



**Empowering Families Impacted by
Domestic Violence:**

Optimizing Financial Stability through
Medical-Legal Partnerships

Executive Summary

In a given year, millions of individuals in the United States are impacted directly or indirectly by domestic violence. Nearly three out of four (74%) Americans personally know someone who is or has been abused.¹ Financial instability stemming from economic abuse often is a major barrier to safety. The current economic downturn has exacerbated the risk of financial abuse by intensifying family disputes over money. Survivors who wish to flee have less opportunity to transition to economic self-sufficiency during a recession. Given the recent increase in economic instability for survivors of abuse, it is critical that those seeking to advocate for survivors understand the connection between income supports and domestic violence. This report seeks to highlight the critical role that medical-legal partnership can play in promoting income stability for low-income survivors of abuse. Two actual cases from the experience of Medical Legal Partnership | Boston (MLP | Boston) are illustrative of the power of cross-disciplinary collaboration in promoting economic stability for survivors:

SURVIVOR'S STORY #1

Mrs. L is a struggling single mother of two who recently fled an abusive relationship. Recognizing the ways in which legal concerns were exacerbating Mrs. L's depression, her doctor refers her to MLP | Boston. After meeting with Mrs. L and analyzing Mrs. L's income, the legal advocate determines that her family is eligible for both cash and food stamps benefits, and informs Mrs. L of her right to apply. Several weeks later, however, Mrs. L still has not applied.

Trained in the client empowerment model, the legal advocate makes no assumptions as to why Mrs. L did not apply, and instead continues to supply her with additional information and resources. Days later, Mrs. L's therapist contacts the legal advocate. (Mrs. L's doctors are familiar with the medical-legal partnership model and have secured the patient's permission to speak with her legal advocate regarding the case.) The therapist informs the legal advocate that Mrs. L wishes to apply but is afraid to go to the local welfare office because the perpetrator and his family live in the neighborhood. MLP | Boston advocates with the domestic violence unit at the state welfare office which permits Mrs. L to apply for benefits at a different office where she feels safe, and in the end, receive cash assistance and food stamps for her family.

SURVIVOR'S STORY # 2

Mrs. N, a domestic violence survivor, is a single mother of two who has been living paycheck to paycheck. She suddenly has a heart attack, and is unable to work for several weeks. Her health condition does not qualify her for any disability benefits and she currently has no income to provide for the basic needs of her family. Mrs. N's second child is deemed a "family cap baby" under TANF federal regulations and thus cannot be counted in the family household. Mrs. N is eligible for little or no cash assistance benefits. Even if she were eligible for meaningful benefits, Mrs. N is afraid that if she seeks cash assistance, the welfare office will seek child support from the perpetrator and he will go after her or her children.

The legal advocate sensitively presents the various exceptions to the family cap rule and inquires as to whether any of them apply to her situation. The client discloses that the second child was conceived as a result of rape. Mrs. N is, however, reluctant to share more information with the legal advocate because of the emotional trauma she suffers in each retelling. The advocate, familiar with the family's medical providers, asks if Mrs. N might feel more comfortable discussing the rape with her therapist. The advocate further explains that more information is needed to prepare an affidavit that will waive the family cap and child support requirement. Mrs. N agrees, and requests a meeting at which both the advocate and her therapist are present. As a result of that meeting, the legal advocate is able to construct and submit a request for a waiver of the "family cap" and "child support" rules, on the basis of domestic violence. The office reviews and approves this request and she receives the maximum benefits for her and her family.

As the above cases illustrate, medical-legal partnerships are uniquely situated to offer legal support to domestic violence survivors that is both holistic and preventive in nature. Every day, survivors seek medical treatment at hospitals and doctor's offices throughout the country. Their various legal needs, however, often go unrecognized or overlooked by both the survivor and her health care professionals due to more pressing concerns regarding the survivor's emotional and physical well-being. Medical-legal partnerships regularly train healthcare professionals to screen for unmet legal needs during routine healthcare appointments and to refer vulnerable patients to legal staff for appropriate advocacy. Medical-legal partnerships are able to provide legal advocacy that is focused on (1) understanding all of the legal needs a survivor may have, rather than just those needs that are related directly to the abuse, and (2) preventing a legal crisis that will require complex and lengthy advocacy and is stressful for the survivor. Additionally, medical-legal partnerships are able to provide such advocacy in an environment with which the client is familiar and which promotes easy access to mental health services that often are critical to ensure a survivor's well-being,

Perhaps in no context is the preventive capacity of medical-legal partnerships more apparent than in addressing the financial needs of domestic violence survivors. As the cases above demonstrate, financial self-sufficiency is essential in ensuring a survivor's continued safety and stability. As a result, the income supports practice at the Medical-Legal Partnership | Boston (the Founding Site of the national MLP network) seeks to disrupt the connection between insufficient income and domestic violence by ensuring meaningful access for low-income individuals and families to the public benefits system. By training healthcare providers on the special protections available to survivors and working with providers to obtain critical medical evidence, MLP | Boston is able to identify and resolve issues around income supports access before they become a legal crisis requiring emergency intervention. Additionally, the partnership between MLP | Boston's legal advocates and a survivor's medical providers often assists both sets of professionals in providing well-informed and comprehensive care to a survivor and her family. This report will continue to focus on the relationship between access to income supports and domestic violence as a means of highlighting the ways in which partnerships between the medical and legal professions enhance the essential services provided by traditional legal aid and healthcare institutions.

Domestic Violence: A Public Health Crisis

Domestic violence is a global phenomenon affecting all sexes across boundaries of race, class, and national origin. For purposes of this document, the term domestic violence refers to a perpetrator using physical, sexual, financial, and/or psychological abuse to maintain power and control over intimate partners. Women are the primary targets of abuse with nearly 1 in 4 women experiencing domestic violence at some point in her lifetime.⁴ More than isolated incidents of abuse, domestic violence is a pattern of tactics through which the perpetrator gains power and control over the victim's life. These tactics, shown in the Power and Control Wheel, work together to reinforce the abuse and maintain the perpetrator's control over the survivor.

Domestic violence survivors often become economically dependent on the perpetrator. Indeed, income and employment insecurity have been found to be the most immediate deterrents to leaving an abusive relationship. Leaving an abusive relationship may mean that the survivor will become homeless, be forced to leave her job, be unable to support herself and children, and possibly lose custody of her children. For this reason, an independent source of income is the single most significant indicator that a woman will be able to permanently leave an abuser.⁵



Source: Domestic Abuse Intervention Project
Duluth, MN



Spotlight on Economic Abuse

Although all forms of abuse can leave a survivor financially vulnerable, economic abuse can have an especially detrimental impact on financial well-being. Perpetrators can gain financial control over the survivor through an array of tactics: seizing her income, harassing her at her job, forcing her to have a child, not allowing her to work, controlling how her money is spent, withholding basic living resources (food, clothing, medication), or stealing her identity, credit, or property.

The Client Empowerment Model:

In working with survivors, legal advocates can deploy client-empowerment practices that are specifically designed to prevent (1) replication of the power dynamics of an abusive relationship, (2) creation of dependency on the advocate by the survivor, or (3) re-traumatization of the survivor by the legal process. Client empowerment is advocacy that engages survivors in activities that reduce the powerlessness that resulted from abuse and helps them exert "greater control and influence in their personal and professional lives."⁶ It gives the survivor the opportunity to express agency to make informed decisions about what she wants to do in her own life. The client empowerment wheel to the right depicts the various ways in which legal advocates can ensure that the client, and not the medical or legal professional, is in charge of her advocacy.



Source: Missouri Coalition Against Domestic and Sexual Violence
Jefferson City, MO

Medical-Legal Partnership Advocacy for Domestic Violence Survivors

Tips for Client Empowerment

COMMUNICATING WITH A SURVIVOR:

- Remember and remind the survivor that she has strengths and that she is an expert in her own life
- Support the survivor's self determination even when you do not agree with her decisions
- Be conscious of your facial expressions, body language and tone
- Remember that the ultimate safety decisions are made by the survivor --she knows the behavior of the abuser best
- Present the options and concerns to the survivor so that a meaningful decision can be made
- Let the survivor know that it is common to have problems after leaving or escaping an abusive situation
- Show that you are genuinely interested in what she is telling you

PROGRAMMATIC PRACTICES:

- Incorporate questions about domestic violence in the standard intake process to minimize the stigma and encourage disclosure
- Train staff, health care providers, and state agencies on economic abuse and develop economic advocacy skills and resources
- Make sure that the programs a survivor is referred to will fit her unique circumstances
- Reassess and update program policies to ensure they do not interfere with economic advancement
- Have a domestic violence hotline number available to provide to the client

Holistic Advocacy

Effective legal advocacy for domestic violence survivors certainly involves traditional areas of family law and restraining order advocacy, but also includes survivor needs around:

Housing – A survivor who currently is in an abusive relationship may be at risk of losing her housing because of the damage that the perpetrator inflicts on the property or because the perpetrator withholds rental/mortgage/utility payments to maintain control over her. A survivor with little resources may also need assistance in securing public or more affordable housing.

Food/Nutrition – A domestic violence survivor may need assistance safely accessing nutritional programs and resources such as WIC, food stamps, and food pantries to provide food for herself and her family.

Healthcare Access – A survivor may be dissuaded from accessing the physical and mental health services she needs if she has no health insurance or is listed on her perpetrator's health insurance.

Consumer Protection –A survivor who has been economically abused may need assistance ascertaining her rights around a damaged credit score, employment, and other consumer laws.

Advocating for Domestic Violence Survivors: *Leveraging the Medical-Legal Partnership Model*

- **Interdisciplinary trainings:** In the medical-legal partnership model, legal advocates regularly train health care professionals to screen for unmet legal needs frequently confronted by survivors. As a result of these trainings, health care professionals in MLP-partnered health settings have basic knowledge of the patient's legal rights, the ability to consult with a legal advocate for further information, and the opportunity to refer a survivor to a legal advocate for direct assistance. Likewise, in the medical-legal partnership model, health care professionals train legal advocates on the mental and physical health effects of domestic violence and trauma—thus teaching legal advocates to recognize signs of post-traumatic stress disorder and to implement communication strategies that accommodate a survivor's needs.
- **Anticipating and preventing legal crises before they occur:** Frequently, due to the many challenges survivors face on a daily basis around food, housing, and other needs, they do not seek legal assistance until problems have reached a crisis point. As a result, legal advocacy for survivors often focuses on providing emergency intervention around safety and family law issues. By training health care professional to screen for legal issues early and often, medical-legal partnerships are uniquely situated to identify and resolve legal problems before they reach a crisis point. This conserves a survivor's time and energy so that she can focus on her family's health and well being. It also ensures that resources are available to handle a survivor's other legal needs, such as access to public benefits.
- **Access to mental health professionals:** Often, trauma survivors rely on therapists and other mental health professionals to assist them in coping with the emotional impact of the abuse they suffered. Unfortunately, accessing special protections in the law for domestic violence survivors often requires the disclosure and re-telling of intimate and traumatic experiences to a legal advocate. By partnering together on behalf of the survivor, the legal advocate and health care professional can (1) minimize the risk of re-traumatization and (2) offer both legal and emotional support to the survivor. This empowers the survivor to exercise her legal rights while maintaining her emotional well being.
- **Obtaining clinical evidence to support housing, healthcare, and other legal claims:** The special protections in place for domestic violence survivors often require a letter or other document from a healthcare professional. MLP-trained health care professionals often are able to provide more in-depth and relevant medical evidence because of the legal support and knowledge with which they are equipped. Ultimately, this helps the survivor avoid lengthy or complex legal proceedings.