



HOPE LIVES HERE **2022**

Impact of the Family Peace Center

Erin Schubert, PhD; Liz Marquardt; Hillary Petska, MD; Carmen Pitre; Lynn Sheets, MD; Carla Washington
*Supported by Zilber Family Foundation and Advancing a Healthier Wisconsin
Endowment at the Medical College of Wisconsin*

Printing courtesy of: the Brewers Community Foundation



SOJOURNER



Table of Contents

04

Introduction

06

Benefits & Challenges of the FJC Model

20

Community Trends

30

Future Directions

34

Outcomes & Evaluation Committee
and Contact Information

Printing courtesy of:



Holistically responding to the needs of family violence survivors requires multi-disciplinary collaboration. Following decades of cross-agency partnership, planning, and dedication to addressing family violence in Milwaukee, the Family Peace Center (FPC) opened its doors in 2015 to meet various needs of families impacted by violence in a single facility.

The Family Peace Center (FPC) follows the nationally recognized Family Justice Center (FJC) model that was designed to effectively respond to families who have experienced violence with a multi-disciplinary, co-location approach. Co-located partner agencies operating from the FPC include the domestic violence service agency **Sojourner**, Children's Wisconsin programs including the **Behavioral Health Clinic** providing mental and behavioral health therapy to children, the **Milwaukee Child Advocacy Center** serving victims of child maltreatment, **Project Ujima** serving victims of community violence, and **Children's**

WI Community Health, the **Sensitive Crimes Division of the Milwaukee Police Department**, the **Domestic Violence Unit of the Milwaukee County District Attorney's Office**, **Advocate Aurora Health** providing a health navigator connecting clients to healthcare options as well as care for sexual assault survivors, **Core El Centro** offering alternative wellness services like massage and acupuncture to survivors, **Jewish Family Services** providing therapy and counseling for adult survivors, **Goodwill of Southeastern Wisconsin** connecting survivors to job and career resources, **Milwaukee Public Schools Homeless Education Program** navigating school related issues for child survivors and their families, **Wraparound Milwaukee** providing care coordination and connection to mental and behavioral health resources for children, and **Legal Action of Wisconsin** providing survivors with advice and representation in the civil legal arena.



The overall evaluation strategy at the FPC is designed and executed under the leadership of the Director of Outcomes & Evaluation, Dr. Erin Schubert, in collaboration with all FPC partner agencies. Representatives from each partner agency sit on the FPC Outcomes & Evaluation Committee (see committee membership in Appendix A). Outcomes & Evaluation Committee members meet monthly, since August 2015, to guide evaluation at the FPC. Data collected and analyzed by the Outcomes & Evaluation Committee are used to form data-driven recommendations for partner agencies leadership and other FPC Committees to consider and implement.

Staff Interviews

FPC partner agencies committed to co-locate and work collaboratively with the belief that doing so would allow them to more effectively provide care and healing to individuals and families impacted by violence. To

understand more deeply how the existence of the FPC has changed the way professionals serve survivors, we conducted semi-structured interviews with 32 staff across 13 partner agencies and key community partners not physically co-located but with whom we work in close collaboration; Advocate Aurora Health, Children's Wisconsin's Behavioral Health, Children's Wisconsin's Milwaukee Child Advocacy Center (CAC), Core El Centro, Division of Milwaukee Child Protective Services (DMCPS), Goodwill, Jewish Family Services (JFS), Marquette University Law School, Milwaukee County District Attorney's Office, Milwaukee Police Department (MPD), Milwaukee Public Schools (MPS), Sojourner, and Wraparound Milwaukee. We spoke with staff at each of these agencies who had professional experience at their agency both prior to and after the FPC opening so that they might provide a comparative perspective of the two experiences. We asked staff to consider the way their work changed with the inception of the FPC, both positively and negatively. Interviews were audio recorded and transcribed. Transcriptions were coded for thematic analysis. Themes described below are listed in order of frequency, with the most common themes listed first. Direct quotes from staff interviewed in italics.



Primary Benefits of the FJC Model

Increased access to additional resources & services for clients

The most frequently mentioned benefit was the “one-stop-shop” model which increased clients’ access to services from a single location. This sentiment from staff in Milwaukee echoes the rationale behind the original FJC vision, providing all the services and support a survivor needs to attain safety and healing under one roof. Staff told us,

“Clients have said this place has been a gift. That coming in they didn’t have any idea what they were doing or what to do next and that leaving here they know that they have supports. And they are feeling empowered and feel more supported and have a direction. It decreases stress for families that are going through a lot of stress and they know who they can call and they know that if they come here they can get linked up with services.”

Reflecting on access to critical healing focused resources, staff said,

“Before this building, therapy or any kind of mental health support was such a need. We had some go-tos but nothing like saying we have psychotherapists upstairs. That is probably one of the more valuable referrals and more frequent referrals that advocates make on site.”

“Core El Centro [massage, reiki, & acupuncture provider] has been such a joy to be able to tell a client that those services are available on-site and for free. There’s really almost nothing like that.”



And reflecting on the importance of a “warm handoff” to another service in the same building,

“There have been people that have made it to our shelter that wouldn’t have without being directly connected and warmly handed off. To be in the building and see it’s not a scary place. We struggle when you face a victim and they can’t see the shelter, they struggle a lot with the concept and the desire to even consider it. If they’re already in the building for something else, they’re like ‘Wait, it’s right here in this nice space?!’ So I think there are women who came to shelter that never would have otherwise solely because of that.”



“ Before this building, therapy or any kind of mental health support was such a need. ”



Networking and relationship building amongst professionals

Staff felt the co-located nature of the FPC led to both formal and informal means of networking and building relationship with other professionals.

"I participated in a lot of the programming, going to the conferences, the national Family Justice Center conference, meeting those folks, learning more about FJCs across the country. That was one of my favorite parts, connecting with people and seeing what other people were doing all over the country and picking their brains."

Other staff noted that the benefits of professional networking often extend to clients,

"It's been helpful with the hand off that I may know that advocate because of the different meetings and events that have taken place, I can say in confidence, 'You're in good hands. I've worked with this person.' So for me it feels good to be able to say that. Prior to that, I didn't really know who I was handing families off to."

Better collaboration on cases

Better collaboration on cases that involved multiple partners was a beneficial result of the co-location and relationship building amongst professionals across the diverse partner agencies.

"Collaboration is easier now than before we were in the same building. I mean it was really hard to get on someone's calendar and now when you can just say 'Hey, you wanna pop down to my office?' or you know text him, 'Hey what are you doing right now?' That has been a lot easier."

A quicker connection to other professionals means a quicker connection of clients to the resources they need.

"We've handled the needs on cases much more immediately because partners are right in the building, especially when it involves children who need something. Before, Milwaukee Public Schools often didn't know there had been an issue, even with homicide in the family. There were many examples before where school would say 'Oh little Johnny hasn't been at school for like two weeks and we don't know why.' And then this kid one day shows back up and they don't know what happened. But now they do know and right away."

In addition to more collaboratively staffing cases day to day, the FPC has made easier other innovative multi-sector collaborations like the Domestic Violence High Risk Team.

"I think co-location makes things possible, like the high risk team. It's more possible because it's a big time commitment for partners to participate in high risk teams, so they're more likely to do that now because they're already here. They just have to come down the hall. They don't have to get in the car and drive somewhere, right? On top of sitting in two hour meeting and then going back and doing follow-up work on a case. It's one less step. It's one less thing. So that's where I think it yields more participation."

“ We’ve handled the needs on cases much more immediately because partners are right in the building ”

More trauma-informed, client-centered approach

Not only are professional partners working more collaboratively on cases, but they are doing so with a more trauma-informed, client-centered approach that considers the client as a whole person not just the victim of one acute violent incident. Partner agencies who typically only see clients in crisis are now co-located with other agencies who work long-term with clients on healing post-crisis.

"We have a better understanding because we're more connected to the people we're trying to help. We have a better picture of their circumstances and their full life and the context of the relationships given that we have more engagement from victims as a whole since the FPC opened. Because we now work closer to the community resources they utilize, we have a better understanding of what they go through than what we previously did."

"Attorneys are great people but they were not in the business of advocacy or helping or any of that. I mean they just wanted to roll along. Take the next case, take the next case. So that's why the intake process was established so that we could build a little more of a relationship with the people with whom we would be working long-term as these cases went through the process. It looks very, very different and better now."

Survivors are more than the most recent violent incident that has occurred. They are human beings with fully complex lives and bring that complexity with them entering our doors. Staff reflected that seeing clients as their full selves is easier now that they are co-located with other services that can address other pieces of their lives.

"You have somebody in your office and about this one moment in time but that small piece of the puzzle, and they start kids and what led them to the path lot. People are very complex. There that I've had with people that I partners in the building."

Peaceful, safe, & new building and physical space

Built in 2015, the 72,000 square foot Family Peace Center campus is a beautiful, serene space that provides a feeling of peace and safety to staff and clients alike.

"You want everything to feel right for people when they come into a space including how the environment feels. Some of the spaces we were in before the FPC have been a little older, maybe a little colder. By this being a new facility we've had the opportunity to create the space that we need for clients to feel comfortable. Feeling comfortable means they can feel safe and can begin the work that we need them to begin."

The peaceful, safe feeling of the FPC stands in stark contrast to other spaces survivors had to navigate.

"It's better for victims in that they're not coming in the courthouse. There you see people who are in custody being moved to different court rooms which is sad and depressing and can have a very guilt trippy effect on a victim 'Oh my God, is that what's gonna happen to my abuser?! The guy walking around in the chains?'"

"One of the issues we had [at the old location] was that suspects were coming in the same building as victims and that was really hard. Or suspects were intentionally coming in or their family members were coming into the building. So there was a lot of intimidation with victims right off the bat before they would even come to see us, before we even made a decision about issuing charges. That was really harmful to people. So it was really nice to have this separate location where little to none of that intimidation was able to continue. So that really gave people peace of mind."

"Once you walk in those doors, you just have that sense of this is a safe place, this is a good place. I know I'm going to be taken care of here. And it was great. It was like night and day."

"We didn't have a security system at the other building. We had an alarm system that was only used at night sometimes. But to have a security system and a security agency in place has just been awesome. That made me feel a lot more secure. I didn't realize the difference it would make. We had an encounter where a resident's abuser came to the door, very aggressively, kicking the door and throwing things like he was gonna break the glass and get in but he didn't. As hard as he tried he was unable to get in. So that just made me as a staff person feel a lot more secure here. And one of the other things we were able to do was contact the police upstairs and they came down. So, just their presence in the building made a difference as well."



More clients served and recognition & increased awareness of family violence in the community

The visibility of the Family Peace Center has allowed partners to serve more clients from more diverse populations. The formation of the FPC, from building the large, visible building to the strengthening of relationships between partner agencies, drew significant public and professional awareness to the issue of family violence in Milwaukee.

"It's been incredible to see how we have thrived in this space, how the community has responded. Really seeing the spike in number of folks walking into the center. I know we expected that but it was even higher than the expectation, which was a tribute to the need for us in this bright orange building and eliminate some of the stigma by saying 'We're here for you and we're not hiding.'"

"When I'm out in the community, people know more about the Family Peace Center and what we do now than prior. I just feel like the people know us in a different way and are more familiar. Like if I'm dealing with CPS as an example, they're familiar because the CAC is onsite."

"The whole idea about being a Family Peace Center means that Sojourner's got more exposure and so that meant more opportunities for us to do community education around domestic violence."



Transformation & healing in clients

Many staff reflected on the joy of witnessing genuine transformation in the clients they've served.

"Sometimes we see people who are so battered beyond recognition. But then to see them months or years later in the building with smiles on their faces and they look so different... that is a great experience. So many people came up to me said, 'I want you to know that I'm coming for massage,' or, 'I'm coming for group and my kids are involved in this.' Our agency is a starting point. We are kind of the reason they had to come into the building, whether they were reluctant to be with us or not. But to see them later and to see them more at peace and have more clarity in their relationships and be safe. It's just so heartwarming to see that and to see people grow."

Professional development & training opportunities

A large number and breadth of professional development and training opportunities have been provided to staff across the Family Peace Center. Staff reflected on the value of that professional development by saying,

"When I was [at the old location], I realized they knew absolutely nothing about domestic violence. Which is extremely important because of the calls they are taking and identifying and if they're not identifying what is domestic violence or not asking the right questions, some of those calls get lost and the investigations get lost. Being here at the FPC, I knew we had space to do trainings and I knew who to call. And we brought all of the dispatchers here, in different stages and they said it was one of the best trainings they've ever had and they absolutely loved it."

Use of data & evaluation

Staff appreciated and recognized the importance of the strong evaluative infrastructure at the Family Peace Center providing data that helps inform decision making.

"When we hear about the research and outcomes and the progress we've made, that information sharing is amazing because I don't think other agencies do a good job of letting providers know where we are, what are our marks, where do we want to get to and how are we faring with this. I think the transparency at FPC is great. Here we know if we're doing great or if we're not doing great and where we need to work."

"The availability of some true evaluation and a deep look at outcomes. To me that is actually the biggest impact. Now, at the statewide conference all of the legal aid people from around the state will know, 'Hey there's some actual outcome data.' That's something lawyers don't usually have. People don't do that. It's like, 'I won the case,' or, 'I lost the case.' It is not, 'What is the longer-term outcome? What is working well?' That is not a lawyer thing, but it should be more. And especially when there were naysayers about the project, 'Who knows if this is even effective?' Well, now we do know with actual data."

Primary Challenges of the FJC Model

As a whole, staff provided **many more positive reflections of the ways the FJC has impacted their work than negative.**

However, we intentionally queried staff's perception of challenges as well as benefits to illuminate opportunities to improve the way we serve survivors. Below are the primary themes in staff perception of challenges of the model and their thoughts on how to address some of these challenges.



Need for additional, expanded services

The most often cited challenge mentioned in all but one interview was the need to provide an expanded array of services. Providing support that allows survivors to attain economic self-sufficiency was of paramount concern as many low income clients have suddenly become the sole provider for their household after ending the relationship with their abuser. As such, many staff noted the importance of connecting clients to available benefits designed to support individuals and families living in poverty or provide safe and affordable housing.

"Sometimes our clients are in a predicament where they're dependent on their significant other for money and sometimes they are eligible for W2 or they can change their food share, or whatever it may be. It may be beneficial to have someone on site to help clients access those benefits."

Need to create more collaborative client care

Other staff reflected that simple co-location in the same physical space is not enough. Rather, ensuring innovative and effective ways to collaboratively serve clients takes intentional and ongoing focus.

"In theory we have the right partners in the building. In practice, it doesn't always work out as neatly or as cleanly as planned and I think navigating how to hold one another accountable, go back to the original intention of being in the space. Letting down some walls, which is much harder in practice and hard to know what each one of our roles are as they related to one another."

“**Sometimes our clients are in a predicament where they're dependent on their significant other for money**”



Difficulties with partner agencies

While staff recognized the importance of working in partnership across the many agencies and systems that impact survivors' lives, some staff worried about the perception of the existing partnerships and barriers and fears those may create for survivors.

"There's already some hesitancy for folks to trust a mainstream domestic violence agency and the relationships with the system make them more nervous and then to have them in the building."

Additionally, though significant progress in building trust and a strong relationship between domestic violence agencies and agencies focused on child maltreatment has occurred, the historical tension that exists between these two distinct traditions is still present to some degree.

"[There is] a lot of push and pull, like child abuse and domestic violence. People who abuse their children experience domestic violence. So a victim of one agency might be considered a perpetrator for another. Finding a balance and how to holistically serve and make sure everyone feels safe and comfortable having their needs addressed is challenging."

Clients & staff not aware of all available services

The physical co-location of many diverse services was noted as an advantage that allows increased access to those services. Fully realizing this advantage and ensuring that clients are offered the full menu of service requires a workforce knowledgeable of all available resources, when each might be appropriate for clients, and how to get clients connected.

"The challenge has always been how do you keep [all the available services] organized in your mind, and in your file folders, and in whatever system you have so that you know when that one scenario comes up, what could you offer or how could you bridge the gap there."

"[The partnership] is only as effective or good as the advocates within it because [a client] might say, 'I'm here to talk to the DA's Office,' or 'I'm here to talk with Goodwill', but unless the staff person says, 'Oh I heard you mention this, and just so you know I have a colleague that I can connect you to who could do that and they're in this building,' it's no good. Folks aren't going to know what you don't say."

Need to serve a more diverse client population

Staff recognized the critical need to continually expand and grow services that cater to diverse populations, from men as victims, to diverse ethnic, cultural, and religious backgrounds, to supporting individuals who have perpetrated violence in their healing.

"We need to ensure that people who want culturally specific programming have easier access to it. Because there's the LGBT center, there's the Muslim Women, there's the Latina Resource Center, there's the Asha, there's the Hmong American Women's Association. There's a lot of different culturally specific agencies and we haven't figured out how to integrate those offerings and connections in a routine way. I think it happens, it just doesn't happen automatically. It's not part of the standard."

Reflecting on the reality that many families that experience domestic violence stay together rather than separate, staff noted,

"How can you manage an offender who is also the parent of a child that you're seeing and have that person be part of treatment? That is a difficult question. That's what we're dealing a lot with now. Victims and offenders are both the parents of a child. It's figuring out how to work with families in their healing. How can we work together for the benefit of the kid and the family? And many of these families, the victims and the offenders do not separate. They stay together. So, that's another part of the picture. They're still living in the same family."



Professionals feeling isolated from other staff in the agency

Many partner agencies maintain a presence at the Family Peace Center by creating a satellite office that is distinct from their primary location. This can lead staff at those agencies to feel isolated and disconnected.

"We feel pretty isolated from our colleagues who are doing the courthouse work back at the courthouse complex. That is one of the negatives. We kind of feel isolated at FPC. We just don't see people very often."

“This happened a few times where the family thinks we’re all one entity instead of our separate organizations.”

Branding & identity issues among FPC partners

With so many distinct partner agencies located in a single facility, branding and identity issues surfaced for staff, clients, and the general public.

"Because we don't have any neutral FPC reps on staff, it's just Sojourner. I feel like we continue to have an identity crisis. Sojourner at the Family Peace Center vs. Sojourner Family Peace Center."

"This happened a few times where the family thinks we're all one entity instead of our separate organizations. So I've really had to define that and make that really clear because we are all in one building."

Less privacy & confidentiality for clients

Finally, staff voiced concern about a loss of confidentiality when clients come to a physical location to receive services from one agency but other professionals from other agencies may see them and realize they are receiving services intended to be confidential.

"It feels less private. Like they can't just go to Sojourner without being in a building where they could be seen by someone from another agency."

The Family Peace Center (FPC) tracks community trends related to family violence. Below we examine recent trajectories in Milwaukee in the areas of domestic violence and child maltreatment. It is important to note that

the work of the FPC is not the only reason these trends have changed over time. These numbers are influenced by other events including the socio-political climate, economic stability, and many concurrent efforts by local and state government, community agencies throughout the city, to the work of neighborhoods and individual citizens. Examining these trends provides understanding of where we sit in the historical trajectory of the community and allows us to craft intervention strategies, campaigns, and other efforts to positively impact trends. Throughout this section, significant events relevant to each indicator are indicated by vertical lines on the graphs.

Domestic Violence

Section Authors: *Dr. Erin Schubert, Liz Marquardt, and Carmen Pitre of Sojourner, and Dr. Jessica Zemplack of Marquette University*

Section Data Sources: *Calls to the Domestic Violence Hotline from Sojourner; Domestic Violence Deaths Total and by Type from Sojourner and Milwaukee Police Department;*

Domestic violence (DV) impacts over 12.5 million adults in the U.S. annually. To understand the frequency and impact of DV in Milwaukee, the Family Peace Center tracks two primary indicators: calls to the DV hotline and DV-related deaths.

Sojourner has operated the local DV hotline since 1975, allowing survivors to reach out for support, safety planning, and connection to shelter or other resources at any time of the day or night. In 2021, Sojourner expanded survivors' options to connect by launching a text line in addition to the traditional phone line.

*Sojourner Domestic
Violence Hotline*

**Phone:
414-933-2722**

**Text:
414-877-8100**



Calls to the DV hotline are used as a proxy for the frequency of DV in the city but are an under-representation of the actual incidents of DV. That is, in many instances of domestic violence, a victim does not call the hotline, the police, or otherwise reach out for help.

However, we can glean important information examining trends in types of calls received. Hotline calls are classified in 3 categories: information and referral, crisis, or law enforcement. Crisis calls (shown in orange on the graph opposite) come directly from survivors who are in immediate need of safety planning and shelter. Some of these calls result in the client staying in Sojourner's emergency shelter.

Information and referral calls (shown in green on the graph opposite) also come directly from survivors and other community members. These survivors are not seeking immediate shelter but rather are interested in being connected to other services such as joining a DV support group, getting advocacy support through court proceedings, connecting with a therapist for their own healing, or connecting their children to help and resources.

Finally, law enforcement calls (shown in purple on the graph opposite) originate from a

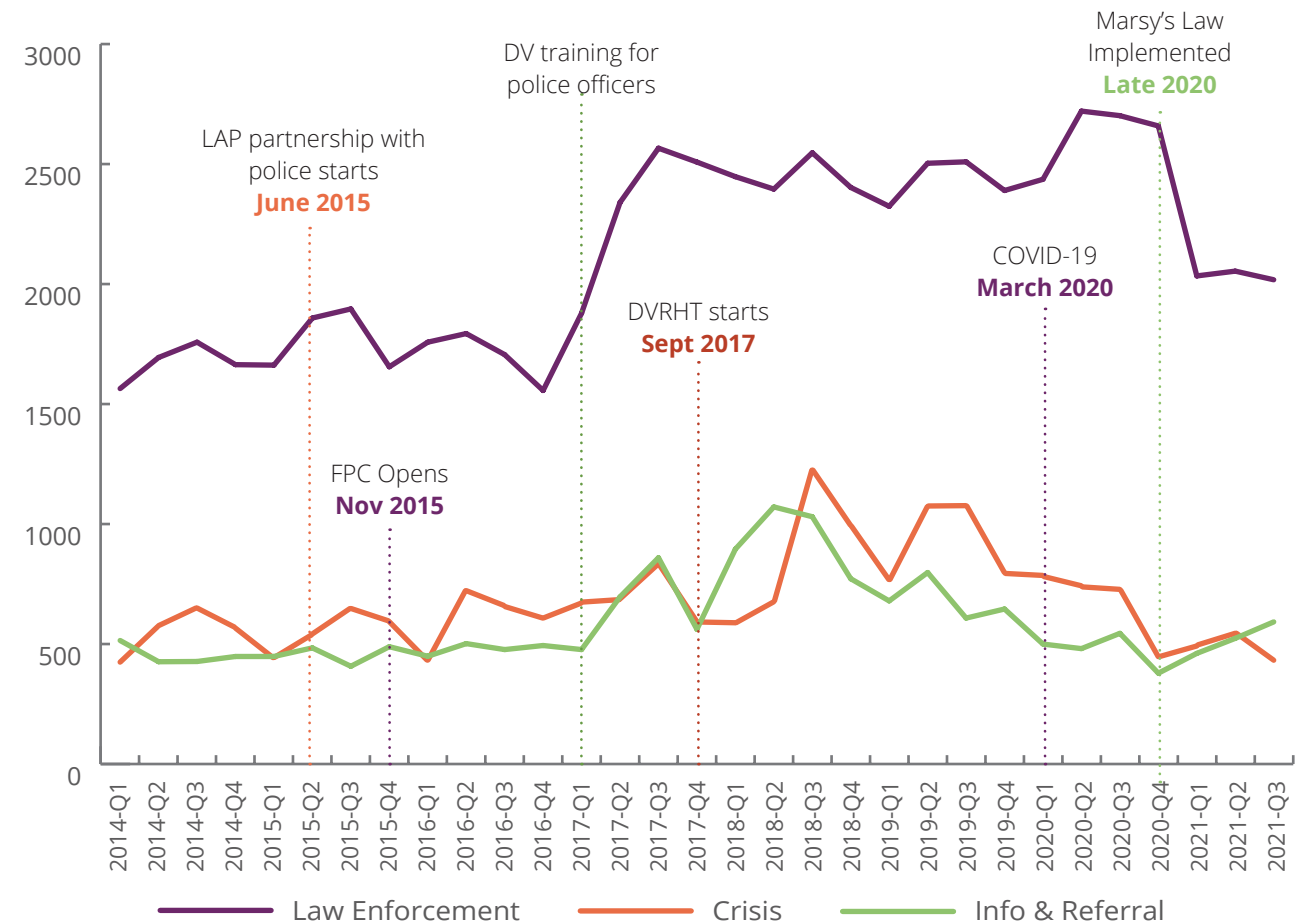
law enforcement involved DV incident. Sojourner has maintained partnership with Milwaukee Police Department and all suburban districts in Milwaukee County for many years. In 2015, we enhanced the partnership by starting the LAP (Lethality Assessment Protocol) project to better identify the highest risk victims. As part of this partnership, every time a police officer responds to a DV incident, the officer assesses the victim's risk for homicide in the situation, communicates that information to the victims, and offers to connect them to support via Sojourner's hotline.

We see a dramatic increase in DV hotline calls originating from a law enforcement involved incident near the end of 2017. The Sensitive Crimes Division of Milwaukee Police Department is a co-located partner operating from the FPC campus. That co-location served to deepen our partnership and opened the door for expanded DV awareness and training throughout the entire force. Starting mid-2017, the Sensitive Crimes Division along with other MPD command staff working in close partnership with the FPC conducted comprehensive training for officers city-wide. This training described DV dynamics and drew attention to the critical pieces of standard operating

procedure that officers must implement in responding to a DV call. **Following this training, Sojourner saw an increase in officers connecting victims to DV services through a call to the hotline following an incident.**

In contrast, we see a marked decrease in DV hotline calls originated from a law enforcement involved incident starting in Q1 2021. Rather than indicating a true decrease in the occurrence of DV in the city, **the decrease in hotline calls may be partially attributable to a Crime Victim Rights Board (CVRB) privacy recommendation issued in October 2019 and the 2020 Crimes Victims' Rights Amendment to the Wisconsin constitution, commonly known as Marsy's Law.** As a result of Marsy's Law and the CVRB recommendation, law enforcement officers must ask for victims' consent to share information with Sojourner. This has resulted in fewer law enforcement calls to the hotline and fewer connections in which advocates offer services to survivors following an incident. The impact was not seen immediately but rather starting in 2021 after adjusting for an implementation period typical for legislative efforts to affect day to day practice.

Calls to Sojourner Domestic Violence Hotline by type



Definition: Total number of calls made to the 24/7 Sojourner domestic violence hotline

In too many cases, DV victims and others involved pay the ultimate price of death. Not all deaths resulting from DV are legally classified as DV homicides. The Wisconsin statutory definition of DV includes violence between adults who are married or were previously married, share a child in common, reside together or previously resided together. This legal definition includes adult family members (e.g., two adult siblings) as well as unrelated adults who live together but are not romantically involved (e.g., roommates). This legal definition excludes cases of violence between parties who are dating but do not share a child in common nor live together

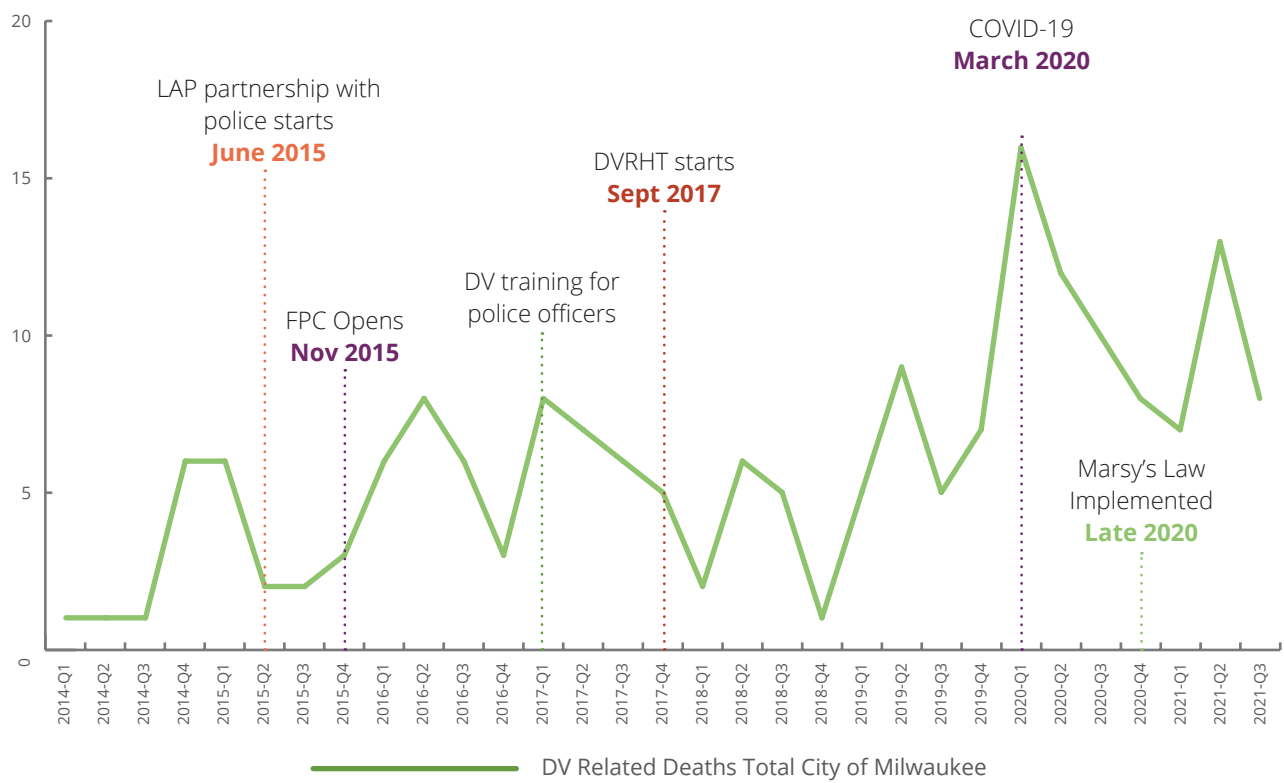
(commonly known as the "boyfriend loophole"). It also excludes other deaths related to DV such as a bystander or intervener accidentally killed when an abuser was targeting their primary victim, DV-related retaliatory attacks such as a new partner killing an abusive ex-partner, minors who die in a DV incident, a suicide of a perpetrator, or police-involved death when responding to a DV incident. **To more accurately convey the impact of DV, we believe it is important to consider all DV-related death beyond those included in the legal statutory definition.** As such, all cases are included in this report.

One significant cross-agency effort to address DV homicides and related deaths, the Milwaukee Domestic Violence High Risk Team (DVHRT), was launched September of 2017.

The multi-disciplinary team addresses DV cases at the highest risk for lethality in Milwaukee on a weekly basis including stabbings, shootings, sexual assaults, strangulations (especially to unconsciousness), weighted LAP screening scores of 25 or 26 points (out of a possible 26 points), and cases that are referred in to the team. Milwaukee's DVHRT includes representatives from Sojourner, Milwaukee Police Department, Milwaukee County District Attorney's Office, State of Wisconsin Department of Corrections Division

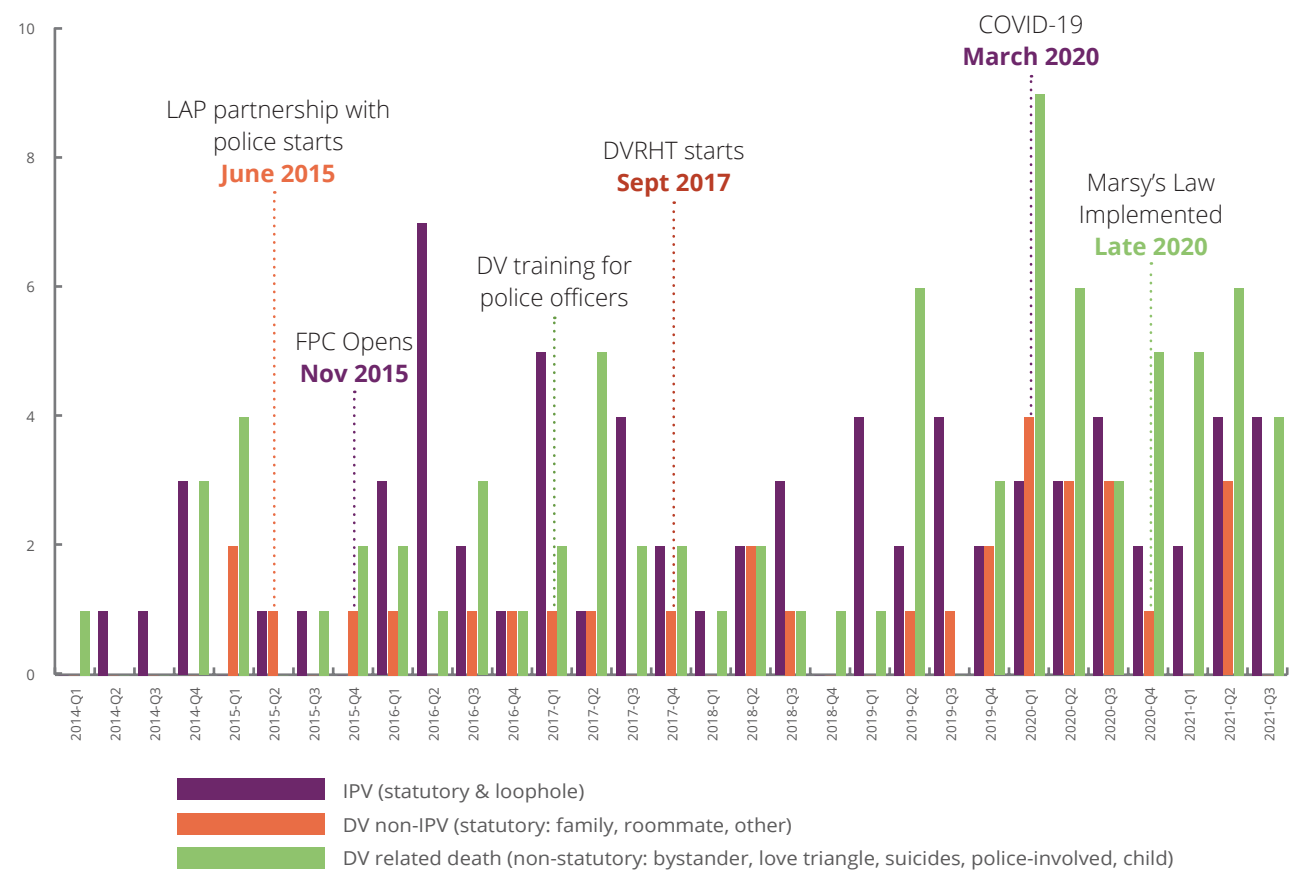
of Community Corrections, and representatives from suburban law enforcement agencies in Milwaukee County. The partners were selected to maximize the efficiency of the work and protect confidential information from being shared broadly. During each week's case review, the DVHRT team members determine and implement individualized recommendations for each case that will maximize safety for survivors and accountability for offenders. Additionally, whenever possible, Sojourner creates an opportunity for survivors whose cases are being staffed by the DVHRT to provide input if they wish.

Domestic Violence Deaths Total - City of Milwaukee



Definition: Total number of domestic violence related deaths in the City of Milwaukee
Source: Milwaukee Police Department and Sojourner

Domestic Violence Deaths by Type - City of Milwaukee



Definition: Number of domestic violence related deaths in the City of Milwaukee by type

- **IPV (statutory & loophole):** homicide perpetrated by intimate partner (e.g., current or former spouse or boyfriend/girlfriend) of the victim
- **DV non-IPV:** homicides that are included in the WI statutory definition of domestic violence but not perpetrated by an intimate partner (i.e., adult family members, adult roommates not romantically involved)
- **DV related death:** domestic violence related homicides and other deaths not perpetrated by an intimate partner but are related to a domestic violence situation (e.g., homicide of a bystander attempting to intervene in a DV situation, a new boyfriend murdering an ex-boyfriend with a history of DV, suicide of a DV perpetrator, a minor child killed in a DV incident, police involved death when responding to a DV incident)

Source: Sojourner and Milwaukee Police Department

Child Maltreatment

Section Authors: Dr. Beth Cleek of Medical College of Wisconsin, Nicole Cain of Milwaukee Public Schools, Lilia Figueroa of the Division of Milwaukee Child Protective Services, Dr. Hillary Petska of Children’s Wisconsin, Dr. Lynn Sheets of Medical College of Wisconsin

Section Data Sources: Severe Child Maltreatment Hospitalized Cases from Children’s Wisconsin; Child Maltreatment Reports & Screened in Cases and Deaths from the Division of Milwaukee Child Protective Services

Successfully breaking the intergenerational cycle of violence means ensuring safety and healing for the entire family. However, it is not enough to only intervene once an individual or family is in crisis; we must also work to prevent violence outright.

One of the most effective ways to do this is to intervene early when children are at risk of experiencing family violence. If we quickly and compassionately wrap services around children and their families to prevent further occurrences, we can prevent the cycle of violence from repeating in their lives. Accordingly, the FPC provides safety and healing services for children who have witnessed domestic violence as well as child victims of maltreatment themselves. Core pieces of our child-focused work include Sojourner’s Child Witness to Domestic Violence group for protective parents and children, Sojourner’s Camp HOPE America – Wisconsin, mental and behavioral health therapy for children and their parents through Children’s Wisconsin

Behavioral Health Clinic, intensive case management and mental health support through Wraparound Milwaukee, forensic interviews, medical care, and advocacy services for child maltreatment victims through Children’s Wisconsin’s Milwaukee Child Advocacy Center, and the FPC-wide Breaking the Cycle initiative.

Children are impacted by domestic violence in many ways and all impact brain development, including just living with impacted caregivers. They may hear an adult threaten or insult another adult or see a parent or caregiver who is angry or afraid. They may see a parent physically hurt the other or destroy property. They may fear future violence or that they may be hurt themselves. According to the National Survey of Children’s Exposure to Violence, a quarter of all children in the United States will be exposed to family violence in their lifetime. Further, in up to 60% of domestic violence cases, children in the family may also be direct victims of abuse.

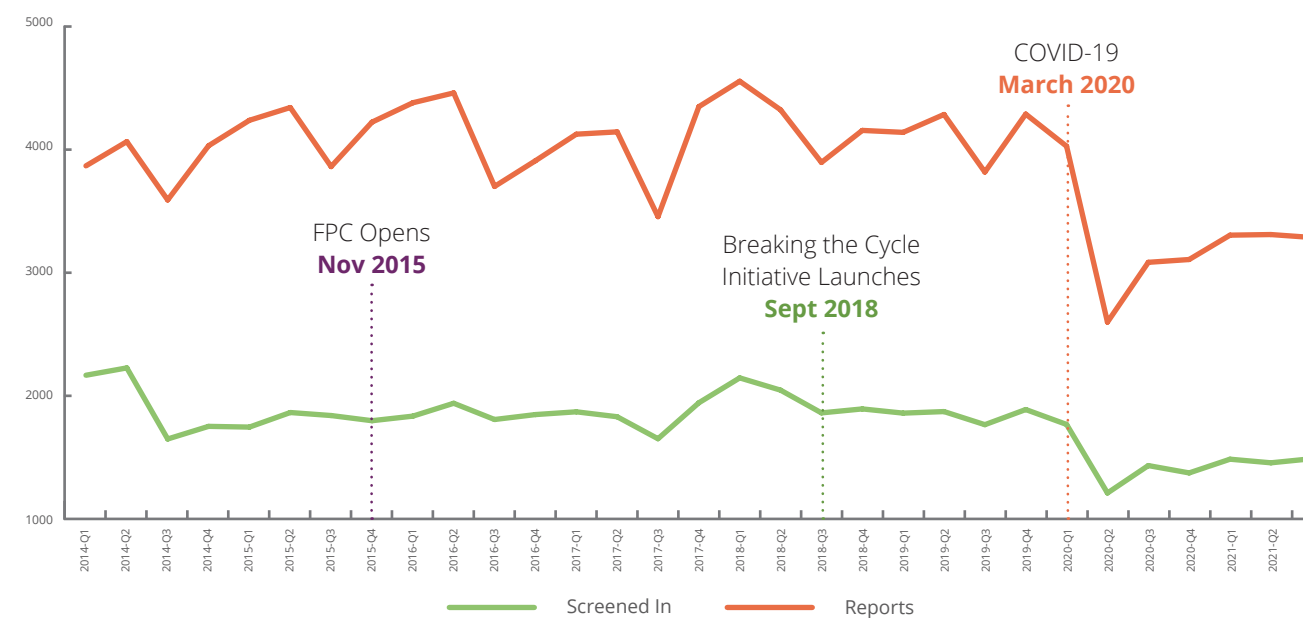
The FPC is critical in promoting healing for children by connecting them to resources to address their physical and mental health. **The Breaking the Cycle Initiative was launched in September of 2018 to improve the FPC’s identification of and response to children who experience family violence.**

Breaking the Cycle provided FPC staff with the training and resources to provide families with psychoeducation on the impact of violence and trauma on children, tips to support their children’s healing at home (e.g., talking points, activities, etc.), and information on when and how to connect to professional support. The FPC Centralized Data System (CDS) ensures that all clients with children are provided information about the impact of trauma on children, education on sentinel injuries (medically minor injuries in infants who are not yet trying to walk, such as a bruise) for parents of infants, tips on how to support children at home, screening for children’s needs and connection to professional resources to support children’s healing.



The FPC tracks three main indicators of child maltreatment in the community: reports received and those screened in cases of child maltreatment from the Division of Milwaukee Child Protective Services (DMCPS), severe cases of child maltreatment resulting in hospitalization at Children’s Wisconsin, and deaths resulting from child maltreatment.

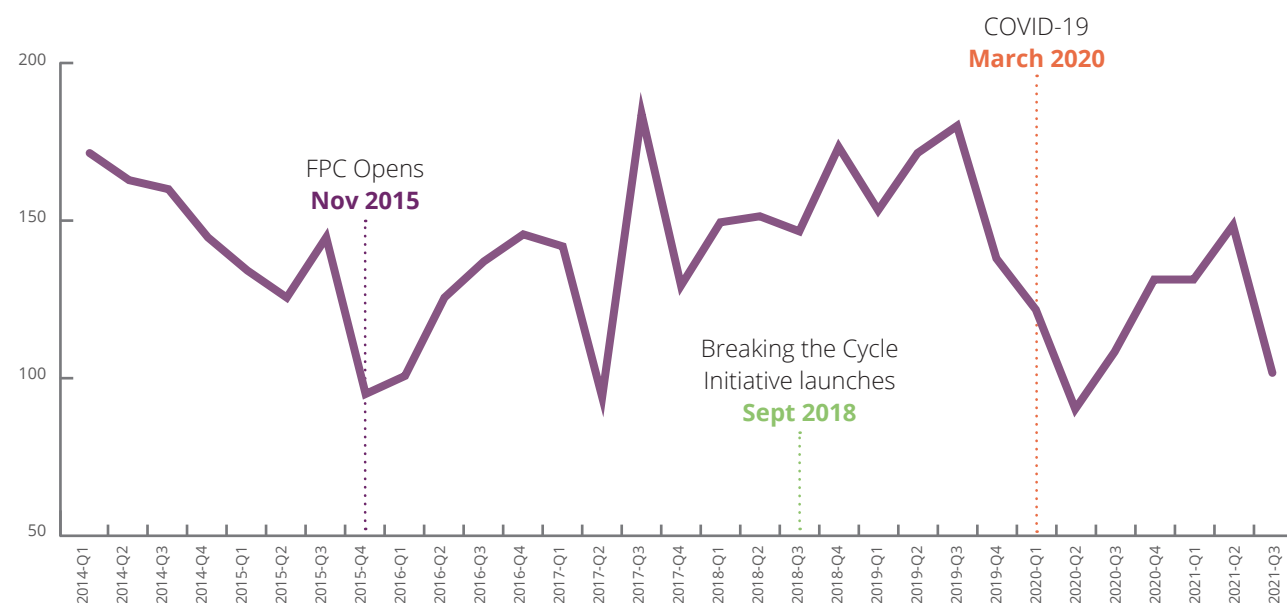
Child Maltreatment Reports & Screened In Cases



Definition: Number of child maltreatment (abuse and neglect) reports made to DMCPS / number of those reports screened in

Source: Division of Milwaukee Child Protective Services

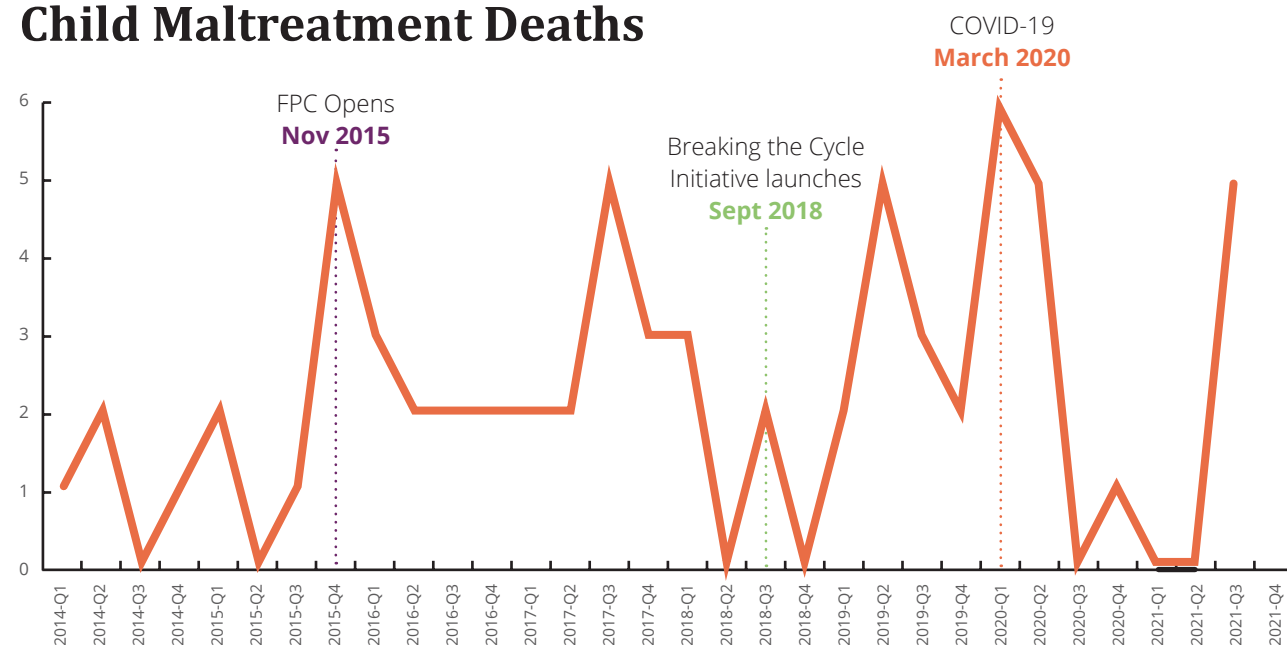
Hospitalized Cases of Child Maltreatment



Definition: Number of child maltreatment cases hospitalized at Children's Wisconsin

Source: Children's Wisconsin

Child Maltreatment Deaths



Definition: Number of child maltreatment-related deaths

Source: Division of Milwaukee Child Protective Services

The COVID-19 pandemic impacted child maltreatment trends in several ways. We saw a dramatic decrease in reports of maltreatment to DMCPD with the onset of the pandemic in early 2020.

This was likely due to the switch to virtual learning by schools, the reduced number of extracurricular activities, and the reduction of children present at many other places (e.g., daycares) where children were no longer regularly seen by professionals and adults who are mandatory reporters. School-aged children experiencing maltreatment were hidden in their homes as were the youngest children. Those reports have begun to rise again, though they are still not at pre-pandemic levels. This rise may be attributable to more school-aged children returning to in-person school, sports, and clubs where other adults again have access to these children and have begun making reports of suspected maltreatment.

At the onset of the pandemic, we also saw a sharp decline in the number of severe, hospitalized cases of child maltreatment. Most of these hospitalized cases represent infants and toddlers with abusive head trauma (shaken baby syndrome), fractures, and other severe injuries. This drop in cases as the pandemic began may reflect the fact that many mothers were

suddenly at home caring for their young children, which is usually a protective factor. The recent rise in these cases may be partially attributable to more parents returning to in-person work and these young children being cared for by other caregivers. Access to affordable, high quality, safe care for young children continues to be a challenge for many families. These data point to an opportunity to enhance access to high quality early childhood care and education in Milwaukee, particularly for the most vulnerable families.

The federal Family First Prevention Services Act signed into law in 2018 reallocates funding to states' child welfare systems to include more funding for early child care, behavioral health, economic support, and kinship caregiving in an effort to serve more children in-home as opposed to in non-relative foster care or congregate care settings. Despite the challenges, the FPC's desire to support the federal Family First Prevention Services Act and improve support for children and families who are at risk has promoted collegial partnerships between stakeholders. The improved rapport between partners has increased the child advocacy and protection services medical providers' and others' awareness of DV and resources to promote resilience in the professionals

who help others. The FPC-wide Breaking the Cycle initiative increased attention to the cycle of family violence and facilitated the creation of the Centralized Data System, a valuable tool to capture and share data and create a virtual environment of care.

Several upcoming efforts of FPC partner agencies are underway to further address child maltreatment in Milwaukee. We expect that the return of most school-aged children to in-person school instruction will continue to increase reports of maltreatment to DMCPD. Ongoing quality improvement initiatives within partner agencies including Children's Wisconsin will improve access to expert child maltreatment medical services and earlier identification of at-risk children. Increased screening for DV by professionals at Children's Wisconsin and other partner agencies could decrease co-occurring child maltreatment cases by identifying DV cases earlier and connecting families to safety and healing resources. Increased attention to social determinants of health by medical and child protection professionals through multiple initiatives also will likely decrease instances of child maltreatment.

The information presented in this report demonstrates the Family Peace Center's success in improving lives of adults and children who have experienced family violence. We've described our successes in inspiring hope and healing, positively impacting the lives of adults and children. Data presented in this report draw our attention to the following areas we will address in the upcoming year.

Future Direction 1: Deepening partnerships.

The community trends presented in this report underscore the importance of working in close partnership across sectors to move the needle on the complex issues of domestic violence and child maltreatment. Work to reduce family violence in our community cannot be done by one agency in isolation. As such, in 2022 the Family Peace Center is putting renewed intentional effort on deepening our partnerships with co-located and neighborhood based partners. We will engage in strategic planning and reaffirm our commitment to the FPC vision to promote optimal healing and wellbeing for families impacted by violence through enhanced collaboration. We will address the FPC branding and identity issues allowing staff and clients to better understand services. Through this work, we will deepen partnerships with co-located and community partners to provide the best care to hurting families and ultimately to reduce family violence in Milwaukee.



Future Direction 2: Addressing system barriers.

The Crime Victim Rights Board 2019 privacy recommendation and the Victims of Crime Amendment to Wisconsin's constitution, Marsy's Law, have resulted in law enforcement officers and prosecutors being required to ask victims for consent to share their information with service providers. Consequently, **far fewer domestic violence victims who call the police are connected to DV services after the police take a report.** To address this issue, we are creating strategies to support police officers who respond to DV incidents which will help them build rapport and allow them to explain the benefits of DV services to victims. Additionally, we are reviewing the DV supplemental report form used by officers for potential changes to make it easier to use and allow officers to be more effective in encouraging victims to connect to safety and healing resources. We are exploring ways to support officers, including the creation of a guide for officers and piloting on-scene response with our DV advocacy team. We are working to establish additional training on DV dynamics, available resources for victims, and how to effectively encourage victims to connect to support within the confines of Marsy's Law. We are fully supportive of victims' rights to privacy and safety. Prior to Marsy's Law, the WI constitution guaranteed a victim's right to privacy, dignity, and respect. The strategies described here represent our desire to have support offered to as many DV victims as possible following a violent incident.

Future Direction 3: Connecting survivors to support earlier.

Over the next year, we will focus on expanding partnerships to open additional doors for DV survivors. As described throughout this report, Sojourner has several successful partnerships with the law enforcement and criminal justice system that are critical to reaching and supporting survivors. In the coming year we will focus on expanding partnerships with other sectors to reach survivors earlier, before the violence escalates to the point that law enforcement involvement is needed. Sojourner is partnering with a team conducting a pilot program to improve screening for DV in healthcare settings (e.g., OB-GYN and primary care visits) by training clinic staff and co-locating a specialized DV advocate in the clinic environment. Additionally, we are committed to more neighborhood community outreach. Further, we are exploring options to reach families whose cases are not ultimately prosecuted by the DA's office. In many of these cases, although there may not be enough evidence to issue criminal charges, potent and dangerous DV dynamics are present in these relationships. In all of these efforts we are working to reach victims where they are living their life to connect them to services, support, and healing.



Future Direction 4: Earlier identification of children who are at risk of maltreatment or experiencing toxic stress within their homes.

There are many relatively easy ways to improve detection and to prevent child maltreatment that are within our grasp. Future Directions 1 – 3 will make families safer thus improving outcomes for children. Work from the Breaking the Cycle initiative should be spread to those who can identify parent clients at the FPC and educate them about the impact of trauma on the developing brain as well as early indicators of child physical abuse in infants. While the effort to expand these opportunities has already begun, there are also opportunities to expand the reach to partner agencies. Other future directions include better screening for family violence, advancing the science, improving data sources, and improved interventions:

- Medical providers are taught to routinely screen for DV, but there are ways to ensure that screening is consistent throughout the health systems involved with the FPC and that screening utilizes the best screening questions available.
- Researchers at the Medical College of Wisconsin who work at Children's Wisconsin are implementing evidence-based methods for earlier identification of abused infants, drug endangered children, and youth who are being exploited. This work should be expanded and further data collected to improve safety of children and their families.
- Children's Wisconsin is working to better support families dealing with suspected maltreatment, which will help reduce the traumatic crisis that a report to DMCPD causes.
- Medical College of Wisconsin researchers and Children's Wisconsin providers are working together to improve mandated reporting practices and to improve to accuracy of child maltreatment identification.

These active initiatives described here provide optimism that by working together, with the community and families, we can improve outcomes for children.



Erin Schubert, PhD
 Director of Outcomes & Evaluation
 erins@familypeacecenter.org

Family Peace Center Outcomes & Evaluation Committee

Representative	Agency
Dr. Erin Schubert*	Sojourner
Dr. Hillary Petska*	Medical College of WI; Children's Wisconsin Milwaukee Child Advocacy Center
Dr. Lynn Sheets*	Medical College of WI; Children's Wisconsin Milwaukee Child Advocacy Center
Dr. Alyson Capp	Advocate Aurora Health
Anne David	Jewish Family Services
Dr. Barbara Wesson	University of Wisconsin-Milwaukee
Breanne Marchan	Sojourner
Bree Spencer	Safe & Sound
Carla Washington	Sojourner
Carmen Pitre	Sojourner
Dana Johnson	Children's Wisconsin Milwaukee Child Advocacy Center
Debra Davidoski	Milwaukee County District Attorney's Office
Dr. Elizabeth Cleek	Children's Wisconsin
Hector Hernandez	Sojourner
Dr. Heidi Storm	Children's Wisconsin Behavioral Health Clinic
Jasmine Ervin	Core El Centro
Jessica Kotsakis	Children's Wisconsin Milwaukee Child Advocacy Center
Jessica Strand	Milwaukee County District Attorney's Office
Dr. Jessica Zemplack	Marquette University
Karissa Tillich	Milwaukee Police Department Sensitive Crimes Division
Katie Aldrich	Legal Action of Wisconsin
Dr. Kristin Haglund	Marquette University School of Nursing
Lawrence Rabon	Children's Wisconsin Milwaukee Child Advocacy Center
Lilia Figueroa	Division of Milwaukee Child Protective Services
Liz Marquardt	Sojourner
Lt. Doug Marx	Milwaukee Police Department Sensitive Crimes Division
Maryann Clesceri	Advocate Aurora Health
Nicole Cain	Milwaukee Public Schools
Dr. Pnina Goldfarb	Wraparound Milwaukee
Rosann Lewis	Goodwill Industries
Sara Haberlein	Children's Wisconsin Milwaukee Child Advocacy Center
Sarah Henery	Division of Milwaukee Child Protective Services
Sgt. Theresa Janick	Milwaukee Police Department Sensitive Crimes Division
Dr. Stephen Gilbertson	Wraparound Milwaukee
Tristan Gross	Sojourner

* Committee Co-Chair





619 W Walnut St
Milwaukee, WI 53212

(414) 276-1911

www.familypeacecenter.org