

2021 Survey and Convening Findings on Wellness from Domestic and Gender-Based Violence (GBV) Service Providers During COVID-19

Key Takeaway:

This report provides an overview of NYC gender-based violence (GBV) service providers and staff, the impact of COVID-19 on their wellness, and the NYC Mayor's Office to End Domestic and Gender-Based Violence (ENDGBV) response to support providers and staff during the pandemic. The report also includes analysis drawn from a survey of gender-based violence service provider staff that was conducted in February 2021.

Highlights:

- While the majority of domestic and gender-based violence (GBV) service provider survey participants have adapted to working remotely, some are still struggling to adapt.
- Participants identified the need for better technology, tools for virtual collaboration, scheduling flexibility, and professional development.
- Expectations from supervisors to respond to communication immediately and an increased workload are creating challenges for many survey participants.
- The majority of survey participants are satisfied with COVID-19-related communication from their organizations, the professional development opportunities available to them, and employee comradery.

Research shows gender-based violence tends to increase during war, emergencies, and epidemics.¹ Call volume to the NYC Domestic Violence Hotline, operated by Safe Horizon, increased by 17% during the pandemic (3/16/20-3/15/21) compared to the previous year. Heightened emotional stress, economic stress, decreased access to services, and loss of personal time, privacy, and self-care can exacerbate the risk of people experiencing GBV.

As New Yorkers continue to cope with the fear and uncertainty of COVID-19, GBV providers have continued to address the organizational and individual impacts of COVID-19 with creativity and optimism. Providers have a critical opportunity to address and implement trauma-informed workspaces, which can mitigate the impact of secondary trauma experienced by workers that are exacerbated by the pandemic. Since the start of the pandemic ENDGBV has sought to learn about the challenges facing GBV service providers and develop opportunities to create learning communities, via convenings and working groups. The goal has been to identify and implement trauma-informed strategies, and share organizational wellness strengths and needs.

¹ Mittal S and Singh T (2020) Gender-Based Violence during COVID-19 Pandemic: A Mini-Review. Front. Glob. Womens Health

Beginning in March 2020, ENDGBV Commissioner Cecile Noel held weekly (later bi-weekly) calls with 200+ service providers to share information and hear concerns from the organizations working tirelessly to pivot to remote services, and ensure that survivors maintained vital access to support and services. The Commissioner's calls with providers also provided an opportunity for the GBV advocacy community, including ENDGBV's onsite and offsite Family Justice Center (FJC) partner organizations, to come together and provide support to each other during a challenging time for our City. ENDGBV also held borough-based calls for providers funded through the NYC Council Domestic Violence and Empowerment (DOVE) Initiative, convened partners on a regular basis through the City's borough-based FJCs, and continued convening multiple working groups, including ENDGBV's GBV Healthcare Work Group, to stay in touch with providers from various disciplines as we moved through the pandemic. On May 26, 2020, ENDGBV organized the inaugural virtual Wellness Convening with representatives from the stakeholder organizations that we had been convening with during the start of the pandemic. GBV leadership members from across sectors (i.e. nonprofits, District Attorney's offices, city and state agencies) convened to share and learn from each other the strategies they had found effective in supporting FJC staff around wellness and self-care, as well as to discuss gaps and difficulties they had faced in their efforts.

In summer of 2020, ENDGBV began working with onsite FJC partners to develop a comprehensive plan for the safe reopening of the City's FJCs. Three work groups met regularly for two months to develop a collaborative reopening plan that resulted in the decision to move forward with a phased reopening of the City's FJCs. One location opened three days a week in fall of 2020, for client appointments for survivors who could not safely or effectively engage in remote services. A focus on supporting worker wellness was integrated into the reopening process from the beginning, with one work group specifically focusing on best practices for supporting survey participants' wellness as the FJC reopened. To that end, ENDGBV conducted an FJC-specific wellness survey of partner staff working at the FJCs to gather their feedback on the usefulness of specific wellness activities offered at the FJCs.²

Survey participants were also asked how they could best be supported in their current remote work and an eventual return to work at the FJCs. Highlights from the survey: (57%) of survey participants desired regular supervision; (55%) collaboration across teams; (34%) regular exercise; and (32%) trainings and updates on system and service delivery changes as protective factors for engaging in remote work with FJC clients. Fifty-one percent of survey participants cited team building activities; (43%) virtual spaces for connection and conversation; and (31%) virtual yoga as wellness activities they find most helpful for ENDGBV to continue and/or offer as the FJCs began to reopen.

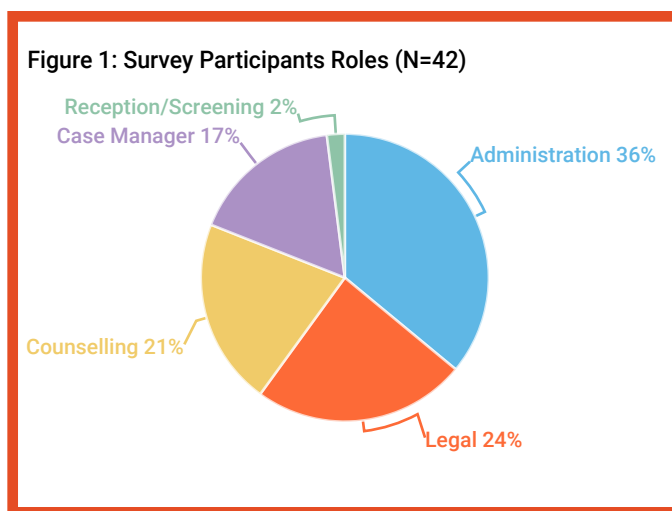
To better understand how working remotely has impacted the health and wellness of GBV provider staff across the city, both at the FJCs and in community during COVID-19, ENDGBV developed a wellness survey targeting on-the-ground and administrative service providers that was distributed and completed in February 2021. The survey included three demographic questions about the survey participant's role

² The survey was conducted online between June 15th and 19th and there were 42 respondents.

in their organization, the length of time they had worked in the GBV field, and the type of organization for which they worked. The demographics questions were followed by four multi-part, multiple choice questions about the experiences of GBV providers working remotely during COVID-19—the remote work environment, working remotely with supervisors, and working remotely with organizations. ENDGBV sent the survey to over 300 providers to share with their survey participants, and received 45 responses directly from provider survey participants.³ Survey results were shared with ENDGBV partners at a virtual Wellness Convening on March 3, 2021.

ENDGBV PARTNERS WELLNESS AND CONVENING SURVEY RESULTS

Forty-five individuals participated in the survey. On average, survey participants reported working in the field of GBV for eight years. Of those that responded, their self-reported roles break down as follows: 36% administration, 24% legal, 21% counselling, 17% case manager, and 2% reception/screening (Figure 1). The majority (76%) of survey participants reported working with community-based organizations (CBOs), followed by NYC government agencies (13%); and 11% reported working somewhere else.



The Majority of GBV Service Providers Have Adapted to Working Remotely, Though Some are Still Struggling to Adapt

[I] keep trying more and more to support my mental health, but the stress is only increasing, and it is never enough. Plus, I never have enough time, or am too exhausted to do even light exercise.

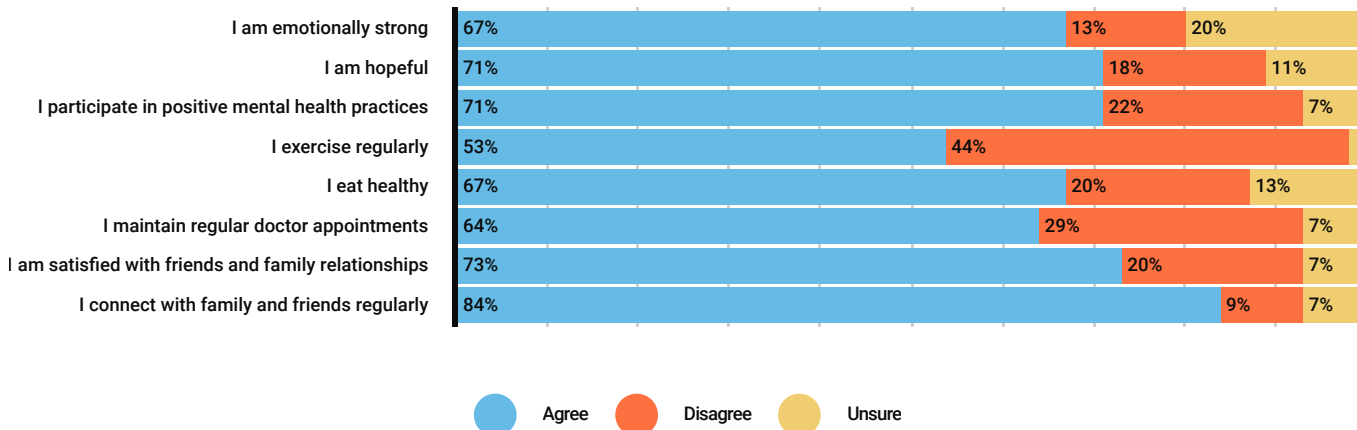
The majority of survey participants reported that they have adapted to working remotely. Specifically, in response to the multi-part question, “How have you personally adapted since working remotely during COVID-19?”, the majority of survey participants reported that they are emotionally strong (67%, 30); hopeful (71%, 32); participating in positive mental health practices (71%, 32); exercising regularly (53%, 24); eating healthy (67%, 30); maintaining regular doctors’ appointments (64%, 29); satisfied with friend and family relationships (73%, 33); and connecting with family and friends regularly (84%, 37)⁴.

However, there are indications that survey participants may be having at least some difficulty adapting – 76% (34 of 45) reported at least one area in their lives that they are struggling to maintain. Further, in the additional comments about challenges from three survey participants, they noted having difficulties with stress, and physical and mental health (1); increased workload and lack of time (1); and isolation (1). (See Figure 2 for a full breakdown of responses.)

³ Survey results are not generalizable to the gender-based service provider staff at large.

⁴ 44 survey participants responded to the statement “I connect with family and friends regularly (in-person-virtually)”.

Figure 2: How have you personally adapted since working remotely during COVID-19? (N=45)⁴

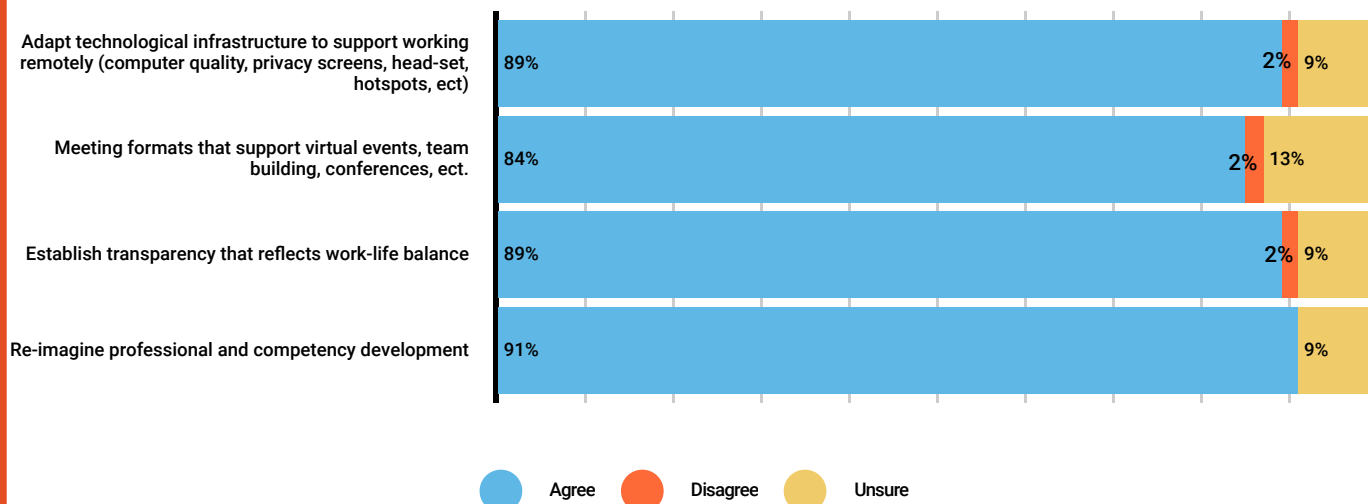


The Remote Work Environment – Technology and Organizational Supports Needs Improvement

The survey asked, “How can the remote work environment be improved?” and responses revealed the foremost challenge in the remote work environment to be around technology. Nine out of 10 survey participants reported that the technological infrastructure to support working remotely (computer quality, screens, head-set, mobile hotspots, etc.) needs improvement (89%, 40); while the vast majority (84%, 38) of survey participants noted that meeting formats that support virtual events, team building, and conferences need improvement.

In addition, the survey explored how organizations can further support their survey participants while working remotely during the pandemic. Almost nine out of 10 survey participants that responded to the survey indicated that organizations should establish transparency that reflects work-life balance (89%, 39)⁵; and organizations should re-imagine professional and competency development (91%, 41). (See Figure 3 for a full breakdown of responses.)

Figure 3: How can the remote work environment be improved? (N=45)⁵



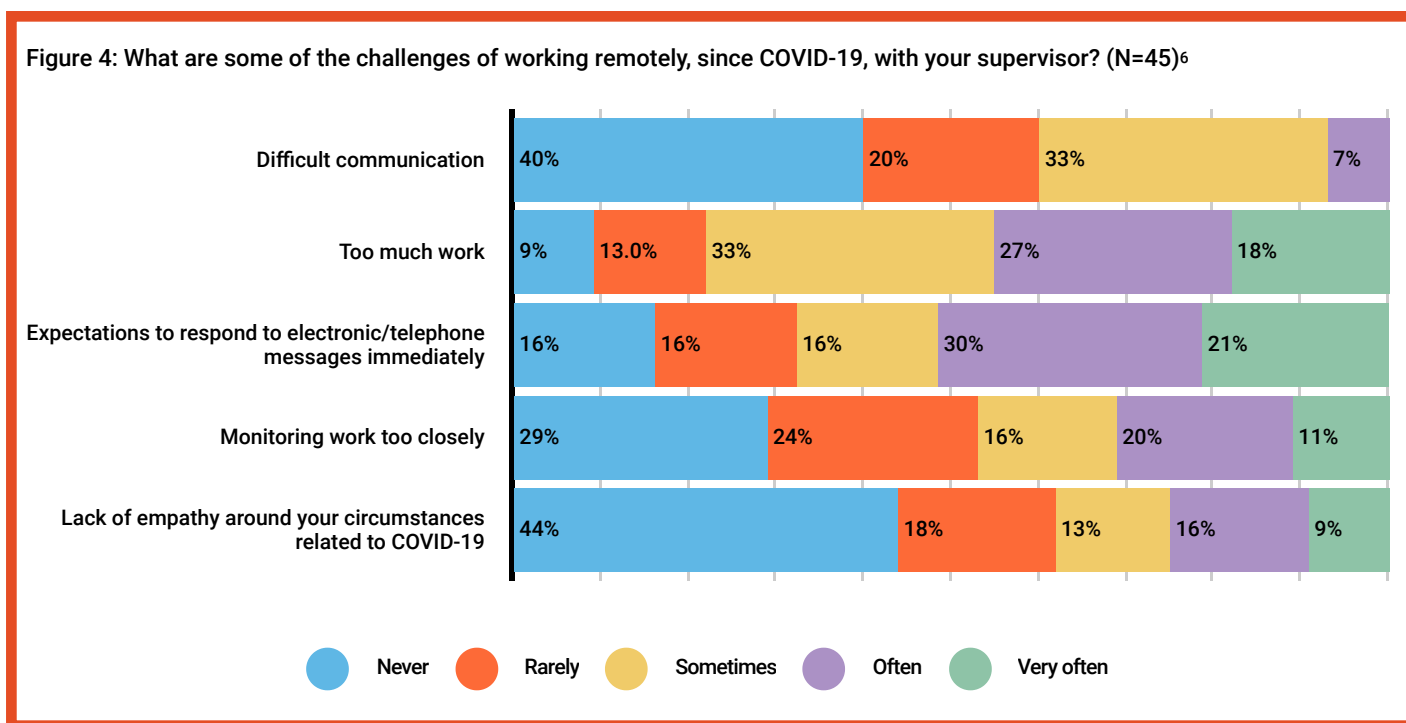
⁵44 survey participants responded to the statement “Establish transparency that reflects work-life balance”.

Supervisor Expectations Around Availability and an Increased Workload are Challenges to Working Remotely

Too much work is not as much because of my supervisor but the huge increase in demand, having more clients in crisis than ever before, and in the last few months, this now on top of our "normal" work on caseloads in court. It's impossible to meet the demand.

The survey explored the relationship between supervisors and supervisees through the question, "What are some of the challenges of working remotely, since COVID-19, with your supervisor?" The survey revealed that most survey participants believe working remotely has strained their relationship with their supervisor; and that this has led to unrealistic expectations. More than six out of 10 survey participants identifying as front line survey participants responded that while their supervisors express empathy around COVID-19 circumstances (62%, 28), this has not translated into their work experience. Nearly half (47%, 21) indicated that their supervisor monitored their work too closely. In addition, the majority of survey participants also reported that they very often, often, or sometimes struggle with expectations to respond to electronic or telephone messages immediately (67%, 29)⁶ and too much work (78%, 35). (See Figure 4 for a full breakdown of responses.)

Eleven survey participants provided additional recommendations for supervisors, which included: supervisors maintaining regular, effective communication and transparency (8); and that staff return to in-person work as soon as possible (1). They also noted that supervisors should address the increased workload (2) and low pay (1); promote sharing of self-care practices (1); and trust their survey participants (1).



⁶43 survey participants responded to the statement "Expectations to respond to electronic/telephone messages immediately".

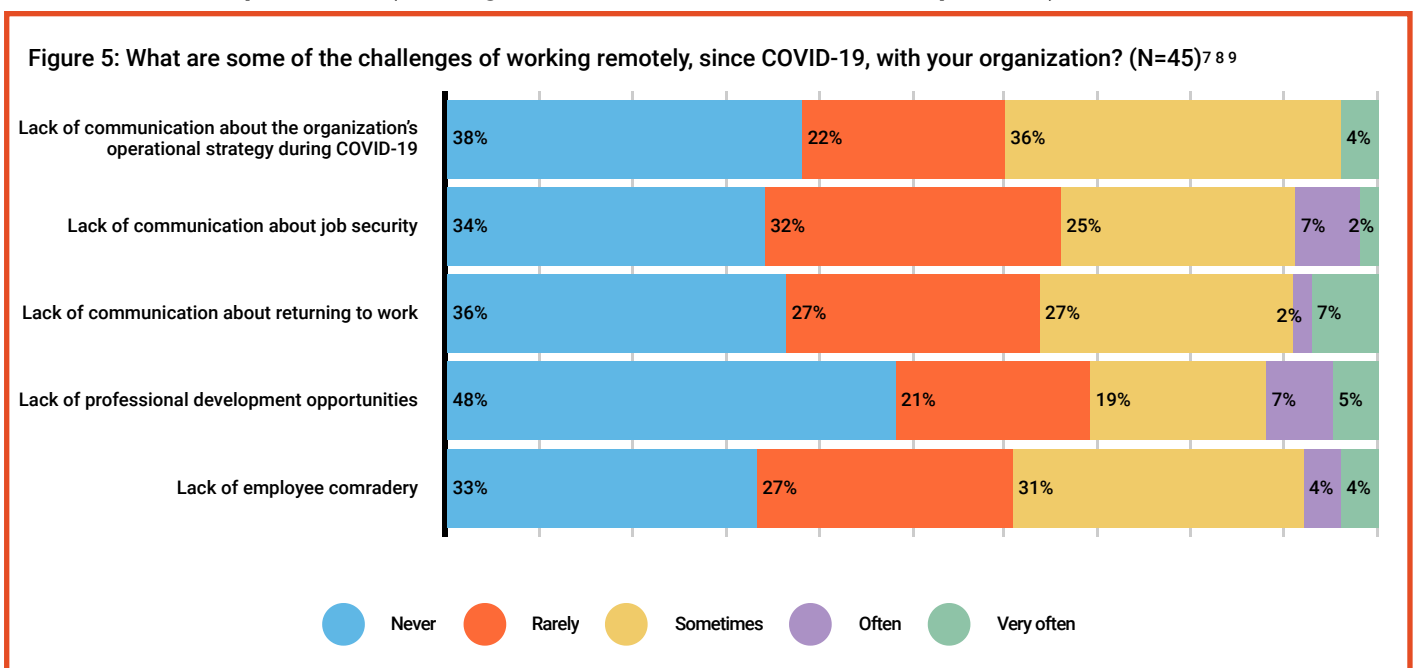
The Majority of Providers are Satisfied with Organization Communication, Professional Development Opportunities, and Employee Comradery

My organization has gone above and beyond for staff during this pandemic.

The survey sought to elicit information on survey participant’s challenges in working with their organization while working remotely by asking, “What are some of the challenges of working remotely, since COVID-19, with your organization?” While many survey participants expressed issues working with their supervisor, the majority of survey participants reported there were fewer challenges with the organization. Regarding the quality of communication from their organization:

- Six out of 10 survey participants (60%, 27) responded that there was never or rarely a lack of communication from their organizations about the organization’s operational strategy during COVID-19;
- Two-thirds (66%, 29)⁷ responded that there was never or rarely a lack of communication about job security; and
- 64% (28)⁸ responded that there was never or rarely a lack of communication about returning to work.

Nearly seventy percent (69%, 29)⁹ of survey participants reported that the organization provided professional development opportunities during remote work; and 60% (27) reported that they never or rarely had challenges with employee comradery. In the additional recommendations for organizations that three providers added, they requested acknowledgment of the difficulties employees face; transparency around returning to work and job security; peer support training; and more involved supervision. (See Figure 5 for a full breakdown of responses.)



⁷ 44 survey participants responded to the statement “Lack of communication about job security”.

⁸ 44 survey participants responded to the statement “Lack of communication about returning to work”.

⁹ 42 survey participants responded to the statement “Lack of professional development opportunities”.

CONCLUSION AND NEXT STEPS

Grappling with COVID-19 as a City has been sobering for all New Yorkers. In particular, the NYS on PAUSE rules created safety issues for many DV/GBV survivors, and exacerbated barriers they face in accessing services. Providers made enormous efforts to keep in contact with survivors and their families, and to provide services and supports; oftentimes, in entirely new ways. In addition, the need to respond to individual and collective trauma was a strong focus for the GBV advocacy community. ENDGBV's convenings and conversations throughout the pandemic identified creative, innovative, and trauma-informed tools employed by our partners to address worker wellness, such as raising wages for service providers; providing flexibility in scheduling; virtual yoga and meditation for survey participants via Exhale to Inhale; offering vicarious trauma and wellness support groups to partner survey participants at the FJCs; and creating virtual team meetings focused on team bonding, etc.

As we move forward as a City towards recovery, ENDGBV will continue to come together with our partner organizations to engage in important dialogue on wellness strategies and supports needed to navigate post-COVID services and programs.

Through ENDGBV's surveys and convenings, we have identified important areas that we can continue to explore in partnership with DV/GBV providers:

- Identify effective ways to support resource sharing of wellness initiatives and resources
- Recognize that the digital divide in NYC, exacerbated by COVID-19, extends to service providers, and continue to explore and discuss the resulting impact on service provision and worker wellness
- Supervisors can lessen the impacts of secondary and vicarious trauma by creating an atmosphere of safety, trust, choice, and collaboration in the workplace. In collaboration with partners, ENDGBV will examine the need and effectiveness of developing trauma-informed trainings for supervisors and managers to enhance supervisors' own practices; promote the delegation of equitable caseloads and the benefits of implementing a system of peer support/supervision; and provide participants with additional tools to develop and employ specific strategies to help service providers thrive in their work.

A special thank you to our partners for providing invaluable resources to better support organizational wellness during COVID-19.

Sophia Holly -- *Exhale to Inhale*

Christopher Lynne-Logue & Sophie Pauze -- *Mayor's Office of ThriveNYC*

Catherine Yeadon -- *New York City Office of Labor Relations*

ABOUT ENDGBV: The NYC Mayor's Office to End Domestic and Gender-Based Violence (ENDGBV) develops policies and programs, provides training and prevention education, conducts research and evaluations, performs community outreach, and operates the New York City Family Justice Centers. The Office collaborates with City agencies and community stakeholders to ensure access to inclusive services for survivors of domestic and gender-based violence (GBV).

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