

File No. 121042

Committee Item No. 2

Board Item No. 9

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Public Safety

Date 12/6/2012

Board of Supervisors Meeting

Date 01/15/2013

Cmte Board

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| <input type="checkbox"/> | <input type="checkbox"/> | Budget and Legislative Analyst Report |
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Completed by: Erica Dayrit Date 11/30/2012

Completed by: ERICA DAYRIT Date 12/11/2012

An asterisked item represents the cover sheet to a document that exceeds 25 pages.
The complete document can be found in the file.

1 [Urging the Development of a Workplace Employee Policy on Domestic Violence]

2
3 **Resolution urging the Department on the Status of Women to develop and share**
4 **materials on domestic violence to be shared with City employees and City contractors**
5 **and grantees.**

6
7 WHEREAS, The City and County of San Francisco has a clear policy prohibiting
8 workplace violence, as written in the Employee Handbook, this City policy needs further
9 clarification regarding domestic violence; and

10 WHEREAS, According to data obtained from the Corporate Alliance to End Partner
11 Violence website, it is estimated that 25% of workplace problems such as absenteeism, lower
12 productivity, turnover and excessive use of medical benefits are due to family violence, and an
13 estimated 24–30% of abused working women lose their jobs due to their domestic violence
14 situation; and

15 WHEREAS, About 64% of victims of domestic violence indicated that their ability to
16 work was affected by the violence due to distraction, fear of discovery, harassment by intimate
17 partner at work, fear of intimate partner’s unexpected visits, inability to complete assignments
18 on time, and/or fear of job loss; and

19 WHEREAS, About 68% of offenders said that domestic abuse posters and brochures
20 in the workplace would help prevent domestic abuse from impacting the business; and

21 WHEREAS, Of all establishments reporting an incident of workplace violence, 21%
22 reported that the incident affected the fear level of their employees and 21% indicated that the
23 incident affected their employees' morale; and

24 WHEREAS, According to a 2006 Bureau of Labor Statistics survey, of the 30% of
25 workplaces in the U.S. that have some sort of formal workplace violence policy, only 44%

1 have a policy to address domestic violence in the workplace, and only 4% of all
2 establishments train employees on domestic violence and its impact on the workplace; and

3 WHEREAS, A study of convicted batterers in Maine found that over 75% of offenders
4 used workplace resources at least once to express anger, check up on, pressure, or threaten
5 the victim, and 74% of offenders had easy access to their intimate partner's workplace, with
6 21% of offenders reporting that they contacted the victim at the workplace in violation of a no
7 contact order; and

8 WHEREAS, According to a 2009 Department of Justice study, about one in eight
9 employed stalking victims lost time from work because of fear for their safety or because they
10 needed to get a restraining order or testify in court, and more than half of these victims lost
11 five or more days from work; and

12 WHEREAS, According to the Centers for Disease Control and Prevention, the total
13 cost of domestic violence in 2003 was over \$5.8 billion, of which \$4.1 billion was direct
14 medical and mental health care services, and the annual cost of lost productivity due to
15 domestic violence is estimated as \$728 million, with close to 8 million paid workdays lost per
16 year nationally; and

17 WHEREAS, Given these startling statistics about the negative impacts of domestic
18 violence in the workplace, we strive to create a culture of responsiveness by making it safe to
19 talk about domestic violence, by educating all employees about the issue, and by making
20 resources widely available; now therefore be it

21 RESOLVED, That the San Francisco Board of Supervisors requests that the
22 Department on the Status of Women develop materials about what employees and managers
23 should know about domestic violence in the workplace, including how to identify the signs of
24 domestic violence and how to respond appropriately, to be shared with all city employees; and,
25 be it

1 FURTHER RESOLVED, That the San Francisco Board of Supervisors requests that
2 the Department on the Status of Women work with other departments to distribute such
3 information to their employees, contractors and grantees, and other partner organizations,
4 including non-profits and businesses.

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121042

Dayrit, Erica

From: Miller, Alisa
Sent: Thursday, December 06, 2012 2:48 PM
To: Dayrit, Erica; Calonsag, Rana
Subject: FW: Follow up materials for the "121042" Resolution Urging Development of a Workplace Employee Policy on Domestic Violence
Attachments: Family Violence Council report 20111.pdf, Perpetrators-2004 Study.pdf

Please see email below and distribute to the committee members. Thank you.

Alisa Miller

Assistant Clerk
Board of Supervisors
City and County of San Francisco
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San Francisco, CA 94102
(415) 554-4447 | (415) 554-7714 fax
alisa.miller@sfgov.org | www.sfbos.org

Complete a Board of Supervisors Customer Satisfaction form by clicking [HERE](#).

From: Lehman, Ann
Sent: Thursday, December 06, 2012 2:45 PM
To: Miller, Alisa
Cc: Murase, Emily; Lauterborn, Peter
Subject: Follow up materials for the "121042" Resolution Urging Development of a Workplace Employee Policy on Domestic Violence

Dear Alisa Miller:

Attached are the two documents I referred to at today's Public Safety Committee meeting on the "121042 Resolution Urging Development of Status of Women to develop and share materials on domestic violence to be shared City Employees and City contractors and grantees, that were requested by the Committee members. I have included the website links to these documents.

- 1) 2011 Comprehensive Report on Family Violence in San Francisco
<<http://www.sfgov3.org/Modules/ShowDocument.aspx?documentid=3311>>.
- 2) How Employers Who Batter Affect the Workplace <<http://www.standingfirmwpa.org/docs-all/Perpetrators-EADV.pdf>>.

Best,

Ann Lehman
Policy Director
Department on the Status of Women
City and County of San Francisco
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Mayor Edwin M. Lee

City, and County of San Francisco
Department on the Status of Women

FILE NO: 121042



Executive Director
Emily M. Murase, PhD

ATTACHMENT SUBMITTED BY:

ANN LEHMAN
12/6/2012

FAMILY VIOLENCE COUNCIL
Addressing Violence Throughout the Lifespan



child abuse

domestic violence

elder abuse

FAMILY VIOLENCE

Comprehensive Report on
Family Violence in San Francisco
2011

Acknowledgements

Special thanks to the Family Violence Council Co-Chairs:

- Kathy Baxter, Director, Child Abuse Council at the San Francisco Child Abuse Prevention Center;
- Beverly Upton, Executive Director, San Francisco Domestic Violence Consortium; and
- Talitha Guinn, Director, Elder Abuse Prevention at the Institute on Aging.

We thank Mary Twomey, Co-Director at UC Irvine Center of Excellence on Elder Abuse and Neglect, for her years of service as the first co-chair representing the elder abuse prevention community.

The 2011 *Comprehensive Report on Family Violence in San Francisco* would not have been possible without the time and effort of the Council Co-Chairs and Dr. Leigh Kimberg, who together supervised production of this report, and Suzanne Bischaney, who compiled and edited the initial report.

The Family Violence Council is staffed by the San Francisco Department on the Status of Women, under the supervision of Dr. Emily M. Murase, Executive Director.

© November 2012, San Francisco Department on the Status of Women

Compiled by Suzanne Bischaney, MSW

The San Francisco Family Violence Council is administered by the Department on the Status of Women.

Visit www.sfgov.org/dosw for more information about the Family Violence Council and to download a copy of this report.

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EXECUTIVE SUMMARY

The 3rd annual *2011 Comprehensive Report on Family Violence in San Francisco* provides a snapshot of the prevalence and types of family violence that first responders and community service providers responded to between July 1, 2010 and June 30, 2011 (Fiscal Year 2010-2011). The report demonstrates the continued prevalence of family violence in all socioeconomic strata, age groups, and ethnicities in San Francisco. The following is a synopsis of the comprehensive data detailed in this report.

Child Abuse

One of the most significant changes in this report is the collection of data on 911 calls related to child abuse. In February 2011, the Department of Emergency Management introduced 3 new child abuse call codes for the 911 Call Center. Emergency responders now know that a call is related to child abuse and not a general “domestic violence” situation. Since the introduction of the new call codes, there have been 23 calls coded for child abuse. (Most reporters of child abuse continue to call the well-known Child Protective Services hotline rather than the police). Overall, the number of child abuse calls and cases received has remained relatively steady from the previous year. One exception was the 44% increase in the number of Adult Probation general supervision cases related to child abuse crimes.

A major advance in addressing child abuse was the creation of a 52-week Child Abuse Intervention Program by the Department of Public Health at the Community Justice Center for implementation in FY11-12. In addition, the Adult Probation Department designated, for the first time, a Child Abuse Unit.

Child Abuse	# in FY10-11	% change from FY09-10
911 Calls	23	-
SFPD: Cases Received & Assessed	545	-3%
District Attorney (DA): Cases Received	170	4%
DA Victim Services: Clients Assisted	349	-3%
Adult Probation: General Supervision Statistics	23	44%
Child Protective Services: Children Referred	6,025	1%
San Francisco Child Abuse Prevention Center TALK Line Calls Received	18,422	5%

Domestic Violence

Unlike child abuse, the number of domestic violence cases and reporting has risen substantially from the previous year: the District Attorney’s Office saw a 10% increase in the number of cases, Adult Probation saw a 17% increase in its general supervision cases, the domestic violence crisis lines fielded 47% more calls, and the domestic violence shelters provided 29% more bed nights to survivors. Most significant, was the 202% increase in the number of child support cases flagged with family violence. To address the increasing number of cases involving family violence, the Department of Child Support Services is expected to launch its new Family Violence Initiative in July 2011.

Domestic Violence	# in FY10-11	% change from FY09-10
911 Calls	7,510	3%
SFPD: Cases Received & Assessed	3,982	-1%
District Attorney (DA): Cases Received	2,066	10%
DA Victim Services: Clients Assisted	936	2%
Adult Probation: General Supervision Statistics	535	17%
Family Court: Requests for TRO-DV	1,369	0%
DPH: Trauma Recovery Center Clients	764	-1%
Child Support Services: Cases with Family Violence	1,721	202%
CalWORKS: Average Monthly DV Caseload	234	-15%
Domestic Violence Crisis Line Calls	21,578	47%
Domestic Violence Shelter Bed Nights	4,796	29%

Elder Abuse

In February 2011, the Department of Emergency Management introduced 18 new elder abuse call codes to its 911 Call Center. During the 4½ month time span until June 2011, 911 had already received 51 calls coded as elder abuse calls. (In a process similar to the reporting of child abuse, most reporters of elder abuse call Adult Protective Services, rather than the police, directly). Data shows an overall increase in the number of elder abuse cases received: Adult Probation saw a 51% increase in the number of general supervision cases, the District Attorney's Office saw a 47% increase in the number of cases, and the Elder Abuse Forensic Center saw a 38% increase in the number of new cases.

Elder Abuse	# in FY10-11	% change from FY09-10
911 Calls	51	-
SFPD: Cases Received & Assessed	512	-1%
District Attorney (DA): Cases Received	100	47%
DA Victim Services: Clients Assisted	228	-4%
Adult Probation: General Supervision Statistics	53	51%
Adult Protective Services: Cases Received	5,839	1%
Elder Abuse Forensic Center New Cases	44	38%

Although the number of family violence cases received and assisted has increased, it is not possible from current data to determine whether this represents an increase in family violence in San Francisco or an increase in people's awareness and use of available family violence resources. Encouraging the use of available resources will ultimately help reduce family violence.

As the policy body tasked with increasing awareness and understanding of family violence in San Francisco, the Family Violence Council recommends the following, based on the complete report findings and discussion:

1. Expand data collection (Recommendations 1-3).
2. Conduct joint trainings for 911 dispatchers.
3. Develop a one-page factsheet on how to recognize and report family violence.
4. Develop a joint outreach campaign on family violence.
5. Continue support of a multidisciplinary response to family violence in San Francisco.
6. Create a victim/survivor program within the Adult Probation Department.
7. Provide counseling to youth who witness violence in the home.

INTRODUCTION

The Family Violence Council is pleased to provide the 3rd annual *Comprehensive Report on Family Violence in San Francisco*. Since the report was first released in June 2009, it has expanded to include new data, providing an increasingly nuanced picture of the current status of family violence in San Francisco, and the agencies and services in place to respond to this complex issue. Child abuse, domestic violence, and elder or dependent adult abuse are all forms of family violence and describe abuse that may be physical, sexual, psychological, economic, or social. Family violence has serious and traumatizing effects on individuals, families, and entire communities, and is defined as a pattern of behavior in any relationship that is used to isolate, neglect, or to gain or maintain power and control over an intimate partner, child, elder, or dependent adult.

About the Council

The San Francisco Family Violence Council was established to increase awareness and understanding of family violence and its consequences; and to recommend programs, policies, and coordination of City services in order to reduce the incidence of family violence in San Francisco. In 2007, San Francisco became the first county to broaden the scope of its Attorney General-mandated Family Violence Council to include child abuse and elder abuse along with domestic violence. The Council is co-chaired by three experts in these different forms of family violence and has become a key body in coordinating enhanced communication and collaborative efforts among its many partners. The Council recommends and helps implement family violence-related policy changes to the City and issues this report annually. The report was the first, and remains the only, report that provides a broad view of the statistics and trends related to the full spectrum of family violence in San Francisco.

Work of the Council

During Fiscal Year 2010-2011 (FY10-11), the Family Violence Council made significant progress in supporting the fulfillment of the policy and program recommendations identified in the 2009 and 2010 Reports.

A primary goal of the Council over the past two years has been the development of a child abuse intervention program (see Recommendation #7 in the 2010 Report). Although the California Penal Code requires individuals who have been convicted of child abuse to attend a one-year intervention program for convicted perpetrators of domestic violence, San Francisco, like the majority of California counties, is presently not in compliance with this code. Work on the development of a child abuse intervention program began in FY09-10 with the creation of an Intervention Committee to spearhead this process. Since then, the multidisciplinary Intervention Committee has continued to grow, and now includes representatives from Adult Probation Department; Bay Area Legal Aid; Commission and Department on the Status of Women; Department of Child Support Services; Department of Public Health; Domestic Violence Consortium; First 5 San Francisco; Human Services Agency-Family and Children's Services; Office of the District Attorney; San Francisco Child Abuse Prevention Center; San Francisco Police Department; San Francisco Department of Children, Youth & Their Families; and WOMAN, Inc.

The Intervention Committee reviewed existing parenting-education and treatment programs in San Francisco, as well as best practices from other California counties, and released its recommendations for implementation in November 2010. The recommendations outlined San Francisco's obligation to provide appropriate treatment and intervention for perpetrators of child abuse, and a proposal for program implementation within the Department of Public Health's (DPH) existing Violence Intervention Program. The Committee continues to work with the City, DPH, and the Adult Probation Department on developing the program, including the curriculum, certification procedures, the referral process, communication protocols, and the oversight and evaluation tools. San Francisco's child abuse intervention program is scheduled to begin working with individuals convicted of child abuse in July 2012.

Also in 2011 at the urging of the Council, the San Francisco Police Department (SFPD) and the Department of Emergency Management (DEM) Division of Emergency Communications began working together, along with representatives from the child abuse and elder abuse communities, to develop a list of 911 dispatch codes specific to family violence (see Recommendation #2 in the 2010 Report). In February 2011, DEM began broadcasting calls for service using 18 new elder abuse and 3 new child abuse codes. Previously, all family violence-related calls received a domestic violence code with a "DV" suffix. The new codes cover many of the same types of incidents that the domestic violence codes cover, but are now differentiated using a "CA" suffix for child abuse and an "EA" suffix for elder abuse. The addition of these codes fulfills the Council's 2010 recommendation that 911 calls for elder and child abuse be distinguished from 911 calls for domestic violence to allow for more accurate tracking of family violence crime statistics and provides officers with more information when responding to calls for service. Though the new codes were only in use for the last 4 ½ months of FY10-11, DEM coded 23 child abuse and 51 elder abuse calls already.

About This Report

The Council has identified the tracking and analyzing of family violence data as one of its priorities, and this *Report* represents one way the Council fulfills its work. The report provides a snapshot of where and how survivors of violence seek help and how perpetrators of violence are held accountable and monitored, and serves as an important tool for policy-makers, agencies serving victims and perpetrators of family violence, and community advocates throughout San Francisco. This report summarizes data from July 1, 2010 to June 30, 2011 (FY10-11), and includes information from 15 different City agencies and community-based organizations. The data in this report includes:

- Calls to 911 and county protective services
- Cases received and investigated by the San Francisco Police Department
- Child Assault, Domestic Violence, and Elder Abuse cases received, filed, convicted through guilty plea, or brought to trial by the Office of the District Attorney
- Victims of family violence who received advocacy and support from the Office of the District Attorney Victim Services Division
- Caseload data of the Adult Probation Department's Domestic Violence Unit
- Domestic Violence Temporary Restraining Order requests and dispositions from Family Court
- Elder Abuse Temporary Restraining Order requests and dispositions from Probate Court
- Child abuse allegation and substantiation data from Family and Children's Services

- Elder and dependent adult abuse and neglect data from Adult Protective Services
- Data on individuals receiving family violence-related services from specialized programs of the Department of Public Health
- Family Violence Initiative caseload data from the Department of Child Support Services
- CalWORKs Domestic Violence Unit caseload data
- Youth Risk Behavior Survey data from the San Francisco Unified School District
- Child Abuse support services data
- Domestic Violence support services data
- Elder Abuse support services data

The agencies and programs represent access points for survivors of abuse, and are all key parts of a system intended to protect and support those who seek help and to hold accountable those who perpetrate family violence. By understanding how and where residents access family violence-related services, and how service providers meet the needs of survivors and hold perpetrators of abuse accountable, the City is better able to create impactful policies, fund appropriate programs, and keep San Francisco residents safe in their homes.

It is important to note that this report does not provide an unduplicated count of victims of family violence as there is currently no method for tracking an individual from program to program or service to service. For example, it is possible that a survivor of elder abuse could be counted in the Adult Protective Services data, as well as in the 911 call data and the Probate Court Temporary Restraining Order data. Therefore, the possibility of the duplicated count of some, or even many, individuals is likely. There can be some measure of linear analysis when examining the criminal justice statistics, as most cases follow a standard path from a 911 crisis call, to a Police Department report, to a case referred to the Office of the District Attorney. However, the complexities of family violence, and the many variables involved in these cases, make even this well-defined route prone to twists and turns. Though the report is structured in this order for ease of reading, straight progressions cannot and should not be assumed.

Based on the data presented in this report and an analysis of the trends revealed in this third year of data collection, the Family Violence Council has made some key recommendations to address the critical issue of family violence and hopes that this annual report will focus additional attention on the disturbingly high incidence of family violence in San Francisco. Through education, collaboration, advocacy, and systems change, the Council aspires to eliminate family violence and make San Francisco a safer place for residents of all ages.

San Francisco Family Violence Council Members

San Francisco Family Violence Council Members*
(San Francisco Administrative Code Article XIX SEC. 5. 190-3)

- Presiding Judge of the Superior Court
- Mayor
- President of the Board of Supervisors
- District Attorney
- Public Defender
- Chief of Police
- Sheriff
- President of the Commission on the Status of Women
- Chief of the Adult Probation Department
- Chief of the Department of Emergency Management
- Director of the Department of Animal Care and Control
- Director of the Department of Public Health
- Director of the Human Services Agency
- Director of the Department of Aging and Adult Services
- Director of the Department of Children, Youth, and Their Families
- Director of Child Support Services
- Superintendent of the San Francisco Unified School District
- Director of the Domestic Violence Consortium
- Director of the San Francisco Elder Abuse Forensic Center
- Director of the San Francisco Child Abuse Council
- Chair of the Batterer's Intervention Programs Subcommittee

**Members may be represented by an official designee*

CRIMINAL JUSTICE AGENCIES

Department of Emergency Management

The San Francisco Department of Emergency Management (DEM) houses the Division of Emergency Communications which receives approximately 2,500 calls every day.¹ DEM dispatchers use scripts to determine which of the 35 family violence-related call codes to assign each 911 call. A preliminary question to callers asks the identity of and relationship to the perpetrator, and if the caller indicates a spouse or partner is involved, the dispatcher uses one of the 14 domestic violence call codes. If the caller indicates a family member or caregiver of a child, an elder, or a dependent adult is involved, the dispatcher uses one of the 18 elder abuse or 3 child abuse call codes. Additional questions clarify the type of family violence incident that is happening and which specific code to assign to the call.

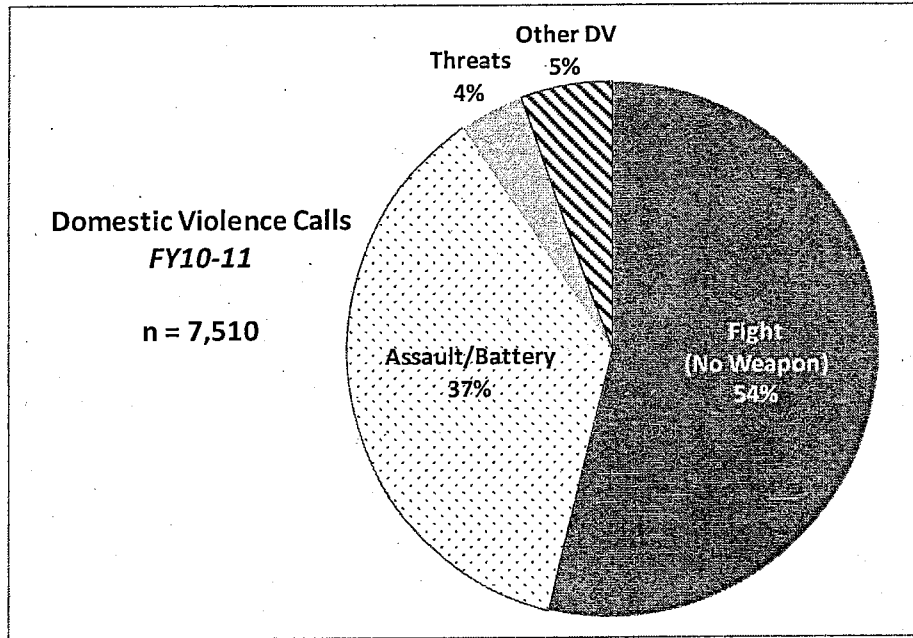
911 Family Violence Calls by Type									
FY2007-2011									
Call Type	Description	FY07-08		FY08-09		FY09-10		FY10-11	
		#	%	#	%	#	%	#	%
DOMESTIC VIOLENCE CALLS									
418DV	Fight or Dispute - No Weapons Used	3,430	52%	3,616	54%	4,118	56%	4,039	54%
240DV	Assault/Battery (includes unwanted physical contact)	2,129	32%	2,163	32%	2,466	34%	2,758	37%
650DV	Threats (written, verbal, or recorded)	230	3%	199	3%	253	3%	296	4%
594DV	Vandalism or Malicious Mischief (property damage only)	63	1%	64	1%	78	1%	106	1%
245DV	Aggravated Assault (severe injuries or objects used to injure)	68	1%	56	1%	70	1%	73	1%
222DV	Armed Assailant – Knife	15	0%	24	0%	39	1%	68	1%
602DV	Break-In	43	1%	74	1%	36	0%	56	1%
416DV	Civil Standby (officer requested to accompany person to retrieve belongings)	29	0%	53	1%	48	1%	46	1%
419DV	Fight or Dispute – Weapons Used	17	0%	22	0%	20	0%	20	0%
219DV	Stabbing	13	0%	11	0%	18	0%	18	0%
100DV	DV Alarm (a push-button alarm given to a victim to alert 911)	16	0%	6	0%	3	0%	17	0%
221DV	Armed Assailant – Gun	5	0%	5	0%	5	0%	11	0%
910DV	Well-Being Check (often at the request of another individual)	26	0%	34	1%	51	1%	2	0%
646DV	Stalking	0	0%	16	0%	10	0%	0	0%
	Miscellaneous DV Codes	499	8%	363	5%	96	1%	0	0%
TOTAL DOMESTIC VIOLENCE CALLS		6,583		6,706		7,311		7,510	

¹ San Francisco Department of Emergency Management (no date.). Division of Emergency Communications (9-1-1) About Us. Retrieved April 21, 2012 from <http://www.sfdem.org/index.aspx?page=5>

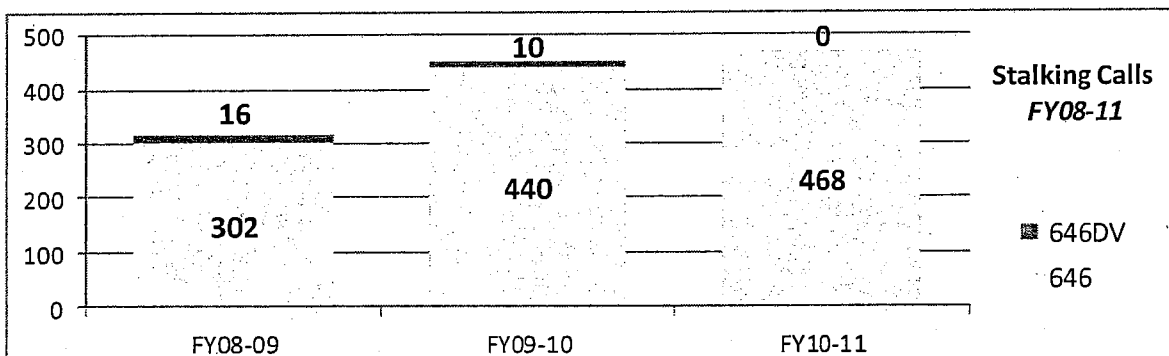
911 Family Violence Calls by Type FY2007-2011									
Call Type	Description	FY07-08		FY08-09		FY09-10		FY10-11	
		#	%	#	%	#	%	#	%
CHILD ABUSE CALLS									
240CA	Assault/Battery (includes any unwanted physical contact)	Codes Introduced in February 2011						21	91%
910CA	Well-Being Check (often at the request of another individual)							2	9%
245CA	Aggravated Assault (severe injuries or objects used to injure)							0	0%
TOTAL CHILD ABUSE CALLS								23	
ELDER ABUSE CALLS									
368EA	Elder Abuse	Codes Introduced in February 2011						30	59%
240EA	Assault/Battery							7	13%
470EA	Forgery							5	10%
910EA	Well-Being Check							4	8%
488EA	Petty Theft							2	4%
650EA	Threats							2	4%
418EA	Fight or Dispute – No Weapons Used							1	2%
100EA	Alarm (a push-button alarm given to a victim to alert 911)							0	0%
211EA	Robbery							0	0%
212EA	Strong-Arm Robbery							0	0%
213EA	Purse snatch							0	0%
219EA	Stabbing							0	0%
221EA	Armed Assailant – Gun							0	0%
222EA	Armed Assailant – Knife							0	0%
245EA	Aggravated Assault (severe injuries or objects used to injure)							0	0%
419EA	Fight or Dispute – Weapons Used							0	0%
487EA	Grant Theft							0	0%
646EA	Stalking							0	0%
TOTAL ELDER ABUSE CALLS								51	
TOTAL FAMILY VIOLENCE CALLS								(INCLUDES DV, CA, EA CALLS)	

Domestic Violence

In FY10-11, 911 dispatchers received 7,510² domestic violence-related calls. Of these calls, 54% were coded 418DV indicating a fight or dispute with no weapons involved. This percentage is consistent with the prior three years in which 418DV calls accounted for more than half of all DV-coded calls. The second most frequent type of domestic violence incident reported was assault and battery (240DV) which accounted for 37% of DV-coded calls. Of the remaining 9%, close to half (4%) were coded as threats with the remaining 5% dispersed among 10 other domestic violence incident types.



There were no calls coded as domestic violence stalking (646DV) in FY10-11, although 468 calls were coded as stalking without the DV indicator. When the 646DV stalking code was instituted in October 2008, there were 16 calls coded as 646DV that year. The number has been dropping since then to 10 calls in FY09-10 and zero calls in FY10-11. The non-domestic violence stalking code (646), however, remains frequently used and there was a 6% increase in the number of these calls from FY09-10 to FY10-11.

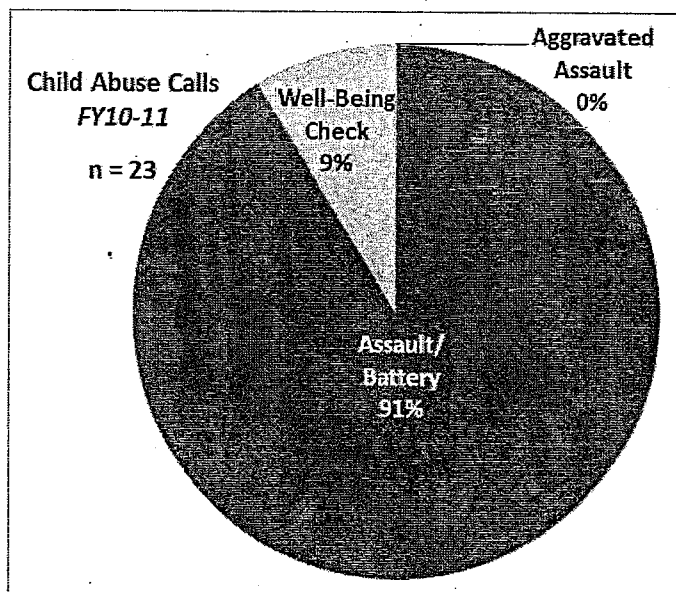


² The 7,510 domestic violence-related calls include only those calls that received one of the 14 DV codes during FY10-11. DV call figures for the previous years include domestic violence, child abuse, and elder abuse-related calls.

Though stalking is often a component of domestic violence cases, the code assigned to each call represents the most severe aspect of that particular call. For example, if a caller reports elements of stalking but also reports an assault, the call will be coded as 240DV- Assault/Battery to indicate an assault. Due to this method of coding, it is unclear how many serious domestic violence cases also contain elements of stalking. In addition, though a call may be coded as stalking without the DV indicator, responding officers may receive additional information at the scene that will lead them to refer those cases to the San Francisco Police Department's (SFPD) Domestic Violence Response Unit.

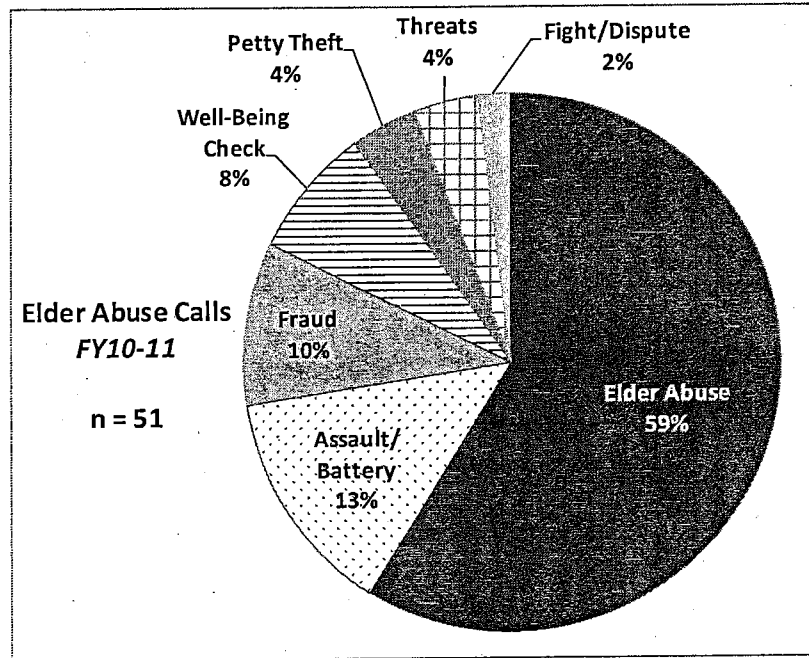
Child Abuse

In February 2011, DEM and SFPD instituted 3 new child abuse call codes. From February to June 2011, 23 calls were coded for child abuse, the majority (91%) for assault or battery. Two calls were coded for a child abuse well-being check and none for aggravated assault. It is worth noting that these 23 calls came within 4½ months of introducing the new call codes. Distinguishing these calls from domestic violence calls allows DEM and SFPD to capture a more accurate picture of the frequency and type of child abuse incidents in San Francisco that they are called to respond to. It is also worth noting that because Family and Children's Services, commonly known as Child Protective Services (CPS), is well-known within the community, many reporters of child abuse call the CPS hotline directly and make over 5,000 referrals of possible child abuse each year.



Elder Abuse

In February 2011, DEM and SFPD instituted 18 new elder abuse call codes. From February through June 2011, 51 calls were coded using the new elder abuse codes with the majority of calls (59%) coded 368EA for elder abuse. The other most frequently used call codes were for assault/battery (13%) and fraud (10%).

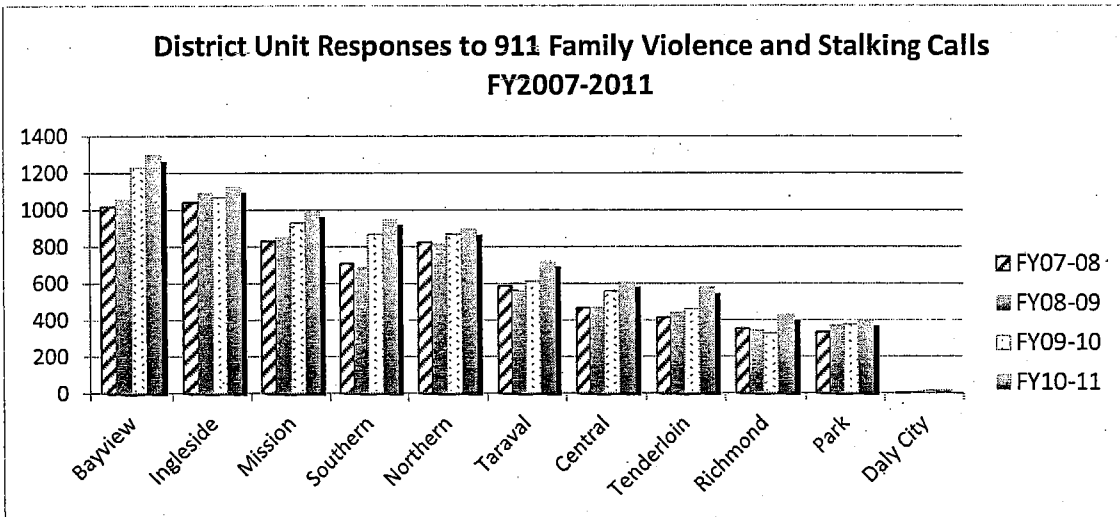


The introduction of new codes specific to child abuse and elder abuse is an important step in refining the criminal justice response to victims of violence who seek help. Though the majority of reports for these crimes go directly to Child Protective Services and Adult Protective Services, 911 does receive calls related to these incidents as well. Coding these as such allows the number of calls to be tracked over time, and provides a better understanding of the scope and rate of these incidents as reported to the police. These codes also serve to better inform officers in the field who are responding to these calls.

District Unit Responses to Family Violence and Stalking Calls

Though family violence occurs in all cultures, socioeconomic brackets, and City neighborhoods, clear trends emerge when 911 calls are examined by station districts. As in previous years, the Bayview and Ingleside Stations received the most calls, and the distribution of responses across district stations remained similar to that of the previous three years. Overall, the number of calls increased by 10% from 7,311 in FY09-10 to 8,027 in FY10-11.

District Unit Responses to 911 Family Violence and Stalking Calls FY2007-2011								
District	FY07-08		FY08-09		FY09-10		FY10-11	
	#	%	#	%	#	%	#	%
Bayview	1,019	15%	1,054	16%	1,230	17%	1,299	16%
Ingleside	1,040	16%	1,096	16%	1,068	15%	1,125	14%
Mission	831	13%	852	13%	931	13%	996	12%
Southern	709	11%	687	10%	865	12%	949	12%
Northern	825	13%	815	12%	869	12%	900	11%
Taraval	586	9%	560	8%	611	8%	721	9%
Central	467	7%	472	7%	559	8%	610	8%
Tenderloin	413	6%	442	7%	461	6%	578	7%
Richmond	354	5%	344	5%	327	4%	431	5%
Park	334	5%	374	6%	376	5%	398	5%
Daly City ³	5	0%	10	0%	14	0%	20	0%
TOTAL	6,583		6,706		7,311		8,027⁴	



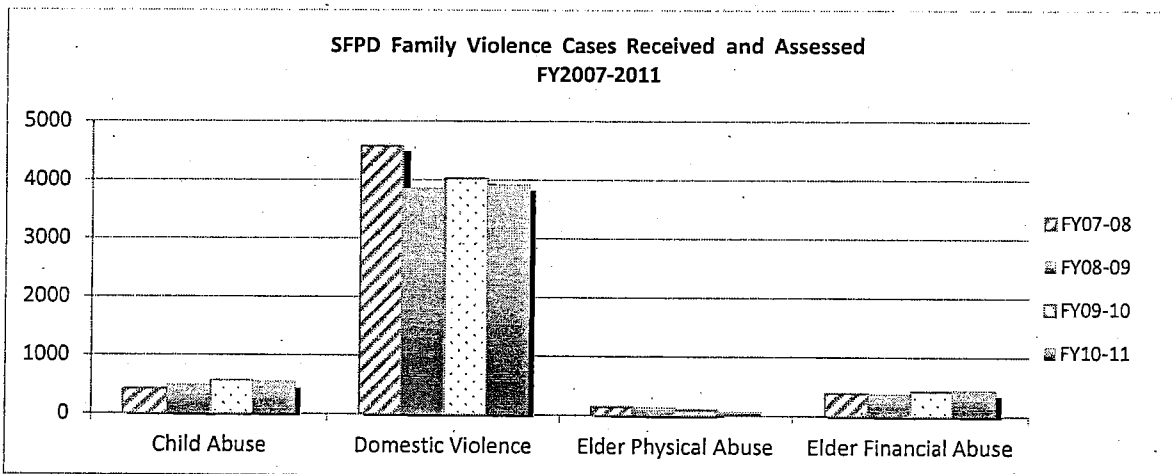
³ Dispatchers may refer a call to Daly City if an incident occurs on or over the City's southern boundary, or if a suspect is known to have traveled into Daly City.

⁴ The 8,027 calls include all responses by district officers to 911 calls coded for DV, CA, EA, and stalking in FY10-11. This number is slightly less than the 8,052 total 911 family violence (7,510 DV, 23 CA, and 51 EA calls) and stalking (468) calls received. This discrepancy may be the result of several reasons: a call may be canceled prior to an officer responding if the reporting party decides to go into the station to make a report rather than wait for an officer response; the 911 crisis call may be a follow-up to a previous call, which would be merged into the initial call making the two calls one; or a specialty unit or officer may be responding to the crisis call instead of a district unit or patrol officer.

San Francisco Police Department

In FY10-11, felony family violence crimes were reviewed and investigated by three units within the San Francisco Police Department (SFPD): (1) Felony child abuse cases were referred to specially trained investigators of the Child Abuse Unit of the Juvenile Section of the Special Victims Unit (SVU); (2) Felony domestic violence cases and cases of physical abuse and neglect of elders and dependent adults were referred to the Domestic Violence Response Unit (DVRU) of the SVU; and (3) Cases of financial abuse of elders or dependent adults were referred to the Financial Crimes Unit.

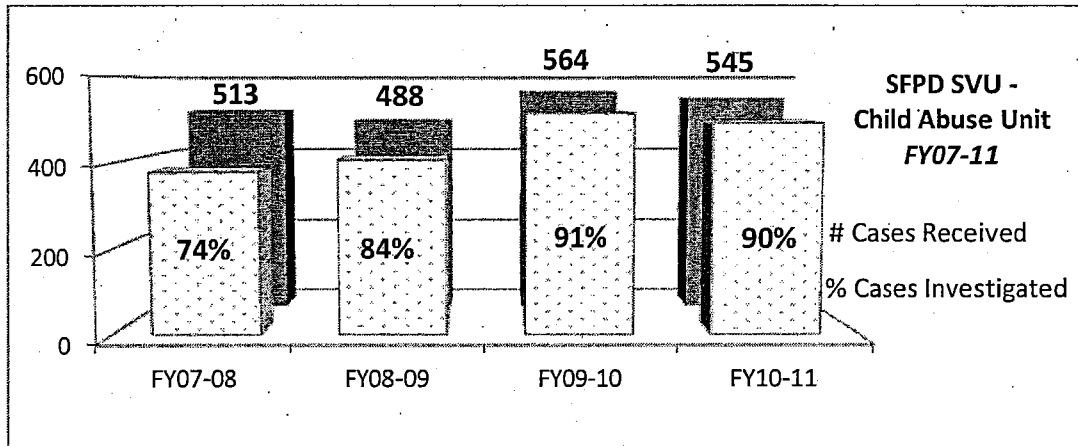
San Francisco Police Department Family Violence Statistics FY2007-2011 ⁵				
Child Abuse	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received and Assessed	513	488	564	545
Cases Investigated by Child Abuse Unit	380	408	515	492
Percent Investigated by Child Abuse Unit	74%	84%	91%	90%
Domestic Violence	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received and Assessed	4,576	3,856	4,027	3,982
Misdemeanor Arrests Referred to DA's Office	555	503	474	529
Cases Investigated by DVRU	1,616	1,577	1,512	1,569
Percent Investigated by DVRU	40%	47%	43%	45%
Elder Physical Abuse	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received and Assessed	150	140	95	67
Cases Investigated by DVRU	38	38	41	39
Percent Investigated by DVRU	25%	27%	43%	58%
Elder Financial Abuse	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received and Assessed	390	375	424	445
Cases Investigated by Financial Crimes Unit	129	98	153	167
Percent Investigated by Financial Crimes Unit	33%	26%	36%	38%



⁵ Domestic violence and elder financial abuse case counts for FY07-10 have been updated from the figures previously reported in the 2010 Comprehensive Report to reflect the most current and accurate data available.

SVU – Child Abuse Unit

The Child Abuse Unit handles all felony child abuse cases and felony sexual assault crimes committed against children under the age of 18. In FY10-11, the Unit received and assessed 545 cases with 90% warranting further investigation. The overall percentage received and investigated represents a slight decrease from FY09-10.



The number of cases received, assessed, and investigated by the Child Abuse Unit in FY10-11 include cases of felony sexual assault committed against children under 18, regardless of the identity of the perpetrator. In previous years, the number of cases received, assessed, and investigated did not include those cases in which the assault was committed against children between 14 and 17 years of age by adult strangers and non-family members.

Investigating felony child sexual and physical abuse cases requires time and coordinated effort, and are often complicated cases involving victims who have been intimidated, threatened, or manipulated by an abuser who is a family member or a person in a position of trust to the victim. These factors can cause victims to be reluctant to disclose their ongoing or past abuse, and many are unable to communicate their abuse because of their young age. The amount of time a child abuse inspector spends on a case varies depending on many factors, including the severity of the crimes, the complexity of the case, the number and age of the victim(s), the timeframe of when the crime was committed versus when it was reported, the cooperation of the involved parties, and other unexpected variables. After years of community advocacy, a significant change took place in FY10-11 in which felony sexual assault against minors previously handled by the Sexual Assault Unit is now handled by SVU’s Child Abuse Unit. This shift reflects an improved response to child victims of sexual abuse.

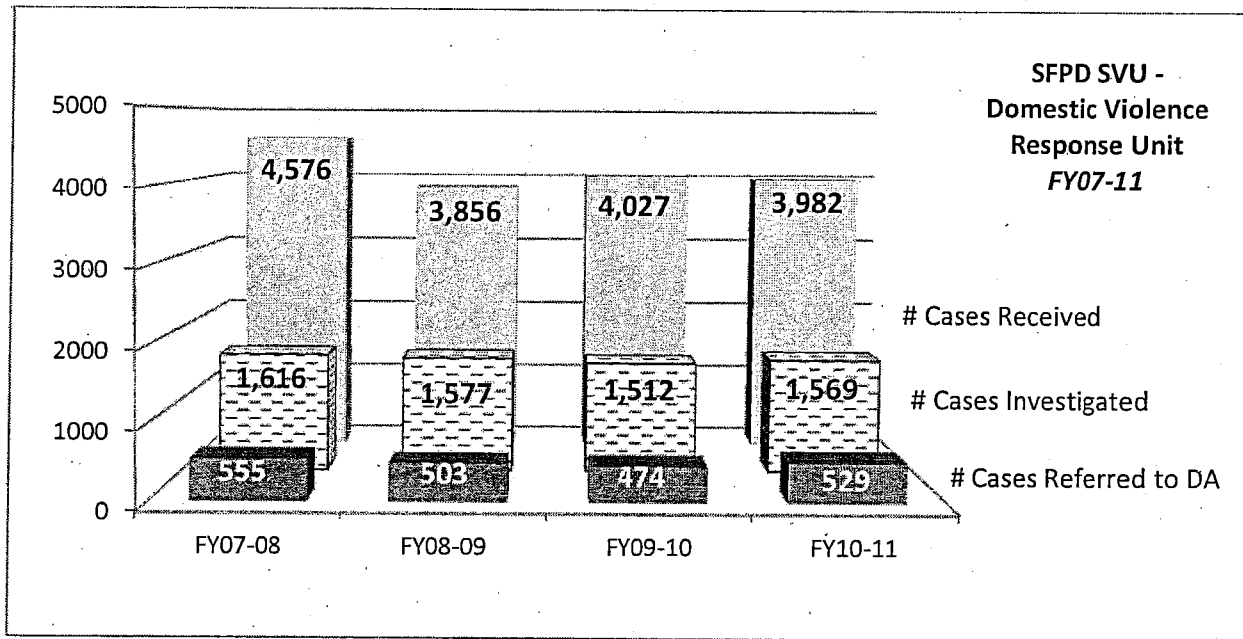
SVU – Domestic Violence Response Unit

The Domestic Violence Response Unit (DVRU) investigates all felony arrest cases involving abuse committed against any person by a current or former spouse, cohabitant, dating partner, fiancé, or person with a child in common, and includes cases of same sex relationships. DVRU also investigates stalking, and physical abuse and neglect of elders and dependent adults.

During FY10-11, DVRU staffing consisted of one Assignment Officer – an inspector who is responsible for reviewing 350 to 400 incident reports each month, compiling statistics, and running background checks. If a suspect is found to be on probation or parole, the Assignment Officer will notify the appropriate agency. Because all felony arrests are time-sensitive and must be presented to the District Attorney’s Office (DA) within 48 hours, cases that meet the criteria for active investigation is immediately assigned to an inspector and then presented to the DA’s Office for warrant consideration or formal charging.

Inspectors interview victims, witnesses, and suspects; collect evidence; conduct background checks; and send all misdemeanor arrest cases to the DA. Misdemeanor cases are only assigned when a victim specifically requests that an unassigned misdemeanor case receive warrant consideration. No domestic violence report is ever “just filed.” In non-arrest cases that are not assigned for investigation, the Assignment Officer telephones every victim in an attempt to advise him or her about follow-up procedures and referrals.

In FY10-11, DVRU received and assessed 3,982 domestic violence cases according to established protocols, and assigned 1,569 cases to DVRU inspectors for active investigation and referred 529 to the DA’s Misdemeanor Unit.



DVRU received a fairly steady number of cases during the last four years with a high of 4,576 in FY07-08 and a low of 3,856 in FY08-09. The 3,982 cases received in FY10-11 represent a 1% decrease from the previous year. Similarly, the percentage of cases investigated has also remained steady, ranging from 40% to 47%, with 45% investigated in FY10-11.

In addition to the responsibilities outlined above, one inspector oversees the U-Visa program which assists immigrants who are victims of domestic violence in obtaining temporary visas, while others teach Continued Professional Training at the San Francisco Police Academy and provide trainings at hospitals, schools, businesses, and to advocacy groups. DVRU investigators are assigned until 6 PM, and are rotated to work “on-call” after business hours in order to respond directly to the scene of domestic violence incidents at any time of the day.

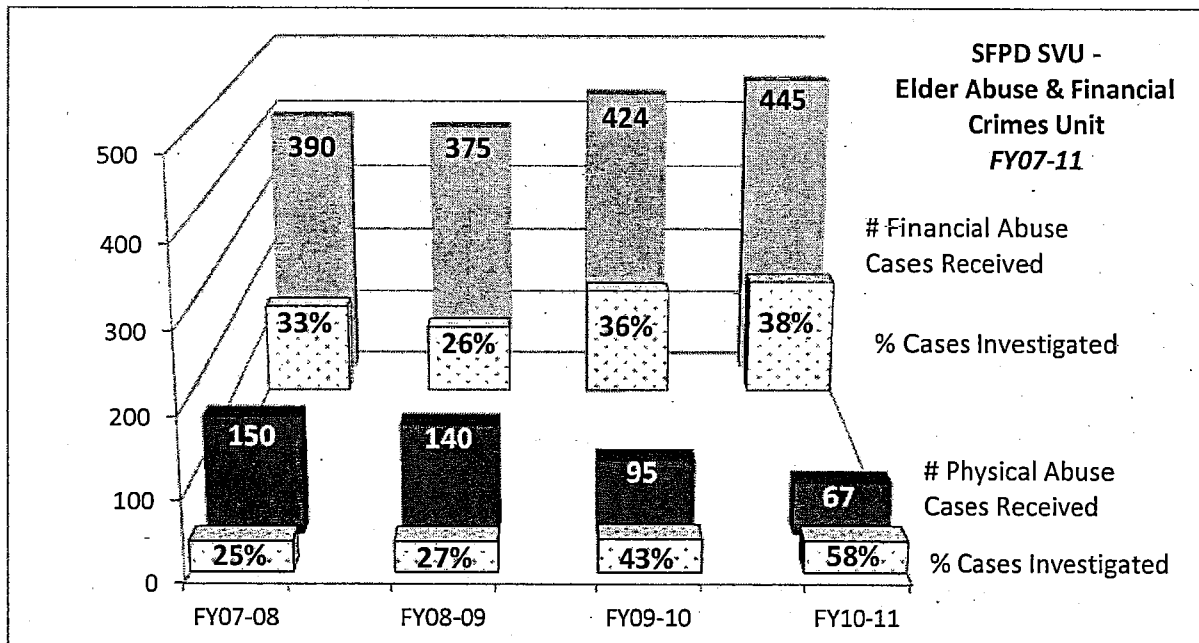
La Casa de las Madres has two domestic violence advocates assigned to work at the SVU office located at the Hall of Justice to assist victims with shelter and other services, and SafeStart has one staff who receives and reviews all cases where there is a child age 6 or younger who has been exposed to domestic violence. The SafeStart staff person contacts each family and offers services by members of the SafeStart Collaborative. SVU also works closely with the Office of the District Attorney Victim Services and Adult Protective Services to ensure victims receive support services.

SVU – Elder Abuse and the Financial Crimes Unit

In FY10-11, SVU did not yet have a section dedicated to the investigation of elder and dependent adult abuse cases. Instead the DVRU was responsible for investigating physical abuse and neglect of elders and dependent adult cases while the Financial Crimes Unit was responsible for financial abuse cases. All financial and physical abuse reports with an elder or dependent adult victim are also forwarded to Adult Protective Services.

For FY10-11, DVRU received and assessed 67 cases of physical elder or dependent abuse, a 30% decrease from the previous year. This represents a four-year low in the number of elder physical abuse cases received and assessed, continuing a downward trend since FY07-08 when 150 cases were assessed by SFPD. Of the 67 cases, 58% were investigated by DVRU and represents a four-year high in the percentage of cases investigated, up from 43% last year, and a tremendous increase over the 25% and 27% investigated in FY07-08 and FY08-09.

During the same time period, the Financial Crimes Unit received and assessed 445 cases of elder and dependent adult financial abuse, and investigated 38% (167) of the cases, making this the third straight year in which the percentage of cases investigated has risen.



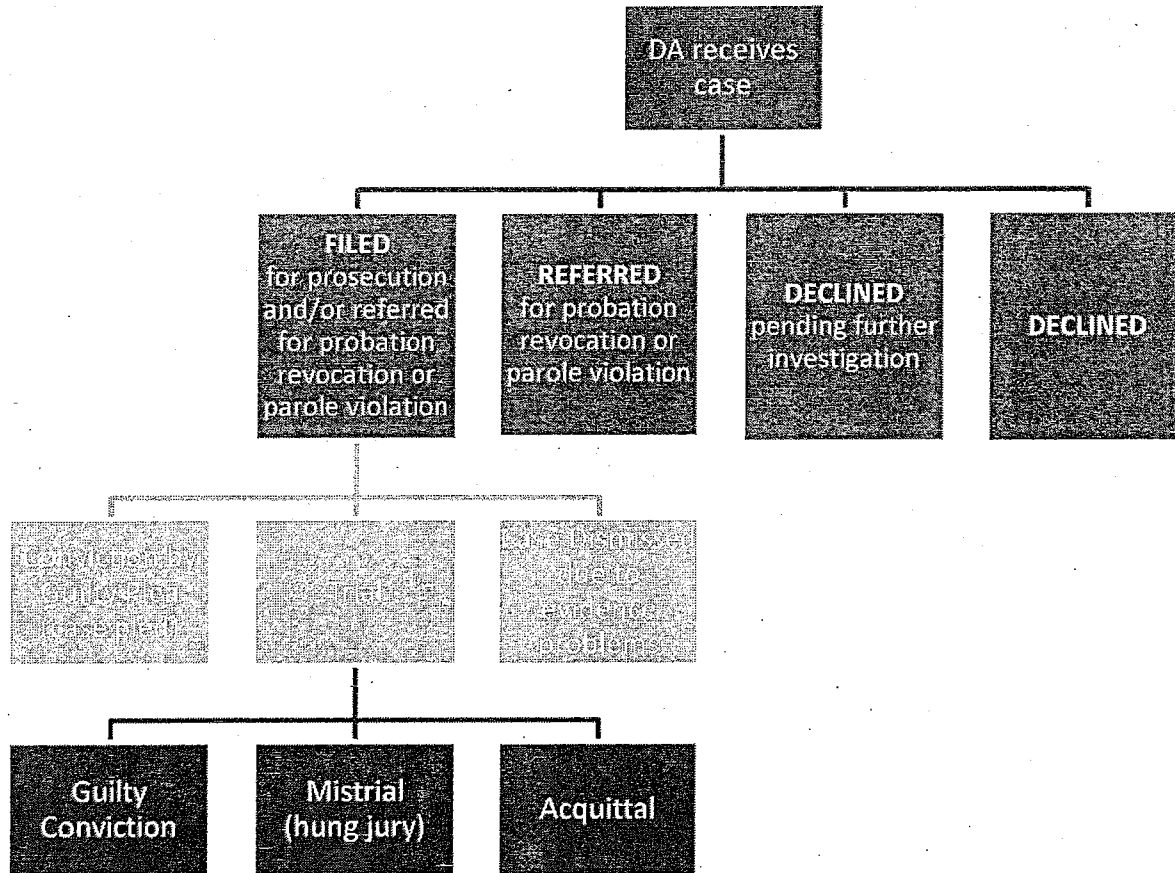
Domestic violence and elder financial abuse case counts for FY07-10 have been updated from the figures previously reported in the 2010 Comprehensive Report to reflect the most current and accurate data available.

Changes to the SVU

In October 2011, SFPD restructured certain investigative functions and made significant changes to make the SVU a more cohesive Unit which includes a Domestic Violence Section, a Child Abuse Section, a Sex Crimes Section, and an Elder Abuse and Financial Crimes Section. Under this new structure, all inspectors and officers working in the SVU are cross-trained in the special skills and techniques necessary for investigating all types of cases that fall under the purview of the SVU. Training is anticipated to be completed by August 2012. Under this structure, elder and dependent adult physical and financial abuse cases will now fall under the oversight of the SVU Financial Crimes Section.

Office of the District Attorney

The Office of the District Attorney (DA) oversees the prosecution of family violence crimes and has four units to oversee those cases: the Child Assault Unit, the Domestic Violence Unit, the Elder Abuse Unit, and the Special Prosecutions Unit. Cases received and accepted by the DA will generally move through the following stages:



Once received by the DA’s Office, a case is generally filed for prosecution, referred for probation revocation or parole violation, or declined. A case may be declined in order to conduct further investigation due to an uncooperative witness, insufficient evidence, or other reasons. This is consistent with other counties.

The data included in the following charts refers to the specific fiscal year, and cases pled or brought to trial during a specified fiscal year may or may not have been filed during that same time period. Similarly, trial convictions may be achieved for cases filed or trials initiated during a prior year. For example, a case may be received and filed in FY10-11, but that case may not be concluded, either through plea bargain, trial, or dismissal, until a subsequent year.

Office of the District Attorney Family Violence Statistics, FY2007-2011				
	FY07-08	FY08-09	FY09-10	FY10-11
Child Assault Unit Cases Received	93	109	163	170
Domestic Violence Unit Cases Received	1,553	1,767	1,886	2,066
Elder Abuse Unit Cases Received	17	34	68	100

Child Assault Unit

The Office of the District Attorney's Child Assault Unit prosecutes felony cases of physical or sexual assault against children, child endangerment, human trafficking of children, and cases involving child pornography. The Child Assault Unit received 170 cases in FY10-11, continuing the upward trend in the total number of cases received, and filed 41% (or 70) for prosecution. The number of convictions achieved by guilty plea more than doubled from 22 in FY09-10 to 45 in FY10-11. This increase in the number of cases pled means that fewer victims and their families had to go through the experience of a criminal court proceeding, which can be extremely re-traumatizing, but the perpetrator is still brought to justice and held accountable by the criminal justice system. In addition to the 45 convictions by way of guilty plea, the DA also brought 7 child assault cases to trial and achieved a 57% convictions rate during FY10-11.

Office of the District Attorney Child Assault Unit Statistics FY2007-2011				
Child Assault Unit	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received	93	109	163	170
Cases Filed	57	72	69	70
Convictions By Guilty Plea (Cases Pled)	10	15	22	45
Cases Brought to Trial	1	8	5	7
Convictions After Trial	1	6	5	4

The Child Assault Unit works in conjunction with San Francisco General Hospital (SFGH), Family and Children's Services (FCS), and the San Francisco Police Department (SFPD) by participating in multi-disciplinary interviews at the Child and Adolescent Support and Advocacy Resource Center (CASARC) currently housed at SFGH. These multi-disciplinary interviews provide a coordinated forensic investigation and response to children abused or children exposed to violence in San Francisco. **Starting in early 2013, these investigative interviews will be conducted at the new Child Advocacy Center of San Francisco (CAC-SF), and will be modeled on the simple but powerful concept of multi-disciplinary coordination to create a best-in-class response to incidents of child abuse. Core services at the CAC-SF will include:**

- Coordinated response including criminal and child protective investigation, forensic medical exams and interviews, mental health evaluation, family support and advocacy and parent education;
- A state-of-the-art database allowing partners to communicate and track cases electronically, making San Francisco a leader in this area;
- Multi-disciplinary case conferences ensuring clear communication between all parties working with a family, even across organizational boundaries; and
- Education and training, research and evaluation, and public policy development.

Domestic Violence Unit

The Office of the District Attorney's Domestic Violence Unit prosecutes felony and misdemeanor domestic violence cases, as well as cases of stalking. In previous years, the domestic violence figures included stalking cases. This year, those figures have been separated out, though there is crossover because some stalking cases are also domestic violence-related.

In FY09-10, the Domestic Violence Unit received a combined total of 1,886 domestic violence and stalking cases, whereas it received 2,066 domestic violence cases, an increase of 180 cases, alone in FY10-11. There were 597 domestic violence cases filed, and 502 convictions by guilty plea, 53% (or 267) were for probation violation. Eighteen (18) domestic violence cases were brought to trial and 13 resulted in a guilty conviction.

Office of the District Attorney Domestic Violence Unit Statistics, FY2007-2011				
	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received	1,553	1,767	1,886 ⁶	2,066 ⁷
Cases Filed	472	467	488	597
Convictions by Guilty Plea (Cases Pled)	444	326	373	502
Cases Brought to Trial	23	9	22	18
Convictions After Trial	15	4	14	13

As mentioned above, the Domestic Violence Unit also handles all stalking cases whether or not they are related to domestic violence. The DA received 39 stalking cases in FY10-11 and filed 77% of the cases. Two stalking cases were referred for parole violation or probation revocation, and 15 received guilty convictions either by way of a guilty plea bargain (12 cases) or probation violation (3 cases). No stalking cases were brought to trial during FY10-11.

Office of the District Attorney Domestic Violence Unit Statistics, FY2010-2011			
	DV Cases	Stalking Cases	Total Cases
Cases Received	2,066	39	2,105
Cases Filed	597	30	627
Cases Referred	131	2	133
Convictions by Guilty Plea (Cases Pled)	235	12	247
Convictions by Guilty Plea (Cases Violated on Probation)	267	3	270
Cases Brought to Trial	18	0	18
Convictions After Trial	13	0	13

The DA's Office faces additional challenges in prosecuting domestic violence cases. Notably, the 2004 United States Supreme Court decision in *Crawford v. Washington* prohibits the use of a victim's statement in court if the victim fails or refuses to testify. Before the *Crawford* ruling, victims did not have to come to court for prosecutors to use their statements made to police officers, Inspectors, or others. Now, victims must testify and be cross-examined in order for their statements to be used in court, something many victims are reluctant to face, as the courtroom experience can be re-traumatizing. In addition to *Crawford*, the Legislature amended the Code of Civil Procedure Section 1219 in 2008 to prohibit law enforcement from compelling testimony from uncooperative victims. This amendment became effective on January 1, 2009, further limiting the DA's ability to file domestic violence cases.

⁶ The 1,886 cases include both domestic violence cases and stalking cases received by the DA. For the period of July to December 2009, stalking cases cannot be separated out from general domestic violence statistics.

⁷ The 2,066 cases include Domestic Violence cases and DV-related Stalking cases received during FY10-11.

To counterbalance these limitations, the DA's Office has made efforts to provide specialized training for SFPD first responders to enhance their ability to gather admissible statements and evidence. The DA's Office was one of the training partners that provided the "Later in Life" training on elder abuse to more than 500 San Francisco police officers from March 2010 to September 2011. In addition, the DA's Office and SFPD conducted a 4-hour intensive First Responder Domestic Violence training to the same 500+ San Francisco police officers.

Elder Abuse Unit

The Office of the District Attorney's Elder Abuse Unit prosecutes elder and dependent adult abuse cases and is separated into two units. One unit prosecutes elder or dependent adult physical abuse and is overseen by the Domestic Violence Unit's Managing Attorney, and the second unit prosecutes elder or dependent adult financial abuse cases and is overseen by the Special Prosecutions Unit. Over the past four years, the Elder Abuse Unit has received an increasing number of cases. During FY10-11, the unit received 100 elder abuse cases, an increase of 47% from FY09-10. At the same time, the number of cases filed dropped to 35 in FY10-11, down 22% from the previous year. The number of elder abuse convictions achieved by guilty plea more than doubled from 10 cases pled in FY09-10 to 29 cases pled in FY10-11. As noted above, achieving a conviction by way of guilty plea can save victims of abuse from having to experience a potentially re-traumatizing criminal trial while still holding the perpetrator accountable. The DA brought two elder abuse cases to trial during FY10-11, and achieved one guilty conviction.

Office of the District Attorney Elder Abuse Unit Statistics, FY2007-2011				
Elder Abuse Unit	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received	17	34	68	100
Cases Filed	16	20	45	35
Convictions By Guilty Plea (Cases Pled)	10	12	10	29
Cases Brought to Trial	0	1	2	2
Convictions After Trial	0	0	1	1

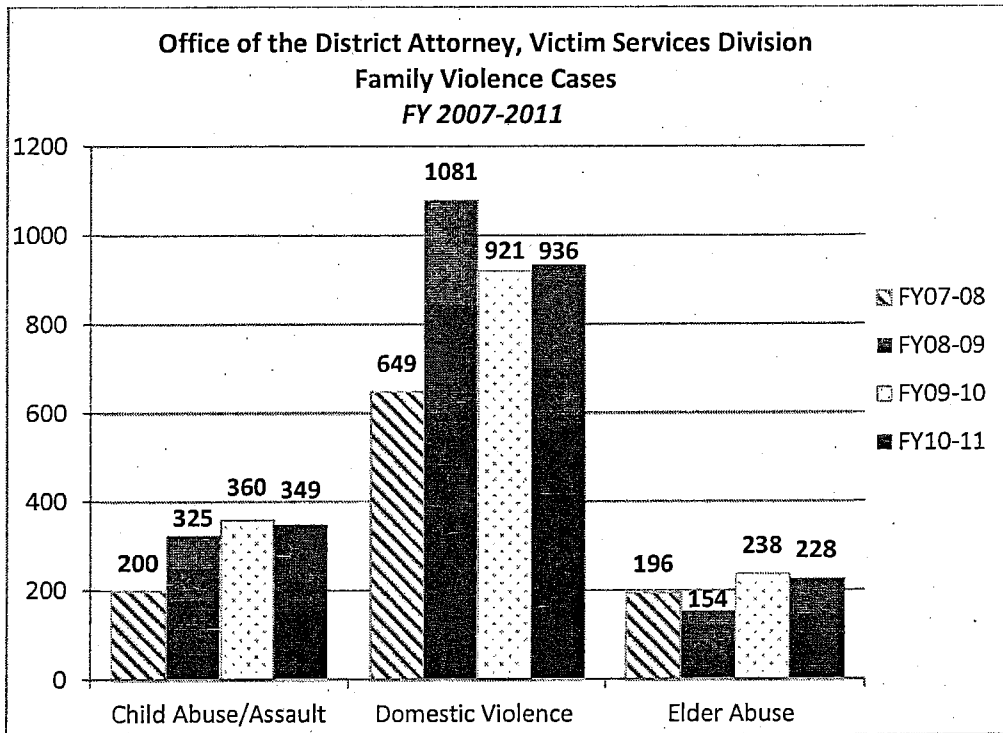
Victim Services Division

The Office of the District Attorney's (DA) Victim Services Division provides comprehensive advocacy and support to victims and witnesses of crime. Trained advocates help these individuals navigate the criminal justice system by assisting with Victim Compensation Program claims, court escort and case status, transportation, resources, referrals, and more. The Victim Services Division has 12 trained advocates to assist victims of crime, with 3 specializing in child sexual assault and physical abuse cases, 2 specializing in elder abuse cases, and 2 specializing in sexual assault. All advocates are trained in domestic violence dynamics, and each is assigned between 40 and 50 new cases per month, in addition to any ongoing cases that remain open. Services are offered not only to victims whose cases have been charged, but also to victims whose cases have not and will not be charged.

To be eligible for compensation, a person must be a victim of a qualifying crime involving physical injury, or threat of physical injury or death. For certain crimes, emotional injury alone is all that needs to be shown. Certain family members or other loved ones who suffer an economic loss resulting from an injury to, or death of, a victim of a crime may also be eligible for compensation. There is no requirement that the suspect be apprehended or the case charged by the District Attorney's Office to be eligible.

Generally, victims must report the crime to the police, sheriff, child protective services, or some other law enforcement agency. However, mental health and medical records may be sufficient in cases involving domestic violence, human trafficking, and crimes against children. Applicant and victims must cooperate with law enforcement during the investigation and prosecution of the crime, and cannot have participated in or been involved in committing the crime.

During FY10-11, Victim Services provided support and services to victims and witnesses in 1,513 family violence crime cases⁸ with 62% of clients seen for domestic violence, 23% for child abuse, and 15% for elder abuse cases.



As in past years, the majority of Victim Services clients were seen for domestic violence cases. In FY10-11, this included 866 domestic violence cases, 13 domestic violence stalking cases, and 57 child witness to domestic violence cases. Of the 349 child abuse cases that received services, 74% (258 cases) were for sexual assault and 26% (91 cases) were for physical abuse.

The following tables highlight demographic data of clients served which shows that the majority of clients were female (77%) and represented the following race: White (29%), Latino/a (27%), African American (25%) and Asian (14%). The data also shows that most clients were between the ages of 18-64 (68%) followed by 0-17 (17%).

⁸ The number of clients served is not a unique count of individuals receiving Victim Services. For example, if an individual is a victim of three crimes in FY10-11 and receives Victim Services following each incident, he or she would be captured three times in the data for that fiscal year.

Office of the District Attorney Victim Services Division Family Violence Statistics FY2010-2011					
Client Demographics		Child Abuse	Domestic Violence	Elder Abuse	Total
GENDER	Female	271	775	116	1162
	Male	78	152	112	342
	Transgender	0	7	0	7
	Unknown	0	2	0	2
	TOTAL	349	936	228	1,513
Client Demographics		Child Abuse	Domestic Violence	Elder Abuse	Total
RACE	White	51	288	93	432
	Latino/a	158	242	16	416
	African American	84	265	23	372
	Asian	35	93	83	211
	Unknown	7	22	9	38
	Other	8	13	1	22
	Filipino	6	8	2	16
	Indian	0	5	1	6
	TOTAL	349	936	228	1,513
Client Demographics		Child Abuse	Domestic Violence	Elder Abuse	Total
AGE	0-17	180	71	0	251
	18-64	145	851	41	1,037
	65+	0	2	168	170
	Unknown	24	12	19	55
	TOTAL	349	936	228	1,513

Child Abuse

Child abuse case clients include individuals who have experienced either physical abuse or sexual assault as a child. In FY10-11, 91 child physical abuse clients received services, 54% of whom were female and 46% were male. The majority of child abuse cases were for sexual assault in which 86% of clients were female. Child abuse case clients were most frequently Latino/a (45%), African American (24%), or White (15%).

Individuals can apply for and receive services as an adult for child abuse or assault they have experienced previously as a minor under the age of 18. It may also be the case that a child abuse or assault crime was committed in previous years and the victim seeks services later in life, or that a case is charged and more past victims are revealed during the investigation process. For these reasons, and because Victim Services clients can continue to receive services after their case has concluded, should it be charged, it is not uncommon for child abuse clients to be over 17 years of age. In cases of child physical abuse, 56% of clients were between the ages of 0 and 17 years, 37% were between the ages of 18 and 64, and 7% were of unknown age. The age group represented most frequently among child physical abuse clients was children between the ages of 0 and 5 years, accounting for 25% of this type of case. Child sexual assault cases were split

nearly evenly between minor and adult clients, with 50% between the ages of 0 and 17 years, and 43% between the ages of 18 and 64. The age group represented most frequently among child sexual assault clients was children between the ages of 12 and 17 years, accounting for 32% of this type of case.

Office of the District Attorney Victim Services Division			
Child Abuse Statistics			
FY2010-2011			
Age	Child Physical Abuse	Child Sexual Assault	Total
0-5	23	10	33
6-11	18	37	55
12-17	10	82	92
18-34	20	55	75
34-64	14	56	70
65+	0	0	0
Unknown	6	18	24
TOTAL	91	258	349

Domestic Violence

Domestic violence clients include individuals who have experienced domestic violence stalking, as well as childhood exposure to domestic violence. In FY10-11, 83% of domestic violence clients were female. In cases of domestic violence and domestic violence stalking, the majority of clients were female, while in cases of child exposure to domestic violence, the majority of clients were male. Domestic violence clients were most frequently White (31%), African American (28%), or Latino/a (26%).

Elder Abuse

Elder abuse case counts include cases of dependent adult abuse as well. In FY10-11, elder abuse cases were split nearly evenly with 51% female clients and 49% male clients, and the majority (74%) were over the age of 65. Elder abuse clients were most frequently White (41%) or Asian (36%).

Adult Probation Department

The Adult Probation Department (APD) supervises individuals convicted of domestic violence as they complete the requirements of probation. The number of cases supervised by APD fluctuates throughout the year as the court refers new probationers while others complete their probation requirements. As of June 2011, the APD Domestic Violence Unit was supervising 535 individuals, an increase of 17% over June 2010. During FY10-11, 268 new individuals were referred to APD for domestic violence supervision, making this the third straight year that the number of new referrals has grown.

Adult Probation Department Domestic Violence Unit Statistics FY2008-2011			
	FY08-09	FY09-10	FY10-11
Total Cases at Fiscal Year-End	539	459	535
Total New Intakes During Fiscal Year	239	253	268
Total Cases Receiving a Disposition During Fiscal Year	173	184	164
Disposition: Probation Completions	127	127	122
Disposition: Probation Revocations	46	57	42
Certified Batterers Intervention Programs	7	7	7
DV Unit Staffing	12	8	10

When a person convicted of domestic violence is referred to APD for supervision, he or she is automatically referred to a batterer's intervention program (BIP), a 52-week program run by a community agency and certified by APD. If a probationer fails to attend the BIP or commits a crime that violates his or her probation, a bench warrant is issued and APD begins a procedure called a Motion to Revoke Probation. The following are certified BIPs in San Francisco:

- Antolino Family Wellness Center, Inc.
- Abuse, Violence, and Anger Cessation Alliance (A.V.A.C.A.)
- moMENTum
- Programa de hombres contra la violencia intrafamiliar (P.O.C.O.V.I.)
- San Francisco Bay Counseling
- Violence Intervention Program (V.I.P.)
- SWAP/PREP (SF Sheriff's Depart)
- John Hamel and Associates (certified in 2011)
- Womanalive (certified in 2011)
- Men in Progress (certified in 2012)
- Startrac (certified in 2012)

In FY10-11, the Domestic Violence Unit had a high success rate among probationers receiving a disposition regarding their probation status: 122 of 164 (74%) probationers that received a disposition successfully completed all the requirements of the BIP, including fulfilling other terms of their probation with no outstanding violations. The remaining 42 had their probation revoked and sentenced to jail.

At the end of the fiscal year, the Domestic Violence Unit had a staff of 10: 8 deputy probation officers, 1 Domestic Violence Court officer, and 1 supervisor. During the year, deputy probation officers handled an average of 67 cases, down from 77 cases per officer in FY09-10.

In September 2010, APD received a federal Violence Against Women Act grant to address the increasing number of domestic violence cases in the Bayview neighborhood. The grant was awarded through the California Emergency Management Agency to intensively supervise small caseloads of probationers with a higher emphasis on domestic violence crimes. APD analyzed the group of probationers supervised by the Domestic Violence Unit and found that 33% of probationers resided in 3 districts:

- Bayview (14%)
- South of Market (10%)
- Mission (9%)

Based on the high service needs of the Bayview neighborhood, APD identified this region as the primary service area for the grant. Using evidence-based practices to design a victim-centered supervision model and a 40:1 probationer to officer ratio, this specialized caseload will eventually be replicated throughout the Domestic Violence Unit.

APD did not have dedicated units for supervising child abuse, elder abuse, or stalking cases and those were therefore referred for general supervision. In FY10-11, APD supervised 23 child abuse, 53 elder abuse, and 22 stalking cases. The number of child abuse cases increased by 44% and the number of elder abuse cases increased by 51% over FY09-10.

Adult Probation Department General Supervision Statistics, FY2009-2011		
	FY09-10	FY10-11
Stalking Cases	27	22
Child Abuse Cases	16	23
Elder Abuse Cases	35	53

In 2012, APD will establish a child abuse-specific caseload, which will be supervised in the Domestic Violence Unit. When an individual convicted of child abuse is referred to APD, he or she will then be directed to a Child Abuse Intervention Program (CAIP), a 52-week program run by the Department of Public Health at the Community Justice Center through the Violence Intervention Program. CAIP will comply with the current California statute relating to the treatment of court ordered child abuse offenders. It will be run as a one-year pilot and has been certified by the Adult Probation Department. As with domestic violence cases, a bench warrant will be issued if a child abuse probationer commits a crime that violates his or her probation, and APD will initiate the Motion to Revoke Probation. APD will be able to provide more information on the new child abuse caseload and Child Abuse Intervention Program in future reports.

It is uncertain to what extent public safety realignment and the provisions of AB109 will impact the APD DV Unit in the upcoming year. Individuals that are currently serving their sentences for domestic violence crimes will not be among those eligible to serve their prison sentences locally or for post-release community supervision. However, some of those who are eligible for community supervision, which include non-violent, non-serious, non-sex offenders, may have a past history of domestic or family violence. This is an issue that will be considered as those who are eligible for local incarceration or post-release community supervision rejoin the San Francisco community.

San Francisco Family Court and Probate Court

The San Francisco Family Court issues restraining orders for both domestic violence and elder or dependent adult abuse.

Domestic Violence Restraining Orders

Survivors of domestic violence can request a temporary restraining order (TRO-DV) from the Family Court which are granted for cases involving a current or former intimate partner or spouse, a person with a child in common, or a family member to the second degree, which include in-laws but not cousins. The majority of TRO-DVs requested are granted by a judge, and the restraining order will remain in place until a hearing scheduled within 25 days of issuance to determine if a permanent restraining order will be granted. There are a number of dispositions possible at the conclusion of the hearing:

- **Granted:** The petitioner receives a permanent restraining order.
- **Denied:** The petitioner does not receive a permanent restraining order, and the temporary order is removed.
- **Off-Calendar:** A case may be removed from the calendar if the petitioner does not attend the hearing, or if the petitioner indicates that he or she no longer wants the restraining order.
- **Pending:** A case may not have been resolved by the close of the fiscal year, June 30.

Other dispositions may include:

- **Continued:** The most common reason for a continuance, or a rescheduling of the hearing, is the inability to find and serve the respondent with the order prior to the hearing date.
- **Dismissal:** The judge may determine the case should be dismissed, or it could be dismissed at the request of the petitioner.
- **Set for Trial:** Instead of a hearing in front of a judge, some restraining order requests require a trial with witnesses and testimony to determine a disposition.

In FY10-11, the Family Court received 1,369 requests for TRO-DVs. While 471 (34%) of these requests were granted, 661 (48%) were moved off-calendar. In comparison to FY09-10, there was a 6% decrease in restraining order requests granted, and a 6% increase in restraining order requests moving off calendar. Of the 119 requests that received other dispositions, 75 were set for trial, 30 were dismissed, and 14 were vacated. The total number of TRO-DV requests received by the Family Court has remained relatively steady over the past three years.

Permanent Dispositions of Domestic Violence Temporary Restraining Order Requests by Family Court⁹ FY2008-2011						
	FY08-09		FY09-10		FY10-11	
	#	%	#	%	#	%
Requests for TRO-DV	1,358	-	1,372	-	1,369	-
Granted	481	35%	503	37%	471	34%
Denied	212	16%	139	10%	113	8%
Off Calendar	596	44%	624	45%	661	48%
Other Disposition	66	5%	88	6%	119	9%
Pending	3	0%	18	1%	5	0%

Elder and Dependent Adult Abuse Restraining Orders

The Probate Court grants restraining orders in cases of elder and dependent adult abuse, and requests can be submitted to protect any individual 65 years of age and older from elder abuse. Requests for dependent adults can be made for all individuals between the ages of 18 and 64 who have physical or mental limitations that restrict his or her ability to carry out normal activities or to protect his or her rights. Requests for the latter type of restraining order come from several different sources such as legal assistance and advocacy organizations, Adult Protective Services, a conservator on behalf of a conservatee, or an individual applying on his or her own behalf.

In FY10-11, the Probate Court received 37 requests for elder or dependent abuse restraining orders (TRO-EA). While 16 (43%) requests were granted, 13 (35%) were taken off calendar. The number of TRO-EA requests received over the last three years has fluctuated greatly from 23 in FY08-09 to tripling the number in FY09-10 of 70 and dropping to almost 50% to 37 in FY10-11. Another significant change was the decrease in the percentage of cases receiving other dispositions which dropped from 41% in FY09-10 to 3% in FY10-11.

Permanent Dispositions of Elder Abuse Temporary Restraining Order Requests by Family Court FY2008-2011						
	FY08-09		FY09-10		FY10-11	
	#	%	#	%	#	%
Requests for TRO-EA	23	-	70	-	37	-
Granted	7	30%	26	37%	16	43%
Denied	2	9%	3	4%	5	14%
Off Calendar	6	26%	9	13%	13	35%
Other Disposition	8	35%	29	41%	1	3%
Pending	0	0%	3	4%	2	5%

⁹ The information in this table includes only requests related to domestic violence (TRO-DVs) received by Family Court. It does not include temporary restraining orders requested for civil harassment, elder abuse, or those requested of the Criminal Court.

Public Defender's Office

The Public Defender's Office in San Francisco utilizes a "holistic model" of indigent defense services, focusing not only on legal representation, but also on helping clients address the root causes of problems that may have led to their arrest. The Public Defender recognizes that contact with the criminal justice system offers a rare moment in which to address an individual's needs, including those beyond the realm of the legal system. By taking advantage of the unique relationship as a counselor to the client, public defenders can refer individuals to services for addiction, mental illness and unemployment, thereby providing alternatives to incarceration that promise better client, family, and community outcomes through decreased recidivism and healthier reentry into communities.

San Francisco Deputy Public Defenders are trained in evidence-based practices and understand the wide range of service needs of our clients. They are effective advocates for the use of alternative sentencing strategies and equally well versed in the legal issues and advocacy techniques required in the criminal justice process. Deputy Public Defenders are also responsible for designing alternative sentencing strategies and identifying clients who are eligible for collaborative courts and other evidence based programs aimed at improving social and legal outcomes.

Coordination with Existing Reentry Programs

Deputy Public Defenders work closely with the office's existing reentry programs and coordinate its efforts with other criminal justice agencies and community partners.

The Public Defender's Reentry Unit provides an innovative blend of legal, social and practical support through its Clean Slate and Social Work components. The Reentry Unit's social workers provide high quality clinical work and advocacy, effectively placing hundreds of individuals in treatment, housing and other services each year with the goal of improving legal outcomes and reducing recidivism. Reentry Social Workers conduct psycho-social assessments that delve into historical circumstances, family history, previous treatment, and long-term medical and mental health issues. The Reentry Social Workers have extensive knowledge of San Francisco social services and treatment networks as well as deep relationships with community based services staff and directors to which they connect their clients.

Shelter Plus Care

The Reentry Unit was recently approved to become a referring agency to Shelter Plus Care – a HUD-funded program that provides a limited number of apartments and housing vouchers to clients experiencing homelessness. Shelter Plus Care helps homeless clients with disabilities achieve stability by providing life-long subsidized housing as well as voluntary support services including case management, specialized mental health services, access to substance abuse treatment, benefits advocacy, and vocational training, among other services. The Reentry Unit's first referral to Shelter Plus Care was a homeless client who was also a victim of domestic violence.

Children of Incarcerated Parents Program (CIP)

Public Defender clients in the county jail avail themselves to the services of the CIP Program, which is part of the office's Reentry Unit. The goals of these services are to insulate children from the risks associated with parental incarceration, maintain family bonds through the period of incarceration, and improve the ability of clients to participate in family life upon their release. The CIP Program staff works with clients, their families, deputy public defenders, Human Services Agency, Child Support Services, Family Court, and a network of community-based treatment providers to respond to the needs of incarcerated parents and their families. The staff is uniquely positioned to address family needs that are created when a parent is taken into custody. Services provided include addressing the urgent needs of children, setting up contact visitation, assisting clients with family court issues, child support, reunification plans, connecting clients with CPS case managers, and connecting clients and their families to additional social services. Since its inception, the CIP Program has helped hundreds of families in San Francisco overcome the numerous obstacles created as a result of the incarceration of a family member.

Clean Slate Program

The office's Clean Slate Program assists over 3,000 individuals each year who are seeking to "clean up" their records of criminal arrests and/or convictions. Clean Slate helps remove significant barriers to employment, housing, public benefits, civic participation, immigration and attainment of other social, legal and personal goals. The program, now in operation for over a decade, prepares and files over 1,000 legal motions in court annually, conducts regular community outreach, distributes over 6,000 brochures in English and Spanish and holds weekly walk-in clinics at five community-based sites, in predominantly African American and Latino neighborhoods most heavily impacted by the criminal justice system. The Clean Slate Program has been instrumental in helping individuals obtain employment and housing, factors that help stabilize and strengthen families.

As shown by a growing body of scientific research, interventions that address the underlying causes of violent behavior and victimization are effective in preventing new instances of family violence. Without compromising the due process rights of individuals as guaranteed by the Constitution, the Public Defender is committed to utilizing evidence based alternatives that address individual-level risks that perpetuate family violence. As a member of the FVC, the Public Defender is committed to engaging in interagency collaboration and implementing preventative measures aimed at addressing family violence in San Francisco.

PUBLIC SERVICE AGENCIES

The City and County of San Francisco administers agencies designed to protect the welfare of vulnerable populations such as children, elders, and dependent adults. The following are statistics from those agencies.

Family and Children’s Services

San Francisco Family and Children’s Services (FCS), also known as Child Protective Services (CPS), is a division of the Human Services Agency that protects children from abuse and neglect, and works in partnership with community-based services to support families in raising children in safe and nurturing homes. Whenever possible, FCS helps families stay together by providing a range of services from prevention through aftercare to keeping children safe with their families or with families who can provide permanency.

Researchers from the Center for Social Services Research (CSSR) at the University of California at Berkeley aggregate and provide access to all child welfare data for the state on an annual basis as part of a joint venture between the University and the California Department of Social Services. The data included in this section comes from this database and has been organized by calendar year rather than fiscal year.¹⁰

Child Welfare Referrals

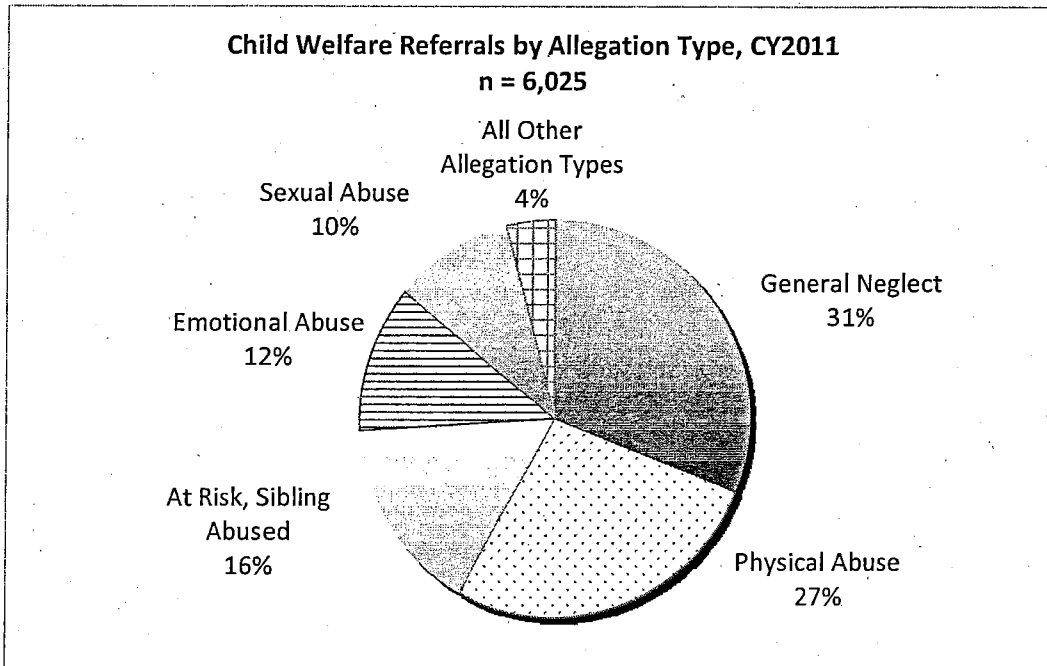
During Calendar Year 2011 (CY2011), FCS received 6,025 referrals for suspected child abuse or neglect, an increase of 20% over the past five-year period.¹¹

Family and Children’s Services Referrals and Substantiations CY2007-2011					
	2007	2008	2009	2010	2011
Total Children Referred	5,037	5,064	5,611	5,950	6,025
Total Cases Substantiated	1,070	1,081	1,103	833	659
% Substantiated	21%	21%	20%	14%	11%

The majority of referrals received by FCS were for general neglect (31%) and physical abuse (27%), and together these account for 3,521 referrals of suspected child abuse. Children at-risk due to abuse of a sibling (16%), emotional abuse (12%), and sexual abuse (10%) accounted for an additional 2,291 referrals. Other allegation types reported in CY2011 included caretaker absence or incapacity (3%), severe neglect (1%), and exploitation (less than 1%).

¹⁰ Source for all subsequent calendar year (CY) child welfare data: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Williams, D., Simon, V., Hamilton, D., Lou, C., Peng, C., Moore, M., King, B., Henry, C., & Nuttbrock, A. (2012). Child Welfare Services Reports for Children. Retrieved 4/6/2012, from University of California at Berkeley Center for Social Services Research website. URL: http://cssr.berkeley.edu/ucb_childwelfare. Some of the figures in this section have been updated from those reported in the 2010 *Comprehensive Report* to reflect the most current and accurate data available.

¹¹ This figure counts each child with a child maltreatment allegation once for each analysis year. If a child has more than one allegation in a specific year, that child is counted one time in the category of the most severe occurrence.



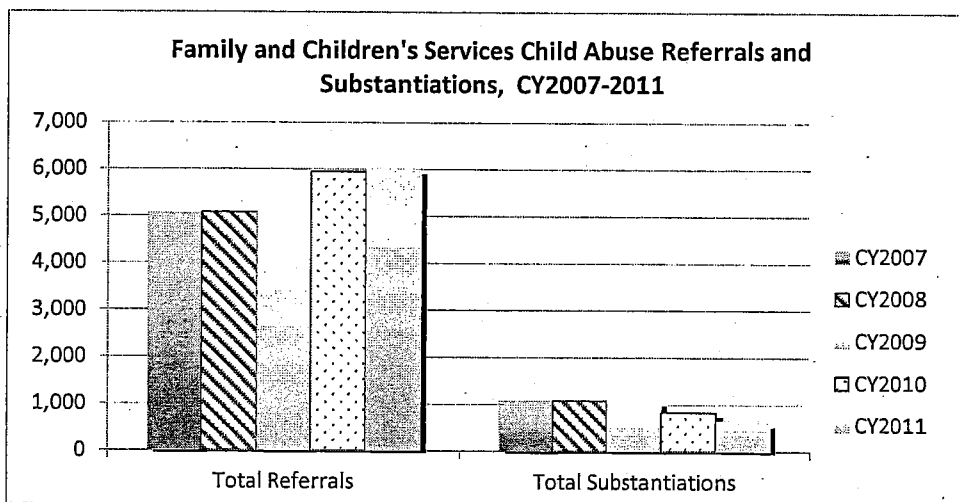
The breakdown among the different types of referrals received in CY2011 is similar to that of previous years during which general neglect and physical abuse were the most frequently received referrals. Since CY2007, general neglect and physical abuse allegations have each accounted for between 26% and 31% of referrals every year.

Family and Children's Services Referrals by Allegation Type CY2007-2011										
Allegation Type	CY2007		CY2008		CY2009		CY2010		CY2011	
	#	%	#	%	#	%	#	%	#	%
General Neglect	1,432	28%	1,478	29%	1,683	30%	1,850	31%	1,893	31%
Physical Abuse	1,312	26%	1,505	30%	1,614	29%	1,569	26%	1,628	27%
At Risk, Sibling Abused	599	12%	455	9%	657	12%	927	16%	973	16%
Emotional Abuse	413	8%	457	9%	609	11%	776	13%	735	12%
Sexual Abuse	565	11%	611	12%	569	10%	613	10%	583	10%
Caretaker Absence/Incapacity	362	7%	317	6%	196	3%	175	3%	158	3%
Severe Neglect	16	0%	31	1%	42	1%	30	1%	47	1%
Exploitation	10	0%	12	0%	8	0%	10	0%	8	0%
Substantial Risk	328	7%	198	4%	233	4%	0	0%	0	0%
TOTAL	5,037		5,064		5,611		5,950		6,025	

Examining the data over the past five years from CY2007 to CY2011 reveals significant trends such as the substantial increase in the numbers of referrals for three allegation categories: the number of children referred who were at-risk due to abuse of a sibling, an increase of 62% over the five year period; emotional abuse, which increased by 78%; and severe neglect, which increased by nearly 200%. Two types of referrals, substantial risk and caretaker absence or incapacity, decreased significantly by 100% and 56% respectively.

Referral Findings

Of the 6,025 referrals received during CY2011, 11% (659) were substantiated following investigation by FCS. While both the number of referrals substantiated and the rate of substantiation have decreased over the past five years, the number of total referrals to FCS has increased steadily. In CY2007, 1,070 cases or 21% of total referrals were substantiated, compared to 659 cases or 11% of total referrals substantiated in CY2011.



During CY2011, the majority of referrals (47%) did not meet the definition of abuse or neglect, and were considered “unfounded.” An additional 39% of referrals were evaluated and not found to warrant further investigation and required an “assessment only” by FCS. The remaining 3% of referrals were either found to be inconclusive due to a lack of evidence to substantiate the abuse or a finding has not yet been determined.

Family and Children's Services Referrals by Allegation Type and Finding, CY2011						
Allegation Type	Substantiated	Inconclusive	Unfounded	Assessment Only	Not Yet Determined	Total Referrals
General Neglect	345	75	724	748	1	1,893
Physical Abuse	71	36	904	611	6	1,628
At Risk, Sibling Abused	46	28	637	258	4	973
Emotional Abuse	77	37	377	243	1	735
Sexual Abuse	25	21	109	427	1	583
Caretaker Absence/Incapacity	81	6	39	32	0	158
Severe Neglect	13	0	22	11	1	47
Exploitation	1	1	1	5	0	8
Substantial Risk	0	0	0	0	0	0
TOTAL	659	204	2,813	2,335	14	6,025

Substantiated Allegations of Abuse and Neglect

In CY2011, 659 referrals to FCS were substantiated or found to be true upon investigation. Over half (52%) of substantiated referrals were for general neglect. Caretaker absence or incapacity and emotional abuse each accounted for 12% of substantiated referrals, and physical abuse accounted for 11%. The remaining 12% of substantiated referrals were for sexual abuse, severe neglect, exploitation, or children at-risk due to abuse of a sibling.

Geo-Coded Data

Data is also available from the CSSR database that examines child abuse and neglect allegation rates by zip code.¹² The most recent geo-coded data for CY2011 is detailed in the table below and shows that referrals to FCS vary greatly by zip code. The neighborhoods with the highest number of children with allegations were Bayview (1,073), Ingleside/Excelsior (650), Mission (523), and Visitacion Valley (502). Together, these four areas accounted for 2,748 allegations of abuse, or 46% of the total allegations received by FCS during that year.

Family and Children's Services Referrals, CY2011				
Children with Child Maltreatment Allegations and Incidence Rates by ZIP Code				
ZIP Code	Neighborhood	Children with Allegations	Child Population	Incidence per 1,000 Children
94124	Bayview	1,073	9,511	113
94112	Ingleside/ Excelsior	650	16,454	40
94110	Mission	523	14,446	36
94134	Visitacion Valley	502	9,652	52
94102	Hayes Valley/ Tenderloin	235	3,543	66
94115	Pacific Heights/Western Addition/Japantown	217	4,279	51
94107	Potrero Hill	168	3,020	56
94132	Lake Merced	166	4,360	38
94103	SOMA	163	3,162	52
94109	Nob Hill/Russian Hill	129	4,754	27
94117	Haight/Cole Valley	118	3,192	37
94133	North Beach/Fisherman's Wharf	88	3,134	28
94131	Twin Peaks/Glen Park	84	3,932	21
94130	Treasure Island	59	191	309
94116	Outer Sunset	54	7,087	78
94127	West Portal	52	3,475	15
94122	Inner Sunset	46	8,529	5
94121	Outer Richmond	44	6,297	7
94118	Inner Richmond	37	5,492	7
94114	Castro/Noe Valley	31	2,739	11
94108	Chinatown	29	1,300	22
94123	Marina/Cow Hollow	23	2,428	9
94129	Presidio	11	485	23
94105	Embarcadero/SOMA	8	252	32
94104	Financial District	7	49	143
94111	Embarcadero	3	227	13
94158		3	416	7
ZIP Code Missing, or Out of County		1,502		
San Francisco		6,025	122,406	49
California		475,908	9,584,228	50

¹² The child population projections used in this particular data are based on the 2000 U.S. Census, and therefore may not precisely reflect San Francisco's 2011 child population.

The citywide incidence rate for CY2011 was 49.2 per 1,000 children, an increase of 7% from CY2008 of 45.8 per 1,000 children. Among neighborhoods with the highest numbers of child abuse allegations, the incidence rates in CY2011 were 112.8 (Bayview), 39.5 (Ingliside/Excelsior), 36.2 (Mission), and 52.0 per 1,000 children (Visitation Valley).

Differential Response

FCS uses a method called “Differential Response” (DR) to respond to allegations of abuse. Based on information received during a hotline call or referral, FCS social workers assess the evidence of neglect or abuse. If there is insufficient evidence to suspect neglect or abuse, the case is “evaluated out of the system” and the family may be referred to voluntary services in the community. If there appears to be sufficient evidence of abuse or neglect, FCS opens the case and conducts further assessment and investigation. Under this DR model, the social worker taking the hotline report or referral determines the initial response path for all referrals.

- **Path 1: Community Response** – When there are no known safety issues and a low-to-moderate risk level of future maltreatment, under California’s traditional child welfare system, more than 1/3 of all cases are re-referrals from the previous year, indicating that there are continued challenges facing these families. With DR these families are linked to services in the community through expanded partnerships with local organizations. This is the path for all referrals that are “evaluated out of the system.”
- **Path 2: FCS and Community Response** – When the safety threat is assessed as moderate-to-high, FCS opens a referral. The response team may include a public health nurse, a CalWORKs worker, or other community representatives who may already be working with the family.
- **Path 3: FCS Only (and possible law enforcement) Response** – When the safety threat is assessed as high-to-very high, FCS opens a referral.

FCS began using DR for Path 1 and 2 cases in 2006. This model serves as a strong tool for child abuse prevention by supporting families at risk of abuse or neglect even when cases do not rise to the level of FCS action. As a response to research findings and limited capacity of service providers, FCS now focuses on families that are more likely to come back as a referral to FCS. With changes made in how DR is implemented, comparative data is not available for FY10-11.

Emerging Trends in Child Welfare

Over the past few years, FCS has seen a rise in the number of adolescents becoming involved in the child welfare and foster care systems as the subject of referrals for abuse and through DR. However, there are signs that this trend may be slowing. During CY2011, adolescents ages 11 to 17 years were the subject of 2,387 referrals to FCS and represents a slight decrease of 57 referrals (2%) from CY2010.

Family and Children’s Services Referrals by Age Group, CY2007-2011					
Age Group	2007	2008	2009	2010	2011
0 - 5	1,620	1,564	1,787	1,807	1,928
6 - 10	1,417	1,458	1,613	1,699	1,710
11 - 17	2,000	2,042	2,211	2,444	2,387
TOTAL	5,037	5,064	5,611	5,950	6,025

CY2011 saw the fewest number of adolescents entering foster care in the past 10 years with 138 ages 11 to 17 entering the system, down 23% from CY2010 of 179.

Family and Children's Services Foster Care Entries by Age Group, CY2007-2011					
Age Group	2007	2008	2009	2010	2011
0 - 5	202	198	182	183	156
6 - 10	82	60	64	100	88
11 - 17	155	177	155	179	138
TOTAL	439	435	401	462	382

Overall, the number of children involved with FCS and the child welfare system has declined with both the number and rate of cases substantiated declining for the second straight year while the number of children in foster care in San Francisco is also following a downward trend. At the earliest date for which data is available in January 1998, there were 3,049 children in foster care in San Francisco. With the exception of 2003, the point-in-time caseload count has decreased every year since then, reaching a low of 1,254 children in January 2011. There are several changes that have likely contributed to this decline: San Francisco's decreasing child population, and new FCS policies that emphasized early intervention and providing increased family support services to keep more children safely in their homes, when appropriate, rather than placing them in foster care. FCS anticipates the foster care caseload will continue to decline over the next year.

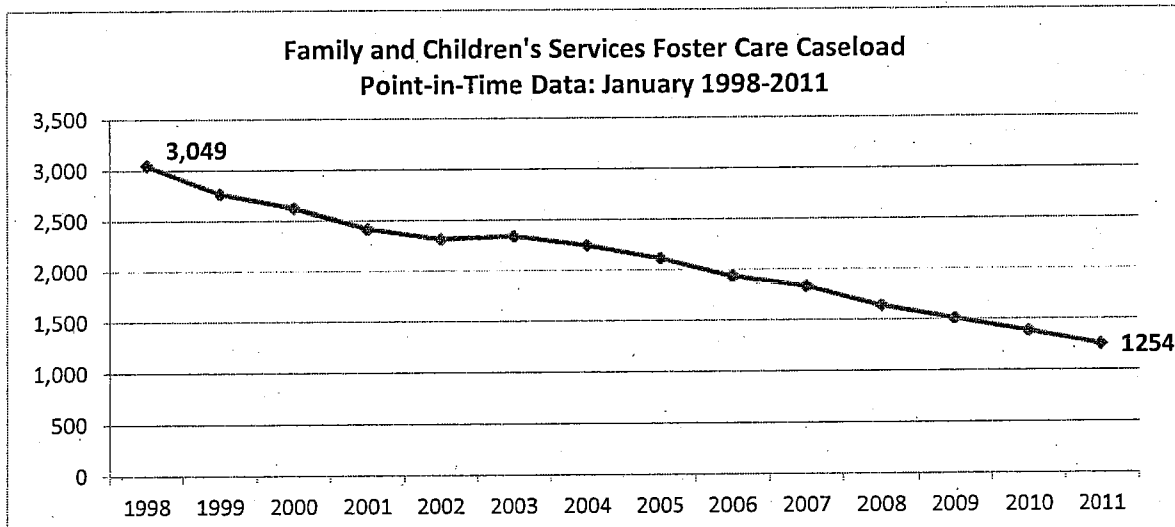


Figure provided by SF Human Services Agency

Another significant change to the child welfare system came with the passage of State Assembly Bill 12 (AB12), the California Fostering Connections to Success Act, in August 2010. Under AB12, eligible foster youth have the option to remain in care until age 21 and receive transitional support. Youth who continue in extended foster care will remain under the jurisdiction of the juvenile court as "nonminor dependents," and will continue to work with a county child welfare worker to maintain their eligibility and fulfill their Independent Living Case Plan, a plan to develop independent living skills and permanent connections with caring and committed adults. Nonminor dependents in extended foster care can live in a number of different types of supervised placements, all of which must be either approved or licensed under new standards. This extended foster care program will be incrementally implemented over a three-year period. In January 2012, eligible youth can extend their foster care until age 19, and in January 2013, until age 20. Assuming State legislature takes additional authorizing action, foster care will be extended for youth age 21 in January 2014.

Adult Protective Services

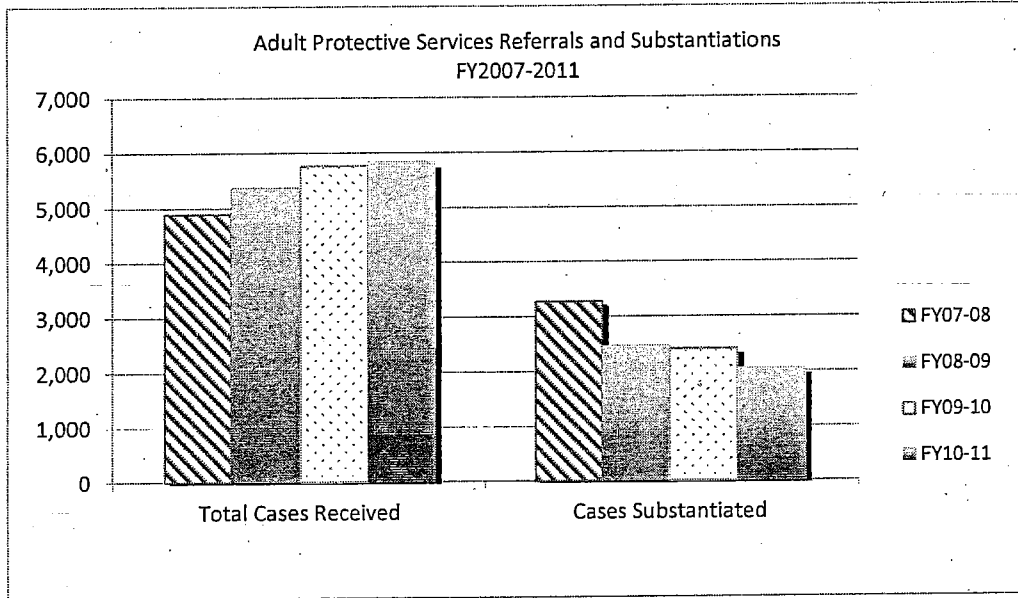
The Department of Aging and Adult Services operates the Adult Protective Services (APS) for the county of San Francisco, and is charged with responding to allegations of abuse regarding seniors and adults ages 18 to 64 who are dependent or have disabilities.

There are approximately 109,842 seniors age 65 years and older living in San Francisco, comprising nearly 14% of the city's total population.¹³ This is a growing group with growing needs, and ensuring the safety of this protected class is one such need. National data suggests that just one in five cases of elder abuse and neglect are officially reported to the police or to APS. Abuse of the "oldest old," those individuals over 85 years of age, is believed to occur at a higher rate than other elders, and family members are the most common perpetrators of abuse towards these individuals.

In FY10-11, APS received 5,839 reports of abuse or neglect, which included 3,987 reports regarding elders and 1,852 reports regarding dependent adults. APS responds to all reports made, though APS social workers do not provide a face-to-face investigation on every report as a face-to-face evaluation may not be warranted for a variety of reasons. One reason is if the elder or dependent adult who is the subject of the referral does not reside in San Francisco and those reports are referred to the APS in the county of residence. Another reason might be that the individual referred may be in a skilled nursing facility and such reports are under the jurisdiction of the Long Term Care Ombudsman program. The total number of referrals received by APS has increased by 19% over the past four years, with a high this year of 5,839 calls to the APS hotline. Of all referrals received, APS investigated 3,096 cases (53%) and substantiated 2,065 (67%) of those cases.

	FY07-08	FY08-09	FY09-10	FY10-11
Cases Received	4,893	5,378	5,758	5,839
Cases Investigated	n/a	3,722	4,559	3,096
Percent Investigated	n/a	69%	79%	53%
Cases Substantiated	3,278	2,469	2,407	2,065
Percent Substantiated	n/a	66%	53%	67%

¹³ U.S. Census Bureau, 2010 Census, retrieved June 30, 2012 from <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>



Elder abuse cases accounted for more than twice the number of dependent adult abuse cases in FY10-11, 68% and 32% respectively. Of the 56% of elder and 46% of dependent adult abuse cases investigated, the latter had a slightly higher percentage found to meet the standards of abuse or neglect, 70% versus 66%.

	Elder Abuse	Dependent Adult Abuse
Cases Received	3,987	1,852
Cases Investigated	2,238	858
Percent Investigated	56%	46%
Cases Substantiated	1,468	597
Percent Substantiated	66%	70%

One of the relatively new services at APS is the Urgent Response Team formed in late 2009 in response to the growing number of elder and dependent adult abuse reports requiring an immediate response. The Team increased its staff in FY10-11 and is now comprised of three APS social workers and three registered nurses. The focus of this Team is to respond to all reports of abuse needing an immediate response within 24 hours or within 2.5 days. This urgent response capability has helped to involve law enforcement much more quickly in cases of abuse and neglect. This has been valuable in fostering a stronger team approach to reports of abuse where, for example, a stay-away or temporary restraining order is needed, or where immediate documentation via interview and photographs is necessary to create the foundation for prosecution of a criminal case by the Office of the District Attorney.

Department of Public Health

The San Francisco Department of Public Health (DPH) works to reduce family violence both through public health prevention programs and by directly addressing family violence issues with patients seen in the DPH network of hospitals and healthcare clinics. Healthcare providers may be the first or only professionals to encounter and provide services to victims of family violence. Although some victims of family violence may present obvious injuries during a healthcare visit, it is far more common that they present only subtle symptoms of repeated abuse or violence. Therefore, treating and preventing family violence requires extensive training of healthcare staff, protocols to use in screening for and responding to family violence, and the development of educational materials for healthcare providers and staff. The San Francisco General Hospital Emergency Department (SFGH ED) has a model program whereby all nurses and physicians ask each patient about his/her domestic violence experiences. All patients identified as or suspected to be victims of domestic violence are offered treatment, counseling, and referrals to community services. In July 2011, SFGH ED providers began to document the completion of this domestic violence screening in the patient's electronic medical record (EMR). Thus, in the future, data will be available on the number of patients reporting domestic violence when screened at the SFGH ED.

The DPH outpatient clinics also have a domestic violence screening protocol that was endorsed by the Health Commission in 1998 where each clinic routinely screens for and address domestic violence with their patients. As with the SFGH ED model, all patients identified as or suspected to be victims of domestic violence are offered treatment, counseling, and community resources. Data collected through small medical chart audits as part of a quality improvement study conducted by LEAP (Look to End Abuse Permanently) and funded by the San Francisco Kaiser Community Foundation Grants Program demonstrated that among a sample of six clinics, each had screened between 31% and 98% of their female patients for domestic violence. Beginning in 2012, DPH clinics will gradually implement a new EMR system that will allow for the collection of data on the number of patients screened for domestic violence by their healthcare providers, as well as the number of patients who report either currently or previously experiencing domestic violence. Healthcare providers will also be able to enter information on their patients' current and past experiences of reproductive coercion into the EMR in each outpatient clinic. Reproductive coercion refers to behaviors that interfere with contraception use and/or pregnancy.

Because many victims of family violence do not feel safe or ready to disclose their experiences of abuse when asked by a healthcare provider, not all family violence victims may be identified in the healthcare setting. Once victims of family violence and sexual assault are identified within the DPH system, many of the victims are treated by their primary health care team or referred to community services. However, there are also a number of trauma-specific treatment programs within DPH to assist patients in recovering from the physical and emotional trauma they have experienced.

The Trauma Recovery Center (TRC) provides mental health and case management services to survivors of interpersonal violence, including intimate partner, sexual and other physical assaults, gang-related violence, and more. In FY10-11, TRC provided services to 764 clients, 47% of whom were seen following experiences of sexual assault, and 53% of whom were seen following experiences of domestic violence or other assaults.

Department of Public Health – Trauma Recovery Center Statistics FY2009-2011		
	FY09-10	FY10-11
Clients Served	772	764
Number of Clients Receiving Services Following Sexual Assault	372	357
Percentage of Clients Receiving Services Following Sexual Assault	48%	47%
Number of Clients Receiving Services Following Domestic Violence or Other Assaults	400	407
Percentage of Clients Receiving Services Following Domestic Violence or Other Assaults	52%	53%

The Child Trauma Research Program (CTRP) is a program of the University of California, San Francisco, Department of Psychiatry that operates at SFGH. CTRP provides assessment and intensive mental health services to children birth through five years of age who have been exposed to parental or guardian domestic violence, or other trauma. During FY10-11, CTRP provided 53 children with services for domestic violence exposure, 18 for experiences of physical abuse; and 8 for sexual abuse. Twenty children treated were exposed to two or more types of violence.

Department of Public Health – Child Trauma Research Program Statistics FY2009-2011		
Type of Violence Exposure	FY09-10	FY10-11
Domestic Violence	67	53
Physical Abuse	31	18
Sexual Abuse	7	8

The Child and Adolescent Support Advocacy and Resource Center (CASARC) serves children and adolescents up to 18 years of age who have been sexually or physically abused, or who have witnessed severe violence. Located at SFGH, CASARC provides forensic medical and crisis management services 24 hours a day; trauma-focused psychotherapy services to children and families; and educational training for community providers, including teachers, students, and health care and mental health professionals.

During FY10-11, CASARC had 345 telephone contacts and conducted 265 forensic interviews with children and adolescents who were suspected victims of abuse. CASARC physicians and nurse practitioners conducted 102 sexual and 76 physical abuse medical exams.

Department of Public Health – CASARC statistics FY2010-2011	
Type of contact	Number of contacts
Phone contacts	345
Forensic interviews	265
Sexual abuse exams	102
Physical abuse exams	76

Department of Child Support Services

The San Francisco Department of Child Support Services (DCSS) works with parents and legal guardians to ensure that families receive the court-ordered financial and medical support they need to raise their children. DCSS helps children and their families by locating absent parents, establishing paternity, and requesting and enforcing child support orders from the court. During FY10-11, DCSS provided case management services for 15,853 child support cases.

In cases where domestic violence or family violence has occurred, enforcing child support obligations can lead to elevated levels of risk for survivors of abuse and their children. Therefore, DCSS developed the Family Violence Indicator (FVI) to be used by case managers to flag cases in which the enforcement of support obligations may be dangerous.¹⁴ The number of cases identified with the FVI more than tripled from FY09-10 to FY10-11, increasing from 569 to 1,721. This represents 11% of the DCSS caseload flagged for family violence, up from 3% during the previous year.

Department of Child Support Services Family Violence Statistics, FY2009-2011		
	FY09-10	FY10-11
Open cases at fiscal year-end	17,915	15,853
Cases flagged with FVI	569	1,721
Percent of caseload flagged with FVI	3%	11%

This dramatic increase in the number of cases flagged with the FVI prompted DCSS to create a special enforcement solution with the primary goal to ensure the safety and well-being of custodial parents who rely on the collection of child support to care for their children, but whose cases could qualify for good-cause closure due to the likelihood of intimidation, threats, or violence by the non-custodial parent in response to a child support order. DCSS is expected to launch its new Family Violence Initiative in July 2011.

In addition, DCSS works closely with the Adult Probation Department (APD) on cases in which non-custodial parents are on probation or incarcerated for domestic violence. This inter-agency collaboration allows both departments to work with non-custodial parents to ensure that they meet their support obligations and remain in compliance with the terms of their probation. DCSS and APD are also working toward implementing video conferencing which will allow parents who are on probation for domestic violence incidents to participate in court proceedings without making a personal appearance.

Currently, 80% of local cases identified with a family violence indicator are meeting their child support obligations, with no new reports of family violence towards the custodial parents or children on this caseload. Further efforts by DCSS to increase participation and compliance for cases with family violence history are ongoing.

¹⁴ When a case participant (noncustodial parent or custodial party) claims domestic or family violence, the case manager marks the case as FVI in the Child Support Services database. This automatically updates the information in the records for any dependent children in that family as well as the case participant. The FVI counts listed are unique case counts, not participant counts. The count of individual participants with FVI is greater than the count of cases with FVI. For example, if a case participant makes a claim of family violence and has one dependent child, the FVI would be marked at both the case and participant levels, for an FVI case count of 1 and an FVI participant count of 2.

CalWORKs Domestic Violence Unit

The San Francisco Human Services Agency (HSA) administers CalWORKs, the State's welfare and benefits program for adults with dependent children, and operates a Domestic Violence Unit to provide specialized services to survivors of domestic violence who are receiving CalWORKs. The CalWORKs program requires recipients to participate in employment or employment-related activities a minimum number of hours per week as a condition of receiving benefits. Because victims of domestic violence may have special needs that could limit their ability to fulfill this requirement, such as Post Traumatic Stress Disorder, the Domestic Violence Unit will work with the individual to receive specialized case management and a temporary waiver of the work requirement. This enables the individual to attend counseling services to help heal from the trauma of abuse and to ease the transition to financial independence.

Human Services Agency CalWORKs and Domestic Violence Unit Caseloads FY2008-2011			
	FY08-09	FY09-10	FY10-11
Average Monthly CalWORKs Caseload	4,607	4,795	4,907
Average Monthly Domestic Violence Unit Caseload	262	275	234
Percent of Caseload Assigned to DV Unit	6%	6%	5%

CalWORKs caseloads fluctuate monthly with new individuals applying for benefits while other recipients close theirs for various reasons, including reaching their lifetime limit on aid. During FY10-11, CalWORKs caseloads reached a high of 5,089 cases in May 2011 and a low of 4,666 cases in August 2010 with an overall average of 4,907 cases per month. During the same period, Domestic Violence Unit caseloads reached a high of 290 cases in August 2010 and dropped to a low of 141 cases in June 2011 with an average monthly of 234 cases.

From June 2010 to July 2011, there was an 8% increase in the number of CalWORKs caseloads, which rose from 4,706 cases at the start of the year to 5,077 cases at the close of the year. The Domestic Violence Unit caseload, however, decreased over the same time period with its caseload dropping from 287 to 141, a 51% decrease. The percentage of total CalWORKs cases that were assigned to the Domestic Violence Unit fell to approximately 5% of the average monthly caseload, down 6% from the two previous years.

San Francisco Unified School District

The San Francisco Unified School District (SFUSD) provides a broad range of specialized services and programs to support students and their families beyond the classroom. One important issue among the many addressed is that of teen relationship abuse. Every two years, SFUSD administers the Center for Disease Control and Prevention's Youth Risk Behavior Survey (YRBS)¹⁵ to a random sample of students across all SFUSD middle and high schools, and uses the data to examine risk factors present in students' lives. The YRBS includes questions about teen relationship abuse and health risk behaviors such as tobacco, alcohol and other drug use; sexual behavior; bullying; and exposure to violence. The YRBS results included in the tables below have been organized by School Year (SY) rather than Fiscal Year (FY).

During the 2010-2011 School Year (SY10-11), 2,730 middle and 2,220 high school students participated in the YRBS. Standard demographic information is captured, and SFUSD was the first school district in the country to include items on both sexual orientation and gender identity in its middle *and* high school YRBS surveys. Sexual orientation responses included: *heterosexual (straight), gay or lesbian, bisexual, and not sure* (i.e., questioning). Gender identity responses included: *male, female, and transgender*.

The data collected from YRBS respondents is adjusted to represent the total SFUSD student population from which the survey sample is drawn. The weighted data results are considered representative of the overall population of SFUSD students in middle schools (grades 6 to 8) and high schools (grades 9 to 12). However, due to the relatively small number of surveys completed by students identifying as lesbian, gay, bisexual, questioning, or transgender, YRBS results may not be representative of the experiences of *all* students who identify as such. The YRBS includes one item regarding physical abuse by a dating or intimate partner, and the high school YRBS includes an additional question regarding sexual assault by an intimate or dating partner.

A total of 2,312 middle school students responded to the question regarding physical abuse by an intimate partner with 6.5% of the 2,175 middle school respondents who identified themselves as heterosexual reported "being hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months." This percentage increased to 27.2% of the 104 respondents who identified themselves as gay, lesbian or bisexual; and 59.3% of the 33 respondents who identified themselves as transgender.

A total of 2,159 high school students responded to the survey questions regarding physical abuse and sexual assault by an intimate partner, with 7% of the 2,022 high school respondents who identified themselves as heterosexual reported being hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months. This percentage increased to 18% of the 111 respondents who identified themselves as gay, lesbian, or bisexual; and 40% of the 26 respondents who identified themselves as transgender. High school students were also asked about experiences of forced sexual intercourse during their lifetime with 7% of heterosexual; 17% of gay, lesbian, or bisexual; and 44% transgender reported having "been physically forced to have sexual intercourse when they did not want to."

¹⁵ Standard CDC Youth Risk Behavior Survey Questionnaires can be accessed at:
http://www.cdc.gov/healthyyouth/yrbs/questionnaire_rationale.htm

San Francisco Unified School District Youth Risk Behavior Survey – Domestic Violence Statistics SY2010-2011		
Students Reporting Physical Assault by an Intimate Partner		%
Middle School	Heterosexual (n=2,175)	6.5%
	Gay, lesbian or bisexual (n=104)	27.2%
	Transgender (n=33)	59.3%
High School	Heterosexual (n=2,022)	7%
	Gay, Lesbian, or Bisexual (n=111)	18%
	Transgender (n=26)	40%
Students Reporting Forced Sex		%
High School	Heterosexual (n=2,022)	7%
	Gay, Lesbian, or Bisexual (n=111)	17%
	Transgender (n=26)	44%

SFUSD has a variety of prevention and intervention services to address the needs of students experiencing violence. Programs include professional development opportunities for teachers and staff, violence prevention curricula for teachers, Wellness Programs in High Schools, Health Promotion Committees at the high schools, Healthy School Teams in middle schools, School Social Workers in the elementary schools, Support Services for Lesbian, Gay, Bisexual, and Transgender youth, and grant-funded projects such as School Community Violence Prevention.

School staff members are also among the most frequent reporters of child abuse to Family and Children’s Services. Since SY02-03, school staff members annually made more than 700 reports of suspected child abuse during the school year. Since SY07-08, that number has increased to over 1,000 reports each school year. During SY09-10, the last year for which data is currently available, 1,515 reports of suspected child abuse were made by public and private school staff members. SFUSD staff members made 1,355 of these reports and 51% were regarding public elementary school students, 19% regarding public middle school students, and 28% regarding public high school students. Only 2% of reports were from SFUSD child development centers and pre-schools. Private school and non-SFUSD preschool and day care center staff were responsible for 160 reports of suspected child abuse or neglect.

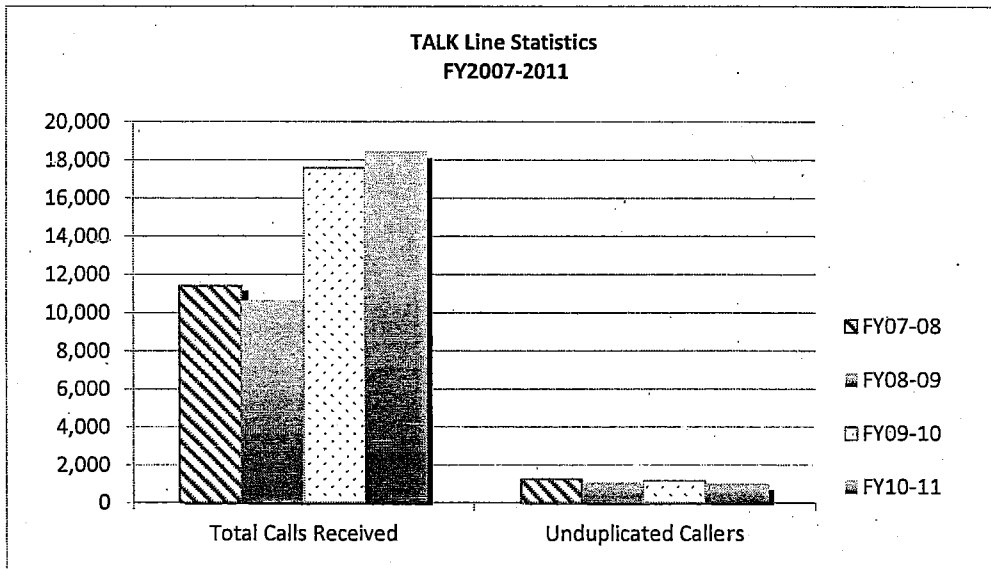
San Francisco Unified School District Child Abuse Reporting Statistics SY2003-2010								
	SY 02-03	SY 03-04	SY 04-05	SY 05-06	SY 06-07	SY 07-08	SY 08-09	SY 09-10
Reports by Elementary Schools	434	430	431	442	449	664	680	686
Reports by Middle Schools	151	157	206	193	140	234	266	262
Reports by High Schools	91	88	177	178	115	237	311	378
Reports by Private Schools	71	78	68	64	76	120	124	108
Reports by Child Development Centers and Pre-Schools	6	12	6	4	10	20	32	29
Reports by Non-SFUSD Preschools and Day Care Centers	11	19	7	9	7	14	23	52
TOTAL	764	784	895	890	797	1,289	1,436	1,515

COMMUNITY-BASED SERVICES

Child Abuse Prevention and Support Services

The San Francisco Child Abuse Prevention Center (SFCAPC) is dedicated to the prevention of child abuse and neglect, the promotion of healthy families, and the mental health of children. SFCAPC operates the TALK Line, a 24-hour support hotline for parents and caregivers to help cope with the stress of parenting in healthy ways and serve as a preventive measure to stop child abuse before it happens. During FY10-11, TALK Line received 18,422 calls, an increase of almost 5% over the previous year, from an estimated 1,000 unduplicated callers.¹⁶

San Francisco Child Abuse Prevention Center Statistics FY2007-2011				
	FY07-08	FY08-09	FY09-10	FY10-11
TALK Line Calls Received	11,398	10,626	17,583 ¹⁷	18,422
Unduplicated Callers	1,250	1,093	1,161	1,000
SafeStart Families Served	153	153	164	174



SFCAPC also operates the San Francisco SafeStart Initiative, a city-wide program that seeks to reduce the incidence and impact of exposure to both community and domestic violence on children ages 6 and under. SafeStart providers are located at sites throughout the city, including Family Resource Centers, Family Court, the San Francisco Police Department's Special Victims Unit, and other locations where children exposed to violence can be reached. Services for SafeStart families include case management, advocacy, support groups, parenting education, counseling, and more. In FY10-11, SafeStart served 174 families.

¹⁶ The TALK Line is anonymous and callers are not required to identify themselves.

¹⁷ The increase in the number of TALK Line calls received between FY08-09 and FY09-10 was primarily due to a change in call documentation procedures that better captured actual call volume.

The 2009 *Comprehensive Report on Family Violence in San Francisco* noted that Family Resource Centers (FRCs) should be better equipped to meet the needs of families who have experienced violence, and the SafeStart program has made significant efforts to increase the capacity of the FRCs to respond to children exposed to family and community violence. SafeStart places advocates at 7 FRCs in San Francisco and provides advocates with special training and support specifically to work with these families and children. It also has a full-time staff who provides training to service providers at family-focused agencies in San Francisco throughout the year, and an annual training held in April 2011 that focuses exclusively on how to better serve families exposed to violence. This year's annual event trained 106 individuals representing 45 family-focused agencies, including 20 FRCs.

Domestic Violence Prevention and Support Services

Victims of domestic violence often need significant support and resources to heal, and to rebuild a safer and healthier life. For victims of abuse, leaving the abusive relationship can be one of the most dangerous times, and San Francisco's three domestic violence emergency shelters (with a combined total of 75 beds per night) play a key role in helping protect these victims. Through the Violence Against Women Prevention and Intervention (VAW) Grants Program, the Department on the Status of Women distributes City funding to these shelters and collects statistics regarding the services provided.¹⁸ In FY10-11, the three emergency shelters provided 4,796 bed nights and provided 3,945 hours of counseling, advocacy, case management, and other services to 171 women and their children. Unfortunately, during the same time period 873 individuals were turned away from the emergency shelters due to a lack of space.

VAW Grants Program Services FY2007-2011				
Emergency Shelter	FY07-08	FY08-09	FY09-10	FY10-11
Shelter Bed Nights	5,927	3,950	3,729	4,796
Individuals Served	228	122	192	171
Turn-aways	630	1,034	1,130	873
Transitional and Permanent Housing	FY07-08	FY08-09	FY09-10	FY10-11
Housing Bed Nights	9,748	13,307	12,801	12,770
Individuals Served	118	89	61	103
Turn-aways	23	347	247	460
Crisis Line	FY07-08	FY08-09	FY09-10	FY10-11
Crisis Line Calls	13,997	18,529	14,642	21,578
Supportive Services	FY07-08	FY08-09	FY09-10	FY10-11
Hours of Supportive Services	38,521	41,279	46,010	54,215

¹⁸ Several other City departments, including the Department of Children, Youth, and Their Families and the Human Services Agency, also support certain services provided by San Francisco's domestic violence programs. The numbers reported here only reflect the investment made through the Department on the Status of Women's VAW Grants Program.

The VAW Grants Program also supports three transitional housing programs and one permanent supportive housing program that provided 12,770 bed nights and 2,335 hours of counseling, case management, advocacy, and other support services to 103 women and their children. As in the case of the emergency shelters, 460 individuals were turned away from these transitional and supportive housing programs due to a lack of space.

As evidenced by the thousands of service hours provided by these emergency and temporary shelter programs, much more is needed in addition to housing to support those who have experienced abuse. In FY10-11, the VAW Grants Program partnered with 24 organizations to fund the operation of 34 different community programs that provided advocacy, case management, counseling, crisis intervention, education, and legal services, among others. These 34 programs provided a combined total of 54,215 hours of supportive services to an estimated 34,902 victims of violence.

The VAW Grants program also funds one of three domestic violence crisis lines in San Francisco, Women Organized to Make Abuse Nonexistent, Inc. (WOMAN, Inc.). In FY10-11, WOMAN, Inc. fielded 21,578 calls, an increase of 6,936 calls or 47% from the previous year. The other two crisis lines operated by La Casa de las Madres and the Riley Center received an additional 6,512 calls, bringing the total number of crisis calls to 28,090 and demonstrating the crucial need for this simple and confidential way for victims of violence to reach out for help. Even with this tremendous volume of calls, it is important to remember that victims of abuse may use other access points for services not specific to domestic violence and that some victims may never access any services at all.

Elder Abuse Prevention and Support Services

The San Francisco Elder Abuse Forensic Center (SFEAFC) is a public/private partnership between the non-profit Institute on Aging and the following City and County of San Francisco Agencies: Department of Aging and Adult Services (Adult Protective Services and the Public Guardian), the District Attorney's Office, the City Attorney's Office, and the Police Department. The mission of SFEAFC is to prevent and combat the abuse, neglect, and exploitation of elders and dependent adults in San Francisco using the following strategies:

- Improve communication and coordination among the legal, medical, and social services professionals who investigate and intervene in cases of elder and dependent adult abuse.
- Increase access to potential remedies and justice for those who have been victimized.
- Educate policy makers, professionals, caregivers, older adults and their families about preventing, reporting and stopping elder and dependent adult abuse.

SFEAFC provides forensic review meetings, coordinated home visits, medical evaluations, medical record reviews, psychological/neuropsychological assessments, and collaboration and community outreach. The data from SFEAFC represents a subset of Adult Protective Services (APS) cases. SFEAFC uses a standardized intake form developed in collaboration with the other three forensic centers in California. Any member of SFEAFC may refer a case for consultation and referrals largely come from APS. Cases are accepted based upon the relative complexity and/or the need for specialized consultation.

In FY10-11, there were 44 new cases and 54 follow-up cases presented during 25 meetings. The median age of elder abuse victims was 75 with 70% female and 30% male. Caucasians (48%) and African Americans (27%) represent the highest rates of abuse within the case population. It should be noted that multiple types of abuses are often found within a given case with the most common type being financial abuse at 37 cases (combined totals from “financial-real estate” and “financial other” cases). The incidence of abuse was fairly evenly distributed throughout San Francisco, except for higher clusters occurring in the neighborhoods of Russian Hill (94109), the Inner Sunset District (94122), and Bayview-Hunters Point (94124).

San Francisco Elder Abuse Forensic Center Case Statistics FY2008-2011			
	FY08-09	FY09-10	FY10-11
New Cases	53	32	44
Follow-Up Cases	76	27	54
Number of Meetings	37	20	25
Female Clients	33	16	31
Male Clients	20	15	13
Average Age of Clients	79.7	75.4	73.8
Median Age of Clients	83	78	75

San Francisco Elder Abuse Forensic Center New Case Statistics FY2008-2011						
	FY08-09		FY09-10		FY10-11	
Race/Ethnicity	#	%	#	%	#	%
Caucasian	23	43%	13	41%	21	48%
African American	16	30%	7	22%	12	27%
Other/Unknown	0	0%	2	6%	5	11%
Asian	4	8%	6	19%	2	5%
Latina/o	7	13%	4	13%	2	5%
Pacific Islander	3	6%	0	0%	2	5%
TOTAL	53		32		44	
Types of Abuse	#	%	#	%	#	%
Financial - Other	31	30%	17	22%	28	26%
Other/Unknown	10	10%	12	16%	18	17%
Psychological	14	14%	13	17%	13	12%
Self-Neglect	10	10%	3	4%	13	12%
Neglect	17	17%	12	16%	12	11%
Physical - Assault/Battery	10	10%	9	12%	10	9%
Financial - Real Estate	10	10%	9	12%	9	8%
Isolation	0	0%	1	1%	5	5%
TOTAL	102		76		108	

Elder abuse is any form of mistreatment that results in harm or the threat of harm to the health and/or welfare of an elder. The different types of abuse identified in SFEAFC are financial abuse, isolation, physical abuse, psychological/emotional abuse, neglect, self-neglect, and other/unknown abuses. As of FY10-11, the Other/Unknown category has been broken down further to include abandonment, abduction, chemical restraint, constraint or deprivation, sexual abuse, and undue influence. SFEAFC is currently collaborating on the development of a more advanced database system that will allow for more expansive reporting and hopes to start using it by the end of 2012.

San Francisco Elder Abuse Forensic Center Statistics Number of Evaluations Per Fiscal Year ¹⁹ , FY2007-2011						
	Evaluations Requested		Evaluations Completed		Evaluations Cancelled	
	Medical	Psychological	Medical	Psychological	Medical	Psychological
FY07-08	0	23	0	15	0	8
FY08-09	11	25	10	17	1	8
FY09-10	5	24	4	20	1	4
FY10-11	7	30	6	24	1	6

San Francisco Elder Abuse Forensic Center Statistics New Cases of Elder Abuse by Zip Code, FY2008-2011					
Zip Code	Neighborhood	FY08-09	FY09-10	FY10-11	
94109	Nob Hill/Russian Hill	2	5	10	
94122	Inner Sunset	2	4	7	
94124	Bayview	8	2	5	
94110	Mission	0	3	3	
94103	SOMA	0	2	3	
94115	Pacific Heights/Western Addition/Japantown	6	3	2	
94112	Ingleside/Excelsior	7	2	2	
94134	Visitacion Valley	2	2	2	
94121	Outer Richmond	4	1	2	
94118	Inner Richmond	4	0	2	
94102	Hayes Valley/Tenderloin	0	2	1	
94116	Outer Sunset	2	1	1	
94117	Haight/Cole Valley	2	0	1	
94132	Lake Merced	2	0	1	
94108	Chinatown	0	0	1	
94131	Twin Peaks/Glen Park	3	2	0	
94127	West Portal	1	1	0	
94107	Potrero Hill	0	1	0	
94123	Marina/Cow Hollow	3	0	0	
94114	Castro/Noe Valley	2	0	0	
94133	North Beach/Fisherman's Wharf	1	0	0	
Unknown		2	1	1	
	TOTAL	53	32	44	

¹⁹ The category "medical" includes both physical evaluations and medical record evaluations combined.

MISSING PIECES

Victims of family violence seek help and access services in many ways beyond those included in this report. The data contained in this report is meant to provide a broad overview of the scope of family violence in San Francisco. It does not, and cannot, include data from every agency and service that these individuals may come into contact with. In the future, the Council hopes to include information from additional sources to help fill in some of the gaps that remain among the included data.

In addition to the criminal justice response information included in this report, the San Francisco Sheriff's Department operates the Resolve to Stop the Violence Project (RSVP). RSVP is a survivor-centered program based on a restorative justice model. The goals of the program include empowering victims of violence, reducing recidivism among violent offenders, and restoring individuals and communities through community involvement and support in order to prevent future violence. The Council hopes to include information from this, as well as other programs of the Sheriff's Department, in future reports.

There are also other legal avenues for family violence cases in addition to the criminal justice proceedings outlined in this report. For example, cases of elder financial abuse may come under the jurisdiction of the Probate Court, and cases of child abuse fall under the jurisdiction of the Dependency Court. While these Civil Court statistics may overlap with those of the Criminal Court that are already included, there are some victims that choose to only pursue civil remedies. This data is currently not captured within the scope of this report.

As noted previously, the medical professionals of the Department of Public Health (DPH) often serve as "first responders" to victims of family violence. There are innumerable medical access points within, as well as beyond, the DPH system that can provide considerable information on help-seeking by these victims of violence. The new electronic medical records system will facilitate screening for domestic violence throughout the DPH hospital and clinic system, and capturing this data will provide some indication of the prevalence of domestic violence among DPH patients.

Additional community based organizations that are not included in this report also provide services to victims of family violence through the course of their work. Family Resource Centers and other family-focused programs in the community, particularly those serving families with children, may not be specifically designed to provide services to victim of family violence. However, advocates at these agencies are likely to be access points for victims and to provide services on an ad hoc basis, by way of the trusting relationships they often develop with their clients. It is important to identify these sites and agencies that can intervene in families where children are exposed to parental domestic violence, as exposed children are at increased risk for becoming involved in future violent relationships.

Identifying these information gaps further demonstrates the pervasiveness and complexity of the issue of family violence. However, despite these and other missing pieces, this report is able to provide a broad overview for policy makers and advocates to use in assisting victims of family violence in San Francisco.

STATISTICAL SUMMARY

2010 U.S. Census Bureau	
San Francisco	Population Count
Children Ages 0-17 years	107,524
Adults Ages 18-64 years	587,869
Older Adults 65 years and older	109,842
TOTAL San Francisco Population	805,235

Selected Family Violence Statistics in Summary FY2010-2011			
	Child Abuse	Domestic Violence	Elder Abuse
Calls Received by Community Providers ²⁰	18,422	28,090	N/A
Calls Received by CPS, 911, and APS	6,048	7,510	5,890
Cases Substantiated by CPS and APS	659	N/A	2,065
Requests for TROs from Family and Probate Courts	N/A	1,369	37
Cases Received and Assessed by SFPD	545	3,982	512
Cases Investigated by SFPD	492	1,569	206
Cases Received by District Attorney's Office	170	2,066	100
Cases Filed by District Attorney's Office	70	597	35
Convictions by Guilty Plea	45	502	29
Cases Brought to Trial	7	18	2
Convictions After Trial	4	13	1

²⁰ Call volumes were provided by TALK Line (child abuse) and domestic violence providers (domestic violence hotlines). There is presently no dedicated community-based hotline for elder abuse prevention.

CONCLUSIONS AND RECOMMENDATIONS

The statistics and information provided in this report demonstrate that family violence is a significant and pervasive problem affecting thousands of San Francisco residents. Child abuse, domestic violence, and elder and dependent adult abuse are inter-related. In many families, more than one type of family violence occurs simultaneously. For example, it is estimated that 30-60% of families with domestic violence also has child abuse. Children exposed to parental domestic violence experience significant trauma and are at increased risk for future victimization or perpetration of violence. Children who are physically abused are at increased risk of committing violent crimes later in life, including community or gang violence. Seniors experience domestic violence in addition to other forms of abuse. And, finally, abuse is "passed down" from one generation to the next. It is imperative that we examine and strengthen all of the systems of support and intervention discussed in this report and these recommendations. Through collaborative policy and program improvement efforts we can improve the safety of all San Franciscans now and in the future.

Summary of Recommendations

Based on the report findings and discussions, the Family Violence Council has the following recommendations:

1. The Family Violence Council recommends the enhancement of data by exploring new data collection from the Sheriff's Department and the San Francisco Unified School District for future reports.
2. The Family Violence Council recommends the development of a data collection plan and the collection of data on intimate partner and family violence screenings and diagnosis rates at the San Francisco General Hospital and the San Francisco Department of Public Health community clinics.
3. The Family Violence Council recommends the Department of Emergency Management provide monthly statistics on the number of domestic violence calls by district and by DV call codes to the Department on the Status of Women.
4. The Family Violence Council recommends joint trainings for 911 dispatchers by child abuse, domestic violence, and elder abuse experts and advocates.
5. The San Francisco Unified School District should work with the Family Violence Council to develop a one-page factsheet on how to recognize signs of family violence and how to report family violence to the appropriate authorities.
6. The Family Violence Council recommends a joint outreach campaign on all forms of family violence including child abuse, domestic violence, and elder abuse.
7. The Family Violence Council recommends the continued support of a multidisciplinary response to family violence in San Francisco.
8. The Family Violence Council recommends the creation of a victim/survivor program within the San Francisco Adult Probation Department that will work collaboratively with other city and county department survivor/victim services which includes, but is not limited to, the Sheriff Department's Survivor Restoration Program and the District Attorney's Office of Victim Services.
9. The Family Violence Council recommends the collaboration between the District Attorney Victim Services and SafeStart to provide counseling to youth who witness violence in the home.

CONCLUSION A: Data collection is crucial in understanding the full extent of family violence in San Francisco. As departments collect additional data regarding their clients, those additional data should be included in future reports for a more comprehensive assessment of the prevalence and impact of family violence in San Francisco.

RECOMMENDATION 1: The Family Violence Council recommends the enhancement of data by exploring new data collection from the Sheriff's Department and the San Francisco Unified School District for future reports.

- The Sheriff's Department should provide the Family Violence Council with data it currently collects related to family violence and information related to how the state's realignment plan impacts the Sheriff's Department.
- The San Francisco Unified School District should provide the Family Violence Council with comprehensive data from its Youth Risk Behavior Survey and other data captured such as child abuse reporting by school personnel.

RECOMMENDATION 2: The Family Violence Council recommends the development of a data collection plan and the collection of data on intimate partner and family violence screenings and diagnosis rates at the San Francisco General Hospital and the San Francisco Department of Public Health (SFDPH) community clinics.

- By the end of 2013, SFDPH will have developed a data collection plan that identifies current and potential future sources of electronically accessible data on intimate partner and family violence within SFDPH clinical sites.
- In 2014, SFDPH will generate a first annual report of the prevalence of intimate partner and family violence screening and diagnosis rates in SFDPH clinical settings.

RECOMMENDATION 3: The Family Violence Council recommends the Department of Emergency Management provide monthly statistics on the number of domestic violence calls by district and by DV call codes to the Department on the Status of Women.

- DEM's Division of Emergency Communications should provide the Department on the Status of Women (DOSW) a month-by-month breakdown of the number of domestic violence calls to 911 broken down by district and by call codes on a monthly basis.
- At the end of each fiscal year, DEM's Division of Emergency Communications should provide DOSW a fiscal year-end summary of the total number of domestic violence calls to 911 by district and by call codes.

CONTEXT: The *Comprehensive Report on Family Violence in San Francisco* captures the full extent of known available data that departments and agencies are currently collecting for their reporting and performance purposes. During the process of reviewing the data in this report and information gathered from other meetings, the Family Violence Council realized that there are data currently being captured that are relevant and should be included in this report. There are other data that are not being collected but are needed in order to understand the full impact of family violence in San Francisco.

Sheriff's Department: The discussion of the potential impact of the state's realignment plan brought to the Council's attention that, although the Sheriff's Department is a member of the Council, there has been no information or data on family violence offenders from the Sheriff's Department. For future reports, the Council would like to include statistics regarding inmates and/or parolees charged with any type of family violence. Also, the Council would like to see how realignment has impacted the office, programs, and services related to family violence prevention. At a minimum, data from the Sheriff's RSVP program should be included in the next report.

San Francisco Unified School District: Teachers, staff, and administrators in schools are uniquely positioned to have close, daily interaction with students outside the home. Consequently, schools are the largest reporters of child abuse. Schools are also ideal places to capture student data on bullying, dating violence, and other matters related to family and relationship violence. The recommendation to include more information from data captured by the school district will allow the Council to obtain a better understanding of the types of violence school children face and to collaboratively develop and promote violence prevention efforts. Focusing attention on childhood exposure to family and dating violence will help to prevent future family violence.

San Francisco Department of Public Health: Many survivors of intimate partner and family violence present to a healthcare provider before utilizing violence-specific community, law enforcement, or legal services. Intimate partner violence (IPV) can result in lethal and non-lethal injuries, illness, excess healthcare utilization and increased healthcare costs. IPV is a health equity issue that disproportionately affects underserved communities in San Francisco. IPV is also associated with an increased risk of many of the most prevalent diseases and diagnoses that are identified upon admission to the San Francisco General Hospital (SFGH) or during visits to the SFGH Emergency Department and outpatient clinics. In addition, exposure to family violence as a child is associated with poor health outcomes in both childhood and adulthood. SFDPH has been providing data from its Trauma Recovery Center, Child and Adolescent Sexual Abuse Resource Center, and the Child Trauma Research Project, SFDPH is implementing an electronic medical record system that will allow it to capture data from the hospital and clinics to allow for a more complete understanding and analysis of family violence in San Francisco.

San Francisco Department of Emergency Management: The month-to-month 911 call statistics on domestic violence will allow the Department on the Status of Women and the Family Violence Council to analyze and monitor the rate and types of domestic violence taking place in San Francisco on an ongoing basis.

CONCLUSION B: Training is the keystone to improving the ability of professionals to recognize family violence and provide individuals experiencing family violence with life-saving information and assistance.

RECOMMENDATION 4: The Family Violence Council recommends joint trainings for 911 dispatchers by child abuse, domestic violence, and elder abuse experts and advocates.

- The Department of Emergency Management should coordinate, at a minimum, a yearly training on child abuse, domestic violence, and elder abuse for its 911 dispatchers.
- In FY12-13, all 911 dispatchers would have been trained on child abuse, domestic violence, and elder abuse.

RECOMMENDATION 5: The San Francisco Unified School District should work with the Family Violence Council to develop a one-page factsheet on how to recognize signs of family violence and how to report family violence to the appropriate authorities.

- By the end of FY12-13, the San Francisco Unified School District should have developed a factsheet on how to recognize signs of family violence and how to report family violence to the appropriate authorities.
- When complete, all school district personnel – teachers, administrators, and other staff – should be given a factsheet and informed of their role as mandated reporters of child abuse and neglect per State law.

CONTEXT: The Family Violence Council recognizes and lauds City Departments that have incorporated training programs that enable staff to provide better and more knowledgeable customer service to the public. To ensure that Departments are even better equipped to handle cases and situations involving family violence, the Council recommends a joint training program for 911 dispatchers and improved education for school personnel about their role as mandated reporters of child abuse and neglect.

Department of Emergency Management. The Department of Emergency Management has done an excellent job of training its 911 dispatchers to identify and accurately code calls according to call type. Trainers that Council members have spoken to have indicated how impressed they were with the 911 dispatchers' knowledge of the many codes associated with family violence. Although trainings have been provided on various family violence topics, it will be most efficient and effective to have experts from all three disciplines – child abuse, domestic violence, and elder abuse – conduct a joint training so 911 dispatchers can better grasp the subtle differences among the different types of family violence.

San Francisco Unified School District. Most children spend the majority of their time in both the home and school. Children who are exposed to family violence (direct child abuse or exposure to other family violence) may not understand that family violence is not an acceptable norm and that help is available. Children may be frightened to ask for help and unsure of how to do this. A victimized parent is also often too frightened or otherwise unable to access assistance from authorities. Teachers, staff, and administrators at schools are in an ideal position to recognize signs that a child may be experiencing family violence and access assistance for the child. Teachers, staff, and administrators are also mandated child abuse reporters.

CONCLUSION C: Collaborative efforts among different providers and stakeholders often yield the best results.

RECOMMENDATION 6: The Family Violence Council recommends a joint outreach campaign on all forms of family violence including child abuse, domestic violence, and elder abuse.

- The Family Violence Council should coordinate child abuse, domestic violence, and elder abuse service providers in community agencies and City Departments to develop a joint Family Violence Outreach Campaign that addresses all forms of family violence across the lifespan.
- The San Francisco Child Abuse Prevention Center's Children's Advocacy Center, the Domestic Violence Consortium, and the San Francisco Elder Abuse Forensic Center should identify a liaison to work with the Family Violence Council on the joint family violence campaign.
- The Family Violence Joint Outreach Campaign Committee should unveil an outreach plan to the Family Violence Council for feedback and implementation. All Council Members are encouraged to assist with this effort.

RECOMMENDATION 7: The Family Violence Council recommends the continued support of a multidisciplinary response to family violence in San Francisco.

- The multidisciplinary response to family violence among city and community agencies has provided a more nuanced and productive discussion on how to address and prevent family violence. This multidisciplinary response has resulted in programs that meet the unique and specific needs of the residents of San Francisco.
- The leadership provided by the San Francisco Child Abuse Prevention Center's Children's Advocacy Center, the Domestic Violence network, and the San Francisco Elder Abuse Forensic Center should be supported and recognized for their tireless efforts in advocating for the successful multidisciplinary approach to addressing family violence in San Francisco.

RECOMMENDATION 8: The Family Violence Council recommends the creation of a victim/survivor program within the San Francisco Adult Probation Department that will work collaboratively with other city and county department survivor/victim services which includes, but is not limited to, the Sheriff Department's Survivor Restoration Program and the District Attorney's Office of Victim Services.

- This important collaboration will enhance and expand current services for victims of crime in San Francisco by establishing a victim/survivor program under the Adult Probation Department.
- The proposed program will build on the work of the District Attorney's Office of Victim Services and the Sheriff Department's Survivor Restoration Program by providing survivor services to new populations including victims of probationers and other "justice involved" victims such as incarcerated victims.
- The program will serve both male and female victims with appropriate "trauma-informed" care.

RECOMMENDATION 9: The Family Violence Council recommends the collaboration between the District Attorney Victim Services and SafeStart to provide counseling to youth who witness violence in the home.

- The Collaboration will allow for the training of SafeStart advocates in assisting minor witnesses to fill out applications for the state victim compensation program to pay for therapy.

CONTEXT: Family Violence is a pervasive issue that affects people from all walks of life across the lifespan. Many efforts have been made to raise awareness of the different types of family violence: April is National Child Abuse Prevention Month, May is Elder Abuse Awareness Month in San Francisco, and October is National Domestic Violence Awareness Month. Working together, the Family Violence Council hopes to leverage these efforts and expand awareness about the pervasiveness of family violence across the lifespan. The Family Violence Council aspires to recognize and support the leaders who are striving to end family violence in San Francisco.

In the coming year, we anticipate some impact from California's Criminal Justice Realignment (California Assembly Bill 109) which went into effect on October 1, 2011. This legislation, often known as the "Corrections Realignment Plan" or simply "Realignment," shifts the responsibility of correctional custody and supervisory of lower-level felony offenders (e.g., non-violent, non-serious, and non-sex offenders) from the state to individual counties. All new lower-level felony offenders who would have previously served time in a state prison will now serve time in county jails.

Because San Francisco is both a city and a county, realignment could impact the data captured for the 2012 report. Although none of the new offenders being sent to county jail will be currently incarcerated for domestic violence, some will have been convicted of domestic violence previously. This may or may not result in an uptick of the number of domestic violence offenders captured in the data for next year's report.

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The following contributors have been invaluable to us:

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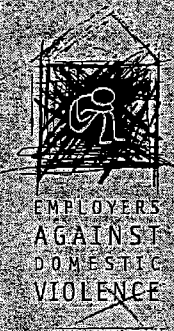
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**How Employees Who Batter
Affect the Workplace**
An Employers Against
Domestic Violence Initiative

Executive Summary

It's widely known that domestic violence affects the abuser quite differently than the victim. Less widely known is the one similar result — poor job performance. Therefore, it's important that employers understand their liabilities, as well as their options to create policies to protect everyone involved. However, the first things to understand are the specific ways employees who batter can affect the workplace.

BACKGROUND

Employers Against Domestic Violence (EADV) is an organization of Massachusetts-based employers who recognize that domestic violence is an important workplace issue. EADV raises awareness among employers about the impact of domestic violence in the workplace and helps them respond by developing resources and models for prevention, education, and outreach.

In 2001, EADV conducted four focus groups with a combined total of 29 convicted male domestic violence offenders. Participants were chosen from four certified batterer intervention programs in Massachusetts. Their professions ranged from managers to craftsmen, with the majority of the sample representing the latter.

THE GOAL WAS TO INVESTIGATE THE FOLLOWING QUESTIONS:

- How do employers respond to domestic violence offenders?
- How do employees who batter detract from productivity?
- How do abusers use workplace resources to abuse their victims?
- What did abusers think employers do for and about them?
- What mediums and messages are likely to inspire abusers to seek help?

SUMMARY OF FINDINGS

- * Several abusers made costly and dangerous mistakes on the job as a result of perpetrating domestic violence.
- * Most abusers used company phones, e-mail, and vehicles in order to perpetrate domestic violence.
- * Most abusers used paid work time in order to attend court for matters relating to their perpetration of domestic violence.
- * Most employers expressed support for the abuser, but few expressed concern for the victim.
- * 10% of employers posted bail for abusers or granted them paid leaves of absences for court dates related to domestic violence.
- * According to focus group participants, "zero-tolerance" policies can endanger victims of domestic violence because many abusers would blame and punish the victim for the company's action.
- * Abusers stated that they could benefit from information on domestic violence and referrals for batterer intervention made available through the workplace.
- * When asked to respond to an assortment of domestic violence prevention posters, abusers agreed that those depicting children who witness domestic violence were the most affecting.

LIMITATIONS

The findings of this pilot study were limited by several factors. The sample size was small. All data was self-reported. All participants were drawn from a pool of certified batterer intervention program clients, which doesn't represent all batterers. Selection bias is a potential threat to validity, as all participants volunteered for enrollment. However, this threat is considered minimal because those who participated in the pilot study appear demographically and characteristically similar to the general population of batterer intervention program attendees.



HOW DO EMPLOYERS RESPOND TO DOMESTIC VIOLENCE OFFENDERS?

Findings

- Supervisors were often sympathetic to abusers, rarely penalizing them and at times posting bail for them.
- Supervisors reprimanded abusers only for the substance abuse that went along with it. They rarely addressed the violence directly.

Observations

Almost all participants indicated that they told their supervisors about their acts of violence. The abusers had either been forced (due to incarceration) or had chosen to admit the details. Of those abusers who admitted their acts, almost all said their supervisors were sympathetic to them, and were concerned about their welfare. Three participants reported that their supervisors had personally posted bail when they were arrested.

Participants admitted they were rarely, if ever, penalized or docked vacation or personal days for leaving work early or missing days in order to attend court dates. Some were given paid leave. Most were assured of job stability, even if they were sentenced to serve up to six months in prison. One participant explained, "I missed four weeks of full-time work, spread out over five months. I got paid for most of that time."

Only three participants said that their supervisors refused to post bail or give them time off, and two other participants explained that they were fired as a direct result of their domestic violence offenses. Several participants revealed that their supervisors confronted them when they were arrested only to sternly advise them to refrain from substance abuse. In two cases, supervisors threatened them with a loss of employment if they began drinking again. The reproaches did not touch on the violence.

Repeatedly, and in a variety of ways, each focus group was asked the extent to which supervisors expressed concern for the victims of their violence. Only one participant was able to recall any comments of this nature. Some employers even blamed or expressed antipathy toward victims. In the words of one participant, "They said she probably got what she deserved."



HOW DO EMPLOYEES WHO BATTER DETRACT FROM PRODUCTIVITY?

Findings

- Participants missed work due to court proceedings, incarceration, and other activities directly related to their perpetration.
- Participants made dangerous and expensive mistakes on the job because they were distracted by their abusive relationships.

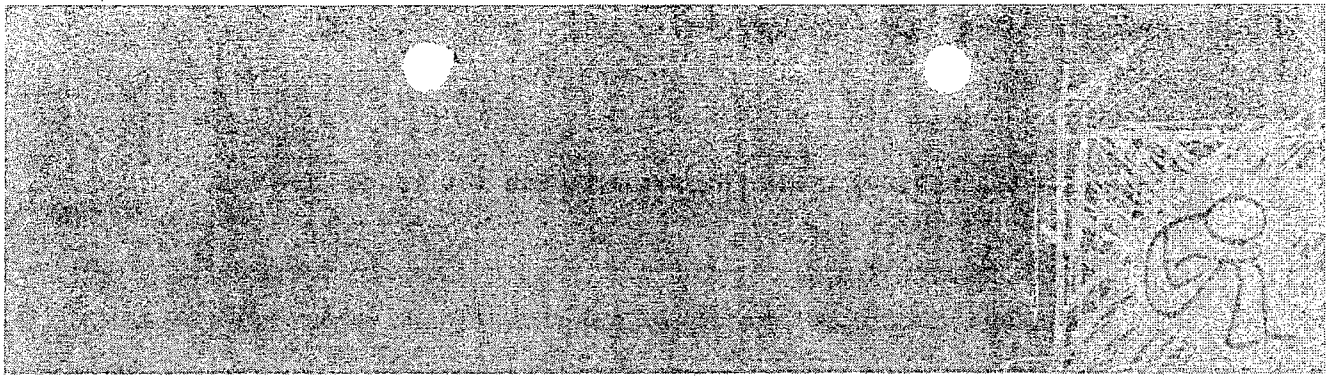
Observations

On average, participants tended to miss approximately seven business days for court activities related to their perpetration of violence. In addition, several participants had been incarcerated for periods that ranged from one night to six months and their job position had been “held” for them while they were in jail or prison. Some participants indicated that they never missed an entire work day due to their violence perpetration, but missed between 20–25 hours (roughly three business days) per month for an extended period of time as a direct result of their violence perpetration. Subjects in this sample often missed weeks — in some cases months — of work.

While one original intent of this study was to investigate the extent to which perpetrators’ absences from work reduced productivity, there was an unanticipated finding: Many employees who batter endure emotional distress or distraction due to their behavior, which can also create significant costs for employers.

Almost all participants acknowledged that they made mistakes due to this type of emotional distress. Some were distracted because they were worried about going to prison, others were bothered by shame and guilt because of the way they treated their intimate partners, and still others were affected by depression due to the separation from their children — which made it difficult to concentrate on work.

One example of this was given by a participant who is a tree removal specialist. He said that, because of his emotional distress, he almost killed a co-worker. “I was up there, just doing my thing, and not thinking about the people in the group. I was thinking about the whole [domestic violence] situation. I took the top off. It came pretty close to a guy I work with.”



HOW DO ABUSERS USE WORKPLACE RESOURCES TO ABUSE THEIR VICTIMS?

Findings

- * Abusers use large quantities of company time and resources to monitor their partners — including phones, e-mail, vehicles, and even other employees.

Observations

According to the focus group participants, perpetrators of domestic violence not only decrease productivity by missing work or making errors on the job, but also by using work time to “monitor” their victims. Abusers contact their victims often, to be certain of where they are at all times. This is so they can “catch” victims doing something they have been forbidden to do, or so they can determine who victims can spend time with. One participant described his monitoring in the following way:

“I would call her to see if she’s at home. How many times she would be on the phone calling whoever and how long she was on the phone with each person and how long it took her to answer the phone. ‘How come you were on the phone with your friends? Are they more important than me? Huh? F--- your damn friends, huh?’ She would be on the other end of the phone and like if the phone rings three times and all of a sudden she clicks in... I [knew she was talking to someone else]. I would use my [work] phone to do that probably four times a day.”

Almost all participants in these focus groups who had access to a company phone admitted to using it for “checking up on” their victims during the workday. Participants who didn’t have access to a company phone were likely to use cell phones or pay phones in order to check up on their victims. Several participants whose work involves driving a vehicle admitted to using the company vehicle in order to stop at their victims’ homes and check on them during the day. One participant stated that he had a co-worker check on a victim for him during work hours.



WHAT DID ABUSERS THINK EMPLOYERS DO FOR AND ABOUT THEM?

Findings

- * Many participants felt that “zero tolerance” policies would actually endanger victims because many abusers would blame and punish the victims for the companies’ actions..
- * Many participants explained that changing their behavior requires education, and suggested confidential counseling as a solution.
- * Many participants suggested “prevention-oriented” policies, explaining that domestic violence policies should be outlined during new-hire orientation and that education sessions should be available to all employees regularly.

Observations

Zero Tolerance — Not all participants agreed that zero tolerance policies (one strike and you’re out) would be effective at preventing domestic violence. The majority of participants agreed that they might “think twice” about committing violence if they knew their jobs were at stake. However, several mentioned that the threat of going to jail (and losing one’s job) isn’t enough to deter many perpetrators, and therefore would not protect victims. Some participants expressed a concern that zero tolerance policies could actually endanger victims. They reported that batterers who get fired because of their violence are likely to blame — and therefore punish — their victims. The participants went on to say that batterers’ loss of income and ensuing depression would make them even more dangerous.

Participants also argued that firing employees because of their violence perpetration meant only that they would find employment elsewhere and remain fundamentally unchanged as individuals. A few participants suggested a possible “middle ground” policy such as suspension for the first offense and termination if the employee in question didn’t participate in counseling or intervention.

Counseling and Referrals — Individuals in the focus groups said they would respond positively to policies that guard their confidentiality and provide them with information and referrals for counseling intervention. As they explained, changing abusers’ behavior requires education about what constitutes abuse, about alternatives to violence, and about victim safety. Participants also expressed interest in examining their own history as both victims and perpetrators of abuse.

Prevention — At the participants’ most recent workplaces, only four (14%) of them were informed of domestic violence policies when they were hired. Participants stated that companies should clearly explain domestic violence policies and consequences during new-hire orientation.

Each participant had a suggestion on how to provide all employees with monthly or annual domestic violence education sessions. They all agreed that the program would work best if it included both men and women, and featured videos to help the participants recognize behaviors in themselves. One financial broker explained, “Once a year we have to go to ‘Ethics,’ which explains to us how we can trade, what we can trade. We have to get that clear. They should have the same thing on domestic violence.”

Participants highlighted that many employers may be unaware of what constitutes domestic violence, and they pointed out that employers will not be effective at screening, referring, or penalizing employees until they recognize domestic violence and are trained how to respond. Two participants stated that (regardless of what training or policies were instituted) nothing would make a difference for some abusers.



WHAT MEDIUMS AND MESSAGES ARE LIKELY TO INSPIRE ABUSERS TO SEEK HELP?

Background

As a component of this study, each focus group was asked to review and comment on ten posters designed to raise awareness about domestic violence and prevent further harm.

Findings

- Participants who are fathers stated that posters featuring children with their fathers or suffering because of their abuse were most effective.
- Participants indicated that graphic posters and those which conveyed consequences for perpetrators were highly effective, while abstract posters were least effective.

Observations

Almost all participants who are fathers stated that the posters featuring children with their fathers — or suggesting that abusing women harms children — were the most effective. One participant said, “It reminds me of when I was a little kid and the fact that I’m not able to be around my son. That would either stop me right there in my tracks, the abuse or whatever, or I would — excuse the figure of speech — get my head out of my a-- and go get help.”

The overwhelming majority commented that these posters broke their hearts and would have inspired them to think about their behavior even before they were arrested or had attended any counseling sessions. Other participants felt that graphic posters, such as ones that featured women with blackened eyes or implied serious injury or loss of life, would be the ones most likely to capture their attention.

Posters with a more abstract, artistic, or unspecific message were almost uniformly deemed unlikely to be effective by the participants. For example, there was a poster that presented a ticking time-bomb with the caption “Honey, I’m home” beneath it, which was unappealing to participants without exception. Across groups, the perpetrators felt that this poster minimized domestic violence by making light of it. They suggested it would not discourage any abuser from committing violence, and some even said it might encourage them to laugh at the universality of abuse.

Several participants felt posters featuring the effects of violence on women were unlikely to make any abuser seek counseling. They suggested posters featuring the consequences of violence for the perpetrator would work better — consequences such as jail, inability to spend time with their children, or the loss of their home or job.

CONCLUSION

This pilot study raises questions about how batterers may use workplace resources to harm victims, and how this behavior affects their employers. The findings indicate that abusers may find it difficult to keep their problems from affecting their job performance. Employers concerned about the negative effects of domestic violence perpetration on workplace productivity should respond with policies and intervention strategies that will help abusers change their behavior.

We believe that these results will inspire employers to join us as we continue to research the effects of domestic violence on the workplace and continue to protect victims of abuse.

Employee Assistance Program (EAP)

2/10/12



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- Violence prevention
- Behavioral health referrals

Confidential, voluntary EAP services are available to City & County of San Francisco employees, their family members and significant others. Most of our services are free.

Health Service System

CITY & COUNTY OF SAN FRANCISCO

Employee Assistance Program: Counseling, Consu

What EAP Does

EAP provides confidential, voluntary, no-cost behavioral health services to City & County of San Francisco employees and their family members. EAP is staffed by licensed, experienced therapists.

Our services include:

- Short-term, solution-oriented counseling for individuals, couples and families
- Supervisory consultation
- Group workshops
- Critical incident debriefing and trauma response
- Mediation and conflict resolution
- Violence prevention
- Resources and referrals

According to California state law, the interactions you have with EAP are completely confidential. (The only exceptions are if a life is in danger or a child is being abused.)

Individual Counseling: Watch for Early Warning Signs

Everyone has a time when challenges at work or in our personal lives become difficult to cope with. Emotional stress can have a significant negative impact on physical health, family and social relationships and work performance. Consider making an appointment with EAP if you are experiencing these early warning signs:

- Difficulty sleeping
- Increased anger, anxiety, or panic attacks
- Chronic sadness or depression
- Inability to concentrate

- Feeling overwhelmed or isolated
- Escalating conflicts with family, friends, or co-workers
- Overeating, or lack of appetite
- Reliance on alcohol and/or drugs

Your first appointment with an EAP counselor usually takes place within 48 hours. EAP provides free short-term counseling; you may access up to six EAP sessions per year. If you need additional services, your EAP counselor will assist you in taking advantage of behavioral health benefits, including those covered by your medical plan.

Group Workshops: Tools for Navigating Life Challenges

Life changes, whether positive or negative, require us to adapt and expand our coping and communication skills. Free EAP group workshops offer City employees the opportunity to share, learn and grow, with the goal of becoming more flexible and knowledgeable individuals at all stages of life. Typical EAP workshops include:

- Active Parenting (ages 2-12 and teens)
- Managing Anger Effectively
- Dealing With Difficult People
- Bullying in the Workplace
- Managing Emotions
- Handling Holiday Stress
- Smoking Cessation
- Advancing Your Supervisory Skills
- Creating a Meaningful Retirement

For a calendar of EAP group workshops, visit myhss.org/events/seminars.html.

Mediation and Workshops

Critical Incident Debriefing and Trauma Response

Even emotionally resilient people may experience strong reactions when exposed to traumatic events, such as a death in the line of duty or a co-worker's suicide. EAP critical incident debriefing and trauma response helps support people as they process complex emotions. It also assists in a quicker return to regular routine, and reduces the likelihood of post-traumatic stress disorder. Debriefing allows the individual or group to talk about the experience and how it has affected them, offers healthy coping strategies and provides information about other behavioral health services that are available. Debriefing typically takes place within 72 hours of the critical incident. There is no cost for this service. Please call EAP immediately if an individual or team in your department can benefit from Critical Incident Debriefing.

Mediation/Conflict Resolution

Mediation takes place when a neutral party works with conflicting individuals to encourage reconciliation and compromise. EAP typically provides mediation services to help resolve conflicts between co-workers, or a manager and employee. The EAP mediator will help the individuals involved develop a shared understanding and work together to identify potential solutions. There is no cost for EAP mediation services. Please call EAP to schedule.

Violence Prevention for City Employees Who Work With the Public

EAP provides a Non-Violent Crisis Intervention training for City employees who may come into contact with disruptive or potentially violent members of the public. The workshop teaches proven techniques for the prevention and safe management of disruptive or threatening behavior. It increases confidence and effectiveness in handling potentially dangerous situations, and reduces the risk of injury and liability. Hands-on exercises offer practice in defusing an explosive situation by reacting appropriately to early warning signs. There is a \$100 per person fee for this full-day workshop, which includes training materials. Call EAP for upcoming dates.

Behavioral Health Resources and Referrals

You do not need to receive counseling from EAP to benefit from our services. EAP has a lending library of resources for self-learning on a wide variety of behavioral health topics. EAP can also offer support and advice on how to access behavioral health services, including therapists, counseling and residential rehabilitation for alcohol or chemical dependency, offered through your medical plan or community agencies. EAP encourages you to take advantage of these benefits as needed, so you can stay healthy and stress-free at work and in your personal life.

Contact EAP: (800) 795-2351

Questions?

EAP is here for City & County employees.

Call to schedule an appointment:
(800) 795-2351

EAP appointments are available
8:00AM-5:00PM
Monday through Friday

EAP office location:
1145 Market Street
2nd Floor
San Francisco, CA 94103

The EAP office is easily accessible
by public transportation:

BART: Civic Center station
MUNI streetcar: F line to Civic Center
MUNI Metro train: Take the J, K, L, M,
N, T or S train to Civic Center
MUNI bus: 5, 6, 9, 14, 19, 21, 71

HSS website:
www.myhss.org

1145 MARKET STREET
2ND FLOOR
SAN FRANCISCO, CA 94103

Health Service System

CITY & COUNTY OF SAN FRANCISCO

Print Form

Introduction Form

By a Member of the Board of Supervisors or the Mayor

Time stamp
or meeting date

I hereby submit the following item for introduction (select only one):

- 1. For reference to Committee:
- An ordinance, resolution, motion, or charter amendment.
- 2. Request for next printed agenda without reference to Committee.
- 3. Request for hearing on a subject matter at Committee:
- 4. Request for letter beginning "Supervisor inquires"
- 5. City Attorney request.
- 6. Call File No. from Committee.
- 7. Budget Analyst request (attach written motion).
- 8. Substitute Legislation File No.
- 9. Request for Closed Session (attach written motion).
- 10. Board to Sit as A Committee of the Whole.
- 11. Question(s) submitted for Mayoral Appearance before the BOS on

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:


- Small Business Commission
- Youth Commission
- Ethics Commission
- Planning Commission
- Building Inspection Commission

Note: For the Imperative Agenda (a resolution not on the printed agenda), use a different form.

Sponsor(s):

Subject:

The text is listed below or attached:

Signature of Sponsoring Supervisor: 

For Clerk's Use Only:

Print Form

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