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COVID-19: Guidance for Tribal Programs

**Adapted from NNEDV Guidance to State Coalitions*

The COVID-19 pandemic has domestic violence programs and shelters around the country in uncharted territory. Please see below for information for Tribal programs to use to provide services during this unprecedented time. As this situation evolves, this guidance document may change and be improved as new lessons are learned and new research or additional guidance become available.

Implementing a pandemic/emergency response is a dynamic process, therefore shelter plans should include procedures for periodically assessing sustainability and utilization of resources during the pandemic/health crisis.

NIWRC will continue to monitor the situation, provide updated guidance, and advocate at the national level to ensure resources for and information is shared with Tribes, Tribal programs and services.

Confidentiality

- A program receiving Violence Against Women Act (VAWA), Victims of Crime Act (VOCA), or Family Violence Prevention and Services Act (FVPSA) funds **CANNOT** disclose survivors' personally identifying information, unless mandated to do so by a statute or court order.
- Where they exist, Tribal DV/SA programs and coalitions continue to provide life-saving advocacy and support to victims of domestic/dating violence, stalking, sexual assault and sex trafficking. Such advocacy and support are often all that stands between victims surviving and victims who go missing and/or are murdered. Voluntarily choosing to report suspected cases of COVID-19 violates federal confidentiality laws, but more importantly, may further endanger victims.
- Reporting a case of COVID-19 could trigger invasive inquiries that require identifying information on all the people who interacted with the reported person. It may result in breaching the confidentiality of multiple clients and exposing many of them to various harm. Beyond being located, it could trigger child protective service (CPS) investigations that could be used against a survivor to challenge custody.

Precautionary Measures

- Given the contagious and increasing spread of this virus, Tribal programs should develop and implement preventive protocols for regularly disinfecting shelter service areas, particularly frequently touched services such as doorknobs, light switches, and cabinet handles. [View strategies for proper cleaning and disinfection](#) by the Centers for Disease Control and Prevention (CDC).
- Preventative precautionary measures should be in place regardless of whether there is anyone who has identified potential exposure. With COVID-19, it is possible that residents or staff have been exposed or are carrying the virus without showing any symptoms.
- If a Tribal program has reason to believe someone in the shelter has been exposed to the virus, they must act responsibly to prevent the spread to other staff and residents. Request the person exposed to self-isolate for 14 days or quarantine if positive. This will require an isolation room. All areas the person occupied and/or visited will need to be disinfected. Everyone exposed to the person or areas they visited can be infected.
- The program should also make an announcement, such as, “We have reason to believe that there may have been exposure to [name infectious disease] in our facility. Here are the measures we are taking.” (This is similar to what schools do when they send a letter home indicating, “A person in your child’s school has [whooping cough, lice, measles, etc.]. Please watch for these symptoms and contact your doctor.”)
- Follow all general guidelines about [“social distancing” and other prevention strategies](#) (e.g., hand washing, etc.) that have been issued by public health authorities, such as the World Health Organization (WHO) or the Centers for Disease Control and Prevention (CDC).
 - A best practice is to assign a staff member(s) to check the WHO and CDC for the newest guidelines every day.
 - It is important to set up strict social distancing practices in all public spaces. Consider setting a rotating schedule for using shared spaces for staff and clients.

Provision of Alternative Services

- Programs should not attempt to medically screen for COVID-19, and they should not use health status to discriminate in access to programs.

- One option to limit further spread of COVID-19 and flatten the curve is to screen for fever. If program participant is sick, alternative shelter should be offered.
- Programs can locate information about testing and offer to assist in accessing the information for anyone who wants it and/or refer a program participant to a local clinic or medical care provider.
- If a person is found to have been exposed to COVID-19 (or other serious infectious diseases), generally the health care worker who completed the testing will have a protocol they ask them to follow (e.g., admit, quarantine or isolate).
- In coordination between Tribes, states, the federal government, and their respective health services (e.g., clinics, public health departments and hospitals), patients will receive appropriate guidance, including recommendations for admission or quarantine.
- If a resident discloses that they were asked to isolate, programs should consider using off-site hotel rooms or alternative housing options.
- If hotels are unavailable due to mandated closure, Tribes, as sovereigns can utilize their properties for domestic violence shelter when/where possible.
- Due to shortages, Tribal programs and other advocates will likely need to work with state entities to access Personal Protective Equipment (PPE), appropriate sanitation materials, and to ensure that hotels remain as essential during shelter in place circumstances.
- At no time should residents be housed in large dormitory style settings with multiple families/persons to a room. Whenever possible residential housing should provide individual quarters per survivor/family.
- Shelters should consider moving as many of their services as possible to mobile, remote or tech-based services.
 - Read more about [Using Technology to Communicate with Survivors During a Public Health Crisis](#), and see the [Digital Services Toolkit by the National Network to End Domestic Violence \(NNEDV\)](#).
 - Read more about [using technology in the day-to-day operations of your program](#).
 - [Read more about NNEDV's best practices for mobile advocacy](#).

Additional Things to Keep in Mind

- Programs need to balance the needs of their residents and program participants with their capacity to adequately staff the shelter or program and make decisions according to their emergency response plan(s). The nature of the COVID-19 pandemic will vary from Tribe to Tribe, community to community, and as a result, local authorities including Tribes are issuing different regulations, guidelines and access to resources/testing. Please research and obtain the latest information about local COVID-19 activity from your local public health officials.
- Programs must pay attention to their local laws and their state or tribal public health guidance (which is changing daily); those specific details are beyond the scope of the technical assistance that NIWRC can provide at this time.

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