



COVID-19 UPDATE

January 2021

As members of our community wait hopefully for the upcoming vaccine, CASDA continues to maintain and re-evaluate service adjustments to help control the spread of the virus. To maximize the health and safety of shelter residents, outreach clients, staff, and the general public, the following measures remain in effect until further notice:

- Requests for assistance may be made via our 24-hour help line (715-392-3136; 800-649-2921); our website (<https://casda.org/get-help/>) or our general email address. (info@casda.org). ***Only the phone line is staffed 24/7.**
- In-person advocacy is available for our shelter residents only or by special arrangement with CASDA (e.g. for court accompaniment).
- In-person volunteer shifts are cancelled until further notice.
- The majority of our staff are working from home to limit in-person contact within our offices and common areas.

Despite the impact on our full scope of services, CASDA is committed to supporting victims and survivors of abuse:

- We will continue to triage incoming calls and to offer crisis counseling, safety planning, information/referrals, and the option for emergency shelter screening when appropriate.
- Weekly support group meetings are available via an online platform, with supplemental “CASDA Chats” forthcoming on our YouTube channel.
- Our advocates have stayed in touch with clients via remote channels wherever possible.
- PAVSA’s Sexual Assault Nurse Examiners are still responding to local hospital emergency rooms based on their availability. When a victim is a Wisconsin resident, a CASDA advocate will offer brief on-site support when possible, and follow-up services in all cases.
- Our Public Education Program is available via remote means, such as Zoom. To request a speaker or educational materials, please contact jill@casda.org.

CASDA administration will continue to revisit these and all other service adjustments regularly to assess the need for maintaining or modifying them based on any new information or directives from government public health officials and our state domestic/sexual violence coalitions.