The incidence of gender-based violence and abuse is staggering and remains a worldwide issue. Abuse by an intimate partner is the most commonly reported type of gender-based violence. According to the United Nations Department of Economic and Social Affairs, “Around one third of women worldwide have experienced physical and/or sexual violence by an intimate partner; and 18% have experienced such violence in the past 12 months. In the most extreme cases, violence against women is lethal: globally, an estimated 137 women are killed by their intimate partner or a family member every day.” The National Coalition Against Domestic Violence data shows that 34.9% of California women experience intimate partner violence. Advocates point out that due to the underreporting of domestic violence, even more women are affected by domestic violence than what is statistically accounted for.

Gender-Based Violence (GBV) continues to pose substantial public health concerns throughout Santa Clara County (SCC) – particularly around issues of intimate partner abuse, sexual assault, and human trafficking. Prompt and continued access to intersectional, collaborative support is critical in ensuring survivors’ safety and wellbeing from crisis to long-term sustainability.

Intimate Partner Abuse (IPA): Around the world, one out of three women will be the victim of intimate partner abuse during her lifetime. The Domestic Violence Advocacy Consortium (Consortium) is a coordinated network of nonprofit domestic violence agencies serving IPA survivors in SCC. Consortium member agencies include Asian Americans for
24,000 IPA crisis calls per year. Consortium providers also support over 7,000 survivors annually and shelter roughly 600 individuals per year. Domestic violence calls represent about half of all violent crime calls to law enforcement. iii In 2019, there were 5,908 domestic violence cases referred to the District Attorney’s Office for review. Sadly, between 1994 and 2018 there were 210 domestic violence related deaths in Santa Clara County.iv

Sexual Assault (SA): The YWCA and Community Solutions have supported sexual assault survivors in SCC since the late 1970s and 1981, respectively. These two agencies respond to over 800 crisis calls per year and provide crisis support to an average of 870 survivors per year. Sexual assault agencies jointly provide almost 10,000 duplicated services to SCC SA survivors annually.v During calendar year 2019, the SCC Sexual Assault and Forensic Exam (SAFE) Program conducted 477 medical forensic exams on SA survivors 12 years and older. The number of SA forensic exams increased by 55% from 2015 (266) to 2019. In 2018, the District Attorney’s office filed charges for 279 SA cases. The San Jose Police Department alone fielded 615 reports of rape in 2018. That number has been steadily increasing since 2011. vi

Human Trafficking (HT): The South Bay Coalition to End Human Trafficking is the local effort that responds to human trafficking in the counties of Santa Clara and San Benito. In Fiscal Year 2020 (FY20), Coalition Service Providers collectively provided supportive services to 285 individuals. Coalition Legal Service Providers (LSPs) provided services in 144 human trafficking cases during calendar year 2019, down from 203 cases in calendar year 2018.vii This may be due to the realities of the shelter in place orders in existence during the pandemic, not enough capacity to take on new cases, and cases taking longer time to attend to. A total of 72 clients were survivors of the most common type of trafficking, labor trafficking, in FY20. Additionally, the Santa Clara County District Attorney’s Office prosecuted 80 individuals for HT during FY20.viii Three LSPs, Bay Area Legal Aid (BALA), Katherine & George Alexander Community Law Center (KGACLC), and Step
Forward Foundation (SFF) shared data at the Human Trafficking Commission meeting on December 4, 2020. Collectively, these LSPs provide legal services to almost 400 survivors of GBV annually (a disaggregate data for LSPs is included.) **All three agencies reported receiving some county funding for human trafficking legal services, but little or no county funding for intimate partner abuse or sexual assault services - even though LSPs estimate annually serving roughly eight times the number of IPV survivors as the number of HT survivors.** In immigration cases, LSPs spend approximately 2-3 years on the initial T visa application. (T visas are non-immigrant visas available to victims of severe forms of human trafficking.) Legal providers also represent HT survivors in adjustment to permanent resident and naturalization if requested. These services add another 2-10 years to legal representation in T visa cases. U visa cases require an average of 7 years for the initial application and 8-10 years for adjustment to legal permanent residency. (U visas are non-immigrant visas available for victims of violent crimes.) Violence Against Women Act (VAWA) Adjustment to permanent residency and naturalization adds another 4 to 5 years to the service process.

**Recommendation #1: Ensure a Continuum of Culturally Responsive Policies, Services and Support that Prioritizes Survivors’ Wellbeing from Crisis to Long-Term Sustainability.**

Certify that state laws and county protocols requiring prompt access to an advocate following survivor identification are consistently upheld and enforced. Intimate partner abuse and SA survivors are not consistently or clearly notified that they have the critical right to an advocate and support person during all follow up interviews with law enforcement, prosecutors, or defense attorneys during civil court and/or criminal proceedings. Advocates assess and provide for urgent basic needs (food, shelter, clothing), review safety plan with survivors, offer confidential peer counseling, and link survivors to crucial services and community resources. Survivor needs will vary depending on various conditions, including but not limited to, individual circumstances (e.g. immigration status), resiliency factors, access to community resources, and established support networks. It is important to meet survivors where they are and to provide support that corresponds to their particular needs and circumstances.

**Ensure survivors have access to continuum of care that provides for seamless support from crisis to long-term sustainability.** Advocacy services should follow survivors from crisis to long term sustainability. The purpose of this case management approach is to afford survivors the support necessary to end both the cycle of violence and the cycle of poverty. This level of support requires a minimum of three years and an average of five years of case management and advocacy support. The focus during the first two years is establishing physical and emotional safety for the survivor and their children. This includes addressing the impacts of trauma, resolving legal issues (i.e., custody, restraining orders, employment law, immigration remedies and social services benefits), increasing social support networks, ensuring basic needs (e.g., shelter, food, transportation, medical and mental health care), and establishing long term housing. In years three to four, services center around acquiring life skills necessary for self-sufficiency, including but not limited to financial and digital literacy, job readiness programming, ESL classes, vocational training, apprenticeships, or formal schooling. Case management during the fifth year aims to ensure survivors have a safety net as they work towards sustaining stability.

Survivors also need access to secure housing throughout their journey from crisis to long term sustainability. Several VSPs are emphasizing this need during the COVID-19 pandemic and have recently reported that “requests for shelter have increased nearly 400% during the pandemic.” The recommendation to ensure seamless housing support is also included in the CEDAW Housing Report under Recommendation #1.

**Verify continued victim services funding and allow for flexibility to provide intersectional, long-term support.** Victim Service Providers (VSPs) require the
funding flexibility to shift the paradigm from crisis outputs to long-term outcomes. Flexible funding allows providers to meet survivors where they are and provide intersectional services that address all victimizations.

**Secure flexible funding that meets financial assistance needs of vulnerable and marginalized survivors.** Survivors of GBV often require financial assistance to cover a myriad of needs, including childcare, car repair (or car purchase), education related expenses, legal fees, and housing-related expenses. Access to flexible resources allows service providers to better support survivors, particularly those without legal status who are dependent and living in the cash economy due to immigration abuse. Reducing required documentation and lowering barriers to access can be achieved in several ways, such as allowing for direct payments to survivors, accepting survivor affidavits when formal documentation cannot be obtained, affordable drop-in childcare for all ages (not just 2+ years), and personal finance/workplace development programs in Asian and Pacific Islander languages.

**Guarantee prompt survivor access to essential documents and reports.** Survivors filing for restraining orders or immigration remedies need to have copies of police reports to evidence their victimization, including options to allow timely access while adhering to juvenile confidentiality law. If there is a case involving a minor victim or a minor suspect, the police report cannot be released without a court order. However, this law is in conflict with sexual assault survivors’ rights to have a copy of their police reports. This law also results in delays of filing restraining orders and in processing immigration filings and petitions. This issue should be addressed through local policy that makes exceptions in cases involving minors and sexual assault.

**Establish consistent language access for monolingual and limited English proficiency survivors, including and not limited to survivors from the Asian Pacific Islander (API) community.** Santa Clara County is a linguistically diverse community, with its residents speaking more than 100 languages. According to the 2010 US Census, more than half of Santa Clara County residents speak a language other than English at home, and the county has the highest percentage of foreign-born residents of any state. Yet county communication with residents and current language policy for Santa Clara County identifies only seven languages as most widely spoken, Spanish, Vietnamese, Mandarin, Tagalog, Korean, Hindi and Japanese; and most written county communication is officially provided for the four “most widely spoken” Spanish, Vietnamese, Mandarin, and Tagalog. This language access policy does not fully align with the best practice of language access and communication for all residents in their native spoken language; and the County needs to hold its standards and systems accountable to consistently apply resources and access to languages spoken by residents who do not fall into the main four language groups. This also includes expanding and consistently making available written and verbal information in the person’s native language and, beyond the use of the county’s newly contracted language line, a “language bank” of trained language advocates could also fill this gap.

**Increase funding for legal services, particularly in the area of immigration and family law.** Legal representation, specifically, in the area of immigration, takes several years, as noted earlier in this document. Family law representation can take several months and involve multiple court appearances. Santa Clara County funds a limited number of LSPs to represent HT survivors throughout the immigration process.

**Currently, the County provides little to no funding for immigration representation in cases of IPA and SA, and very few LSPs are funded to provide family law representation for GBV survivors.** The ongoing lack of access to pro or low bono immigration and family law attorneys, who can serve as legal representatives of survivors, not just as legal consultants, has added further stress for survivors struggling to escape their abusive situations in an already challenging time. LSPs currently have waiting lists for HT, IPA, and SA survivors pursuing immigration relief and/or family law representation. Legal support is also needed with filing restitution, record clearance, and legal representation in criminal proceedings by a victim rights attorney.
Invest in long-term approaches for GBV prevention. During FY20, DVAC agencies collectively reached over 700,000 individuals through the use of social media platforms. Additionally, more than 35,000 community members and professionals attended roughly 330 outreach events. Due to funding limitations, most outreach and prevention efforts are limited to short term projects aimed at creating general awareness amongst as many people as possible. In the past year and a half, the County has developed and funded new prevention projects. This funding has allowed service providers to develop stronger partnerships with the community and resulted in an increase in community responses to IPA and SA. Funding for multi-year projects to develop long-term sustainable change with policy implementation is necessary in order to create real, long lasting substantial change in the community about these critical issues.

Secure funding for Title IX Enforcement for SA throughout the county education system. With the Board vote in September 2020 to conduct Title IX Audit, it is imperative that funding is allocated now to design an accountability system and processes throughout the K through 12+ grade system.

**Recommendation #2: Advance an Intersectional, Collaborative Approach to Gender-Based Violence.** Consistently Screen for Different Forms of GBV across all VSPs, LSPs, and Law Enforcement Agencies (LEAs). Utilizing the Victim Needs Screening Tool (VNST) and implementing universal IPA education in local community health centers will build a system of care that incorporates intersectionality and breaks down silos. Violence against women can take many forms and generate complex intersections. It is important to build a system of care that incorporates intersectionality and breaks down silos. DVAC agencies have modeled the way with the Victim Services Screening Tool (VNST). The purpose of the VNST is to give service providers a screening tool that can identify the three common forms and intersections of gender-based violence (IPA, SA, and HT) and to ensure that individuals are promptly connected to all of the services for which they are eligible.

Foster opportunities for interdisciplinary and multidisciplinary collaboration and provide steady funding for coordination efforts. Multidisciplinary collaborations include and not limited to, partnerships among health providers, court systems, law enforcement, the District Attorney’s Office, legal service providers and victim service providers. Most interdisciplinary partnerships currently have no funding for coordination efforts. Multidisciplinary collaborations focused on GBV, such as the South Bay Coalition to End Human Trafficking, have time-limited funding to cover staffing needed for coordination and partnership building. Collaboration is nuanced and complex. Addressing GBV requires building and maintaining strong interdisciplinary and multidisciplinary collaborations. Interdisciplinary collaboration refers to partnerships among similar agencies (e.g. DVAC for IPA service providers), where the support and services are often jointly provided.

It is imperative that court systems provide protocols and rules that align with the protection and well-being of survivors of sexual assault and that the court systems offer alternatives including “opt-out” options for survivors for court processes that would otherwise put them in danger or further retraumatize them. Policies, rules, and laws in the court system need to reflect the best practice and standards on how to protect survivors and their children when it comes to mediation, court services, and decisions; e.g., custody of children. Both in legislative governmental policies on the state level and on the local level should partner with community organizations and advocacy groups to overhaul court rules and processes that are out dated and do not reflect the current accepted research on how to competently protect survivors of sexual assault.

Work together to increase access to mental health and substance abuse services for marginalized survivors by lowering barriers to connect VSPs and the County System. County behavioral health resources are limited to individuals that have Medi-Cal, which excludes undocumented survivors and also individuals who may have low income that keeps them from...
affording private therapy, but may not meet the extremely low income eligibility criteria to receive Medi-Cal coverage. This creates a significant barrier to mental health services for many survivors. Another barrier to mental health services is the County Call Center, which is the main portal for residents to access County Behavioral Health Services. Community feedback indicates that the Call Center is not only challenging to navigate when seeking mental health services by survivors, but is also an unwelcoming and intimidating system, where survivors are put on hold and made to wait for long periods of time, are not provided adequate and prompt language access, are declined options on choosing a preferred provider, and generally are not being listened to about their needs.

Recommendation #3: Build Capacity through Professional Training and Community Outreach.

Capacity building through training helps ensure that professionals working with survivors of GBV are equipped to meet the diverse needs of survivors. It is challenging for agencies to provide tailored trainings on the multitude of needs survivors present with, and, therefore, it is important to provide and coordinate trainings that allow agencies to maximize resources. In addition to meeting specialized needs of survivors, training can help professionals identify intersectional issues (e.g. domestic violence, sexual assault, and human trafficking). Similarly, community outreach trainings help build capacity in identifying and responding to situations involving gender-based violence. Laws related to GBV are nuanced and constantly changing. It is important to increase resources to produce relevant trainings and protocol development for Law Enforcement and prosecutors who could benefit from specialized training on topics that include:

1. understanding sexual services as forced labor;
2. requesting continued presence;
3. restitution; and
4. law enforcement certifications of U and T-Visas.

Create avenues for peer exchange and learning across disciplines. Effective collaboration, particularly multidisciplinary collaboration, requires a mutual understanding of roles, responsibilities, and policies. Peer exchange circles provide an opportunity to learn through non-conventional training techniques, including role plays, and to cultivate trusting partnerships across disciplines, and bridging language access policy with practice.

Increase VSPs’ capacity to support survivors with severe mental health issues. Victim service providers often find themselves providing support to a survivor with severe mental health issues but without the critical support and training to serve the unique and challenging needs of this population, particularly in emergency or transitional housing settings. While the county funds several behavioral health resources including residential housing for individuals with severe mental health issues, more training opportunities are needed for VSPs on how to access county behavioral health resources, which will increase service delivery for survivors.

Increase VSPs capacity to provide economic empowerment and self-sufficiency programming. Self-sufficiency programs break the cycle of poverty, ensuring all individuals and families are not just self-sufficient but can also thrive. Funding for self-sufficiency programs will allow VSPs to develop partnerships and curriculums necessary to support survivors who are struggling towards self-sufficiency, resulting in a more resilient community where survivors are prepared to weather the inevitable challenges and emergencies in life.

Provide training and mentorship opportunities for new family law attorneys. Only a few SCC nonprofit legal service providers offer family law representation. As a result, many low-income GBV survivors lack access to full scope representation. The county should invest funding to train, mentor, and build a strong pipeline of trauma-informed, survivor-centered attorneys.
Santa Clara County Task Force on the Convention on the Elimination of All Forms of Discrimination Against Women

Recommendations developed by the following Ad Hoc Committee members in partnership with the Office of Women’s Policy Staff:
Perla Flores, CEDAW member
Lisa Liddle, CEDAW member
Kati Robles, Office of Women’s Policy

Responses and Recommendations based on presentations at the November 18, 2020 meeting by:
Carla Collins, Office of Gender-Based Violence Prevention
Perla Flores, Community Solutions
Kim Walker, Forensic Exam (SAFE) Program
Esther Peralez-Dieckman, Next Door Solutions
Lauren Gavin, Office of Supportive Housing

CITATIONS / REFERENCES PROVIDED IN THIS REPORT:


vi Santa Clara County VMC Adult, Adolescent Sexual Assault Forensic Exam (SAFE) Program Presentation, CEDAW Taskforce Public Meeting, November 18, 2020; item 10(f) http://sccgov.iqm2.com/Citizens/Detail_Meeting.aspx?ID=12184


viii “COVID leaves some Bay Area domestic violence victims with nowhere to go,” Mercury News, March 3, 2021; https://www.mercurynews.com/2021/03/03/covid-leaves-some-bay-area-domestic-violence-victims-with-nowhere-to-go/?fbclid=IwAR1e48Jek5AAUPq2TlmSj7pRGraGoVE6ANZxlc0oF8zpCE6FBx0myWiY


Other Supplemental/Suggested Resources:

- VRAP Report- Draft https://www.facebook.com/110723157283109/posts/259532265735530/?d=n
- CAST Los Angeles, Year End Impact of Covid-19 on Human Trafficking Survivors (2020); https://www.castla.org/covid19/
## Glossary of Key Terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intimate Partner Abuse</strong></td>
<td>A pattern of abusive behaviors exerted by one individual in order to control or exercise power over his/her partner in the context of an intimate relationship. Abusive behaviors can be actual or threatened physical, sexual, financial, psychological, emotional, or stalking by an intimate partner or former intimate partner. An intimate partner can be a current or former spouse or non-marital partner, such as a boyfriend, girlfriend, or dating partner (Saltzman, et al., 1999). Intimate partners can be of the same or opposite sex (National Center for Injury Prevention and Control, 2002).</td>
</tr>
<tr>
<td><strong>Sexual Assault</strong></td>
<td>A term that includes any nonconsensual completed or attempted penetration of the vagina or anus, nonconsensual completed or attempted oral sex, nonconsensual intentional touching of a sexual nature, or nonconsensual non-contact acts of a sexual nature such as voyeurism and verbal or behavioral sexual harassment. Sexual violence can be perpetrated by anyone, such as a friend/acquaintance, a current or former spouse/partner, a family member, or a stranger (Basile and Saltzman, 2002).</td>
</tr>
<tr>
<td><strong>Human Trafficking</strong></td>
<td>A term that is defined by the Trafficking Victim Protection Act (TVPA) as <strong>Labor Trafficking:</strong> The recruitment, harboring, transportation, provision, or obtaining of person for labor or services through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.</td>
</tr>
<tr>
<td><strong>Sex Trafficking</strong></td>
<td>The recruitment, harboring, transportation, provision, or obtaining of person for the purpose of a commercial sex act where such act is induced by force, fraud, or coercion, or where the person induced to perform such act has not attained 18 years of age. (22 U.S.C. 7102 - The full text of the Victims of Trafficking and Violence Prevention Act of 2000 can be found at <a href="http://www.usdoj.gov/vawo/laws/vawo2000/">www.usdoj.gov/vawo/laws/vawo2000/</a> under 22 U.S.C. 7102.</td>
</tr>
</tbody>
</table>