Meeting Survivors’ Needs:  
A Multi-State Study of Domestic Violence Shelter Experiences

Transcription of Shelter Study Webinar Recording  
April 7, 2009

Speaker: Anne Menard  

Welcome everyone.  My name is Anne Menard.  I’m the director of the National Resource Center on Domestic Violence at the Pennsylvania Coalition Against Domestic Violence.  We’re very happy that you’re able to join us today for this webinar on Meeting Survivors’ Needs: A Multi-State Study of Domestic Violence Shelter Experiences.  It’s important to us that those working at domestic violence programs and at state domestic violence coalitions or allied organizations have opportunities to hear about the shelter study, its scope and findings, and webinars are important vehicles for us to use to get the word out.  On today’s webinar, we will first be welcomed by MaryLouise Kelley, Director of the Family Violence Prevention and Services Program, then hear from Dr. Eleanor Lyon from the University of Connecticut, who conducted the Meeting Survivors’ Needs Study.  After Eleanor takes about 25 minutes to highlight the findings from this study, we’ll have some comments from the Family Violence Prevention and Services Office and then the Policy Team at the National Network to End Domestic Violence, or NNEDV, on implications of the study findings for policy makers and practitioners.  Then we will hear from the NNEDV’s SafetyNet team about the recently released 2008 DV Count Census.

It’s now my pleasure to turn the floor over to MaryLouise Kelley of the Family Violence Prevention and Services Program at the U.S. Department of Health and Human Services.  MaryLouise,  

Speaker: Marylouise Kelley  

Thank you Anne.  We’re very excited to tell you about Meeting Survivors’ Needs: A Multi-State Study of Domestic Violence Shelter Experiences, a study, which was released on February 18, 2009.  This study has been a long time in coming and is the most in-depth examination ever conducted of how well the services and supports provided by domestic violence shelters are meeting the needs of victims of violence and abuse, and where there are gaps in services.  At the FVPSA program, short for Family Violence Preventions and Services Program, we feel as though this study has been very much needed since 1986.  The FVPSA Program has been providing funding directly to domestic violence shelters, primarily for emergency shelter and supportive services.  This funding is sent to states and tribes and state coalitions and national resource centers.  Funding for services reaches over 1500 domestic violence programs around the country.  So we feel it’s critically important to know what’s happening in those programs and for the first time we feel as though we are better able to answer questions about whether those grant funds are effective.  We can talk more about what do shelters do, what do survivors who come to shelters want for services and are these services meeting their needs.  And very importantly, in these days, we can answer questions like, “What kind of impact is this work having on survivors who come to shelters?”  So this has been very, very helpful to us.  We are grateful to our partners
at the National Institute of Justice at the Department of Justice, who administered this research grant.

Now I’d like to introduce the principal investigator on this study, Dr. Eleanor Lyon, who is the Director of the Institute for Violence Reduction at the University of Connecticut School of Social Work. She’s been actively involved in advocacy and research on violence against women for the last 30 years. Dr. Lyon also teaches courses on violence against women and research methods. She is co-author of the book, Safety Planning with Battered Women: Complex Lives, Difficult Choices. Eleanor,

**Speaker: Dr. Eleanor Lyon**

Thank you so much MaryLouise. I’m really, really excited to be able to share the results of this study with everyone. I’m going to move through an overview, just a simple overview, of the findings and move very quickly. First I want to tell you what the Shelter Study involves.

[Accompanying PowerPoint slides are available here.]

**Slide 3: What Did the Shelter Study Involve?**

- Collaboration between NRCDV and UConn School of Social Work.
- Funding by FVPSA Office of DHHS, administered by NIJ.
- Work with coalitions & programs in 8 states and those 8 states were basically selected to be representatives as we could manage, by region, by economy to provide a mix of small, rural programs and large urban programs, to provide a mix of racial and ethnic background among the survivors who were serviced by the program.
- We do have good regional representation. We have 2 from the west coast, 2 from the north central, 2 from the south central and 2 from the eastern region. A training meeting was held July 2007.
- Ongoing connection through conference calls, listserv and bi-weekly reports.
- Two forms: around entry and exit.
- Translations into 11 languages and languages that were identified by the coalitions in the 8 participating states. The ones that were most commonly used by survivors and the programs.
- Contract with National Hotline on Domestic Violence to respond to people who couldn’t complete the written form in English or other languages so we had all the mechanisms in place.

**Slide 4: Shelter Study Goals**

- Obtain information from a diverse sample of domestic violence survivors about their experiences in residential shelter programs, does not include residents of safe homes or people who may have been provided with hotel vouchers. These are the traditional residential shelter programs.
- Learn more about what domestic violence survivors want when they come to shelter programs and the extent to which survivors have had their expectations met during their shelter stay.
- Learn more about how survivors’ experiences, needs and immediate outcomes vary across demographics and shelter program characteristics.
• Develop recommendations for shelter programs across the country for how they might improve their services.

**Slide 5: Participation**

• Domestic violence shelter programs in eight states
  o Connecticut - 15 participating programs
  o Florida - 34 participating programs
  o Illinois - 32 participating programs
  o Michigan - 32 participating programs
  o New Mexico - 11 participating programs
  o Oklahoma - 26 participating programs
  o Tennessee - 35 participating programs
  o Washington - 30 participating programs
• 215 programs agreed to participate (81%)
• States selected to maximize the diversity of programs and survivors
• Included all major demographic regions
• Coalition staff members contacted each program in their state to request their participation

**Slide 6: Instruments: Survivors**

• **Shelter 1**
  o Offered within 48 hours of entry
  o Not administered while resident was in crisis
  o Includes demographic information and survivors’ experiences before and immediately upon entry
• **Shelter 2**
  o Given when a resident showed signs of leaving or at the time when most residents usually left
  o Includes number of days the survivor had spent in shelter, demographics, and experiences during and outcomes from the shelter stay
  o Both instruments ask about an array of services—desired and obtained

**Slide 7: Instruments—2**

• **Program information sheet**
  o Each participating program also completed a brief two-page information sheet
  o Included information about their staff, capacity, and services

• **Census information**
  o Provided by participating coalitions
  o Census-based information about the counties served by each shelter
  o Included population and demographic characteristics
Slide 8: Programs Participating

- Programs participating - 215
- Average # of staff/program - 16.5
- Average # of volunteers per program per month - 15
- Average capacity of shelter - 25 beds (4 to 102), with a little over half actually in the lower end of that between 4 and 20
- Average # of sheltered adults in last year – 130, with a wide range of between 2 and 2300
- Average # of sheltered children in last year – 114, with a wide range of between 1 and 1242

Slide 9: Languages spoken: 36 across programs

The larger the programs, the more likely it was to have a staff member who spoke a language other than English. In fact, 82% of the participating programs had at least someone who spoke a language other than English. And 72% had at least someone who spoke Spanish.

- Afrikaans
- Arabic
- American sign language
- Bengali
- Cambodian
- Dutch
- English
- Farsi
- Flemish
- Filipino
- French
- German
- Gujarati
- Hebrew
- Hindi
- Hungarian
- Italian
- Japanese
- Korean
- Lithuanian
- Malay
- Mandarin Chinese
- Nepali
- Navajo
- Polish
- Portuguese
- Russian
- Samoan
- Serbian
- Spanish
Slide 10: Program Services

- 98% can accommodate at least one type of disability (physical being the most common).
- Of 9 types of advocacy, % of programs offering ranged from 95% to 73%: housing most common, divorce issues least common.
- Of 6 types of services, % of programs offering ranged from 97% (support groups) to 50% (child care).
- Median length of stay, that’s the one in the middle, was 60 days but there were about a 1/5 that had a maximum of 30 days and 21% said that funders were the source of time limits in their programs.

Slide 11: Survivors participating

- Shelter 1 form only - 1,881
- Shelter 2 form only - 964 (2446 who completed Shelter 1 and 1429 that completed Shelter 2)
- Both Shelter 1 and Shelter 2 forms - 565
- Total number participating - 3,410

Not everyone completed both Shelter 1 and Shelter 2 forms.

Slide 12: Demographics: Racial/Ethnic background

- White/Caucasian - 52%
- African American - 22%
- Hispanic/Latina - 12%
- Multiracial - 6%
- Native American - 5%
- Asian/Pacific Islander - 1%
- Other - 2%

Slide 13: Demographics: Age

- Under 17 - less than 1%
- 18-24 - 20%
- 25-34 - 34%
- 35-49 - 36%
- 50-64 - 9%
- Over 65 - Less than 1%

70% fall into the range of 25-49 and you could say about 1 out of 5 were under the age of 25.
Note: Percentages are of those who provided an answer to this question; not all survivors answered all questions.

**Slide 14: Demographics: How many children under 18 do you have?**

<table>
<thead>
<tr>
<th>Number of children</th>
<th>Total children</th>
<th>Total with them in shelter</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>22%</td>
<td>32%</td>
</tr>
<tr>
<td>1</td>
<td>28%</td>
<td>31%</td>
</tr>
<tr>
<td>2</td>
<td>27%</td>
<td>23%</td>
</tr>
<tr>
<td>3</td>
<td>14%</td>
<td>9%</td>
</tr>
<tr>
<td>4</td>
<td>6%</td>
<td>3%</td>
</tr>
<tr>
<td>5 or more</td>
<td>3%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Note: Percentages are of those who provided an answer to this question (Does not include older children who were not able to stay in the shelter or those who did not have custody of the children).

**Slide 15: Demographics: Sexuality**

- Sexuality
  - Heterosexual/straight - 93%
  - Lesbian/gay - 1%
  - Bisexual - 3%
  - Other - 2%

Note: Percentages are of those who provided an answer to this question; not all survivors answered all questions.

**Slide 16: Demographics: Level of Education**

- Less than 8<sup>th</sup> grade - 5%
- 9<sup>th</sup>-11<sup>th</sup> grade - 22%
- High school grad or GED - 29%
- Some college - 33%
- College graduate - 9%
- Advanced degree - 2%

Note: Percentages are of those who provided an answer to this question; not all survivors answered all questions.

**Slide 17: How Survivor Heard about Shelter**

- Domestic violence advocate - 28%
- Police - 23%
- Friends - 22%
- Social services agency staff - 14%
- Family member - 12%
- Phone book - 12%
Respondents could choose multiple sources, so the numbers total to more than 100%.

**Slide 18: When Survivor Heard about Shelter**

- 27% had first heard of the shelter more than a year ago (reflection of fairly extensive safety planning on the part of the survivor or in some cases and prior shelter stay, in fact 54% out of the 27% had stayed at the shelter in the past)
- 21% between a month and a year
- 26% more than a day or two, but less than a month
- 25% within a day or two (immediate crisis with no advance planning)

**Slide 19: Other Results Re: Coming to Shelter**

- 24% had stayed at the shelter before
  - 25% of those had stayed in the last 6 months
  - 17% of those who had stayed before had stayed between 6 months and a year
  - 58% had stayed at the shelter more than a year ago

**Slide 20: Other Results Re: Coming to Shelter**

- 9% had tried to stay before, but hadn’t been able to
  - By far most common reason was that there was no room
  - Other reasons
    - Didn’t know where one was
    - Didn’t have transportation
    - Didn’t fit qualifications (e.g. main problem was homelessness)
    - Had teenage son
    - Had already stayed the maximum time
    - Health problems
    - Own actions prevented

**Slide 21: Concerns about Coming to Shelter**

- 25% had “concerns” (not being familiar with a shelter)
  - Not sure what to expect
  - Afraid they would be found
  - Not sure it was safe
  - Concerned about community living
  - Afraid for children
  - Ashamed
  - Fear of unknown
  - Concerned about new environment

**Slide 22: Concerns about Coming to Shelter (95% wrote in these type of concerns)**

- I didn’t know what to expect because I’ve never been to a shelter.
My concern was that people would judge me and tell me I’m wrong for all decisions I have made and seem to make.
That by coming to this place my husband would be able to find me and do me a lot of harm but he has not found me and this place is very secure and very necessary for us. Thank you.
That they would be able to take away my daughters or that they would deport me to my country.
This is a small town and I know that there are people that know this location and I was afraid of the privacy I would be afforded.

Slide 23: What Would You Do About Shelter? 5 primary categories

- Homelessness
- Lose everything
- Do something desperate
- Uncertainty
- Continued abuse and risk of death

Slide 24: What Would You Do Without Shelter? Examples (95% wrote in what they would have done)

- Be at a homeless shelter or begging friends to stay with them, and putting them at risk of abuse by my ex-boyfriend.
- Continue to run and move from place to place and constantly watching my every move. Wondering if he is around and not give him anymore than need be.
- I’d be sleeping in my car, lose my children and my job.
- Perhaps I would continue putting up with the bad life I had with my abuser, in a few words “resign to live like this.”
- Probably I would have been killed. Cause I had nowhere else to go.

Slide 25: When you First Arrived…

- Staff made me feel welcome - 95%
- Staff treated me with respect - 91%
- The space felt comfortable - 83%
- It seemed like a place for people like me - 77%
- Other residents made me feel welcome - 71%

Note: Percentages are of those who provided an answer to this question; not all survivors answered all questions.

Slide 26: What Survivors Wanted at Entry (38 different items to be checked)

- Support: 97% needed some; 57% needed at least 7 to 10 types
- Economic help: 93% needed; 61% needed at least 3 to 5 types
- Help re children: 87% of mothers; half needed at least 4 to 7 types
- Criminal justice needs: 34% needed; 24% needed just one of 3 types
Slide 27: What Survivors Wanted at Entry: Top 10

- Safety for myself - 85%
- Housing I can afford - 83%
- Learning about options & choices - 80%
- Paying attention to own wants & needs - 75%
- Learning how to handle stress in my life - 75%
- Emotional support - 73%
- Counseling for myself - 72%
- Connections to others who can help - 71%
- Understanding domestic violence - 70%
- Safety planning - 66%

Slide 28: What Mothers Wanted at Entry: Needs Related to Children

- Safety for children - 71%
- Paying attention to children’s wants and needs - 70%
- Responding to children when they are upset - 51%
- Counseling for children - 46%
- Education/school for children - 45%
- Child care - 41%
- Health issues for children - 30%
- Dealing with the child protective system - 27%
- Custody issues - 27%
- Dealing with the child welfare system - 24%

Slide 29: Length of Stay

- The mean length of time participants stayed in shelter was 33 days
- Minimum of 1 day
- Maximum of 624 days
- 24% stayed 1 week or less
- 39% stayed more than a week and up to 1 month
- 24% stayed more than 1 month and up to 2 months
- 9% stayed more than 2 months and up to 3 months
- Only 5% stayed more than 3 months

Slide 30: Who wanted help/Who got help

<table>
<thead>
<tr>
<th>% who wanted</th>
<th>% who got help (all—some)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety for myself</td>
<td>98%</td>
</tr>
<tr>
<td>Learning about options</td>
<td>98%</td>
</tr>
<tr>
<td>Understanding DV</td>
<td>97%</td>
</tr>
<tr>
<td>Paying attention to own needs</td>
<td>97%</td>
</tr>
<tr>
<td>Safety planning</td>
<td>96%</td>
</tr>
<tr>
<td>Connections to other people</td>
<td>95%</td>
</tr>
<tr>
<td>Emotional support</td>
<td>92%</td>
</tr>
</tbody>
</table>
• Dealing with feelings that upset me 92%  63% -- 23%
• Dealing with stress 92%  60% -- 25%

(Around time of exit) Survivors who stayed longer in shelter got more of the help they wanted.

**Slide 31: Because of Shelter Experiences, I Feel…**

• I will achieve the goals I set for myself - 93%
• I know more ways to plan for my safety - 92%
• I can do more things on my own - 91%
• I know more about my options - 91%
• More hopeful about the future - 91%
• More confident in my decision-making - 90%
• More comfortable asking for help - 89%
• I know more about community resources - 85%
• More comfortable talking about things that bother me - 85%

**Slide 32: Because of Shelter Experiences, I Feel my children…**

• Feel more supported - 84%
• Have more understanding about what has been happening - 78%
• Are better able to express their feelings without violence - 77%

Many noted they had infants or children “too young to understand.”

**Slide 33: Problems Encountered**

<table>
<thead>
<tr>
<th>Problem</th>
<th>% encountered</th>
<th>% resolved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conflict w/ other residents</td>
<td>32%</td>
<td>73%</td>
</tr>
<tr>
<td>Transportation</td>
<td>24%</td>
<td>54%</td>
</tr>
<tr>
<td>Time limits</td>
<td>16%</td>
<td>50%</td>
</tr>
<tr>
<td>Finding privacy</td>
<td>16%</td>
<td>47%</td>
</tr>
<tr>
<td>Curfew</td>
<td>14%</td>
<td>61%</td>
</tr>
<tr>
<td>Child discipline</td>
<td>13%</td>
<td>66%</td>
</tr>
<tr>
<td>Chores</td>
<td>13%</td>
<td>59%</td>
</tr>
<tr>
<td>Conflict with staff</td>
<td>13%</td>
<td>49%</td>
</tr>
<tr>
<td>Choices of food</td>
<td>13%</td>
<td>44%</td>
</tr>
</tbody>
</table>

18 specific types of issues - 10 related to rules and 8 related to other issues.

**Slide 34: Support and Respect Shown by Shelter Staff (% Strongly Agree)**

• Shelter staff treated me with respect - 73%
• My religious views were respected - 74%
• Shelter staff were supportive - 72%
• Shelter staff talked enough about safety - 67%
• Shelter staff talked enough about children’s safety - 69%
• Shelter staff addressed needs of disability - 69%
• Sexual orientation was respected* - 77%
• Racial background was respected** - 76%
• Shelter staff addressed needs related to youth or age*** - 69%

*76% of those who identified as other than straight.
**73% of those who identified as people of color
***this number is also 69% of those over 50

Slide 35: Rating of Help Received

• Very Helpful - 75%
• Helpful - 19%
• A little helpful - 7%
• Not at all helpful - 1%

Slide 36: General Conclusions

• Shelters address compelling need not met elsewhere.
• Survivors do not turn to shelters as first resort.
• Shelter programs respond to diverse people and needs.
• Primary needs expressed are basic: safety, information, help with children, help with emotional distress, economic resources.
• Shelters actually meet most needs for most residents.
• Shelter staff help resolve most problems that arise.
• Survivors rate their shelter experience highly, and attribute meaningful change to their time there.

Slide 37: Implications

• Resource challenges remain an issue.
• Mothers’ concern about their children is primary.
• Continued staff training in conflict resolution is important.
• Shelter rules need further consideration.
• Language & cultural competence are crucial.

Slide 38: Study Contact Information

Please contact research@nrcdv.org with any questions or comments.
Speaker: MaryLouise Kelley

Well thank you so much Eleanor. This is MaryLouise Kelley, jumping back in again. It’s so helpful to have your analysis of these findings to help us frame our work. I really believe that this study is going to be extremely helpful to us when it comes to working in the policy arena. I know that we feel that policymakers really need to know the critical need addressed by shelters and that there are still these unmet needs that exist. Some of the times when survivors did not receive the services they needed, it was because resources, such as housing, jobs, and shelter space were not available. We feel like we can really go forward now and say that these programs are effective according to the survivors who use these services, and your research was very helpful to us and painted a much more complete picture of what shelter services consist of. I think we can really go forward and say that at this point that shelters go way beyond providing emergency housing. They provide an access to a whole array of life changing support services for victims of domestic violence and for their children.

I’d like to turn to Monica McLaughlin from the National Network to End Domestic Violence for a few words.

Speaker: Monica McLaughlin

Yes, thank you MaryLouise. Here at the National Network to End Domestic Violence, we’re very excited about the implications of the findings of this study. So our first question is, what does the study tell us about making the case for increased funding for shelters and services and also gaining positive legislation to end domestic violence? I think what MaryLouise said and reiterating Eleanor’s points, the first thing that the study tells us that by in large, shelters are effective at meeting the needs of survivors. Survivors in the study overwhelmingly reported that their needs were met in terms of safety and connecting to community resources. We know that these outcomes are linked to longer-term safety and stability services for survivors and so this is a very compelling piece of data. What we were also interested to learn was that when survivors’ needs were not met by the shelters, it was typically an issue of a lack of resources by service providers. Together these findings help us make a strong case for additional funding requests and legislation that supports domestic violence shelters and programs. This data can be used to influence decision makers at the national level but also at the state and local level as well as private and corporate donors. Coupling this study with the National Census study that my colleague will speak about shortly, the data shows us that domestic violence shelters are meeting the needs of survivors but need more resources in order to effectively meet the full range of pressing needs, including housing. I would encourage all advocates to go to our website at www.nnedv.org to sign up for our action alerts. They will help you learn how you can continue to use your voice on behalf of the survivors and use this data to support what you know from your own experience every day. So thank you and now I will turn the floor over to Anne Menard.

Speaker: Anne Menard

Thanks Monica. As you have heard, we released the Meeting Survivors’ Needs Study on February 18th through a national media webinar and press release. Many of the 8 Shelter Study states also brought attention to their participation in the study, through a variety of activities at the state level, focusing on the implications of the findings for their state and the country. As the
current slide shows (Slide 39), the study reports are posted on our website, www.vawnet.org. Throughout the year, additional reports will be posted that look more in-depth at particular questions or findings of interest to the field or policy makers. And there are likely to be articles in key journals later in the year as well. These materials will also be posted on VAWnet.

Now we are pleased to have Sarah Tucker of the National Network to End Domestic Violence (NNEDV)’s SafetyNet Project to say a few words about the 2008 DV Counts Census that was also released in February. Sarah,

**Speaker: Sarah Tucker**

Thanks Anne. As Anne said, we recently released the 2008 Census on February 11th of 2009. The National Census of Domestic Violence Services is a 24-hour snapshot of all the services provided by domestic violence agencies around the country. September 17, 2008 was the date that we did that snapshot count, and we were so excited this year that we had such an incredible participation rate. One thousand five hundred fifty three (1,553) local programs participated and that was a seventy-eight (78) percent response rate which we were just floored by so that was exciting. It is our 3rd year doing the National Census. So what did the numbers tell us? Well, we learned that sixty thousand seven hundred and ninety-nine (60,799) adults and children were served in just one day through shelter, transitional housing and non-residential services across the country and of those, thirty thousand four hundred thirty-three (30,433) found refuge in either shelter or transitional housing. So, about half the people that domestic violence programs served on that day received housing services and the other half received some other services, be it counseling, legal assistance, advocacy, something like that. And so that holds true to our experience that we provide such a variety of services. Twenty thousand six hundred fifty-eight (20,658) calls were answered by local and state-wide hotlines and the National Hotline answered an additional one thousand twenty-five (1,025). Programs trained about thirty thousand two hundred ten (30,210) people at 1500 local trainings on the Census day. So these numbers are incredible. It’s overwhelming to think about how many people are served in just one day and perhaps the most staggering of them is that there were nine thousand (9,000) unmet requests for services. So the numbers also show us that we certainly have an ongoing need for funding, for more staff, more beds, more everything, and we know that.

What are the differences between the Census and the Shelter Study? Well, the Census was a 1-day count. It was 1 day where the Shelter Study was really more long-term. The Census gave us a real quick overview of what’s happening across the country. The Shelter Study really followed the full experiences of women during their shelter stay in 8 states. The Census is a count of services that we as advocates. Ours were really tally marks on a page - How many people did you help today at the shelters and programs? While the census tells us about the numbers served on one day, it’s really more quantitative, while the Shelter Study really tells us about the full experiences of women over the time that they were in shelter and what they received. They complement each other well. As you can see on the slide (Slide 39), the results of the 2008 DV Counts are on our website at www.nnedv.org and individual results of every state are up there as well, and we will, of course, be doing the census again this year in autumn of 2009.
Speaker: Anne Menard

Thanks Sarah. This is Anne Menard again from the National Resource Center on Domestic Violence. We were very pleased to coordinate the release of the Shelter Study with the DV Counts Study that Sarah was just talking about. They both contribute in significant ways to our knowledge of this work that many of you do everyday, so again we were very pleased to combine forces and bring both of these studies to you.

Now we want to spend a little bit of time asking Eleanor some follow-up questions and Marylouise and I will alternate back and forth. These were questions that came up in some of the previous webinars that we conducted with the field, with both local domestic violence programs and advocates working at the state coalitions as well as national domestic violence programs and organizations, and administrators of FVPSA funds in some of the states. So the first question for Eleanor is, the study tells us about survivors’ experiences but what does it tell us about the impact shelters have?

Speaker: Eleanor Lyon

Well, it provides that information in a variety of ways. One way that it provides information about impact is that it shows the percentages for each kind of help that they wanted and percentage of who go that help. But “impact” looks to changes that are attributed to the shelter stay and that comes from the information “Because of my experiences in the shelter I feel” - so those items about increased information, increased confidence, and increased hope are important. I think what’s particularly notable is that the 2 pieces of information, “more ways to plan for my safety” and “more about community resources” have been associated with longer term safety and well being and longitudinal studies that are experimental and much more rigorous in design such as the one completed by Dr. Cris Sullivan and also by others.

Speaker: Marylouise Kelley

And the second question for you Eleanor is, what does this study tell us about the needs of women of color, in particular?

Speaker: Eleanor Lyon

Well actually, it tells us a great deal, and I haven’t provided all the details in the overview I just presented. I think probably the first thing that is most important is that there were no significant differences in the overall ratings of help received, both specific support, respect, the global measure, whether or not they would recommend a friend. There were no differences by race or ethnicity. But the full report analyzes differences in specific needs, and I can give you a couple of examples. For example, African-American survivors were more likely than the others who want help with finding affordable housing. They were also more likely than the others to want help with financially related issues. Hispanic/Latina survivors were more likely than the others to want help with TANF (welfare). The Asian Pacific Islanders, as well as Hispanic/Latina survivors, were more likely than the others by substantial margin to want help with immigration related issues. One final thing I would like to note is that the Hispanic/Latina survivors were more likely to be parents and to want help with children’s issues, especially the large group that completed their forms in Spanish.
Speaker: Anne Menard

Eleanor, this is Anne again. Did any of the programs that participated in the study provide shelter to male survivors of domestic violence?

Speaker: Eleanor Lyon

Yes, they did. And it’s important to note again that this was a survey of survivors only in traditional shelters and did not include people who received motel vouchers or who stayed in safe homes, which are more likely, in some places, to be male. But we did obtain responses from 13 male survivors in shelters and provide detailed analyses in the full report that can be found at www.vawnet.org. But I should say that there were not a great number of differences between the men and the women, although I don’t believe we can generalize from the experiences of 13 men.

Speaker: Marylouise Kelley

Eleanor, this is Marylouise. The data shows a high level of residents over the age of 35. Can you comment on the differences in needs across ages?

Speaker: Eleanor Lyon

I can spend probably an hour commenting on differences across ages! But in this short time, I can tell you a couple of things, particularly about those who were over the age of 50. Survivors between the ages of 50-64 were more likely than those in the other age group to who want help handling stress. That was the one interesting finding. Those over the age of 65 were the least likely to say they want counseling or emotional support or help with job training but there were some differences as well. Survivors in the age ranges of 50-64 were most likely to want help with health issues and least likely to want help with TANF. Mothers aged 50-64 were most likely to want help with school, counseling and health issues for their children and with responding to their children when they are upset or causing trouble. So those are just a few examples.

Speaker: Anne Menard

Eleanor, this is Anne again. Could you expand more on what you mean by “shelter rules need further consideration”, which is one of your findings and recommendations?

Speaker: Eleanor Lyon

Anne, that covers a fairly large territory and a lot of it comes from the question about conflicts or issues. One of the things that it covers is eligibility requirements as well as rules for residents once they are in the shelter. So for example, some did report, as you saw, that they had been turned away because they had been arrested in the past or they had a history of substance abuse or other issues. Some had been turned away because they had sons over the age of 12. It might be possible for more programs to develop options for survivors who disclosed these issues with regard to shelter rules. One example that comes to mind involved a rule requiring all shelter residents to perform all the chores, so they have rotating schedules in many cases. Survivors,
who are pregnant, at least as the survivors wrote in, may want to avoid some chemicals that are used in cleaning. Some survivors may associate a particular room to traumatic experiences and have difficulty spending time in those rooms. I think those are just a couple of examples of issues that programs can consider and think about the types of individual accommodations they might be able to make to address individual circumstances.

**Speaker: Anne Menard**

Thanks Eleanor. There were many more questions raised in the previous webinars and we were only able to ask a few, but we want to let you know that a Frequently Asked Questions follow-up document from the previous webinars has been organized, which will be posed on VAWnet and updated periodically as more questions are raised by people becoming more familiar with the Shelter Study and its findings. In addition to the Frequently Asked Questions, we will be posting other Shelter Study material that we’re developing to help advocates in the field both understand the Shelter Study, its findings, and apply it to their programs and policy work.

**Speaker: Marylouise Kelley**

Thanks Anne. This is Marylouise, and I just wanted to add that every time we answer some questions, it raises more and certainly in light of the information that we heard about the DV Census Count, we know that as many survivors in a given day receive services in shelter as they do in non-residential services, so this just makes us curious to get similar information and perhaps have a similar study on the non-residential services provided by domestic violence programs.

**Slide 40 -** We are now going to turn to the poll results. At the end of each webinar, participants were asked to provide feedback on four questions. This slide reflects an average of the polling question results from the live Shelter Study webinars. We had almost 400 registered participants involved and we know that the numbers are even higher because some groups participated together with only one staff person “officially” registered. The identified target audiences included program advocates, state coalition staff, representatives from national domestic violence and ally organizations, the media, and state administrators.

Of those who answered the polling questions, you will see that:

- 67% agreed that the Shelter Study findings will help advocates enhance services to DV survivors and their children.
- 67% agreed that the Shelter Study findings will help advocates in their policy and program advocacy on behalf of DV survivors and their children.
- 77% thought it would be helpful to conduct similar research on the array of services provided to DV survivors who are not seeking emergency shelter (e.g. support groups, hotline, advocacy, counseling, transitional housing, etc.)

Clearly, we are hearing that the Shelter Study validated the work that domestic violence advocates perform everyday. It is very good news to hear that survivors rate the services very highly. And of course we need to know more about non-residential services.
This information also provides an opportunity for self-reflection. We look at some of the concerns that people raised and we can do some self-reflections at the national, state and local levels and consider whether our policies are meeting the needs of survivors. Do we need to take a look at some of the shelter rules? What steps might we take to close some of the gaps and resources that survivors face, such as housing, TANF, and immigration services? We can take a look at whether the services provided are really reflecting the top priorities that survivors tell us to address in shelters. We can look at whether we are doing all we can to make sure that survivors feel welcome and comfortable as they come into shelter. I am hoping that as we move forward, that the voices of survivors that were captured in the Shelter Study guide us.

As we close today, I’d like to thank Dr. Eleanor Lyon for the wonderful job that she did on the Shelter Study, Anne Menard and the staff at the NRCDV for making the Shelter Study happen and for holding these webinars for the field. I’d also like to thank our colleagues at NNEDV, Monica McLaughlin and Sarah Tucker, for telling us about the DV Census Count and the implications of our policy work on domestic violence. Thank you, everyone.