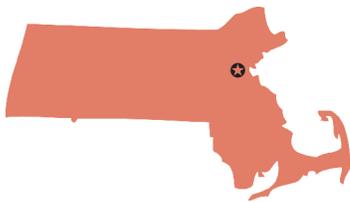


Employee Domestic Violence Policy Implementation Guide

Cambridge Public Health Department



STRATEGY: ORGANIZATIONAL POLICY DEVELOPMENT

Goal:

Develop a workplace domestic violence policy and create a step-by-step employee domestic violence policy implementation guide with a companion DVD to help other workplaces develop policies.

Population Impacted:

The employed working population of Cambridge (materials also available to employers nationwide).

In 2012, the **American Public Health Association (APHA)** provided six awards to strengthen health departments' capacity to reduce health inequities through policy development, implementation, and/or evaluation. The following describes the efforts of one of the awardees.

BACKGROUND

More than one in three women (36%) and more than one in four men (29%) in the United States have experienced rape, physical violence, and/or stalking by an intimate partner in their lifetime.¹ Intimate partner violence costs \$8.3 billion each year in lost productivity and medical care and mental health service expenditures alone.² Nearly 33% of women killed in U.S. workplaces between 2003 and 2008 were killed by a current or former intimate partner.³ Because of the frequency and toll of domestic violence, the Cambridge Public Health Department (CPHD) in Massachusetts has chosen to make this issue a priority.

PROCESS

To address domestic violence, CPHD developed an internal workplace domestic violence policy and documented the process via a step-by-step employee domestic violence policy implementation guide and companion DVD. The guide and DVD describe how to develop and implement a workplace domestic violence policy and how to talk about domestic violence in the workplace. This project was a great success in raising the awareness of the CPHD staff about workplace domestic violence, and the department hopes that its experience will serve as a model for other workplaces as well.

CPHD chose to focus on a domestic violence policy and formed a working group that met regularly to develop and refine the policy. CPHD is housed within a larger health care system and has experience developing policies for other agencies and consulting on policies related to domestic violence, dating violence, and a number of other public health topics. However, and this was its first experience creating a department-specific policy.

Staff were also instrumental in shaping the policy and volunteered to participate in the video. A suggestion box, e-mail updates, and staff meeting announcements were used to solicit staff feedback throughout the policy development process. In addition, after a quick introduction to the policy framework and a viewing of one of the videos at an all-staff meeting, the working group distributed a survey asking about the policy, its practicality, and the effectiveness of this type of messaging at work.

The survey results showed that the staff disagreed with the composition of the proposed domestic violence response team. This team was originally intended to consist only of management-level staff, who would conduct a threat assessment and respond to any staff safety and security needs. In their feedback, staff members expressed their belief that managers could be an obstacle for someone to disclose domestic violence. Staff members also provided valuable feedback regarding the trust they had in their coworkers and how they would want to disclose domestic violence at work. With this new information, the working group rewrote the policy to include non-management-level employees as part of the domestic violence response team.

OUTCOMES

Once the policy was drafted and approved by the chief public health officer, it was reviewed by CPHD legal and human resources staff to determine its compliance with department guidelines and regulations. The policy, which focuses on a clear definition of domestic violence in the workplace and how best to respond to an employee in need and a workplace under threat, was formally implemented on January 1, 2013.

In addition to developing the policy, CPHD created *Domestic Violence and the Workplace: A Policy Guide for Employers*, which includes an implementation guide and a companion DVD featuring three videos designed, filmed, and produced by the department. One of the videos focuses on domestic violence in the workplace and what it means, another documents step by step the creation and implementation of the policy, and a third describes how to talk to an employee facing domestic violence. Notably, Massachusetts attorney general Martha Coakley supported the project and appears in the first video. Thus far, the videos have been well received.

NEXT STEPS

Recruitment and training are under way for two new in-house domestic violence groups. The first, the workplace policy group, will monitor implementation of the policy with respect to such issues as compliance and readiness to respond and will review past incidents of workplace violence. The second group, the aforementioned domestic violence response team, will consist of four to six staff representatives trained to respond to threats of workplace domestic violence. This team will undergo training in threat assessment, safety planning, domestic violence resources, restraining orders, confidentiality, vicarious trauma, and self-care, as well as how to talk to an employee about domestic violence.

CPHD has begun promoting the guidebook and videos online. Further promotion plans include presentations to the Cambridge Chamber of Commerce, neighborhood business associations, and the Massachusetts-based organization Employers Against Domestic Violence. CPHD has also initiated conversations with the city of Cambridge and the Cambridge Health Alliance (the two largest employers in the city) to create their own workplace domestic violence policies.



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¹ Black MC, Basile KC, Breiding MJ, et al. The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention; 2011.

² Max W, Rice DP, Finkelstein E, Bardwell RA, Leadbetter S. The economic toll of intimate partner violence against women in the United States. *Violence Vict.* 2004;19(3):259–272.

³ Tiesman HM, Gurka KK, Konda S, Coben JH, Amandus HE. Workplace homicides among U.S. women: the role of intimate partner violence. *Ann Epidemiol.* 2012;22(4):277–284.