National Strategy Sessions on Sustaining Services During the COVID-19 Pandemic: Session 5

CHARITY HOPE: Good afternoon, everyone. Thank you for joining our National Resource Center for Reaching Victims National Strategy Session on Sustaining Services for Victims and Survivors During COVID-19. My name is Charity Hope with the Center on Victimization and Safety at the Vera Institute of Justice and the National Resource Center for Reaching Victims.

We have just a few quick logistical items to go over before we begin today. Participants are in listen-only mode, which means we should not be able to hear you, but you should be able to hear us. If you'd like to turn on the captioning, let's go ahead and take a second to do that now.

If you go to the bottom of your Zoom screen, you're going to see a Closed Caption box. It has a little CC in it. There is an arrow or a caret to the right of that. Once you select that, you can either turn on your caption and show subtitles, or you can view the full transcript. Once you do so, you'll be able to see the words I'm speaking appearing below my video or to the right of your Zoom window.

If you cannot hear the presenter speaking, if you're having any difficulties with turning that captioning on or seeing the
interpreters or any other technical difficulties during the presentation, please enter a message into the chat pod. Please draft any technology-related questions to Angelina Ortiz. This is the best way to get in touch with us during the presentation today. We're going to use not only the chat function but also the Q&A pod. We're going to use that later.

So make sure you see both those options at the bottom of your Zoom room. Again, for tech questions, we ask you to chat us. And later, we'll use the Q&A pod.

A couple quick notes about your view in Zoom room, if you have joined the session via a web browser, you'll only likely be able to see the American Sign Language interpreter. If you have joined via the Zoom app, meaning you logged into Zoom, you will be able to see the presenter as well as the ASL interpreter. And with that, I'm going to turn it over to Nancy Smith.

NANCY SMITH: Thank you, Charity. Good morning and good afternoon. My name is Nancy Smith. And I am with the Vera Institute of Justice and the National Resource Center for Reaching Victims. And we are here together in recognition of the extraordinary impact that the COVID-19 public health crisis is having on survivors of crime, their access to victim services, to hospitals, police, courts, and many other vital systems of support.
We are also here in recognition of the new and unprecedented set of challenges facing organizations that serve survivors. And importantly, we are here in recognition that as a movement, we are strong and resilient, creative and innovative. And we have created this opportunity for us to come together to tap into our collective creativity and to solve these unprecedented challenges together.

During today's session, we hope to do a few things. First is to share what we do know. We also want to surface the challenges and the issues that you are facing and provide any guidance that we have available as of today. And at the start, we want to acknowledge that will likely raise more questions than what we have answers for, and we are committed to finding the answers that you pose that we may not be able to answer today.

So as my colleagues are sharing in the chat box, you will be able to find a recording of this session as well as a transcript and additional resources that are shared throughout today's session on our web site at reachingvictims.org. I am very grateful today to be joined by a panel of my colleagues who, in a short moment, I will ask to introduce themselves. We are also joined by representatives from the US Department of Justice Office on Violence Against Women and Office for Victims of Crime. They are in listen-only mode as well, and they are here also to learn about the issues that you are facing and the questions that you have to
take them back and have them shape the federal response to COVID-19.

In the interest of time, I'm going to go ahead and get started and ask our panelists to introduce themselves. And then we're going to start taking your questions. So you can go ahead and get started to ask your questions. Our lines are open, so to speak. You'll be able to ask your questions in two different ways.

One is by using the Q&A pod. The Q&A pod is located at the bottom of your Zoom screen. There is a icon that looks like a series of files that says Q&A. If you click on that, you can type in your question, and we will be posing those to our panel.

You can also raise your virtual hand. You can do that by clicking on the Participant icon at the bottom of your screen. Once you click that, a little box will open. And you should see an icon with a hand, and you can click your virtual hand. And we will have you in the queue. and we will call on you and un-mute your line so you can ask your questions directly, so couple different ways to get your questions surfaced today.

Be thinking about your questions. We'll be opening up those lines in a moment. For now, I'd like to ask my colleagues to introduce themselves. I'm wondering if we can start with you, Olga.
OLGA TRUJILLO: Sure, thanks, Nancy. My name's Olga Trujillo. And I'm the director of Education and Social Change at Latinos United for Peace and Equity.

And we're part of the organization called Caminar Latino, which is a Latino organization that serves Latino community members in the Atlanta metropolitan area. Latinos United for Peace and Equity, we're the national training and technical assistance arm to Caminar Latino. I'm happy to be here. Thanks for having me.

NANCY SMITH: Thank you for joining us, Olga. Amanda?

AMANDA WATSON: Thanks, Nancy. Thanks so much for having me with you all today. My name is Amanda Watson. I work with Praxis International as a program director. I manage our National Advocacy Learning Center program, and I also help coordinate our National Training and Technical Assistance Initiative for Rural Grantees in the United States. So I'm very excited and happy to be here with you all day today to have this conversation.

NANCY SMITH: Thank you, Amanda. Karla?

KARLA VIERTHALER: Hi, everyone. Good morning and afternoon. Thanks so much for having me, Vera and Nancy. It's nice to see so many people on this call connecting.

So my name is Karla Vierthaler. I work for the National Sexual Violence Resource Center. We are a National Training and
Technical Assistance Program that works around the prevention and intervention of sexual violence.

So we provide technical assistance to anybody and everybody. We also have the largest library in the world on sexual violence resources. And we are open for business still. So if you need anything, research or anything related to sexual violence, please reach out. And we do a lot around the prevention of sexual violence, so looking at that from a public health perspective. So yeah, great to be here.

NANCY SMITH: Welcome, Karla. Greg?

GREG FLETT: Hello, everyone. My name is Greg Flett. I'm with the National Children's Advocacy Center. We're located in Huntsville, Alabama.

We provide training and technical assistance to Children's Advocacy Centers in multidisciplinary teams across the United States. We are also one of four regional Children's Advocacy Centers. So we provide services to the 16 Southern states, helping them with, again, training, technical assistance, and all things related to the protection of children and youth. We also serve on the National Resource Center for Reaching Victims, again, with a focus on children and youth. I'm glad to be here with everybody today.
NANCY SMITH: Welcome, Greg. And thank you all so much for being with us. Karla, as you mentioned, it is amazing to see so many people come together. I think during this time it is very comforting to feel our collective power.

And so while we're getting started with the questions, I would like to invite anyone who would like to share your name and where you're from. You can do so using the chat box so we can get a sense of who is in the room. So again, using the chat box, you're welcome to share your name, share your program name, and tell us where you are logging in from.

With that, I am going to go ahead and get started with a couple of questions that were submitted during registration I am wondering if we could start off-- there's been a lot of discussion about really expanding tele-advocacy to stay connected and reach survivors during this time. We got a lot of questions about tele-advocacy. But one that I want to start off with is, "how can we ensure that rural communities can stay connected to survivors, understanding the challenges that rural communities face with access to broadband internet and other things of that nature?" And I can open that up to any of our panelists. You can just, if you're interested in answering-- oh, Olga is. Go ahead, Olga

OLGA TRUJILLO: Yeah, so let me kind of give you a context first before I answer. So I've been around in the movement for
probably like 30 years now and have worked as a consultant for a lot of different programs. And I've done a lot of work with rural communities.

I also now live in a rural community. I live in Star Prairie, Wisconsin, which is a town of about 500 people. We have three blocks in our Main Street, none of which have a stoplight. But we have three bars. So that's kind of interesting, I always think.

So there's a lot of things that you can do without broadband. So for example, I'm on. I have satellite internet, which is a challenge a lot of times. Fortunately, it's a sunny day, so I have a pretty good connection.

And I can do, for the most part, most things with satellite internet. It is more expensive than people are able to afford in most places. But that's one option. And you can stream. You can do video conferencing. You can do phone calls over internet. So that's one option.

Another option is-- so I live in a spot that's really, really beautiful, but we have limited cell service. So a lot of people will have either internet or cell service. And so you can use your cell phone to create a personal hotspot to then do some video chatting, video conferencing.
The thing to do, though, is some places are giving people unlimited service for free. I have not seen that in rural areas yet. But I am seeing it in cities and stuff. But you can switch your package to an unlimited package and then use your hot spot to do some video conferencing.

I do a lot of peer support for people around the country and around the world around the issue of dissociative identity disorder, which is a trauma disorder. And the reason I do it is because I have it and went through an extensive healing process. So I text, if people have texted me in the past.

I call using-- get this-- we still have landlines in rural areas. So I'll call someone. Or if I can use my cell phone on our internet service, then I'll call via phone. Also, if people contact me through Facebook Messenger, I will reach out to them in that way or through email. The data features of text and email are less cumbersome on the internet, so you can do a lot of work on that.

But I know that you got to be careful in terms of issues that you might be talking about that could be subpoenaed in the future. So I would do most of that kind of discussion via phone and less through written communication. So I'll stop there.

NANCY SMITH: Thanks, Olga. Amanda, I know you mentioned in your introduction that you support rural communities. I'm wondering if you have anything to add to Olga's comments.
AMANDA WATSON: Thanks, Nancy. So first, I think everything Olga just said is a fabulous in a nutshell a lot of the strategies that many rural communities are going to be using. And just a little context for me as well, most of my experience is working with tribal communities in the lower 48 and in Alaska.

And we know that right now tribal communities are experiencing a heightened level of crisis in a lot of cases due to some of the same problems that rural communities are facing around the country related to not having reliable internet, unreliable cell service, lack of general resources and access to these things. And so I think I've been hearing from a number of tribal communities that they're also grappling with this question of, how do we go virtual when we don't necessarily have the capacity to do that, much less in a way that would be accessible for all the survivors in our community in our service area?

So I think as far as strategies go, a lot of what Olga said is what I would echo, that thinking-- particularly depending on how rural you are and the level of access folks have, I think picking up the phone and talking is honestly a really great default. It can feel a little bit old-school or a little bit clunky at first just because I think a lot of us have gotten used to either face-to-face interaction or to video communication like this on Zoom. And yet in spite of that, talking on the phone remains a really excellent default way for us to be able to remain connected to survivors.
I will also say to build on a little bit of what Olga was talking about related to the security or privacy, I will shout out the Safety Net Project from the National Network to End Domestic Violence. We've got some fabulous resources on different tech platforms for video or chat or texting that they've done than reviews about how well those different platforms protect the privacy and confidentiality for survivors. And it outlines some of the security concerns, because it's something we need to be intentional about that we don't jump too headlong into it without thinking about the ramifications for survivors down the line.

One thing that I've seen is that a lot of survivors, they might want to text, which can be a great way to connect with them. And also for us with advocacy programs, I think that's a good example of us needing to be thoughtful about that's a great way to connect with survivors. And yet, how are we making sure that somebody might not be impersonating a survivor since we're not able to verify that it's them so that we're not accidentally increasing the risk or danger for the survivor by communicating with somebody who's gotten a hold of a survivor's cell phone, that type of thing?

So keep an eye out. Check out the resources. I think it's the Safety Net Project NNEDV, if you Google that. We can also link it in the chat box. But they'll go over a wide variety of different platforms, including Marco Polo and several others that will
hopefully give all programs regardless of whether you're urban or rural. But especially for rural if you're trying to figure out what will work given the resources you have for your unique community, that's a great place to start.

NANCY SMITH: Thanks so much, Amanda and Olga. We have been lucky to have representatives from the Tech Safety Project on some of our previous strategy sessions. So if you'd like to hear more about what they have to say, I encourage you to watch some of those recordings on our web site and also to visit their web site, which we will drop into the chat box.

I also just wanted to add that as we're thinking about video conferencing and using other types of technology to stay connected with survivors and we're holding on to our core principles of confidentiality and data privacy and security that we also want to be mindful of accessibility for people with disabilities and deaf people. And one of the things that we have been seeing, unfortunately, is that the services that offer the highest degrees of confidentiality offer the least degree of accessibility. And those platforms that offer a greater degree of accessibility do not offer the high degree of security features. And so that's an advocacy point for us. I know at the Vera Institute of Justice, we are working with our colleagues at Tech Safety to have conversations with the video conferencing platforms for them to be able to hold both of our deeply-held principles in their services.
I also just want to give a shout out to Heidi Wright. She in the chat box had shared that she has been supporting survivors over the telephone. So that is a great thing to see, Heidi.

And I also want to encourage anyone to use the chat box to share what you are doing and share your ideas and response to the questions. We really want this to be an opportunity for all of us to share and to learn. Again, you can write your questions in the Q&A pod. You can also raise your hand, and we can call on you.

I am going to--I have a few additional questions that I want to pose that came up in registration. We know that this is an incredibly challenging time for so many of us. And we know that programs are adapting quickly to sustain services. And this is a time where, for many of us, our anxieties are increasing. I'm wondering if some of our panelists could talk a little bit about the strategies that we can use to really keep ourselves grounded to build on our resiliency during this time. Olga?

OLGA TRUJILLO: I feel like I'm on a game show. We should have like a little buzzer. Yeah, so there's a number of things that you can do to help with your anxiety. So and this is a really big point for survivors.

So as a survivor of sexual violence and a person with DID, my anxiety is usually a little bit higher than most. So something like
this can really kick it up super high. And I've learned over the past 25 years kind of how to manage that.

So one of the first things I try to do is I try to be proactive as much as I can. You can't always predict when a crisis is going to come up. But there are things that you can stop and think about that will help limit and manage your anxiety.

So for example, I found myself reading articles about the experiences of people in Italy when they went to the hospital. And then I started being really scared about what will happen if I have to be hospitalized, because some of the trauma that I experienced gets kicked up in settings like hospital settings where there's an imbalance of power, and people have vulnerability because they're sick. So I came up with a plan for myself as to how I would do that. And I sat with my partner. And this is something that advocates can do with survivors is help them think through things that they can put in place to help manage that level of anxiety that can come up.

The other thing that I've found is you can tease things out between things that you have control over and things you don't have control over. And so the things that you do have control over, you can come up with a plan for those. And the things that you don't have control over, one thing that you can do is let go of those. And I know that's much easier to do than said.
What I do to do that is I notice those anxious thoughts, but I don't hold on to them. I just kind of let them go. And I do that through imagery, like sometimes I imagine the words and then just let them float away.

So I'm paying attention to them but recognize that I can't control it. And then I'll stop there and then come back if anybody else-- I can talk about how to ground yourself. But I bet other folks can do that as well. Is that OK?

NANCY SMITH: Yeah.

OLGA TRUJILLO: Or should I?

NANCY SMITH: Well, Karla added some great resources into the chat box. Karla, I'm wondering if you want to talk a little bit about those resources.

KARLA VIERTHALER: Sure. We did a guide around working with parents whose children have been sexually abused. And part of what we worked on were some grounding tools. And they're really great animated exercises focusing on deep breathing, visualizing your happy place, getting in touch with your body. I think there's sort of a body exercise, a body check in.

So I think that's a great tool. But I do want to share one of the things that we've been really trying to talk about with our colleagues and survivors is really just being gentle with yourself
during this time. We're all feeling this, and all of our feelings are normal. And I really like what you said, Olga. We really have to lean back on knowing ourselves and knowing what we need during this time and just allowing ourselves the space and time to do what makes us feel better.

NANCY SMITH: Amanda?

AMANDA WATSON: Yeah, just to build on that a little bit, I think it's also really important for us within our advocacy programs to be thinking not just about how are we supporting survivors through this, but really, how are we organized ourselves as an organization to make sure that all of our staff have the spaciousness to take care of themselves and do what they need to do. And recognizing that, in some ways, this is a time where we need to continue the work that we're doing and that you all as advocates on the front lines are doing and the service providers is more important than ever right now. And also, I think it's important not to be trying to keep doing business as usual that we lose sight of all of the ways that this is very much impacting all of us and impacting us differently depending on if you have staff who have kiddos who are now at home because schools have been closed or staff that are caring for elders or other family members. Or there's so many different ways that we're all uniquely impacted.
And I think that it's important that we create ways for ourselves as a program or as an organization to regularly be checking in with each other about how we're doing and to create space for that so that it's not on a single individual to raise-- like, hey, I'm having a hard time. I might need a little space-- because I think that that can have a different feeling to it, right? Of then you're the one that isn't strong enough to push forward or push through this when the reality is that we're all going to struggle with this in different ways and at different times. And so if we can make it a practice for ourselves collectively as an organization, as a broader community, and as a movement to regularly be touching base and creating those opportunities for people to step forward or step back as needed to take care of themselves, I think that that will position us collectively much better to be able to then provide more effective support for survivors and folks in the community who need access to the services we offer.

NANCY SMITH: Thank you all. We have a couple of questions that have came in through the Q&A pod. But I'd like to direct a question to Greg first.

Greg, we know that the schools and Child Advocacy Centers have a very close link in terms of supporting children and families. I'm wondering if you could talk a little bit about what you're seeing happening across the country now that schools have closed, that education is really happening in people's homes. What is the
impact for children? How are CACs, Child Advocacy Centers, addressing that?

GREG FLETT: Yeah, it's a really interesting and challenging question, Nancy. What we have heard-- and this is anecdotally from a lot of CACs-- is that they are ready. They've come up with action plans and emergency protocols to meet child survivors where the need is, but they're not seeing the cases. They've had a decrease in reports.

And that is kind of the reality of the situation now where kids aren't going to school. Teachers used to be one of the primary sources of CPS reports. And so we're not seeing those come in. The awareness of how kids are doing is not what it used to be. And so we're really looking to figure out how we can continue to stay on top of this and be aware.

One of the other tail ends of this, or the other realities that we'll experience I'm sure in a couple of months when things begin to settle down, is this flood of cases that will come back or come to the attention of CPS, Child Advocacy Centers, law enforcement, and so already preparing for that. What we can say and what is a positive thing is that many of the CACs we've talked to, they have emergency protocols in place. They have practices where they could and are in emergency situations bringing kids into centers, meeting kids in the field if they need to, and ensuring that in those situations where there is an urgency to respond, they can.
So that's a positive. But it is something we're kind of keeping our eyes on and trying to figure out as best we can how to stay on top of things.

NANCY SMITH: Thanks, Greg. This might be another one of those areas that is just rapidly unfolding. And hopefully we'll have more information to share and guidance. I do think something that you've said and I've heard you say before really stays with me, which is while we are responding to the moment, how can we also look ahead and prepare for the future? I think that's going to be incredibly important for us as a movement.

Before we go to our next question, we're going to pause for a moment for the interpreter swap. Perfect. OK, we do have some questions coming into the Q&A pod. So I'd like to go to some of those questions. Julia has asked, as we are thinking about continuing support groups virtually, what is important for us to keep in mind? What are some of the considerations as we are looking to move support groups into a virtual setting? Olga?

OLGA TRUJILLO: One of the only ways I can think that you could do that well is through video conferencing, because I think it really, really helps for people to see each other. I've noticed this with people across our organization. When we get together, it's very reassuring to see the people that we work with them, that they're OK. They might be tired because they're trying to teach their kids while they're trying to work, stuff like that.
So the challenge, though, with video conference is in rural areas, if people don't have internet, if they don't have a computer with a camera and a microphone, if they don't have-- so that can kind of compromise it a little bit. I really like the Zoom platform because the video is pretty stable with lower speed internet. Also, it allows people to call in, which is really nice too. So the folks that do have cameras can be on camera, and the other folks can call in.

Another option is signing up for the free conference lines and doing conference calls so that people can hear each other's voices and just kind of talk through. And again, I would limit this. So I would reimagine the way you're doing advocacy right now and do it as a way of helping people feel less isolated, helping people focus and get through this period, either that day or this week or this period, and less about some of the information that could be either discoverable in lawsuits or could create safety risks for those people. So I wouldn't do any of that on a support group platform. I would just check in with folks help, people feel less isolated, how are they doing, that kind of thing.

NANCY SMITH: Thanks, Olga. Would anyone else on the panel like to share any comments or thoughts? Karla?

KARLA VIERTHALER: I wanted to share. Someone had mentioned that RAINN offers a completely confidential chat platform. So I just wanted to put that out there. I know that's not necessarily
the question, but that's a great resource, because the confidentiality piece is huge right now, as we all know.

I do know that Zoom is now free. And you don't have the 39-minute limit anymore. So it is a great platform. And I think if you could open off, open up your group sections to just sharing a little bit about confidentiality, about the platform, and then offering an alternative if someone does want to talk about some other pieces is a kind of great way to create space, create choice, all of those pieces.

And I also think we did talk a little bit about using the phone. And I saw someone had a question in the Q&A section as well about creating rapport on the phone when you're not seeing somebody. And I just wanted to share.

During this time, I've been on a few of these video calls and conference calls. And I have found that just being very real and honest and vulnerable in some forms has been super helpful in sort of connecting with other people, because that's why we're all here, right? These are crazy times, and we're all in very anxious situations, some of us more than others. And just sort of being real about that and creating connection is super valuable.

NANCY SMITH: Since you raised that question, Karla, it is one on many people's minds. How can we build that rapport? How can
we stay connected? I'm wondering Amanda, Olga, Greg, if you have any suggestions that you'd like to share.

AMANDA WATSON: Yeah, I can chime in a little. So I think some of my thoughts around how to stay connected and how to either initially build rapport or continue strengthening it, I think a lot of that is going to vary depending on your community and what the norms are there. I think for some tribal communities, there's been conversations happening around, for example, many tribal community's elders might rely on other folks stopping by the house to bring them more wood for the wood stoves since we're still-- at least, I live in Minnesota, and so we're still kind of in the wintry months for a little while yet. And so that would be an opportunity where normally folks might see each other and visit for a little bit or different places around town.

And so Olga had mentioned earlier that for rural communities, and anywhere, but particularly in communities where you might not have as much access to this type of face-to-face video virtual connection, finding ways to meet up with people in physical spaces while still maintaining social distancing can be a powerful option to continue to build that rapport. And I think that can also be something that can be a workaround if you have survivors who might be at home with somebody who's harming them or is potentially harming them, because they might not be able to talk openly with you on the phone. But if maybe if you just happen
coincidentally to be at the local market at the same time to do your weekly shopping-- and you might still be six feet away.

But even that, to be able to have safe space with another person and just know that, OK, there's an ally, this advocate showed up when they said they would at the grocery store, and even if I'm not going to be shouting personal details about what I need or what's going on in my life across the grocery store to them because we're a safe distance apart, I think it's still it's about showing up for people and being able to be present. And that reliable, steady like, OK, I can count on this person in this time of unrest where so many things are uncertain. This is somebody that is going to be there when I need them, that I can call or that I can see a safe face out in the community or stopping by my house to drop something off on the doorstep because I ran out of baby formula or diapers or something. Whatever it might be, I think, just getting creative about what are the ways that we can show up for people in ways that are meaningful based on what the survivor is telling us they want or need in that moment while still being safe and making sure that we're doing what we can to prevent the spread of the virus and keep people healthy.

NANCY SMITH: Anyone else want to add? Olga?

OLGA TRUJILLO: One of the things, so going back a little bit to being on the phone with someone and trying to build rapport, one of the things that I'm noticing is some of the conference calls that
I've been on, nobody can get it to work right away. When people try to go straight to work, I mean, then we just can't do it. So what we've been doing is just doing a check in first.

How are you doing? How's your family? Who do you have at home? Discussions that really kind of help people let go a little bit of some of the worries that they have, and then that builds really fast. It's surprising to me how easily and how quickly you can build rapport. And I think back-- so I'm totally dating myself, but of course, I do have this gray hair.

So I remember a long time ago just calling someone on a landline and having all these discussions that we don't do anymore. And it's hard for me to do them now because it's been so long. But once you just ask people to just share one thing that's happening in their life today, you'll get there. And I love what Karla said about being vulnerable. Sharing what's going on in your life as well is really important too.

NANCY SMITH: This is Nancy. I want to make sure we have some time to talk about another new dynamic to advocacy that we are facing, which is so many programs now working from home. And there's lots of questions that I'm seeing come up around our advocates working from home, one of them being around confidentiality. What is important to keep in mind in terms of confidentiality? What should programs be thinking about as more and more staff work from home? Olga?
OLGA TRUJILLO: So there's a number of things that you can do. So one is going to go back to what Amanda said a little bit earlier. So I think this is a little bit easier to do in rural communities because you don't have the density. But when you have a survivor that wants to talk to you around confidential stuff, I would try to do that either over the phone, but if at all possible, in person.

So and again, people, even like in Wisconsin right now, we're under Safer At Home, a Safer At Home order. So we're not supposed to go out unless we're going to the grocery store, to the bank-- I think to the gas station-- and to the pharmacy or to a health facility, a health clinic or hospital. I think those are all the limits.

So you can meet someone at the grocery store, again, though, recognizing who's around you and the conversation that you're having. So here's what I know some people are doing is they go in their cars, and they stay in their cars, in their separate cars. And they have a conversation over a cell phone. So they can see each other and talk with each other but not risk the infection or being overheard.

So that's an option as well. And I try to be as flexible as I can with the people that want to reach out to me. So I reach back out the way they reached out to me. I tend to use their words rather than my words. I reflect those back to them.
And then I try really, really hard to not go places that could be confidential. And when I think of why the issue of confidentiality comes up, it's mostly because of the third-party carriers and that this information can get subpoenaed. So just think about what you're doing in terms of what you're talking with survivors about and what forum you're using to talk with survivors about. So those things that you think would be a problem if they got subpoenaed, I would try to do over a landline or in person to the extent that it's safe and in compliance with your state laws right now in terms of Shelter In Place or Safer At Home.

NANCY SMITH: Anyone else want to add anything?

GREG FLETT: Nancy, I think just a general point to share, I know a lot of the CACs we've talked to, they are eager to dive right in and help kids, help families, and do stuff. And one of the things we're recommending to them is just to pause first and really think through what services you can effectively provide from home, what services and how you can do that in a way that is both confidential, both respectful. Not to say don't do it, but just make sure you're taking a moment to pause and really think through, what are some of the implications, considerations? And slow down a little bit before making a mistake that you can't undo.

So just a general thought on that one is maybe slow down. Talk it through with a colleague, with someone else, and get some input
on it so we're not making problems worse. And we're going into this intentionally and purposefully.

NANCY SMITH: Karla and Amanda, anything from either of you? All right, a couple of questions have come up about the impact that this is having on our hospital system and on Sexual Assault Nurse Exams, on being able to provide hospital accompaniment and in-person support, on whether exams are even available. I'm wondering if maybe, Karla, do you want to start sharing a little bit about what you're seeing and what you're learning in terms of how programs are navigating those challenges?

KARLA VIERTHALER: Yeah, so I've heard a lot. I think different communities are responding in very different ways. I've heard of some communities doing telemedicine for the SANE exam. And I know that there's a couple pilot programs around that through the Office of Victims of Crime. So there are probably some resources out there if that's something people, hospitals, are considering doing.

One question was about connecting with the survivor when you're talking to them over the phone. So that's another piece that we're seeing too where survivors and hospitals are connecting with advocates over the phone, which I think can be problematic in some ways just because of the connectivity. You're on a phone, and that's not when someone's providing advocacy when you're going through the exam.
I know SANE exams are still happening, and SANE nurses are still providing that service, which is wonderful. I have heard some issues around police not wanting to follow up and to be in contact with folks. So I'm hoping that some policing organizations come up with some best practices. Because just like advocates, we all have a job to do, and we have to stand by our values of providing services for everyone.

So those are a lot of questions I've thrown out there. I do know that the International Association for Forensic Nurses were going to do a webinar on next Tuesday, I think. And so hopefully they will be addressing some of these questions. So I will try to get that out to everybody on the call.

So I think it's more of a stay tuned kind of thing. I also know IAFN did a blog post about this. So I will link to that in the notes as well.

NANCY SMITH: Thanks, Karla. I want to echo on that support for reaching out to the International Association of Forensic Nurses. We had Kim Day on a meeting last week. And she had incredible resources to share. So that would be great if we can get that in the chat box. Anyone else want to respond to that question? Amanda?

AMANDA WATSON: This is more for the advocacy program in terms of what you're doing. But if your program is located in an
urban area where you know that you have a hospital or hospitals that are equipped to do forensic exams, that might be a hub for surrounding rural communities or tribal communities. I think this is a great opportunity to check in with those rural or tribal programs because, for example, in some tribal communities, what we're seeing now is that tribal governments are putting a travel ban in place for tribal government employees. And many tribal domestic violence and sexual assault programs are under the tribal government structure in terms of how they're set up and organized in the community, which means that it might be challenging for tribal advocates to drive, in some cases, three, four, or five hours to an urban area to accompany a survivor for an exam. And so that's an opportunity where if your program is situated in an urban area, checking in with that rural or urban program to see what are their resources and capacity like, if they have a survivor who does need to come to an urban area for medical care or for a forensic exam, and are there ways that your program might be able to offer some additional support to a survivor who's coming to that urban center and maybe won't have the accompaniment that they usually might from the advocacy program in their home community-- so just something to keep in mind about those partnerships and how we can support each other's advocacy programs when there might be barriers to providing the services we usually would.
NANCY SMITH: Anyone have anything else to add? Well, I want to make sure that we have an opportunity to hear from each of you some parting thoughts, something that we can hold on to as we leave this call, and we continue with our work during these challenging times. Olga, I'm wondering if you could get us started.

OLGA TRUJILLO: Sure. There's a couple of things, because I can't just say one thing. So there's a couple of things that I want to remind you of. This is a really hard time for everybody. So one, try to be proactive with your fear and anxiety. Think it through and separate out the things you can control and those things that you can't.

Take good care of yourself. I think Karla had mentioned be gentle with yourself, or it was Amanda too. You're not going to be as productive as you usually are. You're not going to be able to do all the things that you normally do. So try to find maybe other things that you can do, reconnect with old hobbies or try to find new things that you can do inside that help you stay centered. And then I put in the chat some grounding techniques that you can use to try to stay centered and manage your anxiety, because people are going to come to you or are going to need your help, so to start with yourself and taking care of yourself.

And then one thing that I am finding that I'm doing with survivors right now is that I'm having conversations with them to help
them focus and kind of figure out what they're going to do that day, because this level of anxiety makes it really hard for people to think. So reimagine your role as an advocate right now. It might just be helping people get through the day. And that's awesome. It's super needed.

NANCY SMITH: Thanks, Olga. Would anyone like to go next? Karla?

KARLA VIERTHALER: I was on another webinar last week with a lot of providers. And one of the panelists, people were asking questions of like, do we let people into shelters who are positive? Or what if they're sick, and we don't know? And how do we provide services? What do we do?

And one of the panelists so lovingly said, we fall back on the values of our movement. We put survivors first. We allow them to make choices. We walk with them on their path. And that was so centering to me. So I feel honored to sort of share that with you all today.

I think the other thing that we've been doing in our agency and with our team is we've been meeting more frequently over Zoom and then really trying to focus on those most marginalized right now who are being hit the hardest. I'm thinking of people who are homeless, people who are actively involved in addiction, people of color, and those involved in sex work, folks who are
transgender, there's so many pieces to this. So I think if we take a moment to step outside of our situation and think about others and how we can help others at this time, that has been, I think, healing for our team.

So just some thoughts-- and also I want to say it again. Someone shared with me to be gentle with myself. And that was so impactful. We can't do it all.

I have two kids at home. And I feel like as a training and technical assistance provider our work has increased. But it's an honor to be able to do that. So thanks.

NANCY SMITH: Thanks, Karla. Amanda or Greg? Amanda?

AMANDA WATSON: Yeah, Greg, you can go.

GREG FLETT: Thanks. So I would echo a lot of that. I think one of the things we have found and we have heard from a lot of the centers and the chapters we're talking about is how valuable it is to stay connected. So in Southern Regional, we're hosting weekly calls with our chapters. They, in turn, a lot of them are hosting weekly calls with their member centers. And the centers we hear are hosting calls with their multidisciplinary teams.

So there's this really beautiful chain of connection. I think one of the challenging parts is we're being bombarded with this message
of social distancing. And I would replace that with physical distancing. Stay connected. Stay in touch with people.

What we're going to need to get through this unscathed is sharing ideas, sharing resources, being inventive and creative with each other. And that can only happen if we stay in contact with each other. So that in addition to what was said, I don't think you can say it enough. My boss, Chris Newland, says practice radical self-compassion. And so we would advocate for all those things.

NANCY SMITH: Thanks, Greg. Amanda?

AMANDA WATSON: Yeah, I think it's tough to follow up those things. All of that, I wholeheartedly agree with everything that Olga and Greg and Karla have shared. I think I would encourage all of us to think, as we're trying to figure out how to stay connected and reaching out to other organizations, really to think outside the box, specifically related to what Karla was saying about trying to really be thoughtful about who exists on the margins of society and is going to be most impacted by COVID-19 and is also likely to have the least access to the resources that they need to survive.

And think about that might be community organizations that we wouldn't necessarily normally think about partnering with. That might be faith communities or culturally-specific organizations
that are doing cultural or language work. It'll vary based on their community, but really thinking about how can we build those relationships so that we're creating a more cohesive, holistic safety net, a soft place for folks to land if they need support in our communities so that no matter where they turn to for support, hopefully they'll be able to be connected then with everybody who can have their backs and help them with whatever it is that they're experiencing, whether that's getting them in contact with medical care or a domestic violence or a sexual assault advocate or economic assistance, since we know that's a huge stressor for many folks and survivors right now. And so just thinking creatively about, where are those opportunities for partnership? And who are folks that maybe we haven't thought about partnering with in the past, but this might be a really beautiful opportunity for us to explore what that could look like so that we're able to do everything possible to support survivors in our communities?

NANCY SMITH: Thanks, Amanda. And Olga, did you have one last thing you wanted to share?

OLGA TRUJILLO: I did. Thanks, Nancy. So we're doing Caminar Latino through our project with the National Resource Center for Reaching Victims. We're doing webinars like this in Spanish. And our first one starts today at 3:00 PM Central Time.
And yeah, so we have one a week. And if the demand is high, then we'll continue those. Thanks, everyone.

NANCY SMITH: Thank you. And I'd just like in our last two minutes to close this with an incredible amount of gratitude. I want to thank everyone for taking the time out of what we know are even busier days and really appreciate you all being present with us. It's amazing to be in a virtual space and to feel connected with so many programs across the country. And we really appreciate you sharing what you're seeing, what you're doing, and your generosity at such a challenging time.

I'd also like to thank our panelists. I really appreciate each of you and what you've shared. I think you have guided us. You've grounded us, and you've inspired us. And so I really appreciate the contributions that you've each made.

And I know that you have extended an offer to be there and to support people after this call. So we will make sure to share your contact information. I think we need each other now more than ever. And I know that so many unanticipated issues may come up in the days and weeks that follow, so it is very comforting to know that we have each other.

And then lastly, I'd like to thank the Vera staff who have been working behind the scenes to support these calls and to create an inclusive space for all of us to be able to participate. And with
that, we are going to close this session. Just a reminder that you will be able to access the recording and the transcript on our website in the next couple of days. Thank you all so much.