

Network Meeting Minutes – June 25, 2014

Attendees: 40 present and 4 on conference call
Note Taker: Connie Monahan

TOPIC: Meeting details, Welcome, Short Announcements,

Comments Anne gave brief update on house-keeping details, using the microphone for those on conference call, double checking the CEUs for social workers, sign-in sheet, our mission statement, etc. Members introduced themselves and their agencies.

TOPIC: Agency Spotlight: Albuquerque SANE and ABQ Family Advocacy Center

Comments Teresa D'Anza, Executive Director for Albuquerque SANE Collaborative since 2008, spoke to SANE services and their location at the Albuquerque Family Advocacy Center (FAC). The FAC came about with the leadership of APD and United Way and serves victims of interpersonal crimes, including Domestic Violence, Sexual Assault, Child Sexual Abuse, Internet Crimes, and Stalking. They are physically housed on the entire second floor of a building, located at 625 Silver SW, with APD services contained on one side and direct services with representatives from a myriad of agencies on the other side. The entire team works closely with the families, developing long term relationships with victims in need. Being co-located in one building makes the logistics easier, as the services can be coordinated with off-site assistance to ensure a full spectrum of services. One disadvantage of being co-located is they are seen as aligned with law enforcement but they have learned how to promote safety, separating service response from law enforcement, and other creative ways to focus on the victim who might not want to interact with law enforcement. Albuquerque SANE provides medical/forensic services to both sexual assault and domestic violence patients. Their dispatch number is 884-SANE. They provide 24 hour coverage, with no cost to the patient and no need for insurance claims. Their primary focus is adolescent and adult patients and they provide back-up services for Para Los Niños who takes the lead on the child sexual abuse cases. The medical response includes injury care, medications for Sexually Transmitted Infections and emergency contraception, photography, documentation of the assault, and coordination with law enforcement – all based on the patient's choice/decision. The SANE nurses are specially trained and are also available for legal proceedings. They partner with numerous and various agencies so folks are invited to contact them to learn more.

TOPIC: Agency Spotlight: Life Change Institute

Comments Shannon Enright-Smith, Executive Director for Life Change Institute, spoke to the services her agency offers (www.thelifechangeinstitute.com). The organization has been around seven years, fully operational within the past five years, and has tripled in size within the past three years. Currently on Wyoming/near Menaul, they are looking to open an office on the west-side. They incorporate a whole-body/spirit approach, addressing physical and mental well-being through offering therapy, counseling, coaching, and healthy lifestyle services. The Life Change Institute has a team of counselors and personal trainers, experiential studio, and a small gym. The staff work with insurance companies, accept referrals from physicians, attorneys, and from the court – they don't market their services specifically for DV-SA survivors but their team has a lot of experience and sensitivity for those clients. They are increasingly doing a lot

of community work, self-defense classes for schools and clients, and they partner with the Police Athletic league (PAL) working with adolescents.

TOPIC

Comments

How To...Provider Wellness for Service Providers

Shannon Enright-Smith gave a presentation on how to take better care of ourselves as service providers (available on our website, www.thenetwork-dvsa.org) that spoke volumes to many of us, including vicarious trauma, stress, burnout, PTSD, and how these affect our memory and health, inability to be present, relationships, self-image, and anxiety, all with a delightful sense of humor and personal narrative. She spoke to how we as service providers give little thought of our self-care, but what if we changed and focused on a goal: how to hit the ground running every day, to improve our own lives as well as the lives of the clients we serve. One of her cautions was if we don't like ourselves, it is difficult for others to like us; this becomes critically important if we are working with victims of crime. She spoke to identifying healthy ways to set boundaries on how we feel about our work, independent of the client's actions, clarifying what we are responsible for, including our self-care. One strategy is to disconnect expectations from when we give. Also, we need to be intentional in our self-care. Energy is contagious and so was Shannon's talk!

TOPIC

Comments

Panel: Protecting Members of the Military from DV, SA, and Harassment

Captain Tabitha Baker from the National Guard, Pamela Reeves, the Sexual Assault response Coordinator for Kirtland AFB, Captain Seth Dilworth, Special Victim Counsel at Cannon AFB, and Kathy Girod, Military Sexual Trauma Coordinator for the Veterans Administration spoke to the sexual assault issues facing our military and how to better serve them, and some of the differences between the military response and civilian responses.

- Tabitha shared national DOD data, outlining how reporting rates are increasing, the timeliness of reporting, and the differences between restricted and unrestricted reporting. Several panelists spoke to how their caseloads include victims where the assault occurred years ago and they are only now accessing help, feeling safe to come forward. She also cautioned that the numbers only were those who reported.
- Restricted reporting allows victims to access help with confidentiality while unrestricted reporting involves chain of command. With unrestricted reporting, the reporter's name is known, and an investigation occurs. Captain Dilworth clarified that restricted is not the same as confidential.
- Legal proceedings tend to happen faster within the military than the civilian side. Most military sexual assault cases take about a year to get to legal proceedings.
- Commanders are not allowed to initiate the investigation.
- Panelists spoke to how the culture is changing – leadership is more involved, the concept of zero tolerance is taking hold, members are getting the information about reporting options, and there are strong and dedicated victim advocates with specialized training and who want to do the work. Overall, there is much more awareness. Improvements with the program: it used to be much more passive (such as watching a video or power point presentation); now the program is moving into risk reduction, bystander intervention, and most recently, offender dynamics. One obvious improvement is having special victim's counsel. Also victims can request expedited transfer, which means being reassigned as a way to start over.

- Panelists spoke primarily to sexual assault, noting that domestic violence cases are handled differently, some go through family programs.
- Panelists spoke to how they coordinate with local services; many spoke of coordinating with the SANE medical/forensic exam. Pamela addressed the AFB use of advocates, and that SA advocates are now required to be certified by NOVA which is posing a challenge for many who have full-time jobs.
- Challenges include confidential reporting can cause tension, especially when the offender is part of the unit. Most cases are acquaintance cases which makes it difficult for the victim reintegration. A unique challenge is the civilian population on military bases doesn't have the same choice with restricted reporting so they are encouraged to call the hotline, not give their name, and they are referred to local resources.
- A difference with the military is they have a system to keep evidence with just a number/no identifying name and that the Office of Special Investigation (OSI) will keep the evidence for five years, much longer than in civilian cases.
- It was clarified that it is the offender's status (military/civilian) that decides who has jurisdiction of the case.
- Captain Seth Dilworth, from Cannon AFB, spoke to victim rights and eligibility requirements. Special counsel is often assigned early in the process, and that even reporters in restricted cases can access/talk to special counsel. Most victims are focused on their privacy, specifically their mental health record and their prior sexual history. Most clients want to move on with their lives and careers. Captain Dilworth spoke to the logistics of a court martial: they try to condense everything into one week to minimize cost/travel expenses – it means that things move quicker but that things are also frantic and that sentencing immediately follows the guilty verdict.
- Kathy spoke to the challenges faced by veterans accessing services, the need for documentation without labeling but yet continuing to refer to services. She emphasized sexual harassment as a more common cultural norm that allows further victimization to occur. Kathy indicated that within the VA population, NM has a high disclosure rate of MST – that many of our veteran service members are at higher risk for sexual trauma in their youth, prior to their military service, or because of their sexual orientation – all of which makes our initial education and outreach that much more important, to encourage members to access services.
- Panelists reiterated the need to recognize that men experience sexual violence and trauma as well as women.

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Lunch and Networking

Comments

Members wrapped up the meeting and enjoyed lunch and networking.

Nest Meeting – August 27, 2014
AG Candidate Forum!