2020 National Conference on Health and Domestic Violence Call for Abstract Submissions
Submission Deadline: Monday, July 29th, 2019 11:59pm PT

We are excited to invite you to submit to present at the 2020 National Conference on Health and Domestic Violence happening in Chicago, Illinois at the Hilton Chicago.

- **Tuesday, April 28th**: *Pre-Conference Institutes* – In depth, half-day/full-day, skill-building sessions led or designed by the Conference Steering Committee members. We are not soliciting submissions for Pre-Conference Institutes, but we invite you to attend!
- **Wednesday, April 29th** - **Thursday, April 30th**: *Two-day Conference* - Over 300 speakers, 70+ workshops, exhibit hall with poster presentations, plenary panels, and more.

**About the National Conference on Health and Domestic Violence (NCHDV)**
The National Conference on Health and Domestic Violence is a biennial event put on by the National Health Resource Center on Domestic Violence (HRC) at Futures Without Violence. This conference addresses domestic and sexual violence including teen dating violence/adolescent relationship abuse, and reproductive coercion as well as other forms of violence that often overlap with domestic and sexual violence including child abuse and trauma, elder abuse, human trafficking, bullying and community violence. For almost two decades, the National Health Resource Center on Domestic Violence has supported health care professionals, domestic violence experts, survivors, and policy makers at all levels as they improve health care’s response to domestic violence. The HRC and National Conference on Health and Domestic Violence is funded by a grant from the Family Violence Prevention & Services Program, Family & Youth Services Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.

**Conference Goals:**
The National Conference on Health and Domestic Violence provides valuable professional education on the latest research, practice, policy and advocacy responses to domestic and sexual violence for community based advocates and health professionals. The 2020 National Conference on Health and Domestic Violence will seek to contribute to the reduction, prevention, and end of domestic/sexual violence and other forms of violence and promote the health, healing, and wellness of communities and survivors by:

- Creating opportunities to foster relationships, engage in reflection, and advance collective strategies;
Offering programming that leaves participants feeling inspired, connected, challenged, renewed, and activated;

Highlighting the most recent promising practices and innovative partnership approaches that address or examine:
  - The ways in which domestic/sexual violence impacts individual and community health and well-being.
  - Connections between domestic/sexual violence, other forms of violence, and systems that perpetuate harm and oppression.
  - Shared community-based, social justice, and public health solutions and prevention approaches.

Featuring new research about risk and protective factors, physical/mental health effects of violence, health and advocacy-based innovations, and prevention; and

Featuring health and domestic violence policy strategies that support improved health and public health responses to violence and prevention.

**ABSTRACT SUBMISSION GUIDELINES**

The National Conference on Health and Domestic Violence seeks submissions that highlight research reports, practice innovations, advocacy initiatives, educational advances, and/or community programs that address one or more aspects related to domestic/sexual violence, other forms of violence, and health.

**Who Should Submit:**

- Domestic/sexual violence advocates and others who work in anti-violence movements
- Domestic/sexual violence survivors and survivors of other forms of violence.
- Health care practitioners including but not limited to: community health workers, dental hygienists, dentists, doulas, emergency medical services personnel, geriatric health practitioners, health educators, health navigators, HIV care navigators, medical assistants, mental and behavioral health providers, nurse practitioners, nurses, pediatric

**Accessibility at the 2020 NCHDV and during abstract submission**

- The Conference will take place over three floors of the Hilton Chicago which are all accessible by elevators and/or ramps. Learn more about physical/space accessibility at the Hilton Chicago.
- Microphones, computers, and projectors will be provided in every room.
- Language interpretation can be requested during conference registration and abstract submission.
- The abstract submission process is through an online portal. If this presents a barrier to your submission, please contact Kate: kvandertuig@futureswithoutviolence.org or call 415-678-5500.
health practitioners, maternal health practitioners, midwives, physical and occupational therapists, physician assistants, physicians, promotoras, psychologists, reproductive health practitioners, sexual assault forensic examiners, social workers, and others

- Health administrators, health information or coding specialist quality assurance analysts
- Health professional school educators and administrators
- Local/State/Tribal officials and government employees
- Organizers, activists, community leaders, local government officials
- Practitioners from affiliated or intersecting health equity and social justice movements
- Policy makers and analysts
- Public health practitioners
- Researchers
- Students and campus leaders
- ...and more!

**Session Types:** Please choose a session type that matches the nature of your presentation topic and objectives.

**Scientific Report:** Presentation of results of a research-based, scientific study that is current and objective. Single presenter. 10-minute presentation, with 5-minute question/answer/discussion period (15 minutes total).

**Innovative Program/Promising Practice Report:** Presentation of an innovative program/promising practice issue, concept, strategy or program that presents new and effective ways of improving the health response to violence, supporting survivor health, violence prevention, or other topics that align with conference goals. Single presenter preferred and a maximum of two. Twenty-minute presentation, with 5-minute question/answer/discussion period (25 minutes total).

**Symposium:** An in-depth discussion of a single key issue, area, or concept related to health, domestic/sexual violence, and aligns with the conference goals. Symposia should utilize appropriate adult education techniques, with an emphasis on discussion and participant interaction. One lead presenter and a maximum of three additional presenters are suggested (80 minutes total).

**Workshop:** A skills-focused session designed to teach, enhance or strengthen specific, practical skills of participants. Workshops should incorporate participatory and up to date adult educational techniques such as problem-based or team-based learning, with an emphasis on interactive learning and skills practice. One lead presenter/facilitator and a maximum of three additional presenters are suggested (80 minutes total).
**Poster:** A visual presentation of the results of a research-based scientific study or an innovative program/promising practice. Posters will be available for viewing during the entire Conference. Two presenters maximum. Presenters will be asked to be available for informal discussion with participants during Poster Session presentation times at the conference. Poster presentations do not need to be printed on formal presentation posters, but should be readable and accessible to participants and not take up more than 4’x4’ space.

**Subject Categories:**

Submissions will be organized into subject categories so that conference participants are able to attend tracks that are targeted for specific audiences. We recognize that your presentation may fall across several categories, **so please select two Subject Categories in order of preference.** For all submission categories, we encourage survivor leadership and voices as well as submissions that address how violence and health intersect with other issues such as food insecurity, homelessness, racism, etc.

1. **Adolescent Health and Youth Leadership:** Effects of domestic/sexual violence and other forms of interpersonal violence on adolescents’ health, social/emotional development, well-being; models or innovative health care responses focused on intervention or prevention; anticipatory guidance regarding healthy relationships; innovations, practices, models that utilize, prioritize and develop youth leadership and youth driven solutions; community specific and community-based strategies to promote adolescent health and youth leadership in anti-violence movements; and more.

2. **Advocacy:** Innovations in domestic/sexual violence advocacy programs including but not limited to: shelter-based health care programs or services; health care-based advocacy services; innovations in service delivery that promote well-being, health, or whole-family approaches; community specific and community-based strategies to promote survivor health and leadership in anti-violence movements; and more.

3. **Assessment and Intervention:** Evaluated and/or innovative clinical strategies to support survivors and people who harm, including trauma/healing centered assessment tools and intervention methods; and more.

4. **Child Trauma and Health:** Effects of domestic/sexual violence and trauma on children’s health, social/emotional development, and well-being. Appropriate health care and public health responses; overlap with child abuse/maltreatment, child sexual abuse, and other forms of adversity and violence in childhood and shared solutions; intergenerational transmission of trauma; community specific and community-based strategies to promote maternal and child health; and more.
5. **Educating and Engaging Providers:** Evidence-based or innovative approaches to education for health care providers, health professional students and policy makers; health student curriculum change; and more.

6. **Elder Health and Leadership:** Effects of domestic/sexual violence, elder abuse/exploitation, and trauma on older people’s health and well-being. Appropriate health care, advocacy, and public health responses; community specific and community-based strategies to promote elder’s health, healing, and safety; intergenerational transmission of trauma; and more.

7. **Impact of Domestic/Sexual Violence and Trauma on Health and Well-being:** Research and/or programs that explain or address the ways that violence and trauma impact the health and well-being of survivors, people who harm, and/or specific communities; survivor-led strategies for survivor health and wellness.

8. **Health Policy Innovation:** Policy strategies that promote survivor health and violence prevention: business and service delivery issues related to HIPPA; reimbursement strategies; health information technology; expansion of healthcare access; changes to harmful mandatory reporting practices, and/or state, tribal, provincial, regional or local regulations that prevent violence or support survivor health.

9. **Prevention:** Model or promising public health programs or prevention focused initiatives that address root causes of violence and shared risk and protective factors between domestic and sexual violence and other forms of violence; health promotion strategies that utilize media or innovative messaging and seek to change social norms including: community-based, faith-based, school-based and health education and behavior programs.

10. **Research Methods:** Innovations in study design, methods, measures, promising practices for survivor centered research, community based participatory research, and more.

11. **Technology:** Advances and critical issues in telemedicine; electronic health records and data management; use of technology to assist survivors, health care providers, and others; and how technology is used to harm, and innovations that combat tech-based abuse.

12. **Systems and Institution Change:** Innovative changes to public health, victim services, and other systems that survivors come in contact with; systemic, institutional, or environmental changes that reduce harm or prevent violence such as workplace strategies that address vicarious trauma of staff, innovations in systems to work with people who harm, organizational development, efforts to work against systemic and institutional racism and other oppressions, and more.

13. **Special and Emerging Topics:** Other topics not previously listed that are related to the conference theme or to the field in general.
Selection Criteria:

Abstracts will be reviewed and scored based on:

- Alignment with conference goals;
- Demonstration of the value of survivor leadership and perspectives;
- Clear description of objectives, content, and teaching methodologies to address the educational needs of participants.

Particular interest will be paid to submissions that:

- Are presented by people with lived experience of the submission topic.
- Present new or innovative approaches to prevention and healthcare or public health approaches to violence.
- Highlight new learnings and shared strategies/solutions on the intersections of domestic violence and health with other experiences of violence including: sexual violence, child abuse, child sexual abuse, sex and labor trafficking, harassment, stalking, community violence, gun violence, state violence, and other forms of gender-based violence.
- Incorporate analysis, learnings, and shared strategies from intersecting health equity and justice movements including but not limited to: Disability Justice; Environmental Justice; Housing, Food, and Economic Justice/Equity; Immigrant and Refugee Rights/Justice; Indigenous Rights; Justice for/rights of people living with HIV and decriminalization of HIV; Justice for survivors who have been incarcerated; Labor Justice/Workers’ Rights; Lesbian, Gay, Bisexual, Asexual, Queer Justice; Maternal Health, Birth, and Reproductive Justice; Prisoner rights and health; Racial Justice; Sex work decriminalization; Trans, Non-binary, Gender Non-conforming, Intersex Justice; Rural health; Trauma informed care; Veteran health.
- Complicate or probe common binaries in the anti-violence field/movement: victim vs. perpetrator, staying vs. leaving, practitioner vs. client/survivor, etc.
- Include public health strategies and services for those who harm; models for accountability that are alternatives to the current criminal legal system including Transformative and Restorative Justice, LGBTQ community responses, faith community responses, violence intervention models, and models from other countries.

Please note: The Conference Steering Committee typically receives many more submissions than can be accepted. Submissions for oral presentation are very competitive, with workshop and symposium submissions being most competitive. In order to accommodate the largest number of excellent abstracts, the Committee may need to allocate a shorter time period than requested or to accept an abstract as a poster rather than as an oral presentation. Applicants will be given an opportunity to update the description, learning objectives and speaker(s) as appropriate.
Information Required for Each Submission:

- **Title** *(limit 50 words)*
- **Short description of presentation for Program Book** *(limit 80 words)*
- **Learning objectives for Program Book**: Describe the objectives or purpose of presentation by finishing the prompt: “As a result of participating in this session, participants will:”
- **Accessibility and Language Access Needs**: Please indicate any accessibility or interpretation needs for your presentation. For more information on accessibility at the conference see above description or conference website. This information will be blinded to reviewers and have no effect on acceptance.
- **Community/Group focus** Please describe how the program or research being submitted addresses the impact of violence on a particular community or communities and/or promotes the healing, power, and wellness of a specific marginalized or oppressed community or communities. If your work/research does not explicitly do this, please leave this section blank.
- **Publication/Presentation Information**: If you have presented this work at other conferences, if it has been published, or if you have submitted this paper for publication please describe here (Earlier publication/presentation does not jeopardize acceptance.)
- **Presenter(s) contact information** Provide the following information for each presenter: full name, email address, degrees/credentials, position title, organization, mailing address, phone number.
- **Co-authors or collaborators information** *(if applicable)* List names of co-authors or collaborators who were associated with your project or research who you wish to recognize, but will not be acting as presenters.
- **Short biography for each presenter for Program Book** *(limit 100 words)*
- **Conflict of Interest declaration** Each presenter will receive an email prompting them to complete their own disclosure form. The abstract submission cannot be concluded until each disclosure form has been submitted.

**Abstract text** *(choose one Session Type)*:
We recommend you copy and paste your abstract and other lengthy information as Plain Text from a word processor such as Microsoft Word or Note Pad. Please note that formatting commands (italics, bold, tables, bullets, etc.) and symbols may not transfer.

**Scientific Report** *(10 minute presentation, 5 minute discussion)* *(limit 400 words)*
Note: Preference will be given to reports of research that have been completed by the abstract submission deadline.
Include information under each of the following specific category headings:
• Study/Research Objective: Describe the research question(s) or study objectives
• Background: Provide an overview of the issue, including a brief summary of related research and/or scholarship in the field, along with other relevant information.
• Methods/Design: Describe the study setting and location, research design, sample size, description of subjects or participants, inclusion/exclusion criteria, data collection methods, measures, analysis plan, and other relevant information.
• Results: Describe key findings. Interim results may be included for studies that are in-progress at the time of submission.
• Discussion and Recommendations: Discuss the strengths and limitations of the study, implications for further research, policy or practice, and recommendations. Include clinical or programmatic applications, and other relevant information.
• Presentation Methodology: Briefly describe anticipated presentation methods if the abstract is accepted (e.g. power point, video, storytelling, etc.)

Innovative Program/Promising Practice Report (20 minute presentation, 5 minute discussion) (limit 400 words)
Include information under each of the following specific category headings. This information will be used by reviewers to score abstracts and will not be printed in the program book:
• Background: Provide any necessary overview of the issue and needs addressed by the program or promising practice.
• Program Description and Goals: Describe the intervention or program and its intended goals.
• Program/Practice Outcomes: Describe the experience, results, or outcomes of the program.
• Discussion and Recommendations: Discuss the implications of the program or promising practice. What are the lessons learned and logical next steps for this program or practice, or for others that share similar characteristics? What makes this program unique or pioneering in the field?
• Presentation Methodology: Briefly describe anticipated presentation methods if the abstract is accepted (e.g. power point, video, storytelling, etc.)

Symposium (80 minutes) (limit 400 words)
Include information under each of the following specific category headings:

• Symposium Overview: Describe the issue(s) to be discussed, placing it/them in appropriate context considering the field in general and the Conference goal in particular. Include a summary, as appropriate, of relevant research, scholarship, or programmatic advances in the field.
● **Activities and Timeline:** Describe, in detail, what the conference participant will experience during the Symposium. What topics will be covered? How will participants engage with the material? Include a timeline of activities.

● **Presentation Methodology:** Briefly describe anticipated presentation methods if the abstract is accepted (e.g. power point, video, storytelling, etc.)

**Workshop (80 minutes) (limit 400 words)**

Include information under each of the following specific category headings:

- **Background and Need:** Describe any important background information and demonstrate the need or gap filled by this skill building session.
- **Workshop Overview:** Describe the topics to be addressed, and the specific practice, policy or research skills or collective strategies that will be acquired or enhanced.
- **Activities and Timeline:** Describe, in detail, what the conference participant will experience during the Workshop. What topics will be covered? How will participants engage with the material? Include a timeline of activities.
- **Presentation Methodology:** Briefly describe anticipated presentation methods if the abstract is accepted (e.g. power point, video, storytelling, etc.)

**Poster (limit 300 words)**

Include information under each of the following specific category headings:

- **Background:** Provide an overview of the issue, and the practice or policy needs addressed.
- **Program Description or Study Design:** Describe the intervention/program, or the research design, study setting and location, description of subjects or participants, and other relevant information.
- **Results:** Describe the experience, results or outcomes.
- **Discussion and Recommendations:** Discuss the implications of the work presented in the poster. What are the lessons learned and next steps?

**Submission Deadline and Important Details for Applicants:**
Submission Deadline: Monday, July 29th, 2019 11:59pm PT

- Accepted Scientific Reports and Innovative Programs/Promising Practice Reports will be grouped according to topic or theme by the Conference staff. Typically, three to four abstracts will be grouped for presentation in a single 80-minute session. Each session will be assigned a moderator to ensure time limits are followed.
- Upon receipt of acceptance, you will be asked to confirm your participation by following the instructions contained in the acceptance letter from Futures Without Violence.
• For each abstract that is selected, one presenter will be eligible for discounted registration to the Conference. Note: additional fees apply for the pre-conference institutes. A separate scholarship application will be available on the conference website when registration opens.
• Notification of abstract acceptance will be made by early November 2019. Notification emails will be sent to the email provided in your submission, so please double check the email address is correctly entered!
• Those with limited internet access or other accessibility needs may submit proposals in hard copy format. Please contact Graciela Olguin for hard copy submission instructions:
  Futures Without Violence
  Graciela Olguin
  100 Montgomery Street, The Presidio
  San Francisco, CA 94129-1718
  Phone: (415) 678-5500 Email: golguin@futureswithoutviolence.org

Ready to submit?
Once you have entered the title of your submission, you will be sent an email that includes a password-protected hyperlink. If you interrupt the submission process before finishing, you can resume at any time by clicking on the hyperlink in that email. To access help submitting an abstract online, e-mail technical support. For urgently needed technical support, phone (401) 334-0220 between the hours of 8:30 am and 6:00 pm Monday through Friday, Eastern Time.

Login to Resume or Edit Submission:
If you have already submitted an abstract title -- and you wish to resume, edit, or withdraw that submission you can do so online up until the submission deadline. You can view your submitted abstract at any time, including after the submission deadline has passed. The confirming email mentioned above (from NCHDV@confex.com) will contain a direct link to your submission.

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http://nchdv.confex.com/nchdv/reminder.cgi