

A Dangerous Intersection: The Call for Supporting Families Experiencing Domestic Violence During the COVID-19 Pandemic in Ohio

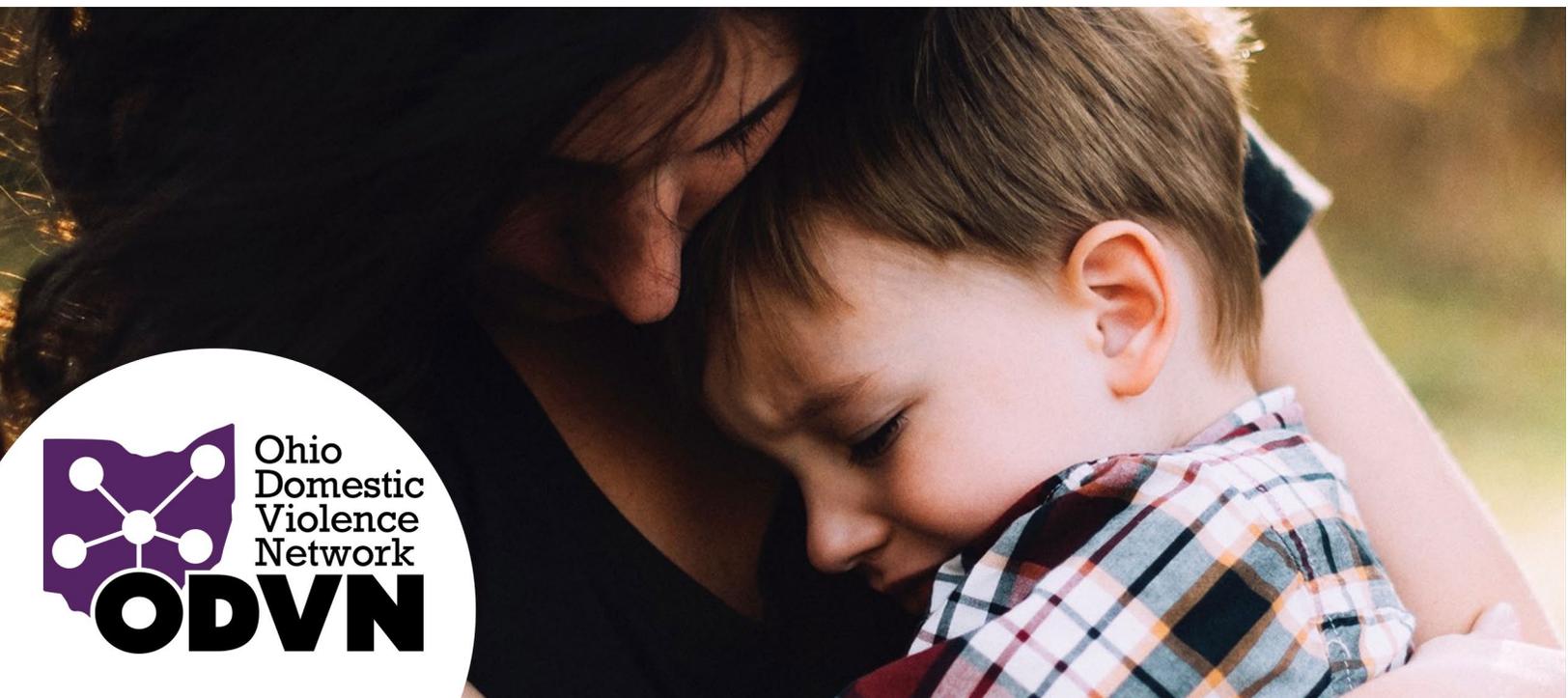
The COVID-19 pandemic has had a profound impact on families experiencing domestic violence in Ohio and on the programs that provide them with critically needed services. That's according to a survey of 56 domestic violence programs conducted by the Ohio Domestic Violence Network (ODVN) from April 9 to April 15, 2020.

This report describes several pressing new COVID-19-generated challenges and the most critical needs these organizations face, as they struggle to provide remote and shelter services to families experiencing domestic violence.

ODVN developed this survey and report because we recognize several key issues facing survivors in Ohio. First, domestic violence services continue to increase while core funding is reduced. The COVID-19 crisis must be understood in this context. Second, domestic violence shelters have unique risks for contagion, which must be remedied as part of Ohio's overall strategy to contain the pandemic. Finally, the families our programs are serving are already in harms' way and at risk for serious injury and homicide. The need to address the impact of COVID-19 on the safety of these families must be an urgent priority, so our most vulnerable families can access the life-saving services Ohio's domestic violence programs provide every day.

"Callers to our hotline are choosing between the devil they know and the one they don't know. Our staff recently spoke with a woman who had never been to a shelter before and was expressing concern about potentially bringing her children to an unsafe, overcrowded facility. We are doing our absolute best to create space in our shelter to keep our clients and staff safe."

— Kelly Cooke, Executive Director, My Sister's Place, Athens, Ohio



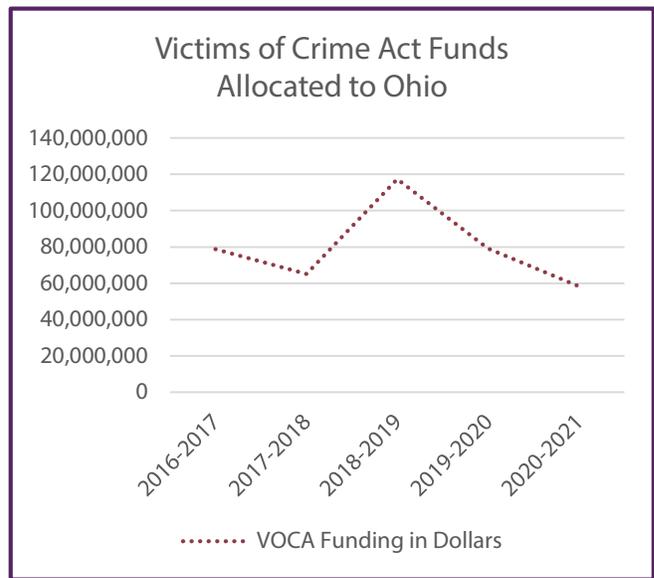
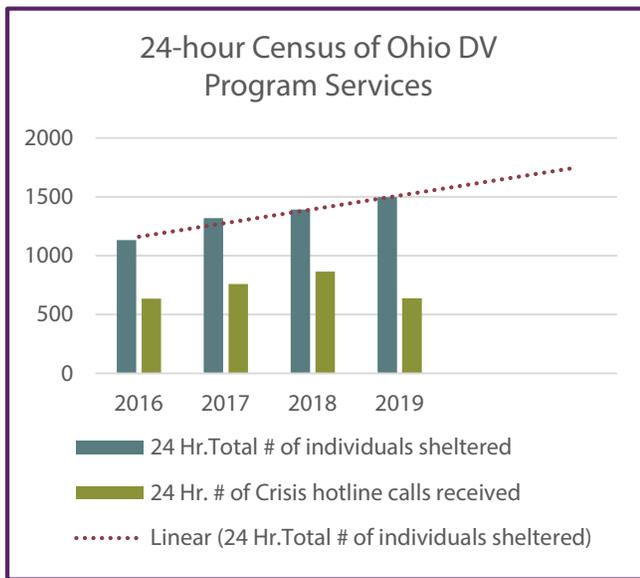
A Dangerous Intersection: The Call for Supporting Families Experiencing Domestic Violence During the COVID-19 Pandemic in Ohio

Amidst a cresting pandemic, more than 70 domestic violence programs responding to families experiencing domestic violence have crisis within a crisis. Emergency response and follow-up services are their business, and they continue to provide life-saving services during these difficult times. While Ohio’s domestic violence programs have a 40-year history of pivoting to keep up with the dramatically changing needs of survivors and their children, they need additional resources to meet their charge under the unprecedented circumstances of the COVID-19 pandemic.

Domestic Violence Services Before the COVID-19 Pandemic

Last year, 75 domestic violence shelter and community-based programs served over 81,369 clients including 12,282 children. More than 9,000 of those survivors and children were also provided safe shelter, using a total of 328,360 bed nights statewide. Programs also provided transitional housing, legal advocacy and support services such as counseling, safety planning, support groups and assistance finding permanent housing. Domestic violence programs answered 97,667 crisis calls last year.

Ohio fully participates in the national 24-hour census survey called DV Counts, which counts people served and those turned away by domestic violence programs in the United States. Last year, Ohio’s programs served 2,640 survivors and sheltered 1,499, but turned away 263 survivors that same day due to inadequate capacity.¹



Before the COVID-19 pandemic, the needs of families living with domestic violence already far outpaced the resources. Meanwhile, a critical funding source for victims’ services was significantly reduced last year and the Ohio Attorney General’s Office warns deeper cuts are coming.

¹ National Network to End Domestic Violence, 2019 - https://nnedv.org/wp-content/uploads/2020/03/Library_Census_2019_-OH.pdf

COVID-19-Related Challenges

The COVID-19 pandemic has introduced a new health crisis within the epidemic of family violence in our state. Many domestic violence shelters urgently need resources to reduce contagion, modify their physical shelters and innovate methods of reaching families in order to protect the health and safety of the families they serve. A survey of 56 programs conducted April 9 through April 15 confirmed the current challenges are daunting:

Physical distancing and anti-contagion efforts are currently nearly impossible.

On a given day, Ohio's shelters are likely to have about 1,500 survivors and their children in their facilities. In these settings, bedrooms, kitchens, bathrooms and living areas are often shared by families; in 88% of shelters bathrooms are shared. It is virtually impossible to segregate survivors in group shelters and prioritize others for more ideal isolated options (hotels, apartments) without testing resources.

As many as 18 people share one bathroom in domestic violence shelters in Ohio.

Fear of infection is now a possible barrier to help seeking.

Early anecdotal data from New York² and Ohio indicates that some survivors may not seek shelter due to fear of contracting the virus in communal living settings. A lack of resources in domestic violence programs should not be a reason for survivors to make such perilous choices.

Resources are needed to adapt service models.

Shelters lack the resources and technology to provide remote safety planning, advocacy and support services to survivors and to sustain online schoolwork of children residing in DV shelters. They do not have adequate resources for transportation for those clients, and the ability to feed those families off site. They also need ways to feed families in shelter without the communal cooking of meals.

The specialized domestic violence workforce is impacted.

The health and safety of the shelter workforce is impacted. Without adequate PPE, sanitizing products and fair compensation, some workers are leaving their domestic violence jobs for employment with other agencies that provide protection and competitive hazard pay (e.g. \$25/hour in Central Ohio homeless shelters). Fifty-nine percent (59%) of surveyed programs are experiencing disruptions in staffing due to resignations or staff illness. Almost all programs currently lack resources to create hazard pay, for paid benefits under the Emergency Family & Medical Leave Expansion Act and the Emergency Paid Sick Leave Act, or to pay overtime.

95% of domestic violence programs cannot obtain PPE for their staff and clients.

Private revenue streams are interrupted.

Numerous fundraising events have been canceled, many charitable payroll deductions have been suspended due to mass unemployment, and United Way and other private gifts are projected to reflect substantial cuts. In addition, the Victims of Crime Act funding (VOCA) was already significantly reduced in the last funding cycle and the Ohio Attorney General's Office is advising of deeper cuts in the upcoming cycle.

² Dzhanova, Yelena. "NY Domestic Violence Programs See Client Numbers Decline as Coronavirus Traps Survivors at Home." CNBC, CNBC, 1 Apr. 2020, www.cnbc.com/2020/03/31/new-york-coronavirus-domestic-violence-programs-see-decline-as-disease-spreads.html.

What our Programs Need Now

Ohio's 75 domestic violence shelters and programs vary in physical shelter layout, capacity, continuum of services, budget, community partnerships and resources, and geography. They need flexible resources to meet their unique needs. Fifty-six (56) programs surveyed confirmed they have these pressing needs to safely support families fleeing domestic violence:

Shelter and Housing Resources

- **Housing** - Flexible emergency funding for hotel vouchers to provide alternative safe shelter and rental assistance to allow sheltered families to move on and make room for more emergency shelter for new families
- **Food** - Funding to feed families in shelter without communal cooking and food services for families sheltered off site
- **Experts** - Epidemiological assistance to help programs estimate the impact on shelter populations and staff and advise on shelter modifications
- **Building modifications** - Funding for shelter modifications (i.e. sleeping and bathroom trailers on site, other low cost modifications to allow for de-congregating shelters)
- **Sanitization** - Funding for routine professional sanitization of program facilities
- **Media** - Media coverage to assure the public that safe shelter is still an option for survivors and their children during this pandemic

Personnel

- **Payroll** - Funding for hazard pay, overtime pay, paid benefits under the Emergency Family & Medical Leave Expansion Act and the Emergency Paid Sick Leave Act to support and retain the specialized domestic violence workforce in Ohio (and to ensure compensation at the same rate as homelessness programs). Seventy-five percent (75%) of programs surveyed reported Hazard Pay as *very* important and one of their three top needs. Half the programs also need funds for contract staff to help address increases in hotline calls and shelter requests.
- **Testing/Vaccines** - Inclusion of DV program staff and survivors living in communal shelter settings among priority populations for COVID-19 testing and vaccinations
- **Child Care** - Explicit identification of domestic violence program staff as essential workers qualified for priority Pandemic Child Care slots

Materials, Supplies and Technology

- **PPE** - Funding for and access to acquire PPE, sanitizing stations, equipment and supplies
- **Technology** - Technology for remote services and e-learning for children in shelters (laptops, hot spots, cell phones, etc.)
- **Child supplies** - Activity supplies for children confined to shelters or their bedrooms during shelter stays
- **Gift cards** - Support for unanticipated needs of families and programs
- **Supply chain access** - Resources and supply chain access to ensure an adequate supply of groceries, diapers, formula, thermometers, oxygen tanks and pulse/oxygen monitors, Pedialyte, Gatorade, toilet paper, paper products, etc.



Actions Already Taken

ODVN and our statewide domestic violence community have a rich history of leadership alongside our state's public health partners. We remain committed to working to stop the spread of COVID-19 virus in our shelters and programs. To help member programs, adapt to the developing situation, ODNV:

- Identified and provided a limited emergency pool of funds for alternative shelter
- Provided guidance on social distancing and disinfection specific to housing programs
- Encouraged coordination with local public health districts, emergency management agencies and points of contact within their local continuum of care for housing and homelessness
- Shared announcements of emergency funding opportunities (e.g. COHHIO \$10,000 grants)
- Provided technical assistance and resources on establishing and implementing new COVID-19-specific HR policies and leave options
- Created a COVID-19-specific model response protocol and suite of tools that advocates can use to help DV survivors plan for medical emergencies, hospitalizations, establishing power of attorney, parent-child separations or interrupted contact between program and adult survivor
- Offered technical assistance on providing mobile advocacy and virtual programming
- Created three ongoing weekly peer support meetings with DV Program Executive Directors, Legal Advocates and Child/Youth Advocates and bi-weekly support meeting for Prevention/Outreach Advocates.

Summary

The Ohio Domestic Violence Network is watching the pandemic unfold in the lives of domestic violence survivors and their children and our member programs that assist them. We do not know what lies ahead. Anecdotal evidence suggests that violence may be increasing. In our current tracking period for fatalities, the number of fatal incidents in the past ten months have already surpassed last year's twelve-month total. A Columbus prosecutor and the Columbus Division of Police both recently sounded the alarm after three domestic violence homicides in three weeks in March and a significant increase in police calls.^{3 4} National media outlets are also documenting spikes in domestic violence homicides.⁵ While we do not know what is next, we do know that our programs need resources to safely respond to families in danger today and those that may come in a surge or a resurgence of the pandemic in the coming weeks.

Ohio's domestic violence programs have articulated straightforward and urgent needs. No survivor of domestic violence, nor any worker in a domestic violence agency, should fear a life-threatening infection in order to come to our programs. The close quarters of our shelters pose a unique and critical risk for COVID-19 contagion. Our programs are responding to families who are already in harms' way. They deserve urgent and flexible resources to do what they do best: manage a dangerous crisis and keep families safe.

³ **Columbus Attorney Raises Concerns About Spike in Domestic Violence Homicides**, WOSU Public Media, March 30, 2020 - <https://radio.wosu.org/post/columbus-attorney-raises-concern-about-spike-domestic-violence-homicides#stream/0>

⁴ **Columbus Police See Increase in Domestic Violence During Stay At Home Order**, ABC-6, April 14, 2020 - https://abc6onyourside.com/news/local/columbus-police-see-increase-in-domestic-violence-calls-during-stay-at-home-order?fbclid=IwAR36UyRIW77ptHtv9_2vS6H0tAhRn6G7SDuPbwHdXfram_AhP58E_2AohzM

⁵ **As Nation Stays Home, Early Indicators Suggest Rise in Domestic Violence Killings**, HuffPost, April 12, 2020 - https://www.huffpost.com/entry/increase-domestic-violence-killings-coronavirus-stay-at-home_n_5e907808c5b63e73d7e38fe7?ncid=engmodushpmg00000003&fbclid=IwAR2ZIDMaYJ8OLgNM1okFZ3iHDzzvAyqDT_j5Tjkl1SGR5ycfmXk1RagpmnE