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Domestic Violence and Health Care Partnerships Compendium of Grantee Innovations (2014-2017)

INNOVATION: HEALTH ADVOCATE

Grantee Spotlight: Jenesse Center, Inc. & Watts Health Care Corporation

Jenesse and Watts worked partnered to reform the ways they define wellness and address domestic and intimate partner violence for the scores of survivors who are often left on the margins of service delivery in the United States. They came together to combine resources and collectively enhance services for survivors and families impacted by DV. Understanding that DSV is a public health and social justice issue, they created coordinated and responsive cross sectional approaches in addressing the comprehensive needs of survivors and families impacted by lifelong trauma and violence.

They set out to screen and identify South Los Angeles patients for DV, and train service providers in both the healthcare and DSV advocacy fields to have enhanced conversations with patients regarding their exposure to violence and its impacts on health and wellness. As the work unfolded and the true extent of needs revealed itself, they realized their model for integrating healthcare and DSV advocacy could literally save lives, lead to healing, and address disparities that have been issues in both fields for generations.

Jenesse implemented a permanent Health Advocate model, as part of their Family Services Department-providing client support, case management and behavioral health. The Health Advocate is Jenesse's go-to person and liaison with in-house staff and external partners. Responsibilities include coordinating the health assessment form for all new clients, onsite DV and health expert, developing inter-agency referral protocols, educating and training staff, and creating a culture of health and wellness as a part of the overall healing process for survivors and their families.

Through their partnership, they shifted the paradigm and changed the trajectory of patients and clients impacted by DSV, and they experienced many promising signs of success. They observed women who accessed healthcare services while being oblivious to the presence of a terminal illness in their bodies; and survivors making necessary transitional shifts from debilitating depression to becoming self sufficient and in some causes extroverted entrepreneurs. They saw providers move from handling patients in an impersonal manner to being bold and savvy enough to spot frequently overlooked signs of abuse and connect patients directly to a behavioral health professional or a reliable partner for services. Lastly, their aggregate data over 3-years made an irrefutable argument in favor of integrated service delivery and committed partnerships between the healthcare and DV fields.

The [Jenesse and Watts mini-documentary](#) highlights cross-sector approaches and the provision of culturally responsive, integrated services in underserved communities.

INNOVATION: BUDDY SYSTEM

Grantee Spotlight: WEAVE & Sacramento Native American Health Center

WEAVE and the Sacramento Native American Health Center (SNAHC) engaged in an ongoing learning process to build and strengthen their partnership and build individual and organizational capacity. Together they provide culturally responsive services in a targeted native community, and have successfully integrated medical and behavioral health systems at SNAHC by implementing:

- working teams within the partnership;
- structures for cross training;
- an inter-agency referral system to improve access to health and advocacy services.

Cross-training structures included advocacy staff training SNAHC on DSV, health impacts and vicarious trauma, while also providing guidance on developing workplace policies for employees experiencing DSV. They created a Buddy System model to help improve among staff accountability and shadowing opportunities in order to overcome staff turnover as a challenge to the partnership. In the Buddy System, each project team member is paired with a corresponding peer at the partner agency to ensure ongoing communication. This model helped to enhance relationships, expedite the on-boarding of new hires, groom champions.

[WEAVE/SNAHC digital story](#) highlights partnership successes, innovative strategies and the provision of culturally responsive services for native communities.

INNOVATION: YOUTH ORGANIZING

Grantee Spotlight: Golden Haven for Youth, Haven Women's Center, California Adolescent Health Collaborative & Golden Valley Health Centers

The Golden Haven for Youth project partnered with the California Adolescent Health Collaborative, Haven Women's Center, and Golden Valley Health Centers to address adolescent relationship abuse (ARA), also referred to as teen dating violence, in Stanislaus County. By bridging DSV and healthcare services, they created a comprehensive inter-organizational intervention system to ensure all youth receive routine assessment and referrals as necessary for ARA. This process included cross training at the partner organizations with a focus on reproductive coercion and addressing sexual health concerns.

Students from two local high schools, known as Healthy And Responsible Relationships Troupe (HARRT) joined forces to raise awareness around ARA and promote safe and healthy relationships. HARRT worked under the guidance of DSV and healthcare mentors to enhance their knowledge and leadership skills in addressing ARA, advocating policy change, and increasing student awareness on campus. HARRT leaders participated in comprehensive training on issues like technology for social change, strategy in activism, cyberbullying, health impacts of ARA, and sex trafficking of minors, and also created community-based awareness and prevention campaigns.

The youth leaders brought enthusiasm, fresh perspective, and first-hand experience to issues most pressing for adolescents in their community, as well as immense energy for grassroots, campus-wide organizing, peer education and awareness-raising. Ultimately, the program helped build leadership skills and groom budding champions.

The [HARRT PSA video](#) highlight adolescent relationship abuse, and educating on healthy and unhealthy relationships and different types of abuse.

INNOVATION: WOMEN'S HEALTH COACH

Grantee Spotlight: Family Health Centers of San Diego & YWCA of San Diego

The Family Health Centers of San Diego and the YWCA & Becky's House partnered to better address and educate women on health, well-being, and safe and healthy relationships by placing a Women's Health Coach (WHC) in the clinical setting. The WHC ensures routine assessment and effective response for all female patients receiving women's health, family planning and OB services. The WHC provides universal education on safe and healthy relationships, and also serves as the liaison to other resources like insurance enrollment and referrals to behavioral health and advocacy services. By placing the WHC in the clinical setting and embedding WHC roles in patient visits, this has ensured better patient flow, meaningful interaction and confidentiality. Education provided and assessment is in the electronic health record to easily pool important patient data and outcomes.

As a result, the partnership saw an increase in referrals for women's health services, including preventative wellness exams from the emergency shelter, and improved response to DSV for women seeking reproductive health and prenatal services. This innovation also provided opportunities for cross training between DV advocates and health care providers to ensure both teams are prepared to better address and respond to DSV and survivor.

INNOVATION: TECHNOLOGY-BASED RESPONSE

Grantee Spotlight: YWCA of Sonoma County, Alliance Medical Center, Legal Aid & the Family Justice Center

The YWCA of Sonoma County, Alliance Medical Center, Legal Aid and the Family Justice Center have partnered to provide culturally responsive medical care and advocacy support services in Sonoma County. They are utilizing teleconferencing via Skype to better address the needs in their rural community by offering readily accessible advocacy and support. Through their collaboration, they provide confidential and culturally appropriate DV counseling via tele-conferencing with a trained DV advocate from the YWCA, who is stationed at the Family Justice Center. Their partnership is creating networks, care systems and advancing the integration of DV, healthcare and other social service sectors in their County.

Since transportation is a common barrier to accessing services in Sonoma County, the use of technology as a means of providing services to victims of DV has been important in expanding reach, increasing access for survivors as well as their utilization of resources. Their Skype service has been important in reaching their target population as it is extremely difficult for victims of DV living in remote areas to quickly and efficiently access the critical and comprehensive assistance that will lead them to recovery. The partners provide individuals and families with short-term and long-term DV crisis services. Examples of services provided through Skype include: referrals to bilingual lawyers; emergency shelter services; housing assistance; therapy for victims and all family members; emergency financial aid; court accompaniment; job training programs assistance; long-term safety planning; and, transportation to appointments.

INNOVATION: CO-LOCATED ADVOCATE

Grantee Spotlight: Kaiser Permanente Antioch Medical Center & STAND! for Families Free of Violence

By placing an advocate in the clinic setting, partners are improving immediate response to DSV. The co-located advocate is an extension of the clinical care team strengthening the provider-advocate relationship and promoting health and safety for patients disclosing abuse during clinical visits:

- Identification rate of patients experiencing DSV increased by 50%
- 10-fold increase in the number of successful referrals made for advocacy services
- Decrease in survivor utilization of emergency department visits by 50%

“Teaming with [our co-located advocate] is beneficial because of the depth she brings to referrals and resources. When someone discloses IPV, she provides them with a sense of comfort and responds with compassion. I really appreciate having the ability to team with her whenever I encounter someone experiencing IPV, and I know the emergency department staff finds her presence, knowledge, and assistance invaluable.”

—Social Worker at Kaiser Permanente Antioch Medical Center

Learn more about the [co-located advocate model](#)

INNOVATION: MONTHLY HEALTH CELEBRATION

Grantee Spotlight: Women’s Health Care Clinic, Los Angeles Biomedical Research Institute at Harbor-UCLA & Interval House

The Monthly Health Celebration model creates a unique platform for integrating health education in the DSV advocacy setting. This model improves access to accurate health information and streamlines direct linkages to healthcare for survivors. Celebrations provide a fun, positive and empowering circle for women to gather, share and learn about health and wellness in a safe and intimate setting. As a result, partners saw remarkable increases in access, survivor engagement, and healthcare utilization.

Learn more about how to adopt the [Monthly Health Celebration model](#)

INNOVATION: PROMOTORA PROGRAM

Grantee Spotlight: The Children’s Clinic “Serving Children and their Families” & Su Casa

Through the Promotora model, patients and survivors self-engaged in a leadership role to provide education in their native languages, within their local communities, resulting in continued empowerment and the revival of hope. By reigniting hope and a sense of purpose to empower others and give back, survivors were able to create a platform for healing, education, proactivity and most importantly, community support.

“One of our patients who completed the Promotora training in order to promote prevention of intimate partner violence in her community presented six times reaching over 500 people in just one month! She gathered the support of other community members making an even bigger impact. As I remind myself of her story, I can only look back in admiration of her resilience and ability to do something so great from what was a tragic experience in her life.”

—Luz Garcia, Community Worker, The Children’s Clinic

Learn more about the [Promotora model](#)