

Interview on Interpersonal Violence/Assault with Mary, a provider

Hello, my name is Susan and I would like to welcome you back to Rising from the Ashes, Trauma Talks, a podcast series brought to by the UB School of Social Work Institute on Trauma and Trauma Informed Care. This series provides an opportunity for individuals to share their witness of how strength and resiliency has allowed them to rise from the ashes. Trauma talks follows people who have both worked within the field of trauma, as well as those who have experienced trauma. Here we will reflect on how trauma informed care can assist those who have experienced traumatic events to embrace a new life of wholeness, hope, strength, courage, safety, trust, choice, collaboration, and empowerment. Today I am joined by Mary Murphy, the Executive Director of the Family Justice Center (FJC). On behalf of the institute we would like to thank you for being here today and sharing your story with us.

0:51 **Mary:** Thank you so much for having me, Susan.

0:53 **Susan:** So I am going to let you go ahead and let you give us a sense of how you began in the field of domestic violence.

1:00 **Mary:** In the interest of full disclosure, I am the furthest thing from an expert in domestic violence. I took over the FJC about 6 and a half years ago. And in my fourth and final year in my year of the Clarence town supervisor, it was the night of the plane crash in Clarence here in WNY. Where our police chief called me late at night at my home, where I thought he was going to tell me someone prominent from Orchard Park went down on the plane. But, he was calling me to say we had a murder in Orchard Park. He proceeded to tell me the body of Assiah was found brutally murdered in the cable company that she ran with her husband in Orchard Park. Assiah was my friend and we knew each other for 27 years. Prior to her and her husband purchasing the cable company, they had purchased a 7/11 right in the village in the heart of Orchard Park. Assiah's dream was enterprise. She owned it and was behind the counter mornings, noon, nights, over-nights on both weekdays and weekends. When she had babies during ownership she would bring them to work two days after giving birth. They'd be propped up in their little car seats when Assiah was on duty, which was all the time. I'd run down to get my coffee before heading into Eye Witness News, stand in line and look at those babies. And Assiah would pick my brain about journalism. She was drafting the operations plan at the cable enterprise, running the show at 7/11, taking care of two babies, two preteens from one of her husband's previous marriages, Assiah loved those kids like her own. So she was involved in school, sporting activities, and friends' homes, and very popular and loved by all of the community. I saw her every day for three years of my life, and some twice a day because our kids went to the grammar school right around the corner. Movie star pretty and as smart as they come, and I loved her just like everyone else did. Six months ago she rang my cell to tell me the body of Angela Moss had been found a several hundred feet away from the nursing home she worked at. Chief speculates that a young beautiful nurse died at the side of the road over a course of a few hours in the dark with a bullet that went right through her forehead. Angie was executed. Immediately upon the discovery of her body, her coworkers from the nightshift who were leaving in the early morning from the nursing home, told us that for some time they had suspected that she was in a long-term abusive relationship. 28 days before this her fiancé had influenced her to

sign over her life insurance policy and make him the beneficiary. They felt horrible knowing that something was going on in Angie's life. She came to work twice with a busted lip and coming in with makeup to cover up bruises. She had long sleeves on in the summer and when they were rolled up you'd see bruises. She was always beautifully put together and covered up well. Everyone kept it private, private, private. They didn't want to embarrass her and they didn't know how to have a conversation with her. They said they weren't sure if they should tell her what to do based on the way she presented herself not as a victim of domestic violence. These cases haunt me every day of my life, and I care very deeply. They are the reason that I work so hard in this work. I was set to leave office at the end of 2009 and back into the private sector, but someone sent me the description of the FJC, which caters to victims and families of domestic violence by taking anything and everything they need and putting them in one place. In a model where anyone walking through that front door has instant access to anything they need via collaboration response to this horror show in our society. Someone sent me the job description and I thought "you know, if I could have reached consolidation like this in government I would have stuck around for a couple other terms. I applied for the job, and four or five interviews later I was offered the job.

5:56 **Susan:** Do you mind telling us a little bit about some of the services that FJC provides?

6:02 **Mary:** A group about fifteen years ago, so the FJC is about ten years old, so a good 3-4-5 years prior to that, a group of about 100 members of this county got together and brainstormed how can we make this better? We have all these marvelous agencies, but the problem is, they are soloed. Have victims go here and then over there and back over here to tell their story again and again and again, re-traumatizing themselves. Not to mention any children in the room reliving this devastating scenario. So they thought they should get all of the people doing it and put them together in one spot. They zeroed in on how that may work by following someone trying to get out. First step is usually court for that emergency protection. In family court, that could take four or five hours. You're in there alone, you're traumatized, you're in full-blown crisis mode. What was happening is after waiting four or five hours they were told the story they just tried to tell didn't rise to the legal level, so go home and pull yourself together and come back in a month or a week when you pull yourself together and re-tell your story again. They were confused without an attorney-referee, tried to ask multiple people what was going to happen but no one responded at the desk for information. "If I go home, my husband had his throat on me in the corner last night, if I go back, I'm dead." Then they have to think about where they can bring their children and what other steps they have to take and it gets confusing. Then you are thinking about the traumatizing scene the children just saw, are they having a melt down? Do you need an appointment or a referral to go see a counselor? Should you go see your own counselor first if you have one? What we have found is that victims have found it easier to return to the abuser then they were navigating the systems that they were put in place to help get them out. So that's how FJC was established. The number one partner when they opened, thanks to the Violence Against Women Act Grant, they gave judicial district family court. So through the miracle of video-conferencing ten years ago, now Skyping as of a year ago, we can secure those orders of protection for our clients in the safety and sanctuary of the FJC. We have crisis services on speed-dial if anyone is presenting suicidal thoughts. Haven Houses on speed-dial if anyone needs to get whisked away to shelter in an anonymous location. The partners currently there, Neighborhood Legal Services, Divorce, Customs-Support. We are in the main court building

with legal entities right in the building. So if someone comes in with something that doesn't fall in to our jurisdiction at FJC, we can call one of our numerous partners right in the building. For the elderly clients, they come up and down on the elevator to different offices so we can sit with the client. We are the only forensic medical office for domestic violence in all of New York State. This is Chet Foxes baby. They founded this forensic medical unit in all of New York State. We partner with UB School of Medicine. They founded it 10-15 years ago when the group of 100 people were together trying to do it better. The FJC has hired two nurses to run our forensic unit. Their job is to describe the injuries of the body with high-tech digital pictures that will become evidence for another one of our partners, the District Attorney's Office, for our clients that want to hold their abuser accountable. The body mapping, the pictures, and the charges go right over to the District Attorney Office. So it's a phenomenal one-stop model for clients. I left out a few partners but we have Buffalo Police there with a full time police officer and a report technician who are both there five days a week. So anyone in Buffalo who calls for a domestic violence complaint, 99% of the time they get a little card that says the only place they can file a charge in the City of Buffalo is a the FJC. So they come in to file charges, sit with a domestic violence advocate who spells out all of the different partners right then and there that they can have access to in person, with Skyping, or an intake on the phone, Child Advocacy Center, whatever. In addition to charges they can get injuries documented, talk to Neighborhood Legal Services, or you name it get that order of protection. We have four specialized domestic violence advocates: One is Court Advocacy — anyone who wants information on an order of protection sits with one to spell out the actions, and then we do a danger assessment to allow the advocate to understand the likelihood of the case going lethal. And puts the assessment of risk into the narrative for the petition of the order of protection. And it's actually the court that asks us to conduct this risk assessment which is a series of yes or no questions: Have you ever been strangled? Is your perpetrator drinking and drugging themselves? Has your perpetrator ever threatened to blow your brains out if you leave? Kill the kids if you leave? Is a child who isn't his involved in this? Depending on the yes or no answer, and what question it is, there is a number assigned. Then the advocate adds up the numbers and there is a little chart telling them the likelihood of this going lethal. Obviously no one has a crystal ball, but it helps the advocate get their arms around the danger and most importantly the victim some sense of relief. Most victims of domestic violence don't consider themselves ones, and it's the judges that will decide sometimes only based on times and dates that are woven into the narrative and petition. Like "February 13th at 8 PM he strangled me, I've got a series of texts on January 4th 2AM to 4AM threatening to kill me." So the advocates helps them weave that into the narrative and petition at court, we fax it over to the judge on the bench ready to hear the client, we bring them into the court room there is a bible right there. It is adorable, there are quotes on the wall. We swear them right in, and one button: Judge right there with our client in court room in our closet on the bench. One button, client comes up and we're done. It takes about forty minutes. And when the judge makes the decision, we are always approved because we work with the client and we do the injury assessment and the risk assessment, and the judge faxes that order over, and our advocate, based on the risk assessment and the order the judge has given us, can customize a safety plan that goes right up here in our head, we don't dare right it down because it can be a dangerous time when the perpetrator gets wind that power and danger has unraveled. So we customize it to telling us, and sometimes it can be very practical like "okay you can go live with your cousins next door neighbor in Rochester for three weeks and the perpetrator will have no idea where you will be, we are giving you a Hope Line Phone that no one can trace but you can use in an emergency." So

we have the plan all spelled out. And then practical advice like “don’t post on FB that you are going to Rochester,” know you are dealing with traumatized individuals in crisis mode, who because of this trauma are maybe not thinking in the right mind frame or as clearly as they would to make the most logical decision that they could. To even articulate exactly what is going on. I have a group of 25 women that I’ve met in the last six and a half years, who have been through trauma informed counseling, who have left the abuser, and in some cases moved on to other relationships. They inform a lot of the work that we do, and they tell me it’s really important to inform the public with outreach. Even if we are in middle schools and high schools. Anywhere with classic cases of domestic violence, these are women ranging now from 19-82 in age. I meet with these women once a year now, and they tell me when they were in their main classic case of domestic violence, none of them would have considered themselves in domestic violence cases. Really? So when you were in it and heard the term, what did you think? “Oh, those poor women! What are horrible, horrible thing!” Okay, but what poor women? “Well, women living in trailer parks in the city, or women living in large cities and urban ghettos! But not us.” Okay, so what language do you use to describe your relationship? Now we are seeing the lightbulbs go off. It was difficult, it was a rollercoaster, and eventually they had no highs and the lows were terrifying 24/7. “It was a rocky relationship. I just tip-toed all the time trying not to set him off, knowing if I just did that and not this, and this and not that, he wouldn’t be set off. If I was just a little better wife, or a little better girlfriend, none of this would have happened.” It wasn’t until someone else put the classic cases of domestic violence check list — is this healthy is this okay? — right in front of them. Is your every move controlled? Have you been isolated from family and friends? Are you told what to do, where to go, who to hang out with? Are you on the receiving hours upon ends of humiliation, screaming and humiliating on personality flaws? Are you humiliated publicly? When we were checking them off and I’m telling you, it went off like fireworks on the Fourth of July! This goes beyond difficult. This is called abuse. This is what we stress to all of our clients: NOBODY deserves to be in an abusive relationship. It isn’t your fault, and you sure as heck aren’t responsible for this! Those 25 women told me that they were 100% brainwashed into believing “Yup! This is your fault. Yup! You deserve it. Yup! You’re responsible.” So that is something we really stress upon when we are doing public outreach or our advocates are sitting one-on-one with a client. It’s not your fault! You are absolutely- positively not responsible for this. And nobody but nobody deserves to be abused! These are conversations that have such an impact on our clients. My 25 women that got out told me that the emotion that triumphed fear dead if you leave was shame. “What did I do to make this person who so loved me? Who called me his soul-mate, who swept me off my feet in this romance like no other romance? What did I do to make this person feel this way about me?” Not understanding, and that’s what our advocates help them understand, that charming, loving, angel, talented, popular, angel that swept you off your feet — that’s a fake. The real person is the monster underneath who has isolated you from your family. Who has left you feeling worthless? Has made you feel utterly convinced this is all your fault and you deserve it. That’s the real person. And the ability of that monster to morph into that fake who you fell in love with is just another tool in the tool-box. We watched that video, along with the rest of the country, the rest of the world, about that NFL player dragging out of the elevator by her ankle, his fiancé! By the time that went viral, it was weeks, months later, she married him. And the first question I answered that night, I was out speaking to kids, “she went back! Why did she— she married him! Why? Why did she marry him?” And I thought to myself, this is going to be a good teaching moment. Number one, the question we should be asking is why does he abuse? We are never going to blame the victim for something

some Perp/Abuser/Punk does! But what we needed to help people understand is the impact of trauma, right? The patients of domestic violence have experienced severe trauma, we're talking PTSD here! As are their children, right? And we need people to understand, and if there is one bright spot in this horse show is that, these punks/ perpetrators /abusers, they're all playing out of the same playbook. So if we can teach kids at a young age what those big red flags and warning signs are, then I think we have a good chance of stopping it. One of the classic signs is that a relationship goes from 0 to 1,000 miles like that! *snaps finger at 20:31* Victim-to-be, swept off her feet by charming, loving, angel, popular, funny. Not realizing the person starts immediately isolating from family and friends and zoning in on just that one person, flaws that he won't let go, a list of rules that apply to her but not him, right? That's the real person. And that's why it takes on average 7-8 attempts to permanently get out of an abusive relationship. We get it. And that's why it's so important for anyone who is trying to help someone who is in an abusive relationship, if their dealing with a trauma informed trained advocate who is skilled and experienced and talented.

21:16 **Susan:** So one of the main principles of trauma informed care is the principle of safety and women, or men, survivors, are coming in seeking help — and we know it's probably after multiple attempts of seeking help — how do you help them feel safe? Could you talk a little bit about that?

21:36 **Mary:** First of all, we take anything bureaucratic out of it. Even though we are in the main court building down town, you walk through those doors and we have murals ceiling to floor. You walk up these three stairs and you see a three story atrium and you look right and there is a little door right into our center. And we let them know when you ring the bell for your safety we just need to know the name because we want to make sure no one coming in is a perpetrator. So that little sense of, "Hi welcome to the FJC, just put your name on that little piece of paper and we are going to check this out for you and get you in here as quickly as possible." We do that and it's really quick, and then we get them into one of our six client waiting rooms. Beautiful colors in the rooms, I would live here in a second! And so they walk in with beautiful fabrics and colors on the walls and gorgeous leather furniture downtown. We don't put the over-head lights on, we have beautiful gorgeous lamps and side-tables and it gives people first of all, a sense of, you're safe here. And that's a really big deal. Landscapes from the waterfront and the city-scape downtown. Inspiring quotes on the walls to just get people to sit and think, "You know what I do deserve a beautiful surrounding like this. And I feel so safe and cozy here!" We don't want them to run into anyone they know, so we send them to these beautiful client living rooms — that's THEIR. SPACE. — As long as they are there. Our advocate comes in and spells out all of the different services, and they get to make the choice. We figure all of the controls have been removed from their lives, so we are never ever, ever going to tell a client what to do. We spell out the numerous options and they get to pick and tell their own story to the advocate. And if there is anything else they need, the advocate is going to figure out if we don't have it then who do we get on the phone, or who do we make the referral to?

24:08 **Susan:** That's great. So people not only get to make their own choices, but really collaborate in their own recovery process.

24:16 **Mary:** Absolutely! And our advocate always asks "can we call you in a week, in month?"

Is it safe to call you?” We want to see where you are in your journey. We understand that it takes 7-8 attempts, so they may need nothing right there in that day, they don’t have their arms around the power and control wheel and still have to figure out things. We never want them to feel too embarrassed to come back because we told them to do this this and this and I didn’t do anything. So we put the power right back into their hands.

24:46 **Susan:** And that kind of helps build trust for you as well if you have someone who is kind of willing to be there through any step through any emotional place that that person is in at that moment.

25:01 **Mary:** Our forensic medical unit nurses, one is a former hospice nurse — they are extraordinarily dedicated when it comes to gentleness and non-judgement. So, so many, my 25 women say, just be so careful and conscientious of being judged, and our nurses and staff are totally able to understand that. Our nurses are able to bond with the clients quickly, and are looking sometimes at every inch of their body — so their job, and what is going to make it so effective for the client is that trust — and our nurses are extraordinarily gifted when it comes to trust. And keeping that trust. I watch it happen every day, where they go to leave and are hugging and kissing people. I see it in the hallways with laughter coming out of the living rooms. They tell me, “I felt like such a freak, like this was my fault, like the only one in the world going through this— and I realized I’m not a freak, it’s not my fault. And I now have a plan. Now on my journey to healing and wholeness, and with a relationship someday (not with the perpetrator, obviously!)

26:29 **Susan:** So when women are, because I know that a majority are women —

26:35 **Mary:** We do see men, I always have to say that. But honestly, just like you articulated perfectly, the majority are women.

26:40 **Susan:** But when an individual are coming in to get services and they bring children in. Who are watching this children? How does that work when kids come in?

26:47 **Mary:** We have a beautiful child playroom. And we have three centers so we have child areas in all three centers. We have many retired professionals, those are a core of our staff. These are retired attorneys, doctors, social workers, teachers from every walk of life who have been thoroughly trained, and screened, and investigated, and trained some more. And if it’s okay with mom, or dad, we separate the child from the parent. We don’t want them sitting in the room reliving the details that they are already living with 24/7. They go into one of our adorable playrooms with the volunteer. And they can be in there 3, 4 hours depending on if mom is there for an order of protection, and mom can certainly run back in and check on them. They are certainly welcome to go back into the living room with mom, but our volunteers are good. Many have grandchildren and have experience when it comes to bonding and playing with children. We don’t put them in front of a video. Actually one of them put on a play with another one the other day. We have tons of toys. Junior League came into our downtown center with a bright wall and butterflies and birds and flowers on another wall. And it’s packed with books and toys and stuffed animals. The kids love it in there. And we are close with Child Adolescence Treatment Center (CATC), and under the CATC umbrella is Child Advocacy Center. So if any

child needs therapeutic play, counseling, assessment, we can make that happen.

28:24 **Susan:** So it sounds like you're providing trauma informed care for children coming in as well. I mean private space, private services as well. That's wonderful. Well, is there anything else you'd like to add before we start to wrap up?

28:38 **Mary:** I think it's really important for the FJC to go out of business. I'd like them to go out of business because there is no need for us. What frightens me and keeps me awake at night is that there is no state-wide program in the schools. I get called in constantly to high schools and middle schools. And the teachers in the high schools are telling me by high school we feel it's too late because they are already seeing these behaviors in the cycles repeating and repeating. Ditto the middle schools. So if you are out there listening to this and you work in the middle school or are a parent of a middle schooler and you're in the high school, call us. I will come in and present. But more important I sit on a council now that assists for the New York State Department of Prevention of Domestic Violence. And I think that department needs to get to work and set programs in place that will be across New York State. With healthy and unhealthy relationship checklists and training for kids. The cycle repeats and repeats and repeats. And they are learning these behaviors at home.

29:47 **Susan:** Well thank you. We will post those numbers on the website so it will come with the podcast. On behalf of the Institute on Trauma and Trauma Informed Care, I'd like to thank you for taking time to speak with me today.

29:58 **Mary:** Thank you Susan. Thank you.