

# Healthy Families – Family Health Action Team Weekly Meeting

## Meeting Minutes

Monday, April 4, 2022

Present: Kenneth Fowlkes, Kareem Lovelace-Crump, Mary O’Dowd, Elizabeth Coulter, Theresa Daniels, Tim Woody, John Nardi, Kathryn Corpuz  
Next meeting: Monday, April 18, 2022

### 1. Summary

- Main question to consider as we discuss the objectives – Who should we target or focus for these objectives?
- **Discussion: Goal #1 – Mitigating violence within families**
  - Considering the underlying strategy [addressing domestic violence through the education system](#):
    - This may be the most important piece to consider because we want to raise awareness to youth, the next generation.
    - Do schools have address topics like domestic violence?
      - Example provided that in Camden County, the focus was more on addressing bullying instead of domestic violence at home.
      - There are new student learning standards that are emphasized in the early elementary grad levels and topics cover healthy relationships, trusting adults, the basic of building a health family, etc.
        - An objective for us to consider is looking at the reporting or assessment of these standards. We can also consider an evaluation of the services available for families.
        - Also, since school districts are looking for support, we can also focus on approaches to get resources and information out to schools.
        - There is a need for mental health support too. School-based support programs should address the prevention side as well as providing interventions. We can recommend assessing the current state of these programs and disseminating information about programs/resources within schools.
      - Examples of organizations mentioned that can serve as resources – Good Grief, Family Connections
  - Considering the underlying strategy of [addressing domestic violence through the public health and healthcare systems](#):
    - Example provided of a report noting that people affected by domestic violence were seeking services at hospitals. We can consider partnering with community-based prevention programs and engaging with the hospital association.

- During the hospital admission/screening process, there are typically 2-3 questions geared towards assessing domestic violence. It would be important to strengthen training for healthcare workers around addressing domestic/sexual violence. How are questions asked? This is an important piece to consider as there may be missed opportunities for providing resources to the most vulnerable. Trainings can be provided through medical associations.
  - Project ECHO program – We might be able to leverage this, particularly this project might be able to support the development or identification of increased trainings for providers on how to assess violence among screened/admitted patients and connect them with services. We need to determine the right people to be involved. We can also consider involvement of provider organizations (e.g., state nursing association).
  - For consideration: Develop a collaboration among health providers to create an improved way of asking questions to assess instances of domestic violence.
- Considering the underlying strategy of [addressing domestic violence through community-based organizations and other government systems:](#)
- Groups that we would need to target: law enforcement, social workers
  - There is a need to fortify the referral network (e.g., creating a database or have efforts to establish a clearer network with resources to first responders)
  - Issues of equity and bias need to be addressed in the development of these programs. Trainings may oversee these issues. Some communities may be under-resourced (e.g., so certain trainings do not occur in some communities). The other issue is that people are afraid or do not trust the systems. These are all issues that need to be considered for training programs. Education and delivery of messages is an important piece too.
    - Questions to consider: How do we ensure people feel comfortable talking about issues within their own families and communities? How do we bring people to the right resources?
  - Who can engage with this work:
    - Community recreation centers can be leveraged
    - Coalitions (e.g., NJ Coalition to End Domestic Violence, NJ Coalition Against Sexual Assault)
    - Prosecutors and law enforcement – In particular, taking a closer look at the approaches for responding to and reporting domestic violence. An example was provided that for child abuse calls coming from a home with a history of domestic violence, both child abuse and domestic violence are reported.
    - Religious organizations (e.g., clergy)

- Considering the underlying strategy of addressing domestic violence through understanding and addressing inequities:
  - There are communities that do not trust the system. It will be important to understand why there is more resistance among minority communities.
  - Distrust in the system can expand to distrusting health providers, therapists, etc. How can we better address these inequities?
  - To allow us more time to think through this, we will table this as a discussion point for our next meeting.
- **Discussion: Goal #2 – Increase Access to Family Friendly Policies to Increase Family Resiliency**
  - Consider employers – both government and businesses
    - Public recognition or certification
      - Perhaps we can bring someone in to discuss potential strategies
      - NJ Business and Industry Association (NJBIA) – Updated practices on sexual harassment in the workplace.
        - Again, perhaps we can bring someone in to discuss with us how organizations/associations like this have addressed these issues
  - Flexible work arrangements, paid parental and sick leave, breastfeeding and childcare support, child benefits, and fair wages → We are looking to encourage businesses to have these policies
    - A Task Force can be established to bring together employer and public health communities. Prescriptive measure of what this Task Force will be working on should be established. We can reference related work of other already established task forces.
    - Include government, businesses, public health professionals, community leaders, and academic institutions
      - Academic institutions can provide a perspective and present evidence-based practices about how people can integrate back into to the workforce. They can also provide research about flexible work arrangements.
    - For our next meeting, we can discuss further who should be included in this task force and what their focus would be. (groups noted – EDA, DCF, DHS)

**2. Next Steps**

- Action items:

<b>Action Item</b>	<b>Responsible</b>	<b>Timeline</b>
Prepare notes from the meeting on 4/4/2022	Kathryna Corpuz	To be shared by 4/8/22
Share notes from the meeting on 4/4/22 with the team	Tim Woody	To be shared by 4/8/22
Find out more information about survey sent out to all school districts in NJ	John Nardi	By next meeting
Consider strategies for addressing inequities	All committee members	By next meeting
Consider members of the Task Force for Goal #2 and their focus area	All committee members	By next meeting