

**Leveraging Collaboration to End Domestic Violence**  
San Francisco Department on the Status of Women Proposal  
HEALing Roots Collaborative

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**I. Needs Statement**

Domestic violence is a serious public health problem that has wide-ranging effects across the lifespan. Domestic violence has lifetime economic costs and can impact one’s ability to access housing, health care, and maintain a job.<sup>1</sup> There are disparities within San Francisco rates of domestic violence, and the experience of survivors, by race, gender, and sexual orientation. In San Francisco, Black and Latinx women are disproportionately impacted by domestic violence. High school students who identify as Lesbian, Gay, or Bisexual are more likely to have experienced violence.<sup>2</sup>

In 2019 the HEALing Roots Collaborative first convened, recognizing that domestic violence has its roots in abuse of power and control, and that interpersonal violence is exacerbated by existing gender and racial disparities. Through forming a shared language around domestic violence, and the systemic inequities that reinforce violence, the Collaborative has deepened our collective understanding of the ways that domestic violence impacts our families, communities, and respective organizations.

In San Francisco, as in other parts of the Country, we have witnessed the disproportionate impact of COVID-19 on Black, Latinx, and Indigenous communities. The compounding stressors of the pandemic have accelerated and exacerbated abusive situations, resulting in a dramatic spike in calls to WOMAN Inc.’s domestic violence support hotline. Due to the pandemic, many families are experiencing serious turmoil related to health, employment, finances, childcare, and/or isolation, increasing the sort of stress that can sustain and exacerbate abuse. As a result, demand for domestic violence-related supports has skyrocketed since the pandemic began. Provision of WOMAN Inc’s hotline services doubled overnight at

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<sup>1</sup> The Centers for Disease Control and Prevention (CDC) estimates that the lifetime economic cost associated with medical services for domestic violence-related injuries, lost productivity from paid work, criminal justice and other costs, was \$3.6 trillion. The cost of intimate partner violence over a victim’s lifetime was \$103,767 for women and \$23,414 for men.

<sup>2</sup> [2020 Family Violence in San Francisco Report](#)

the onset of COVID-19 and increased by more than 75% over the course of the spring and summer. The Domestic Violence Information and Referral Center is currently seeing an increase in web traffic as survivors and supportive agencies seek to use virtual means to coordinate resources during the pandemic. Lastly, from March to April 2020, WOMAN Inc. saw a 170% increase in email and online inquiries, including requests for counseling.

As members of the HEALing Roots Collaborative shifted to address the urgent needs of survivors, families, and community members during the COVID-19 pandemic, it has become increasingly clear that we must double down in our efforts to foster collaboration and collectively address the systemic conditions that contribute to domestic violence—housing and economic insecurity, weakened social supports, and increased isolation.

## **II. Project Summary**

There is an urgent need for multi-sector collaboration to develop solutions that center racial justice and uplift the needs of survivors of domestic violence. As a Collaborative, we envision a world free from domestic violence, where different actors within the community--such as government, business, workforce development, social services, faith, and education sectors--all have a role to play in the promotion of healthy relationships and healing for survivors of domestic violence. We are committed to centering the needs of survivors; continued learning, multi-sector collaboration, and advocacy are necessary tools in our shared work to prevent and end domestic violence.

Given the necessity of pivoting to address domestic violence prevention within the context of COVID-19, we propose to dedicate the first year (April 2021 - March 2022) of a continuation grant on 1) strengthening our collaborative governance, structure, and engaging new leadership; 2) gathering data and information from community members to further inform the work of our Collaborative; and, 3) leverage existing networks to host a series of community conversations on wellness, community resources, and how to provide peer support to survivors of domestic violence.

In the second year (April 2022 - March 2023), we propose to 1) develop a policy agenda and advocate for priorities identified by community members to address gender and racial equity and prevent domestic violence; 2) further implement and refine the healthy relationships curriculum for use in workforce development programs; 3) research and explore options for long-term sustainability of the Collaborative.

## **III. Key Objectives**

Objective 1: By June 30, 2021, strengthen the structure, governance, and decision-making processes of the HEALing Roots Collaborative through the development of an impact statement and creation of onboarding materials for new members. Conduct an internal review of domestic violence education and outreach materials to build more relevant and impactful content.

Objective 2: By July 31, 2021 research the impacts of COVID-19 as it applies to domestic violence and compile existing data to inform Collaborative's work. Design and distribute a community survey to gather any necessary additional information.

Objective 3: By August 31, 2021, participants are identified through W.O.M.A.N. Inc and Young Community Developers to serve in a survivor-leadership capacity and participate in the HEALing Roots

Collaborative. Survivor-leaders will be asked to provide expertise to inform the development of a series of community conversations and the creation of a policy agenda for the Collaborative.

Objective 4: By February 28, 2022 design and host a series of 6-8 online (in-person permitting) community conversations for “natural helpers” on wellness, community resources, and how to support survivors of domestic violence. The intended audience for these trainings include: workplaces, educational settings, faith-based settings, workforce development programs, community-based organizations, city initiatives and coalitions. The Collaborative will brainstorm and decide upon training topics. Potential themes include:

“Transformative Justice: Creating Safety Without the Criminal Legal System”

“Envisioning and Celebrating Healthy Relationships”

“Supporting Survivors You Love: How to be a Helper versus a Fixer”

“An Intersectional Look at Domestic Violence: How Do Each of our Networks Experience Domestic Violence and How Can We Help Survivors?”

“Anti-Oppression and Domestic Violence: How Our Institutions Uphold Violence”

Objective 5: By April 30, 2022, develop and publish a policy agenda (informed by direct service providers, survivor-leaders, and from results from community surveys) to advance safety, housing, and economic empowerment for survivors and those impacted by domestic violence. Collaborative partners begin to advance the policy agenda through meetings with community leaders and local elected officials, online platforms, and communication channels.

Objective 6: By June 30, 2022, reach 40-60 participants through Young Community Developers’ healthy relationships curriculum within the Job Readiness Training Program. Staff from Young Community Developers will meet with W.O.M.A.N. Inc. and Collaborative Partners to review pre-and post-assessments and explore ways to strengthen the delivery of the curriculum.

Objective 7: By November 30, 2022 research and present pathways for the Collaborative to determine long-term sustainability and continued collaboration.

Objective 8: By March 31, 2023 hold 8-10 general collaborative meetings with participation from community members and representatives from among at least five sectors that can significantly influence the community factors associated with domestic violence prevention: workforce development, government, faith, social services, and domestic violence services.

#### **IV. Organizational Objectives**

The objectives of the HEALing Roots Collaborative address BSCF’s priorities on collaborating for healthy communities and ending the cycle of domestic violence. HEALing Roots Collaborative will engage several different sectors, some of which have not previously focused on domestic violence, to address community factors for preventing intimate partner violence.

The Department on the Status of Women’s policy priority areas align with Blue Shield’s grantmaking priorities. Our work to reduce gender-based violence and advance gender equity address BSCF’s focus on Breaking the Cycle of Domestic Violence. Some examples of the policies our Department has worked on can be found in the Appendices in our *FY18-19 Family Violence Council Report*. Appendix I to this Report includes our 5 Year Plan to Address Family Violence, which includes a priority on addressing root

causes of violence. All our work is done in collaboration with other public and non-profit agencies, that range in size from a Council with two-dozen members to a work group with six participants.

## V. Project Risks or Challenges

One challenge our Collaborative will face is how to navigate the COVID-19 global health pandemic together. In 2020, we experienced the need to be highly adaptable and flexible as a Collaborative, and we anticipate this will continue in the years to come. One specific challenge and opportunity resulting from stay-at-home orders is the ability to engage more participants online - while this affords greater flexibility for participation, it also can be challenging to sustain engagement and focus of participants in a fully virtual environment. This is an area where we are currently working to develop creative solutions.

## VI. Project Outcomes

Our project outcomes are focused on increased collaboration, implementation of programs and practices to prevent domestic violence, and policy advocacy:

Collaboration:

- Increased engagement of survivors and community leaders in the Collaborative;
- Development of an impact statement that captures any shifts in terms of Collaborative structure, vision, decision making, and shared goals.

Implementation of Programs and Practices to Prevent Domestic Violence:

- Teaching Healthy Relationship Skills: We propose to continue implementation and evaluation of the healthy relationship curriculum within Young Community Developers workforce development programs.<sup>3</sup>
- Engaging Influential Adults and Peers: We propose to host a series of community learning events to engage influential adults and peers as allies in prevention. These workshops will emphasize protective factors, gender norms change, and empower participants to serve as “natural helpers”. Through our partnership with a network of faith-based leaders, we will engage men and boys in prevention.<sup>4</sup>

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<sup>3</sup> “Social-emotional learning programs for youth promote expectations for mutually respectful, caring, non-violent relationships among young people and work with youth to help them develop social-emotional skills such as empathy, respect, and healthy communication and conflict resolution skills. Successful programs not only teach skills for safe and healthy relationships but also offer multiple opportunities to practice and reinforce these skills. Although typically implemented with adolescent populations in school-based settings, these approaches and skills may also be useful with young adults.” <https://www.cdc.gov/violenceprevention/pdf/ipv-technicalpackages.pdf>

<sup>4</sup> Programs that seek to engage influential adults and peers in promoting positive relationship expectations and condemning violent and unhealthy relationship behaviors among adolescents and young adults are critical to the prevention of IPV. Trusted adults and peers are important influencers of what adolescents and young adults think and expect and how they behave. Beliefs and attitudes about the acceptability of violence and about gender equity are predictive of IPV perpetration.” <https://www.cdc.gov/violenceprevention/pdf/ipv-technicalpackages.pdf>

Policy Advocacy:

- Collaborative members will develop and advance a policy agenda and advocate for systemic changes needed to reduce and prevent intimate partner violence. The Collaborative will seek to leverage partnerships with existing Coalitions engaged in policy work around alternatives to policing, access to safe and affordable housing, and economic empowerment.
- Collaborative members will work with the District-10 Violence Prevention Convener to ensure that the District's Violence Prevention Plan includes strategies to reduce and prevent domestic violence.

**VII. Outcomes Measured**

To measure progress on our outcomes, we will measure and examine:

- Growth in the number of community leaders and sectors engaged in the Coalition.
- Pre- and post-assessments indicate increased knowledge, awareness of resources, or reported behavior of participants who complete healthy relationships curriculum or participate in online community conversation series.
- Number of survivor-leaders and organizations involved in co-creation of an Impact statement that outlines collaborative structure, vision, decision making, and shared goals.
- Improved function of Collaborative through completion of Wilder Assessment Tool, completed at the beginning, middle, and end of grant term.
- Tracking efforts to share and advance the policy agenda, and any resulting outcomes of this advocacy work.

**VIII. Dissemination of Outcomes**

Our impact statement, results of the community surveys, and policy agenda will be shared publicly through online platforms as well as presentations to the Commission on the Status of Women, a stakeholder roundtable, and/or a conference such as Mayor Breed's Women's Summit.