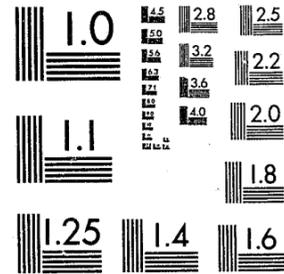


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PROJECT MANUAL

94516

TO SET UP A COMMUNITY
ED PROGRAM for BATTERED
MEN and THEIR FAMILIES

94516

U.S. Department of Justice
National Institute of Justice 94516

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PARK SLOPE SAFE HOMES PROJECT

TECHNICAL ASSISTANCE MANUAL

*How to set up a community-based program
for battered women and their families*

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May 1980

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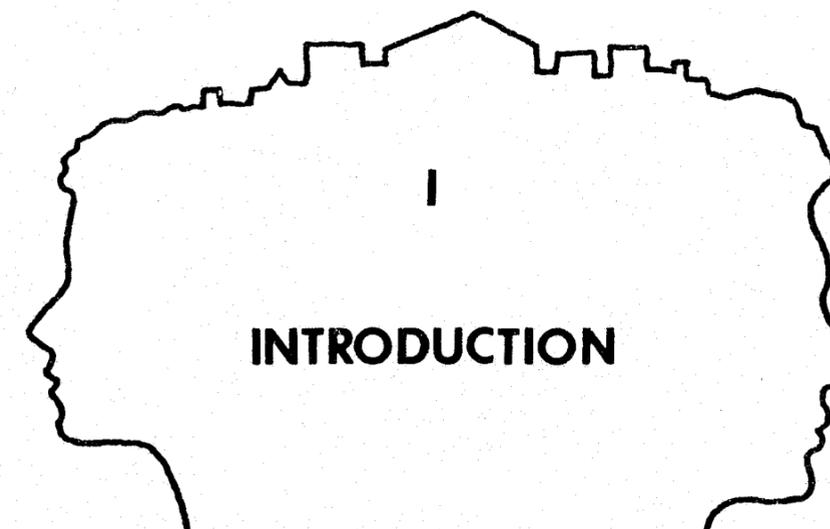
HOW TO USE THIS MANUAL

This manual contains materials that will be useful in setting up community-based safe homes projects. Each section of the manual can be looked at as a whole, i.e. at the end of each section describing a program or service the reader will find forms or materials that pertain to that content area. For example, at the end of our Hotline section, the reader will see Hotline log sheets and Hotline Service Interaction Forms. Each form is titled and noted as a "Sample Form." We have chosen this format rather than appendices so that you can understand our Project and the way each component works as clearly as possible as you read.

Several forms will be mentioned but not included in this manual because they are specific to our Project or to New York City and would not help the general reader. We have developed detailed memoranda for our staff and volunteers describing New York City welfare, court and police procedures and the rights of battered women. Such information, readily available, is essential for providing effective advocacy, and information to battered women. We suggest that each project needs to develop these materials considering its local conditions.

A videotape is available as a complement to this manual; it shows various aspects of the Project in operation and gives more of a personal feeling for who we are and how we operate than is possible in a written manual.

Note: Names and other identifying details have generally been deleted or changed in the text of this manual, for reasons of safety and confidentiality.



"I was unrecognizable, my face was all swollen and marked and my eyes were all marked, and my nose was enormous, and my mouth, I had a cut inside my mouth ... I was too ashamed to let anybody see me, you know, the state I was in ... you see, he's the type of person that believes a man can do what he likes, and a woman can't, you know what I mean ... I was just inferior ..."

(Dobash, pages 619-620)

"The husband's violence against her contradicts everything she has been taught about life, marriage, love and the sanctity of the family. Regardless of the circumstances in which she grew up, she has been taught to believe in romantic love and the essential perfection of married life. . . . Wife-beating is not on a woman's map of the world when she marries. It is, quite literally, beyond her imagination. Because she does not believe that it could have happened, that he could have done that to her, she cannot believe that it will happen again. He is her husband. No, it did not happen."

(Dworkin, pages 32-33)

"Well, he just started shouting and bawling and then he just called me names, you know, swearing at me. And he started hitting me, punching me and he kept punching m[y] face all the time. It was my nose, and he wouldn't let me sit down or anything. He made me stand in the middle of the floor. He wouldn't let me get into bed and I was screaming . . . He just kept punching m[y] face. He'd walk away, maybe go into the kitchenette, come back and have another punch at me. . . . he realized that somebody could hear him and he went to his bed and told me I wasn't to go to bed. I was to stand in the middle of the floor."

(Dobash, page 618)

"Living with him is like walking on eggs."

(statement by Park Slope battered woman)

OUR PHILOSOPHY AND OUR SERVICES

Four million women a year of all classes, races and ethnic groups live in daily fear of beatings from their husbands or male partners. These women suffer physical injuries, bruises and broken bones, and also the long-term consequences of shame, fear, emotional pain, and enormous dislocations and readjustments for them and their children.

As a result of the women's movement of the 1970's more and more women are speaking out about this pervasive problem. Ways to help women, and to change social conditions that lead to or encourage violence against women, are being developed and formerly battered women are taking an active role in this process.

The Park Slope Safe Homes Project is one of these responses. This brief introduction explains our philosophy about violence against women, so that the reader can understand our assumptions and the goals and programs that grew out of them.

Violence against women is degrading and dehumanizing. To understand why women get beaten by the men they are involved with it is necessary to look at social and institutional patterns. If millions of women are attacked annually in their own homes, it must be that parts of our culture and our institutions have approved this behavior by men, either openly or indirectly.

Most battered women tell stories of seeking out help only to be told that the beating was a private, family matter, their own problem, and no one else wanted to be involved. These comments have come from ministers, rabbis, and priests, from doctors and psychiatrists, even from friends and family members. This refusal to recognize the problem or provide help, and the consistent refocusing on the woman and blaming her is an important reason that violence against women in the home continues.

Until recently a wife was legally her husband's property. Although the historic right to beat or physically punish a wife no longer exists legally in our society, some men act as though they still have the right. Many men in fact believe that they do have the right. And this belief is often reinforced outside the family. Generally, men know that there are no consequences for the beatings they give their wives or girlfriends. And women have learned that there is great risk in reaching out for help since this often brings another beating or further humiliation.

The old practice of men beating their wives is encouraged by the splitting off of the family from the rest of society. These days the family is a private, personal world; what goes on in a family is supposed to be nobody else's business. Women are taught to maintain the family at all costs; if the marriage fails, the woman has been taught to believe she has failed. These values are taught to all of us from childhood, and build up enormous pressures on young couples. They result in terrible guilt and shame. And still no one is supposed to admit what goes wrong in the family. Keeping unpleasant truths secret keeps women isolated and therefore vulnerable to violence.

It is a harsh fact of life that many women would have very little or no opportunity to make a decent life for themselves outside marriage. Leaving a man -- even a violent one -- is difficult. It may actually seem impossible to a woman with children. In 1976, minority women were averaging \$7825 as a *full-time* annual salary. Over-all, women employed full-time are paid less than 59¢ for every dollar earned by men in the same kinds of jobs.¹

Even for a woman who may have decided that she is ready to get out, there are concrete, practical obstacles at every turn:

- 1) What safe place can she go to, especially with children, while she begins to sort out a new life?
- 2) What will she (and the children) live on immediately?
- 3) How can she get a job with an income adequate for herself and her children? What would she do about medical bills? Where will she find decent, affordable child care?

The community offers few, if any, answers. And the woman knows that she must fight prejudice against her, the victim. Far from condemning violence against women, her neighbors seem to approve of it. Jokes on television about wife-beating and threats of beatings are commonplace. But the battered woman does not laugh -- she lives in fear -- and she has no place to go.

Our Project has grown out of this view of the battered woman's situation. Our understanding of battering means that we see violence as unacceptable under any circumstances, and as the responsibility of the man to stop. We never blame the victim.

We support the right of women to live free from violence, and to have choices about their own lives. Our support takes the form of many services, including: community Safe Homes, a Hotline, individual and couple counseling, advocacy, and financial help for food, transportation, clothing and shelter on an emergency basis. Details about each of these services form the bulk of this manual.

Our understanding that one cause of battering is the tradition of secrecy leads us to insist that the whole problem be aired in public. The Park Slope Safe Homes Project is based in one community and is able to offer ongoing services only to Park Slope residents, but callers from outside the community are offered support and information.

The Project was developed by local groups: Children and Youth Development Services (CYDS), the Park Slope Clergy Association, and community residents. CYDS continues to fund and provide the paid staff for the Project. From the beginning, however, violence against women has been seen as a

1. From statistics put out by the Women's Bureau, Department of Labor, August 1978.

problem the entire community must take responsibility for. The community must not isolate or just send its battered women away. It must mobilize to help. So volunteers from the neighborhood have provided staffing for our Hotline, Safe Homes as temporary shelter, and a Speakers Bureau providing active outreach and continuing education.

A community-based project emphasizes that violence against women is an issue for everyone; it works at breaking down the dangerous and false idea that battered women are different from other women or somehow weak or sick. Violence and the potential for violence affect all women's lives.

The community model also means that we have a constant input of strength and support. All members of the community are welcome to be involved in the Project. We currently have 50 community volunteers. We encourage the participation of both men and women in the community. There are, however, different ways for men and women to be involved. Our Hotline volunteers are all female, except in emergencies when male clergy are called upon to help us. Men have a number of specific roles: they can provide counseling to other men or to couples if a woman requests it; they can work on projects such as this manual or our videotape. It is women, however, who offer direct services through our Project to women who have been battered. Also, because battering happens fundamentally as a result of male domination in the society as a whole, we insist that women hold paid staff positions and volunteer leadership in determining the direction and goals of our work.

We have close ties to hospitals, a police precinct, churches and schools. Battered women can contact us through a variety of channels and we can meet them in comfortable, safe places. We have worked hard to develop sound relationships with other community agencies. Fortunately CYDS and the Family Reception Center, a sister agency in the neighborhood, have staff people working in key institutions such as the schools and police precinct. Where no such direct contacts exist, "referral relationships" have been developed. For example, at a local hospital all battered women coming to the emergency room are seen at the hospital's Pastoral Care Office and immediately referred to our Project.

We also hold institutions accountable for their treatment of battered women. The official sanctioning of violence against women can be seen clearly when battered women go to the police, courts, welfare centers and hospitals for help. Denial of services, degrading treatment, blaming the victim or denial of her rights have been common. Recognizing this pattern as a cause of the perpetuation of violence, the Project provides advocacy, by paid staff or volunteers, when needed. We know that active outreach and sometimes confrontation with institutions on behalf of battered women are necessary. Pressure upon institutions, accompanying women through various bureaucracies, educational and training seminars for the workers in these agencies, are a regular part of our services. Without these efforts we would be contributing to the general social approval of violence against women.

Any community can develop an effective helping response to battered women. We have taken our local resources, formal and informal helping networks, and shaped them into services for Park Slope women and their families. We are willing to visit and assist any other community interested in setting up its own safe homes project. For a community-based model to be

effective, however, we think that all the project components discussed in this manual -- Hotline, Safe Homes, Counseling and Advocacy, Referrals, and Community Outreach and Education -- must exist. Real alternatives for women must be provided.

Because of the bureaucratic and often punitive response to battered women and the lack of resources in New York City, we could not function without active support from other programs that also provide services to women, specifically legal services and shelters. We have chosen not to institutionalize our own services in the form of a shelter. We do, however, often use shelter services for women who have nowhere to go after a three-night Safe Home stay. Cooperative relationships with other battered women's services and coalitions are essential for the functioning of our Project.

We realize that we have just begun to deal with the problem of violence against women in families. Much more needs to be done both within and outside Park Slope. We know our outreach must continue vigorously if we are to reach all the battered women in our community. We know that we must struggle actively for the many services battered women still need; in all of New York City there are only 300 shelter spaces for women and children, i.e. 100 women with three children each will fill all the beds. Concrete financial assistance, jobs, housing, decent child care, social and economic equality for women all must exist so that our ultimate goal can be reached: the elimination of violence against women.

DESCRIPTION OF PARK SLOPE AND OUR SPONSORING AGENCY

Park Slope is an urban neighborhood within the Borough of Brooklyn, in the City of New York, with a population of approximately 85,000. It is a multi-ethnic, multi-racial community with a wide range of income levels, from poor to wealthy, although Park Slope itself lies within a more broadly defined "poverty area." Within the neighborhood are roughly outlined geographic and ethnic sub-communities: Haitian, Italian, Polish, Egyptian, Puerto Rican, West Indian, American Black, Irish, South American -- each with its own cultural richness.

Park Slope is undergoing a changing pattern of development -- simultaneous "brownstone revival" ¹ along side of landlord housing abandonment. These patterns have created a trend towards displacement of low and moderate income families. Park Slope has also been known as a community of churches, and the clergy played a role in the original development of this Project.

Despite underlying tensions and sometimes outright conflict, many residents have a sense of community effort and responsibility, pride, and association that makes diverse resources of the community available to us. It was this community spirit coupled with the leadership provided by a community agency and the local clergy association, which made possible a new kind of program that would respond to battered women and their families within Park Slope.

1. "Brownstones" are the row houses built throughout New York City in the last half of the 19th Century. Most had been neglected for years until a trend began in the early 70's, of middle class families buying and fixing them up.

Children and Youth Development Services (CYDS) is a community development agency with a "systems" orientation. This made it an ideal community organization to start the Safe Homes Project. CYDS approaches community development as a way to create social change. This involves an on-going assessment of needs and resources within the community; development of programs to respond to those needs; and learning from its operating programs which areas need immediate or long-term advocacy for broad policy changes.

CYDS is a private agency which receives funding from the New York City Youth Board. The Safe Homes Project Coordinator is currently a staff member of CYDS, which has a wide range of other community programs. Its programs and services include: year-round and summer recreation for youth and teenagers; a youth employment program; working against displacement of low and middle income families; police precinct project, with a social worker stationed in the precinct; advocacy within the education system for the accountability of public schools to the local community; and participation in other community-wide issues in cooperation with other agencies.

When analyzing a social problem, the "systems approach" of CYDS does not isolate the individual, the group, and the community from each other. It sees interaction among the three on many levels. And it assumes that, since any particular problem involves all three and has an effect on all three, any program developed to deal with that problem must also relate to all three.

When the battering of women was identified as a problem which CYDS would work on, this "systems approach" was applied. First, it was clear to only a few people that this was a community-wide problem. Official agencies dealt with it informally; for example, the hospitals kept no specific records on battered women and often did not inquire about it, although hospital personnel may have been suspicious about how bruises and broken bones were obtained. Also, some individuals, although not themselves subject to domestic violence, were aware it was a problem. The police and the clergy reported a high incidence of abuse of women, and ordinary people were aware of neighbors' situations, having heard their cries and sometimes seen their injuries. Yet it was all kept behind closed doors.

Even when these women battered by violent men managed to break out of their isolation and seek help, they met with obstacles: disinterest, disbelief, lack of resources. Any effective program would have to relate to all the systems involved: police, medical, legal, welfare. And it would have to relate to these systems on many levels: developing practical, cooperative relationships with individual workers; acting as an advocate when the women confronted obstacles within the various systems; sensitizing the workers to the problems of battered women; and educating workers so that they would take responsibility for their part in perpetuating the problem, and learn how to make positive changes.

This systems approach had been applied at CYDS to other social problems in the past, and the agency already had a network of links to some of the systems important to battered women. These connections gave the Project an important headstart in setting up a useful, community-based program. They included the CYDS worker stationed in the police precinct, and a positive

relationship with the pastoral care office of a local hospital.

The following example may clarify the implications of a systems approach for a program for battered women: through our own research, and the cooperation of a legal services agency (legal system), we learned that the City Department of Social Services' own rules gave battered women priority status for receiving services (welfare system). But these rules were often unknown to the workers who serviced clients. So we gave every woman going to welfare a referral letter which mentioned this mandate by its official number, and followed up with phone calls or personal contact if she met with problems (education and advocacy).

Another example is our support of a class action suit (police and advocacy) which addressed the unresponsiveness of police to battered women. The suit resulted in new guidelines which each woman in our Project is informed of, giving her the ability to act more effectively as her own advocate, and also the confidence and knowledge about how to obtain an Order of Protection and have it enforced (police system).

It is important that any program providing assistance to battered women identify each bureaucracy's own rules and guidelines relating to the situation of battered women, and know the steps necessary to obtain services. It must know the woman's rights within each system, and have legal back-up for effective recourse when these rights are abridged or denied. If guidelines or clear statements of policy do not exist, then the creation of a coalition of community groups and a legal unit to advocate for appropriate services and responses could be an important first step.

We see the battering of women as a complex social issue and are committed to working for an effective response to the needs of battered women as individuals in a social context.

HISTORY OF THE PROJECT

"We started with a half dozen or so homes in the community being willing to provide safe haven for battered spouses and a dozen or so people being willing to counsel and befriend the victims. . . . It is unbelievable that an idea with such a meager beginning has grown into such a vital service of our community."

(statement by Director of hospital Pastoral Care)

The Park Slope Safe Homes Project originated in spring of 1976, when Kathryn Conroy, the Community Developer of CYDS, spoke at a meeting of the Park Slope Clergy Association. A clergyman brought up the issue of battered women in the neighborhood. He and the CYDS Community Developer subsequently researched the issue and became convinced that the problem was widespread and there was a desperate need for an effective response.

By fall 1976, a plan had been developed, and the name "Park Slope Safe Homes Project" had evolved. The idea was for the Clergy Association

and CYDS to share responsibilities in a program involving outreach and community education efforts, and the use of volunteers to provide counseling and "safe homes" for a short period of time.

A small group of women met in November to discuss what had been done so far, and offer suggestions. As a result, the Project decided to provide training for hospital chaplains who would be answering a Hotline, and three women volunteered to be Counselors.

Then in December a community-wide all-day Saturday workshop was held. About 30 women and men attended. They saw a videotape: "Battered Wives," made from an NBC Weekend Report. Also, Terry Davidson, author of Conjugal Crime, and Carol Victor of the Growth and Life Institute, spoke at the workshop.

Out of this meeting came volunteers offering their services as Safe Homes, Counselors, and even a trainer for Counselors and Hotline volunteers.

In January 1977 fairly intensive training of people in the hospital Chaplain's office, and of volunteer Counselors, began. There was strong mutual support between the hospital Chaplain's office and CYDS at this time. The CYDS Community Developer and a volunteer developed and provided training. The Chaplain cut hospital red tape, made clerical services available, and worked on obtaining a Hotline phone to be located in the hospital.

There were originally fifteen Counselors; another fifteen were trained over the next three years. Most have had previous experience as social workers, pastoral care workers, counselors, psychologists, or researchers, with experience in interviewing.

So in early 1977 the Project had become defined as a community-based network of services for Park Slope battered women and their families. The network included community volunteers who provided short-term crisis services: a Hotline, crisis counseling, and emergency shelter. It had also developed a list of referral sources for longer-term help which included health, legal, law-enforcement and social service agencies and institutions. The Project was still coordinated by Kathryn Conroy of CYDS.

From September 1977 through May 1978 the Project had its own part-time (three days a week) Coordinator -- Karen Wagner, a social work graduate student interning at CYDS. Her focus was on strengthening the existing structure of the Project.

At that time the Hotline was answered by male and female clergy interns at the hospital, who were enrolled in the Union Theological Seminary Clinical Pastoral Education Program. The Hotline operated 9 am - 5 pm, Monday to Friday. Crisis counseling (up to eight weeks) was provided by volunteers and the Project Coordinator; emergency shelter was available in "Safe Homes" in the community; and when appropriate, referrals to long-term shelters were made. Counselors also acted as advocates within the health, law enforcement, legal, and social service systems, although originally this was conceived as a separate job.

The Coordinator made personal contact with people in the other agencies which the Project used for referrals and support, so that there would be a solid basis for cooperation in the complex situations often involved in work with battered women. She also trained Hotline staff and volunteer Counselors (including male clergy as Counselors for batterers) and met with Safe Homes volunteers in their homes to clarify their role.

In May 1978 a total re-assessment of the Project, especially in its relationship to CYDS, occurred. The main question was whether the Project should try to be separate, independent, and self-sufficient, as originally envisioned. The problem of funding might have made this impossible, but in any case it was clear that operating within CYDS (see diagram page 23) gave the Project the advantage of direct access to CYDS' other programs, and also to its already strong links with other community programs. So CYDS continued to coordinate the Project, and its funding source added a new staff line for the Project Coordinator. Volunteers formed a Steering Committee to advise direction of the Project.

In summer 1978 the Project requested a grant of \$10,000 from the New York State Department of Social Services to: (1) expand Hotline coverage to seven days, twelve hours a day, (2) provide additional emergency shelter in a hotel and emergency transportation, and (3) develop a research component and technical assistance manual with an accompanying videotape. The position of Project Coordinator became full-time in September 1978. The State funds were awarded as of February 1979.

The first annual Crafts Sale, for fund-raising and outreach, was held in December 1978 in a local women's bookstore. It was coordinated, publicized and staffed largely by volunteers. The items for sale came from an art collective whose members donated a percentage of their sale prices to the Project.

There have been continuing efforts at volunteer recruitment, including articles in local papers (see page 130); leafleting at community events; press releases sent to PTA's, community and service organizations; and of course presentations for groups.

Volunteers have consistently enriched the Project with feedback and new ideas, working on such diverse projects as: a Project brochure, a logo, T-shirts, a Project flyer, cards with the Hotline number.

Along with expanding services made possible by the State grant came the necessity for expanded training for Hotline volunteers, and the improvement and expansion of training materials. A Hotline telephone was installed with a call-forwarding device.

In February 1979, when the State grant came through, the CYDS police precinct social worker (see page 40) became the Social Service Coordinator for the Project, because of the need for more staff to coordinate, to train volunteers, and to provide direct services.

A volunteer was hired as Research Consultant, and in consultation with the Coordinator she designed a research program. Another volunteer, with media experience, began the videotape project.

Also in 1979, volunteers coordinated major outreach programs and the Project Coordinator trained several volunteers as Community Educators. They made presentations using various materials including the videotape, "Til Death Do Us Part," for many groups, e.g. women's groups, high school classes, a youth leadership training program.

Further education of staff at a local hospital, on the subjects of battered women generally and the Safe Homes Project, was organized by a hospital Chaplain and the Project Coordinator with the cooperation of the hospital's Nursing Education Department.

Throughout its history the Project has been known as a resource for groups and organizations wanting to know more about services for battered women. There has been an increasing demand for speakers and training workshops.

All of these programs continue to expand and develop, with the constant input of energy, ideas and commitment from volunteers, now numbering about 50, and feedback from battered women themselves. The rest of this manual describes in some detail the present shape of the various Project components, and we conclude the manual with some words about our future. We urge the reader to understand our evolution as a response to needs and interests expressed by actual people living in a real place.

About our name: the Project was first given the name, "Park Slope Safe Homes Project" because the organizers were trying to provide a system of "safe homes" as temporary shelter in the community for battered women and their children. As the program developed it became clear that some women did not need a "Safe Home" but did need short-term crisis-intervention counseling. We retain the name because we hope to help each woman make her own home safe, and through outreach to make her neighbor's home safe, and through community education to make each house in the neighborhood safe. Our goal and motto: *Every Home a Safe Home.*

OVERVIEW OF THE PROJECT

The Park Slope Safe Homes Project is a community-based, local effort to coordinate existing formal and informal supports to provide emergency and/or short-term services to battered women, their children, and abusing partners living in Park Slope, a community of about 85,000 people in Brooklyn, New York.

The Project uses trained volunteers -- community residents who staff a Hotline, provide emergency, three-day shelter for battered women and their children, and offer ongoing community outreach and education. Extensive referrals to contacts within the health, law enforcement, legal, court and social service systems are made. Through follow-up on these referrals, services that exist borough- and city-wide are monitored to insure that help is provided.

The Project, sponsored by Children and Youth Development Services, is the only community-based program providing such services that is known to exist within the New York City area. Since it began in 1976, a significant number of Park Slope residents have been provided with crucial emergency

services. There exists within any community the potential for developing a similar service delivery program.

The current Park Slope Safe Homes Project is composed of a Project Coordinator, Social Service Coordinator and a network of four volunteer roles: Counselor/Advocate, Hotline Volunteer, Safe Home, and Community Educator. The Project provides the following services:

Counseling for battered women and their children

- Short-term, 6-8 weeks nonjudgmental counseling with emphasis on:
- Exploring the available legal, shelter, economic options
 - Helping a woman establish short- and long-term goals
 - Dealing with accompanying feelings of helplessness, isolation and ambivalence
 - Situation's impact on and implications for children
 - Providing couple counseling if the client requests it
 - Referral to and follow-up with long-term services if appropriate

For the batterer

- Short-term, 6-8 weeks counseling with emphasis on:
- Identifying patterns of unacceptable behavior
 - Defining short- and long-term goals
 - Referral to and follow-up with long-term services if indicated

Safe Homes

Emergency shelter for battered women and their children in private families' homes for a maximum of three nights, with meals provided by the Safe Home families

Hotline

Operating twelve hours per day, seven days per week to connect neighborhood women with counseling and shelter and to refer callers outside the community to appropriate resources

Systems Advocacy

Advocacy within the health, law enforcement, legal, court and social service systems, including accompanying battered women when necessary

Community Outreach/Education

Through the use of video-tape material and Speakers Bureau presentations, and in-depth training on the services available and the needs of battered women and their families

Volunteer Involvement

Recruitment and outreach through presentations to community groups; screening and training through workshops using materials developed and adapted by the Project; ongoing monthly meetings for purposes of supervision and support

CONFIDENTIALITY AND SAFETY

The issues of confidentiality and safety cannot be over-emphasized. Each battered woman using our services must be assured that what she shares with us will be kept confidential. Each volunteer must pledge to guard the confidentiality of any Hotline caller or battered woman who is being helped. All forms listing names of people using our services are kept locked. We inform any person calling our Project asking where a battered woman is, that no information of that kind is ever given out.

We try very seriously to guarantee a battered woman's safety as much as humanly possible. Safety precautions are essential for the women, and also for paid staff and volunteers. Only paid staff know the location of Safe Homes; their addresses are never listed publicly. Hotline volunteers, Counselors and staff are trained to assess the dangers immediately, for any person calling our Hotline. Women in danger are encouraged to call the police, or if possible, to leave their homes immediately and come to us. Staff and volunteers have also called the police when necessary. Counselors and Hotline volunteers have available a safe public location where they can meet a battered woman and her children. Clergy people have sometimes opened their offices to us when needed. All program volunteers, paid staff and battered women are asked to make an agreement not to divulge the location of Safe Homes, the hotel we use, our counseling offices or the shelters we use. Women using our services must promise never to break this confidentiality, even if they return home and feel they have "made up" with their partners. To date no address of any Safe Home has ever been divulged as far as we know. There have been no incidences of violence in the Safe Homes.

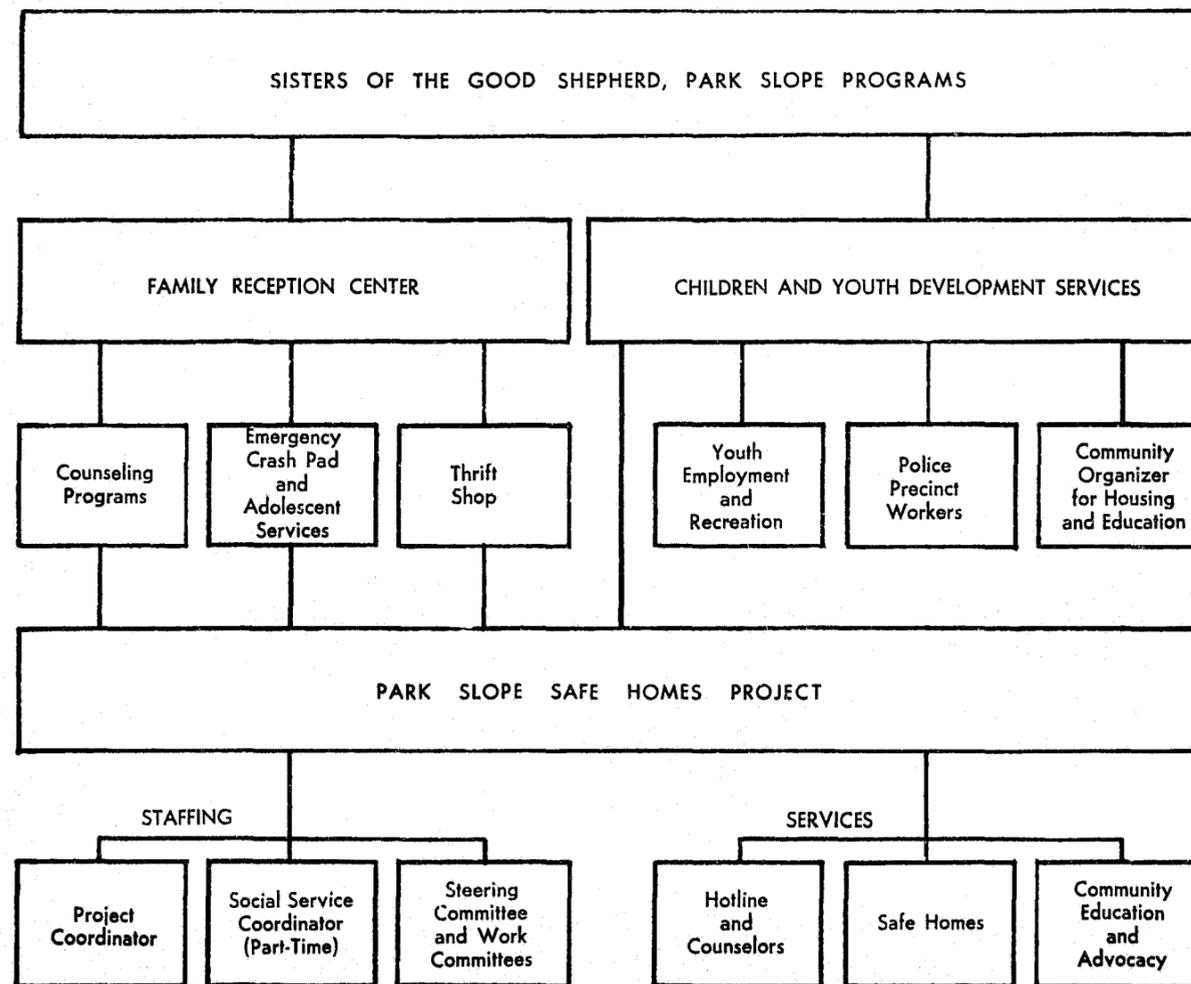
During Hotline, Counseling and Safe Homes training volunteers are encouraged to call staff back-up if they are frightened or unsure about their own or a battered woman's safety. Danger, safety and confidentiality are discussed constantly in our training. Role-playing always focuses on these issues during training. Included in this role-playing are questions that help a battered woman look at her choices and what they would mean for safety.

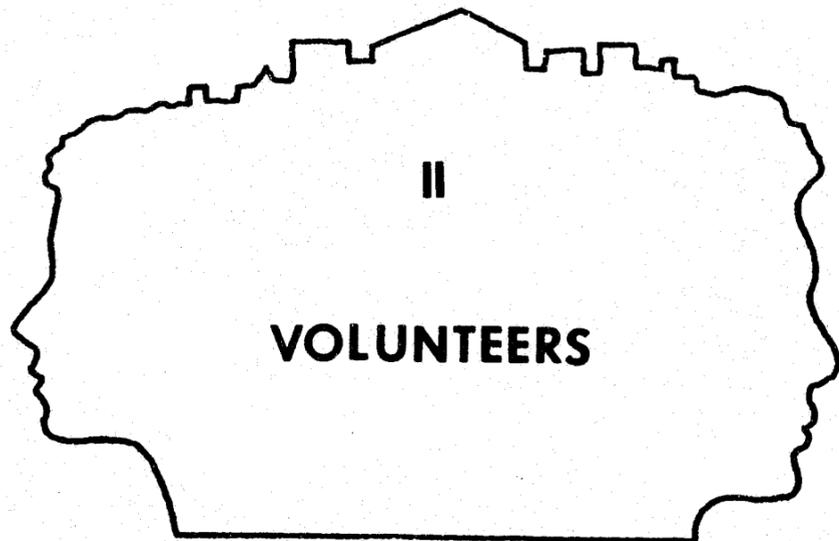
* * *

*"A spaniel, a woman and a walnut tree, the more they're
beaten the better they be." -- Old English Proverb*

* * *

DIAGRAM I VISUAL OVERVIEW OF SAFE HOMES PROJECT'S SPONSORING AGENCY





Personal Statements

by Project Volunteers

"I am very interested in working with this project because I am very interested in the issue of battered women, and this is a very important project not just because it helps to serve the needs of battered women, but also because it is community-based and serves as a support system in the community and depends on input from people living in the area."

"In working with displaced homemakers I became overwhelmed by the number of women I worked with that had been in abusive situations for years and years because they saw no other alternatives. I came to the conclusion that it was imperative that I found time to work on the issue of domestic violence against women."

"The Safe Homes Project combines at least two very important issues for me -- that of community responsibility and accountability to each neighbor, and also women's responsibility and support for each other. The Safe Homes Project has been unique in providing me outlets to work on both beliefs at the same time."

"It has been particularly meaningful to work with this project because it so completely touches on all the systems which blame women victims. By being a part of a project which stops seeing women as the problem and works at challenging oppressive systems, I have gotten a chance to channel my rage in a productive way for women."

GENERAL DESCRIPTION

Volunteers are absolutely essential to the Park Slope Safe Homes Project. Coordination and supervision of them by Project staff must be constantly flexible, open and adaptable, since schedules of volunteers are always changing.

It is a striking fact that most of the Project volunteers have either professional experience or extensive community involvement, or both. Park Slope residents are preferred as volunteers, because of our commitment to the idea and practice of neighbor helping neighbor, but exceptions have been made. All the volunteers have shown that they wish to be involved in their community and to work for its betterment. The need and desire to contribute is important, because the volunteers must be as versatile as the staff.

When a person indicates that she is interested in working for the Project, she is contacted by one of our Steering Committee members, a longtime volunteer, who phones the potential volunteer. She notes relevant information about the new person's background, along with her skills, interests, and time available. Our volunteer gives a brief overview of the Project and describes possible volunteer roles, i.e., Safe Home, Hotline or Outreach and Education, and also invites the potential volunteer to our monthly meetings. This phone call is followed up by a mailing which includes a Project description, brochure and flyer. About a week later, the Project Coordinator contacts the new person to set up an orientation and interview session.

Although there are four main areas where volunteers are utilized, people with special skills are welcomed by the Project. Currently, for example, there are volunteers doing research on the battered women being served by the Project and how volunteers respond to working in the Project; a volunteer is making a video-tape on the Project which will be used for speaking engagements and publicity; a brochure has been designed by volunteers; much of the writing, graphics and editing of this manual was done by volunteers. The posting of literature in stores throughout the neighborhood, as well as participation in various community activities such as block fairs and the Holiday Crafts Fair Benefit, are all accomplished largely by volunteer power.

The total number of volunteers ranges from 30 to 50. Some may be active in several Project areas. It would otherwise be difficult to keep well-trained, enthusiastic volunteers occupied. If the volunteer feels under-utilized, she becomes discouraged and loses interest in the program. In order to avoid this, many of the volunteers do special job assignments and/or work on committees, as well as participating in monthly meetings and additional training.

SELECTION AND SCREENING

Volunteers are selected on the basis of their interest in the Project, their commitment to battered women and their willingness to go through our training to provide quality services. To maintain the community-based nature of our efforts, we have decided that nine out of every ten of our volunteers must be Park Slope residents. Potential volunteers are invited to a general

orientation session and our monthly meetings. Each volunteer is carefully interviewed by the Project Coordinator or by an experienced volunteer.

We have excluded very few people from participating as volunteers. These were usually people who present themselves as "saviors" of battered women, or who cannot acknowledge any feelings of identification with the women victims. These people, who would not be helpful to battered women, can be referred to other community activities which may need volunteers.

We have found it useful to ask specific questions in screening volunteers who will be providing crisis services. Any of the questions below could be adapted to other projects. It is important to stress that we are not necessarily looking for the "right" answers to some of these questions but rather a potential volunteer's motivation, flexibility and commitment. The interviewer should be flexible in the way questions are asked.

1. What interests you in working with battered women?
2. What kinds of reactions do you have to crisis in your own life? Describe one and how you handled it.
3. Describe a crisis a friend of yours has had. What were your reactions? How did you feel?
4. Why do you think women get battered? How do you think they feel? Why do you think so?
5. Give a concrete situation battered women commonly experience. Ask what the volunteer might do to help.
6. There is a lot of ambiguity, uncertainty and fear in this work. How do you think it might affect you?
7. What do you want to get out of this project for yourself?

* * *

During 1978, the three shelters for battered women and their children in New York City served a total of approximately 1300 families. The Borough Crisis Centers, operated in four hospitals by the Mayor's Task Force on Rape, served close to 2800 battered women from July 31 1977 to September 30, 1978, and Abused Women's Aid in Crisis provided hotline, referral and counseling services to more than 4000 women in 1978.

* * *

MONTHLY MEETINGS

Because volunteers are providing so many different kinds of services for the Project, we have found it very helpful to have monthly volunteer meetings as a regular part of the Safe Homes Project. Through the years our meeting format has evolved into its present shape.

Steering Committee

Each month, for an hour or two before our general volunteer meeting, the Steering Committee meets. The Steering Committee currently consists of one staff person, the Project Coordinator, and three volunteers each active in at least two areas of Project services. We have also recently decided that as each working committee of the Safe Homes Project gets started, it will be asked to choose a representative to the Steering Committee. In this way service areas of the Project and work groups, such as the fundraising committee, will all have representation on the Steering Committee.

The Steering Committee serves the Project in an advisory capacity, a decision made by the Project volunteers several years ago. The Project Coordinator or any other staff or volunteer can attend Steering Committee meetings and bring agenda items up for discussion at the Steering Committee. In general, the Steering Committee discusses needs of the Project, future Project directions and goals. The Steering Committee members are often available to suggest people to contact when we need help or are there to give the extra hours we need to complete projects.

Monthly Volunteer Meetings

The Monthly Volunteer Meeting first evolved as a way of sharing information, skills and problems for our Safe Homes Project volunteers. Originally each monthly meeting was devoted to covering one project service or outreach area -- Safe Homes, Hotline, Counseling, or Outreach. Volunteers working in that specific area or interested in that area would share their experiences and concerns. Often one or two volunteers would present their area of work to the entire group for discussion, feedback and criticisms.

Over time as the Project established its services and expanded, we have developed new meeting formats. Now the first half hour of each monthly meeting is devoted to general Project business. We then split up into work groups. Work groups have been formed based on needs identified by staff and volunteers. Currently these groups are: (1) Speakers Bureau, (2) Publicity and Outreach, and (3) Fundraising. Volunteers are asked to choose a group they are most interested in joining. After each work group meets, the entire meeting reconvenes and hears reports from all the work groups. When additional time is needed for work to be completed, meeting times are arranged outside the monthly meeting structure.

Monthly meeting attendance is voluntary. Attendance varies from ten to twenty volunteers each month. We have found the work group format to be effective. We have also found that many community members appreciate the voluntary nature of the meetings. They are willing to give their time to the Project for service, but may not have extra time to serve on committees or come to meetings. We have tried to respect the different contributions volunteers are making.

We have found the monthly meetings to be a good structure for integrating new volunteers into the Project. New volunteers are invited to the meetings and encouraged to participate in a committee if and when they are ready. We are also now using old volunteers to provide orientation sessions for newly interested community members. The monthly meeting time helps to welcome people into the Project as they are being given an orientation..

Our monthly meeting time is also used periodically as a celebration. We frequently have Safe Homes parties or victory sharing times. The monthly meetings not only pull together the business of the Project but also give us a time together to renew ourselves and our efforts.

Notes and Reports from Monthly Meetings

Minutes from the general meeting and each of the work groups are written up into a report called *UPDATE*. This is sent out within a week of the monthly meeting, to all volunteers in the Project, and certain individuals on our mailing list. Volunteers who do not come to meetings keep informed of everything going on in all areas of the Project, and can follow up on things they may be interested in by phoning directly to the people involved. See page 33 for a sample *UPDATE*.

* * *

"Wife beating is the most under-reported crime in the U.S."

--Bannon, James, Social Conflict Assaults, Detroit 1973, and Newsweek, February 2, 1975

"40% of all calls for Police Assistance are for Wife-Husband disputes"

--New York City Police Academy

New York City Family Court Statistics kept by the Office of Court Administration show that there were 6,680 new family offense petitions filed by wives in 1977, including 4,804 for alleged assault, 1,695 for threats and harassment, and 181 other complaints.

* * *

Volunteer Interview Sheet
(Condensed from 2 pages)

PSSHP
SAMPLE
FORM

Name of potential volunteer _____ Date _____

Address _____ Tel. home _____ work _____

How did individual hear about Project? --

Understanding of philosophy and orientation of Project --

Expectations of involvement / time / type / reasons for involvement --

Choice of role: Hotline Counselor Safe Home Community Educator
(If Safe Home, brief description of household, space, restrictions, other pertinent information)

Experience in personal/professional capacity; as former volunteer; interest in issue of battered women; church/community/civic/political involvement --

Schedule of availability: time day

General comments / questions --

Assessment

done by _____ (Project staff)

General reaction / Appropriateness as volunteer, identification of role --

Follow-up / Training plans --

PSSHP
SAMPLE
FORM

UPDATE.UPDATE.UPDATE.UPDATE.UPDATE.
(Monthly volunteer meeting minutes)

To: Park Slope Safe Homes Project Volunteers

From: _____, Project Coordinator

January 1980

The following are reports from the December 20th Steering Committee and General Volunteer Meetings:

1. Steering Committee:

The Steering Committee was given a summary of the Project's latest grant and fundraising efforts. Our \$6050 grant from the New York State Department of Social Services will be used for printing our Safe Homes Manual and for concrete services to Park Slope battered women in the form of emergency money for food, travel and hotels. Our Crafts Fair grossed \$900 and netted the Project \$375. This money will also be used for emergency services when our state grant runs out.

We discussed the need for the development of a more complete fundraising plan for the next several years. Additional funds for staff and program development will probably have to come from grant writing efforts to foundations or to the government. Local money raised in Park Slope will continue to be used for concrete services. Susan discussed current efforts to obtain either a VISTA or CETA contract to recruit more staff from Park Slope for additional outreach and project coordination work. Currently no CETA staff grants are available. Requests for proposals from CETA or VISTA will probably be sent out in the spring and be awarded next fall.

2. General Meeting

A brief business meeting was held and then followed by committee meetings. Several new volunteers were introduced. Reports on the state grant and Crafts Fair were made. Everyone agreed that the Crafts Fair was very successful both financially and as an important outreach effort in the community. Alice reported on the Safe Homes research project. Several people volunteered to help Alice do phone calls to assess the Project's visibility and outreach efforts in the community.

The Hotline schedule for January was distributed. Three new Hotline volunteers have been trained. Susan requested that any Hotline volunteer not at the monthly meetings please call her immediately after the 3rd Thursday of each month to confirm the next month's Hotline hours.

A discussion of the committees needed for the Project was held. We decided to break into 3 principal work groups for each meeting. A report from each group follows:

A. Fundraising: the fundraising committee basically spent its time brainstorming ideas for local fundraising. It was tentatively proposed that the Project do one small fundraising quarterly and one major annual fundraising. Ideas suggested include (1) a book fair, (2) flea market (3) crafts fair, (4) dance theatre workshop benefit, (5) Bingo night / card party, (6) Local theatre company benefit at a neighborhood school.

B. Speakers Bureau: Current members of the Speakers Bureau summarized the 3 speaking events that were done in the last month at Woodward Park School, Long Island University and John Jay High School. The procedures for obtaining speaking engagements were further discussed. These include:

1. Penny's assigning 3 agencies to each volunteer to call at the beginning of each month. January's agencies will be day care centers, schools and the United Block Association. If none of the agencies assigned wants a speaker, the Speakers Bureau member is to call Penny for new agencies.
2. After each agency is called for a contact person, a mailing of Project materials will be sent by the volunteer.
3. A follow-up call will then be made to the contact person at each agency.
4. If a speaking engagement is confirmed, a form is to be filled out and the SPEAKERS Bureau member is to notify Susan so that speakers can be found.
5. If the agency contacted does not want a speaker, a form is also to be filled out and sent to Susan so that we can maintain accurate records.

A roster of all Speakers Bureau members will also be sent out. The Speakers Bureau also decided to continue meeting as a separate committee and not incorporate any further outreach or publicity activities.

C. Outreach and Education: Shelley and Robin agreed to write press releases and publicity information for the Project. Ellie volunteered to help coordinate ongoing leafleting for the Project in the community. Volunteers are still needed to write newspaper articles about the Project.

The remainder of the committee meeting included an overview of the Project for new volunteers. At the end of the meeting it was agreed that the committee structure worked well for getting tasks completed.

3. Statistics

--The Hotline received a total of 54 calls for crisis intervention, support, information and referral.

--Approximately 75 referrals were made for welfare, shelter, legal services and housing.

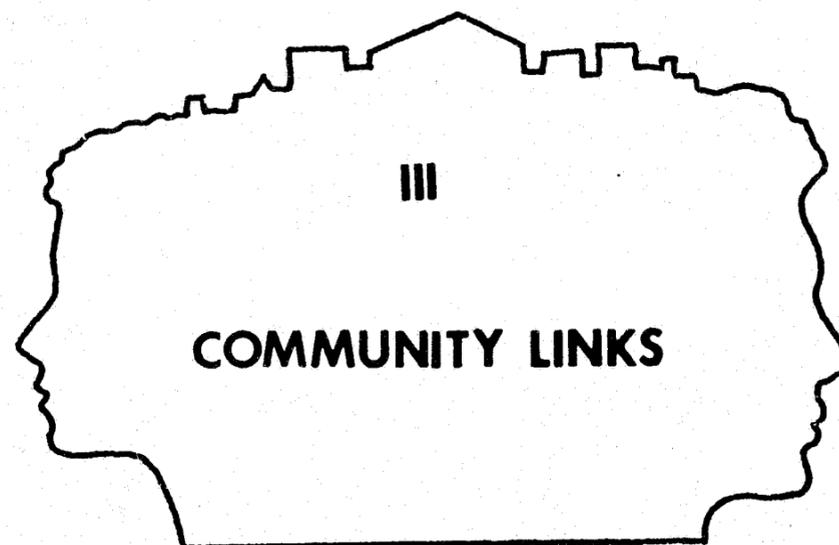
--14 Park Slope women, 3 men and 24 children used our Project services: crisis counseling, financial supports, Safe Homes and shelter placement.

4. Meeting Notice

Steering Committee - Thursday, Jan. 17 at 7 p.m. at _____.

General Monthly Meeting - Thursday, Jan 17 at 8 p.m. at _____.

HAPPY NEW YEAR!



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COMMUNITY LINKS

Because of the community-based nature of our Project and our agency philosophy, reliance on a network of links among agencies and individuals within Park Slope has been essential for our Project's success. Many battered women reach our Project through the formal and informal networks that link us to many community agencies. For example, the Park Slope Clergy Association co-founded the Safe Homes Project and Safe Homes staff maintains ties to the Clergy Association by speaking at its meetings and including clergy members on our mailing list. As a result, clergy people often call our Project or give their congregation members our phone number. They make office space available to us in churches when we need it for Counseling sessions. Some clergy serve as Safe Homes. The story about Daniela, and the descriptions of our police precinct project and our work with a local hospital pastoral care office show how important these connections are, and how they work.

DANIELA

Daniela V. (age 25) was resting in a local hospital after being beaten and stabbed by her boyfriend. The precinct detective was going to the hospital to talk with Daniela to investigate the crime. The CYDS precinct social worker, who is also a staff person for the Project (see Police Precinct Project, Page 40), was asked to accompany the detective.

Although in some physical pain, Daniela was mostly in mental anguish as she could not understand this sudden violent behavior by her boyfriend. Although their relationship was somewhat rocky, there had never before been physical abuse. After interviewing her the detective explained all of the legal options to Daniela who chose to have her boyfriend arrested. The worker promised to visit Daniela within the next two days to begin formulating a plan once she was well enough to leave the hospital.

Early the next evening Daniela called the Hotline to report she was to be discharged from the hospital the following morning. Daniela was feeling physically weak and anxious because she could not return to her boyfriend's place and she had no relatives in the city.

The social worker believed the discharge was premature and both medically and psychologically ill-planned, as Daniela was without friends or relatives. The worker called the head nurse on duty for the evening and explained the situation, spelling out the need for a referral to a shelter for battered women and for one that would accept a woman who might need help with cooking, dressing and bathing. The nurse was sympathetic and agreed to write a note in the chart, to make sure that hospital social services intervened early the next morning. The worker immediately put Daniela on a waiting list for a shelter.

The next day the CYDS precinct social worker coordinated a plan with the hospital social service department and the medical social worker discussed the concerns with medical staff.

After much coordination Daniela's discharge was delayed for 24 hours, so a better plan could be put into effect. The shelter agreed to admit Daniela

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on the written consent of the hospital doctor, stating that she could basically care for herself with a little additional assistance. Project staff drove Daniela from the hospital to the shelter where she began to heal both her medical and her emotional wounds.

Police Precinct Project

CYDS, the Project's sponsoring agency, has workers stationed in the local police precinct, which has allowed us to have a positive working relationship with the police that might otherwise have been impossible. For the past four years CYDS has had staff (professional, para-professional and social work student) working out of the police precinct building. They offer immediate crisis intervention, and information and referral services to individuals and families. These workers also provide Hotline coverage and do counseling for the Park Slope Safe Homes Project.

This program is currently designed so that there is daily coverage (seven days/week) from 2 pm - 9 pm. The CYDS workers in the precinct handle a wide range of problems, such as runaways, abused and neglected children, medical problems of the elderly, and also family disputes and battered women. People come to them at the suggestion of officers on patrol, or simply by walking into the precinct.

These workers have *slowly* gained the confidence of the police for their professional competence through their ability to intervene effectively in a wide range of situations, their extensive knowledge of resources, and also because of the full range of services their agency offers to the community. As mutual respect has grown between the police and social work staff, police officers have increased their referrals, and often view us as a support. Many times police officers and these social workers work jointly on cases, including those involving battered women.

A battered woman may ask for help from the police and be referred to one of the CYDS workers, or she may originally come to the Project and then decide she needs police assistance. Because of their direct access to the police, our social workers can easily aid a woman in pressing charges, filing complaints, and enforcing orders of protection, and also serving a Summons or going home to collect clothes. Often they can also clarify legal issues and questions. The on-going CYDS - police work has led to better police understanding of the complexity of the situation of battered women.

This mutually beneficial relationship has grown gradually over the years. The workers' physical presence in the precinct, their willingness to intervene in all social service cases and their reliability and resourcefulness, have all helped the police to come to accept and respect them and their work.

Another very important factor has been the social workers' genuine openness to understanding the limitations and difficulties of police intervention in family disputes. The social worker has spent many hours riding in patrol cars as a "civilian observer" and many more hours in informal discussion with officers, exchanging views and ideas.

Hospital Pastoral Care Department

As noted in our History (see page), the Pastoral Care Department of our local hospital provides a crucial link in our provision of community-based services.

One of our Hotline sites is staffed from 9 am to 5 pm, Monday through Friday, by this department. Chaplains and Chaplain interns are trained each September to answer the Hotline and to provide support, information and referral to non-Park Slope women. Park Slope women are immediately referred to our Project staff or volunteers.

The Pastoral Care Department also provides us with an important base in our local hospital, a facility many battered women use. Because chaplains are on call 24 hours a day, they receive immediate notification from the emergency room that a battered woman has arrived at the hospital. Chaplains can contact the woman, find out her needs and urge her to see someone from the Safe Homes Project. Chaplains also insure that the emergency room is kept supplied with Project flyers and information. They have also offered us private, interviewing space as needed.

Because of a close working relationship with the Project and a commitment to battered women, the Pastoral Care Department staff has also helped ease our entrance into other departments of the hospital. A Project staff person has been invited to make presentations at the Ob-Gyn Clinic and at medical rounds. Nurses and doctors at the hospital have turned to us for information and support. Resistance to an "outside" project coming in to hospital territory has been minimized through our work with Pastoral Care. We consider this work essential for reaching battered women, and urge other programs to find a base (e.g. hospital social service or pastoral care departments) for cooperative efforts at this local level.

MY WORK WITH THE SAFE HOMES PROJECT

(A Clergywoman's Personal Account)

One of the most important things I can say about my work with the Safe Homes Project is that it happened while I was a chaplain resident with the Department of Pastoral Care at the hospital. This link between a community agency, primarily aiding women and children, and a patriarchal institution (the church) illuminated for me the potential of the church and, at the same time, the shortcomings of the church in dealing with this area of human concern as it does with other more "acceptable" but not unrelated areas such as hunger or poverty. In fact my work with the Project made me painfully aware of the church's role in perpetuating the problem of violence against women -- the old myths of male superiority.

I found my work with the Project generating a lot of internal anger -- anger at the silence of the church on the problem of battering as it has been silent in other areas such as rape and incest. I grew up in a minister's home and saw first-hand what kinds of problems clergy could expect to be involved in with parishioners: runaway kids, illness, alcoholism, divorce, drug abuse, death --but battering? I never heard of it.

My work with the Safe Homes Project exploded the stereotypes I had about battered women being poor, uneducated, unemployed Black and Puerto Rican women with a lot of kids. Somehow the problems seemed simpler when I could pretend that battered women were somehow different from me. I realize now how my racist, classist upbringing taught me to protect white men by making it very difficult for me to imagine them as batterers. ("I once was blind but now I see....")

I learned that it was okay to ask questions and clarify information that women offered. When women said, "Sometimes my husband is not very nice to me," or, "He gets angry at me sometimes," they might be trying to say they were beaten regularly. By going on and asking, "Does your husband ever hit you?" I could at least say, by my asking the question, that this subject of violence can be talked about.

From my experiences working with battered women who have come through the emergency room of the hospital I have seen that often they are seen as minor assault victims, an "easily treated" non-emergency case. The fact is, "emergency" is defined on the basis of whether the woman will require hospitalization for injuries, and with little attention to other emergencies in her life -- no money, no safe place to go, no food, no clothes.

My work with the Project most often left me feeling overwhelmed. I still have a vivid picture in my mind of a woman who was punched in the face and head until she had a black eye, a possible concussion and her teeth had cut through her lower lip. As I sat with her in the emergency room she spoke about her anxiety that she would lose time from her job because of her injuries, and her concern about what she would do the next time she saw or spoke with the man who had beaten her. I knew that I would not want to be in her shoes. We spoke about life and death issues of survival and the meaning of her life that she faced. Later that night I spoke about survival and the meaning of life with someone who had undergone a heart attack. As he was sent off to the cardiac care unit surrounded by the latest in monitoring equipment and well-coordinated medical care, I felt a great deal of pain at the tremendous difference in support systems available to this man and this woman in crisis.

* * *

" 70% of assault victims at Boston City Hospital Emergency

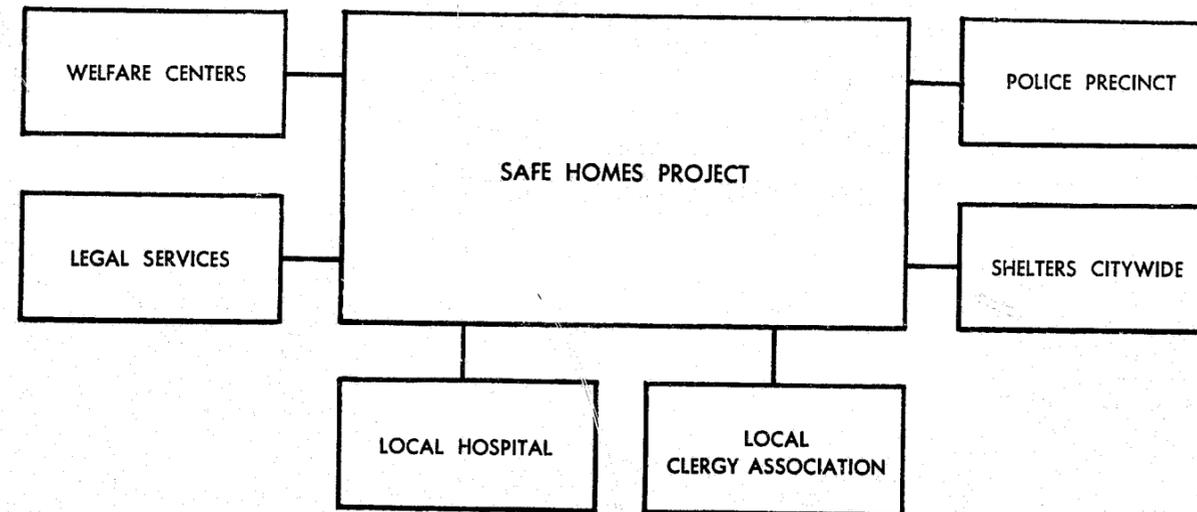
Room are women who have been attacked in the home."

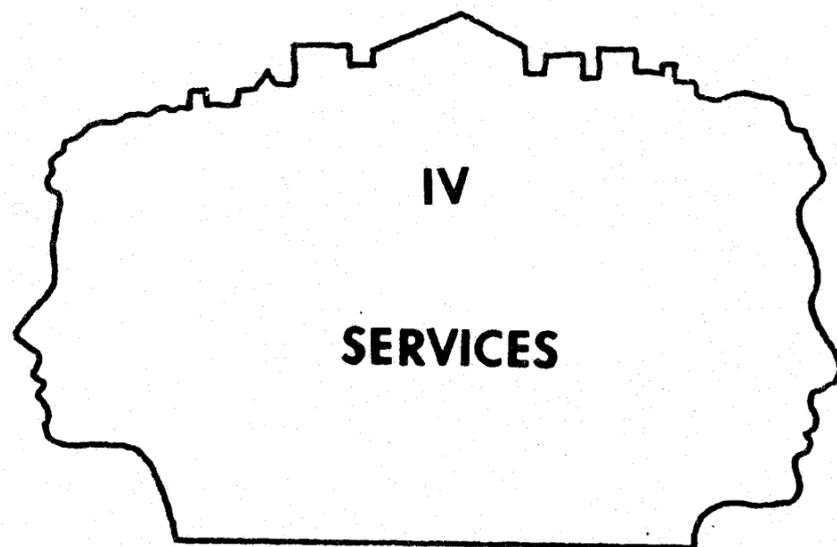
-- Newsweek, July 1974

* * *

DIAGRAM II

LINKS WITH OTHER AGENCIES





SECTION IV -- SERVICES

Part 1 -- Introduction

1. INTRODUCTION

Because of the community-based nature of our program, we have found that battered women use our services in a variety of ways. Some women come to us in emergencies, needing a Safe Home, food and clothing; other women, for safety reasons or personal preference, want to leave Park Slope and ask that we help them find a shelter outside our community, or with transportation funds so they can stay with a friend or relative. Still others come to us after separating from their husbands.

The stories below illustrate a few of the many ways women use our services. The Safe Homes Project, as one part of a large community agency with a large variety of services (see graph page), for example counselors, displaced homemaker program, teen parent project, welfare advocates, police precinct workers, and a thrift shop, tries to respond by linking people to services for which they express a need. Our office helps through linking, networking and advocating. For women who stay within the community, on-going support in the form of counseling, advocacy within the welfare and legal systems, and concrete financial assistance is always provided. A more complete description of these services appears in this section

MRS. SMITH

Mrs. Smith's social worker from the Project's sister agency, The Family Reception Center, called saying that Mrs. Smith was battered and that she might have to leave home soon. What should they do? On the telephone we went over all essential questions: whether or not Mrs. Smith was safe in Park Slope, medical needs, previous police or court involvement, legal status of her relationship with the batterer, who had the children, where the woman wanted to go (e.g. Safe Home, shelter outside the community, or living arrangements with friends or relatives). Mrs. Smith wanted time to think through a plan and we encouraged the social worker to support her in this process. She was given the Safe Homes Hotline number.

At 9 am several days later she called the Hotline wanting to leave the community. She did not want to stay in a Safe Home. At 3 am the previous evening her husband warned her that she would get a more severe beating than ever before. He reminded her of a year ago when he had stabbed her in the back and blackened both her eyes. It was urgent that she leave immediately.

Everything happened quickly. Mrs. Smith gathered together her clothes, her children's clothes and toys, and essential documents, and met a Project Counselor at an office we have in the community. After talking with the Counselor, she decided she felt safe only by leaving Park Slope. She had no friends or relatives in New York and needed a shelter.

Several things, however, needed to be done first. Her three children were at school and we decided that she should get them before her husband came back into the community. A call was made to the school and because of their awareness of our program, their cooperation was insured. Secondly we determined that Mrs. Smith's husband had been forbidding her visits to the doctor, and that she had run out of medication needed to prevent seizures. As a result she had recently blacked out twice. Through our close relation-

ship with the Pastoral Care Department at our local hospital, we were able to secure an immediate clinic appointment for noon that day. As Mrs. Smith and her children waited to see a doctor, our staff person used hospital phones to start finding a shelter. Luckily an immediate space was available.

In New York City shelter placement often requires being on welfare. Special guidelines exist for battered women in need of emergency assistance and housing. Active efforts to insure provision of these services is often needed. Mrs. Smith's social worker volunteered to accompany her to the emergency welfare unit. We informed the shelter and typed a letter to the welfare office, stating that Mrs. Smith was battered and entitled to emergency services. (See Sample Form, page 73).

Mrs. Smith, however, had left some essential documents and provisions at home. Our Counselor called one of the workers at the police precinct and informed her that Mrs. Smith needed police escort to ensure her safety returning to her home to collect her things. Our precinct worker discussed the situation with the police. Mrs. Smith, her children and social worker were sent in a cab paid for by the Project, to the police precinct where they received police assistance. From the precinct they went in a cab to the welfare center and from there on to the shelter. The social worker was given our Hotline number, in case the welfare center presented any obstacles. The welfare center did initially refuse to make the referral to a shelter. By telephone we informed the social worker about Mrs. Smith's right to shelter, quoting the appropriate welfare regulation, and by 10 pm that evening Mrs. Smith and her children were finally settled in at a shelter. Mrs. Smith has continued contact with the social worker from the Family Reception Center.

MARIA

Maria, age 18, came to the Project over a year ago. Originally she arrived at the police precinct because her father was physically abusing her. We soon learned that Maria's father was abusing his wife as well as the children. And we learned that Maria's boyfriend, Joe, also beat her.

The family was known to the City Bureau of Child Welfare because of previous neglect, and several children had been taken out of the home in the past. During the first year the following services were provided to the family: (1) shelter referral for the entire family, while Maria and her baby stayed for three nights in a Safe Home, (2) on-going couple counseling for Maria and her boyfriend, Joe, the father of her baby, (3) advocacy work with the Bureau of Child Welfare, and (4) shelter referral for Maria and baby. In this family, both mother and daughter have repeatedly returned to their violent partners after shelter, only to leave once again. Our Project has remained available to the family throughout their crises.

After the older woman's first shelter experience, she returned home to her husband, who continued to be violent. At that time, Maria stopped seeing Joe and returned home with her mother. Joe would infrequently drop by the Precinct to inquire about Maria and the baby. This gave the worker an opportunity over a period of time to chat with Joe about anger and ways to handle it, and about the fact that physical abuse did not get Joe what he wanted from Maria. After several months, Maria and Joe began dating and began to see the worker as a couple, coming for weekly sessions and sometimes arriving after an

argument. Within the past few months the physical abuse has almost ceased, and Maria and Joe work on their separate problems, as well as the difficulties in their relationship.

Although Maria and Joe's relationship is still quite stormy at times, they have made progress in counseling, most importantly the reduction of physical abuse. Both Maria and Joe are committed to working out a more satisfying relationship, especially because they came to see their baby as a lifelong link between them.

LYNN

After reading an article about the Safe Homes Project in a local paper, Mrs. Z., a worried mother, called the Hotline about her married daughter, Lynn, age 23. Mrs. Z was very close to her daughter and knew of occasional abuse between her daughter and her husband. We asked Mrs. Z to ask her daughter to call us. Lynn called shortly after and explained that although there was physical abuse, she felt that it was not very serious. But because of her mother's concern, she agreed to come in with her mother to see us.

Lynn had been married for four years, and had three-year-old twin daughters. Lynn's husband, Robert, was in a methadone program, drinking heavily, and showing signs of rapid emotional deterioration, including hallucinations. Lynn was extremely ambivalent about leaving Robert, as she feared he would become worse without her. She felt she no longer loved him, as he was now sick and basically incompetent, yet she felt a duty towards him. She was most worried about his setting the house on fire while falling asleep with a cigarette in his hand. Lynn continued in counseling on a weekly or semi-weekly basis for a few months, coming for sessions after her morning college classes were over.

After an argument in which Robert struck her, Lynn abruptly left with the twins and went to live with her mother, a widower. In addition to emotional support for Lynn during this difficult period, we acted as advocates for her in the welfare system, helping her get welfare benefits for herself and the children and a furniture allowance; we also supported her in pursuing a divorce. Within several weeks, Lynn found an apartment and began to resettle her life. With time she felt less and less responsible for Robert, and realized that she could not save or protect him. Lynn began to have more energy for herself and her daughters, and looked forward to graduating from college. She hoped to pursue a career in teaching or social work in the future.

SECTION IV -- SERVICES

Part 2 -- Hotline

HOW IT WORKS

The Safe Homes Hotline is answered by paid staff or trained volunteers seven days a week from 9 am to 9 pm. From 9 pm to 9 am a tape recording with emergency information is played. On a typical weekday the Pastoral Care Department of a local hospital answers the phone from 9 am to 5 pm, providing referral and support to non-Park Slope women and immediate connection to Project staff for Park Slope community women. In the evenings from 5 pm to 9 pm a community volunteer usually has the Hotline call-forwarded to her home¹, although she may answer the phone at the Hotline site.

If a Park Slope battered woman needs immediate service, the volunteer can meet her in a safe, public place and offer support, interim shelter, carfare and food money. On the weekends volunteers and staff share the staffing functions for the Hotline. A paid staff backup person is always available for the volunteer in case of emergency.

The Hotline phone number is used for no other agency programs. Safe Homes paid staff has its own phone lines in an office for other Project business. The Hotline number, not the agency phone number, is posted throughout the community and is given out to other agencies and community groups requesting referral information.

Our Hotline calls have averaged between 50 and 60 per month, including those from battered women, their families and friends, and community residents and social service agencies inside and outside the community. Hotline phone calls, however, do not accurately reflect total number of calls for services. Because many people reach us through the police precinct and through a local hospital, and because many people do use our agency phone number, calls come through a variety of sources.

All Hotline volunteers are female. (See philosophy page 14) No previous experience working on a Hotline or in a crisis service is required, since we provide training. The Project is most interested in a volunteer's commitment to battered women and motivation for volunteering in a community-based project. All Hotline volunteers must agree to an initial screening interview and orientation session, fourteen hours of Hotline training and on-going supervision. Interviews, orientation and training are done by paid Project staff and volunteers. Additionally each volunteer is asked to make a one-year commitment to the Project and to give at least eight hours a month to answering Hotline calls. This commitment is usually in the form of two four-hour shifts each month. We have also found that many volunteers are eager to work in other Project areas such as fundraising or outreach and education. Because Hotline volunteers may feel isolated simply answering the phone twice a month, many volunteers want to give more time and be involved in ongoing work groups or committees, which are described in other sections of this manual.

1. Call-forwarding is a device which automatically switches the call to another telephone. The caller does not know the number of the answering phone.

TRAINING

Hotline training uses vast quantities of information, often given to volunteers who are new to the issue of battered women. To make the absorption of so much new information easier we try to give it to volunteers over a period of several weeks. There are about fourteen hours of training, which is done by paid staff in a community agency's building.

The usual sequence of steps is: First, each volunteer is provided with a verbal and written overview of the Safe Homes Project, its goals and services; Second, she is invited to come to a monthly meeting where she will meet other volunteers; Third, this new volunteer may have to wait several weeks until we have a large enough group (four to eight) ready to be Hotline training. During this waiting period she is given a training packet, which contains all materials a volunteer will need to complete her Hotline duties, including referral and resource information, Project procedures, and articles on battered women (See pages 69,71) for two examples of Project memos which discuss our procedures).

All Hotline training is done by paid staff, and includes extensive material on the political aspects of violence against women, the emotional and physical impact of abuse and victimization, crisis intervention, services available to battered women (e.g. shelters, counseling, legal and medical services), rights of battered women and specific services available to Park Slope women. (See Hotline Training Content Outline page 60.) Because of the complexities of services in New York and the difficulties most battered women experience, heavy emphasis is placed on providing thorough information, effective advocacy, and understanding and responding to emergencies. We provide detailed memos about procedures in the key New York City systems. (See list of training materials page 62.)

Exploring alternatives and the consequences of each alternative with every woman who calls is also stressed. Because we provide community-based service, we can only offer Safe Homes and Counseling to Park Slope women. We do, however, train all volunteers in giving out accurate and thorough information to non-Park Slope women.

Again because service systems in this city are often so difficult and degrading, we also encourage Hotline volunteers to use their staff backup to insure that complete information is being provided. Volunteers who receive calls sporadically, often find it difficult to retain so much complex information. Hotline brush-up sessions and paid staff backup have been the only ways we have found to deal successfully with this problem.

Hotline training is intensive, and volunteers are asked to share much of themselves. Our training incorporates the volunteer's own personal experiences and reactions to the material being presented. Role-playing concrete situations is also used, so that we can insure that information is handled correctly.

We want to stress that thorough and comprehensive training done by a competent, highly experienced person is absolutely essential to any aspect of a program serving battered women.

SCHEDULING

Hotline volunteers are initially asked to list the time they have available for the Project. Each month the Project Coordinator schedules volunteers for the coming month. This schedule is passed around at our monthly volunteer meeting, the third Thursday of each month. If a volunteer cannot take the designated shift, she will try to switch with another volunteer at the meeting. Volunteers who miss the meeting are asked to call the Project Coordinator or are called by one of the paid staff people. When the schedule is completed, it is mailed the last week of the month with our *UPDATE*, the meeting minutes. No additional reminders are sent. We have found this scheduling to work well, and volunteer responsibility to be high. The scheduling task itself, along with phone calls back and forth can, however, be quite time-consuming for the staff people involved.

With our small paid staff we have also found an additional burden to be emergency backup services for Hotline volunteers. The one paid full-time staff member, the Project Coordinator; our part-time Social Service Coordinator; the sponsoring agency's Program Director and Agency Director, all rotate backup functions seven days a week for the Hotline.

Staff capabilities and staff hours available must determine how many hours a Hotline will operate each week. Without this evaluation, possibilities for staff "burn-out" are high.

TECHNICAL ISSUES

A couple of technical problems related to our Hotline have been successfully worked out, and the solutions may be useful for those considering offering such a service.

1. Through our insistence, the New York Telephone Company is now listing our phone number, but not an address, in its directory. Until 1979 the phone company refused to list any number that did not also have an accompanying street number and name. For safety reasons we could not list our address, although we knew that our number was less accessible to battered women in emergencies. We are now listed as "Park Slope Safe Homes Project," and under "Social Service Agencies," in the yellow pages.

2. Our phone system is designed to be answered at the Hotline site or to be call-forwarded to any other phone. Call-forwarding is a mechanical device that switches the call to another telephone, without the call being interrupted or the caller knowing the number she has been switched to. So Hotline volunteers can answer the calls in their own homes.

If the phone has a call-forwarding device, arrangements must be made for someone to switch the system so that call-forwarding is operating and calls will go to the next person on duty.

3. We have also purchased one additional Hotline phone that can be plugged in at our local police precinct where our agency has a worker seven evenings a week. If that worker is on the Hotline, or if the scheduled volunteer cannot make her shift, the precinct worker helps out by just plugging in the Hotline and taking calls.

SUSTAINING HOTLINE VOLUNTEERS

Because our services are scattered throughout the community, and because we have not one centralized building like a shelter which all battered women come to, our volunteers sometimes feel isolated. When a volunteer does not receive a Hotline call after several weeks, she may begin to feel useless. We have, therefore, found monthly meetings and periodic Hotline brush-ups to be essential.

Battered women call our Hotline primarily during the day, when paid staff are on duty, or else they walk directly into the police precinct or the hospital. Because our services have recently expanded to seven days a week, we think this pattern may eventually change.

In order to be more actively involved, many Hotline volunteers also volunteer in other Project areas, such as Safe Homes or the Outreach and Education Committee. These other activities have been satisfying for most volunteers, although a few have dropped away from the Project as a result of under-utilization. The paid staff and volunteers have been working to provide more support and tasks so that we do not lose interested people.

Hotline calls can also be draining and frustrating for a volunteer. We encourage volunteers to share their experiences with each other at meetings and with Project staff. Staff people are always available to provide emotional or practical support to volunteers. We see this support as crucial and sustaining to anyone involved in the Project. Volunteers are also encouraged to share the victories and successes of the Project as a whole. It is important to share our experiences with everyone connected to the Project, because this affirms for all of us the usefulness of our work, and renews our sense of commitment.

FORMS AND THEIR USES

Logs:

Every call that comes to the Project, either through the Hotline or to the agency or police precinct, is written down on a form. (See Sample Form, page 64) This log enables us to be aware of who is using our services, repeat calls for help, and problems women are having finding help. For example, our Project receives many calls from outside the Park Slope community for crisis services, shelter referral or general information. We can use our log to give feedback to other agencies or groups about the need for additional services or about the breakdowns in current services. Logs are also useful for statistical research needed to justify funding.

Interaction Forms:

For every Park Slope woman who calls our Project or uses our services, an Interaction Form is filled out. (See Sample Form page) All Hotline volunteers and paid staff have this Interaction Form with them when they are on Hotline duty. Volunteers report that this form has proved very helpful in an emergency situation when it is easy to panic and forget to ask about a vital piece of information. The Interaction Form is also useful as a means to summarize a conversation and communicate plans for action. And it helps insure consistency in how calls are handled.

Also, because the Project has so many Hotline shifts, we have found it essential to have all important information about a woman on one form. In this way we are assured of adequate basic communication, and we avoid asking a woman to go over the details of her situation again and again.

During training, Hotline volunteers familiarize themselves with these forms. We encourage volunteers to be flexible in their style of asking questions of callers, and to avoid "probing". We never just read off questions to a woman in crisis and demand that she respond. Rather, we encourage the use of the Interaction Form, along with emotional support and sensitivity, so that all vital areas of concern -- medical problems, police involvement, legal issues, possible child abuse, immediate danger, etc. -- can be adequately covered.

If a Hotline volunteer fills out an Interaction Form during an evening shift, it is her responsibility to drop this form off to the Project staff the next morning. The Interaction Form details plans made with each battered woman. For example, a woman may be at a hotel awaiting a phone call from our Project. Or she might be staying overnight with a friend and expecting to speak with a Counselor as soon as possible. Through our Interaction Form, we know what was covered during an initial conversation, what plan was made, and what needs to be picked up on next.

* * *

"...This doesn't happen in 'good' families-- Husbands that teach school or invent computers don't beat wives and children-- or do they?--...The children learn early to be wary and watchful so as not to draw attention to themselves--...We were painting the kitchen about 10:00 in the morning-- I wasn't allowed to move the curtains out of the way, and when he spilled paint on them he tore them down, ripped them, and hit me and our four-year-old with the curtain rod until we were covered with welts....Sitting there in the night I try to think of a way out-- No money-- Nowhere to go-- Which of our friends would believe that a teacher--active church member, etc.--could do this!"

--Excerpted from Battered Women, An Effective Response, Dept. of Corrections, Programs and Services for Battered Women, St. Paul, Minnesota

* * *

Content Outline for Hotline Training

Session I

- I. Introductions
 - A. Discussion of goals and mutual needs and responsibilities
 1. What volunteers would like from training
 2. What staff would like from training
 - B. Overview of four training sessions
- II. Videotape presentation -- *Til Death Do Us Part*
 - A. Discussion - reactions to videotape
 - B. Overview of what it is like to be battered
 - C. Overview of cultural sanctioning of violence, socialization of women, institutional/structural sanctioning of violence against women
- III. Victimization
 - A. Sensitivity exercise to focus on volunteers' own experiences of being victimized
 - B. Overview of what battered women feel
 - C. Didactic presentation on common reactions, feelings and effects of being battered
 - D. Overview of common reactions to crisis that volunteers and battered women experience
- IV. Crisis intervention
 - A. Understanding of how different people respond to crisis
 - B. Crisis theory -- stages of crisis
 - C. How to help during a crisis
 - D. Specific issues that each call must consider, i.e. safety, confidentiality, clarification of services, medical, police, legal and concrete follow-up plans for each caller
 - E. Crisis management techniques

V. Feedback and questions

Session II

- I. Referral options and services for battered women in N.Y.C.
 - A. Discussion of each referral source
 1. How to use
 2. Problems/limitations in using each service
 3. Consequences for using each service
- II. Options in New York City for battered women
 - A. Family Court
 - B. Criminal Court
 - C. Welfare
 - D. Shelter placement
 - E. Police

- III. Specific functioning of Safe Homes Project for women in Park Slope
 - A. Hotline
 - B. Counseling
 - C. Safe Homes
 - D. Emergency hotel placement
 - E. Referrals to shelters
- IV. How to be an effective advocate
 - A. Principles of advocacy
 - B. Systems failure
 - C. How to negotiate systems
 - D. Entitlement of women to services
- V. Feedback on session

Session III

- I. Discussion in small groups of case examples
 - A. What would have helped woman in each example?
 - B. Role-playing of Hotline call by Project staff
 - C. Role-playing of victim/helper by volunteers (several role-playing assignments are done)

Session IV

- I. Components of the Safe Homes Project
- II. Review of services available to families in Park Slope
 - A. Concrete functioning of Project
 1. Safe Homes placement
 2. Counseling referrals
 3. Emergency hotel use
 4. Clarification of services for non-Park Slope residents
 - B. Project forms and contracts discussed
- III. Volunteer/Staff responsibilities to Project
 - A. Discussion of Hotline scheduling
 - B. Volunteer availability
 - C. Staff back-up and supervision of work
 - D. Discussion of constant feedback between paid staff and volunteers
 - E. One year commitment from all volunteers
- IV. Special issues
 - A. Safety of battered woman and volunteers
 - B. Confidentiality
 - C. Special emotional needs of volunteers responding to crisis
- V. Feedback

HOTLINE DAILY TELEPHONE LOG: INCOMING CALLS
(Used for all Hotline calls by paid staff and volunteers)

DATE:

Basic Information

Call number (H)=hot line	Time of call	Name and number or agency	Location of caller	First call?	Purpose of call Request for (Please indicate) info, outreach, shelter, counsel, advocacy, other	Result of call			call taken by
						Appt. made PSSHP	Ref. ?	Other (Desc.)	

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PSSHP
SAMPLE
FORM

PSSH
SAMPLE
FORM

PARK SLOPE SAFE HOMES PROJECT -- INTERACTION FORM
(Used by Hotline volunteers)

Date _____ Began _____
Time Ended _____

Volunteer's name _____

CALL RECEIVED FROM WOMAN

ADVOCATE/AGENCY
(worker)

Name: _____

Name of worker: _____

Legal address _____

Name of Agency: _____

Phone: _____

Address: _____

Age: _____ DOB _____

Phone: _____

_____ Park Slope resident New _____ Telephone in _____

_____ non-Park Slope resident Re-contact _____ Walk-in _____

***ANY IMMEDIATE DANGER TO CALLER

_____ YES ***
_____ NO

If yes, what can happen _____

If yes, what is immediate need _____

EMOTIONAL STATE OF CALLER

SERVICES REQUESTED FROM PSSHP

Calm _____

Emergency shelter _____

Agitated _____

Counseling _____

Frightened _____

Medical _____

Confused _____

Police protection _____

Depressed _____

Financial _____

Hysterical _____

Welfare _____

Other _____

Advocacy _____

Other (specify) _____

BATTERING:

Date of last battering incident _____

a) nature of battering (verbal and physical) _____

b) frequency of assaults _____

c) any significant history related to batterer

- _____ Alcohol problem
- _____ drugs
- _____ emotional or mental illness

d) does batterer assault children?

_____ YES _____ NO

If yes, describe _____

e) Have assaults been reported to BCW?

CHILDREN AT HOME (AND/OR WHO MAY NEED SHELTER)

<u>Name</u>	<u>Sex</u>	<u>Age</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

RELATIONSHIP TO ABUSER

Lives with abuser _____

Marital status _____

Length of relationship _____

LIVING SITUATION

a) Current address if different from above _____

b) Does abuser have keys to apt./house _____

c) Can locks be changed _____

d) In whose name is the lease _____

e) Family and/or friends with whom battered woman can stay _____

FINANCIAL STATUS OF FAMILY

Is family on DSS ___yes___no

If yes, which members _____

If yes which center _____

If no, nature of income _____

PHYSICAL CONDITION

Is medical attention needed now?

If yes, explain _____

Extent of injury _____

Where will you go for medical care _____

History of injuries _____

Has there been documentation of injuries? _____

If yes, which hospital _____

HOW DID THEY HEAR OF PROJECT?

CONTACT

a) Can you be called back ___yes___no
If yes, where _____

***Any special instructions for calls, e.g. code name, message _____

b) Can you be contacted by mail

_____yes___no

***Special instructions for mail _____

c) If no to above, how can you be reached? _____

POLICE INVOLVEMENT FOR CURRENT

BATTERING

_____yes Date/time _____

Which precinct _____

Name of officer(s) _____

How and where was incident reported?

What did police do? _____

_____no (if no, does she want or know how to report incident?)

a) report incident at precinct _____

b) Order of Protection _____

c) Court referral _____

Is there a current Order of Protection?
_____yes___no

Is there involvement with

- _____ Family Court
- _____ Criminal Court
- _____ Summons Court (346 Broadway)

NATURE OF INTERACTION (check areas dealt with during interview, and circle where assistance is needed from Project)

Legal _____	transportation _____
housing _____	medical _____
counseling _____	welfare _____
financial _____	police protection _____
child care _____	other _____
crisis support _____	_____
employment _____	_____

ARRANGEMENTS FOR BATTERED WOMAN *PLEASE BE VERY SPECIFIC

- 1) referral to PSSHP yes no (if no explain _____)
- 2) Referred to outside agency _____ specify reason _____
for _____
- 3) What are (if any) the immediate needs of this woman? _____
- 4) What if anything must be followed up on tomorrow by PSSHP? _____
- 5) What arrangements did you make with and/or for the battered woman? _____
- 6) Your recommendations and/or impressions _____

TO BE FILLED IN BY CASE AND/OR PROJECT COORDINATOR

PSSHP Appointment set for _____ with _____

Case assigned as of _____

Safe Home _____

Hotel _____

Other _____

No follow-up, why _____

Case opened by: _____

Intake date _____

Counselor _____

Termination date _____

HOTLINE CALLS FROM PARK SLOPE RESIDENTS
(Project Memo given to all Hotline volunteers)

The issue of confidentiality is especially crucial for our Project. Hotline staff will probably be privy to information about community residents, neighbors, local public figures, etc. Therefore, it is essential that information about Hotline callers be kept within the Project and handled with respect for the woman's right to privacy. If information must be shared among staff it should be done with discretion and only when it is appropriate to do so.

The following are some guidelines to help you handle Hotline calls from local battered women:

1. Once verification of Park Slope residency is made (refer to map or the following boundaries -- N to Flatbush Ave., S to Prospect Expwy. which is approximately 17th St., E to Prospect Park, W to 3rd Ave.), help the caller clarify her request for assistance.

IF IT IS A NON-EMERGENCY SITUATION:

2. Clarify the services provided by the trained volunteer staff of the Project. Is this the caller's first contact with the Project? (see log book -- callers and their service request will be logged; at some point if you notice a "repeater" it may be helpful to acknowledge that perhaps some counseling arrangement should be made) Indicate that all calls are logged so that we can be as helpful as possible providing relevant information. Stress that all records are confidential.
3. Explore the situation and provide appropriate information and referrals.
4. Encourage her to speak with a volunteer Counselor for short-term counseling about her options/rights/personal issues related to the battering. Explain that someone from the Project will be contacting her the following morning if she agrees, and complete the appropriate log entry form.
5. If she is unwilling or reluctant, encourage her to re-contact the Hotline for additional assistance or when she feels comfortable. (If you feel it is appropriate, acknowledge the difficulty in seeking help.)
6. If the request is for community education, complete the appropriate log entry form.

IF EMERGENCY SHELTER IS REQUESTED:

1. Help the caller clarify and assess the danger of the situation. Any prior contact or shelter arrangements made with the Project? (See log book.)
2. Explore all shelter options.

3. Briefly describe interim shelter and three-night Safe Home arrangement, with long-term referrals made. Explain the volunteer Counselor's role in assisting her with any plans and providing her with information regarding her options/rights. Stress the three-days-only nature of the emergency shelter, and the need to mobilize other resources, but of our role in assisting her to do so. It is important that the temporary nature of our Safe Home service is understood as a time to identify other options and act upon them. Perhaps a brief overview of the financial options would be helpful: ER welfare assistance -- stress the temporary nature of this if the woman is uneasy with the idea; priority status with the housing section if the woman is already on welfare; special grants from welfare if the woman works. Again, identify the volunteer Counselor as someone who is willing and interested in helping her explore the best possible solutions/options.

4. Explore how she would like to proceed. Discuss her partner's possible reaction to her move, and its implications -- will he go looking for her? where does he hang out? will he go to the children's school?

5. If the decision is to leave, instruct her to meet you at _____.

6. When you see a battered women, review emergency services of the Project and interim shelter arrangements, describe the hotel room if appropriate, and have her sign the Acknowledgment of Responsibility form. Acknowledge possible feelings of discomfort, unfamiliarity with new surroundings, fear, ambivalences. Stress that she is not alone, and members of the Project are interested in helping her.

7. Call _____ to make the necessary arrangements.

8. Review the letter of introduction to the Project, and the process of contact the following morning. Suggest she re-read it at a later, less stressful time.

9. Offer her assistance with transportation.

Discuss all the appropriate options within the Project, and make the decision together. Accept the woman's assessment of her capabilities.

IF EMERGENCY SHELTER WAS REQUESTED BUT THEN REFUSED or the SITUATION IS AN EMERGENCY BUT SHELTER IS NOT REQUESTED:

1. Explore the situation and make the best recommendations you can, but accept the woman's decision to return home or not to leave home.

2. Suggest she seek medical attention from the hospital emergency room if needed. Offer to meet her there.

3. Encourage her to re-contact the Hotline at any time.

IF YOU HAVE ANY QUESTIONS, DO NOT HESITATE TO CALL YOUR BACKUP PERSON

HOTLINE MANAGEMENT TECHNIQUES
(Project Memo given to all Hotline volunteers)

The role of the Hotline staff is an extremely critical one. Battered women and advocates will be calling for assistance in the event of a crisis or an impending one. Therefore, the staff has the task of providing appropriate services, information and referrals under extremely stressful conditions. It is possible that you will be the target of much emotion, frustration and anger. Remember that you are asked to deal with a complex issue and a system of inadequate resources.

The following guidelines are provided in the hopes of making this task more manageable.

1. Help the caller clarify her needs -- shelter, counseling, legal, police protection, medical. Explore the current or impending danger of her situation, explore the implications of her options -- partner's reactions to: police involvement, court intervention, her leaving, etc.

2. Help the caller focus on the immediate need. Help her establish priorities, if necessary. Always re-direct the discussion toward the issue of battering and options. Often, this structuring helps to focus the caller and reduces the overwhelming nature of the situation to more manageable proportions.

3. When possible, acknowledge feelings of fear, rage, isolation, ambivalence, hopelessness, helplessness and make statements to reflect the universality of these feelings as experienced by women in similar situations. Often this will reduce immobilizing feelings. This will also demonstrate an understanding of the emotions that accompany a battering experience. Acknowledge the Project's concern and willingness to help and make the best attempts to offer support and information. Identify the "Catch-22" of seeking help and the inadequacy of services that battered women often experience. Many callers will have had first-hand experience of this.

4. Help the woman to recognize her own strengths and her ability to act positively. Acknowledge the call to the Hotline as a step forward.

5. Have the caller review your discussion and summarize it in her own words.

In general, individuals in crisis situations or anticipating crisis will be upset and agitated. It is the role of the Hotline staff to be as calming and well-focused as possible. This is necessary so that appropriate questions can be asked to elicit important information and details. Often it is helpful to acknowledge that questions may be intimate and in quick succession, but are necessary to get essential information and details.

The Hotline staff will be dealing with a range of situations, which may or may not deal with abuse, and a variety of personalities. It is important to be aware of certain clues which could indicate potentially difficult situations.

1. Do you detect slurred speech patterns? Inquire about current use of drugs or alcohol. Is there a possibility of an overdose, thoughts or threats of suicide? Encourage the caller to clarify her emotional state and identify her use of specific substances. Suggest that she seek medical assistance at the nearest hospital emergency room. Encourage her to do so.

2. Does the caller seem to use disjointed phrases, have difficulty following a logical discussion, bring in irrelevant or inappropriate thoughts or pieces of information, sound paranoid? Attempt to structure and focus the discussion. Be as concrete and specific as possible and have the caller use her own words to review what was discussed. If the caller seems extremely agitated, encourage her to seek medical assistance at the nearest hospital emergency room.

3. Are you feeling frustrated, angry, unable to connect with the caller? Try to identify the origin of this reaction. Is your reaction stemming from the frustration, anger, depression, etc. of the situation, inadequacies of the services and injustice of it all? If this is accurate, it is a natural reaction that you will probably experience to a greater or lesser extent depending upon the situation and personal issues and factors affecting you at that point in time. Often time and experience in dealing with this issue will help you cope with the demands of the situation. Most everyone who works in this area struggles with this.

Or, is your reaction stemming from your interaction with the caller? Often, interaction with certain personality types will make you feel this way. If you have checked out other reasons -- bad day, bad mood, nothing about the specifics of the situation -- and nothing seems to fit, accept your negative reaction as a function of this, and provide the caller with the best possible information and referrals.

4. Are you having difficulty ending a conversation? Is it hard for you to hang up? The "saviour complex" is a hard one to deal with! However, it is important to accept that our role is to provide support, services, information and referrals to battered women. Our role is also to help women identify their options and encourage them to gain a sense of power, and to mobilize their strengths.

Does the caller make it hard for you to say good-bye? Gently acknowledge the fear and difficulty of the situation and help review her options and referrals which seem feasible. Suggest she call the Hotline back, if the referrals are not appropriate.

GOOD LUCK!!!!

letterhead
stationery

WELFARE REFERRAL LETTER
(One copy kept for Project records)

date

TO: Receptionist
XXXXX Welfare Center
100 XXX Street
Brooklyn, New York

This letter is to serve as a referral to the Application Section of XXXXX Welfare Center for Mrs. -----, a battered woman in need of emergency food, funds, and shelter. I am documenting the fact that she was battered by her husband and was treated in the Emergency Room at XXXXXXXXX Hospital on (date) ; her black eye is a result of this incident of battering.

According to my professional judgment, Mrs. ----- needs immediate financial assistance and shelter placement, which are critical for the safety and well-being of herself and her two-month-old daughter. I understand that she has a right to such assistance under IM Memo _____.

If I can be of further assistance please contact me at XXXXXXXXXXXXX.

Thank you for your attention to this matter.

(signed by Project staff)

SECTION IV -- SERVICES

Part 3 -- Safe Homes

"'There's no place like home.' For a battered woman that familiar phrase has a bitter, twisted meaning: there is no place as frightening and dangerous as home. But what are the alternatives for a woman who doesn't feel safe in her own home? Where can a woman, often with young children and often without financial resources, go for help? One answer to that question for Park Slope women is: a "Safe Home." The program is based on a network of apartments and houses in the neighborhood where a woman and her children can stay briefly and, free of the fear of physical abuse, consider ways to change her situation."

"The women who have stayed with us have usually seemed surprisingly calm. But sometimes the constant fear came through. I remember the first woman who came was afraid to take her kids outside, and kept glancing out the windows; she could not help feeling that somehow her husband would find her. And another woman, who sat at the dinner table while her child was eating heartily, suddenly began to cry quietly; she said she was afraid that what she was doing would somehow hurt the little boy. It was terrible to realize how deep the fear must be, and how difficult to get away from it."

--statements by Safe Home volunteers

HOW THEY WORK

At any one time there are approximately eight to fourteen families or individuals in Park Slope who serve as "Safe Homes." A Safe Home is a private home in the community where a Park Slope battered woman and her children can stay for up to three nights. During her stay the woman works closely with a Project Counselor, either paid staff or volunteer, who helps her look at her choices and work out a plan. The three-night stay provides a bit of calm, a place and time to think in a safe environment. It also conveys to the woman that other people care about her. It is one more important way to break down the isolation battered women feel.

Families and individuals are recruited to be Safe Homes through word of mouth by other Safe Homes families, through our outreach and education meetings in the community, and through advertisements and leaflets that appear throughout the community.

Safe Home volunteers are interviewed by the Project Coordinator in their homes. All the members of the family meet together with the Project Coordinator to discuss the mutual responsibilities, concerns and anticipated problems of the family and the Project. Parents must be willing to be open with their children about why another family is sharing their home. This is important so the battered woman is not put into a situation in which she has to hide what has happened to her. All family members are asked to share their fears or concerns openly. Questions that most families ask focus on confidentiality of the Safe Home, dangers for the woman and Safe Home family, and how often the home will be called upon to be a Safe Home. The unique needs of each family are considered so that everyone involved can be comfortable. Concrete arrangements for mealtimes, child care, toys, sleeping arrangements, telephone use and keys are discussed thoroughly, and appropriate decisions are made for each family.

The family is encouraged to discuss all these arrangements with the battered woman and her children, to avoid misunderstandings and to help life go smoothly for everyone in the Safe Home. The Safe Home family may set a maximum number of times in a year that they may be called upon. Most Safe Homes have set a limit of two to four times per year. The family is encouraged to call one of the paid staff members of the Project whenever necessary. The family is given copies of our Project's materials, including leaflets, cards, Release of Liability forms and the Safe Homes contract that are signed by the battered woman, a bibliography, and an overview article.

A woman and her children are referred to a Safe Home by a Project staff member after a phone call is made to the Safe Home family to confirm that it is a good time for them to have a woman come into their home. Only paid Project staff make this referral, in order to insure confidentiality and to keep track of Safe Home use so that no one family is being over-used.

So that no family will be unable to be a Safe Home because of lack of funds, the Project will reimburse the Safe Home for the cost of meals, diapers and toys. No other form of reimbursement is offered, nor has any other form of payment, e.g. for rent, ever been requested.

Once a Safe Home placement has been confirmed, the Safe Home family may pick up the battered woman and her children, or she is brought by car or taxi, paid for by the Project, to their home. Before the woman's arrival, both she and the Safe Home family are given the name of the Counselor assigned to the battered woman and to the family for the duration of the woman's stay.

The Safe Home family is responsible simply for providing meals and housing for a woman and her children if she has any, for a maximum of three nights. Their role is definitely not to advise or counsel the woman in any formal sense, nor are they expected to babysit the children or accompany the woman anywhere. They are expected to maintain a calm, supportive atmosphere and to be as judgment-free as possible.

To date we have had no major problems in using these voluntary Safe Homes in the neighborhood. We have found that thorough preparation of the battered woman and her children for a stay in a Safe Home, and thorough preparation of Safe Home families has worked well. Fears about breaking confidentiality, violent men appearing at the door, and stolen property have never come true. Because we also tell a battered woman that each Safe Home stay is arranged only through the Project and not directly with the individual Safe Home, we have avoided unexpected return visits to the Safe Home.

People commonly ask about the length of stay provided -- Is three nights really enough to make any difference? We have found that, because of the way our Project works, it is. A three-night stay for a woman working closely with a Counselor/Advocate can give her a chance to find help -- support from family or friends living inside or outside the New York area, money, a new temporary home or a relocation plan. It gives us time to put a woman on the shelter waiting lists in the New York area or beyond. For those in New York, immediate, same day shelter placement is often impossible because of a shortage of beds. And three days apart from her husband/lover gives a woman a chance to begin to sort out, in safety, what she feels and what she wants to do next. In those three days she does not have to worry about food, money or shelter. The Safe Homes Project supplies these. We also intervene during this period with the welfare bureaucracy, other shelters, friends or relatives in or out of state, or with anybody else necessary. The woman is not alone, and does not have to panic about herself or her children going hungry or without a place to stay. If she does decide to return home, she will be encouraged to stay in touch through counseling or if she wants, to bring her husband in for couple counseling.

We want to emphasize that a three-night stay is meaningful only because the Project is able to provide and mobilize all forms of needed support -- a caring Safe Home family, advocacy services, counseling and concrete supplies in the form of food, money, carfare, clothing and toys, to make the woman and her children as secure and comfortable as possible. And the Project can mobilize other support services. We could not function without good legal back-up from South Brooklyn Legal Services, shelters in the New York area, and other programs that our Project staff constantly turns to, and which are described in other parts of this manual.

Battered women in the community and the Safe Homes families all feel that they gain in different ways from this experience. The personal account which follows captures some of this richness and one family's growth.

WE ARE A SAFE HOME

by a Project volunteer

Many people that I have spoken with have expressed a deep concern about the effects of family violence, but respond with looks ranging from uncertainty to panic when I suggest that they find out about becoming a volunteer Safe Home. The possibility of joining the neighborhood network seems much more likely, however, after hearing about my experiences.

My husband and I had discussed the problems of wife battering with our children (ages 8, 9, 11, and 14) and the six of us agreed that we wanted to find out more about becoming a Safe Home. We were told, first of all, that we would be part of a team approach. Our responsibility would be to offer food and shelter for three days. We would not be expected to do counseling (each woman is assigned a trained Counselor) or give legal advice or provide for long-term arrangements. We would provide just a supportive environment where a woman can relax for a few days and consider her options. We were also told that as a Safe Home, we would be provided with a Counselor for those three days. We, too, would have someone we could call for support or guidance.

Being familiar with the statistics regarding the frequency of this problem, we wondered if our phone would be jumping off the hook once we registered as a Safe Home. That wouldn't be a problem. Each family can indicate how often they want to be used by the Project. Even opening up your house once or twice a year adds to the pool of available homes in the neighborhood. And, if you would rather not be called on a weekend, or feel that you have only enough space for a woman without children or have other special considerations, they will be noted on your volunteer card and respected. When you are called, it will be by a Project staff member who will discuss the emergency situation with you and determine whether or not you are willing and able to offer your home at that time.

Reassured, my family became a volunteer Safe Home and we have now been called twice by the Project. Our first experience taught us that there is no such thing as a "typical" case, although this one did make some very unusual demands on us. The Project Coordinator told us that a woman with three children under the age of six needed emergency shelter. The woman, Carol, a college student in her late twenties, had been beaten throughout her marriage. Her husband had prevented her from leaving him by refusing to allow her ever to leave the apartment with all three of the children. He kept at least one child at home to make certain that his wife would return.

Carol, who has no family in the New York area, contacted the Project. Together, she and a Counselor arranged for Carol to leave the house with her two older children. Citing medical emergency, Carol returned to the apartment with police protection for her six-month-old infant. At the same time she grabbed a packed suitcase which had been carefully hidden in the apartment and fled.

The first stop was at a local hospital for medical treatment. Carol's nose had been broken during a recent beating and she would have to remain in

the hospital overnight. The overnight stay was lengthened to two days and two nights when the doctors realized that past beatings had complicated Carol's injuries. Our first experience as a Safe Home, therefore, turned our house into a mini-nursery. Instead of having a battered woman and her children as we had expected, we had three children, four years, two years, and six months, and no woman!

Before we had time to panic, the Safe Homes Project sprang into action. A volunteer Counselor, stationed at the hospital Carol was admitted to, started to talk with Carol about her post-hospital plans. We received regular reports both about Carol's condition and about the long-term arrangements so that we could reassure the older children and answer their questions. A teen-age babysitter, hired by the Project for the three-day emergency, provided me with a few hours every afternoon to sit back and catch up on the rest that had been lost during the no-longer-familiar 2 am feedings. When the babysitter wasn't around my own children took over the nurturing with an intensity that is aroused by an emergency situation. Well-loved but outgrown dolls were passed down by my older daughters to the two- and four-year old girls, and everyone wanted turns feeding and holding the infant. By the third day, when Carol returned to pick up the children, we all had very mixed feelings about having our first Safe Home experience come to an end.

Later we happened to learn that after a brief stay in a Manhattan shelter for battered women, Carol was able to contact out-of-state relatives and, with their help, set up a home for herself and her children.

Almost a year later we received another call from the Project. This time a woman with a four-year-old child stayed with us for two days. Her Safe Home was changed when we discovered that her husband's relatives lived nearby and she did not feel comfortable going outside. Although brief, our second experience made clear the usual function of a Safe Home: sitting and listening to a woman who might, as in this case, be telling her story to someone for the first time; giving support for her shaky belief that she has a right to a different kind of life.

The fact that both of our experiences have been positive has not been due simply to good fortune, but rather to good planning. No family is sent to a Safe Home until a Counselor has met with the woman and decided that she would be able to function successfully within a Safe Home. A woman who is an alcohol or drug abuser, therefore, would not be sent to a Safe Home. Nor would a severely disturbed woman. Occasionally a decision might be made not to send a woman into a volunteer Safe Home where there are young children if it is felt that the physical signs of the abuse would cause distress. In cases where a Safe Homes stay is not advisable, the Project has arranged for a back-up support system. (See Emergency Hotel Stay, page)

Being a Safe Home brings the obvious inconvenience and disruption of routine. Another aid to helping the program succeed is to hold "rap sessions" for families who volunteer their homes. Meeting together to share the rough spots and the high moments strengthens the Safe Homes network.

TRAINING OUTLINE FOR SAFE HOMES

(Used in interviews by the Project Coordinator with the Safe Home family in its home. Usually there are two interviews, unless family members have already worked with the Project and are well known to us. In that case there is one interview.)

- I. Project orientation and overview
 - A. Components of the Safe Homes Project
 - B. Staffing
 - C. Services available
 - D. Mechanics of program
 - E. Community-based philosophy of program
- II. Safe Homes Focus
 - A. Interest and motivation of this family in being a Safe Home/
Discussion of how family sees and defines battered women
 - B. Responsibilities of Safe Home
 - C. Responsibilities of the Project staff to Safe Home family
 - D. Discussion of Safe Home role
 - 1. Responsibility of providing shelter, not counseling, within a supportive environment
 - 2. Assistance available from Project for food and clothing
 - 3. Coordination with Project staff
 - 4. Review of Safe Homes contract
 - 5. Confidentiality and safety
 - E. Discussion of family's reactions to responsibilities
 - 1. Discussion of family's fears, concerns
 - 2. Discussion of family routines and how to integrate battered woman into these routines
 - 3. Family's expectations of itself
- III. Forms, contracts and reading materials
- IV. Referral to family
 - A. Scheduling of availability
 - B. Rest periods between women coming into home
 - C. Discussion of how many people family can house comfortably
- V. Feedback mechanisms to Project
 - A. Emphasis on close coordination between staff and Safe Home
 - B. Invitation to join monthly volunteer meetings
 - C. Invitation to talk with another Safe Home in the community

TRAINING MATERIALS DISTRIBUTED TO SAFE HOME FAMILIES

- Project flyer
- Project description of services
- Schematic diagram of Project components
- Safe Homes Assessment Sheet
- Bibliography on battered women
- Safe Homes contract
- Project Introduction Letter
- "Battered Women - Some Facts" (prepared by Project)
- "Community Services for Battered Women" (Claudette McShane)

PARK SLOPE SAFE HOMES PROJECT

INTRODUCTION LETTER

(Given to every battered woman using a Safe Home)

HOTLINE - 499-2151

Any day from 9 am to 9 pm

WELCOME to the Park Slope Safe Homes Project. We are here to help you and your family during this difficult time. This evening you met with _____, who is a Project staff member and has arranged a safe place for you to stay. We hope you can get some rest later on and begin to feel safe. Tomorrow morning a Project Counselor will call you and arrange a meeting at our office. She will talk with you about what you want to do next. We have many ways to help you and your family.

If you decide to return home, you might want us to continue our counseling services to you and/or your family.

It is important that you work out your schedule (meals, child care arrangements) with the Safe Home family. We would appreciate your trying to fit into the Safe Home family's schedule as much as possible.

We know this is a difficult and frightening time for you. Other women have gone through this too, and we have been able to help them. We look forward to meeting with you tomorrow.

The Park Slope Safe Homes Project

PARK SLOPE SAFE HOMES PROJECT

ACKNOWLEDGMENT OF RESPONSIBILITY -- SAFE HOME
(Signed by every woman using a Safe Home)

I, _____
(name) agree to take full responsibility for all decisions about myself and/or my family while accepting emergency shelter in a Safe Home of the Park Slope Safe Homes Project.

I agree to the following rules:

1. I will not use alcohol or drugs in the Safe Home.
2. I may use the telephone only with permission of the Safe Home family.
3. I will return all keys to the Safe Home family at the end of my stay. I will not get copies made.
4. I will have only one stay with this family.
5. I will stay not more than three consecutive nights with this family.
6. I will maintain confidentiality. I will not tell my friends, family, or anyone at all the Safe Home family's name, address, location, or telephone number, or the name of my Counselor. If I break this rule, I will automatically be disqualified from any further service from the Project. I might be held responsible if harm came to anyone in the Project because I broke confidence.
7. I will leave the premises in the same condition as I found them.
8. I will be responsible for the care and discipline of my children.

Signed _____

Agency representative _____

Date _____

SAFE HOMES ASSESSMENT SHEET
(Filled out by Safe Home family after each woman's stay)

Please return this form in the enclosed stamped, self-addressed envelope at the end of the woman's stay to xxxxxxxxxxxxxxxxxxxxxx.

It is important that each use of a Safe Home be recorded as soon as possible to insure the maintenance of quality service and the documentation of vital information in the event of an emergency.

I. Initials of battered woman _____ Date _____ Arrival time _____

Children:	Ages	M	F

II. Arrangements

Initials of staff person who made arrangements with you _____
In what type of vehicle did the battered woman arrive? _____
Was she alone? _____ If not, who accompanied her? _____

Additional comments: _____

III. Activity in Safe Home:

Description of woman's and children's general activities _____

How was the bulk of the battered woman's time spent? _____

Describe how your family and the woman's family got along (both positives and negatives) _____

Was there any use of household facilities (telephone, washing machine, etc.) _____

If so, how was it handled and what was the outcome? _____

Describe mealtimes _____

Any problems with food choice, preparation? _____

_____ Cost of meals _____

Describe bedtime _____

Any significant bedtime incidents with children? _____

Additional comments: _____

Any significant problems: _____

IV. Coordination with Project

Name of volunteer Counselor _____
Did you feel there was enough coordination among yourself, the Counselor and the woman? _____ If not, what do you suggest to improve the communication? _____

Any problems with logistics? _____

What worked well? _____

Additional comments: _____

SECTION IV -- SERVICES
Part 4 -- Emergency Hotel Shelter and Financial Aid

EMERGENCY HOTEL STAY

Through a grant from the New York State Department of Social Services and ongoing local fundraising, the Safe Homes Project is able to provide emergency shelter in a decent hotel outside our community whenever needed.

If a battered woman comes to us late at night or is too frightened to stay in the community and there are no openings in shelters, we can put her up in a hotel. We have also used hotels for women with very large families when no Safe Homes were available.

The hotel is used after the woman has had the usual meeting with Project staff or volunteers to assess her situation. She is informed of all the services available to her through the Project. Her emergency needs, e.g. food, clothing, medical attention, are responded to. The woman is told that early the next morning someone from our Project will phone and arrange to meet with her. She is asked to sign an Acknowledgment of Responsibility that we keep, and is given an introductory letter explaining our Project services, as well as a referral letter addressed to the hotel. (See Sample Forms pages 90, 91, 92.)

We have a standing agreement with a decent, pleasant hotel. Its location is confidential. The Project staff member or volunteer making the hotel arrangements calls the hotel to confirm that there is a room available. The room is paid for by the Project through a monthly billing arrangement. The hotel staff knows only that it is providing rooms for families referred from a community agency. No mention has been made of a battered women's program.

In New York City, where most battered women in need of emergency help are referred overnight to dingy, depressing "welfare hotels," or are forced to sleep on a bench in the emergency welfare office, our having a safe, comfortable hotel has been reassuring.

* * *

Domestic violence calls are the number-one cause of police officers' deaths since 1972.

--FBI statistics

85% of domestic homicide cases had the police summoned at least once before the killing occurred.

--Kansas City Police Department Study, 1970-71

(letterhead stationery)

HOTEL REFERRAL LETTER

Date: _____

To Whom it May Concern:

This is to authorize use for one night of the hotel by

_____ and _____
(name) (number)

child(ren). Upon calling the hotel to confirm room availability, I was quoted the rate of \$ _____ per night.

Sincerely,

(Signed by Project staff)

SECTION IV -- SERVICES

Part 5 -- Counseling

"The fear does not let go. The fear is the eternal legacy. At first, the fear infuses every minute of every day. One does not sleep. One cannot bear to be alone. The fear is in the cavity of one's chest. It crawls like lice on one's skin. It makes the legs buckle, the heart race. It locks one's jaw. One's hands tremble. One's throat closes up. The fear makes one entirely desperate. Inside, one is always in upheaval, clinging to anyone who shows any kindness, cowering in the presence of any threat. As years pass, the fear recedes, but it does not let go. It never lets go."

"I remember the isolation as the worst anguish I have ever known. I remember the pure and consuming madness of being invisible and unreal, and every blow making me more invisible and more unreal, as the worst desperation I have ever known. I remember those who turned away, pretending not to see the injuries."

(excerpts from Andrea Dworkin article in *Mother Jones*)

INTRODUCTION TO COUNSELING SERVICE

Any woman or couple requesting any Project services is assigned a Counselor. We offer six- to eight-week crisis counseling which focuses on the choices the woman has and decisions facing her, while providing emotional support. The Counselor's role is flexible. If people do not want in-depth psychological counseling, this wish is respected. The Counselor is available to help a woman think through her choices, act as an advocate for the woman in dealing with other agencies, give emotional support, accompany the woman through welfare and/or court procedures.

Requests for longer term, on-going counseling are filled through our Social Service Coordinator, who either does the counseling herself or refers people to other agencies we know and respect.

Counselors are paid staff, or volunteers who have counseling backgrounds or past experience in the field of violence against women.

We counsel battered women in a variety of situations -- women thinking of leaving their male partners, women who have already separated, women who have returned to a violent or potentially violent home. If requested, we will provide counseling for all the children, the whole family or the couple. We respect the choices that battered women make about this. If women return home, we encourage them to come to us for counseling with their partners so that violence does not continue or escalate.

We also provide counseling for each woman who uses a Safe Home. We see this as supportive, non-judgmental work in exploring options during the woman's three-night stay with a Safe Home family. The family is specifically requested not to try to counsel the battered woman. It is the Counselor's role to help each woman in a Safe Home to develop a plan for where she will go next. The Counselor acts as an advocate for the woman as much as necessary to carry out the plan, e.g. calling shelters, calling friends or relatives, writing letters to welfare for the shelter referral, providing transportation funds available through the Project. The Counselor works jointly with the battered woman, her children and the entire Safe Home family to insure that people's needs and concerns are expressed and adequately addressed.

If there are any major problems, the Safe Home family is requested to call the Counselor. These occasions have been rare. For example, one night a woman staying in a Safe Home did not return to the home at the agreed time, and the family was upset and worried and called the Counselor, who was able to locate the woman and reassure the family. Another family called the Counselor when the woman came home after a long day away, telling them of a plan that differed completely from what they had been told earlier by the Counselor.

A Counselor must have a thorough knowledge of all available resources, including the steps necessary for obtaining services. She must be able to anticipate obstacles likely to arise, and know how they can be overcome.

Every woman is unique and will present a unique set of circumstances to the Counselor, who must be familiar with her personal, marital and family history; her current emotional state; ethnic, cultural and financial background; family and work options, etc. The Counselor's challenge is to help a battered woman choose among the resources and options available, to make the best plan she can in light of the complexities of her unique situation.

WHY A COUNSELOR IS NEEDED

Women often find leaving their violent partners difficult for a wide range of reasons. Some of the most common ones are listed here. A Counselor must keep in mind that a woman may feel any combination, and in addition may have feelings and/or problems that are unique to her particular situation.

1. Women often hope that their partners will change; they may believe his promises that the abuse will end, because they desperately want that to be true.

2. Women want the marriage or relationship, but without the violence. Many aspects of the marriage may be positive with the major exception of the physical abuse. Marked ambivalence and conflicting feelings make leaving very difficult.

3. Women may believe the children need their father, and the children may have a positive relationship with their father.

4. Some women feel responsible for their husbands, and feel they are needed -- for example, the man may have drinking problems, and the wife has fears about what will happen if she leaves.

5. In New York City, the services for battered women are very limited and difficult to obtain. Women often feel degraded and humiliated in trying to obtain legal, welfare, and shelter services. Every Counselor must see the shelters to which we refer women. There are only 300 beds in shelters for all five boroughs of the city, so battered women are sometimes put up by the Dept. of Social Services in "welfare hotels." Counselors must see these places for themselves in order to begin to understand the feelings of humiliation, isolation and depression or anger that a battered woman may have at living in them.

Counselors must understand how discouraging, frustrating and humiliating it is for a woman in the midst of an intense personal crisis, possibly suffering physically as well, to come up against the welfare bureaucracy. Many women report being treated in a demeaning and humiliating manner. It is important for the Counselor to act as an advocate for the woman (e.g. escorting, writing referral letters, making advance phone calls) and to remain available to the woman in person or by phone, until services are obtained.

Going through the court process can also be frustrating, humiliating and overwhelming. The woman must be prepared to tell her "story" (the intimate details of her life, including the abuse from her partner) to dozens of strangers -- clerks, social workers, counselors, court personnel, probation officers, judges, etc. -- over and over again. The support of a Counselor through this

process, especially one who can help to explain some of the legal jargon and call on back-up services for information about the battered woman's rights, can be crucial.

6. It is often very difficult to begin a new life, especially one kept secret from the abusing partner. Apartments are often difficult to find and are expensive. Moving and relocating herself and her children are stressful to any woman even under the best circumstances.

7. Some women are unable to manage financially on their own. In fact it is difficult to live on a welfare budget, and for the woman who chooses to work, child care may not be readily available even if a decent-paying job is.

8. Based on her knowledge of her husband, threats, and previous experience, the woman may be immobilized by the fear that the man will track her down somehow and continue or intensify the abuse. It is very difficult for a woman to develop a completely new existence and to insure her own safety. If she tries to maintain an anonymous existence she will live in an isolated world. And if there are children, she may feel that this is impossible or unfair to them, since she would have to sever all ties with former friends and relatives.

9. Some women may have poor self-images. They simply cannot imagine themselves taking charge of things successfully. Some women have gone from their childhood homes to married life, and are anxious at the idea of living on their own for the first time. Also, some women have had their self-confidence beaten down, and have become so dependent on their partners that they cannot imagine life without them.

A Counselor must always be aware that it is impossible to fully guarantee any woman a safe existence. She must be wary of giving false assurances. The difficulty of making such enormous changes should not be minimized. All the areas of concern listed above must be thoroughly explored with each woman using counseling services, although the importance of each one will always be different from woman to woman.

ROLE OF THE COUNSELOR

The role of the Counselor is to offer emotional support to a battered woman, to help her explore all the possible solutions and consequences (both legal and emotional) of each, and to help her make decisions.

The Counselor often meets the woman at a time when she is feeling most vulnerable, confused, upset and ambivalent. Sometimes the woman is depressed and may have suicidal thoughts or feelings. Through a careful exploration of the current crisis, the marital and/or relationship history, the physical abuse, and the problem of safety, the woman is usually able to begin to understand and think about the full range of choices she has. Using the resources, referrals and the technical assistance material available, and having a thorough knowledge of individual and family dynamics, the Counselor aids the woman in weighing each option, given the realities of her present situation.

Counseling is conducted in an atmosphere of respect for the woman and for the immense difficulties she faces -- especially the prospect of beginning a new life, with all of the unknowns and uncertainties of making choices under these circumstances. The Counselor must help the woman prepare for each "next step."

Early on, the Counselor brings up both conflicting and ambivalent feelings a woman may be experiencing if she has not expressed them, in order to broaden the emotional picture for the woman and create an atmosphere of complete acceptance. The Counselor tries to help the woman think in terms of a time period beyond the incident of physical abuse.

Counselors often mention the experiences of other abused women and talk about how some women choose to return to their partners. It is important for the Counselor to have in the back of her mind that women do frequently return home. At first the woman may strongly reject this idea, yet it is important for the Counselor to know that it may happen at any time. It is especially important that the Counselor always be aware of the ambivalence most women feel, even though they may not express it.

Women frequently describe their lives as being a "nightmare." Often it is helpful to use this word when talking with women saying that other women often feel as if they are living in a nightmare. It is essential that the Counselor be aware of her assumptions and/or value judgments about the woman. For example, she must not assume that she understands everything about the woman and what she is experiencing. The Counselor must test out her assumptions and be open to a thorough exploration with the woman. The woman is an expert on herself and must be treated as such.

The Counselor must be patient and must be able to appreciate the difficulties involved for a woman to make the decisions for herself and her family in a stressful context. The woman may feel frightened, paralyzed and ambivalent, all of which will impede her ability to make decisions. Add on the reality of the limited options usually available, and you have a very difficult situation. The Counselor must help the woman "fracture" the problem, that is, break it down to manageable parts of short- and long-term plans and goals.

COUPLE COUNSELING

Occasionally a husband or boyfriend can be brought into counseling when a woman first contacts the Project. This is most likely to happen when the couple is still living together. During the first counseling session, the woman's physical safety and the possibility of further abuse are fully explored. Every attempt is made to tone down the high emotions, which usually lead to verbal attack, blame, criticism and accusations, and to focus on physical safety.

An atmosphere of mutual respect cannot exist in the face of actual or threatened abuse, nor can counseling be effective if the abuse continues. If there is no commitment to ending the violence or threats of violence, and/or the abuse continues, all of the Project's other services are offered to the

women and children.

This section applies only to the few self-selected couples who want to come in together. It has been our experience that this does not happen when there has been severe physical abuse.

OUR APPROACH TO COUPLE COUNSELING

During the first interview the history of the relationship and family is explored, as well as the current crisis and/or battering. The immediate concern is for the violence, physical abuse and/or threats of abuse, to end. The Counselor makes it very clear that physical abuse or threats of abuse are unacceptable.

In the beginning, couples are usually highly emotional and full of recriminations. Questions about each person's background and the history of the relationship, besides beginning to open things up and explore the pain behind the anger, can have a calming effect. It allows the couple to think of themselves over a time period beyond the latest incident of abuse, which also helps to lower high emotions. The man is responsible for the physical abuse, and both partners are responsible for the conflict and other difficulties in their relationship.

If the man attempts to justify the physical abuse he is asked, "Does it work? Does it get you what you want?" Invariably the answer is "No." Rather than focusing on moral issues of right and wrong, the Counselor is focusing on function and what works. The aim is to get away from anger, blame and attack and on to more functional and positive ways of interacting.

Often the abuser can hear and understand the possible dangers of physical abuse; the Counselor spells this out to him. When calm and rational the man may for the first time see his behavior as truly dangerous, and therefore as unacceptable.

Through this kind of interviewing each person uses his or her ability to think rationally, and begins to get away from the habit of acting only on the basis of feelings. While calm and rational each person can develop ways of handling conflict that will actually work.

Once the abuse is stopped, counseling can be used to work on other problems in the relationship. The couple may contact us at anytime in the future, if they decide not to continue with counseling at any point.

* * *

"A wife may love a husband who never beats her, but she does not respect him."

-- Russian proverb

* * *

SECTION IV -- SERVICES

Part 6 -- Referrals

REFERRALS

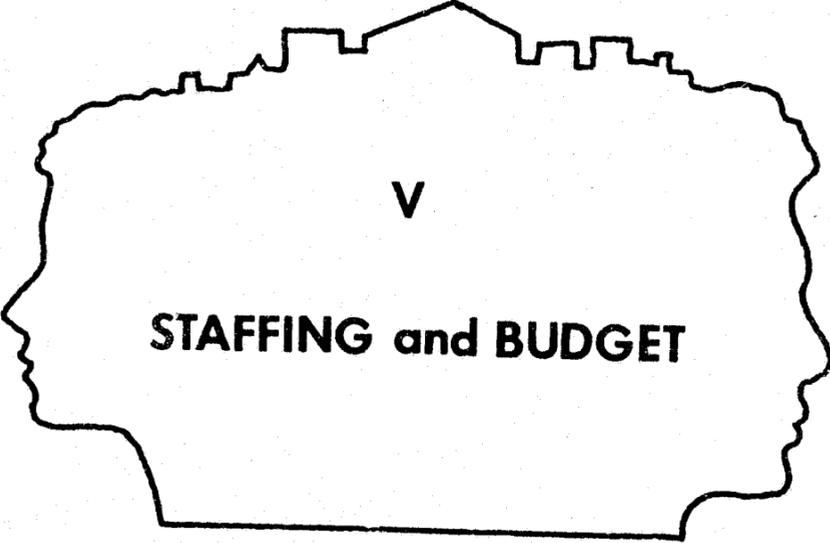
Because of the size of New York City, the vast number of agencies that exist and the many needs of battered women, it has been necessary for us to develop good referral information and mechanisms. At the beginning of the Project, the Project Coordinator compiled a referral list for each borough of the most needed services requested by battered women. This original list proved invaluable for Hotline volunteers who were confronted by a large number of requests from women calling from all over the New York City area.

Our list has now expanded to include the counties surrounding New York City and some New Jersey resources. We also keep track of resources for nation-wide services. When a volunteer is staffing the Hotline, she has a complete list of referrals that the Project has compiled.

To insure quality referrals, Project staff members have visited all the places to which we would be sending women, so that we could get a clear picture of their services, eligibility requirements and guidelines. Counseling services have been checked to verify their philosophy about the treatment of battered women. Wherever possible we have established relationships with competent and sympathetic workers within these other agencies. Often we can give battered women the names of the workers who will be most helpful to them. For Park Slope women, we make phone calls to guarantee service if we are sending a woman somewhere else for help.

Because of the hostility battered women often encounter from institutions, we have also tried to be sure that each battered woman calling our Project thoroughly understands what kind of place we are suggesting to her, and what to expect when she goes there. We prepare each Hotline volunteer to understand the exact services offered, the limitations of the services, the demands the service makes of its clients, and the consequences of using each service. We also try to be aware of the difference between the stated goals of the service and the actual treatment women might receive. For example, although New York City battered women are entitled to priority for getting welfare and immediate shelter placement, this is often denied. We therefore help Hotline volunteers prepare callers for what will probably happen to them, what their rights are and what to do if their rights are denied. Complaint procedures and agencies such as Legal Services that will help with specific complaints are given to each Hotline volunteer. And staff back-up in our Project is always available if problems come up after a woman has contacted another agency.

Paid staff and volunteers often spend hours sorting out problems and helping battered women get the services they are entitled to. We believe that this is an absolutely essential part of any program for battered women. Phone calls for battered women, letters, and personal advocacy are a regular part of our work.



V
STAFFING and BUDGET

CONTINUED

1 OF 2

STAFF QUALIFICATIONS

Current paid staff members in our Project have extensive experience in the area of violence against women. We consider this a primary qualification for leadership in any service program for battered women. Many projects are also effectively led by former battered women themselves.

In our Project all staff members have master's degrees in social work, although we do not believe these degrees are necessary for providing quality service. Staff members' past experience has been supplemented by attending conferences and continual review of the literature as it develops.

Our current Project Coordinator worked with rape victims for three years, and has worked with battered women for three years. Before coming to this Project, she had done extensive training for volunteers and social service personnel in working with women victims of violence. Our Social Service Coordinator has post-master's degree training in family therapy. The Project Coordinator provides all Hotline and Safe Home training for volunteers; our Social Service Coordinator provides all training for Counselors.

We emphasize these staff qualifications because it is important to have highly trained, effective staff working with battered women and training volunteers. Because this work is relatively new and is difficult, however, staff must also be allowed to learn and grow in the job.

PROJECT COORDINATOR JOB DESCRIPTION

- I. Overall coordination of the Project
 - A. Maintain a collaborative working relationship with Police Precinct Social Worker who has responsibility for social service coordination in the Project and for volunteer counselor training and supervision
 - B. Provision of back-up crisis intervention and Hotline coverage
 - C. Ongoing contact with Park Slope Clergy Association
 - D. Relationship with Research Consultant
 - E. Responsible for coordination of community education/outreach
 1. Conducting campaigns (media, flyers, outreach to schools and community groups) to reach battered women
 2. Responsible for conducting campaigns to recruit volunteers
 3. Exploring with local agencies and groups the possibility of talking with their employees and constituency about the issue of battered women
 4. Expanding and developing current education package on battered women and utilizing this material in community group presentations

5. Technical assistance to other groups interested in establishing safe homes programs in their communities

II. Relationship with Project volunteers

- A. Training and supervision of staff of hospital's Department of Pastoral Care to staff Hotline, 9-5, M-F
- B. Recruitment of volunteers
 1. Screening of all volunteers: Hotline, Counselor, Safe Home, Community Educators
 2. Training and supervision for Hotline, Safe Home and Community Educator volunteers
- C. Conduct monthly volunteer meetings and volunteer support group meetings

III. Training Materials

- A. Revisions of current resource list and options/technical information memos for Family/Criminal Courts, welfare, and police protection and other relevant materials
- B. Development of new training materials
 1. Responsible for Hotline, Safe Home and Community Educator materials
 2. Consultation with Social Service Coordinator re: volunteer Counselor training materials

IV. Networks

- A. Maintenance of existing supportive service network (Brooklyn Legal Services, Victim/Witness, Shelters, etc.)
- B. Development of expanded linkages with existing resources
 1. N.Y.C. Social Services, community groups, etc.
 2. Local hospital
 - a. emergency room
 - b. Pastoral Care Dept.
 - c. Social Services Dept.

V. Documentation

- A. Monthly statistics
- B. Monthly Narratives

VI. Proposal writing for supplemental funding

VII. Supervision

- A. By Program Director of CYDS
- B. Consultation with Social Service Coordinator

STAFFING -- COVERAGE CHART

The staff members listed here are employees of Children and Youth Development Services, with the exception of the Program Director of Sisters of Good Shepherd. This outline shows the staff hours used to provide services and maintain Hotline coverage seven days a week, twelve hours a day.

<u>Role</u>	<u>Staff time</u>	<u>Volunteered Additional time</u>
CYDS Safe Homes Project Coordinator	Full-time, works 7 hours/day & often includes 1 - 2 evenings per week	Minimum 20 hours back-up Hotline coverage, plus 5 hours for emergencies per month
CYDS Police Precinct Coordinator/Safe Homes Social Services Coordinator	Works full-time for Police Precinct program; 1/2 of that time involves work with battered women. Does case assignment to other workers & supervision	Minimum 12 hours per month back-up Hotline coverage
CYDS Police Precinct Worker	Works part-time in Police Precinct program. Provides service for Spanish-speaking women.	
CYDS Program Director	Supervision of Project paid staff, 1 hour/week; Hotline coverage about 20 hours/mo.	Minimum 20 hours per month back-up Hotline coverage
Sisters of Good Shepherd Programs - Director	Hotline coverage 8 hours per month	Minimum 20 hours per month back-up Hotline coverage

Secretarial and bookkeeping services provided through the sponsoring agency, Children and Youth Development Services

BUDGET

Project funding for the last two years has been awarded to our sponsoring agency, Children and Youth Development Services, from the New York City Youth Board, and from the New York State Department of Social Services.

The Youth Board funding is ongoing for staff salaries. Funds provided by the State Department of Social Services, for financial assistance to battered women, will expire in February 1981. When this funding ends, we intend to continue funding concrete services to battered women through local fundraising and through consultation fees charged by Project staff when training professionals outside the Park Slope community. We divide our budget into two parts to reflect our two distinct funding sources.

A. New York City Youth Board

(Funds go to CYDS for all its programs, of which we are one.)

<u>Expense:</u>	<u>Amount:</u>
Safe Homes Project Coordinator (full-time)	Professional salary
Safe Homes Project Social Service Coordinator (part-time -- shared assignment as CYDS Police Precinct Coordinator)	Professional salary
CYDS Program Director (part-time -- emergency and Hotline back-up coverage)	Professional salary
Sisters of the Good Shepherd, Director of Preventive Services (part-time -- emergency and Hotline back-up coverage)	Professional salary
Secretary (part-time -- CYDS staff person)	Professional salary
Telephone (agency in-kind contribution)	\$500
Office supplies (agency in-kind contribution)	\$500

B. New York State Department of Social Services
(Two-year grant to the Project)

<u>Expense:</u>	<u>Annual amount:</u>
Hotline telephone (Installation & monthly service)	\$1400
Polaroid camera	50
Film	50
Printing (flyers, brochures)	600

BUDGET -- continued

<u>Expense:</u>	<u>Annual amount:</u>
Client services:	
Hotel lodging	\$1300
Food	1700
Transportation	600
Children's supplies	250
Emergency clothing (we get most of it free from our Thrift Shop)	35

VI
COMMUNITY EDUCATION

OUTREACH AND EDUCATION

"Every Home a Safe Home", the slogan of the Park Slope Safe Homes Project, may seem an impossible goal in a society which traditionally isolates battered women, blames them for the abuse they suffer, and makes talking about violence in the family taboo.

To begin to change these widespread patterns we have an active outreach program of community education, which includes a Speakers Bureau and publicity efforts.

The outreach program is a very important aspect of the Project that can reach large numbers of people of diverse age, economic and ethnic backgrounds. Its purpose is to educate the community about the complex issue of woman battering, to raise people's consciousness about community responsibility for woman battering, to publicize our Project's existence, and to recruit potential volunteers for all volunteer roles. The building of formal and informal networks that will support battered women within the community is also a primary goal.

A Community Educator is generally a volunteer who has a commitment to and understanding of a community-based program as a response to the issue of battered women. Originally, a Community Educator was trained by attending a presentation given by an experienced Community Educator. Then the volunteer would co-lead several presentations with the more experienced Community Educator until she felt she was ready to lead her own presentation.

More recently, a series of training sessions are required before a Community Educator co-leads a presentation. At these training sessions, the implications and history of violence against women are discussed as well as examples of various types of presentations; necessary technical information is presented; various types of reactions people commonly have and questions that may be asked are described; and the volunteer can practice developing an outline and speaking in front of a group.

The volunteers trained in these sessions become part of the Speakers Bureau. This committee has a coordinator who assigns to volunteers a small number of community agencies each month. These agencies are contacted by phone and through the mail with a package of information about the Project and a letter offering someone to come to the group to do a presentation.

The current Speakers Bureau has chosen to focus especially on presentations to day care centers, schools and housing/tenants groups. The focus was chosen so that women in informal, community settings might be reached.

A typical presentation often starts with a definition of "battered women," with many of the myths associated with such abuse dispelled at this time. Every opportunity for audience participation is given, and discussion is encouraged by asking open-ended questions about people's beliefs about woman abuse. The videotape, "Til Death Do Us Part," is often shown. After the tape, there is further discussion about whether attitudes have changed after seeing it. Next on the agenda is usually a brief overview of the

options available to women who have been beaten, followed by an explanation of how our Project works.

This general method has been effective with many different groups, including women's groups, church groups, P.T.A.'s, food co-ops, block associations, community and social service agencies and school groups. One series of presentations was given at a local high school class. Reaching the teenage population with information about family violence before they get into long-term relationships is an exciting aspect of community education that we hope will have many long-range effects.

Another important aspect of community education is the possibility of recruiting volunteers for any of the volunteer roles. Also, going through the process of training, organizing a presentation, and then discussing the issue of violence against women with diverse groups of people in the neighborhood can be an important and useful personal experience for the volunteer. The following statement by a volunteer describes the meaning of this experience for her.

WORKING WITH THE SPEAKERS BUREAU

(personal statement by a volunteer)

My decision to become involved in the Park Slope Safe Homes Project, and particularly the Speakers Bureau, came out of several needs -- my need to be more connected to my community and work with people who are my neighbors, the need to work more closely with women, and the need to understand for myself what I found to be a frightening and confusing problem. Working with the Speakers Bureau and discussing and dealing with the situation of battered women has helped me to touch my own sense of vulnerability as a woman, and my fears and feelings of vulnerability as a woman loving a man. The sense of non-competitive caring and commitment that developed as each member of the Speakers Bureau tried to work out, in her own way, her interest and concern for women who are battered and how to convey that concern to other members of this community was very touching.

My involvement with the Safe Homes Project has reinforced my belief in the strength and power of women, and has been a support to my struggle to own and control my own life.

SPEAKERS TRAINING CONTENT OUTLINE

This outline was developed by the Project Coordinator and has been modified according to the needs and interests expressed by women going through training.

Session I

- I. Introductions
- II. Overview of the Project
 - A. History
 - B. Philosophy
 - C. Need for community-based services
 - D. Why this model of services was set up in Park Slope
- III. Common issues raised when speaking about the Project / Why the need for a Speakers Bureau
 - A. To reach battered women
 - B. To raise violence against women as a community issue
 - C. To recruit volunteers
 - D. To raise consciousness
- IV. Questions about the model of services and program for trainees
- V. Community Outreach and Education Committee Report
- VI. Distribution of Reading Materials

Session II

- I. Videotape - "'Til Death Do Us Part"
 - A. Personal reactions to videotape
 - B. Discussion of use of videotape in community presentations
- II. Battered women overview
 - A. Myths and facts about battering
 - B. Statistics -- national and local
 - C. Institutional sanctioning of violence
 - D. Systems failures
 1. Blaming the victim
 - E. What needs to be done
- III. Common fears and problems in making community presentations
- IV. Discussion of written materials

Session III

- I. Personal reactions to violence against women
 - A. Volunteers share their own interests, and motivations for working on the issue of violence against women, in a Speakers Bureau
 - B. Through group discussion we share how violence affects each of us
 - C. Discussion of the socialization of women and women's role in families

- II. Common worker/victim emotional reactions and responses to abuse
 - A. Didactic presentation on common feelings of being victimized and how they affect all of us
 - 1. Common reactions of victim blaming and distancing from the victim

Session IV

- I. Myths, facts and stereotypes
 - A. Whole group exercise listing all the stereotypes and myths anyone holds about battered women
 - B. Addressing of each stereotype and myth through group discussion, presentation of statistics and emotional/social overview of effect of violence on women
- II. Hints for making group presentations
 - A. Common questions raised by community groups about violence
 - B. Common problems speakers encounter and how to deal with them
 - C. Ways to avoid problems at community presentations

Session V

- I. Speaker trainees pair up to make their own 15-minute presentations on one of three topics: (1) the Safe Homes Project, (2) overview of battered women, or (3) options available to battered women
- II. Group critique of speakers' presentations
- III. Discussion of options for battered women
 - A. What they are
 - 1. Criminal court
 - 2. Family Court
 - 3. Welfare
 - 4. Legal Services
 - 5. Shelter
 - B. How to use each system
 - C. Consequences of using each system
- IV. Typical problems encountered by battered women

Session VI

- I. Speaker trainees continue presentations either singly or in pairs
- II. Group critique of speakers' presentations
- III. Discussion of mechanics of soliciting speaking engagements in Park Slope
 - A. Outreach letters and phone calls

- B. Responsibilities for follow-up to confirm engagement
- C. Feedback to Project

Session VII

- I. Presentation on special needs of minority women who are battered
- II. Presentation on outreach through Speakers Bureau to minority women
- III. Speaker trainees continue presentations
- IV. Group critique of speakers' presentations
- V. Feedback on training sessions
- VI. Party

SPEAKERS BUREAU GUIDELINES FOR OUTREACH TO MINORITY GROUPS

The following material is geared toward helping a White Project volunteer to be aware of the problems often present when a White speaker is attempting to communicate information on battered women to an audience of Black or Hispanic people. The majority of volunteers in the Project have been White middle- or working-class women. These questions arose from a discussion among members of the Speakers Bureau training group who were of varying ethnic backgrounds. This material was prepared and presented by Black and Hispanic women involved in the Speakers Bureau training.

1. How can I avoid "turning off" a minority audience?

- A. Be honest. State that you are not an expert on the particular issues of every ethnic group, but that you do know something about battered women.
- B. State clearly in the beginning of your presentation that battering knows no class or ethnic distinctions. Refer to statistics which support this statement.
- C. Be careful with your language. Avoid using "we" - "they" terminology.
- D. Whenever possible and appropriate broaden your statements to include all women. For example: "Women are socialized to feel responsible for holding the family together," or "A woman usually experiences guilt around breaking up the family," or "Women don't usually have incomes which enable them to be financially independent."

2. What particular obstacles does a minority woman face when trying to leave a battering partner?

- A. Attitude - When a minority woman has experienced a lifetime of discrimination, it is difficult for her to trust that the White, male-dominated system will mobilize to help her when she has been abused by her male partner. She feels confused about her allegiance: "Who is the real enemy, my husband or the judge?" And she feels more vulnerable than ever: "Why should I have to subject myself to the welfare system? They haven't helped me before, why should they help me now?"

These attitudes have a basis in reality. Experience tells us that efficient police response to minority areas is significantly less than in white neighborhoods.

There is a further conflict for many minority women as to how they identify themselves. That is: is she a feminist, or is she a Black woman? Defining allegiances has been difficult for many minority women who see themselves as oppressed by virtue of their womanhood and also oppressed by virtue of their minority status. The feminist movement is usually seen as a white middle-class phenomenon. Only recently have some minority women begun to feel that they can benefit by allying themselves with the movement.

The inclination to put her ethnic identity first may also prevent a minority woman from seeking help from a "White social services agency rather than the Black or Hispanic church or community

organization.

- B. Economics - This can be a tricky area for a White speaker, since she clearly wants to avoid antagonizing the audience by saying that most minority people are on welfare, or are unemployed or don't want to work at all. Employment and income statistics can be used in a positive way by factually demonstrating where minority women stand. For example, U.S. Department of Labor statistics show that fully employed women continue to earn less than fully employed men of either White or minority race, and also that minority women earn less than white women.

The point to emphasize is that, given their economic status in this country, all women are significantly limited in their economic mobility. And minority women have even fewer options than most women. Thus, they may be dependent on the social service system when they decide to leave their partners. Clearly a White woman is more likely to have a decent job, some savings, or family resources, and therefore has more options. It is worth noting that this dependence on welfare is a class and economic issue, rather than solely a race issue.

- C. Legal - As we well know, the criminal justice system frequently proves ineffectual when dealing with the serious situation of battered women. Traditionally judges have been white males who are unresponsive to the needs of minority women. For those of the lower economic strata, legal assistance is usually provided through Legal Aid Society lawyers who are woefully overburdened with cases, and often can meet with their clients for only a few minutes before presenting the case before a judge. Women's lack of political power in society is clearly reflected in their lack of power in the courts, and this is especially true for minority women.

3. How can I encourage a minority audience to reach out for service?

- A. Stress that any information revealed will be kept totally confidential. Outside agencies will have no access to personal information.
- B. Point out that the Project will not demand that a woman take any particular course of action, but rather will present options.
- C. Indicate by anecdote or statistics that the Project has successfully helped women of various ethnic backgrounds.
- D. State that the highest priority is that a woman be safe and out of physical danger.
- E. Make it clear that there are Spanish-speaking workers in the Project.

4. How can I enlist the support of minority women?

- A. Project staff should always reflect the ethnic diversity of the community.
- B. Seek out audiences who are already connected to an agency, community or church group with which they have had positive experiences. The staff of the organization can act as an initial liaison between the women and the Project. If the ethnic backgrounds of the speaker and the audience differ, it is helpful to have established relationships with staff or members of an organization before making a presentation.
- C. Suggest that the audience might take literature and post leaflets in local stores, schools, day care centers, etc. Make sure they are in the language primarily used in the community.
- D. Clearly invite them to Project meetings or to join Project service networks.

LEAFLETING

In order to reach both battered women and potential volunteers in the community we have found it useful to hand out leaflets repeatedly within Park Slope. We have tried different ways to insure continual leafletting and are still refining our outreach efforts of this type. It has been difficult to sustain volunteer interest in these efforts, although we think they are important.

A volunteer on the Outreach Committee coordinates our present leafletting system. The major business areas within Park Slope are divided into 3- or 4-block areas, and both volunteers and paid staff choose one area to keep provided with flyers. These flyers appear on community bulletin boards and in shop windows. At each monthly meeting volunteers are reminded of their assignments. The volunteer coordinating this effort also sends out reminder notices. Whenever the Project has a special event, such as our annual Holiday Crafts Fair, the same leafletting system is used.

We have found leafletting to be a relatively cheap, effective way to reach a lot of people. Several thousand leaflets cost our Project approximately \$100. To cover Park Slope thoroughly, which includes both business and residential sections, we have used 10 - 12 people distributing leaflets.

(letterhead stationery)

SPEAKERS BUREAU LETTER TO COMMUNITY AGENCIES

Dear

I am writing to you about the Park Slope Safe Homes Project, a community resource offering short-term emergency services to battered women, their children, and abusing partners, living in Park Slope.

In addition to these services, the Safe Homes Project has a community education program which includes an excellent videotape entitled "'Til Death Do Us Part," and a presentation about the counseling, shelter, legal and economic options available to women abused by their husbands or boyfriends.

We would like to discuss the possibility of arranging a presentation for your members on the issue of battered women and the Park Slope Safe Homes Project, the only community-based program of its kind in New York State. A volunteer or staff person from our Project will be contacting you shortly to see if your group would like such a presentation.

Looking forward to speaking with you.

Sincerely,

(signed)

Coordinator
Park Slope Safe Homes Project

SPEAKING ENGAGEMENT REQUEST
Park Slope Safe Homes Project

(Filled out by Speakers Bureau volunteers on every agency or community group requesting speaker or being solicited for speaking engagements)

Date: _____

Name of Agency:

Phone No.:

Address:

Contact person:

Size of group:

How did they find out about the Project?

Request or Purpose or Type of presentation requested:

Outcome of call:

Dates (3 alternatives) for speakers:

Fee or donation:

Safe Homes Project Speakers:

Outcome, including number of people attending:

TRAINING MATERIALS GIVEN TO SPEAKERS BUREAU VOLUNTEERS

Overview Articles

"Social Responses to Battered Women," Lisa Leghorn

"One of these Days - POW - Right in the Kissar," Judith Gingold

"Community Services for Battered Women," Claudette McShane

A Letter from a Battered Woman, Del Martin

Battered Women - Some Facts, prepared by the Project

Local newspaper article describing the Safe Homes Project

Bibliography on Battered Women

Resources and Referrals

Project Memo on Family Court

Project Memo on New York City Welfare Procedures

Project Memo on Police Protection for Married Women and Criminal Court

Project Memo on Police Protection for Unmarried Women and Criminal Court

"Need An Order of Protection? - Read This", prepared by Legal Rights Information Center, Women's Center, Brooklyn College

Referral list for all 5 New York boroughs and surrounding areas

A Handbook for Beaten Women, Marjory Fields and Elyse Lehman

Project Services

Project description of services

Project Flyer

Schematic diagram of Park Slope Safe Homes Project Components

Outreach materials

Outreach Letter to Community Organizations

Speaking Engagement Request Form

Sign-Up Sheet for Potential Volunteers

PSSHP
SAMPLE
FORM

PARK SLOPE SAFE HOMES-PROJECT

VOLUNTEER SIGN-UP SHEET

Date _____

(Taken to every speaking engagement or community event)

I am interested in participating in the Park Slope Safe Homes Project. (Please indicate which role, i.e. Counselor, Safe Home, Hotline volunteer, Community Educator or other, e.g. art work, leafleting, that most interests you.)

<u>Name & Address</u>	<u>Phone #</u>	<u>Previous volunteer experience</u>	<u>Project interest or role</u>	<u>Time Available</u>
---------------------------	----------------	--------------------------------------	---------------------------------	-----------------------

BATIK
LEATHER
POTTERY
STUFFED
ANIMALS
JEWELRY
ORNAMENTS
STAINED
GLASS
MARBLE ARTS
PAINTING
SILK SCREEN
WEAVING
CARDS
PEN & INK

40-100% OF
ALL SALES WILL
BENEFIT THE
PROJECT

PRICES RANGE
FROM
\$1-\$40

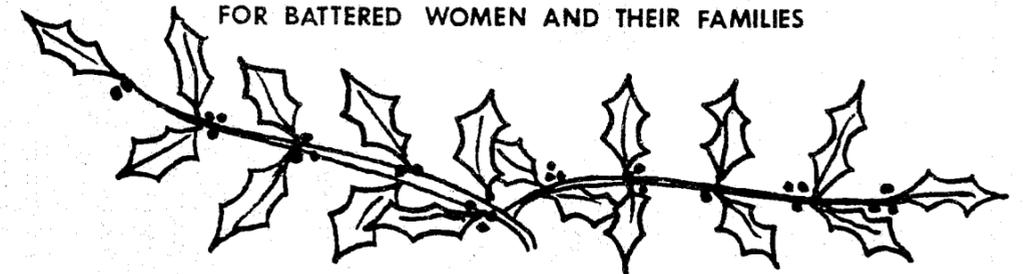


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SAFE HOMES PROJECT**

FOR BATTERED WOMEN AND THEIR FAMILIES



Do your holiday shopping in the rear of

women's works

181 SEVENTH AV.
BETWEEN 1st & 2nd Sts

DECEMBER 14, 15 & 16

Friday 12-6
Saturday 10-6
Sunday 1-5

Safe Homes Project Provides a Possible Solution in Park Slope

BY BONNIE GENEVICH
DIANE ABBOTT
MALIKA AHMED

Until very recently, wife abuse has been one of the most highly institutionalized forms of violence in society. Supported by the sanctity of the marriage contract, the view of women as property has allowed for a variety of forms of brutality to be exercised against women.

Only in the past few years have we begun to recognize the multiple factors affecting a woman's inability to leave a battering situation and to address these issues in order to make it possible for a woman to learn what her options are, and to get support and guidance in exercising those she chooses.

It is estimated that over 1 million women in the United States are victims of beatings each year. About 141,000 such women are the victims of domestic violence in New York State alone. A 1971 report found that one-third of the women killed in California that year had been murdered by their husbands in domestic violence assaults. The FBI statistics for NYS in 1973 show that wife beating affects three times as many women as does rape.

WIDE-SPREAD

Violence occurs in families of all races, religions, ethnic groups, ages and economic classes. What all these families hold in common is that a violent family is usually an isolated family, and an isolated wife. Feelings of shame, guilt, economic and emotional dependency and the belief that it is "... her fault" are common in the battered woman.

With the first beatings come bruises that she is embarrassed to show. She stays home until they heal and then makes up stories for her friends about why she has not been around. As the beatings become more frequent, and they do, she tends to go out less and less. She loses the friends she has and the support that they might offer her. The responses to her situation from society and the legal system are confusing, inconsistent and inadequate.

Her problem is often compounded by the lack of a safe place to stay to avoid another attack. This isolation feeds into the

woman's panic that she is truly alone with this problem.

Often when a woman has been beaten, she is incoherent, ashamed, confused and suffering from a sense of despair with her situation. For most women, guidance in helping them to realize their options and to present each with realistic alternatives can be reassuring and a source of new hope for the future.

Most of the women who come to the Park

Slope Safe Homes Project for counseling and emergency shelter explore all avenues of possibilities with the counselors that will best suit their needs and expectations—be it welfare, the courts, housing, job placement, etc.

We first named it the "Park Slope Safe Homes Project" because we are trying to provide a system of "safe homes" in the community to which a battered woman and her children might be able to go for a three

day respite. As our program has developed, we have seen that many women will not need the "safe home" but will need the intense, short-term, crisis-intervention counseling. However, we have retained this name because we hope to help each woman make her own home safe, to help through outreach to make her neighbors' homes safe, and to help through community education to make each house in the neighborhood a "safe home."

The Park Slope Safe Homes Project is a community-based, local effort to coordinate the existing formal and informal supports to provide interim, emergency and/or short term services to battered women, their children and abusing partners living in Park Slope, a community of approximately 85,000 persons. This includes developing the use of trained volunteer community residents to staff a hotline; provide counseling on options; advocacy within the social service, legal and welfare systems; and on-going community education.

Emergency (i.e. three-day) shelter for battered women and their children is available in trained, volunteer, community "safe homes." Extensive referrals to contacts within the health, law enforcement, legal, court and social services are made. Through these referrals and follow-ups, services that exist borough and city-wide are monitored to insure that assistance is provided.

The Park Slope Safe Homes Project, initiated two years ago, is co-sponsored by Children and Youth Development Services (CYDS) and Park Slope Clergy Association. It is the only community-based model of service delivery that is known to exist within New York State.

The dozens of volunteers within Park Slope working on the Safe Homes Project are committed to the provision of needed services to battered women, their children and battering mates. Further, those of us who currently work in the Safe Homes Project have made a commitment to go to any neighborhood and offer free technical advice to any person or group who wishes to set up a community response to the needs of battered women and their children such as we have

Places That Can Help:

A.W.A.I.C. (ABUSED WOMEN'S AID IN CRISIS). Telephone: 686-1676 (Hotline), 686-3628 (Office); Hours: 9 AM-5 PM, M-F; Services: Counseling, referrals, advocacy, shelter, information.

BOROUGH CRISIS CENTERS: Brooklyn: Kings County Hospital; Phone: 630-4688; Hours: 24 hours, every day; Services: crisis intervention, referrals, hospitalization.

BROOKLYN LEGAL SERVICES. Telephone: 855-8003 (office); Hours: 9 AM-5 PM, M-F; Services: emergency legal services for battered women; Booklet: Handbook for Beaten Women, in English and Spanish.

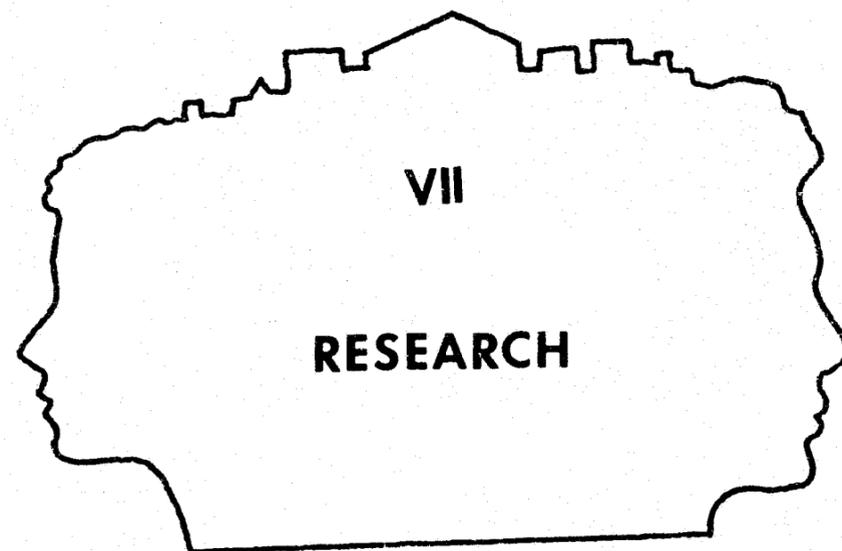
H.R.A. (HUMAN RESOURCES ADMINISTRATION) BATTERED WOMEN'S PROGRAM. Telephone: 581-4911-12; Hours: 9 AM-5 PM, M-F; Services: Counseling, referrals, information, shelter. (For emergency shelter & food after 5 PM weekdays and throughout the weekend contact: EMERGENCY ASSISTANCE UNIT (of Dept. of Soc. Services), 241 Church St., N.Y.C. Telephone: 344-5241).

LEGAL R.I.T.E.S. CLINIC (CETA TITLE VI). TELEPHONE: 780-5777 (Women's Center of Bklyn. College); Hours: Day & evening; SERVICES: Free legal information and referrals.

PARK SLOPE SAFE HOMES PROJECT (for Park Slope, Brooklyn women only). Telephone: Hours: 9 AM-5 PM, M-F; Services: counseling, emergency temporary shelter in "Safe Homes," referrals, advocacy, community education, crisis intervention.

WOMAN TO WOMAN PEER COUNSELING PROGRAM. Telephone: 780-5777 (Women's Center of Brooklyn College); Hours: Day & evening; Services: Free individual counseling.

WOMEN'S SURVIVAL SPACE (CENTER FOR THE ELIMINATION OF VIOLENCE IN THE FAMILY). Telephone: 439-7281 (Hotline), 439-4612 (Office); Hours: 8 AM-6 PM, M-F (at night: calls); Services: Counseling, information, referrals, shelter, advocacy.



RESEARCH PROGRAM

A Safe Homes Project can only be considered a success if it provides battered women and their families with services and options which radically improve their situations. Determining whether or not the Project has been successful requires monitoring a number of aspects of the program: (1) How many people are contacting the Project and with what types of problems? (2) What services are being used and how often? (3) Does the community know about the Project and support it? (4) Can a Safe Homes Project attract and maintain the involvement of volunteers?

In order to assess these and other aspects of the Project, a research consultant was employed to establish a program that would yield the necessary information. At the end of one year the information collected was to be analyzed and interpreted.

A Safe Homes program relies heavily on the community in which it is located. The homes used as short-term shelter, the majority of volunteers, and many of the related services are all drawn from the community. And since the Project's services are limited to women from the community, local agencies should know about our Project.

1. In order to determine the extent to which community groups were aware of the Project, 50 agencies were chosen from a local Human Services Directory to be part of a telephone survey. Any agency that might come into contact with a family abuse problem was interviewed. Half of the agencies, i.e., day care centers, churches, hospitals, schools and other community programs were asked a series of questions, including whether or not they encounter family violence problems and whether or not they were aware of our Project. (See page 139) An attempt was made to match the second group of agencies with the first group for types of agencies called.

2. Keeping a record of Hotline calls is another, relatively easy method of collecting data for research. Every volunteer who staffed the Hotline was instructed to fill out a Hotline Log Form, recording every call that came in. Through this procedure the Project has been able to keep a daily record of the types of calls received, and the type of service or referral that we have offered. (See copy of a Log Form, page 64)

3. One of the most positive aspects of the Project is that it does not depend on enormous financial support from public or private grants. A low budget means that it is a realistic model that can be duplicated by other communities. A low budget also means that a core of volunteers must be brought into the Project, and once in, must be sustained over a long period of time. As part of the research program, therefore, we wanted to obtain a volunteer profile. We mailed a Volunteer Data Questionnaire to everyone who had ever participated in the Project. In addition to yielding important demographic information that can be used for future recruiting, the questionnaire permits the Project to learn which aspects of the program attract volunteers, and the reasons volunteers give for leaving the Project. Keeping a Service Log for each volunteer allows for an on-going record of participation and permits us to "catch" volunteers who seem to be slipping away from the Project. The log (see page 64) can be kept up to date by volunteers at monthly meetings, or by Project paid staff. End of the year analyses of

these logs can also be used to assess the extent and focus of the demands made by a safe homes project on its personnel.

The results of our research on volunteers and community awareness are reported below.

VOLUNTEER PROFILE

All services of our Project are dependent upon volunteer participation. Because of the importance of volunteers to this and similar low budget programs, an analysis was undertaken of the Project's volunteer component. This description covers a one year time period, from 12/1/78 to 12/1/79.

A total of 51 volunteers worked with the Project during the year. Almost all of them (92%) were drawn from the immediate neighborhood. This figure reflects both an interest on the part of the volunteers to work in a local project, and the clearly stated preference of the Project to draw volunteers from Park Slope.

The volunteers stated that they had heard about the Project through one of four outreach methods. 17% had attended neighborhood meetings at which Project speakers had presented information about the program. These meetings were held at a local bookstore, at churches and at neighborhood homes. Another group (21%) had seen flyers that had been posted or distributed in the neighborhood which asked people to call to volunteer. These flyers are posted in storefronts on approximately twenty blocks in the business areas of Park Slope, and have been distributed to residents in front of local supermarkets. 25% of the volunteers had heard about the Project through personal contact with people who were already part of the Project. The remaining 36% work in local organizations that have established ties with the Project.

Most of the volunteers (66%) had past experience, either on a paid or volunteer basis, with social service agencies or with some kind of program or project that was community-based. 10% of the volunteers had been involved with other battered women's organizations in the past. 49% were currently employed in social services agencies or related professions.

The majority (70%) of the volunteers were employed full-time outside their homes while working with the Project. Another 22% were working part-time or were enrolled as students. Only 8% of the volunteers were unemployed (not doing paid work) during the time that they were offering their services.

Although the Project offers couple counseling and counseling services to the batterer, the primary focus is on serving the battered woman and her family. Because of this, most of the volunteers (88%) are women. Of the 6 men who offered their services, 4 are chaplains in the Park Slope area. A fairly high percentage of the volunteers (35%) are employed by or closely connected to religious organizations.

Volunteers ranged in age from 21 to 56, with most people (78%) between the ages of 26 and 40. Almost half the group (42%) had young children and many (43%) of the volunteers with children were single parents.

The Hotline attracted the most volunteers (53%). Counseling and serving as a Safe Home attracted 14% and 12% of the volunteers respectively. Another 10% worked in the area of community relations, including participating in the Speakers Bureau. Administrative work for the Project attracted 6% of the volunteers. 19% participated in more than one aspect of the Project.

The length of time a volunteer remains with the Project is difficult to assess, since many (45%) had entered the Project within the last year and, of that group, 74% were still with the Project. Of the volunteers who had been with the Project for more than one year (54%), the percent still active was 71%.

The reason most often given for leaving the Project was that the volunteer had moved out of the area. Other volunteers left because they had taken on new responsibilities (e.g. returning to school), and a few volunteers said they had left because they felt they were not being called upon for service frequently enough. The turn-over rate of approximately 25% is probably a realistic figure, or even a low figure, for a non-paying position in a community project.

ASSESSMENT OF COMMUNITY AWARENESS

The Safe Homes Project relies heavily on the awareness and support of local organizations for referrals and services. In order to determine the extent the Park Slope community needed, and was aware of, the Project, a survey of 50 community groups was undertaken. To help the Project determine the effectiveness of its outreach work over a one-year period, 25 groups were surveyed at the beginning of 1979 and 25 were surveyed at the end of 1979.

The first 25 groups were chosen at random from the Park Slope Human Services Directory (published by CYDS, April 1978), with the restriction that the groups be located within the area served by the Project. The second 25 groups were matched to the first group by category. The categories of groups surveyed included schools, health groups, religious organizations, civic organizations and police precincts. All groups were contacted by phone and the Community Awareness Form (see page 139) was completed with the cooperation of a representative from each group.

Initial Survey, January 1979 -- Awareness of battered women

68% of the organizations randomly chosen from the Human Services Directory said that family violence is a problem they encounter. Of this group of agencies, 88% reported that the violence they are confronted with includes violence against women. Most of the religious organizations (77%) had been approached by women who were being physically abused at home, although the frequency with which the problem was reported varied dramatically. One church estimated that women came on the average of one in every 3 to 5 weeks because they had been victims of physical abuse. Other churches estimated they are approached only once or twice a year with this problem.

Schools in the area are more likely to become aware of child abuse problems than violence against women, but 50% of the schools (public and private)

surveyed reported that either the problem had been brought to their attention or they had strongly suspected it existed in specific families.

The belief that women do not report physical abuse to health agencies was supported by the findings of this survey. One local hospital stated that they almost never see a battered woman (one every five years) and a visiting nurse association reported that they had never been involved in a situation that involved a battered woman. The remaining health center surveyed said that they did have battered women coming to them, but they were unable to estimate how frequently the problem arose.

Neighborhood groups that offer counseling to women reported the highest frequency of cases of abuse against women. A women's center in a local "Y" estimated that they had as many as five women a week coming to them because of physical abuse problems. Another counseling program stated that 25% of the people they see bring up family violence problems, including violence against women.

Pre-grant survey -- awareness of the Project

A random telephone survey of 25 community organizations revealed that approximately half of the group (52%) had heard of the Project. A breakdown of the surveyed groups into types of services suggests that outreach has been most successful among schools and civic organizations. 67% of all the schools surveyed knew about the Project, as did 80% of the civic organizations and local community centers. Half of the local churches indicated that they had heard of the Project. None of the three randomly chosen health centers or health associations had heard about the Project; nor was the Community Affairs Officer of one of the two police precincts that serve the community aware of the Project.

Of the community groups that knew about the Safe Homes Project, 75% said that they had seen the leaflets describing the program posted in the neighborhood. 80% had had a speaker from the Project address their group. Over half (57%) of the groups that knew about the Project had referred battered women to the program for counseling and/or emergency shelter.

Post-grant survey -- awareness of the Project

The 25 agencies selected for the post-grant survey were chosen at random by the Research Coordinator prior to the grant-year, and other members of the staff were unaware of which groups had been selected for evaluation.

The post-grant survey showed that 77% of the groups knew about the Project -- a 25% increase over the pre-grant survey. Civic organizations and local community groups were again the type of program most aware of the Project. 87% had heard of us. This is an increase of 7% over the first survey a year earlier.

The percent of churches and religious organizations that were aware of the Project increased from 50% to 80%. Health programs, such as child health stations and home nursing programs were more aware of the Project, but are still not being adequately reached; 34% knew about us. The percent

of neighborhood schools who knew about the Project remained about the same, 67%. And the local police precinct said they were aware of the Project.

Leaflets posted in the neighborhood continued to be the most successful outreach method. 77% of the organizations that knew about the Project had seen the leaflets. 62% had had a speaker from the Project address their group, and 40% had referred battered women to the Project.

Conclusion

The pre- and post-grant surveys indicated an increased awareness within the Park Slope neighborhood, of the Safe Homes Project. The survey also assessed community needs and will be incorporated into the work of the Outreach and Education Committee.

* * *

It is estimated that over 1 million women in the United States are victims of beatings each year. About 141,000 such women are the victims of domestic violence in New York State alone. A 1971 report found that one-third of the women killed in California that year had been murdered by their husbands in domestic violence assaults. The FBI statistics for New York State in 1973 show that wife beating affects three times as many women as does rape.

* * *

VOLUNTEER DATA QUESTIONNAIRE
(Condensed from two pages)

The Park Slope Safe Homes Project is interested, both for research and service reasons, in finding out more about the people who have served as volunteers in the Project. We would appreciate it if you would take a few minutes to fill out the questionnaire below and return it to us in the enclosed envelope.

1. Name _____
2. Phone number _____
3. Age _____
4. Occupation _____ full-time ___ part-time ___
5. Number of years of education _____
6. Marital status _____
7. Number of children _____
8. Number of adults in household _____
9. How did you first hear about the Park Slope Safe Homes Project?
10. When did you join the Project? (approx. date) _____
11. In what capacity did you volunteer? (check as many as apply)
 Hotline ___ Counseling ___ Safe Home ___ Community relations ___
 Legal advocacy ___ Welfare advocacy ___ Other ___
12. What related professional experience do you have?
13. What prior community experience did you have?
14. Have you had any volunteer work experience with a religious organization?
15. Are you currently active in PSSHP? ___ (If NO please answer 16 - 18)
16. When did you stop being active? (approx. date) _____
17. Why did you stop?
18. Now that we are expanding our program would you be interested in serving as a volunteer again?
19. Any comments or suggestions?

Thank you,
Park Slope Safe Homes Project
-- Researcher
-- Coordinator

ASSESSMENT OF COMMUNITY AWARENESS

1. Have you ever heard of the Park Slope Safe Homes Project? _____

IF YES TO # 1:

2. Have you seen our literature in the neighborhood? _____
3. Has someone from the Safe Homes Project spoken to your organization? _____
4. Have you ever referred a woman to the Safe Homes Project? _____
5. Has the Safe Homes Project ever contacted you for help? _____
6. Other (describe) _____

IF NO TO # 1:

7. Is family violence a problem that your agency has encountered? _____

IF YES TO # 7:

8. How frequently? _____
9. What type: Battered women ___ child abuse ___ other _____
10. What agencies, if any, do you contact regarding family violence?

11. How do you handle this problem? _____

IF NO TO # 7:

12. Do you think that contact with the Safe Homes Project could be of use to your program? ___ If YES, specify how _____

13. Do you think your program could be of use to the Safe Homes Project?

Thank you.

VOLUNTEER RECORD OF SERVICE AND CONTACT

Name _____

Phone _____

Role(s) _____

Date joined Project _____

DATE

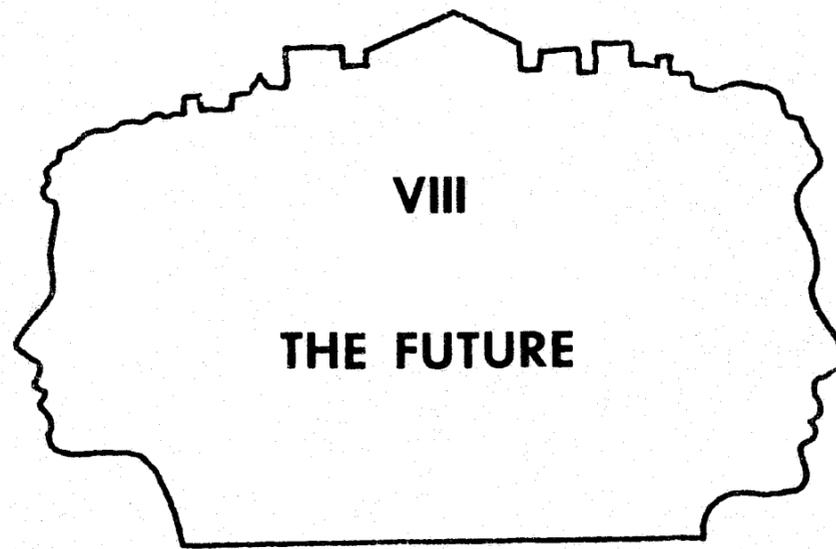
TYPE OF SERVICE OR CONTACT

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____
16.	_____	_____
17.	_____	_____
18.	_____	_____
19.	_____	_____
20.	_____	_____
21.	_____	_____

PARK SLOPE SAFE HOMES PROJECT
 Monthly Record of Hotline Calls, 1979

(These figures do not reflect all people contacting us -- they show most of the calls that came directly to the Hotline.)

Date	Total number of calls recorded	Location of agencies		Residency of Battered Women		PSSHP service arranged	Referral made		
		Local	Non-local	Local	Non-local		Legal	Shelter	Other
Feb. 1979	41	2	14	13	11	11	3	7	8
March	60	3	11	13	30	8	1	20	12
April	32	0	1	14	14	12	6	10	7
May	32	1	1	11	15	10	6	7	8
June	26	1	4	9	11	8	3	11	6
July	47	2	9	19	19	10	3	18	21
August	39	2	1	20	25	14	4	12	10
September	58	1	6	22	25	14	14	10	7
October	48	3	5	20	11	21	2	5	5
November	54	3	12	6	25	14	3	11	6
December	51	5	8	17	19	18	2	11	7
Monthly average (total)	44	2	6	15	19	13	4	4	9
Monthly average for first 4 mos	41.25	1.5	6.75	12.75	17.50	10.25	4.00	11.00	
Monthly average for last 4 mos	52.75	3.00	7.75	16.25	20.00	16.75	5.25	9.25	



THE FUTURE

The Safe Homes Project sees itself as a growing and developing program. Within a three-year period we have managed to insure our funding, and gained the support of many segments of our community. Much remains to be done if we are indeed to act effectively on our basic assumptions.

Since Park Slope is a multi-ethnic, multi-racial and class-varied community, we hope to have paid staff, volunteers and battered women active in our program who reflect that diversity. One emphasis in the coming year will be active outreach and organizing into parts of the community that may not know we exist.

We are now (spring 1980) in the process of organizing support groups for battered women in this neighborhood. These support groups will be open to any woman who feels that they would be helpful. Women who are still living with violent men, or women who have separated or divorced will be included in the groups.

As our program services have evolved, we have found it important to try to involve more battered women in the Project on an ongoing basis. Our plans call for the development of self-help networks and support groups for formerly battered women in the community.

We are hopeful that we will receive funding to hire two formerly battered women from the community to work as organizers. Our goal is to offer emotional support, help women with locating apartments and finding child care, and just be available when a woman is feeling lonely or depressed. We hope that women in these support networks will also get involved and take leadership roles in the committees and service components of the Project. We also foresee them as community educators.

As we do more educational outreach and leafleting, we have seen the number of referrals and Hotline calls increase. We believe, however, that there are many more battered women living in Park Slope and we want to find effective ways of reaching them. For this reason we will continue to try to reach as many agency personnel, clergy and informal networks of neighbors who might help their neighbors, as possible.

We also hope to reach more children and adolescents in Park Slope. We plan to begin emphasizing prevention and education through community networks, educational seminars and even more active outreach to families that may be isolated within the community. We also see the goal of eliminating violence against women in the family as directly tied to eliminating forms of women's oppression in general. The lack of affordable childcare, decent housing, employment opportunities and community support for all our members must be addressed as part of our strategies to eliminate violence against women. Our long-range vision includes building alliances with groups that are working on these issues so that a more effective political base can be built from which we together identify women's needs and concerns and demand social change.

KEY POINTS FOR OTHER COMMUNITIES: THE SAFE HOMES MODEL

Our goal, "Every Home a Safe Home," extends to other communities. Through our years in the Project, paid staff and community volunteers have developed a strong commitment to this model of services and education, and believe that it can be adapted to other communities. We have committed ourselves to share information with other groups and to travel to any community interested in the Safe Homes model. No fees for this consultation, except transportation costs, are charged.

We believe that this model can work in ways very different from the program structure we have chosen. Any group interested in starting a Safe Homes Project, however, should first consider certain issues.

1. Strong community support must be mobilized. Eventually key institutions that provide services such as emergency medical care, legal help and long-term shelter, must be contacted, and sound working relationships and referral mechanisms with these institutions must be developed. Identifying sympathetic workers within these agencies is one way to begin. If these links are not made, battered women will miss vital services.

2. In negotiating services with other agencies, it is imperative that the issues of program control and specific areas of cooperation be worked out. Differences in program philosophies and ideas about battered women will have to be brought out, understood and resolved as much as possible. Otherwise it will be the battered women themselves who get caught in the tensions between agencies.

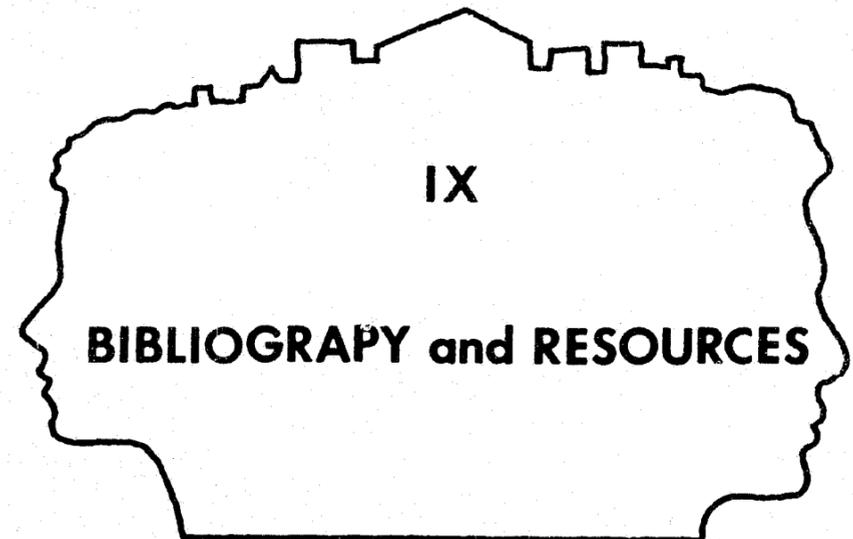
3. Building on current formal and informal networks within the community is essential.

4. Ongoing outreach to all members of the community must be seen as a priority for a successful program.

In general it is best to begin with an analysis of community strengths, and then to build on these strengths.

We also think that any Safe Homes program will need every program component discussed in this manual. It is impossible to separate services, advocacy, community education and outreach from each other and to offer only one of these components. For example, providing just counseling services would contribute to the further isolation of the battered women and could reinforce their image as "weak" women in need of help. Providing only community education would leave battered women in the community without the services and advocacy needed to change their situations. And counseling services without the provision of strong advocacy and concrete aid in the form of money and shelter will also lead to frustration and feelings of helplessness for battered women and also Project paid staff and volunteers.

Staffing must be well thought through. How many hours a week emergency coverage can be provided must be considered. The crisis situations battered women are in require hours of support and advocacy. We have found that one battered woman with medical, legal and emergency housing needs will usually require at first contact, about four to six hours of work. Use of a



IX
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"Violence in the Family: The Battered Woman," Program on Continuing Education at Teachers College, Columbia University, 525 West 120th Street, Box 132, New York NY 10027

"Physically Abused Women and Their Families: The Need for Community Services -- Program Development Guide," State of New Jersey Department of Human Services, Division of Youth and Family Services, One South Montgomery Street, Trenton, NJ 08625

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