Objectives:

1. Further diversify their program revenue bases to advance financial sustainability.
2. Develop collaborations and integrated partnerships in the field of torture survivor rehabilitation to expand services and enhance long-term sustainability.
3. Recognize and address the warning signs and impact of compassion fatigue and vicarious trauma on staff and the organization.
Measured Impact Webinar

Financial Sustainability for Torture Survivor Rehabilitation Programs

September 19, 2018

Sustainability: Diversifying your Program’s Revenue Base

Options:
- Contributed Income/Private Funding
- Public/Government Funding
- Program Service Revenue/Billing

Contributed Income: Types of Potential Donors: Individuals

Individuals
- Small gifts
- Recurring contributions
- Major gifts
- Planned gifts
- Events
Contributed Income: Types of Potential Donors/Institutions

Foundations, Religious Groups, Corporations, Service Organizations, United Way

- Grant proposals
- Matching gifts
- Similarities and differences to working with individuals

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Individual Donors

Prospective Donor Identification, Cultivation, Solicitation, Acknowledgement, Stewardship

- Requires a fairly substantial investment of time and resources
- Done best by professional development or other management staff—in partnership with program staff
- Must be sustained over time
- Excellent way to generate unrestricted funds
- Generates both funds and other types of allies (advocacy, volunteers, etc.)
- Pays large and increasing dividends over time

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Individual Donor Identification

Locating Potential Donors

- Suggested by Board, staff, volunteers, advisory council members
- Attend events
- Self-identify through media coverage
- Locate you through your web site
- Learn about you on social media
- Annual reports of other organizations

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Individual Donor Cultivation

Building Relationships and Support
- Newsletters (print and electronic)
- Events
- Facility tours
- In-person meetings
- Phone calls

Individual Donor Solicitation

Asking for Financial Contributions
- In-person
- Mail
- Email
- Newsletter
- Telephone
- Events
- Web site

Individual Donor Acknowledgement

Thanking the Donor
- In-person
- Mail
- Email
- Newsletter
- Telephone
- Events
- Web site
- Prompt Acknowledgement is Essential
Individual Donor Stewardship

Ensuring Ongoing Support and Engagement
- In-person
- Mail
- Email
- Newsletter
- Telephone
- Events
- Web site
- Ongoing and Regular Contact is Essential

Institutional Donors

Prospective Donor Identification, Cultivation, Solicitation, Acknowledgement, Stewardship
- Requires less investment than individual fundraising in terms of time and resources
- Done best through partnerships involving development/management staff and program staff
- Excellent way to generate restricted funds; not so effective for unrestricted funds
- Pays significant dividends in the short term

Institutional Donor Identification

Locating Prospective Institutional Donors
- State Councils on Foundations
- State Nonprofit Organization Associations
- Annual Reports of Other Organizations
- Networking with Colleagues
Institutional Donor Cultivation

Building Relationships and Support
- Letters of inquiry
- Meetings at institutions’ offices
- Site visits
- In-person meeting preferred
- Objective: to be invited to submit a proposal

Institutional Donor Solicitation

The Grant Proposal
- Executive Summary
- Organizational History and Background
- Issue Statement, Including your Unique
- Capacity to Intervene
- Project Description
- Project Timeline
- Budget and Budget Narrative

Institutional Donor Acknowledgement

Thanking the Donor
- In-person
- Mail
- Email
- Newsletter
- Telephone
- Events
- Web site
- Prompt Acknowledgement is Essential
Institutional Donor Stewardship

Ensuring Ongoing Support and Engagement

- in-person
- Mail
- Email
- Newsletter
- Telephone
- Events
- Web site
- Somewhat Regular Contact is Essential

Public/Government Funders

Options

- Local: City and County
- State
- Federal

Public/Government Funders

Relevant Agencies and Departments

- Health
- Human Services
- Economic Development/Security
- Human Rights
- Education
- Public Safety
Public/Government Funders

Tips for Engaging with Government
- Key words and phrases: refugees, immigrants, health, mental health, health disparities
- Find a champion(s) in the bureaucracies
- Build relationships with elected officials
- Need to manage both political and professional staff relationships
- Sign up for listservs of grant and contract announcements
- Grants/contracts vs appropriations
- VOCA/VAWA

Program Service Revenue/Billing

Medical Billing
- Provides reimbursement for rehabilitative services including: diagnostic assessments; individual, group and family psychotherapy; psychiatry/medication management; medical care; psychologist consulting with physician; interpreters
- Refugee Medical Assistance: coverage up to eight months
- State and Federal Medicaid: income and residency/citizenship restrictions

Targeted Case Management
- Federal Medicaid program managed by states; part of state plan to CMMS
- Serves adults and children
- Aims to keep persons with serious and persistent mental illness out of the hospital and functioning independently in the world
- Eligibility and program objectives vary by state
Program Service Revenue/Billing

Billing Cons and Pros

- Complex
- Requires infrastructure
- Requires changes in clinic functioning
- Can be contracted out or done in-house
- Contracted services produce net revenue and are a good way to get started
- Contracted services don’t produce maximum revenue
- Billing can produce a lot of income

Some Additional Resources

Association of Fundraising Professionals: http://www.afpnet.org/
Council on Foundations: https://www.cof.org/
Foundation Affinity Groups: https://www.cof.org/organization-type/affinity-group
Refugee Health Technical Assistance Center: https://refugeehealthta.org/physical-mental-health/mental-health/
Medical Billing and Coding: https://www.medicalbillingandcoding.org/about/

Contact Information

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Questions?

Measured Impact Webinar
Organizational Sustainability Through Effective Community Partnerships
September 19, 2018

Presentation Goals
• Increased organizational navigation of a community engagement framework
• Increased organizational analysis of where you are, in order to plan where you will go
• Increased organizational application of specific platform tactics
Community engagement is a **process**.

It is the detailed process of working collaboratively with and through evolving groups of people affiliated by geographic proximity, special interest, or similar situations, to address issues affecting the well-being *for all* of those people.

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Community engagement is **local**.

It is place-based and relational, and so the scale of engagement, and the size of the geographic area, are virtually never larger than a city or county, frequently as small as a neighborhood, and with impacts and benefits *for all*.

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Community engagement requires **choice**.

Change occurs at the intersection of urgency and preparation, and the greater the benefits *for all in* the community, the greater the possibility of elevating the urgency of your issue to prepare for limited resources.
What Is Community Engagement?

Community engagement develops **change**.

It is not undertaken to affirm the status quo, but rather to build the changed conditions necessary to achieve a collective goal that is bold and broad enough to provide mutual benefits *for all* in the defined communities.

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Community Engagement Framework

A framework is a set of organizing principles that mobilize resources and actions to achieve common goals.

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Community Engagement Framework

**COLLECTIVE COMMUNITY GOAL – IMPACT**

“Vibrant torture treatment programs control health care costs, improve individual health system experiences, and increase health related outcomes *for all* in the community.”

**CHANGE STRATEGIES TO SUPPORT GOAL – OUTCOMES**

1. Increase diversification of program revenues
2. Increase community partnerships
3. Increase staff retention

**TACTICS TO CREATE PARTNERSHIPS – OUTPUTS**

Take action on the three community engagement platforms to increase community partnerships

**DATA TO AFFIRM TACTICS – ASSUMPTIONS**

Create a national repository of exemplary practices to replicate and adapt the strategies and tactics
In order to effectively implement tactics that achieve the strategy to increase community partnerships, we must first acknowledge that every organization is at a different stage in its organizational life cycle and partnership development. “Platforms” are a means to distinguish and leverage differences.

Platforms are a continuum of spaces for taking inventory of resources that are available for various iterations of community engagement, and building the most efficient, effective, and elegant relationships and programs possible with those resources.

Platforms acknowledge that community engagement is a cumulative and cyclical process of continuous building, with evolving stakeholders, in order to produce the changed conditions that will achieve a collective goal.
What Are Platforms?

Platforms are not steps, or stages, or levels, because community engagement is not a progressive race to a finish line, or a means to prioritize and judge one set of actions against another.

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Inform – Involve – Invest - Platforms

EQUALITY VERSUS EQUITY VERSUS CHANGE

Inform: With individuals in multiple organizations representing siloed sectors, group separate integration pathways, to establish two-way channels for periodic communications and outreach that cultivate empathy.

Involve: Build understanding and trust with other communities about the needs and strengths of the people they assist, about the differences and similarities in their organizational cultures, and about the constraints and flexibilities in their organizational mandates.

Invest: Build opportunities that benefit from long-term collective impact projects that are based on innovation and social entrepreneurship in broad ecosystems, and that develop new service systems, program metrics, and community assets.

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Community Engagement Self-Analysis

<table>
<thead>
<tr>
<th>TACTIC</th>
<th>EXAMPLES</th>
<th>INVEST</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Data Analysis</td>
<td>Identify key trends in community needs and resources.</td>
<td>Enhance program development.</td>
</tr>
<tr>
<td>2. Mapping</td>
<td>Identify key partnerships and resources.</td>
<td>Enhance network development.</td>
</tr>
<tr>
<td>5. Building Trust</td>
<td>Create a culture of trust and accountability.</td>
<td>Enhance collaborative trust.</td>
</tr>
<tr>
<td>6. Feedback</td>
<td>Collect and respond to feedback.</td>
<td>Enhance program improvement.</td>
</tr>
</tbody>
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Community Engagement Tactics

Example 1: Inform Platform. You have made or want to make a short video about the aspirations of survivors of torture. How do you leverage the effort?

Tactic #7 Feedback
Design an organizational culture not just for disseminating multimedia communications, but also for soliciting and responding to feedback and difficult questions. A response to feedback and questions is as important as the original communication. It is what makes it a dialogue.

Tactic #8 Shared Activities
Shared activities, either within a collaboration or with receiving communities (such as festivals, clubs, teams, mentoring, classes, and meetings), are an excellent forum to host your own videos, and an even better forum to host the videos of colleagues. This creates much more engagement and dialogue than just sharing links.

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9/19/2018
Example 2: Involve Platform. You have developed or want to develop a partnership with a municipal senior center. How do you organize this?

**Tactic #6 Trusted Convener**
A trusted convener (such as a community foundation, another nonprofit, a leader in the faith community, or a prominent business executive), is a valuable source not just for funding, but also for insights about potential partnerships. Develop the capacity to absorb new information from the perspective of other programs.

**Tactic #7 Communications and Data**
Become immersed in the language and data points of your partners, and reflect this in your own communications. Co-developed services are sustainable only to the extent that they are co-measured. Take the time to acknowledge the hard work and accomplishments of your partners, as much as your own work.

Example 3: Invest Platform. You have participated or want to participate in health equity planning. How do you add value for collective impact?

**Tactic #3 National Thought Leadership**
Research national thought leadership on this issue, and explore how its proponents are working in your community through foundations and government. Research the grants and awards that are received by colleagues for their collaborations in other communities, and develop a community of practice to learn from your colleagues.

**Tactic #7 Community-Based Participatory Research (CBPR)**
Use CBPR to formalize and measure your relatively priceless asset, which is the profound trust and understanding that you have with refugee communities. Develop consensus among key community partners, and especially including refugees, about the core questions that can and should be answered through research.
Community Engagement Tactics

Colorado African Organization

Involve Platform:
Elder Refugee Program
a partnership with the Denver Regional Council of Governments

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Community Engagement Tactics

Colorado African Organization

Invest Platform:
Colorado Center for Improving Value in Health Care
“Change Agent”

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Additional Resources

The full Community Engagement Toolkit, a Get-Started Guide, and examples of Toolkit tactics in practice can be found on the Welcoming Refugees website at:

http://www.welcomingrefugees.org/community-engagement-toolkit
Questions?

Measured Impact Webinar

Addressing the Cost of Caring in Survivors of Torture Programs

Adeyinka M. Akinsulure-Smith, PhD, ABPP
September 19, 2018

Overview

- Part 1: Understanding the Cost of Caring
  - Why we do what we do
  - Why discuss self-care?

- Part 2: Addressing the Cost of Caring within Torture Treatment Programs
  - Practical strategies for addressing retention and promoting self-care within the organization
Part 1: Understanding the Cost of Caring

Reflection...

- Why have you chosen this work?
- What do you like best about your work?
- What is the hardest thing about it?
- Why do you stay?

...Your Staff...

- Why have they chosen this work?
- What do they like best about their work?
- What do they say is the hardest thing about it?
- Why do they say they stay?
Burnout

The stress and frustration caused by the workplace.

Secondary Traumatic Stress (STS)

The result of bearing witness to a traumatic event (or series of events), which can lead to PTSD-like symptoms.
Vicarious Traumatization (VT)

Describes the transformation of our view of the world due to cumulative exposure to traumatic images and stories.

Compassion Fatigue (CF)

Refers to the profound emotional and physical erosion that takes place when helpers are unable to refuel and regenerate.

The definitions of both CF and VT include loss of meaning, purpose and hope.
Examples of CF/VT

- A female case manager working with women who have been sexually assaulted assumes that all the men she encounters are unsafe.
- A counselor finds himself thinking, “Yeah, right – whatever,” in response to a story told by a friend/client/colleague with whom he has always had a trusting relationship.
- A social worker whose favorite way to relax is to spend time with her children finds herself wishing they would go away.
- An outreach worker has nightmares about the traumatic experiences of her clients.

What do we know about this issue?

Helpers in MANY professions are vulnerable to CF/VT:

- Teachers
- Physicians
- Nurses
- Social Workers
- Animal Shelter Workers
- Paramedics
- Psychologists
- Shelter Workers
- Prison Therapists
- Judges
- Police Officers
- Chaplains...
Some of the Professions that are MOST vulnerable to CR/VT:

- Healthcare providers
- Mental health professionals
- Emergency service personnel
- Firemen
- Police
- Search & rescue teams


**WHY FOCUS ON THESE TOPICS TODAY?**
Main risk factors for CF/VT

1) Exposure to the stories (or images) of traumatized people
2) One’s empathic sensitivity to other people’s suffering, and
3) Any unresolved emotional issues that relate (affectively or symbolically) to the suffering seen.

*Saakvitne & Pearlman, 1996

Warning Signs of CF/VT*

- Physical
- Behavioral
- Psychological

*Saakvitne & Pearlman, 1996

Physical Signs

- Physical exhaustion
- Insomnia or hypersomnia
- Headaches and migraines
- Increased susceptibility to illness
- Somatization and hypochondria
Behavioral Signs and Symptoms

- Increased use of alcohol and drugs
- Other addictions
- Absenteeism
- Anger and irritability
- Exaggerated sense of responsibility
- Avoidance of clients

Behavioral Signs and Symptoms (Cont’d)

- Impaired ability to make decisions
- Forgetfulness
- Problems in personal relationships
- Attrition
- Compromised care for clients
- The silencing response

Psychological Signs and Symptoms

- Emotional exhaustion
- Distancing
- Negative self-image
- Depression
- Reduced ability to feel sympathy and empathy
- Cynicism and embitterment
- Resentment
- Dread of working with certain clients
- Feeling professional helplessness
Psychological Signs and Symptoms (Cont’d)

- Diminished sense of enjoyment/career
- Depersonalization
- Disruption of world view/heightened anxiety or irrational fears
- Increased sense of personal vulnerability
- Inability to tolerate strong feelings
- Problems with intimacy
- Hypervigilance
- Intrusive imagery
- Hypersensitivity to emotionally charged stimuli
- Insensitivity to emotional material
- Loss of hope
- Difficulty separating personal and professional lives
- Failure to nurture and develop non-work-related aspects of life

Warning signs of CF/VT on Torture Treatment Programs

- High rates of staff turn-over
- High rates of absences or tardiness
- Lack of communication and frequent miscommunication between co-workers and/or departments
- Increase in interpersonal conflicts between co-workers and/or between various parts of the organization
- Missed deadlines

Warning signs of CF/VT on Torture Treatment Programs (cont’d)

- Incomplete work
- Poor quality of work or service delivery
- Increase in customer/client complaints
- A negative atmosphere/low morale
- Less energy and motivation to do “extra” or to take sufficient time to do quality work as an organization
- A lack of emotional and/or physical safety in the organization
Questions?

Thank you for attending this webinar Todays presenters were

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• Paul Stein, Independent Consultant paulsteinrefugees@gmail.com
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