

DISABILITY ACTION PLAN

**Improving Access and Attitudinal
Changes to Domestic Violence
Services in Georgia**

2019

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ABOUT GCADV

The Georgia Coalition Against Domestic Violence (GCADV) is a statewide, non-profit organization, whose mission is to collaborate, advocate, educate, and empower. GCADV aims to empower domestic violence (DV) survivors and the organizations that serve them, to educate the public and advocate for responsive public policy. GCADV engages in a variety of collaborative projects designed to eliminate barriers faced by underserved and marginalized survivor populations, analyze and address trends and service barriers, assist survivors with self-sufficiency goals, and provide coordinated access to shelters throughout the state. Thirty-seven of Georgia's 46 state certified DV organizations are GCADV member programs. Additionally, 17 non-certified DV programs are also members of GCADV, including 11 culturally specific programs.

ABOUT THIS REPORT

This document, *Disability Action Plan: Improving Access and Attitudinal Changes to Domestic Violence Services in Georgia*, discusses the recommendations and next steps for increasing access to DV services for Deaf and hard of hearing (HOH) survivors. This action plan can provide strategic guidance for ongoing and new initiatives by GCADV and other key stakeholders in Georgia and serve as a model for other states and local programs interested in supporting accessible DV program services. GCADV developed two additional documents as a part of this project: the *Findings from the Field*, which details the activities, outcomes, and lessons learned over the course of the three-year project; and the *Evaluation Report*, which provides detailed information on project approach, evaluation design, and outcomes.

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THE PROBLEM

The Centers for Disease Control and Prevention estimates that nearly a quarter of women (23%) and approximately 1 in 7 men report experiences of physical domestic violence (DV) in their lifetime (2018). Research indicates that persons who are Deaf or hard of hearing (HOH), are 1.5 times more likely to experience domestic or sexual violence in their lifetime (Anderson, Leigh & Samar, 2011; National Resource Center for Domestic Violence, 2019; Hahn, 2014; Crowe, 2013). Survivors who are Deaf or HOH experience unique barriers to accessing appropriate services (Anderson, Leigh & Samar, 2011; National Resource Center for Domestic Violence, 2019; Hahn, 2014; Crowe, 2013), which increases their risk for DV-related fatality. Georgia has been ranked among the top 20 states for men killing women for over twenty years, in many of which Georgia ranked among the top ten (Violence Policy Center, 2019). Georgia remains in the top half (25th) of state prevalence of men killing women (Violence Policy Center, 2018). Over 300,000 Georgians are Deaf or HOH, nearly half of whom are women (Erickson, Lee & von Schrader, 2017). Considering Georgia's prevalence of fatal violence against women, the sizable Deaf community in Georgia, and the increased risk for DV within this community, there is an indisputable demand for accessible, culturally and linguistically appropriate services for Deaf and HOH survivors in Georgia.

OUR WORK

THE P.E.A.C.H. COLLABORATION

In 2009, the Partnership for Equality and Comprehensive Help for Deaf Domestic Violence Survivors (P.E.A.C.H.) Collaboration, comprising the Georgia Coalition Against Domestic Violence (GCADV), the Georgia Center of the Deaf and Hard of Hearing (GCDHH) (formerly the Georgia Council for the Hearing Impaired, Inc. (GACHI)), and Tools for Life (Georgia's Assistive Technology Act Program), surveyed Georgia DV shelters and disability service providers. The findings indicated a gap in coordination efforts between DV and disability providers in Georgia, which inhibited the ability to ensure safe and accessible services for Deaf and HOH survivors.

2013 NEEDS ASSESSMENT

Funded by the Office on Violence Against Women (OVW) grant obtained to increase the capacity of the P.E.A.C.H. Collaboration, GCADV conducted a needs assessment to identify service gaps and strengthen safe and responsive services to Deaf, HOH, deaf blind and late deafened individuals experiencing DV in Georgia. The key findings of the 2013 needs assessment included the following:

- Internal capacity building among the P.E.A.C.H. Collaboration organizations was necessary to improve technical assistance (TA) for DV survivors and Deaf individuals
- DV, Deaf, and disability organizations in Georgia were not consistently meeting the communication and accommodation needs of Deaf individuals/survivors
- DV, Deaf, and disability organizations in Georgia lacked knowledge, skills, and comfort to serve Deaf survivors safely, effectively, and consistently
- The P.E.A.C.H. Collaboration held a strong TA delivery system to disseminate information about serving Deaf survivors
- Collaboration between Deaf and disability organizations was strong, while there was minimal collaboration and networking between these organizations and DV programs

THE DISABILITIES PROJECT

Considering the increased risk for DV among persons who are Deaf or HOH, significant barriers for accessing safe and comprehensive care, and the service and collaboration gaps identified in the 2013 needs assessment, GCADV was compelled to implement programs to address this problem. In 2016, GCADV applied for, and obtained, the *Enhancing Access and Attitudinal Changes in Domestic Violence Shelter for Individuals with Disabilities* grant (2016-XV-GX-K003), funded by the Office for Victims of Crime (OVC). With this grant, GCADV developed and implemented the Disabilities Project to expand the scope of safe, comprehensive and culturally appropriate DV services for Deaf and HOH survivors in Georgia.

The Disabilities Project was implemented at six pilot site DV organizations and activities included a full-day program staff training on serving deaf and HOH

survivors, accessibility assessments at pilot sites, ongoing TA, development of a multidisciplinary taskforce, and internal policy review and improvement, among other measurement and evaluation activities.

MAJOR FINDINGS FROM THE FIELD

- Pilot-sites benefited from increased pilot staff knowledge about and confidence to serve Deaf and HOH survivors after the full-day staff training.
- Pilot-sites were in the process of increasing, or had increased, shelter and program accessibility for Deaf and HOH survivors due to project participation.
- Continuing requests for TA and guidance to use assistive technology suggests sustained interest and intent to serve Deaf and HOH survivors beyond the project period.
- The task force provided an opportunity for increased knowledge, collaboration, and involvement in systems change within multiple participating organizations.

LESSONS LEARNED

1. *Stakeholder engagement proved to be more challenging than anticipated.*
 - This was true for pilot DV programs, as well as Deaf services providers and law enforcement. Identifying a designated point person within each DV pilot program, at program start, could have potentially aided in developing and fostering a more collaborative and communicative environment, which may have increased ease of coordination between GCADV and the pilot programs throughout the project. Approaching and engaging Deaf service providers and law enforcement in their own environments, before inviting them to participate in an unfamiliar group, may help to address low engagement and participation, as well.
2. *Trying to implement sustainable change through training alone has significant limitations.*
 - While the pre- and post-training assessments indicated increased knowledge and confidence among pilot-site staff, the opportunity for application of knowledge and skills was limited due to the low

number of Deaf survivors seeking services during the project period. It may be possible; however, that the intended attitudinal changes of this project, toward critical thinking and compassion, may help to address this limitation. Perhaps the philosophical and ethical principles and intended attitudinal shifts of the training may be transferable to serving all survivors, which would provide opportunity to reinforce training concepts more often. Additionally, the issue of sustainability may be addressed through development of self-sustaining tools and resources. For example, an online, interactive module series, a train the trainer curriculum, or a tool kit could be available online to train new staff, refresh those who attended training in the past, and provide updated information and best practices.

3. Replication of this project may be challenging.

- The Disabilities project was possible largely due to an existing relationship between GCADV and GCDHH through the P.E.A.C.H. Collaboration. A project of this nature must be planned, developed, and implemented in collaboration with members of the Deaf and HOH community. This requires meaningful engagement; the importance of time, intention, and transparency necessary to forge this relationship cannot be overstated. Because of this collaborative relationship, the training was co-developed and facilitated by a member of the Deaf and HOH community. This invaluable aspect of the training provided opportunity for knowledge and skills to be appropriately delivered and further served as an experiential learning opportunity for pilot-site staff. Because of this, replication, even by a well-trained and informed person from the hearing community, would compromise the quality and fidelity of this project.

ACTION PLAN

Given these key findings and lessons learned, GCADV recommends the following future action items for key stakeholders throughout Georgia to create sustainable change that promotes safe, accessible and welcoming services for Deaf and HOH survivors. It should be noted that many of these action items require staffing and funding resources beyond the scope of GCADV's current Disabilities Project. GCADV hopes that member programs and collaborative partners have been inspired by their involvement in this project and will join with GCADV in commitment and collective action to continue this important work.

RECOMMENDATIONS

1. Domestic Violence (DV) program staff should receive comprehensive training on best practices for working with Deaf and hard of hearing (HOH) survivors.
 - a. Training should be provided, at a minimum, to all staff providing direct services to survivors, and ideally to leadership as well.
 - b. Effective training should:
 - i. Address topics of Deaf culture, tactics of abuse, barriers and language access
 - ii. Be conducted in partnership with a Deaf services organization and/or persons who identify as members of the Deaf community
 - iii. Include interactive activities and videos to illustrate key concepts
 - c. Training modalities should accommodate a variety of staff schedules (e.g. part-time, overnight and weekend staff) and be included in orientation of all new staff.
2. Expand TA for DV programs and other allied professionals throughout the state to help troubleshoot, reinforce best practices, and connect to resources.
3. DV programs should use the *Accessibility Assessment Tool* (see Appendix I in *Findings from the Field Report*) to evaluate their program's readiness to serve Deaf and HOH survivors and identify in gaps in accessibility.

4. DV programs should establish policies, procedures and budget resources to support effective response to Deaf and HOH survivors.
 - a. Key policies and procedures include but are not limited to:
 - i. Policies on providing communication access and any other necessary accommodations
 - ii. Procedures for identifying preferred mode of communication
 - iii. Procedures regarding the use of assistive technology equipment and/or services
 - iv. Procedures for securing certified interpreters or Video Remote Interpreting (VRI)
 - b. Budget for accessibility accommodations, including the use of certified ASL interpreters, assistive technology and building modifications.
5. Increase access to certified American Sign Language (ASL) interpreters, particularly outside of Metro-Atlanta and increase access to on-demand interpretation services such as Video Remote Interpreting (VRI) for emergency/crisis situations.
 - a. Programs should set aside dedicated funds in their agency budgets to provide certified interpreters, as needed.
 - b. Programs should pre-emptively establish contracts or accounts with VRI providers rather than waiting until a crisis situation arises with a Deaf survivor.
6. Increase networking between DV providers, disability services/advocacy organizations, and systems that interact with Deaf and HOH survivors.
7. Provide access to culturally-specific advocacy services for Deaf and HOH survivors of DV delivered by Deaf advocates or advocates with a strong connection to the Deaf community who are fluent in ASL.
 - a. In 2019, GCADV launched the BRIDGES program, a culturally and linguistically specific program providing advocacy services to Deaf and HOH survivors in the 29-County Atlanta metropolitan statistical area and the Rome metropolitan statistical area. BRIDGES is tailored to the specific needs of Deaf and HOH survivors, with services provided by staff with native understanding and fluency in the

culture and language of the Deaf community. The BRIDGES program addresses a critical gap in providing crisis intervention and advocacy services for Deaf and HOH survivors and helps to coordinate services with local DV programs. BRIDGES advocates work in partnership with existing mainstream DV programs to provide co-advocacy to Deaf and HOH survivors—this design ensures culturally responsive and linguistically accessible services through TA to DV programs, as needed, and fills gaps in DV program service delivery.

- b. In order to successfully center the needs of Deaf and HOH survivors, it is essential that the culturally-specific program is in partnership with and led by the Deaf community.

ACTION PLAN	
Activities	Responsible Parties
Recommendation 1 DV program staff should receive comprehensive training on best practices for working with Deaf and HOH survivors.	
Conduct regional trainings on serving Deaf and HOH survivors to increase exposure to DV advocates statewide	GCADV
Design training resource materials and/or modules that can be widely accessed, implemented and/or replicated within DV programs throughout the state to support ongoing training needs for new staff and part-time, overnight or weekend staff	GCADV and local DV programs
Recommendation 2 Expand TA for DV programs and other allied professionals throughout the state to help troubleshoot, reinforce best practices, and connect to resources.	
Disseminate existing, updated and emergent resources and tools to establish best practice for serving with Deaf survivors	GCADV, GCDHH and State funder for DV programs/victim services

Provide ongoing TA to DV programs and allied professionals throughout Georgia via email, phone and in-person	GCADV and GCDHH
Recommendation 3 DV shelter programs should use the <i>Accessibility Assessment Tool</i> to evaluate their program’s readiness to serve Deaf and HOH survivors and identify in gaps in accessibility.	
Local DV programs utilize GCADV’s <i>Accessibility Assessment Tool</i> (see Appendix I in <i>Findings from the Field Report</i>) to conduct a self-evaluation of their ability to provide accessible and culturally responsive services to Deaf and HOH survivors	Local DV programs
Utilize GCADV resources and TA as needed to assist with assessment and/or recommended action steps	Local programs, allied partners and GCADV
Recommendation 4 DV programs should establish policies, procedures, and budget resources to support effective response to Deaf and HOH survivors.	
Develop and disseminate model policies and best practices for DV shelter programs to provide accessible and culturally relevant services to Deaf and HOH survivors	GCADV
Develop and adopt policies and procedures to support effective response to Deaf and HOH survivors	Local DV programs and allied partners
Plan for implementation and ongoing evaluation of policies and procedures to support effective response to Deaf and HOH survivors	Local DV programs and allied partners
Utilize GCADV resources and TA as needed to assist with development and implementation	Local programs, allied partners and GCADV
Recommendation 5 Increase access to certified American Sign Language (ASL) interpreters, particularly outside of Metro Atlanta and increase access to on-demand interpretation services such as Video Remote Interpreting (VRI) for emergency/crisis situations.	

Distribute the Registry of Interpreters for the Deaf (RID) list of certified ASL interpreters to DV programs and allied partners throughout Georgia	GCADV, GCDHH and State funder for DV programs/victim services
Provide DV programs with information on VRI/VRS services, including the functions of the devices, their intended purpose, and how to properly use them	GCADV and GCDHH
Seek and provide adequate funding for costs associated with ASL interpreters and VRI	Local DV programs and GCADV and State funder for DV programs/victim services
Recommendation 6 Increase networking between DV providers, disability services/advocacy organizations, and systems that interact with Deaf and HOH survivors.	
Establish memoranda of understanding (MOUs) for collaboration and referral processes	Local DV programs, disability services/advocacy organizations and systems that interact with Deaf and HOH survivors
Engage in cross-training to increase knowledge and skills	State and local DV programs, disability services/advocacy organizations and systems that interact with Deaf and HOH survivors
Increase access to safety, justice and healing for Deaf and HOH survivors through collective action and systems advocacy	State and local DV programs, disability services/advocacy organizations and systems that interact with Deaf and HOH survivors
Provide ongoing support for a statewide Deaf and DV task force that brings together allied professionals and community members	GCADV or other allied partners
Recommendation 7 Provide access to culturally-specific advocacy services for Deaf and HOH survivors of DV delivered by Deaf advocates or advocates with a strong connection to the Deaf community who are fluent in ASL.	
Operate BRIDGES program within Metro Atlanta and Rome/Floyd County	GCADV

Expand BRIDGES program or other culturally-specific advocacy services for Deaf and HOH survivors throughout Georgia	GCADV, allied partners and the State funder for DV programs/victim services
Collaborate with Deaf community and Deaf service providers for effective outreach and program services	GCADV, BRIDGES Deaf Advisory Committee and GCDHH

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