

# OAH PREGNANCY ASSISTANCE FUND PROGRAM: SUCCESSFUL STRATEGIES

Supporting Survivors of Intimate Partner Violence and Sexual Assault

## **Oregon Department of Justice**

In August 2013, the HHS Office of Adolescent Health (OAH) awarded the <u>Oregon Department of Justice</u> a four-year Pregnancy Assistance Fund (PAF) Program grant to support expectant and parenting teens, women, fathers, and families.

Recognizing that expectant and parenting teens are often survivors of intimate partner violence (IPV) and sexual assault, the Crime Victims' Services Division (CVSD) of the Oregon Department of Justice provides services to survivors through the Safer Futures project. Safer Futures offers IPV advocacy and support on-site in Child Welfare offices, public health departments, and local health care clinics.

Safer Futures maintains seven projects across the state of Oregon. Three focus on serving women within Oregon's child welfare system, while four focus on serving women within Oregon's health care system.

Each project works to make an impact at the participant, program, provider, and policy level. This is done by implementing three main strategies: 1) intervention, accompaniment, and supportive services provided by an onsite advocate; 2) case consultation, provider training, and

#### Why It Matters:

- Adolescent girls in physically abusive relationships are three times more likely to become pregnant than non-abused girls.<sup>1</sup>
- Adolescent mothers who experience physical abuse within three months after delivery are twice as likely to have a repeat pregnancy within 24 months.<sup>1</sup>
- Approximately 20 percent of pregnant adolescents report physical or sexual abuse during pregnancy.<sup>2</sup>
- Twenty-two percent of adult female victims of rape, physical violence, and/or stalking by an intimate partner, first experience some form of partner violence between 11 and 17 years of age.<sup>3</sup>
- Supporting expectant and parenting young families helps increase educational attainment and reduces the rate of repeat pregnancies.<sup>4,5</sup>

technical assistance; and 3) capacity building efforts designed to sustain the project beyond grant funding.

To support participants, Safer Futures advocates provide numerous services. They include referrals to community resources, safety planning, legal and court advocacy, assistance with housing and employment, transportation, and/or obtaining health insurance and care, and relationship safety assessment and education. Advocates also provide enhanced assistance such as doula services, therapeutic yoga classes, and support groups.

In 2014-2015, Safer Futures advocates served 505 pregnant and parenting teens and women, along with 161 of their children. The largest group served was women ages 20-24 and a smaller percentage (10 percent) was 12-19 years old. A 2015 participant survey showed that because of their advocate, 98 percent of women agreed they can make more informed choices about their situation. Also, 96 percent strongly agreed that they have new ideas about how to stay safe because of their advocate.

To bolster the programs' capacity to interface with complex systems, CVSD provides training on topics such as women's health, Oregon health care transformation, partnership development and sustainability planning. CVSD also invited national technical assistance providers such as Futures Without Violence and Child Trends. These supports have helped projects offer better services, garner community stakeholders' investment, improve data collection for demonstrating project outcomes, and develop strong sustainability plans.

"Our department got so much out of this training. The information provided is critical to the work we are doing. Great conversations are happening. This has been a great experience." - a Child Welfare Program Manager Although child welfare staff and health care providers are uniquely positioned to assist pregnant and parenting youth survivors of IPV, they may not have sufficient knowledge and skills. Thus, Safer Futures implements trainings for providers on relationship safety assessment and identification and appropriate responses to IPV (e.g. best practices for referrals). In one year, 614 individuals were trained through 55 trainings. Coupled with advocate consultations and referral protocols, these trainings resulted in 651 referrals made to Safer Futures advocates.

At the policy level, Safer Futures has addressed within child welfare and health care systems specific policies to better serve survivors of IPV. For example, projects recommended that partnering health care clinics improve internal policies regarding patients' opportunities for confidentiality. Today, all partnering clinics publicly display a policy statement that all patients will be seen alone for some portion of their appointment time. This seemingly small change has tremendous significance for women experiencing intimate partner violence.

Looking ahead, CVSD is collaborating with the <u>Oregon Coalition</u> <u>Against Domestic and Sexual Violence</u> (OCADSV) to identify options for sustainable funding for advocacy services in Oregon



Safer Futures project staff at the National Conference on Health and Domestic Violence. Credit: Christine Heyen.

beyond federal funding. OCADSV commissioned a report examining state reimbursement models for community-based services. This included potential options for securing Medicaid reimbursement as well as strategies for strengthening data collection and analysis to demonstrate the impact of advocacy services on women's health.

Through Safer Futures, CVSD is working to transform the lives of expectant and parenting teens. By addressing every level – meeting the needs of participants who are survivors of IPV, enhancing the programs that serve them, developing the capacity of other providers, and improving the policies of systems with which they engage – CVSD is making lasting, sustainable change in Oregon.

#### **Grantee Contact Information**

Oregon Department of Justice

Christine P. Heyen / <a href="mailto:christine.p.heyen@doj.state.or.us">christine.p.heyen@doj.state.or.us</a>

Crime Victims' Service Division / http://www.doj.state.or.us/victims/Pages/index.aspx

### **About the Office of Adolescent Health Pregnancy Assistance Fund Program**

The Office of Adolescent Health Pregnancy Assistance Fund (PAF) Program awards grants to states and tribal entities to provide expectant and parenting teens, women, fathers, and their families with a seamless network of supportive services. PAF Program funds are used to help these populations complete high school or postsecondary degrees and gain access to health care, child care, family housing, and other critical supports. The funds are also used to improve services for pregnant women who are victims of domestic violence, sexual violence, sexual assault, and stalking.

<sup>&</sup>lt;sup>1</sup>Roberts, T.A., Auinger, P. & Klein, J.D. (2005). Intimate partner violence and the reproductive health of sexually active girls. Journal of Adolescent Health, 36(5), 380-385.

<sup>&</sup>lt;sup>2</sup> Berenson, A.B., San Miguel & V.V., Wilkinson, G.S. (1992). Violence and its relationship to substance use in adolescent pregnancy. Journal of Adolescent Health, 13: 470-474.

<sup>&</sup>lt;sup>3</sup> Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J. & Stevens, M.R. (2011). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, CDC.

<sup>&</sup>lt;sup>4</sup> Philliber, S., Brooks, L.P., Oakley, M. & Waggoner, S. (2003). Outcomes for teen parenting programs in New Mexico. Adolescence, 38(151), 535-53.

<sup>&</sup>lt;sup>5</sup> Sadler, L.S., Swartz, M.K., Ryan-Krause, P., Seltz, V., Meadows-Oliver, M., Grey, M. & Clemmens, D.A. (2007). Promising outcomes in teen mothers enrolled in a school-based parent support program and child care center. Journal of School Health, 77(3), 121-30.