LOS ANGELES COUNTY DOMESTIC VIOLENCE COUNCIL (DVC) GENERAL MEETING

MINUTES Tuesday, July 18th, 2023; 12:00 PM – 2:00 PM (PST) LA County Department of Mental Health

DVC MISSION

The Los Angeles County Domestic Violence Council (DVC) provides leadership in the creation and support of a victim/survivor-centered, countywide, and coordinated approach to educate, prevent, and respond to domestic/intimate partner violence.

DVC Chair Lan Pham, DVC Executive Director

<u>DVC Staff:</u> Cindy Hernandez, DVC Admin. Assistant

Meeting Attendees: The meeting was attended by 70 community members and 7 panelists.

I. WELCOME AND INTRODUCTIONS

Ms. Lan Pham provided welcoming remarks and land acknowledgement. Attendees self-introduced (name, pronouns, title/role, and agency affiliation).

II. PRESENTATION: CHILD PROTECTION HOTLINE – DV/IPV PROJECT with Shiloh Davenport, Assistant Regional Administrator and Carlos Torres, Division Chief of the Child Protection Hotline, Dept. of Children and Family Services. (See July DVC General Meeting PPT Slides.)

Mr. Carlos Torres provided an overview of LA County and the scope of work of DCFS, and the Child Protection Hotline. He shared data related to DV/IPV referrals to the hotline. From April 2023 to June 2023, there was 1050 DV/IPV referrals to the hotline.

Ms. Shiloh Davenport provided additional details to the referrals which included referral sources: law enforcement, counselor/therapist, schools, other professionals, anonymous, CWS staff, relative, and therapists. The largest number of referrals came from law enforcement (LE), ranging from 60% to 67%. The highest number of referrals base on catchment area was from Pasadena (35%). The highest referrals with DV/IPV by zip code is Lancaster; zip code 93535.

Mr. Carlos and Ms. Davenport addressed questions from the audience:

Q: What is the background of the of the people on the hotline? Do they have domestic violence background? A: DCFS is working to increase staff's knowledge on domestic violence (DV). The role of the DCFS Child Protection Hotline is primarily to do intake; we are not experts on DV. However, the department partners with communitybased providers such as the YWCA to provide staff training on DV, and work closely with community-based DV experts. The YWCA is making sure that DV trainings for DCFS is through a trauma-informed lens. Trauma-informed care is a component of the training.

Q: Can the PPT slide with zip code be updated as LA is represented multiple times?

A: DCFS update the PPT slides, and with the DVC's assistance share out the PPT slides.

Q: What is behind the high number of referrals from Lancaster?

A: Most of the referrals in Lancaster are from law enforcement. There are a lot of DV/IPV incidents. Many are multigenerational that have not been resolved within the family. There are not a lot of neighbors (in Lancaster), so this result is that referrals are made when the situation is critical; "it's the 5th or 6th time when an incident has taken place". This is probably not unique to Lancaster. DCFS has a relationship with Lancaster Sheriff's Office.

Q: How do you ensure that the response is culturally sensitive?

A: DCFS is working with community-based agencies and learning from community partners.

Q: How often does DCFS listen to survivor's vs theoretical experience from DV professionals? Is DCFS open to feedback from survivors who have received services from DCFS?

A: Dr. Tamara Hunter will address this in her presentation. Her office is linked to the community. She leads focus groups and listening sessions with the community. Parents partners are very important.

In the DCFS Office, there are "cultural brokers" to support clients and ensure that the response is culturally sensitive. Some of the referrals are disputes, others are long-term issues. Survivors are invited to speak with DCFS team so we may learn. DV is a topic that DCFS aims to be more versed in. There is a huge continuum of situations related to DV. DCFS would like to improve assessment of DV situations, thus, has contracts with two community based DV providers to support in this effort.

First and foremost, the Child Protection Hotline's role is to prioritize child safety and cultural nuances. Investigators are trained. DCFS' teams in different areas of the county are appropriately responding. However, in theory, DCFS' role is not to investigate DV. The focus of DCFS is violence on the child. However, DCFS values a holistic approach, and working in partnership with DV agencies to ensure a holistic response. DCFS wants to connect victims/survivors to services; 80% of the time, it is LE who calls DCFS.

DCFS has a mechanism in the Child Protection Hotline. Last year, DCFS referred 5,000 families. When DCFS is screening for DV/IPV, the warm hand-off is there, and someone is connecting with the DV survivor/victim.

Q: Is DCFS using the Danger Assessment Tool from Dr. Campbell?

A: DCFS is reviewing tools and protocols from the San Francisco Domestic Violence Council, which breaks down how San Francisco addresses domestic violence when a call is made to child welfare. This is something DCFS is considering replicating for LA County. However, LA County is large, thus, considerations need to be made.

Lan Pham thanked Carlos Torres and Shiloh Davenport for their presentation and introduced Dr. Tamara Hunter.

III. PRESENTION: LA COUNTY MANDATED SUPPORTING INITIATIE with Dr. Tamara Hunter, Executive Director of the LA County Commission for Children and Families. (See July DVC General Meeting PPT Slides.)

Dr. Hunter provided context for LA County Mandated Supporting Initiative, which included:

Federal Family First Prevention Services Act – Federal funding for prevention

- California's Five-Year Prevention Plan
- County Comprehension Prevention Plan
- AB 2085 Changed reportable general neglect to only include circumstances where "no physical injury to the child has occurred but the child is at substantial risk of suffering serious physical harm or illness" and provides that "general neglect does not include a parent's economic disadvantage"
- California Child Welfare Council established a Task Force on mandated reporting reform
- LA County Board of Supervisors directs the County's evolution from mandated reporting to mandated supporting

Dr. Hunter shared data on child abuse reports made. It showed substantiated cases made by each type of mandated reporter. Although law enforcement, as a group, are more likely to report child abuse to DCFS (25%), they were not the group with the highest level of substantiated child abuse cases. The greatest percentage of substantiated child abuse cases was from the CWS group (28%). Interestingly, the CWS group only accounted for 5% of the referral pool. In general, 75% of substantiated reports came from non-law-enforcement reporters, such as educators, mental health staff, CWS staff, medical staff, and other professionals.

The LA County Mandated Supporting Initiative's goal is to provide support to families while reducing harms. See below list of potential harm to individuals and family:

- Fear, toxic stress, and trauma which may weaponize family separation, generational trauma, compound the
 effect of the problem.
- Disrupt trust and result in families and communities less likely to seek help.
- CPS record which is a strike against the family.
- Over burdening the system which already has limited resources for children who are truly unsafe.

Dr. Hunter shared that, in LA County, 1 in 3 Black and Native American children who turned 5 years of age in 2020 were referred to CPS at least once during their first 5 years of life. Thus, the LA County Mandated Supporting Initiative is meant to transform to a system of mandated supporting which:

- Prevents harm and promotes family well-being.
- Provides high quality support to families in need; and,
- Eliminates mandatory reporting as a driver of racial disproportionality.

The strategy presented include a model which includes 7 key components:

- 1. Strategic Collaboration
- 2. Narrative Change
- 3. Policy and Legislative Advocacy
- 4. Front-End Re-Design
- 5. Gold Standard Training and Curriculum Development Guide
- 6. Community Response Network
- 7. Community Response Guide

Dr. Hunter addressed questions from the audience:

Q: Will there be opportunities to invest in involvement for people with lived experience?

A: LA County has invested and will compensate survivors for contributing their time.

Q: It that County funding?

A: Initial funding for the project has been allotted by LA County. The concern is about the service component because it is the services that bring families, and connect them to mental health, chemical dependency, domestic violence, etc. As a part of the work, LA County is exploring other funding options (i.e., state funding).

Q: Can you send announcements and opportunities for involvement through the DVC?

A: If you are interested, you can be added to the Mandated Supporting Initiative Coalition. Information will be provided for you. We are looking for people to champion this issue.

Q: Have you approached the faith-based community?

A: Faith-based community is huge. Do you have suggestions?

A: SPA6/Reverend Holmes. Through the Cultural Broker Program, there are many reverends and pastors who are involved.

Q: Are you bringing this work to hospitals or bringing hospitals together? I've heard from others that UCLA is weaponized by abusers. There needs to be an acknowledgment that CPS reporting can be weaponized by abusers against DV survivors. There is currently not an acknowledgment of the power dynamics of parents who have more resources. It's important that there is training for social work staff.

A: Yes. We need to bring them to the table.

Q: What's going on with Child Welfare and child abuse report that we worked on?

A: DCFS and DVC will strategize and move forward. More to come on this. Everything presented today has pieces of the report. The report had recommendations related to the hotline reaching out to case workers to have these conversations.

Ms. Pham mentioned that DVC will be convening individuals who worked on the report in late fall to review the recommendations and identify key goals, objectives, and workplan for addressing key recommendations. More to come on this.

Ms. Pham introduced Atty. Mahsa Maleki who is presenting on immigration update.

IV. UPDATE: LA VAWA NETWORK – IMMIGRATION ISSUES with Mahsa Maleki, Sr. Staff Attorney with Community Legal Aid SoCal.

Atty. Maleki reported on recent policy updates which includes:

- 1. **TEMPORARY PROTECTED STATUS (TPS)**. The protected status for El Salvador, Honduras, Nepal, and Nicaragua, and extended all 4 countries for another 18 months. This is good news! The main issue that we are facing is when clients will get their documentation. Documentation process is taking a long time.
- 2. **U VISAS**: For U Visas, they are now processing applications from 2016 for U Visas, and 2018 for U Visas related to employment card.
- 3. **VAWA**: VAWA is taking 2.5 to 3 years right now; people are married to US citizens and have sponsoring relatives.
- 4. **JUVENILE IMMIGRATION STATUS**: Visas for children who suffered abuse and filing under juvenile immigration status, the process is taking about 6 to 9 months. These are DCFS cases. The children employment card is less than 6 months.
- GREEN CARD: Green Card timeline has frozen; not processing any Green Cards filed after September 1, 2018. They are on hold until October 1st, 2023. They are not issuing Green Cards.
- 6. **IMMIGRATION COURT**: In regard to Immigration Court, there is still a lot of prosecutorial discretion exercised especially for youth. The issue for youth is that when they were under the caretakers, they missed their immigration hearing and were issued to be removed. Generally, we were able to dismiss the case after a showing that the order of removal was litigious. The re-opening process of the immigration court removal order is taking 1.5 year to 2 years. The complication that we see is that this is the result of

care providers not sharing information with the social worker. Generally, the court cases are terminated.

- 7. **ASYLUM**: Ukraine and Afghan are prioritized. In general, however, asylum seekers can the 7 to 8 years for an interview.
- 8. **IMMIGRATION COURT**: The majority of judges have high denial rate of 70-90%. For this reason, attorneys are asking for dismissal before getting to immigration court.
- 9. **STATE**: State AB-1261 passed through public safety in June 2023. This requires law enforcement to sign certification for T and U Visas within 90 days. This bill asks for:
 - Broader qualification for crime victims.
 - Expedited processing for derivatives/dependents at the risk of aging out.
 - Applicants must show proof of derivatives aging out within 60 days. In which case, LE must sign certification within a week. LE must present reasons for why T and U visa were denied so applicants may appeal.
- 10. LA COUNTY: Board Motion passed on July 11, 2023, focusing on assessing policies, protocols, practices and trainings of LA Sheriff's Office, LA District Attorney's Office, and LA DCFS related to the issuing of U and T Visas; and assessing needs and gaps for undocumented/immigrant/refugee survivors of domestic violence/intimate partner violence, sexual violence, and human trafficking. (See July DVC General Meeting PPT Slides.)

11. BOARD OF SUPERVISORS DIRECTIVE – IMPROVING PROCESS FOR UNDOCUMENTED IMMIGRANT VICTIMS with Lan Pham, DVC Executive Director. (See July DVC General Meeting PPT Slides.)

DVC is working with LA County Office of Immigrant Affairs (OIA). OIA is leading this charge, specifically items 1 thru 4. There will be convenings in September related to these items. Lan mentioned that DVC will host a series of remote listening sessions for related to identifying key needs and gaps for survivors. An email invitation will be sent to the DVC listserv. All are welcome to attend and provide feedback and encouraging survivors, providers, and other experts to attend. We have 120 days to report back on the general needs and gaps, and 180 days to report back to the Board of Supervisors on recommendations.

Ms. Pham thanked Atty Maleki and introduced Ms. Bernita Walker and Ms. Cecelia Walker.

12. UPDATE: DVC INTERFAITH COMMITTEE with Cecelia Walker and Bernita Walker.

Ms. Bernita Walker shared that the DVC created in 1979; and she came on board in 1982. One of the things that the DVC heard was that the faith community did not understand the issue of domestic violence. Ms. Walker was already in the process of training faith-based community leaders. She said that the faith community is very diverse, with varying beliefs and practices.

To be a standing committee of the DVC, a group must show needs and apply to the DVC Executive Board. The Interfaith Committee, formerly Religion and DV, met 4-5 years as a "task force". In 2006, Bernita petitioned the Executive Board for the Religion and DV to be a committee. The goals are to train the faith-based community.

Ms. Cecelia Walker shared that when she joined the Committee, it was only Cecelia and Bernita. She was surprised that there was a space to hold conversation about religion and domestic violence. Faith played a big part in Ms. Walker's life and recovery process. She shared that the mission statement means a lot and should be remembered.

The mission of the Committee is, *"To inform, educate, and support the interfaith community and the prevention and response to IPV. Welcoming all religious and non-religious."* The Committee is now referred to as Interfaith.

This is to reflect how much the group has grown and learned. The Committee does not only inform others but allow members to also be informed. The Committee seeks to understand the barriers for faith leaders, providing support and assistance, and connection to resources for victims/survivors of domestic violence.

The Committee educates through the classes. Ms. Bernita Walker provides 40-hour training specifically for faith leaders. There is also a component of education that is inherent monthly Committee meetings as Committee members learn from one and other.

The Committee supports the clergies and faith leaders of all kinds. Historically, faith communities have been involved in planning solutions for child safety and homelessness. Domestic violence is a sensitive topic for faith communities; many can't talk about it. Survivors need a safe place to go. Scriptures can be used to weaponize against survivors.

Ms. Bernita Walker shared that everyone is a part of the community. We need to tell the truth. We can't stop it we keep it locked up. The work that is being done in DCFS and the treatment of our children is a vicious cycle. We must all pull together. We are inviting speakers from all backgrounds. If you want to attend the meetings, get in touch with us and go onto the DVC website. The next meeting, Ms. Varsha N. will be presenting on DV and Hindu community.

Ms. Cecelia Walker read a message from Ms. Varsha N.: Our City is one, the diversity is many. We invite all together in a place where we engage all leaders to learn about their key roles to support survivors and better advocate and serve. We are one.

13. ANNOUCEMENTS AND PUBLIC COMMENTS

Ms. Pham invited attendees to share announcements or comments. The below items were shared by members:

- Please join the LA Regional Policy Committee's next meeting. For more information, please check DVC website.
- The request to move the work on DV and Child Welfare forward, using the DV Child Maltreatment Report as a guide.
- The request that the DVC as a collective address how Black women are being treated in DV facilities. Not sure
 if this would be an ad hoc committee.
- The African American Committee Advisory Board to LA DA's Office is convening a meeting to discuss diversion
 program for those with mental health needs.

14. CLOSING

Ms. Lan Pham mentioned that August is a blackout month, thus, DVC General Membership will not be convening. However, look out for email about August listening sessions related to the BOS Directive. She thanked presenters and attendees and provided reminder that the **next meeting will be September 19th, 2023**, at Dept. of Mental Health.

Meeting adjourned at 2:00pm.

