

Learn from yesterday, live for today, hope for tomorrow:
Learning's and Recommendations from the Byrne Domestic Violence Collaborative
Response Project (DVCRP)
December 2, 2008

Many survivors of domestic violence have co-occurring domestic violence related trauma, mental health and/or addiction issues.

- 90% of women in drug treatment have experienced severe domestic violence from a partner.
- 74 % of women in substance abuse treatment have experienced sexual abuse.

Mental health, alcohol and drug, and domestic violence service providers in Multnomah County had identified the need for more and more integrated services to better address the needs of domestic violence survivors with mental health or addictions problems. To address this identified need, the Multnomah County's Domestic Violence Coordinators office applied and received an Edward Byrne grant to fill the gap in services and to provide guidance to the community on the needs of this population, appropriate interventions and the partnerships needed to address this problem. The goal of the Domestic Violence Collaborative Response project is to provide holistic and self-directed services that can effectively meet survivors' complex needs related to trauma, addiction and mental health. Specifically, the 2-year grant funded:

- 1) On-site integrated trauma, mental health and drug/alcohol addiction screening, assessment and linkage to treatment for survivors at domestic violence agencies;
 - a. Provided 172 on-site integrated trauma, mental health and drug/alcohol addiction screening, assessment and linkage to treatment for survivors
 - b. Provided 200 client-focused consultations to staff at domestic violence, mental health and alcohol and drug programs.
- 2) Increase the participation of survivors in all levels of planning, implementation and evaluation of their own integrated treatment and the grant-funded projects.
 - a. Provided 14 community-based Seeking Safety groups were co-facilitated by recovering survivors paired with staff from partnering agencies.
 - b. Five survivors participated in Advisory Council and sub-committees to help shape the project, assess the current services available and make recommendations for improvement of the various systems.
- 3) Increase the access, effectiveness and integration of domestic violence, mental health and drug/alcohol abuse services for survivors. The DVCR Project also provided cross training for staff, identified gaps or barriers to services, and developed recommendations to increase access to and effectiveness of services for this population.
 - a. Provided 14 cross trainings to 171 agency staff
 - b. System Assessment Report

System Assessment Recommendations

A consultant was hired to conduct a System Assessment of the Domestic Violence, Mental Health and Addictions services in Multnomah County. Staff in the three systems were interviewed and focus groups were conducted with survivors. From these interviews and groups,

as well as discussion among a multi-disciplinary advisory committee, the following recommendations were developed:

Increase access for mental health, alcohol and drug and domestic violence services:

1. Survivors calling an agency seeking services should reach a person rather than an answering machine.
2. Agencies should make weekend and evening services available to increase access to services.
3. The City of Portland should include a Mental Health-Addictions consultant on site of the One-stop Domestic Violence center it is setting up.
4. Agencies with housing programs should identify Post Traumatic Stress Disorder (PTSD) as disability for priority in housing.
5. Agencies should assure that survivors from diverse cultures and populations feel welcomed and respected by staff and receive culturally competent services.

Increase expertise of mental health and alcohol and drug practitioners in the areas of domestic violence

1. Agencies should provide bonus pay for domestic expertise and for bilingual/bicultural staff.
2. Agencies should develop and designate trained domestic violence specialists to provide case consultation and technical assistance for their staff.
3. University level Social Work, Psychology and Counseling programs implement training on domestic violence and co-occurring PTSD, other mental health or alcohol and drug problems.
4. Agencies, systems and accreditation bodies should encourage training for therapists, counselors and others involved in the mental health and alcohol and drug systems.

Assure appropriate response to survivors seeking mental health and drug and alcohol services

1. Multnomah County should continue funding for a system-wide Domestic Violence Mental Health-Addictions consultant through mental health funding.
2. Alcohol and drug and mental health agencies that provide family-centered services should develop protocols/procedures to assure services do not further endanger survivors.
3. Mental health, alcohol and drug and corrections programs funded by Multnomah County should be required to screen all clients for domestic violence and to appropriately respond.

Assure involvement of recovering survivors in the development, implementation and evaluation of services/programs for this population

1. Agencies providing Seeking Safety groups should recruit, train and support (through employment, reimbursement, mentoring) recovering survivors to be peer Seeking Safety facilitators.
2. All agencies should ensure that domestic violence survivors are on their advisory boards and are providing feedback, recommendations and input into their programs and policies.

In addition to these mental health and alcohol and drug specific recommendations, the System Assessment identified the need to increase communication among disciplines and systems. it was recommended that the Family Violence Coordinating Council institute a multi-disciplinary committee to develop principles of intervention related to domestic violence, mental health and alcohol and drug problems.