domestic
violence
services
of greater
new haven

To: Human Services Committee

From: Sandra Koorejian, Executive Director

Date: February 15, 2008

Re: Public Hearing on the Governor's Budget Adjustments

On February 14th, Speaker of the House Jim Amann held a press conference to support 24/7 coverage for domestic violence shelters. A former child victim who spent months at one of our shelters with 24/7 coverage also spoke about a conversation he had with a counselor at 3 am, when he couldn't sleep. His point was that the availability of emotional support at that moment was critical to his recovery. At our shelter in New Haven, employees are physically present from 8 am to about 7 pm every day. While it is true that 24/7 coverage provides important emotional support, I want to discuss why 24/7 coverage is critical also to the residents' physical safety, using actual examples.

1) DVS has a rule that all smoking must take place outdoors, but women smoke in the house when we are not there. There have been occasions when the smoke alarm has gone off, and thanks to the swiftness of the fire

department, the house didn't burn down. If an employee was present, the likelihood of smoking would be greatly reduced or if a smoker was discovered, the situation would be dealt with before an accident happened.

2) DVS has a rule that no one can prepare meals using the oven after 7 pm, when staff is gone. When one resident didn't comply, there was a grease fire that destroyed the oven. The kitchen escaped further damage thanks again to the fire department. This would have been avoided if an employee was present.

3) In addition to women, DVS is sheltering more teens and children who use anti-depressants, anti-anxiety medications, and other prescription drugs. While necessary to their general functioning, the presence of these meds can pose risks to themselves and other residents. Residents report theft of their drugs when we are not there. Residents who don't take their medications as prescribed present a danger to themselves and others. We are fortunate that there has not been an overdose situation. If an employee was present, we would be able to more closely monitor and support residents to take their meds as prescribed.

4) DVS sees more children with major psychiatric problems as a result of their trauma. On two separate recent occasions, a 9 year old boy and 7 year old boy reported seeing dead bodies and couldn't sleep. Their mothers didn't call our on-call staff to report this. When staff learned about the situation the following morning, they made arrangements for the

children to be immediately evaluated. Both were so impaired that they were hospitalized. If an employee was present overnight, their mothers would have likely brought it to their attention, and arrangements for screening could have been arranged right away.

5) DCF refers many women to our shelter, most of whom don't want to be sheltered but feel forced to do so to keep their children. As mandated reporters, DVS reports abuse and neglect that we see to the worker or Careline staff. We point out our fear for the child's safety because we are not present overnight. Usually, the worker says there is nothing she can do and asks if it can wait until the next day. "It" usually means coming out to investigate the situation or removing the child from its parent's care and arranging foster placement. If an employee was present overnight, further abuse or neglect of the children may be prevented. However, we object to having to cover for DCF by paying our own staff to work overtime when the situation is risky because DCF refuses to do its job and immediately investigate.

In closing, clients who seek shelter services have many needs, otherwise they wouldn't be here. They are stressed. They make some bad decisions. We can't expect them to always conduct themselves responsibly. We do them a disservice by denying them the structure and support they need and deserve.

Thank you.