

SHELTER FOR FAMILY SAFETY

Mission:
To Prevent, Treat and Heal Trauma

South Dakota Society of Medical Assistants Conference
March 2023


Children's Home Society
BY TRACY LUTHE


Shelter for Family Safety
(Primary Children's Ave)


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Children's Inn History

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Founded in 1977: 2 bedroom home 

1979-1991: 4 bedroom home 


1991-2022: 14 to 24 bedroom facility 

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Expansion and New Name

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
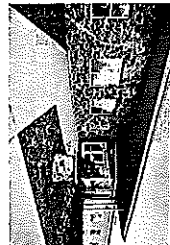
- November 2022 – Moved to 113 N. St. Paul Ave
- 96 beds/38 bedrooms
- Name became Children's Home Shelter for Family Safety



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Services Offered

- Emergency Shelter for Abuse Victims
- Crisis Intervention
- Counseling Services
- Case Management
- Parenting Education
- Support Groups
- Court Advocacy
- Community Education
- Children's Support Groups
- Rural Advocacy (Lincoln, McCook, Union, Turner, & rural Minnesota Counties)
- Respite Child Care

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
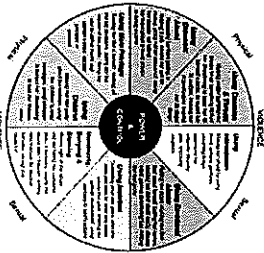
What is Domestic Violence?



- Domestic violence is the use of physical force or threats to control or maintain power over another person within the context of a family unit.
- Not only is physical violence involved, but also frightening or intimidating behavior over a long period of time.
- Battering is a pattern of behavior rather than an isolated incident, and without intervention it rarely, if ever, stops.
- Many people who are being abused do not see themselves as victims.
- Abusers do not see themselves as being abusive.
- People often think of domestic violence as physical violence, such as hitting, kicking, domestic violence spans other forms, such as psychological, emotional, or sexual abuse.

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Power and Control

- Coercion & Threats
- Intimidation
- Emotional Abuse
- Isolation
- Minimizing, Denying, Blaming
- Using Children
- Social Privilege
- Economic Abuse

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OF THE PACIFIC

Possible Behavior Signs

- Patient or abuser minimizes extent of injuries with inappropriate responses (cries, laughs).
- Abuser insists on accompanying patient, answers all questions, and refuses to leave the treatment area.
- Overt display of jealousy, obsession, or possessiveness by the abuser.
- Fearful, ashamed, evasive/guarded or embarrassed.
- Low self-esteem.
- Patient is reluctant to speak or disagree in front of abuser.
- Patient differs to partner.
- Patient embarrassment with poor eye contact.

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OF THE PACIFIC

Role of Medical Providers

- To empower the abuse survivor while attending to the immediate health concerns of the patient.
- Ensure confidentiality and safety.
 - How would you do this if the abuser is present?
- Provide an atmosphere where patients feel respected and taken seriously; tell the victims they do not deserve to be abused and that you are worried about their safety.

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OF THE PACIFIC

Role of Medical Providers

- Routinely ask patients about domestic violence using direct questions.
 - Do you feel safe at home?
 - Are you in a relationship in which you have been physically or sexually hurt or threatened?
 - Does your partner control your money or activities?
 - Have you been physically hit, kicked, choked, or otherwise hurt?
 - Your injuries have me concerned you may have experienced abuse. Is that the case?
- How would you handle a situation where you suspect abuse, but the victim denies abuse occurred?

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