

NETWORK NEWS



The comprehensive resource on domestic violence

SPRING 2011

A PUBLICATION OF THE OHIO DOMESTIC VIOLENCE NETWORK

What is Reproductive Coercion?

By Laura Schumm, ODVN Project Connect Coordinator

"I was on the birth control, and I was still taking it, and he ended up getting mad and flushing it down the toilet, so I ended up getting pregnant.

I found out that [before this] he talked to my friends and he told them that we were starting a family. I didn't know that. I didn't want to start a family. I wanted to finish school."

As a part of Sexual Assault Awareness Month it is important to highlight a hidden form of sexual and intimate partner violence known as reproductive coercion. Sexual and intimate partner violence is linked to adverse reproductive healthcare outcomes and there is a substantial body of research describing the effects of intimate partner violence (IPV) on women's' and adolescents' health. One study found that adolescent girls who experienced IPV were 2.5 times more likely to have forgone health care.¹ Another found that adolescents who experienced forced sexual intercourse were more likely to have engaged in binge drinking or attempted suicide.² Why aren't healthcare providers routinely and consistently asking questions about IPV, sexual violence, and reproductive coercion?

Birth Control Sabotage, Pregnancy Pressure and Pregnancy Coercion

The Family Violence Prevention Fund defines reproductive coercion as behaviors that a partner uses to maintain power and control in a relationship related to one's reproductive health and expands the continuum of power and control used by batterers.

Reproductive coercion can be present in same sex and heterosexual relationships and examples include: explicit attempts to impregnate a female partner against her will, coercing a partner to engage in unwanted sexual acts, forced non condom use and intentionally exposing a partner to sexually transmitted infections (STI)/HIV. Reproductive coercion also includes birth control sabotage, pregnancy pressure and pregnancy coercion.

Birth Control Sabotage is an active interference with contraceptive methods by someone who is, was, or wishes to be involved in an intimate or dating relationship with an adult or adolescent. Examples of birth control sabotage include:

- Hiding, withholding, destroying, or refusing to pay for a partner's birth control pills;
- Pulling out vaginal rings or intrauterine devices;
- Breaking a condom on purpose;
- Accusing her of cheating if she asks to use contraception.

Pregnancy Pressure involves behaviors that are intended to pressure a partner to become pregnant when she does not wish to be pregnant. These behaviors are expressed verbally, physically or in a combination. Examples include:

- "I'll leave you if you don't get pregnant;"
- "I'll have a baby with someone else if you don't become pregnant;"
- "I'll hurt you if you don't agree to become pregnant."

Reproductive Coercion

(Continued from page 1)

Pregnancy Coercion involves threats or acts of violence if a partner does not comply with the perpetrator's wishes regarding the decision of whether to terminate or continue a pregnancy.

Examples include:

- Forcing a woman to carry to term against her wishes through threats or acts of violence;
- Forcing a partner to terminate a pregnancy when she does not want to;
- Injuring a partner in a way that she may have a miscarriage.

How does this affect a woman's reproductive health?

Women, and specifically teen girls, experiencing IPV are at a higher risk for experiencing one or more forms of reproductive coercion, thereby increasing her risk of having an unintended pregnancy, rapid repeat pregnancies, exposure to STI/HIV, and voluntary or coerced abortions. Experiencing IPV and reproductive coercion also puts a woman at higher risk of mental health issues, disordered eating, suicidality, and substance abuse. Teen girls are more likely to report early sexual activity, multiple partners, and often do not recognize sexually coercive behavior as sexual assault.

- Adolescent girls in physically abusive relationships were 3.5 times more likely to become pregnant than non-abused girls.³
- Among teen mothers on public assistance who had experienced recent IPV, 66% disclosed birth control sabotage by their partner.⁴
- The risk of being a victim of sexual or intimate partner violence in the past year was nearly 3 times higher for women seeking an abortion compared to women continuing their pregnancies.⁵
- Adolescent mothers who experienced physical partner abuse within three months after delivery were nearly twice as likely to have a repeat pregnancy within 24 months.⁶
- Men who perpetrated IPV in the past year were more likely to report:
 - ⇒ Inconsistent or no condom use during vaginal and anal sexual intercourse;
 - ⇒ Forcing sexual intercourse without a condom.⁷

Additional considerations

Traditionally, prevention and intervention of IPV, teen pregnancy and HIV have been done in silos and with little collaboration among agencies. However, if adolescent girls in physically abusive relationships are 3.5 times more likely to become pregnant, educating her on abstinence or consistent condom usage is useless if her partner is forcing her to have sex without some form of birth control. If teen mothers that experience physical violence within 3 months of delivery are twice as likely to have a repeat pregnancy, giving her condoms or a prescription for "the pill" upon delivery doesn't make sense if she is afraid of what her partner will do to her if he finds her with birth control. It also doesn't make sense to look at that teen as if she is irresponsible in her choices if the "choice" to have a child is coerced.

If men who perpetrated IPV report that they inconsistently use condoms and/or force intercourse without a condom, is it enough to send a girl home with condoms after she is tested for an STI if the choice to use them is out of her hands? It also doesn't make sense to simply teach men and women how to put on a condom without teaching them how to negotiate the usage of condoms or what a healthy relationship looks like. If women, who are fearful of their partner and have high STI knowledge, are using condoms more inconsistently than non-fearful women who have a low STI knowledge, is it enough to educate women and men on STI's and how they are contracted?

SAVE THE DATE!

The Ohio Alliance to End Sexual Violence
2011 Sexual Violence Prevention Conference
will be held on **June 29 and 30, 2011**
in Dublin, Ohio.

The topic will be focused on engaging youth.

More details will be announced soon!
Contact Jasmine Finnie at jfinnie@oaesv.org for
more information.

Reproductive Coercion

(Continued from page 2)

Providing comprehensive care to women and girls experiencing IPV and/or reproductive coercion is critical. The same is true with teen pregnancy prevention and STI/HIV prevention education. When having these conversations, it is important to address the role that IPV and reproductive coercion plays as well as education on what a healthy relationship looks like. Furthermore, these conversations should include men and boys and their role in preventing IPV, premature fatherhood, spread of STI/HIV and developing healthy relationships.

Building one's knowledge of reproductive coercion is the beginning to dismantling the silos we have built for such highly intertwined issues. Take the first step and learn more by visiting Family Violence Prevention Fund website at www.endabuse.org or www.knowmoresaymore.org, or contact Laura Schumm at ODVN, at 614-781-9651 or lauras@odvn.org for more information on Project Connect.

References:

1. Miller E. Intimate partner violence and health care-seeking patterns among female users of urban adolescent clinics. *Maternal, Child and Family Health*. Published online: 17 September 2009; DOI 10/1007/s10995-009-0520-z.
2. Behnken MP, Le YC, Temple JR, Berenson AB. Forced sexual intercourse, suicidality, and binge drinking among adolescent girls. *Addictive Behaviors*. 2010; 35 (5): 507-509.
3. Roberts TA, Auinger MS, Klein JD. Intimate partner abuse and the reproductive health of sexually active female adolescents. *Journal of Adolescent Health*. 2005; 36: 380-385.
4. Raphael J. Teens Having Babies: The unexplored role of domestic violence. *The Prevention Researcher*. 2005; 12 (1): 15-17.
5. Bourassa D, Berube J. The prevalence of intimate partner violence among women and teenagers seeking abortion compared with those continuing pregnancy. *Journal of Obstetrics & Gynecology Canada*. 2007; 29 (5): 415-423.
6. Ranieri LB, Wiemann CM. Social ecological predictors of repeat adolescent pregnancy. *Perspectives on Social and Reproductive Health*. 2007; 39 (1) : 39-47.
7. Raj A, Reed E, Miller E, Decker MR, Rothman EF, Silverman JG. Context of condom use and non-condom use among young adolescent male perpetrators of dating violence. *AIDS Care*. 2007; 19 (8): 970-973.



The comprehensive resource on domestic violence

Mission Statement:

The Ohio Domestic Violence Network advances the principle that all people have the right to an oppression and violence free life; fosters changes in our economic, social and political systems and brings leadership, expertise and best practices to community programs.

ODVN Staff:

Nancy Neylon, Executive Director
Tana Carpenter, Resource & Technology Coordinator
Rebecca Cline, Prevention Programs Director
Nancy Grigsby, Legal Assistance Program Director
Becky Mason, Executive Assistant
Tonia Moultry, Training and Technical Assistance Program Director
Krystal Martin, Outreach Coordinator to Underserved Populations
Rachel Ramirez-Hammond, Training Coordinator
Laura Schumm, Project Connect Coordinator
Jo Ellen Simonsen, Prevention Trainer and Technical Assistant
Amy Smith, Finance Director
Kalitha Williams, Prevention Programs Coordinator

ODVN Board of Directors:

Melinda Swan, *Board Chair*, The Ohio State University
Lisa Eschleman, *Board Chair Elect*, Ohio Environmental Review Appeals Commission
Malinda Gavins, *Board Treasurer*, Sojourner House
Deborah Brooks, *Board Secretary*, YWCA of Greater Cincinnati

Carole Beaty, Safer Futures
Shawna Bosse, OhioHealth
Todd Deavers, Net Jets
Kathy Ezawa, The Domestic Violence Shelter
James B. Hadden, Porter, Wright, Morris & Arthur
Lynn Jacquot, YWCA Toledo Battered Women's Shelter
Linda Johaneck, Domestic Violence Center
Bridget Mahoney, Citizens Against Domestic Violence
Cheryl Prusinski, Deaf Women Against Violence Everywhere
Hon. Edmund Sargus, US District Court, Southern District of Ohio
Patti Schwarztrauber, Artemis Center
Jim Slagle, Attorney at Law
Sandy Theis, Theis Research & Consulting
Tequila Whitman-Pickens, Verizon
Sally Zimmerman, Every Woman's House



Spotlight on Local Programs ***The Cocoon Shelter, Bowling Green, Ohio*** ***Transforming Services to Battered Women*** *By: Michelle Clossick, Executive Director*

Transforming services to battered women; increasing access to services and health care; improving screening processes by health care providers and advocates; increasing understanding of sexual coercion and reproductive health as control tactics in the context of domestic violence; partnering with our local health department; technical assistance from ODVN and the Family Violence Prevention Fund: these were the reasons why Project Connect seemed too good to pass up, even though it is an unfunded pilot project in our community.

We are in the early stages of implementing the project in Wood County and already the transformation has begun. We have partnered with the Wood County Health Department, PathStone, Victims Services of Behavioral Connections, and the Children's Resource Center. Ironically, prior to Project Connect, we had not met together as a group. Simply by partnering, we have increased our reach to better serve teens, the Hispanic community, victims seeking advocacy and shelter services, and adults seeking prevention, treatment, and reproductive health services at our local health department.

In a few short months and over just a few days of meetings, we have implemented the early stages of systems change. Prior to this project, residents at the Cocoon Shelter would often wait 4-6 weeks to get an appointment at the health department. This resulted in a number of trips to the emergency room as symptoms would worsen and for low income women, this was the only way to get treatment without the long wait. Now, we have a process in which we contact nursing staff directly, get health information and resources quickly from nurses who understand domestic violence, and address urgent issues/care needs in a timely manner. This small change has been transformative and prevented trips to the ER for routine care. In addition, the Health Department immediately implemented changes in their protocol to ask questions about sexual coercion and connect patients with advocacy support services. They posted information about healthy relationships that has resulted in conversations being initiated about support needs around sexual assault and domestic violence. They further implemented a process in which they call an advocate while patients are still at the Health Department so

an advocate can immediately provide information, support, and go meet with the patient if desired.

For victim services and shelter staff, it heightened our awareness of medical needs and issues related to sexual coercion and reproductive health that might underlie the need for our services. Oftentimes, issues of sexual assault and sexual coercion take longer to be exposed in serving victims of domestic violence as these are the issues that often cause the most shame, embarrassment, or isolation. In many cases, they might not even know these are part of the abuse, especially if they occurred in the context of marriage. For our staff, it has heightened our awareness that we need to do better screening for treatment needs related to sexually transmitted infections, pregnancies, risk of pregnancy that have resulted from rape, and for the overall impact of domestic and sexual violence on health. We are in the process of formalizing a more effective screening process. However, simply increasing our confidence in talking about these issues, increasing our self-awareness of biases and values around these issues and opening our eyes to how many survivors might need this information has increased our capacity to have these conversations with those we serve.

We have gained a better understanding of our role in increasing access to services to support good health as a part of healing from the impact of domestic violence. Reproductive coercion is often a part of the continuum of control women experience. We are working to better identify these issues and connect with key resources. We are working to implement procedures so all women are screened at intake for unwanted/forced sex and birth control sabotage so we can connect victims with emergency contraception to help prevent pregnancy if needed.

According to the Family Violence Prevention Fund, 59% of abused women report having poor health and 25% report birth control sabotage and/or forced sex/pregnancy as a part of the abuse. Domestic violence programs have to be a part of the solution. Go to the Family Violence Prevention Fund website, http://www.endabuse.org/section/programs/health_care and start the transformation in your community. Don't wait.

If you would like to make a tax deductible donation to Ohio Domestic Violence Network, please visit our website, and click on the "Donate" button or you can mail a check to the address below. You can also become a member by visiting our Membership page on the website or contact Becky Mason at 614-781-9651, Ext. 221 or by email at rebeccam@odvn.org. Thanks for your support!

Ohio Domestic Violence Network

4807 Evanswood Drive, Suite 201

Columbus, OH 43229

Phone: 614-781-9651

1-800-934-9840 (toll-free)

614-781-9652 (fax)

Email: info@odvn.org

Website: www.odvn.org

From “What’s Wrong with You?” to “What Happened to You?” Trauma-Informed Care: Best Practices and Protocols for Ohio’s Domestic Violence Programs

A New Manual Written by Sonia Ferencik and Rachel Ramirez-Hammond

Since May of 2010, ODVN has been working on developing a new resource for domestic violence programs on making services more trauma-informed. After months of hard work, the 140 page manual and accompanying webinar is now available on our website at www.odvn.org.

The manual, written by advocates for advocates, provides an easy-to-understand explanation of trauma and the ways in which trauma impacts a survivor’s behaviors, thoughts, feelings, and actions. By understanding trauma as a normal response to an abnormal experience and learning effective ways to support survivors in recovering from trauma, domestic violence programs can further improve and enhance the services we provide and the care we offer. The manual outlines 16 best practices to incorporate into organizations, and also offers detailed protocols on providing trauma-informed services such as answering hotline calls, doing intakes and exit interviews, facilitating support groups, safety planning (including emotional safety planning) and providing parenting support to survivors. The manual also has important information on vicarious trauma and strategies for assisting advocates with their self-care. The appendices include an extremely helpful trauma-informed checklist developed by the National Center on Trauma, Domestic Violence and Mental Health, a list of additional resources, a comparison between the trauma-informed care model and the empowerment model used by most domestic violence programs, suggested best practices for child survivors of domestic violence, and a case study to help individuals and programs identify ways to become more trauma-informed.

The manual is available for all interested individuals on our website in PDF version, free of charge. In addition, the website features a 30 minute video that presents information on why the manual was developed, what is in the manual, and ways in which the manual can be used in your organization. If you do use the manual as an individual or in your organization, we are especially interested in your feedback on the manual. The website also features a short evaluation for you to do this.

In February of 2011, all ODVN member domestic violence programs received a hard copy of the manual and information about accessing the manual electronically. Initial feedback has been extremely positive, with several advocates, supervisors and executive directors reporting

that this resource will be a great tool for their staff. Programs across the state have already begun to incorporate protocols and best practices into their staff trainings and have adopted the protocols to guide the services they provide. In addition, training coordinator Rachel Ramirez facilitated two national conference calls with other state domestic violence coalitions on their approaches to providing trauma-informed care, and shared information on this manual with dozens of different states. Rachel has already been approached about presenting on the manual and its development at conferences and trainings, both within Ohio and in other states. This is an exciting time for trauma-informed care and ODVN hopes you find this new tool useful.



If you have any additional questions or are interested in training or technical assistance on trauma, please contact Rachel Ramirez, co-author of the document and ODVN training coordinator, at rachelr@odvn.org or 614.781.9651 extension 222.

Legal Assistance for Victims (LAV) Update

The LAV grant to ODVN from the Department of Justice (DOJ) is moving ahead with full force. After training 70 attorneys and 81 advocates, the program began accepting referrals in January. The project's goal is to fill gaps in legal services to survivors of domestic violence, sexual violence and stalking, with an additional focus to reach out to three underserved groups of survivors: those who are lesbian, gay, bisexual or transgender (LGBT); deaf and hard of hearing; and battered women who are re-entering their communities from jails and prisons whose convictions were related to their victimization. The program also is focused on the *holistic* legal needs of survivors, meaning it can help address many legal issues that survivors are facing in addition to their needs for legal assistance for protection orders, divorce and custody issues.

The need and response has been overwhelming. The program has already accepted 56 cases addressing a wide range of needs, including protection orders, divorce, custody and visitation modifications, immigration, bankruptcy, housing, expungement, consumer/credit issues and employment. ODVN is gratified to see the wide range of legal needs identified by Ohio domestic violence and rape crisis advocates who are clearly doing a holistic assessment of all the barriers facing the survivors they are assisting.

With the clear picture emerging that the grant funds are not adequate for the legal needs in Ohio, ODVN has quickly begun strategizing to raise additional funds and to also secure pro bono commitments from attorneys in Ohio. In March, the incredibly difficult decision was made to hold off on new cases, except for emergencies. As we see how the cases we have committed to start to reach their legal conclusions, ODVN will again take new cases. It is our hope that by then, we also have secured additional pro bono attorneys to help. Already, we have received the pro bono commitment from one attorney who has begun working with the program, and several others have expressed interest.

DOJ requires that attorneys who are compensated with DOJ funds receive training. ODVN will provide its third training for this year, in partnership with the Columbus Bar Association on **April 29, 2011**. If you

know attorneys who may be interested in learning more about domestic violence, sexual violence and stalking and/or possibly participating, they can register for the training by going to <http://www.cbalaw.org/cle/> and clicking on the link for the Institute on Representing Survivors of Domestic Violence, Sexual Violence and Stalking.

For more information about ODVN's legal assistance program, contact Nancy Grigsby at nancyg@odvn.org or at 614-781-9651 ext. 233.

Melinda Taylor Swan Receives Social Justice Award



ODVN is proud to announce that our Board Chair, Melinda Swan, is one of the 2011 recipients of the Corcoran Award from St. Vincent Family Center in Columbus.

St. Vincent Family Center is a family service organization that develops children, strengthens families and sustains communities. The Corcoran Awards are named after the late Monsignor Lawrence Corcoran who dedicated his career to social justice, education and mental health. Ms. Swan was honored at a luncheon in Columbus where she received the Social Justice Award. Melinda has been a long time supporter of ODVN, volunteering her time and expertise by serving on the Steering Committee, then on the Board of Directors. In addition to currently serving as Board Chair, she also serves on the Development and Public Policy Committees.

For most of her adult life, Melinda has worked and advocated on behalf of victims of domestic violence. As a consultant, she has donated endless hours of time and support toward raising awareness of this issue. By profession, Melinda is a marketing and communications expert and over the years, has used her experience and expertise to advocate for victims who often cannot advocate for themselves.

Congratulations Melinda!

PUBLIC POLICY UPDATE

By Nancy Neylon, Executive Director

HB 25 Animal Cruelty: Introduced January 18, 2011 by Rep. Courtney Combs (R-54)

Assigned to Criminal Justice Committee and has had sponsor and proponent testimony.

Includes the protection of companion animals in protection orders, revises the penalties and sentencing provisions for cruelty to animals, requires the psychological testing and counseling of minors convicted of cruelty to animals, requires supervised probation for persons convicted of cruelty to companion animals and removes pit bulls from the definition of vicious dog.

HB 53 Sexting: Introduced January 26, 2011 by Rep. Ron Maag (R-35)

Assigned to Criminal Justice Committee and has had sponsor, proponent and opponent testimony.

Prohibits a minor by use of a telecommunications device from knowingly creating receiving, exchanging, sending, or possessing a photograph showing a minor in a state of nudity.

HB 80 Sexting: Introduced February 1, 2011 by Rep. Connie Pillich (D-28)

Assigned to Criminal Justice Committee and has had sponsor testimony

Creates the crime of “sexting” and prohibits a minor by use of a telecommunication device or other means from knowingly sharing, exchanging, posting, or sending a video, photograph or any other material of themselves or another minor in a state of nudity and adds to the offense “unruly child” for purposes of this legislation. It also defines nudity for these purposes and limits the offense illegal use of a minor in nudity oriented materials or performance to adults 18 and over.

HB 103 Address Confidentiality: Introduced February 15, 2011 by Rep. Kathleen Clyde (D-68) and Rep. Michael Stinziano (D-25)

Assigned to Judiciary & Ethics Committee and has had sponsor testimony.

Establishes an address confidentiality program and maintains voter registration for program participants in

the Secretary of State’s office for victims of domestic violence, sexual assault and stalking. Tier I, II, and III sex offenders are not eligible for the program. The bill adds federal law enforcement officer’s residential and familial information to the exclusion from public records definition to be consistent with other law enforcement officer exclusions.

HB 105 Domestic Violence Housing and Employment Protection: Introduced February 16, 2011 by Rep. Dennis Murray (D-80)

Assigned to Judiciary & Ethics Committee

Allows a victim of domestic violence to take unpaid leave to obtain a protection order, attend criminal proceedings, and meet with a law enforcement officer, prosecutor or counselor. The bill allows a tenant to terminate a rental agreement or remove a co-tenant from the lease with a protection order evicting the co-tenant, allows a tenant to change the locks at the tenant’s expense and requires metropolitan housing authorities to transfer a victim to another unit upon request and prohibits a municipality from charging a victim or landlord for law enforcement response.

SB 13 Unemployment Benefits: Introduced February 1, 2011 by Sen. Joe Schiavoni (D-33)

Assigned to Insurance, Commerce & Labor Committee

Allows an individual to receive unemployment benefits for unemployment related to domestic abuse or compelling family circumstances, and allows an individual to receive unemployment training extension benefits and creates an Unemployment Modernization Review Task Force.

SB 66 Graphic Images: Introduced February 10, 2011 by Sen. Gary Cates (R-4)

Assigned to Judiciary – Criminal Justice Committee

Prohibits a minor by use of a telecommunications device from knowingly creating, receiving, exchanging, sending or possessing a photograph showing a minor in a state of nudity.

This newsletter is funded in part by the U.S. Department of Health & Human Services

ODVN Training Institute—Upcoming Trainings

For more information or to register for a training, please visit our website at www.odvn.org. ODVN is an approved provider of CEUs for social workers and counselors and is a registered training program for the Ohio Advocate Network. If you have questions, contact Rachel Ramirez, Training Coordinator at ODVN, 800-934-9840 or rachelr@odvn.org.

What: *In Little Shoes: Children and Domestic Violence*

This training will address issues related to children and their response to living in an environment where they are exposed to an abusive person. The training will discuss different types of abuse and how they impact children, ways in which a child can be changed by violence in the home, characteristics of batterers as parents and how coercive control impacts parenting of the victim, myths and facts around child exposure to domestic violence, risk and protective factors, how domestic violence can impact development, safety planning with children, and supporting the resilience of children. The training will also focus on ways in which to support the non-abusive parent and assist in healing parent-child bonds damaged by domestic violence.

When: May 6, 2011

Where: Cleveland, Ohio

Cost: \$60 (\$25 members)

What: *Justice Systems Advocacy*

This two-day training focuses on working within the civil and criminal justice systems in partnership with survivors of domestic violence. Experts with extensive experience in the civil and criminal field will provide insider information about both the criminal and civil responses to domestic violence, and useful information on navigating the court system. This information will enable participants to advocate for domestic violence survivors on both the individual and systemic level.

When: June 23-24, 2011

Where: Xenia, Ohio

Cost: \$80 (\$45 for ODVN members)

What: *Responding to Teen Relationship Violence*

This training will focus on how domestic violence advocates can work effectively in their communities to advocate for teens who are victimized by relationship violence as well as creative ways to hold teen perpetrators accountable. Topics include an exploration of how the traditional underpinnings of the domestic violence movement (feminism, empowerment, and anti-oppression) translate to working with teens; how three domains, 1) response to survivors, 2) community accountability/response, and, 3) perpetrator accountability, create a framework for planning, implementing, and evaluating teen relationship violence preventions and interventions; and how community responses such as prevention education, peer responses, engaging men and boys, and social/community norms interplay within the three domains above.

What this training is not: A discussion about implementation challenges related to civil protection orders for teens or how to work with teen perpetrators.

When: July 29, 2011

Where: Mansfield, Ohio

Cost: \$60 (\$25 members)

What: *Advanced Safety Planning*

This ½ day training presents the latest ideas related to safety planning. The training discusses the concept of safety, identifying batterer generated risks and life generated risks, and how to safety plan using victim-defined advocacy. The training will have a special focus on safety planning with survivors of domestic violence who are in contact with their partners, safety planning with children, and integrating empowerment into the safety planning process.

When and where: August 12 in Bowling Green and August 19 in Wilmington

Cost: \$40 (\$15 members)

For more information about any of the above trainings, contact Rachel Ramirez at ODVN.

In Just One Day...

On September 15, 2010, 91% of identified domestic violence programs in the United States participated in the 2010 National Census of Domestic Violence Services. The results were published in the National Network to End Domestic Violence (NNEDV) report: Domestic Violence Counts 2010. A 24-hour census of domestic violence shelters and services at www.nnedv.org.

Nationally, 82% of programs reported higher demand for services. As communities continue to experience job loss and decreased community resources, 1,441 programs reported a rise in demand for services, while at the same time, 1,351 (77%) programs reported a decrease in funding.

Now more than ever, victims of domestic violence are in need of support and help. Programs reported that survivors who entered shelters or called their hotlines were experiencing an increase in the severity of violence and lethality.

For the fifth consecutive year, NNEDV conducted the one-day, unduplicated count of adults and children seeking domestic violence services in the U.S., documenting the number of individuals who sought services, the types of services requested, the number of service requests that went unmet because of lack of resources, and the issues and barriers that domestic violence programs are facing as they strive to provide services to victims of domestic violence.

On September 15, 2010...

3 women were *murdered by their intimate partners.*

36 babies were *born to mothers living in shelters.*

3 men *committed suicide*, one after murdering his wife, another after a failed attempt to kill his girlfriend, and the third during a police standoff while holding his partner hostage.

391 survivors working with local domestic violence programs *started new jobs.*

Services provided by local programs in Ohio include:

- Individual Support or Advocacy;
- Emergency Shelter (including hotels/safe houses);
- Court/Legal Accompaniment/ Advocacy;

Here is the National and Ohio survey information.

Victims Served in One Day	
National	Ohio
70,648	2,007

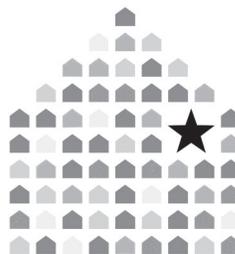
Hotline Calls Answered	
National	Ohio
23,522	769

Unmet Requests for Services	
National	Ohio
9,541	244

Educated in Prevention and Education Trainings	
National	Ohio
30,134	935

- Children’s Support or Advocacy;
- Transportation;
- Group Support or Advocacy;
- Transitional Housing; and,
- Financial Skills/Budgeting.

As the country weathers the economic downturn, victims of domestic violence face increasing barriers and difficulties in accessing safety. Despite the challenges, domestic violence programs continue to be places where survivors can turn for help. Please support your local shelter!



**NATIONAL NETWORK
TO END DOMESTIC
VIOLENCE**

CHECK IT OUT!

From ODVN's Resource Center

Materials from ODVN's Resource Center may be borrowed for free by ODVN members and Ohio residents. For more information or to borrow resources from our clearinghouse, please contact Tana Carpenter, 1-800-934-9840, Ext. 224.

In Their Own Words: Domestic Abuse in Later Life

This 2-DVD set uses the voices of older victims to facilitate a dialog among a range of professionals about the dynamics of abuse, the barriers these victims have to overcome to live free from abuse, and interventions and potential collaborations that may be effective in such cases.

In addition to individual segments with victims, family members, victim service providers, and allied professionals, the DVDs include a montage of victims and advocates speaking out that is designed for use by policymakers. It also includes an interactive role play between a parish nurse and an adult daughter caring for her father that is intended to help professionals recognize abusers' justifications for elder mistreatment.

The accompanying training guide provides background on the victims and discussion questions targeted at a variety of professional audiences. The videos are Closed and Open Captioned.

Publisher: U.S. Department of Justice-Office for Victims of Crime

Format: DVD only

Length: Individual Stories-44:40 Minutes/Topical Segments & Workshop- 44:40 Minutes

Year Produced: 2008

The Fourth R: A Relationship-Based Curriculum for Grade 9

This curriculum consists of lessons that meet the Ontario Ministry of Education's learning expectations for grades 8-9 health education and grades 9-12 English, and the outcomes for other courses in other provinces. The program is taught in the classroom, using a thematic approach to reduce risk behaviors including: violence/bullying, unsafe sexual behavior, and substance abuse. Importantly, many of these adolescent risk behaviors overlap because they occur in the context of relationships. The Fourth R program addresses these adolescent risk behaviors by focusing on relationship goals and challenges that influence their decision-making.

In addition to the classroom component, the Fourth R seeks to involve the school and community in delivering positive messages to youth. Teachers are engaged through the delivery of the program. Students are engaged through active learning, peer mentoring, and role modeling of appropriate behaviors. Parents are engaged through outreach and communication about the program. Finally, these strategies build bridges between community agencies and the school community to increase access to resources and services for youth.

Publisher/Author: The Fourth R/ David A. Wolfe, PhD.

Format: Curriculum (Multiple Pieces)

Year Produced: 2006

Save the Date

September 22 & 23, 2011

Statewide Conference on Women Who Use Force

Authors of the Turning Points Curriculum (see below), Laura Connelly and Melissa Scaia, will be coming to Columbus to provide training on the curriculum.

Mark your Calendars and watch for more details!

Turning Points: A Nonviolence Curriculum for Women

Turning Points: A Nonviolence Curriculum for Women is an educational program for women who use both legal and illegal violence against their partners. Its focus is on helping women understand the connections between the violence they experience and the violence they use. Its overall goal is to help them end both.

Contents include: Facilitator Manual and Weekly Sessions; Participant Workbook; Facilitator Guide DVD; Facilitator Guide Audio CD; Understanding Domestic Violence DVDs for weekly sessions; and Turning Points Vignettes and Women's Stories DVD for weekly sessions.

Authors: Ellen Pence, Laura Connelly & Melissa Scaia {<http://dvturningpoints.com>}

Format: Curriculum (Multiple Pieces)

Year Produced: 2010

Check it Out
(continued from page 10)

Killing Us Softly 4

In this newest video in the *Killing Us Softly* series, the first in more than a decade, Jean Kilbourne takes a fresh look at how advertising traffics in distorted and destructive ideals of femininity. The film marshals a range of new print and television advertisements to lay bare a stunning pattern of damaging gender stereotypes -- images and messages that too often reinforce unrealistic and unhealthy perceptions of beauty, perfection, and sexuality. By bringing Kilbourne's groundbreaking analysis up to date, *Killing Us Softly 4* stands to challenge a new generation of students to take advertising seriously, and to think critically about popular culture and its relationship to sexism, eating disorders, and gender violence.

Publisher: Media Education Foundation {413-584-8500}

Format: DVD only

Length: 45:00 Minutes

Year Produced: 2010

Manual/Facilitators Guide/Study Guide: Yes

First Impressions: Exposure to Violence and A Child's Developing Brain

Designed for parents, this easy-to-understand video illustrates the dangers of chronic exposure to violence on a child's developing brain. Combining inspirational true-life stories and nationally recognized experts, parents are given the latest information on a child's developmental risks if regularly exposed to domestic violence and other violent situations. There are English and Spanish versions on the same DVD.

Publisher: California Attorney General's Office
{www.co.monterey.ca.us/dvcc/aboutdv.htm}

Format: DVD only

Length: 15:00 Minutes

Year Produced: 2008

Manual/Facilitators Guide/Study Guide: No

**Attorney General's Elder Abuse
Commission Seeks Public Comment**

In 2009, the Ohio Attorney General's Elder Abuse Commission was established to improve education efforts, boost research and raise awareness. Under Ohio's new Attorney General, the Commission continues to provide a forum for improving elder justice throughout the state in addition to identifying funding, programming needs and finding solutions. ODVN serves on the Elder Abuse Commission, attending subcommittee meetings and reviewing draft legislation aimed at improving Ohio system responses. The Commission has no investigative authority and will not intervene in individual cases, but accepts case studies and personal experiences aimed at informing future actions. The Commission likewise encourages public comment on impressions of the current state of elder abuse in Ohio, priority needs, or suggestions from the public for Ohio improvements and reforms on matters of practice, policy or administrative functions; funding and resources; protective services; victim advocacy and programming; holding offenders accountable; guardianship; justice system responses; research, education and training; prevention; community awareness; legislative actions and other relevant issues.

Comments may be submitted through an online form or by attending regularly scheduled meetings during the public comment period. The next meeting is scheduled for May 23, 2011. Public comment can be submitted or other information obtained at www.ohioattorneygeneral.gov/Services/Seniors/Elder-Abuse/Elder-Abuse-Commission or by contacting Ursel McElroy at 614-466-3552 or email her at Ursel.McElroy@OhioAttorneyGeneral.gov.

**Coming this Fall 2011:
Ethical Domestic Violence Advocacy**

**Are you a licensed social worker or counselor?
Get your 3 required ethics credits with ODVN!**
5 trainings across the state in September and October
Athens, Dayton, Findlay, Kent and Newark

Contact Rachel for more information at
rachelr@odvn.org!



Visit ODVN on Facebook

OHIO DOMESTIC VIOLENCE NETWORK
4807 Evanswood Drive, Suite 201
Columbus, OH 43229

NON-PROFIT ORG.
U.S. POSTAGE
PAID
COLUMBUS, OH
PERMIT NO. 5960

Member of:



Financial Tip from our Finance Director *Amy Smith*

Save with TechSoup

According to TechSoup's website: "TechSoup is a nonprofit with a clear focus: providing other nonprofits and libraries with technology that empowers them to fulfill their missions and serve their communities. As part of that goal, we provide technology products and information geared specifically to the unique challenges faced by nonprofits and libraries."

Once you are registered with TechSoup, you may begin requesting software and/or equipment donations. If your organization meets the eligibility requirements for the particular vendor, just pay an administrative fee which is much lower than retail and request your donation. Some of the donations I have found the most helpful include:

- Microsoft Office
- Intuit QuickBooks
- Adobe Acrobat Professional

There are also a wide range of other types of software available, including server software, anti-virus, donor management, web conferencing and many more. To learn more, visit TechSoup's website at www.techsoup.org.