



Integrating Domestic Violence into Emergency Preparedness Planning & Response

Health Cares About Domestic Violence Day
Wednesday, Oct 8, 2025

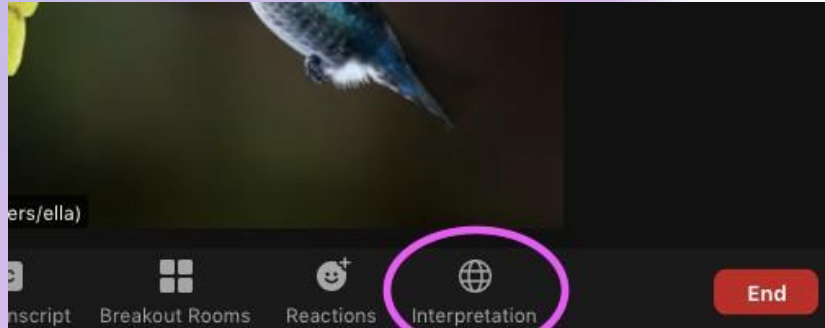
English with Spanish and ASL interpretation

Webinar will be recorded, shared with participants and archived online

How To Access Language Interpretation on Zoom

Cómo Activar la Interpretación de Idiomas en Zoom

**On your computer, find the
Interpretation Globe Icon at the
bottom of your screen**



**En su computadora, busque el
globo terráqueo que dice
Interpretación en la parte
inferior de su pantalla.**

Choose English as your language. Make sure to NOT mute original audio so that you can hear the main room

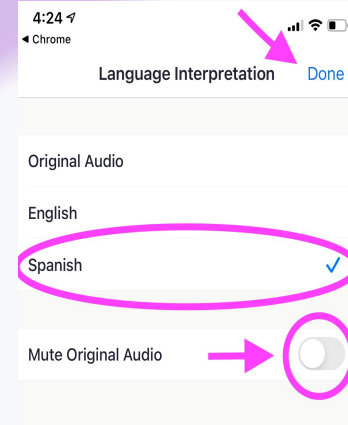
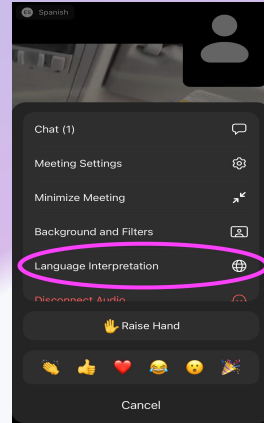
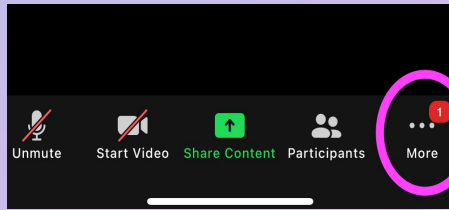


Seleccione Español. Asegúrese de Silenciar Audio Original, si solo desea escuchar al intérprete

If you are on a smart device, look for the three dot menu and choose Language Interpretation.

Then, select English.

Interpretation is not available from a Chromebook or if you dial into Zoom.



Desde un dispositivo inteligente, busque el menú de tres puntos y elija Interpretación. Después, escoja “Español” y s ilencie el audio original.

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Faculty



Virginia Duplessis, MSW

Director
National Health Resource
Center on Domestic Violence
Futures Without Violence



Kenede Pratt-McCloud

Program Assistant
Health Partners on IPV + E
Futures Without Violence

The National Health Resource Center on Domestic Violence

The National Health Resource Center on Domestic Violence (HRC) is a federally-designated resource center that has supported health care professionals, domestic violence (DV) experts, survivors, and policy makers at all levels as they improve health care's response to domestic violence, and increase the capacity of domestic violence advocates to address survivor health needs.

www.ipvhealth.org

store.futureswithoutviolence.org



Health Partners on IPV + Exploitation

Led by Futures Without Violence (FUTURES) and funded by HRSA's BPHC to work with health centers to support those at risk of experiencing or surviving intimate partner violence, human trafficking, or exploitation (IPV/HT/E) and to bolster prevention efforts.

We offer health center staff ongoing free educational programs including:

- ✓ Small group trainings
- ✓ Webinars + archives
- ✓ Clinical and patient tools, evaluation + EHR smart tools

Learn more: www.healthpartnersipve.org





Agenda

- Recapping September 23, 2025's **Strengthening Emergency Preparedness by Addressing IPV/HT/E** webinar
- **Three Featured Speakers:**
 - Sara Hicks-West, MA, CDPm
 - Debra M. Ward, MPH, Chief Executive Officer, YWCA San Gabriel Valley
 - Rebeca Melendez, MA, Director of Services at The Wellness Center, East Los Angeles Women's Center
- Panel Conversation, facilitated by Virginia Duplessis, MSW
- Key Resources & Tools
- Evaluation Poll
- Upcoming Events



**Building Partnerships Between
DV Coalitions/Primary Care Associations
and
DV Programs/Health Centers**

An orange horizontal line spans the bottom of the slide.

Community Partnerships

- **Everyone has a unique and important role** in supporting survivors and their families
 - You don't need to be an IPV expert
 - Build partnerships between health care and community-based organizations you know and trust
 - IPV support services and family serving organizations provide critical services:
 - Safety planning, shelters and housing support, counseling, family services, legal advocacy, employment support, etc.
-

The Heart of the Model: Building Meaningful Partnerships

Partnerships help promote bi-directional warm referrals for clients/patients and increase staff engagement and support.



DV Advocacy Partner

Supports survivor safety, self-determination, and connection



Warm referral from domestic violence agency to health center



Warm referral from health center to domestic violence agency



Community Health Center Partner

Supports survivor health and well-being



Download a sample

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

Overview of Health Centers (HCs)

Health centers are community-based and patient-directed organizations that deliver no-cost/ low-cost comprehensive primary health care.

They often include:

- ☐ Pharmacy
- ☐ Mental health services
- ☐ Substance abuse programs
- ☐ Oral health services



Photo: CHC Staff at Asian Health Services in Oakland, CA in 2021

- Identify local health centers: [Find a Health Center](#)
- Find your State and Territory Primary Care Associations: [Directory of PCAs & HCCNs](#)



Domestic/Sexual Violence Advocacy Programs

Domestic violence and sexual assault programs have vast experiences working with survivors of violence and assist them to identify ways to increase personal safety while assessing the risks.

Advocates connect patients to additional services like:

- Crisis safety planning (usually 24/hour hotline)
- Housing (emergency and transitional)
- Legal advocacy for IPV/HT, family court, immigration, labor
- Support groups/counseling
- Children's services
- Employment support

Find your State and Tribal Coalitions Against Domestic Violence

- [State and U.S. Territorial Coalitions](#)
- [Tribal Coalitions](#)





Call 1.800.799.SAFE
(7233)



Chat live
now



Text "START" to 88788

Visit our page for Privacy Policy. Msg & Data Rates May Apply. Text STOP to opt out.

NATIONAL DOMESTIC VIOLENCE HOTLINE

Get Help

What is a Safety Plan?

Local Resources

**Healthcare, IPV, and Health
Centers**

Legal Help

Deaf Services

Native American Services

Identify Abuse

Plan for Safety

Support Others



<https://www.thehotline.org/get-help/healthcare-and-abuse/>



844-7NATIVE (762-8483) <https://strongheartshelpline.org>

StrongHearts Native Helpline is a 24/7 safe, confidential and anonymous domestic and sexual violence helpline for Native Americans and Alaska Natives, offering support and advocacy.

StrongHearts advocates offer the following services at no cost:

- Peer support and advocacy
- Information and education about domestic violence and sexual violence
- Personalized safety planning
- Crisis intervention
- Referrals to Native-centered domestic violence and sexual violence service providers
- Basic information about health options
- Support finding a local health facility or crisis center trained in the care of survivors of sexual assault and forensic exams
- General information about jurisdiction and legal advocacy referrals



Human Trafficking Programs

NATIONAL
HUMAN
TRAFFICKING
HOTLINE

Get Help | 24/7 Confidential

1-888-373-7888



TTY: 711



Text* 233733



Chat



Español

English

National Human Trafficking Hotline <https://humantraffickinghotline.org/en>

The National Human Trafficking Hotline offers an online Referral Directory made up of anti-trafficking organizations and programs that offer emergency, transitional, or long-term services to victims and survivors of human trafficking as well as those that provide resources and opportunities in the anti-trafficking field.

<https://humantraffickinghotline.org/en/find-local-services>

Search by: Sex Age Type of Trafficking Clear search

Services + Opportunities And Training + Specialized Competency +

Enter city, state or Zip Code (for Washington or New York State, enter WA or NY, respectively) GO

Currently showing all providers.

This is not an exhaustive list of anti-trafficking organizations in the United States.

1736 Family Crisis Center	
3Strands Global Foundation	
A Safe Place	
AbolitionNC	
Abuse Counseling and Treatment, Inc.	
ACH Child and Family Services	
Alaska Institute for Justice	
Alaska Institute for Justice - Juneau	
Alaska Native Justice Center	
Albany County Crime Victim and Sexual Violence Center	
Albion Fellows Bacon Center	
ALIGHT (Alliance to Lead Impact In Global	



Community Partnerships

Partnerships with Community Organizations that expand basic needs support for patients can help prevent human trafficking:

- Food banks
- Career services
- Housing organizations
- DV programs
- Legal aid services



Partnership Benefits- Local Level

- Support for health center staff + patients who experience DV and safety planning.
- Facilitate health enrollment for clients and staff.
- Help establishing a primary care provider (PCP) – moving away from emergency-level care.
- Providing warm referrals.
- Emergency preparedness collaboration.

Partnership Resources

- <https://healthpartnersipve.org/resources/increasing-health-care-enrollment-for-or-survivors-of-domestic-violence/>
- <https://healthpartnersipve.org/resources/partnerships-between-hcs-and-dv-and-sv-advocacy-programs-bi-directional-infographic/>

Healthcare.gov Enrollment for Survivors of Domestic Violence

People who have experienced intimate partner violence (IPV) have unique health care needs, making insurance that covers comprehensive medical and behavioral health benefits all the more critical. Community health centers play an important role in helping survivors enroll in coverage and receive quality primary health and oral health care services. A special enrollment period for survivors makes enrollment possible across the year with additional provisions to make coverage more affordable for survivors. [Learn more about the special enrollment period for survivors.](#)

Community based domestic and sexual violence programs and health centers share goals to advance health equity and health outcomes in medically underserved communities. With current American Rescue Plan (ARP) COVID-19 funding, we now have a unique opportunity for these systems to partner to work together to reach more clients.

Last year the Family Violence Prevention and Services Program (FVPPS) – the agency that funds domestic violence and sexual violence programs nationally – received a historic investment of \$550 million to assist states, territories, and tribes to provide access to COVID-19 testing, vaccines, and mobile health units and specifically for domestic violence programs. Similarly, \$1 billion in ARP funding reached nearly 1,300 HRSA health centers across the US and territories to expand health centers, to build new sites and provide mobile health care, and to advance health equity and health outcomes in medically underserved communities, including through projects that support COVID-19 care. These parallel funding streams can be maximized to enroll more survivors of domestic violence and their families so they have long term health care coverage.

Encourage clients to call the toll-free call center (1-800-318-2596) or refer them to local assisters who are trained to help consumers through the enrollment process if you can't help them right away. A good place to start: <https://localhelp.healthcare.gov/>. If the client needs DV related support, refer them to a local program or the National Domestic Hotline 1-800-799-SAFE (7233). For Native American clients contact StrongHearts Native Helpline 1-844-7-NATIVE (762-8483).

// HEALTH PARTNERS ON IPV + EXPLOITATION 2022

Partnerships between health centers and domestic and sexual violence (DSV) advocacy programs are crucial to support survivors in your community.

To start and grow a partnership:

- 1. Assess the needs of your community: How your health center and community-based DSV advocacy programs provide services to survivors, and all patients.
- 2. Identify champions in your health center: Who can research what resources exist in your area? What services already exist? What services are needed?
- 3. Connect with community-based DSV advocates: Who can research what resources exist in your area? What services already exist? What services are needed?
- 4. Define the partnership: Collectively agree to an agreement to form the partnership and to create a plan. This could include the roles of each partner, the goals for partnership and all partners. These agreements and processes can be updated as the partnership evolves.
- 5. Promote privacy and confidentiality: Review partnership between health centers and DSV advocates to ensure privacy and confidentiality in your efforts. Programs need to have information in a secure manner.
- 6. Develop a procedure for bi-directional referrals: Review partnership between health centers and DSV advocates to ensure that there is a clear process for bi-directional referrals. This could include the roles of each partner, the goals for partnership and all partners. These agreements and processes can be updated as the partnership evolves.

Partnerships between health centers, DSV advocacy programs provide services to survivors, and all patients.

- Increased access to healthcare enrollment and services
- Addressing intersecting needs like food access, legal support and housing
- Helping on the expertise of your partner who may not have to be an expert on everything
- Support for staff wellness and training

What is a Domestic and Sexual Violence (DSV) Advocate?

DSV advocates are community based providers trained to support safety and self-determination of survivors. They offer confidential and free services: provide 24-hour crisis intervention, emotional support, emergency services, legal info, and more.

Partnerships between health centers, DSV advocacy programs provide services to survivors, and all patients.

- Increased access to healthcare enrollment and services
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Memorandum of Understanding

An MOU between your health center + DVP may help:

- ✓ Establish a formal working relationship
- ✓ Create an avenue for bi-directional warm referrals
- ✓ Identify strategies to support staff

Visit <https://healthpartnersipve.org/>

- ✓ [Sample MOU in English and Spanish](#)
- ✓ [Building and Sustaining Fruitful Partnerships](#)
- ✓ [DV Advocates' Guide to Partnering with Health Care](#)



MEMORANDUM OF UNDERSTANDING
Between [DOMESTIC VIOLENCE/SEXUAL ASSAULT-DV/SA AGENCY] and [HEALTH CENTER]

This agreement is made by and between [DV/SA Agency] and [health center] for [state purpose of the MOU or project, i.e. to strengthen relationship between parties, to strengthen capacity for each entity, etc.]

[Use this space to provide a brief description of each partner agency.]

The parties above and whose designated agents have signed this document agree that:

- 1) Representatives of [DV/SA Agency] and [health center] will meet each other in person at least once to understand the services currently provided by their respective programs and to discuss needs, goals and next steps.
- 2) Representatives of [DV/SA Agency] and [health center] will continue to meet between [date] and [date] [list frequency and meeting location].
- 3) [Health center] will hold the following roles and responsibilities: [list the responsibilities and role of the health center—i.e. training DV/SA advocates on the health impact of abuse or clinic services; serving as a primary health care referral for clients referred by the DV/SA program; drafting and reviewing IPV policies and procedures; offering health education or resources to clients in the DV/SA program, etc.].
- 4) [DV/SA Agency] will hold the following roles and responsibilities: [list the responsibilities and role of the DV/SA agency—i.e. training health center providers and staff; serving as a primary referral for health center patients in need; drafting and reviewing policies and procedures; offering DV/SA advocacy support onsite at health center; adding materials/resources at health fairs or other health events, etc.].
- 5) [Health center] will provide the following resources: [list resources that the health center can bring to support the project's efforts—i.e. additional staff time; materials; office space for advocates co-located at the health center; funding; key contacts; condoms or other reproductive health support, etc.].
- 6) [DV/SA Agency] will provide the following resources: [list resources that the organization can bring to support the project's efforts—i.e. additional staff time; materials; key contacts; funds, etc.].
- 7) [DV/SA Agency] and [health center] staff will develop an evaluation plan to measure the success and challenges of the project [i.e. implementing the QAAQ tool every six months to measure progress; other measurable outcomes such as referrals made, client patient satisfaction surveys, provider/staff training evaluations, etc.].

We, the undersigned, approve and agree to the terms and conditions as outlined in the Memorandum of Understanding. This agreement will be valid from [date] to [date], and may be renewed at the end of this period if both parties agree.

By _____ By _____
Name _____ Name _____
Title _____ Title _____
Health Center _____ DV Program _____
Date _____ Date _____

This MOU template was developed by the National Health Resource Center on Domestic Violence, a project of Futures Without Violence. For more info visit: www.futureswithoutviolence.org/



Adaptable Health Center Protocol on IPV/HT

In English and Spanish

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

[Name of Community Health Center]	
MANUAL: Clinical	Section:
Exploitation, Human Trafficking, and Intimate Partner Violence	
Policy Approved:	Procedures Last Revision Date:
Policy Last Review Date:	Procedures Last Review Date:

Protocol for HRSA-supported Community Health Centers to Engage Patients through Universal Education Approaches on Exploitation (E), Human Trafficking (HT), Domestic Violence (DV) and Intimate Partner Violence (IPV)

Protocol Purpose: The protocol purpose is to prevent exploitation, human trafficking, domestic violence, and intimate partner violence by helping patients have healthy relationships and promote their health as workers. This will occur through universal education about healthy relationships and fair labor practices for the prevention of abuse, violence, and exploitation. The protocol will enable the health center to provide trauma-informed, survivor-centered care; intervention with clinical and case management services; and formalized ways to connect patients with community-based services that provide resources for domestic violence, employment assistance, housing, food, civil legal aid, and other basic needs. Also, health centers will attend to the patients' physical and mental health needs and create safety plans in partnership with community-based advocates. Patients often have physical and emotional safety needs that must be supported by trauma-informed protocols and healing services. For example, health impacts of domestic violence and human trafficking/exploitation include exacerbation of chronic illness, sexually transmitted infections, reproductive coercion, traumatic brain injuries and history of strangulation, anxiety, depression, and post-traumatic stress disorder (PTSD). (For more information about the health impact of trauma and abuse, and to download community health center tools on these topics visit: <https://ipvhealthpartners.org/>).

This protocol also serves as a support resource for health center staff. Given the prevalence of violence and exploitation in communities, health center employees also have personal experiences of violence, abuse, trauma, or exploitation, and may experience vicarious trauma, secondary traumatic stress, or PTSD re-traumatization from caring for patients affected by violence. The community-based resources in this protocol also serve as resources for staff. In addition, it is recommended that health centers create workplaces free from domestic violence, sexual harassment and violence, and stalking (helpful policies and toolkits are available through [Workplaces Respond to Domestic and Sexual Violence: A National Resource Center](https://www.workplacesrespond.org/), a project of Futures Without Violence, visit <https://www.workplacesrespond.org/>).

This protocol addresses both [intimate partner violence \(IPV\)](#) and [domestic violence \(DV\)](#) and the terms are used interchangeably (with "domestic violence" as the broader term across the document).

1

(Version: July, 2021)



**Type in the
chat!**

Questions for the presenters?

**Name one action you can take to build or
expand your partnerships at the local or
state/territory or Tribal level.**

At the Table Before the Storm

Building Partnerships for Survivor Safety

Domestic Violence • Human Trafficking • Exploitation in Crisis Settings



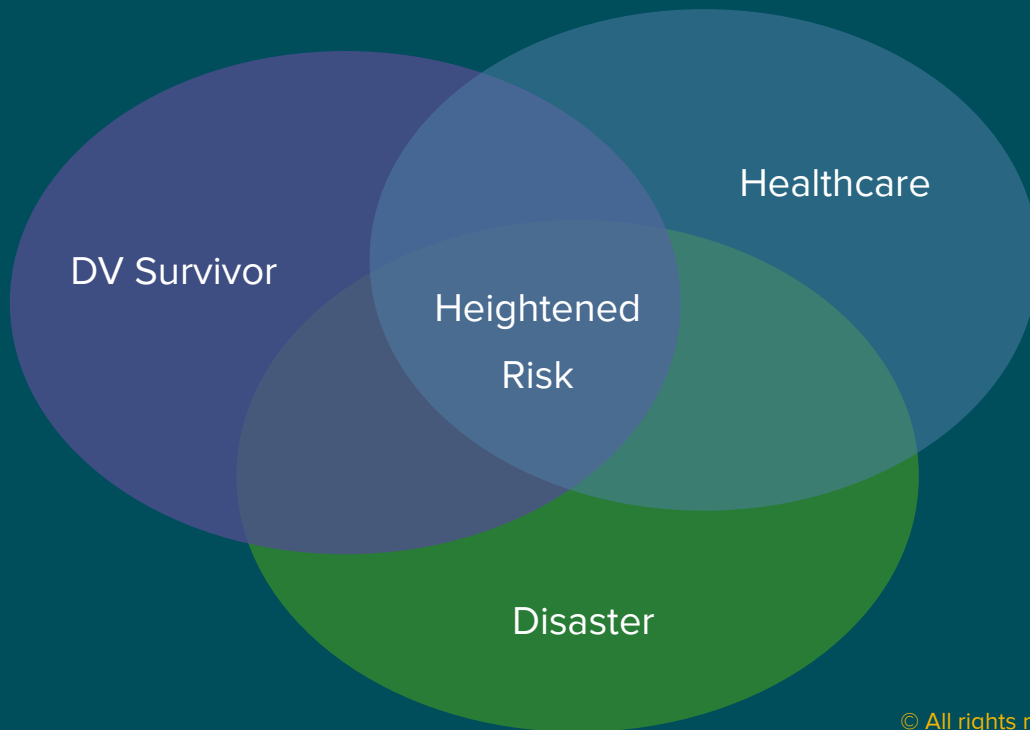
Sara Hicks-West, M.A., CDPM

Phoenix Collaborative, LLC

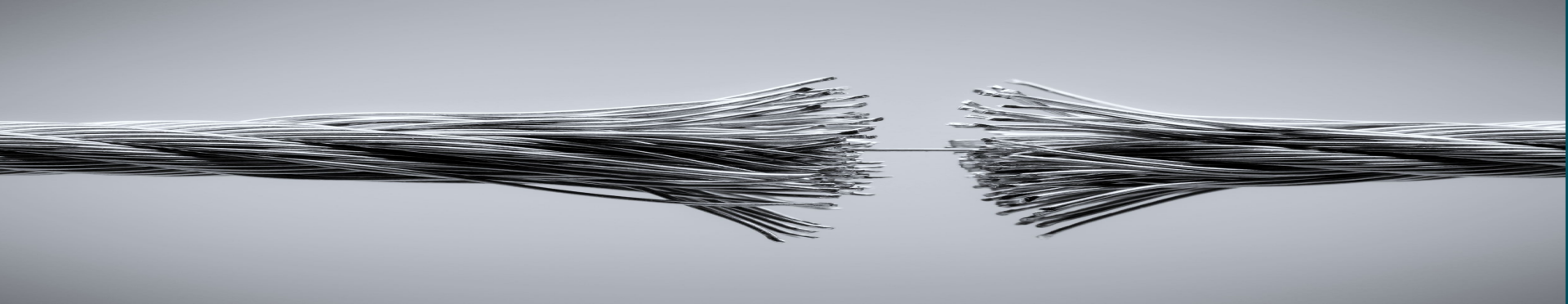
Founding Principal

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WHY SURVIVORS FACE HEIGHTENED RISK



- Compounding stressors
- Increased stress = Increased risk of violence
- Limited privacy, safety gaps
- Displacement from community and personal networks
- Lack of funding
- Property loss as key factor for disaster resources



THE COST OF INACTION

- Exploitation of risk, vulnerabilities by harm doers
- Increased reliance on/connection required of abusers (potential delays in court systems, accessing disaster assistance, loss of community)
- Survivor needs sidelined (increased risk of food/housing/financial insecurities due to a lack of ability to access disaster resources and a loss of survivor's safety net.)

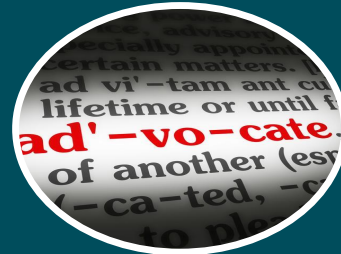
What Healthcare Can Do — Now



Build partnerships
(EM, Red Cross, CoC,
DV providers) to
ensure continuity of
care for survivors



Integrate safety +
privacy planning into
disaster protocols



Use healthcare
authority to advocate
for survivor
protections in
disasters



Community training
and exercises that
include crisis care

Why Pre-Event Relationships Matter



Build trust and clarify roles
before disaster strikes



Healthcare and survivor
advocacy voices are vital at
planning tables



If you're not at the table
before, you won't be at the
table when it counts

Healthcare's Role: Safety, Dignity, Continuity of Care

- First point of contact, trusted by survivors
- Preparedness protects safety, dignity, continuity of care



**How will we ensure
survivors aren't left
behind during the next
disaster?**



PHOENIXcollaborative
Sara E. Hicks-West, CDPM
Founding Principal

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470-637-0749 | www.phoenixcollaborativellc.org

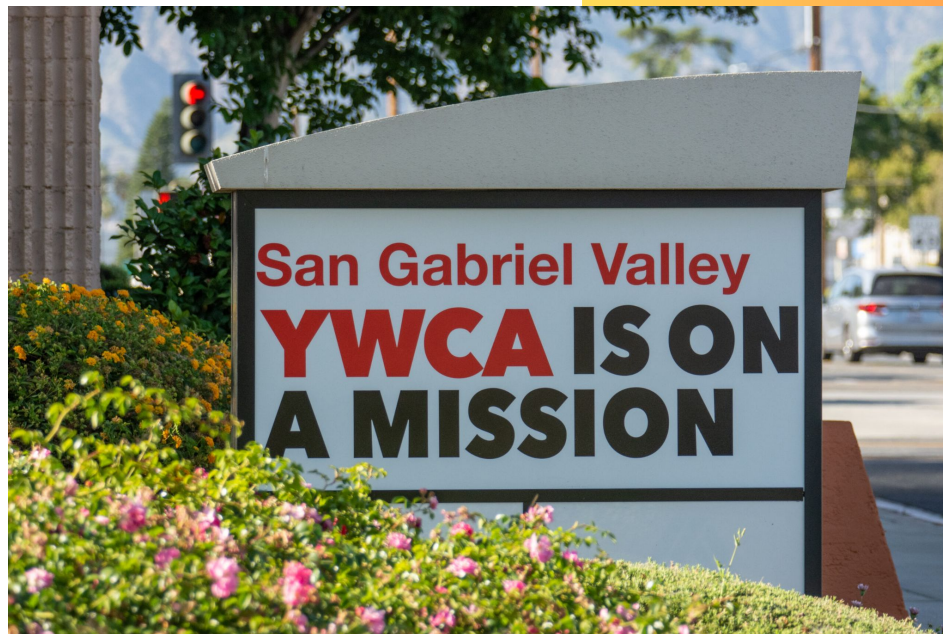


@phoenixcollaborativellc



Debra M. Ward, MPH
Chief Executive Officer
YWCA San Gabriel Valley

YWCA



ABOUT US

Since 1935, YWCA San Gabriel Valley has been a catalyst for change - supporting women, families and communities, and championing peace, freedom and dignity for all.

We deliver a wide range of direct services to meet urgent needs, offer educational programs that transform hearts and minds, and collaborate with community partners to address social and health related needs.

Through our programs, including Senior Services, Domestic Violence Services, Case Management, Youth Services, Fire Relief & Recovery and the WE Empower Center, YWCA San Gabriel Valley is creating healthy, resilient families and communities where every person has equal access to opportunity and the ability to live a full and thriving life.



90-YEAR HIGHLIGHTS

1935-1937

The Young Women's Christian Associations (**YWCA**) **San Gabriel Valley** files Articles of Incorporation, and becomes an official member of The YWCA of the United States of America. The YWCA San Gabriel Valley begins to provide resources to the City of Covina and neighboring communities.

197

9 The **Women in Need Growing Strong (WINGS) DV shelter is created** to provide survivors and their children with shelter and resources. Today, the WINGS Shelter is the largest in the San Gabriel Valley and the second largest in LA County.

2000

In 2000, with the addition of the Monterey Park site, YWCA-SGV is providing group dining meals through Intervale Services at **22 meal sites**, representing more than 19 cities throughout San Gabriel Valley

2022

A **new building** is purchased in February of 2022, with the ribbon cutting in May. This new location is home to the YWCA-SGV administrative and public facing programs, including a community hub we refer to as our **Wellness Center** for workshops and community events.

194

During **WWII**, the agency extends services to Japanese girls and women who have been evacuated to relocation centers. Special programs and camps were designed for women and girls in San Gabriel Valley. Career development and job readiness programs were created for women.

198

6 YWCA-SGV joins and acquires **Intervale Senior Services** to provide low income (60+) seniors in the San Gabriel Valley with nutritional meals. The program consists of three Senior Meals Programs in Bassett, Baldwin Park, and Rosemead and a small home delivered meals program serving those areas.

2020

YWCA-SGV becomes an essential provider during the **COVID-19 Pandemic**. Our service numbers tripled as new clients join the Elderly Nutrition Program and we provided over **1 million meals**.

2025

Establishes a **Fire Relief program** to assist individuals and families impacted by the Eaton Canyon/Altadena fire. This initiative provides both short and long term resources to over 900 impacted clients and their families in the first 6 months.

OUR VALUES

Commitment



Commitment to the mission and vision, and serving people with excellence

Compassion



Compassion and respect in understanding experiences, perspectives and actions

Integrity



Integrity in relationships, decisions and practices

Collaboration



Collaboration with partners in the region to achieve shared impact

Empowerment



WHAT WE DO

Senior Services

- In-Dining meal programs at 23 Senior Centers across San Gabriel Valley
- Home-Delivered Meal Program
- Case Management
- Meals on Wheels Program

Domestic Violence Services

- Residential Services - Emergency and Transitional Shelter Program
- Nonresidential Services - Group and Individual Services
- Children's healing center Program
- Individual Counseling
- Case Management
- Lifeskills Development & Enrichment
- 24/7 DV Crisis Helpline

Family & Case Management Services

- Resource Referrals - housing, government support services, partner organizations, legal services
- Assistance applying for government programs, filling out forms, applying for licenses, etc.
- Translation of forms and documents into English, Spanish, or Mandarin Chinese
- Rental and Housing Assistance

WE Empower Center

- Educational Workshops - wellness, financial literacy, technological literacy, meditative practices, and more
- Community Events & Resource Fairs
- Youth Services Program
- Youth and Community Computer Lab

Social Change & Innovation

- SGV-AAIMM - Addressing birthing and maternal health disparities through community engagement initiatives
- Continuous staff training

Fire Relief & Recovery

- Financial Assistance
- Case Management & Emotional Wellness
- Medication/Durable Medical Equipment
- Essential and nonessential supplies
- Referrals



COLLABORATION IN ACTION:

DVHC PARTNERSHIP



YWCA-SGV

DVHCP

**DVHC Leadership
Council**

**Health Center
Entities**

**Educational
Entities**

LACo
Public Health

Jenesse

ELAWC

CLASoCal

Central Neighborhood
Health Foundation
Mobile Clinic

East Valley Community
Health Center

APU

CSULA

Cal Poly

Claremont
Colleges

101 SOUTH

THANK YOU

Debra M. Ward, MPH (she/her)
debward@ywcasgv.org

eliminating racism
empowering women

ywca

San Gabriel Valley



YWCA San Gabriel Valley



YWCA San Gabriel Valley



YWCA_SGV



ywcasgv



ywcasgv

Badillo St

Since 1935



WHERE YOUR *Silence* IS *Heard*

Rebeca Melendez, MA
Associate Director at The Wellness Center
East Los Angeles Women's Center



Nuestra

Historia

The East Los Angeles Women's Center was founded in 1976 by community volunteers who established the first bilingual hotline in the nation.

Today we are recognized as a leading voice for 1000's of survivors. We provide culturally responsive services specifically for Latino Communities in the areas of sexual assault, domestic violence, human trafficking, HIV/AIDS and an array of services that inter-connect.

Nuestro



Legado



Nuestro Propósito

Our purpose is to ignite Esperanza – Hope in the lives of women and their families impacted by domestic violence.

Using a holistic and family-centered approach.

We recognize and honor the cultural strengths of the communities we serve.

Women and more than often Latinas are silenced by fear, social norms, religious beliefs and gender roles. Together we can help break the silence and help individuals and their families seek help and live in peace.

We provide services rooted in positive cultural influences that help families become grounded, centered, and interconnected. We are committed to creating culturally responsive programs that create violence free lives.

Nuestro

Servicios

- Promotora Institute
- Promotora Collectives
- Promotora Community Engagement

- Leadership Development
- Violence Prevention

- Men's Healing Circle
- Men's Talking Circle

COMMUNITY ENGAGEMENT



CORE INTERVENTION SERVICES



- Sexual Assault Services
- Domestic Violence Services
- Human Trafficking

HEALTH INNOVATIONS



- Wellness Center @ LAC+USC
- HIV/AIDS Services
- Substance Abuse Services

HOUSING SERVICES



- Hope & Heart Project - Hospital Based Emergency Services
- Housing Assistance Program for Victims of Domestic and Sexual Violence

MALE ENGAGEMENT

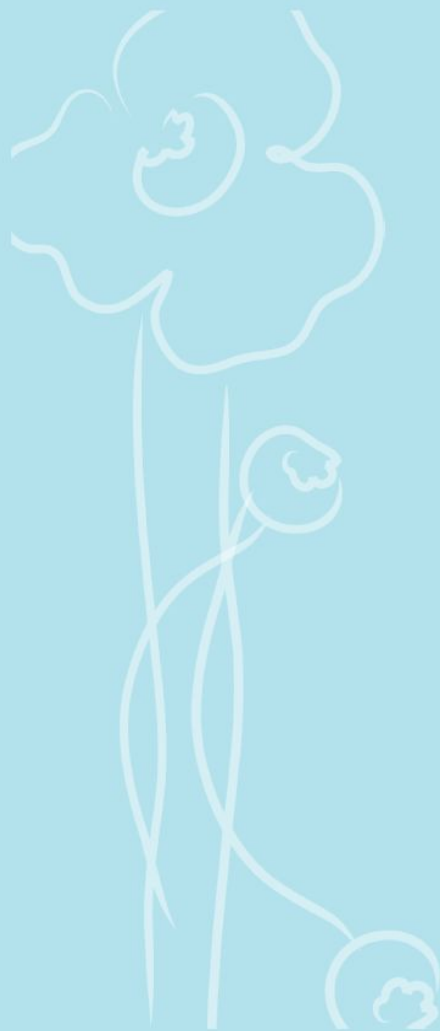


YOUTH SERVICES



East Los Angeles WOMEN'S CENTER

An interconnected
model of services that
is culturally responsive
and trauma informed.



Our Voices
Will Not
Be Silenced



Panel Conversation

Facilitated by Virginia Duplessis, MSW

Key Resources and Tools



Health Cares About Domestic Violence Day Resource Sheet

The collage features three main resource sheets:

- Health Cares About Domestic Violence Day Resource Sheet (HEALTH PARTNERS ON IPV + EXPLOITATION):** Includes a 'Sample Health Center Protocol' (available in English & Spanish, offering a model to guide HCs), a 'Quality Assessment/Quality Improvement Tool' (providing guiding questions to assess quality of care), 'Supporting Survivors of Violence and Abuse in Oral Health Care Settings: A Patient Brochure and Guide for Staff' (a 2-page guide), and 'Enhancing Emergency Preparedness in Health Centers for Addressing IPV/HTL' (a 4-page educational brief).
- NATIONAL HEALTH RESOURCE CENTER ON DOMESTIC VIOLENCE:** Features a 'FUTURES HRC Resource' section with links to various tools and a QR code.
- The Center on Partner-Inflicted Brain Injury Resources:** Lists 'CARE tools at www.odvn.org' and provides a link to <https://www.odvn.org/brain-injury/>. It also lists 'Client Resources' (Post-Injury Education Card, Head Injury Education Card, Brain Injury QR code, Invisible Injuries Overview, Invisible Injuries Booklet, Just Breathe) and 'For Service Providers' (Partner-Inflicted Brain Injury Promising Practices, CHATS (2024), CARE Head Injury Accommodations, Making Groups Effective).

The Futures Without Violence logo is visible at the bottom of the first two sheets, and the Ohio Domestic Violence Network (ODVN) logo is at the bottom right.

<https://futureswithoutviolence.org/initiative/national-health-cares-about-domestic-violence-day/>

Emergency Preparedness and IPV



Consider IPV/sexual violence and human trafficking when working in areas faced by a natural disaster or public health emergency because of the increased rates of that are known to follow.

Emergency preparedness and IPV/HT/E briefs to inform your organization's systems change.



Enhancing Emergency Preparedness in Health Centers for Addressing IPV, HT, and Exploitation

Authored by Dana Trampas, Kimberly Chang, MD, MPH, and Anna Marjavi

PURPOSE:

This educational brief outlines strategies for enhancing emergency preparedness in health centers (HCs), focusing on intimate partner violence (IPV), human trafficking (HT), and exploitation (E). By implementing improved protocols and strengthening community collaborations, HCs can better serve vulnerable populations during public health emergencies and natural disasters.

THE ISSUE:

Health Centers (HCs) provide essential care to 32.5 million people annually, including those uninsured and impoverished. IPV is a prevalent issue with 1 in 2 women and 2 in 5 men report experiencing IPV in their lifetime—patients who experience IPV, HT, and E experience a range of adverse health issues. Emergencies increase the incidence as survivors face heightened isolation and reduced access to services, making it critical for HCs to strengthen their preparedness.

BACKGROUND:

Historical data show that crises exacerbate rates of IPV and HT/E. For instance, reports of abuse and trafficking surged during Hurricane Katrina and the COVID-19 pandemic.

MITIGATION (PRE-CRISIS)

Actions taken to prevent or reduce the causes and impacts of disasters. HCs can:

- Formalize partnerships with community-based domestic and sexual violence (D/SV) programs, and anti-trafficking programs.
- Adopt the CUES Intervention and educate all staff on the dynamics of IPV and lessons learned from recent disasters or public health emergencies.
- Coordinate with state and local health departments as part of their emergency management planning, preparedness, mitigation, and response efforts.
- Develop medical-legal partnerships and establish connections with culturally specific programs (e.g., elder, youth, community centers, etc.).
- Integrate trauma-sensitive social drivers of health (SDOH) assessments into routine care to better understand patient needs and risks.
- Conduct an area-specific risk evaluation by analyzing the most likely future disasters in the local area, paired with a community needs assessment.
- Consider impacts of IPV/HT/E on staff and implement workplace policies.

Building Partnerships

Prep Your Practice

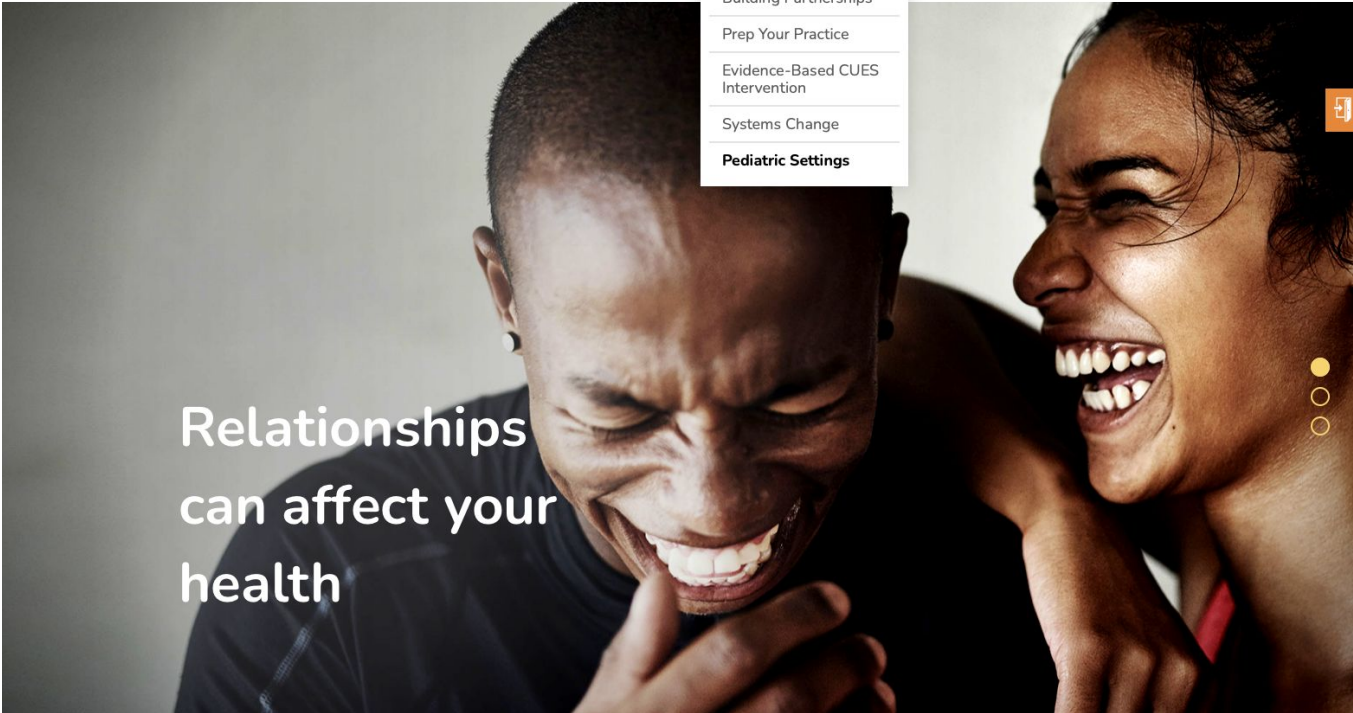
Evidence-Based CUES
Intervention

Systems Change

Pediatric Settings

Online toolkit:

- Implementing CUES
- Developing partnerships
- Changing practice
- NEW! Addressing caregiver IPV in pediatric settings



Relationships
can affect your
health



**Please take a moment to fill out
the evaluation poll popping up on
Zoom now!**

We appreciate your feedback.

Join us for an Upcoming Community of Practice!

Registration closes today at Midnight!

Health Partners on IPV+ Exploitation will host four free virtual educational sessions to discuss intimate partner violence, including: prevalence and definitions; clinical change strategies including the CUES intervention; HRSA's UDS measures on IPV/exploitation, and referrals and collaboration strategies to develop comprehensive health center responses.

Dates: Wednesdays: October 22; October 29; November 5; and November 12, 2025

- @7am HST/10am PST/11am MST/12pm CST/1pm EST
- (4 - 60 minute sessions)



**BUILDING HEALTH CENTER
RESPONSES ON INTIMATE
PARTNER VIOLENCE
(4 PART COMMUNITY OF PRACTICE)**

MIGRANT CLINICIANS NETWORK
MCN

HEALTH PARTNERS
ON IPV + EXPLOITATION

Health
Outreach
Partners

REGISTER HERE



Thank you!



To stay connected & informed

Sign up for our monthly digest *Catalyst for Change*
at the bottom of our website:

healthpartnersipve.org

and

Join the health team's monthly newsletter:

futureswithoutviolence.org/form-page

