



Request for Appropriation

Domestic Violence Shelter Funding - Home Safe

Sen. Allen Christensen

This funding will be used to continue the statewide Lethality Assessment Protocol Program funded with one-time funding through June 2019, and will expand our services for high risk survivors of domestic violence through essential shelter, housing, childcare, and supportive services. In partnership with Crossroads Urban and Voices for Utah Children, the Utah Domestic Violence Coalition (UDVC) will coordinate a 3 year pilot project to ensure survivors are supported with employment, childcare and independent housing.

Statewide Public Purpose

Through statewide partnership with UDVC member programs and our stakeholders, we aim to improve safety and independence for at least 200 survivors of domestic violence by stabilizing their employment, housing and childcare in accordance with the research-based model implemented by VOA and the SHARE program, reducing social service costs overall for high-risk high-barriered individuals.

Financing

Financing Source	2019 One-Time	2020 One-Time	2020 Ongoing
General Fund*	\$0	\$900,000	\$0

The sponsor has requested that funding from sources marked with an asterisk not lapse.

Additional Notes

Contact Information

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HOME SAFE PROPOSED BUDGET	
SFY20 Proposed Award/Program Period 7/1/19-6/30/20	
UTAH DOMESTIC VIOLENCE COALITION EIN 87-0524312	
DATE PREPARED:	9/30/18
PROPOSED PROJECT PERIOD:	7/1/19- 6/30/22
ITEM	Jul 2019-June 2022
Revenue:	
OVW Coalition Funding (UDVC match)	28,400
One time State General Funding	900,000
Total Revenue:	928,400
Expense:	
UDVC Coordinator Salary and Benefits (.50 FTE)	78,000
UDVC Administrative Salary (.10 FTE)	9,250
Total Personnel Costs:	87,250
Professional Space Costs: Office space (.60 FTE)	1,692
Total Space Costs:	1,692
Communications: Coordinator Phone Stipend	600
Communications : Printing	1,000
Communications : Postage	500
Total Communications:	2,100
Supplies (Programs) - Office Supplies	500
Total Supplies:	500
Housing and employment case management (100 survivors)	475,000
Children's advocacy/expanded childcare (100 children)	326,938
Utilities and fees	3,000
Total Programming (to be awarded to community programs via RFP):	804,938
Prof Fees/Contract Svcs (Programs) - Victim Advocate	10,640
Prof Fees/Contract Svcs (Programs) - Child Advocate	10,640
Prof Fees/Contract Svcs (Programs) - Case manager	10,640
Total Prof Fees/Contract Services (to be awarded to community programs via RFP):	31,920
Total Budget (Expense):	928,400

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2019 General Session Request for Appropriations Performance Measures and Outcomes for the Proposed Domestic Violence Shelter Home Safe Pilot

Background

UDVC is nationally recognized by the federal Office for Violence Against Women and the Office for Victims of Crime as an expert organization supporting best practices in victim advocacy throughout Utah. UDVC's member programs provide direct services (including emergency shelter, community outreach and education, victim advocacy and case management, legal and housing support) to adult and child victims of domestic and sexual violence throughout Utah. Our member programs also work extensively in partnership with a range of organizations to bridge the gap in victim services throughout our state, especially in rural and diverse communities.

UDVC, in partnership with Crossroads Urban Center and Prevent Child Abuse Utah, propose a three-year statewide pilot program drawn from the model funded and researched by Volunteers of America in Oregon and the Bill & Melinda Gates Foundation in Washington state where the housing project was coordinated by the Washington State Coalition Against Domestic Violence (WSCADV). We aim to replicate this specific model because it has proven cost benefits and positive outcomes for survivors of domestic violence and abuse, especially children. As Utah confronts and improves housing and homelessness services, it is critical to apply safe, proven models that will support the essential needs of survivors and their children. Further, this model is evidenced to be effective in addressing the intergenerational poverty risk survivors and their children face as a result of family violence and abuse.

The one-year program we propose (Home Safe) is rooted in the Housing First approach, which focuses on rapidly getting people who are homeless into permanent housing, a challenge in Utah due to limited inventory and further complicated by the needs of high-risk, high barrier individuals like those indicated by the Lethality Assessment Protocol to be at risk of intimate partner homicide. The theory is that any issues that may have contributed to an individual or family becoming homeless can best be addressed after they are stably housed. Focused on increasing survivors' access to and retention of stable housing, Home Safe is guided by the safety and self-determination needs of domestic violence survivors and their children. Recognizing the complexity of domestic violence and abuse, the main component of Home Safe is wrap around support from qualified professional advocates and flexibility in providing financial assistance and services to survivors and their children. These core elements promote the Home Safe model's main pillars:

Survivor-driven advocacy: Advocates focus on addressing the needs identified by survivors and the Lethality Assessment Protocol. Advocates are mobile, meeting survivors where it is safe and convenient for them.

Community engagement: Advocates provide outreach and education to landlords, law enforcement, city government, child care providers, early educators and housing councils on the dynamics of domestic violence and survivors' needs for safety. By doing so, they change and improve the way communities respond to domestic violence.

Housing stability: Like safety planning, housing stability is integrated into advocacy. Advocates work directly with survivors on accessing and/or retaining their housing, including

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accompanying survivors to housing appointments, acting as liaisons with landlords, and negotiating leases.

Flexible financial assistance: Funds are targeted to support survivors for a set timeframe so they can rebuild their lives, including covering childcare costs, transportation, school supplies, permits required for employment, as well as time-limited and flexible rental/housing assistance.

We propose the following performance measures and outcomes, which will be coordinated by the UDVC Coordinator and reported to the Legislature and stakeholders as needed. With the support of federal and state funding and the partnership of over 60 law enforcement agencies and victim service organizations statewide, UDVC has coordinated the collection and reporting of statewide Lethality Assessment Protocol data since July 2015.

The Problem, quantified:

- Among homeless families served in Utah's shelter-based programs in 2017, 65% reported they became homeless because of domestic violence and abuse.¹
- The Utah Homeless Management Information System reports 1143 children aged 6 or younger were served at a Utah homeless shelter in 2017; 868 of those children received services in Salt Lake County.
- 92% of homeless women will experience severe physical or sexual abuse in their lifetime.²
- In 2017, 85 percent of the homeless mothers interviewed for the Crossroads Urban Center needs assessment, did not have access to the childcare their family needed to be able to transition out of homelessness.

What problem would be solved?

We aim to demonstrate the ability to break the intergenerational cycle of abuse, violence and poverty with this model and pilot effort.

The Home Safe model, when implemented to fidelity with professional victim advocacy support, garners the following outcomes within 12-18 months of housing stabilization³:

- a. **IMPROVED SAFETY:** Number of women reporting extreme danger dropped 85% 18 months post DVHF placement.
- b. **STABILITY IMPROVED:** Nearly 80% fewer moves. Number of days in emergency housing dropped by 78%. Missed fewer days of work. Greater job stability, improved income.

¹ National Network to End Domestic Violence Census, 2017

² National Alliance to End Homelessness, 1.13 Providing Rapid Re-Housing for Survivors of Domestic Violence 2014 (<http://www.endhomelessness.org/library/entry/1.13-providing-rapid-re-housing-for-survivors-of-domestic-violence>)

³ Domestic Violence And Housing Stability: A Role For DV Programs, Kris Billhardt, MEd, EdS Linda Olsen, MA, MSW Chiquita Rollins, PhD; June 2014

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- c. **IMPROVED HEALTH:** Survivors had decreased alcohol/drug use, improved health and mental health; 25% fewer met criterion for clinical depression; 22% fewer had symptoms of PTSD
- d. **CHILDREN RECOVERED:** school attendance improved, more likely to be maintaining their school performance, exhibited fewer behavior problems and a reduction in the trauma assessment score

Proposed Performance and Outcome Measures:

We anticipate improved safety and stability for the families served by the Home Safe project, and we intend to assess this by:

- A. Ongoing Danger and Lethality Assessments conducted by trained advocates working within the pilot program. LAP Data Points (Performance and Outcome Measures) include:
 - 1. Total Clients Served at each Victim Service Provider agency (Adults and children).
 - 2. How many clients had previously received services from a Victim Service Provider.
 - 3. How many individuals had an unmet need for victim services.
 - 4. Total Domestic Violence Hotline Calls received.
 - 5. How many victims engaged in counseling.
 - 6. Frequency of specialized victim advocacy to engage a victim in developing a plan and coordinated services and resources required to respond to the his/her needs including financial assistance, transportation, basic needs, employment and education supports, health care coverage and safe housing.
 - 7. Frequency of legal advocacy for victims (ie. assistance in petitioning for a protective order).
 - 8. Frequency and duration of nights of emergency shelter service.
 - 9. Assessing the level of survivor knowledge of community resources following the provision of victim supportive services.
 - 10. Assessing the level of a survivor's ability to improve their ability to plan for their safety following the provision of victim supportive services.
- B. Ongoing assessments of child wellness and safety with the Trauma Resiliency Collaborative and partnership with Primary Children's Researcher, Dr. Brooks Keeshin, a clinician researcher in the Division of Child Protection and Family Health at the University of Utah and Safe and Healthy Families at Primary Children's Hospital. Dr. Keeshin is a child abuse pediatrician and child psychiatrist. Dr. Keeshin completed medical school at the University of Cincinnati, residency in pediatrics, general and child psychiatry at the University of Utah and fellowship training in child abuse pediatrics at Cincinnati Children's Hospital. Dr. Keeshin is certified in Pediatrics and Child Abuse Pediatrics by the American Board of Pediatrics, and certified in General as well as Child and Adolescent Psychiatry by the American Board of Psychiatry and Neurology.