



**COBTH Domestic Violence Council DV Shelter Survey Report
March 2014**

BACKGROUND

In order to continue to assess and characterize the experiences of survivors who are seeking Domestic Violence (DV) shelter with the help of hospital-based social services and advocacy programs, the Conference of Boston Teaching Hospitals’ Domestic Violence Council (COBTH DVC) has recently conducted its 3rd very limited survey of its hospital members during the first 3 weeks of March. The first survey was conducted in September of 2012, and the second was in April of 2013. Findings and summaries of those surveys are available separately, by request.

FINDINGS

Between March 3rd and March 23rd, 2014, a group of domestic violence advocates and social workers in 7 Boston area hospitals (Boston Children’s Hospital, Beth Israel Deaconess Medical Center, Boston Medical Center, Brigham and Women’s Hospital, Brigham and Women’s Faulkner Hospital, Massachusetts General Hospital, and Newton-Wellesley Hospital), participated in a survey to document the need for DV shelter among those accessing their services. During this 3 week period, social workers and advocates filled out an online survey every time they worked with someone who was seeking alternative housing due to DV. They were asked how many of those tried to access DV shelter that day, how many found shelter, and where (if known) survivors went if DV shelter was not available.

Respondents’ role within their program/hospital*:	#	%
Advocate		48%
Social Worker		52%
Between March 3 rd -23 rd , number of DV survivors served by the respondents who were seeking alternative housing due to DV:	55	
Of those 55, the number who were requesting DV shelter <u>and</u> actively tried to get into a DV Shelter on the day they sought help (e.g., called <i>SafeLink</i> , other hotlines, or shelters directly):	41	75%
Of those 41 who tried to get into DV shelter, the number who got into a DV shelter <u>in Massachusetts</u> on the day they sought help:	9	22%
Of those 41 who tried to get into DV shelter, the number who got into a DV shelter <u>in another state</u> on the day they sought help:	3	7%

Where those who did NOT get into DV Shelter go*:		
Back home to the abuser	9	
Friend or family	16	
Non DV Shelter for singles	4	
Non DV Family/EA shelter	1	
Stayed in hospital (ED, admitted, or not discharged)	2	
Vehicle	0	
Street/other public place	0	
Unknown	1	
Other (specifics not provided)	1	

* Total is greater than 29; the additional numbers may include patients who were in need of somewhere to go, but were not necessarily seeking DV shelter. Some may also have been going one place and then another (for example non-DV shelter then to a friend's house)

As in the last survey, respondents were asked to indicate potential factors known or believed to be related to the inability to access DV shelter. As suspected, 87% cited the fact that there was not shelter space available. Among the other options listed, 13% indicated a language barrier, 20% no transportation, 13% a medical condition/disability, 7% an issue related to gender identity or sexual orientation, 13% mental health or substance abuse issues, and 13% "other." None of the respondents believed that inability to get into shelter was due to factors related to age, racial/ethnic identity, pets, or being determined by the shelter not to be in danger. Three additional comments made by respondents were:

- *"One woman was told by the shelter (RI) that they could not take her because she reported having used alcohol within the past 30 days."*
- *"One woman was asked by shelter (MA) if she was in any pain. She said yes, she still had a headache due to her husband having hit her the night before. The shelter staff told her they could not take her until she was "medically cleared". She was not seeking or needing emergency medical care, but did have an appt with her PCP. ???"*
- *"<A survivor> needing assistance transferring from wheelchair was told shelters could not provide this."*

The data continue to demonstrate that numerous DV survivors are seeking and yet unable to access DV shelter or an alternative safe place to go when they are in crisis. Of particular note, during this three week period, among a subset of victims seeking help finding DV shelter from a hospital-based social worker or advocate, **78% were unable to access DV shelter in MA at the time they were in crisis.**

LIMITATIONS

The authors wish to caution the reader about some key limitations which impact how the findings can be interpreted. While seven COBTH affiliated programs/hospitals participated this time, only a sub-set of social workers and advocates were able to participate in the survey due to our inability to reach everyone in our hospitals who work with victims, competing priorities for busy staff, etc. Furthermore, due to technical difficulties with the SurveyMonkey site, a few providers reported not being able to access the survey more than once. For these and many other reasons, the numbers in no way reflect the total number of victims seeking help with emergency safe housing in any one hospital, let alone all the area hospitals. However, the experiences faced by the survivors who are represented in the survey continue to provide insight into the lack of shelter space continuing to put victims at risk, and to illuminate some concerns regarding how survivors are being informed about eligibility, shelter capacity, etc.

Our goal is to continue to inform and engage our partners and stakeholders in addressing this critical gap that persists in the coordinated community response to domestic violence.