO

TAKE ALL OF THESE THINGS INTO

ACCOUNT.

IT'S A VERY INTIMATE THING, TO

BE INVITED INTO SOMEONE'S HOME.

FOR FOLKS WHO HAVE DONE

HOME-BASED CLINICAL SERVICES,

YOU KNOW WHAT THAT'S LIKE.

SO WE HAVE VIEWED ZOOM SESSIONS

AS AN EXTENSION OF THAT AND

RECOGNIZING THAT IT'S DIFFERENT.

WHEN PEOPLE COME TO THE OFFICE,

THERE ARE CERTAIN THINGS YOU MAY

OR MAY NOT SEE BECAUSE YOU'RE

NOT IN THEIR HOME.

SO WE WANTED TO BE VERY MINDFUL.

SO BEFORE FAMILIES SIGNED ANY

KIND OF CONSENT FORM AGREEING TO

ANY OF THESE VIDEO-BASED

SESSIONS, TO HAVE CONVERSATIONS

WITH THEM UP FRONT.

SO WE DEVELOPED A PRETTY

COMPREHENSIVE CONSENT FORM,

WHICH I KNOW THAT YOU HAVE AND

WILL BE SHARING.

BUT REALLY, KIND OF HAVING A

CONVERSATION WITH FAMILIES

BEFOREHAND TO KIND OF TALK ABOUT

WHAT ARE THE DIFFERENCES BETWEEN

HAVING A THERAPY SESSION IN

PERSON VERSUS WHAT'S DIFFERENT

ABOUT SOMEBODY OR THE CLINICIAN

BEING ABLE TO SEE YOU IN THEIR

HOME.

ALSO, ON THE OTHER END, BEING

ABLE TO SEE IN THE CLINICIAN'S

HOME OR WHEREVER THEY ARE AS

WELL.

AND ENGAGING KIND OF WHAT THEIR

COMFORT LEVEL WAS LIKE WITH

THAT, TALKING ABOUT THE LIMITS

OF CONFIDENTIALITY, THINKING

THROUGH AHEAD OF TIME ABOUT SOME

OF THOSE THINGS THAT MIGHT LEND

THEMSELVES OR KIND OF BE MORE

ALONG THE LINES OF POTENTIALLY A

CONVERSATION OR A REPORT TO

CHILD PROTECTIVE SERVICES.

SO THINKING ABOUT ALL OF THAT UP

FRONT SO THAT FAMILIES AGAIN CAN

MAKE THAT DECISION, CAN MAKE AN

INFORMED DECISION ABOUT WHAT

LEVEL OF SERVICE THEY ARE

WANTING TO ENTER INTO.

WE ALSO CREATED A TIP SHEET,

WHICH WAS MOSTLY FOR OUR

CLINICAL INTERNS BUT IS

SOMETHING THAT HAS PROVED REALLY

HELPFUL FOR STAFF AS WELL TO

THINK ABOUT.

WHAT ARE ALL THE THINGS YOU NEED

TO CONSIDER ON YOUR END, AND

WHAT ARE ALL THE THINGS YOU NEED

TO GO THROUGH WITH THE FAMILY

BEFORE YOU CAN CHECK YOUR BOX

AND SAY, OKAY, WE'RE READY TO

MOVE ON TO ZOOM-BASED SESSIONS.

SO I THINK, YEAH, A LOT OF

INTENTIONALITY THERE.

>> NO, REALLY APPRECIATE THAT.

SPEAKING OF CHILD WELFARE, WE

JUST GOT A QUESTION FROM A CHILD

WELFARE SPECIALIST OR WORKER WHO

IS SAYING THAT -- THEY'RE SAYING

A LOT MORE DOMESTIC VIOLENCE.

THEY'RE STILL GOING OUT.

WILD WELFARE WORKERS,

INVESTIGATORS IN PARTICULAR, ARE

CONSIDERED ESSENTIAL.

MANY OF THEM HAVE PROTECTIVE

GEAR BUT NOT ALL.

AND THEY'RE GOING OUT, THEY'RE

DOING INVESTIGATIONS.

IN SOME PARTS OF THE COUNTRY,

DOMESTIC VIOLENCE PROGRAMS ARE

NOT OPEN.

IN THIS PARTICULAR CASE, THE

AUDIENCE MEMBER IS ASKING, YOU

KNOW, WHAT CAN I DO IF MY

DOMESTIC VIOLENCE PROGRAM ISN'T

OPEN?

HOW DO I SORT OF CAREFULLY THINK

ABOUT, YOU KNOW, HOW TO RESPOND

WITHOUT CAUSING MORE HARM?

JESSICA?

>> JUST GO BACK TO THE

OLD-SCHOOL WAY OF RAISING YOUR

HAND, LIKE YOU'RE IN SCHOOL.

SO BASICALLY, THIS IS A REALLY

ROUGH ONE.

WHOEVER THAT IS, WHAT YOU'RE

DOING IS FRONTLINE 1,000.

SO I JUST WANT TO SAY THANK YOU.

THAT'S A REALLY DIFFICULT

POSITION YOU'RE BEING PUT IN.

SO I WILL SAY THAT MOST -- I HAD

NOT HEARD OF REALLY SHELTERS

REALLY CLOSING OR AGENCIES

CLOSING.

IT'S JUST MAYBE THAT THEIR

OFFICE DOOR IS CLOSED.

THAT BEING SAID, WHAT I WOULD

RECOMMEND IS, ONE -- AND YOU CAN

ALWAYS CONTACT US.

AGAIN, I'M MORE THAN HAPPY TO

PROVIDE OUR INFORMATION LINE,

EVERYTHING.

WHAT I WOULD DO IS IF YOU DON'T

FEEL COMFORTABLE, DON'T KNOW

ENOUGH ABOUT DOMESTIC VIOLENCE,

I WOULD CONTACT THE DOMESTIC

VIOLENCE AGENCY TO GET THEIR

SUPPORT AND ASSISTANCE WITH IT.

I THINK THAT SOMETIMES WHAT ENDS

UP HAPPENING IS YOUR FIRST

INSTINCT IS TO GO AHEAD AND SAY,

LET'S GET YOU OUT OF THE HOUSE.

WE NEED TO KEEP YOU AND THE

CHILDREN SAFE.

BUT AGAIN, LOOKING FROM AN

EQUITY LENS, THAT IS NOT REALLY

FEASIBLE.

WHAT'S GOING ON RIGHT NOW IS

THAT RIGHT NOW SHELTERS ARE

FULL.

SO AS A RESULT -- AND I DON'T

SEE SPACE REALLY OPENING UP ANY

TIME SOON BECAUSE THEY'RE HAVING

TO -- (NO ZOOM AUDIO)

SO FINDING SHELTER IS NOT GOING

TO BE A SUSTAINABLE SOLUTION.

I THINK ALSO, IT'S GOING TO BE

THE SAME THING IN TERMS OF

MOTELS.

SO THE AUTOMATIC THING ABOUT

TELLING SOMEONE TO LEAVE IS NOT

NECESSARILY GOING TO BE THE MOST

REALISTIC AND ALSO THE SAFEST

OPTION FOR THEM.

SO ONCE, EITHER BY YOURSELF OR

WITH A DV AGENCY, IF YOU FEEL

COMFORTABLE, WOULD BE ASKING THE

SURVIVOR AND COMING UP WITH AN

EXCUSE.

SOMETHING ABOUT YOU NEED TO TALK

TO THEM ABOUT THE CHILDREN'S

REGISTRATION, SOMETHING WHERE

IT'S JUST ONE PARENT.

BUT ASK THEM HOW YOU CAN HELP.

THAT'S THE BIGGEST THING.

HOW CAN YOU HELP ALLEVIATE THE

SITUATION?

RIGHT NOW WHAT WE HAVE BEEN

SAYING IS THAT WE'RE NOT

TRYING -- I WOULD LOVE TO PUT A

HAPPIER LENS ON THIS, BUT AT THE

SAME TIME, IT'S ASKING FAMILIES

IMPACTED BY VIOLENCE TO CHOOSE

BETWEEN A CRAPPY SITUATION AND A

CRAPPIER SITUATION.

IT REALLY AND TRULY IS.

SO THE BEST THING YOU CAN DO IS

BASICALLY SAY, LISTEN, IF YOU

CALL THE POLICE, THERE'S A

CHANCE THAT HE MIGHT NOT GET

ARRESTED OR THAT HE'S GOING TO

BE BE RELEASED EARLY.

IT'S NOT TO SAY DON'T DO IT, BUT

PLEASE MAKE INFORMED DECISIONS.

IT'S ALSO SHELTERS.

THE SHELTERS MAY BE FULL.

IF THEY'RE UNDOCUMENTED, THEY DO

NOT QUALIFY FOR FINANCIAL

ASSISTANCE.

I WANT TO MAKE THAT CLEAR.

SO TRANSITIONAL HOUSING, THEY

HAVE ACCESS TO A SHELTER, BUT

AFTER 30 DAYS, WHAT ARE THEY

GOING TO DO?

PEOPLE WHO ARE UNDOCUMENTED OR

MIXED STATUS DID NOT RECEIVE ANY

STIMULUS MONEY, AND THEY'RE NOT

ELIGIBLE FOR A LOT OF THE RELIEF

THAT'S GOING ON.

SO YOU HAVE TO KIND OF LOOK AT

THE WHOLE PICTURE, BUT THE

BIGGEST THING I WOULD SAY IS,

AND AGAIN, YOU CAN CONTACT US.

WE'RE MORE THAN HAPPY TO WORK IN

PARTNERSHIP WITH YOU AND SEE IF

THERE'S ANY MORE LOCAL DV

AGENCIES.

BUT THE BIGGEST THING IS TO TRY

AND GET THE SURVIVOR BY HERSELF

AND ASK WHAT SHE WANTS AND ALSO

COME UP WITH SAFETY PLANNING OR

HAVE THE DOMESTIC VIOLENCE

ORGANIZATION COME UP WITH SAFETY

PLANNING INSIDE THE HOUSE AND

GETTING THE KIDS INVOLVED IF

THEY'RE OLDER ABOUT WHAT THEY

SHOULD DO IF VIOLENCE BREAKS

OUT.

>> THAT'S GREAT, JESSICA.

AND A REMINDER, TOO, THAT THE

STATE AND THE NATIONAL DOMESTIC

VIOLENCE HOTLINE, OF COURSE, ARE

WORKING.

THEY CAN DO SAFETY PLANNING TOO.

OBVIOUSLY IT'S NOT THE SAME AS

HAVING THE LOCAL AGENCY, BUT

THAT'S AN IMPORTANT POINT.

AND JUST A POINT ABOUT

QUESTIONS.

WE SEE THAT THERE ARE A LOT OF

GOOD QUESTIONS COMING IN.

CLEARLY WE WON'T BE ABLE TO GET

TO ALL THE QUESTIONS.

KEEP ON ASKING THE QUESTIONS

BECAUSE THIS WILL INFORM OUR

FUTURE WEBINARS.

WE HAVE THREE IN THIS SERIES,

BUT WE PLAN TO DO MORE THAN

THAT.

ALSO, SUGGEST TOPICS THAT YOU

WANT TO HEAR MORE ABOUT.

LONNA, YOU WANT TO ASK SOME

QUESTIONS FOR FOLKS?

>> YEAH, THERE WAS ONE QUESTION

I THINK DIRECTED AT LISA, BUT

WE'LL GIVE IT TO JESSICA, TOO.

SOMEONE ASKED A QUESTION ABOUT

DO YOU EVER HAVE PROBLEMS WHEN

SURVIVORS AND PARTNERS GO TO THE

SAME FACILITY.

THAT'S A HALLMARK OF CAMINAR

LATINO.

I'M NOT SURE IT'S COME OUT VERY

CLEAR YET, BUT NOT ALL OF THE

FAMILIES THAT YOU WORK WITH, YOU

WORK WITH EVERYONE IN THE

FAMILY.

AT LEAST 50% OR SOMETHING LIKE

THAT OF YOUR FAMILIES, YOU'RE

WORKING WITH EVERY SINGLE PERSON

IN THE FAMILY ON THE SAME NIGHT.

CAN YOU TALK A LITTLE BIT ABOUT

THAT?

>> SO BASICALLY, YES.

JUST TO GIVE YOU AN IDEA, WE

WORK WITH -- SO AS A PROGRAM, WE

WORK WITH ABOUT 20 INDIVIDUALS,

MALE INDIVIDUALS.

WE ALSO HAVE A FEMALE PROGRAM.

I WOULD SAY WE WORK WITH

SOMEWHERE BETWEEN 20 AND 30 EACH

WEEK.

FOR OUR WEEKLY PROGRAMMING WHERE

ALL THE GROUPS MEET AT ONE TIME,

BASICALLY WE'RE WORKING WITH, ON

AVERAGE, BETWEEN 100 AND 150.

SO BASICALLY THERE ARE SOME WHO

COME WITH FAMILIES, SOME WHO

DON'T, BUT WE STAY IN CONTACT IN

ONE WAY SHAPE OR ANOTHER.

SOMETIMES BECAUSE OF WORK OR

WHATEVER, THE SURVIVORS JUST

WON'T COME TO THE PROGRAM.

I SEE IN TERMS OF THE QUESTION

ABOUT RUNNING INTO SAFETY

ISSUES.

OF COURSE.

I, AGAIN, WILL BE COMPLETELY

TRANSPARENT.

THAT WAS A MAIN CONCERN THAT

PEOPLE HAD WHEN WE FIRST STARTED

WORKING WITH THE GRASSROOTS BACK

IN 1995.

WHEN THEY REALIZED WE WERE GOING

TO HAVE ALL OUR PROGRAMMING

OCCUR CONCURRENTLY.

SO THAT MEANS OUR SUPPORT

GROUPS, OUR SHARING GROUPS, AND

THE ASSET PROGRAM WERE ALL GOING

TO HAPPEN ON THE SAME NIGHT,

SAME LOCATION.

THERE WAS VALID CONCERN.

BUT HERE'S A COUPLE DIFFERENT

THINGS.

WE IS THAT WE OPERATE OUT OF THE

CHURCH.

OUR COMMUNITY PROGRAMMING, WE'RE

NOT A FAITH-BASED ORGANIZATION,

BUT WE'RE ALSO CLOSELY

RESPONSIVE.

WHAT WE HAVE FOUND IS THAT

REGARDLESS OF THE DENOMINATION,

THE MEN LOOK AT THE CHURCH IN A

VERY DIFFERENT WAY.

SO WHEN THEY COME TO OUR PROGRAM

AND THEY BASICALLY SEE THE

CHURCH BACKING US, EVEN THOUGH

THERE'S NO CLERGY MEMBERS OR

ANYBODY FACILITATING THE GROUP,

THEY SEE US IN A DIFFERENT WAY.

THEY DON'T SEE US AS A

GOVERNMENT ENTITY BUT PART OF

THE COMMUNITY.

THAT HELPS IN TERMS OF SAFETY

BECAUSE NO MATTER HOW VIOLENT

THEY ARE, THEY WON'T BE

VIOLENT

IN GOD'S HOUSE.

WE ALSO BASICALLY TWO INTO A

VARIETY OF DIFFERENT SAFETY

PRECAUTIONS WHERE WE HAVE THE

PROGRAMMING ALL TAKE PLACE ON

DIFFERENT LEVELS OF THIS

COMMUNITY BUILDING.

SO I'LL BE MORE THAN HAPPY TO

KIND OF TALK ABOUT ALL THE

DIFFERENT ONES AT A LATER POINT

OR OFFLINE WITH WHOEVER HAD THE

QUESTION.

BUT AMAZING THING IS THAT WE DO

EVERYTHING WE CAN TO HELP TO

ENSURE, AND THEN IF THERE'S A

TEMPORARY PROTECTIVE ORDER,

AGAIN, BASICALLY IF THE PARTNER

WANTS TO COME, IF THE SURVIVOR

WANTS TO COME, SHE GETS TO COME

TO OUR PROGRAM, THEN WE REFER

THE AGGRESSOR TO A DIFFERENT

ONE.

>> THANK YOU.

WE HAVE MAYBE A LITTLE LESS THAN

20 MINUTES LEFT.

WE'LL STILL TAKE SOME QUESTIONS

FROM THE AUDIENCE, BUT ONE OF

THE QUESTIONS I HAVE IS WHAT ARE

YOU LEARNING THAT IS SURPRISING

YOU, OR NOT SURPRISING YOU, THAT

IS IMPORTANT THAT COVID-19 IS

REVEALING ABOUT OUR WORK, ABOUT

FAMILIES' EXPERIENCES, ABOUT OUR

COLLABORATIONS THAT YOU WANT TO

REMEMBER AND NOT FORGET AS WE

MOVE INTO, YOU KNOW, WHAT WE

HOPE IS A BETTER NORMAL.

>> WHO WOULD LIKE TO START?

LISA?

>> SURE.

I THINK THIS SITUATION HAS

REMINDED US OF THE VALUE OF

CONNECTION THAT WE HAVE WITH OUR

PARTICIPANTS.

NEENA WAS SAYING WHAT AN HONOR

IT IS TO BE TRUSTED.

WE HAVE FOLKS WHO ARE COURT

MANDATED TO A PROGRAM, THAT THEY

DIDN'T VOLUNTEER FOR.

THEY'RE TOLD TO PAY A FEE AND

COME TO THIS PROGRAM FOR 28

WEEKS.

YOU KNOW, TO GET THEM TO A

TURNING POINT THAT THEY SEE US

AS A RESOURCE, A TRUSTED

RESOURCE, AND WE'RE REACHING OUT

TO THEM, IT WAS LIKE TALKING TO

OLD FRIENDS.

THEY WERE JUST SO GLAD TO HEAR

OUR VOICES, AND THEY'RE EAGER TO

GET BACK AND RECONNECTED WITH

THEIR GROUPS.

YOU KNOW, IT'S ALWAYS SOMETHING

THAT I TALK ABOUT A LOT, BUT IT

WAS REALLY A POWERFUL SYMBOL.

WE'RE PROVIDING A COMMUNITY

SERVICE.

I WOULD SAY I'M TRYING TO SHIFT

THE CONVERSATION.

PEOPLE, AT LEAST IN THE

BALTIMORE AREA, WE'RE FORTUNATE

TO HAVE GREAT BRANDING FOR

40-PLUS YEARS OF WORKING IN THE

CITY.

PEOPLE SAY TO SURVIVORS, YOU

SHOULD CALL THE HOUSE OF RUTH.

THEY CAN HELP YOU.

I REALLY WANT TO CHANGE THAT

CONVERSATION SO THAT PEOPLE ARE

SAYING THE SAME THING TO ABUSIVE

PARTNERS.

YOU KNOW, HOUSE OF RUTH MARYLAND

IS SOME PLACE THAT CAN REALLY

HELP YOU, IN A WAY THAT'S

COMPASSIONATE AND LOVING AND

COMES FROM A PLACE OF AUTHENTIC

CARE.

ONE SIGNIFICANT BARRIER TO THAT

IS THAT THE FIRST THING WE'RE

GOING TO SAY TO HIM,

UNFORTUNATELY, OUT OF NECESSITY

AND STRUCTURAL PROBLEMS WITH OUR

SYSTEM IS THAT WE'RE GOING TO

ASSESS HIM FOR A FEE.

THAT'S HEARTBREAKING.

WHEN YOU'VE GOT PEOPLE WHO NEED

HELP AND THE BARRIER COULD BE

MONEY, TO NOT JUST -- YOU KNOW,

WHETHER OR NOT HE GETS OFF

PROBATION BUT WHETHER OR NOT HIS

FAMILY GETS THE TOOLS THEY NEED

TO BE SAFER.

THAT'S JUST SOMETHING THAT'S

UNSETTLING TO ME, IT'S

UNFORTUNATE, AND I'M SORT OF

RECOMMITTED TO DOING SOMETHING

ABOUT THAT.

WE'VE ALSO DONE A BETTER JOB --

WHAT'S THAT?

>> COUNT US IN.

>> YES.

I CAN ALWAYS COUNT YOU ALL IN.

THE OTHER PIECE IS WE'RE DOING A

BETTER JOB OF COMMUNICATING

ACROSS SITES, WHICH IS SOMETHING

WE'VE ALWAYS STRUGGLED.

WE NEARLY DOUBLED IN SIZE OF

STAFF WHEN WE BUILT OUR SHELTER

IN 1999.

I DON'T THINK WE'VE EVER QUITE

RECOVERED AND FIGURED OUT HOW TO

COMMUNICATE ACROSS THE WHOLE

STATE.

BUT EVERYONE IS LEARNING THESE

TOOL, AND WE'RE ALL DOING A

BETTER JOB OF IT.

WE'RE ABLE TO SEE EVERYBODY AT

THE MEETINGS, EVEN IF WE CAN'T

BE IN THE SAME PHYSICAL ROOM.

I'M GOING TO CARRY THAT INTO THE

FUTURE WITH US.

>> GREAT.

THANKS, LISA.

NEENA?

>> YEAH, I THINK SIMILAR TO SOME

OF THE THINGS LISA MENTIONED AND

JUST KIND OF THINKING ABOUT

COLLABORATION, I THINK WE'VE

ALWAYS KNOWN THAT AND IT'S

SOMETHING THAT WE ALWAYS REALLY

STRIVE FOR, BUT I THINK IT'S

CHALLENGING FOR A VARIETY OF

REASONS, WHETHER IT BE FUNDING

OR JUST KIND OF THAT PEOPLE TEND

TO WORK IN THUNDERSHOWER OWN

SILOS.

BUT I THINK ONE OF THE THINGS

THAT COVID HAS REALLY BROUGHT

OUT IS THIS WAY TO THINK

CREATIVELY ABOUT COLLABORATION

AND HOW DO YOU DO THINGS IN A

WAY THAT IS REALLY HOLISTIC AND

IS PUTTING SURVIVOR NEEDS FIRST.

THEN I THINK THE OTHER PIECE

AROUND -- SO TWO OTHER THINGS.

THE OTHER PIECE AROUND

HIGHLIGHTING AGAIN JUST A LOT OF

THE INEQUITIES AND REALLY THE

BURDEN THAT EXISTS FOR SOME

MEMBERS OF OUR COMMUNITY AND

FIGURING OUT A WAY AS A PROGRAM

TO REALLY USE OUR LEVEL OF

PRIVILEGE BECAUSE WE HAVE ONE,

BEING THIS NATIONALLY RECOGNIZED

PROGRAM THAT DOES A LOT OF WORK,

BOTH LOCALLY THROUGHOUT THE

STATE AND THROUGHOUT THE

COUNTRY.

BUT HOW TO USE OUR PLATFORM TO

REALLY BRING AWARENESS TO THOSE

PIECES AND THINK ABOUT, YEAH,

HOW WE CAN DO A BETTER JOB,

WHETHER THAT IS CHANGING

DIFFERENT PRACTICES OR WHETHER

THAT IS, AGAIN, KIND OF GETTING

SYSTEMS TO THINK DIFFERENTLY

ABOUT HOW DO WE REALLY BEST MEET

THE NEEDS OF OUR FAMILIES AND

HOW DO WE MEET THE NEEDS OF

THOSE FOLKS WHO ARE ON THE FRONT

LINES WHO ALSO REPRESENT KIND OF

HISTORICALLY MARGINALIZED

COMMUNITIES AND BECAUSE THEY

DON'T NECESSARILY HAPPEN TO BE A

MEDICAL PROVIDER, THEY'RE LEFT

OUT OF THE CONVERSATION IN THAT

THEY'RE ALSO DEALING WITH SOME

OF THE SAME THINGS.

SO I THINK AS A PROGRAM, REALLY

TRYING TO DO BETTER.

THEN THE LAST THING THAT I THINK

HAS REALLY SURPRISED US IS THAT

OUR FAMILIES ARE ENGAGING MUCH

MORE THAN THEY WERE PRIOR TO

COVID.

I THINK THAT THERE ARE A LOT OF

DIFFERENT REASONS FOR THAT, BUT

I THINK WE HAVE -- I DON'T WANT

IT TO SOUND OFFENSIVE, BUT I

THINK SOMETIMES IN THE MENTAL

HEALTH FIELD, THERE'S THIS IDEA

ABOUT THERE'S A CERTAIN WAY THAT

WE NEED TO DO THINGS AND THAT WE

SHOULD DO THINGS.

I THINK I SAID THIS EARLIER, IF

WE'RE NOT IN FRONT OF SOMEONE IN

PERSON, THAT THEN WE'RE SOMEHOW

DOING LESS THAN.

I THINK WE NEED TO CHANGE THAT

NARRATIVE, AND WE NEED TO HAVE A

CONVERSATION AND KIND OF BE MORE

FLEXIBLE IN THE KINDS OF

SERVICES AND THE WAYS THAT WE

DELIVER THEM BECAUSE I THINK FOR

WHAT IT'S WORTH AND FOR ALL OF

THE CHALLENGES AND THE THINGS

THAT WE HAVE TO CONSIDER AND

THINK ABOUT IN TERMS OF THIS

REMOTE WORK, IT IS BREAKING DOWN

BARRIERS.

IT'S ALLOWING FOLKS TO KIND OF

HAVE MUCH MORE ACCESS.

SO THAT IS, YEAH -- I THINK

THAT'S SOMETHING THAT I'M HOPING

THAT WE CAN MAINTAIN AND

CONTINUE TO THINK ABOUT WHERE

THAT FALLS INTO OUR PRACTICE.

>> THANK YOU, NEENA.

JESSICA?

>> I THINK FOR ME, SOME OF WHAT

NEENA AND LISA -- I'M IN

COMPLETE AGREEMENT.

AGAIN, I WAS VERY LUCKY.

I ALWAYS KIND OF GAVE ADDITIONAL

ROLES AND RESPONSIBILITIES THAT

MAY NOT HAVE FIT COMPLETELY, BUT

THIS IDEA OF FLEXIBILITY AND

REALLY AND TRULY CONTINUE TO BE

FLEXIBLE, KNOWING THIS IS A

FLUID SITUATION.

DEPENDING ON WHAT STATE, WHAT

COUNTY, WHATEVER YOU MAY BE

WORKING IN, IT'S AN

EVER-CHANGING SITUATION.

SO I UNDERSTAND THAT WHAT MAY

WORK TODAY, MAY NOT WORK

TOMORROW.

I THINK THE WILLINGNESS TO TRY

SOMETHING NEW, EVEN IF YOU'RE

NOT COMFORTABLE WITH IT, AGAIN,

WE HAVE HALF A TEAM WHO USED

COMFORTABLE USING ELECTRONICS

AND DOING VIDEO CONFERENCES, AND

THE OTHER HALF, THIS WAS A VERY

DIFFERENT THING.

SO THAT IDEA OF FLEXIBILITY,

IT'S REALLY BROUGHT TO LIGHT.

IT'S BEEN ANOTHER PRIME EXAMPLE

OF EQUITY AND HOW LITTLE EQUITY

THERE IS.

FOR INSTANCE, LATINOS ARE

OVERALL THE ONES WHO HAVE THE

HIGHEST AMOUNT OF SMARTPHONES.

SO YOU'RE THINKING, COOL, I'M

GOOD.

AS A RESULT, THIS SHOULDN'T BE

AN ISSUE.

THEIR INTERNET, THAT'S ANOTHER

HUGE THING.

IF MONEY IS AN ISSUE, THEY MAY

BE QUALIFYING FOR THE FREE

INTERNET.

SO WHAT WE'VE NOTICED IS THAT

BASICALLY THEY MAY HAVE THE

SMARTPHONE ABILITY TO DO ZOOM,

BUT AT THE SAME TIME, THEIR

INTERNET CONNECTION -- OR AGAIN,

FROM A CULTURAL PERSPECTIVE,

THERE MAY BE EIGHT OTHER PEOPLE

LIVING IN THE TWO-BEDROOM

APARTMENT WHO ARE ALL TRYING TO

BASICALLY USE THAT SAME INTERNET

SIGNAL.

SO I THINK REALLY KIND OF

REMEMBERING ABOUT THAT AND HOW

ALL THOSE LITTLE THINGS REALLY

MAKE A BIG DIFFERENCE AND FOR US

TO BE AWARE OF THAT WHEN WE'RE

THINKING ABOUT IT.

I THINK ALSO KIND OF LOOKING

INTO NOT READING THE FINE PRINT.

AGAIN, A LOT OF AID HAS COME,

FINANCIAL AID HAS COME BECAUSE

OF CORONAVIRUS, BUT THERE'S SUCH

A LARGE AMOUNT OF PEOPLE WHO ARE

LEFT OUT OF IT.

SO I'VE SEEN A LOT SAYING PLEASE

STOP SAYING WE'RE ALL IN THIS

TOGETHER.

PLEASE STOP SAYING WE'RE ALL IN

THE SAME BOAT.

IT'S A BIG LIE.

MY EXPERIENCE HAS BEEN IT'S SO

DIFFERENT THAN WHAT A LOT OF OUR

PARTICIPANT FAMILIES.

FINALLY, THE ROLE OF CULTURE.

FOR EXAMPLE, WHEN THINKING ABOUT

APPS, ONE HAPPEN THAT'S VERY

POPULAR, AT LEAST WITH THE

FAMILIES WE WORK WITH, IS

WHATSAPP.

THEY USE THAT A LOT TO BE

TALKING TO THEIR FAMILIES BACK

IN THEIR NATIVE COUNTRY.

SO THAT WAS ANOTHER OPTION THAT

WE HAD WHEN THINKING ABOUT HOW

TO TALK.

THEY WANTED TO DO MORE FACETIME.

IT DIDN'T ALWAYS HAVE TO BE

ZOOM.

WHAT WERE OTHER APPS ALREADY

BEING USED?

THEN ONE THAT I HAD JOKED AROUND

ABOUT BUT WAS ACTUALLY VERY TRUE

IS THAT WHEN WE FIRST STARTED

DISTRIBUTING GIFT CARDS, WE CAME

UP WITH THIS VERY, VERY SAFE,

DETAILED SAFETY PROTOCOL ABOUT

GIFT CARD DISTRIBUTION.

WE WERE GOING TO WIPE IT DOWN,

SIX FEET AWAY, EVERYTHING ELSE.

WELL, WE QUICKLY HAD TO CHANGE

TO MAILING THEM BECAUSE ONE OF

OUR ADVOCATES SAID IT WASN'T THE

SAFETY PART THAT MADE HER

HESITATE OR NOT WANT TO DO IT

AGAIN.

IT WAS WHEN SHE WAS GREETING THE

PARENTS, AND SHE FELT SO

DISRESPECTFUL BECAUSE SHE

COULDN'T HUG.

ALTHOUGH THERE WAS ALL THIS

SAFETY, AND PEOPLE KNOW DEEP

DOWN JUST FROM A CULTURAL

PERSPECTIVE, THE FACT YOU CAN'T

BE PHYSICAL WITH SOMEONE YOU

HAVE A RELATIONSHIP WITH.

SO EVEN JUST LOOKING AT THOSE

CULTURAL VALUES AND HOW THAT

PLAYS INTO HOW TO RESPOND AND

HOW TO BETTER SUPPORT PEOPLE, I

THINK THAT'S BEEN ANOTHER THING

THAT WE'VE REALLY LEARNED, HOW

VITAL IT IS DURING WHATEVER

SITUATION YOU'RE GOING THROUGH.

>> THANK YOU SO MUCH.

WE GOT A COUPLE MORE QUESTIONS

IN THAT I WANT TO TRY TO ANSWER.

ONE IS SPECIFIC TO TELEHEALTH

GUIDANCE THAT'S COME OUT.

THIS PARTICIPANT WANTS TO KNOW

IF ANY OF YOU HAVE HAD ANY

CHALLENGES WITH TELEHEALTH THAT

ASKS FOR EMERGENCY CONTACT

INFORMATION GIVEN SORT OF

INCREASED CONCERNS OR

CONFIDENTIALITY FOR SURVIVORS.

>> SO THAT IS SOMETHING THAT IS

ON OUR TELEHEALTH CONSENT FORM.

ONE OF THE THINGS IS TO KIND OF

ASK ABOUT FAMILY'S LOCATION AT

THE TIME OF THAT SESSION AND FOR

A CAREGIVER TO BE ABLE TO GIVE

EITHER AN EMERGENCY CONTACT IN

THE EVENT THAT, YOU KNOW,

SOMETHING WERE TO HAPPEN.

WE HAVE JUST RECENTLY -- A

QUESTION CAME UP FOR FOLKS, FOR

FAMILIES OR CAREGIVERS WHO MIGHT

BE IN VARIOUS ADDRESS PROTECTION

CONFIDENTIALITY PROGRAMS.

SO HOW TO NAVIGATE THOSE PIECES

IF SOMEBODY ACTUALLY CAN'T GIVE

YOU AN ADDRESS OR A PHYSICAL

LOCATION.

SO WE'VE KIND OF OPTED INTO THAT

EMERGENCY CONTACT PERSON BUT

ALSO HAVING A CONVERSATION, THIS

IS PART OF WHAT I WAS TALKING

ABOUT EARLIER, THE PREP WORK OR

KIND OF THE WORK THAT HAPPENS UP

FRONT BEFORE YOU START SERVICES,

IS TO HAVE A CONVERSATION TO LET

THE CAREGIVER KNOW THAT IF THERE

IS AN EXTREME EMERGENCY, YOU

KNOW, ONE OF THE PROTOCOLS OR

WHAT WE WOULD LIKE TO BE ABLE TO

DO IS TO BE ABLE TO CALL 911 IF

NECESSARY AND HAVE THEM PING

BASED ON THE TELEPHONE NUMBER.

YOU KNOW, MOST FOLKS HAVE BEEN

OKAY WITH THAT.

BUT THAT IS ANOTHER THING THAT

WE ARE ALSO GRAPPLING WITH AS

WELL.

BUT THAT'S ONE OF THE WAYS WE'VE

COME UP WITH DEALING WITH IT.

THEN IF THERE'S SOME KIND OF

SAFETY CONCERN THAT HAPPENS,

LIKE HAVING SOME KIND OF CODE

WORD OR A BUZZ WORD IS THAT THE

CAREGIVER CAN SAY.

>> REALLY GREAT.

ARE THERE MORE QUESTIONS THAT

YOU WANT TO ASK?

BRIEFLY, MAYBE.

OR WE CAN MOVE TO FINAL

THOUGHTS.

>> YEAH, WE DID GET SOME JUST

SENDING LOVE TO ALL THE

PANELISTS.

SO SENDING SOME LOVE.

>> SO LET'S -- WE ONLY HAVE

THREE MINUTES LEFT.

SO FIRST OF ALL, THANK YOU,

THANK YOU, THANK YOU.

AMAZING CONVERSATION.

CLEARLY WE COULD HAVE BEEN HERE

FOR MANY OTHER HOURS, EXCEPT

THAT IT IS HARD TO BE IN FRONT

OF A SCREEN LIKE THIS.

SO LOOKING FORWARD TO BEING IN

PERSON WITH YOU ALL AGAIN.

SO LET'S HEAR JUST YOUR FINAL

THOUGHTS, AND WE'LL START WITH

LISA THIS TIME.

>> I THINK MY FINAL THOUGHTS IS

THAT WE'RE ALL IN DIFFERENT

BOATS, MOST DEFINITELY.

NO DOUBT ABOUT THAT.

BUT JUST A REMINDER TO USE EACH

OTHER.

WE'RE ALL NAVIGATING UNCHARTED

TERRITORY.

LEANING ON EACH OTHER, PEOPLE

YOU TRUST.

I'VE GOT SOME FOLKS ON THIS

WEBINAR I CONSIDER SOME OF MY

CLOSEST CONFIDANTS.

THERE'S NO EXCUSE FOR DOING THIS

WORK IN ISOLATION ANYMORE.

SO LEAN ON THOSE NETWORKS AND

GATHER INFORMATION AND CONSULT.

PARTICULARLY, CONSULT WITH

MEMBERS OF THE COMMUNITY YOU

SERVE.

JUST KEEP TRUCKING.

>> THANK YOU, LISA.

JESSICA?

>> I THINK FOR ME, IT'S SIMILAR

TO WHAT LISA SAID.

THE BIGGEST THING IS JUST TO

GIVE YOURSELF A BREAK AND

REALIZE THAT WE'RE ALL FIGURING

THIS OUT TOGETHER.

I DON'T WANT TO HEAR

UNPRECEDENTED -- WELL, I CAN'T

SAY THAT WORD.

THERE ARE LOTS OF WORDS,

PANDEMIC AND ALL THAT, THAT HAVE

RESULTED IN US JUST TRYING TO

FIGURE IT OUT.

IT DOESN'T MATTER IF YOU'VE BEEN

AROUND FOR A YEAR, 30 YEARS, 40

YEARS.

WE'RE ALL FIGURING THIS OUT.

SO EVEN THOUGH WE'VE BEEN

WORKING WITH AGGRESSORS FOR 25

YEARS NOW, WE STILL LEAN HEAVILY

ON MEN STOPPING VIOLENCE TO GET

THEIR INPUT AND THEIR EXPERIENCE

ABOUT HOW TO DO THIS VIRTUALLY.

SO I THINK THIS IS THE TIME FOR

COMMUNITY COLLABORATION AND A

TIME TO PUT ANY KIND OF EGOS OR

FEARS ASIDE AND JUST ASK THE

QUESTION.

AGAIN, WE ARE ALL JUST TRYING TO

FIND WHAT IS THE BEST WAY, AND

THE BEST WAY WE CAN DO THIS IS

TO DO THIS TOGETHER.

>> BEAUTIFUL.

THANK YOU, JESSICA.

NEENA?

>> YEAH, I THINK I AGREE WITH

WHAT LISA AND JESSICA HAVE

ALREADY SAID.

REALLY, THIS IS A TIME FOR

COLLABORATION LIKE NONE OTHER

AND JUST BEING ABLE TO LEAN ON

THOSE FOLKS THAT YOU CONSIDER TO

BE FRIENDS, COLLEAGUES, ALLIES.

AND TO REALLY LEAN ON EACH OTHER

FOR THE WORK AND ALSO TO BE KIND

TO YOURSELVES.

LIKE, THIS IS AN INCREDIBLY

STRESSFUL, UNORDINARY TIME, AND

WE'RE ALL JUST TRYING TO DO WHAT

WE KNOW BEST.

AND SO I WOULD SAY, YEAH, BE

KIND FOR YOURSELF.

GIVE YOURSELF THE PERMISSION TO

FEEL WHATEVER IT IS THAT YOU'RE

FEELING AND TO NOT -- TO BE

UNAPOLOGETIC ABOUT THOSE PIECES

AND FOR US ALL TO TAKE CARE OF

OURSELVES.

>> THANK YOU, NEENA.

YOU ALL ARE SO WISE.

THANK YOU.

LONNA, YOU GET THE FINAL, FINAL

WORD.

>> I JUST WANT TO THANK YOU ALL,

JESSICA, LISA, NEENA.

I AM PRIVILEGED TO CALL ALL

THREE OF YOU MY FRIENDS.

YOU'VE BEEN GREAT PARTNERS WITH

FUTURES AND HAVE REALLY LED THE

NATION FOR DECADES WITH YOUR

WORK.

SO THANK YOU SO MUCH.

I WANT TO THANK YOU, JUAN

CARLOS, AND THE CHILDREN'S TEAM

AND EVERYBODY BEHIND THE SCENES.

I THANK EVERYONE FOR COMING OUT.

THERE'S A COUPLE THINGS THAT I

HEARD.

NEENA SAID MAKE SURE YOU TAKE

YOUR OWN PULSE, RIGHT.

JESSICA, ALWAYS AND EVERYONE,

LISTENING TO SURVIVORS.

NO EXCUSE FOR ISOLATION.

WE HAVE TO IDENTIFY AND JUST

SPEAK WHAT THESE INEQUITIES ARE

AND UNPACK THEM.

DON'T PRETEND THEY'RE NOT THERE.

THIS IS LET'S BE REAL TIME.

SO IF WE ALL PUT OUR COLLECTIVE

HEADS TOGETHER, YOU KNOW, WE CAN

FIGURE THIS OUT.

I INVITE EVERYONE TO COME TO

INNOVATION ON DEMAND PART 2.

WE WOULD LOVE TO SEE YOU.

WE WANT TO HEAR ABOUT OTHER

THINGS THAT YOU WANT TO TALK

ABOUT.

THE NEXT PART IN THE SERIES WILL

BE FOCUSING IN ON THE

INEXTRICABLE LINK BETWEEN ADULT

SURVIVORS AND CHILD SURVIVORS

AND LOOKING AT CHILD WELFARE AND

DOMESTIC VIOLENCE WORK IN

COLLABORATION.

WE HOPE TO SEE YOU THERE.

AND THAT'S IT.

THANK YOU.

OH, ONE MORE THING.

SORRY.

FOR ANYONE WHO'S STILL THERE, WE

ARE GOING TO PUT THIS RECORDING

UP ON OUR WEBSITE AND BE ABLE TO

SHARE DOCUMENTS THAT BOTH THE

HOUSE OF RUTH AND CHILD WITNESS

TO VIOLENCE HAVE DEVELOPED.

SO YOU'LL SEE THEM THERE BY THE

END OF THIS WEEK.

THAT'S IT.

THANK YOU.

STAY WELL.

>> BYE.

>> BYE.