

Collaborating to Address the Health and Legal Needs of Patients Experiencing Intimate Partner Violence and Exploitation

Peer Learning Collaborative

Thank you for joining!

We invite you to share your location, organization/health center name, and pronouns in the chat.



Session 3 • May 19, 2022

Acknowledgements

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Health Partners on IPV + Exploitation (Futures Without Violence)

This webinar is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$650,000 with 0% financed with non-governmental sources.

National Center for Medical-Legal Partnership

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Health Partners on IPV + Exploitation is led by Futures Without Violence (FUTURES) and funded by HRSA BPHC to work with community health centers to support those at risk of experiencing or surviving intimate partner violence, human trafficking, or exploitation and to bolster prevention efforts.

We offer health center staff ongoing educational programs including:

- ✓ Learning Collaboratives on key topics for small cohorts
- ✓ Webinars + archives
- ✓ Clinical and patient tools, an online toolkit, evaluation + Health IT tools

Learn more: www.healthpartnersipve.org



National Center for Medical Legal Partnership

AT THE GEORGE WASHINGTON UNIVERSITY

The [National Center for Medical-Legal Partnership](#) (NCMLP) at the George Washington University helps to build an integrated health care system that better addresses health-harming social needs by leveraging legal services and expertise to advance individual and population health.

Goals:

NCMLP provides specialized training and technical assistance (T/TA) designed to meet each of the objectives under the NTTAP type “Medical-Legal Partnerships” (interchangeably referred to as MLPs). These include:

- (1) increase the number of health centers that address health-related legal needs of patients to improve population and community health;
- (2) increase the number of patients that are screened for health-related legal needs that may affect health outcomes; and
- (3) increase the number of health centers that implement medical-legal partnerships to address social determinants of health (SDOH).

HRSA’s 2019-2022 Strategic Plan specifically includes mitigation of SDOH needs and barriers as a mechanism for improving health

Virtual Webinar Training Note

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Because domestic and sexual violence and human trafficking are so prevalent, assume that there are survivors among us.

- Be aware of your reactions and take care of yourself first. It's ok to step away from Zoom if you need to.
- Respect patient or client confidentiality.



Learning Objectives

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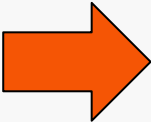
As a result of this Learning Collaborative, participants will be better able to:

1. **Identify strategies to build partnerships** between civil legal services providers and community health centers to address the health and legal needs of survivors of IPV and exploitation.
1. **Describe strategies for sustaining and growing collaborative health justice responses** to preventing and addressing IPV.
1. Describe **3 tools that can help community health centers and civil legal services formalize partnerships and develop protocols** for responding to domestic violence and building prevention strategies.



Learning Collaborative Session Topics

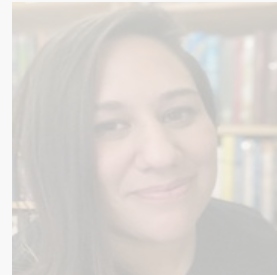
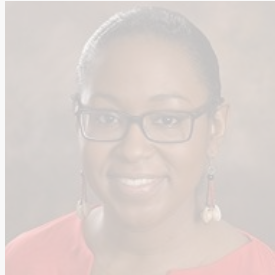
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- **Session 1:** Collaborating to Address the Health and Legal Needs of Patients Experiencing Intimate Partner Violence and Exploitation: Introduction, Tools, and Resources
- **Session 2:** Developing Partnerships Between Legal Services Programs and Health Centers - spotlight on Colorado
-  **Session 3:** Scaling and Sustaining Medical Legal Partnerships to Address IPV and Exploitation - spotlight on Alaska
- **Session 4:** Partnering to Address the Health and Legal Needs of Older Adult Survivors of Abuse and Exploitation - spotlight on Indiana



Faculty

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Session 3

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Collaborating to Address the Health and Legal Needs of Patients Experiencing Intimate Partner Violence and Exploitation:

Scaling and Sustaining Medical Legal Partnerships to Address IPV and Exploitation

Nikole Nelson
Executive Director Alaska
Legal Services Corp.



Growing our Network: Legal Empowerment /MLP

Nikole Nelson, Executive Director,
Alaska Legal Services Corporation

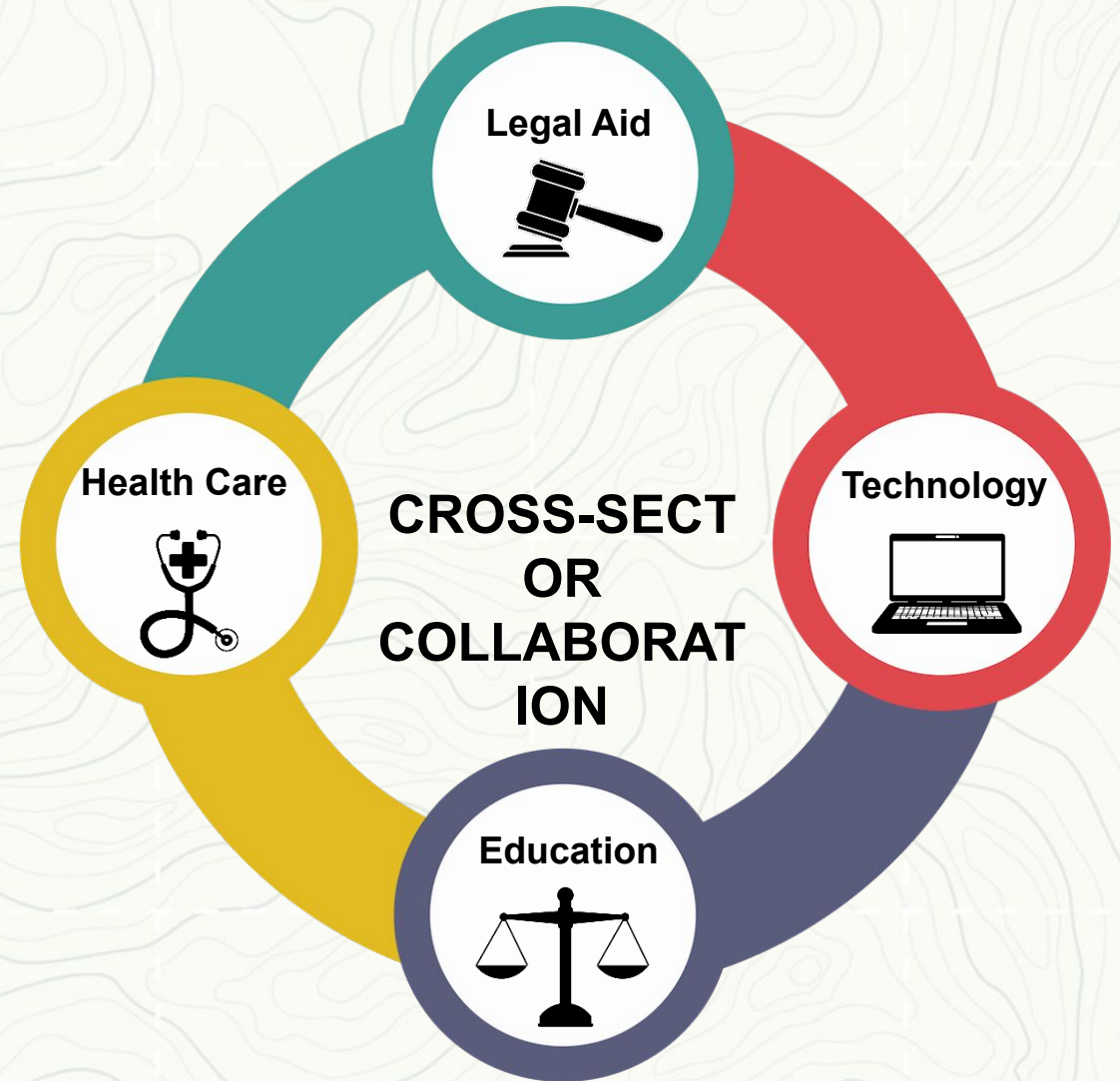


Growing a Holistic Civil Justice Eco System

Alaska Partners



ALASKA NATIVE
TRIBAL HEALTH
CONSORTIUM





San Francisco, CA

Jacksonville, FL

500 miles



ANCHORAGE

KATMAI

HEROES IN OUR HOMELANDS







Communities

Many communities are not connected to each other by roads, and are accessible only by airplane, boat or snowmachine.

Disproportionate Access to Public Safety and other Services

- Lack of infrastructure in rural communities:
 - At least 75 communities in Alaska lack any law enforcement presence at all
 - Most villages lack regular access to police, courts, and related services

Alaska Road System





Alaska communities that had no local law enforcement in 2019.

KEVIN POWELL / Anchorage Daily News

Every woman you've met today has been raped. All of us. I know they won't believe that in the lower 48, and the State will deny it, but it's true. We all know each other and we live here. We know what's happened. Please tell Congress and President Obama before it's too late.

Tribal citizen (name withheld)
Statement provided during an Indian Law and Order Commission site visit to Galena, AK
October 18, 2012

LAWLESS

SEXUAL VIOLENCE IN ALASKA

A PROJECT BY
ADN **PROPUBLICA**



Dozens of convicted criminals have been hired as cops in rural Alaska. Sometimes, they're the only applicants.

In one village, every cop has been convicted of domestic violence within the past decade, including the chief. Only one has received formal law enforcement training of any kind.



Why remote Alaska communities that need cops aren't getting them

A tiny Alaska village got a police officer. He's never had to make an arrest. Meanwhile, larger communities with more crime have often been left behind as the state's two-tiered policing crisis gets worse.



She leapt from a van on the Kenai Peninsula to escape her rapist. Then she waited 18 years for an arrest.

Anna Sattler's rape kit sat untested for almost 20 years as Alaska's backlog got worse. Now, an ex-Iditarod musher faces charges, and she's speaking publicly about the attack for the first time.

Barriers to Justice: Access to Legal Help

80%

of low-income Americans do not seek help for their legal problems.

Reasons why:

1. Do not know where to find help.
2. Do not know if the problem is "legal".
3. Decide to deal with the problem alone.

Source: See Legal Services Corporation, The Justice Gap: Measuring the Unmet Civil Legal Needs of Low Income Americans (2017)

There are only .64 civil legal aid attorneys available for every



100,000 Americans in poverty.

Source: 2016 Justice Index, A Project of the National Center for Access to Justice.



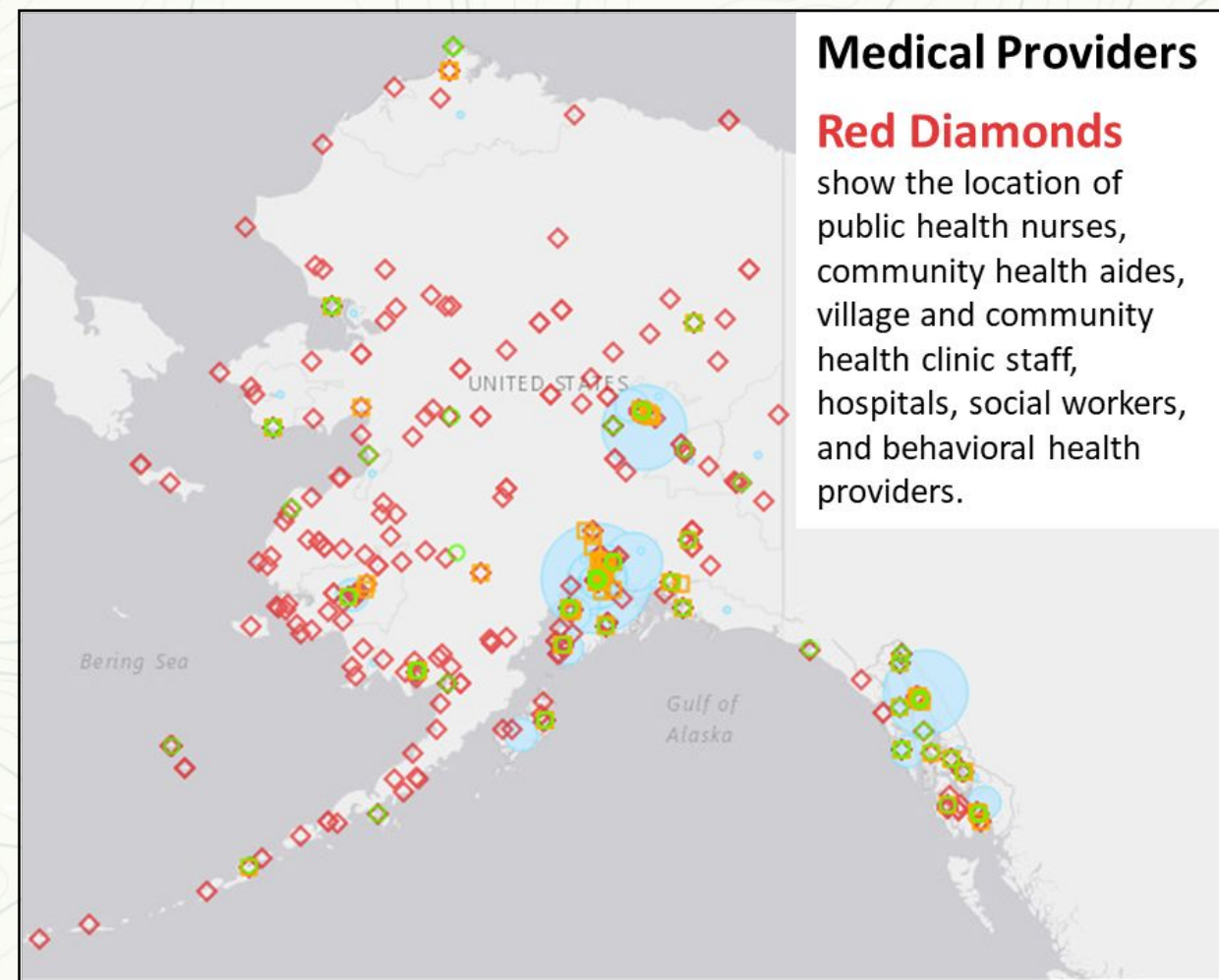
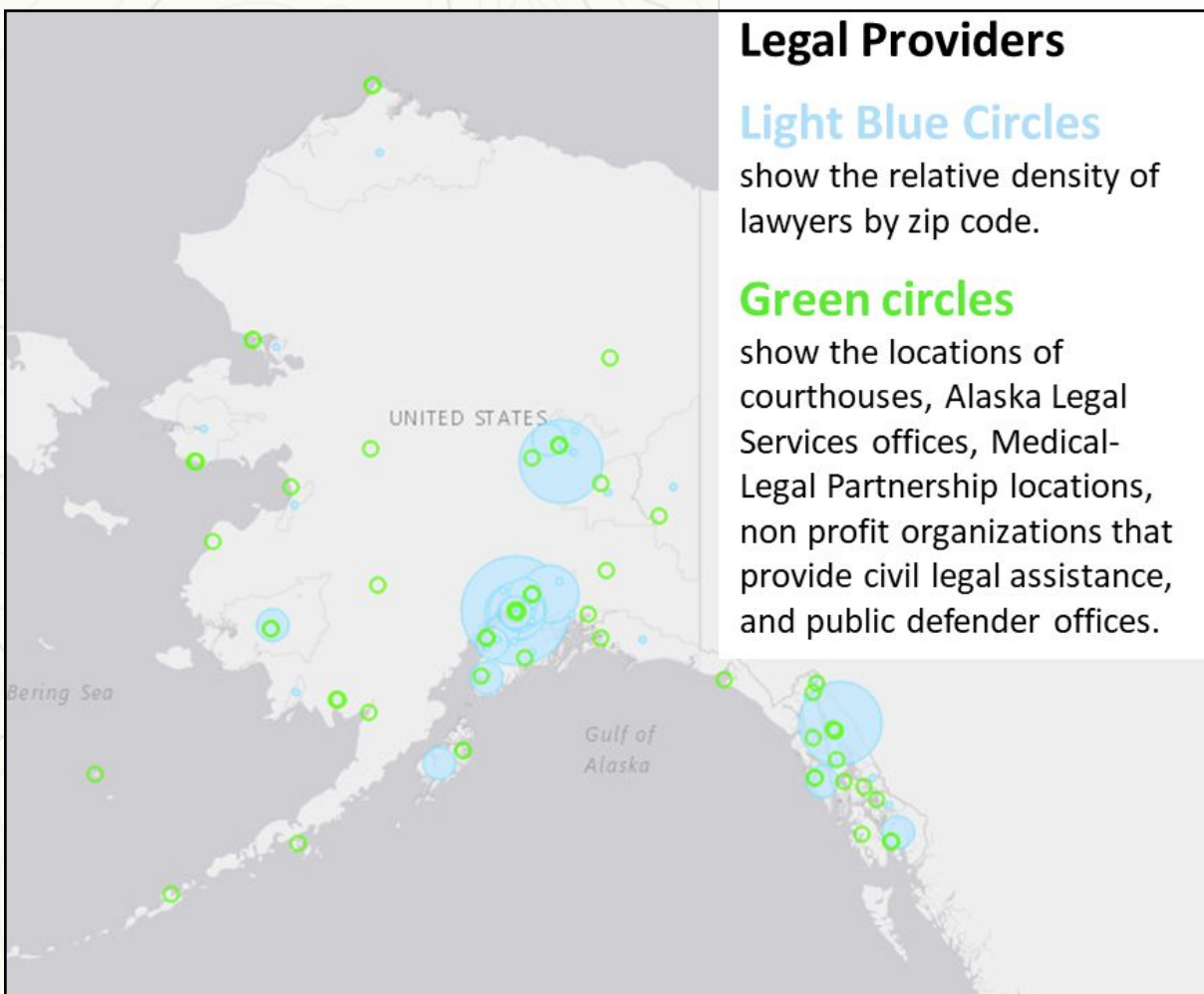
Legal aid organizations are forced to turn away

50%

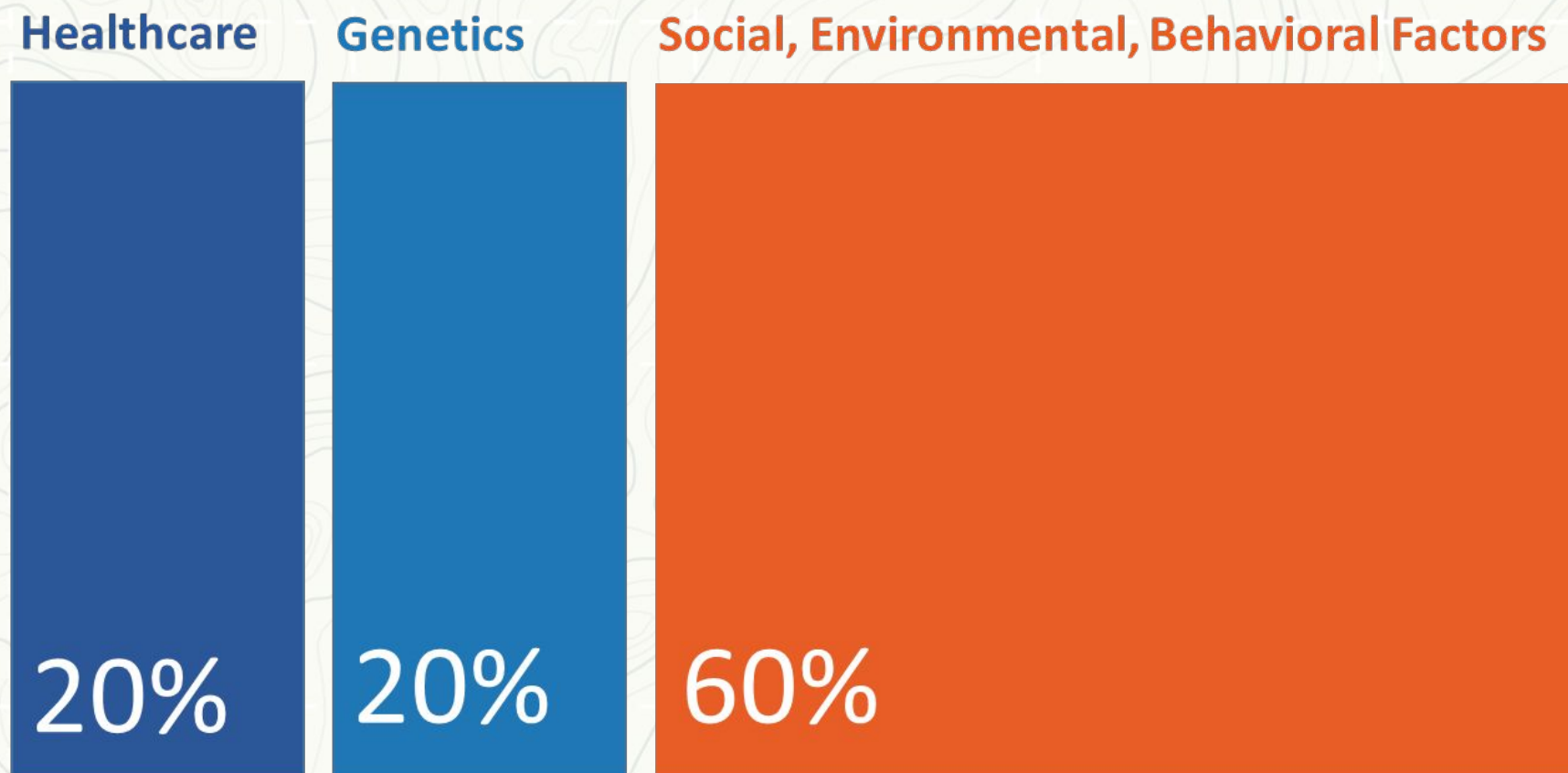
of applicants due to lack of resources.



Transforming Current Delivery Models

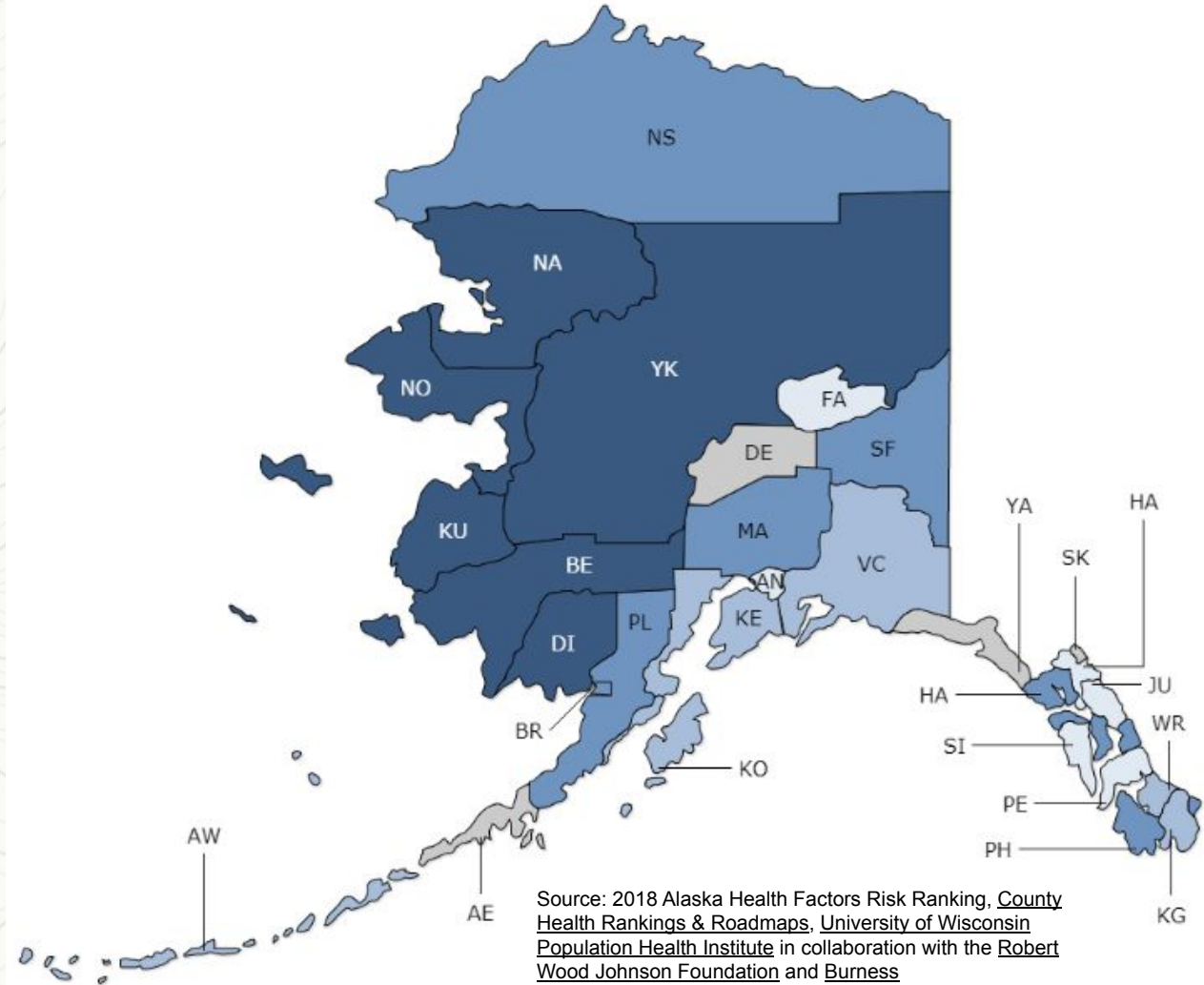
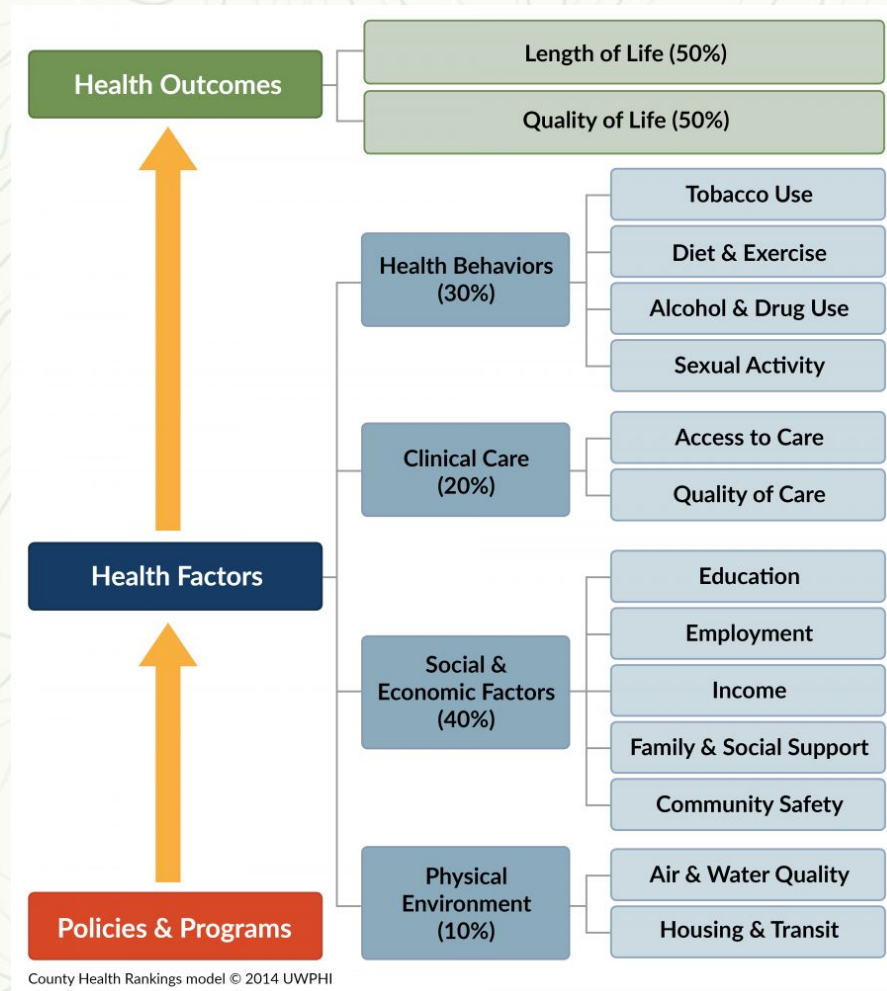


Legal Issues = Social Determinants of Health



Source: Centers for Disease Control and Prevention, *Social Determinants of Health*; Tarlov, A.R., Public Policy Frameworks for Improving Population Health. *Annals of the New York Academy of Sciences*, 1999. 896 (SOCIOECONOMIC STATUS AND HEALTH IN INDUSTRIAL NATIONS: SOCIAL, PSYCHOLOGICAL, AND BIOLOGICAL PATHWAYS): p. 281-293.

Barriers to Justice: Health Inequalities





Embed culturally-relevant community based justice workers in the tribal health care system, modeling their successful community based workforce initiatives

ANTHC VISION: Alaska Native people are the healthiest people in the world. Largest, most comprehensive Tribal health organization in the United States.

Workforce of Mid-Level Practitioners

- Recruits and trains culturally trusted allies within remote indigenous communities
- Community Health Aides; Dental Health Aides; Behavioral Health Aides
- Network of 550 Community Health Aides and Practitioners in 170

remote Alaskan communities





Identify unmet civil legal needs of individuals and resolve their health-impacting civil legal issues.

- **TRAIN** health providers to screen patients for health-harming legal needs.
- **TREAT** patients legal needs and develop legal treatment plan.
- **TRANSFORM** traditional healthcare delivery by using legal assistance as a health tool.
- **PREVENT** systemic community health problems through immediate legal interventions.





Cross-train a culturally-informed community health/justice workforce

- Curriculum and trainings focus on existing professional programs that serve rural areas.
- Training modules and supporting resources offered in-person, remotely, or both.



Community Justice Workers by the Numbers

- **SNAP: live summer 2019**
- **Wills: live fall 2019**
- **ICWA: live fall 2020**
- **Debt Collection Defense:**
live Spring 2021
- **Domestic Violence: Live**
September 2021

Course	Completed	Enrolled/ Progressing	Total
SNAP	52	36	88
ICWA	12	13	25
Wills	29	22	51
Debt	5	5	10
DVPO	2	25	27
TOTAL	100	101	201



Leverage pre-existing infrastructure and new innovations to build a community justice workforce to reach remote communities

Distance Learning

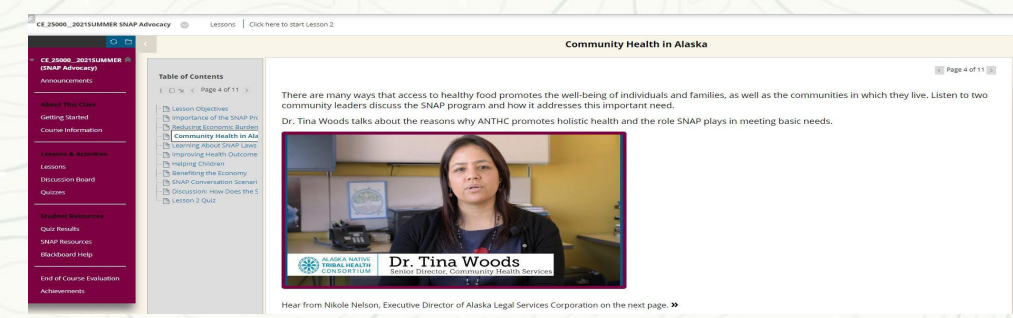
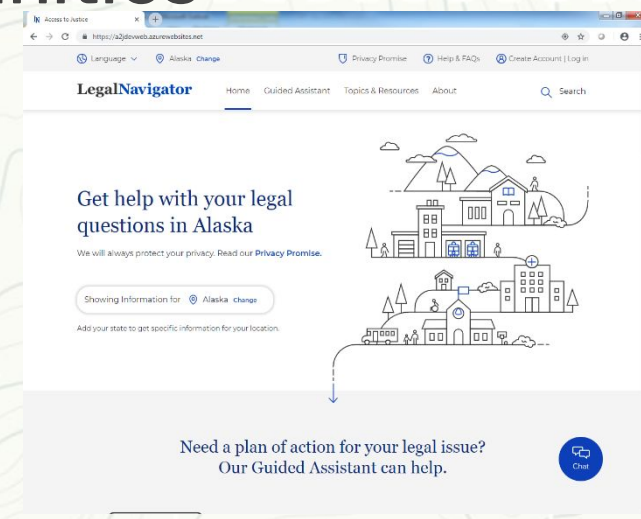
- ANTHC and APU train professionals embedded in anchor institutions and remotely treat patients/clients.

Legal Navigator (soon)

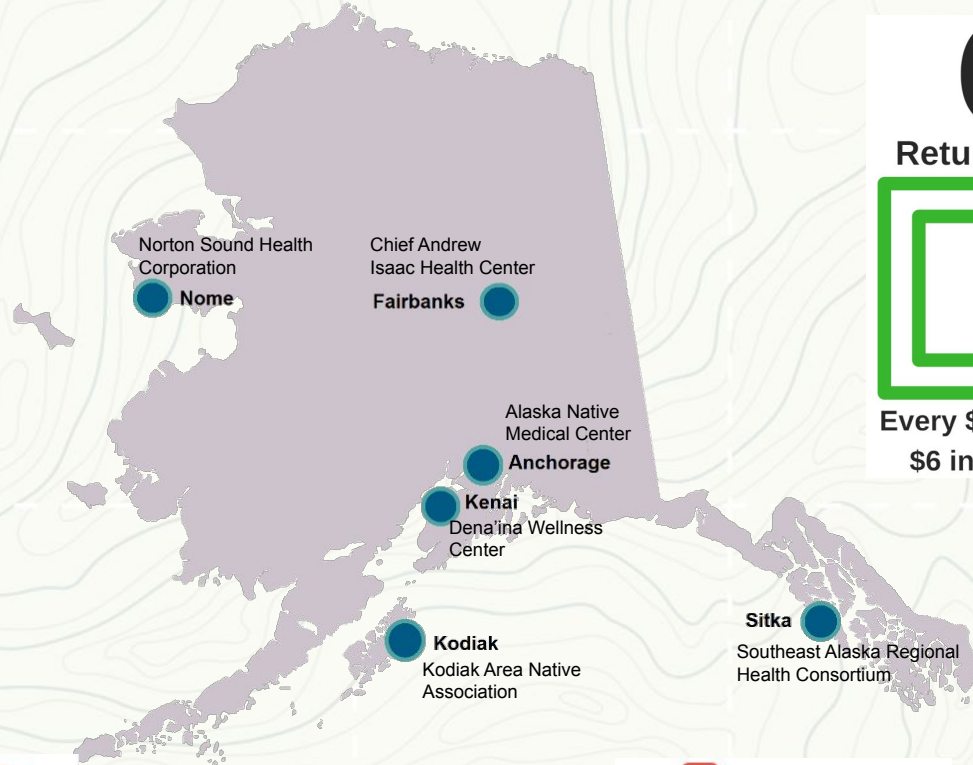
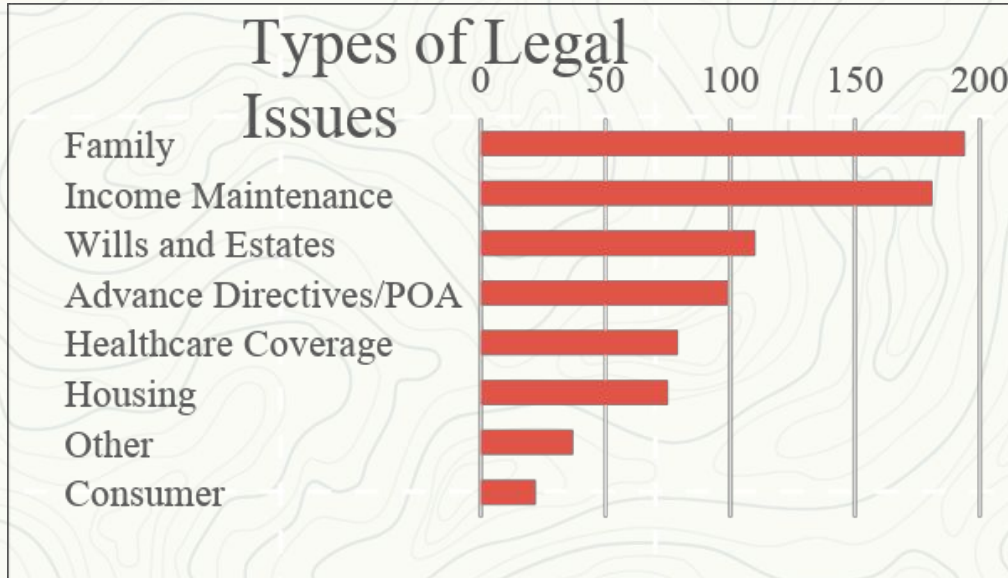
- Pilot project uniting technology, content and community to provide better legal information and referrals to service providers.

BeneFactor (this summer)

- Web-based app that will assist social workers in SSI/SSDI application process



Impact: 2017- 2019



6:1
Return on Investment



Every \$1 invested generates \$6 in economic benefits



1,447
Alaskans living in **108** communities were impacted by services

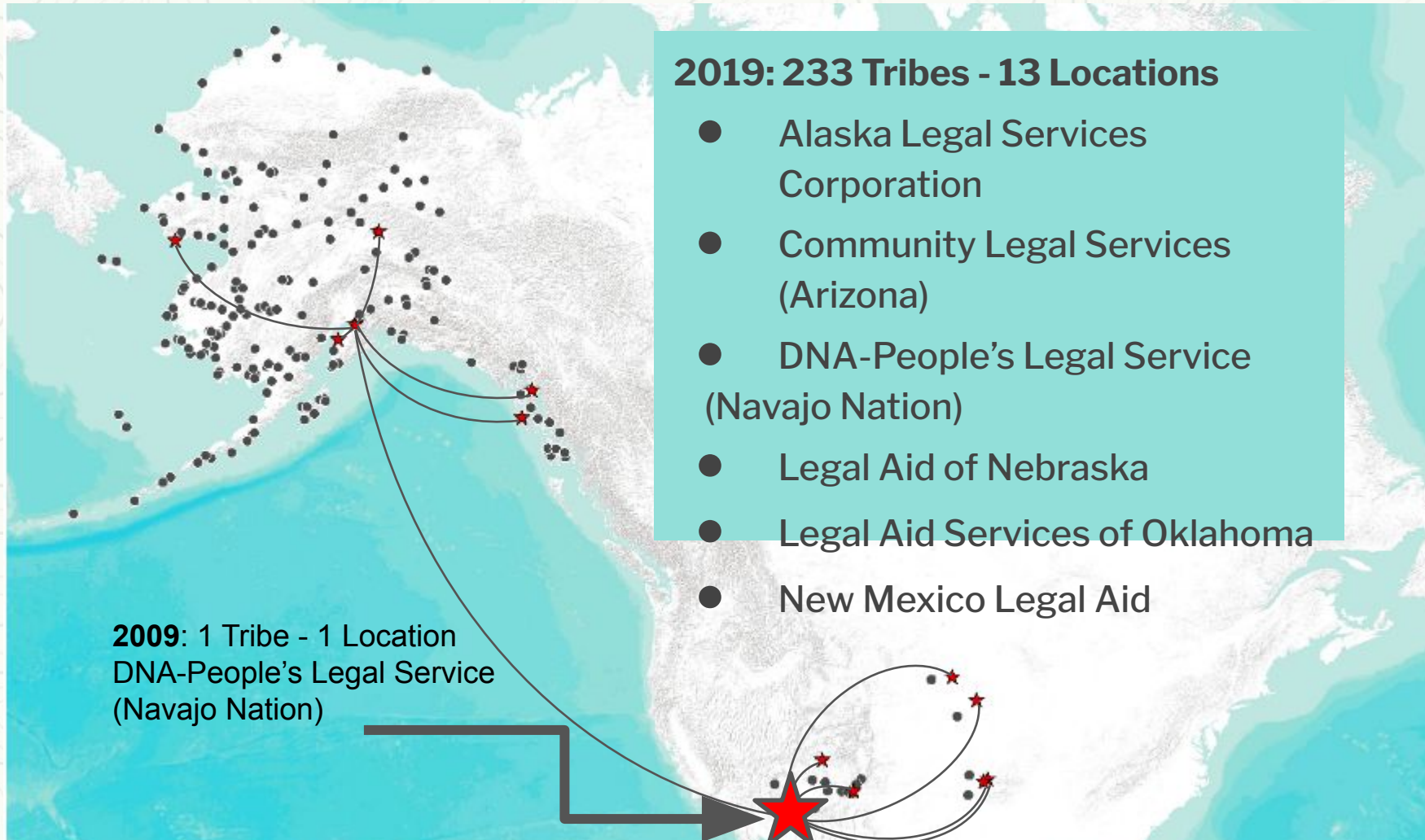


\$2.6M
Estimated economic benefit for SSI, SSDI, and Medicaid cases



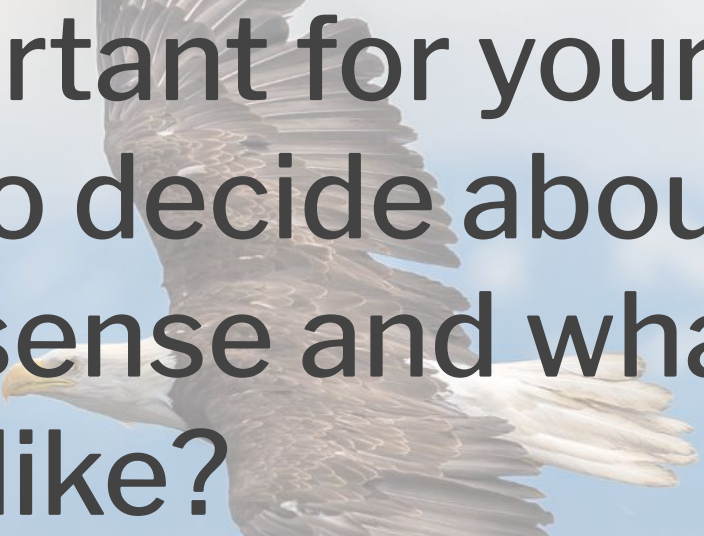
\$635,542
Estimated savings in costs related to emergency shelters and domestic violence

Scaling | Replication | Sustainability






Questions for you?



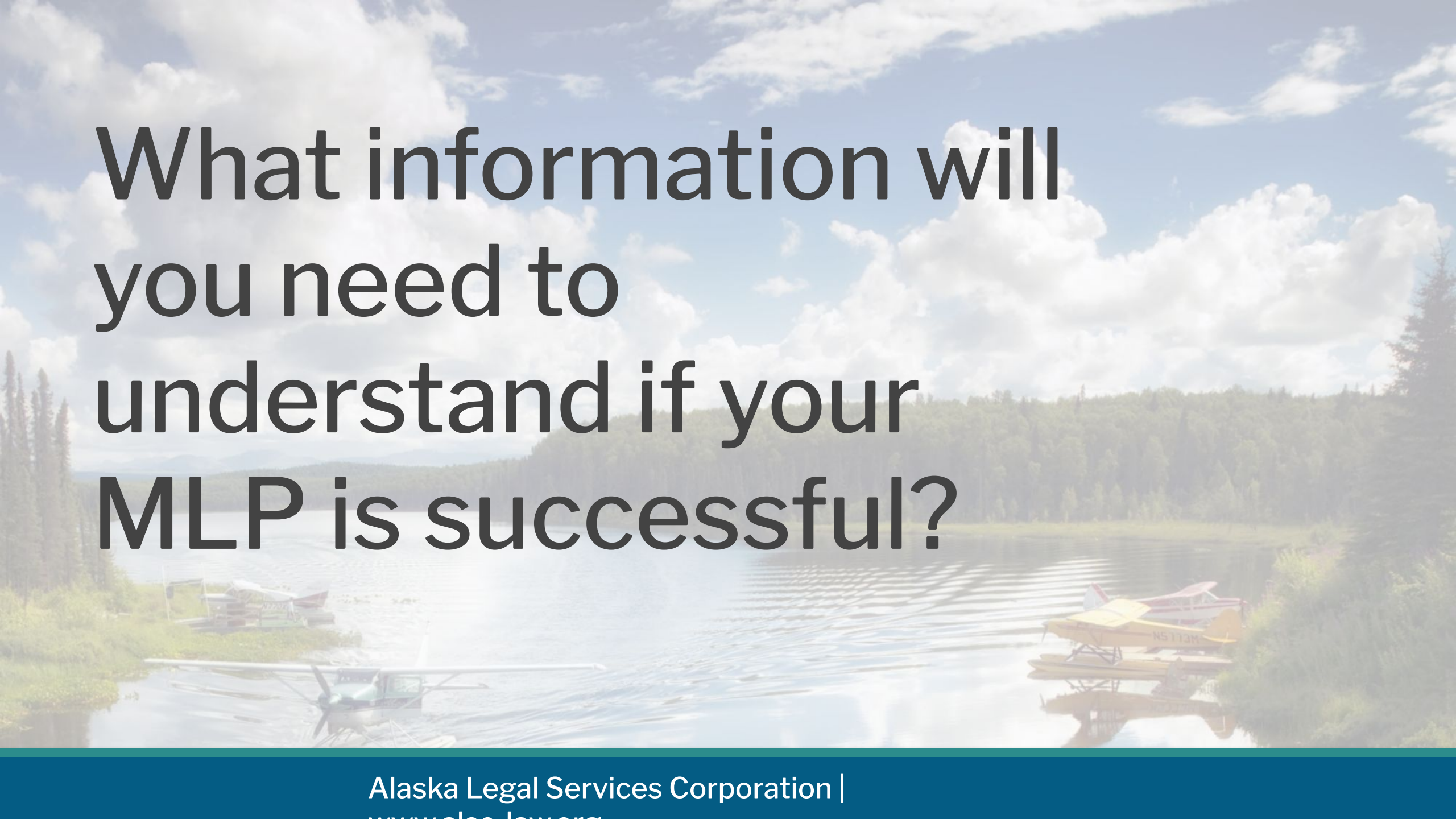
What would be important for your community to know to decide about whether a MLP makes sense and what it might look like?

A photograph of several pieces of dried salmon hanging from a wooden rack outdoors. The salmon is arranged in two rows, with the top row being more vertical and the bottom row being more horizontal. The background shows a clear blue sky and some greenery, suggesting a coastal or outdoor setting. The text is overlaid on the left side of the image.

**Who would you
gather to inform your
strategy?**



What is your
experience with
community asset
mapping?



What information will
you need to
understand if your
MLP is successful?

A photograph of several large pieces of dried salmon hanging from a wooden rack outdoors. The salmon is a deep reddish-brown color, indicating it has been cured. The rack is made of thick wooden poles. The background shows a bright, slightly overcast sky and some greenery, suggesting a coastal or rural setting. The text "How will you get that information?" is overlaid in a large, bold, black font across the center of the image.

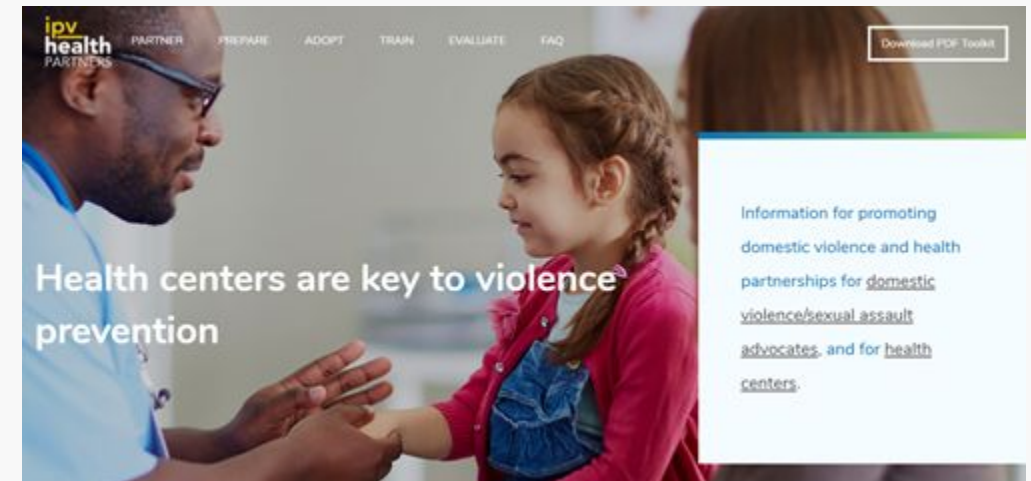
How will you get that information?

www.IPVHealthPartners.org online toolkit + CUES

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Guidance on:

- Enhancing patient privacy
- Disclosing limits of confidentiality
- Universal education scripts
- Reaching friends and family
- Disclosures + supportive messages
- Warm referrals to local DV programs
- Safely sharing resources
- Tech privacy tips



www.ipvhealthpartners.org

Developed by and for community health centers in partnership with domestic violence programs



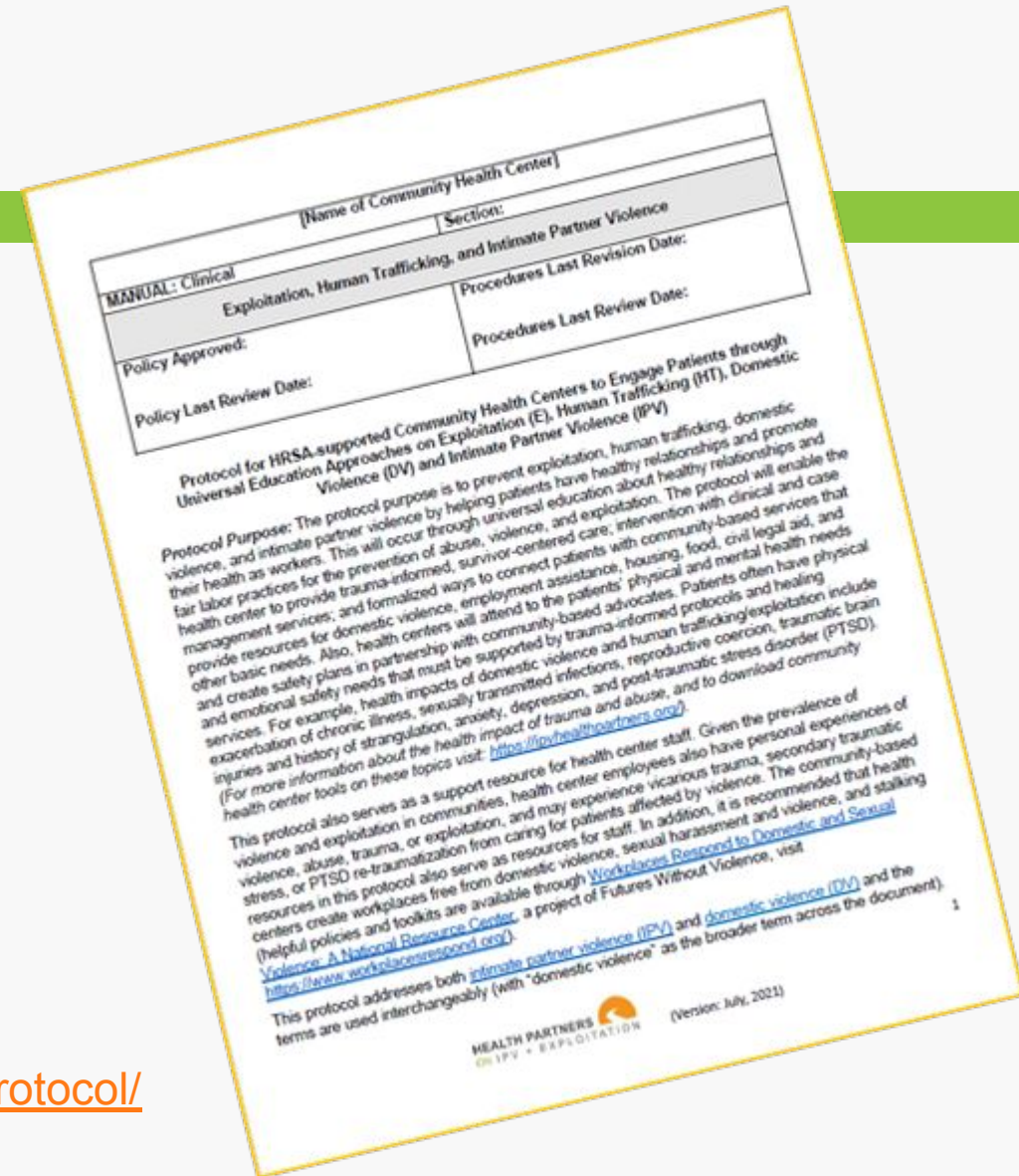
Sample Protocol

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Protocol Elements

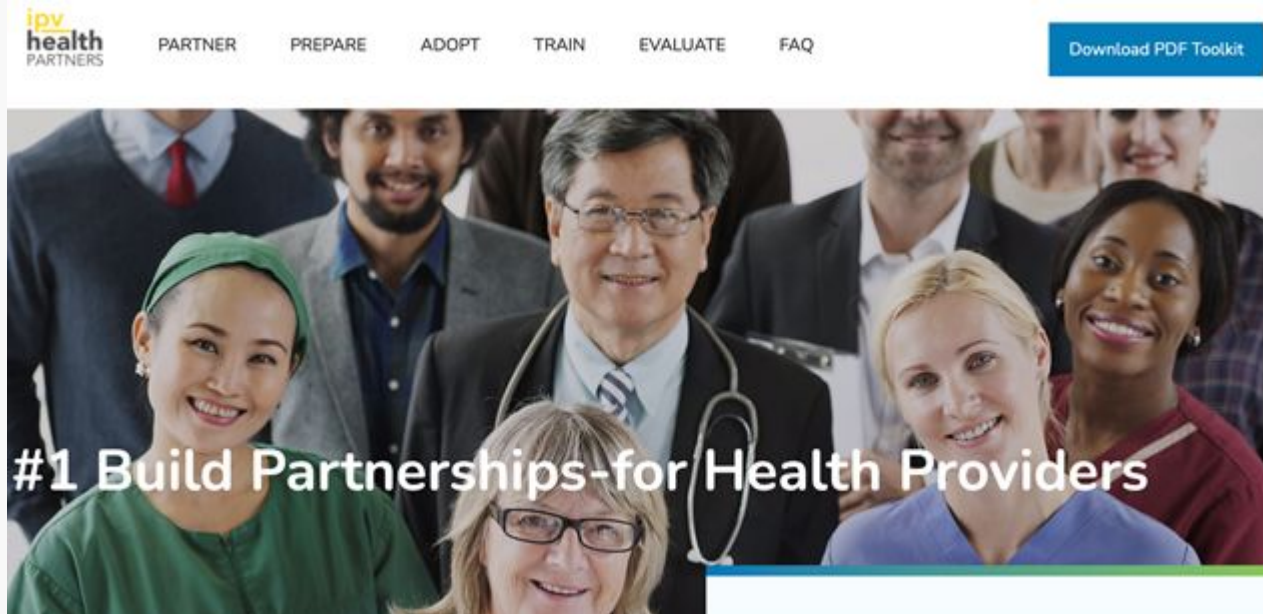
- Descriptions of terms
- Clinic policies (language access, privacy, confidentiality)
- Training requirements
- Universal education framework / CUES
- Resources/support services partnerships
- Scripts
- Reporting requirements
- Documentation and coding guidelines

<https://healthpartnersipve.org/futures-resources/sample-health-center-protocol/>



Partnerships (Sample Memorandum of Understanding)

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1. Connect with your local DV agency or CHC
2. Host cross-trainings with the DV agency to promote shared knowledge between staff
3. Develop a survivor referral procedure between health setting and advocates
4. Adapt the MOU

<https://healthpartnersipve.org/futures-resources/sample-memorandum-of-understanding/>



OCTOBER 2020

Bringing lawyers onto
the health center care
team to promote patient
& community health

.....
A planning, implementation, and practice guide
for building and sustaining a health center-based
medical-legal partnership



National Center for Medical Legal Partnership
AT THE GEORGE WASHINGTON UNIVERSITY

9 Conversations

to Help Your Health Center Lay
a Strong Foundation for a
Medical-Legal Partnership

Available at: medical-legalpartnership.org/resources

National Center for Medical Legal Partnership
AT THE GEORGE WASHINGTON UNIVERSITY



Please open the link that's posted in the chat box
and complete the post-session evaluation.
We really appreciate your feedback.

Session 4:

**Partnering to Address the Health and Legal Needs of Older Adult
Survivors of Abuse and Exploitation**

May 19, 2022, 10am PT / 11am MT / 12pm CT / 1pm ET

Questions? Please email Camila Sanchez Tejada: csanchez@futureswithoutviolence.org