



Recognize and End Domestic Violence

Domestic violence information

What is domestic violence?

Domestic violence or abuse is what someone says or does over and over again to make you feel afraid or to control you. People who are elderly, frail, have a disability, or who depend on others for assistance may not be able to protect themselves from domestic violence or abuse. Minnesota has a law to protect and assist people who are vulnerable to abuse or who are not able to care for themselves. Examples of violence or abuse include:

- Swearing or screaming at you
- Calling you names
- Taking money or property without permission or against your wishes
- Threatening to hurt you or others you care about
- Failing to provide care for you by someone whose responsibility it is to do so
- Not letting you leave your house
- Blaming you for everything that goes wrong
- Stalking you
- Being touched against your wishes or forced to have sex
- Choking, grabbing, hitting, pushing, pinching or kicking you.

What services are available to victims of domestic violence or abuse?

Toll-free Hotlines have counselors who provide services, including:

- Crisis counseling
- Safety planning
- Assistance with finding shelter.

Referrals to other organizations including:

- Legal services support groups
- Advocacy with the police.

If you are in danger from domestic violence or abuse and need help, call:

- The National Domestic Violence Hotline at 800-799-7233, (TTY: 800-787-3224)
- The Minnesota Coalition for Battered Women at 866-289-6177 or
- The Minnesota Day One Emergency Shelter and Crisis Hotline at 800-223-1111.

The **Safe At Home (SAH) Program** is a statewide address confidentiality program that assists survivors of domestic violence, sexual assault, stalking and others who fear for their safety by providing a substitute address for people who move or are about to move to a new location unknown to their aggressors. For information on this program, contact Safe At Home at 651-201-1399 or 866-723-3035.

Vulnerable adults

Call the Senior LinkAge Line at 800-333-2433 to report concerns and to help a vulnerable adult get needed protection and assistance. Ask your worker for more resource information.

What are domestic violence waivers?

If you are eligible for public assistance and you experience domestic violence, certain program requirements may not apply in your situation.

Waivers are available for eligible public assistance applicants who apply for the following programs: Supplemental Nutrition Assistance Program (SNAP), General Assistance (GA), Diversionary Work Program (DWP), Minnesota Family Investment Program (MFIP), Medical Assistance and MinnesotaCare.

If domestic violence or abuse makes it hard for you to follow program rules, talk to your county worker.

Waivers of SNAP rules

This brochure must be given to all households that apply for SNAP. If your available gross income is less than the SNAP program limits, you may be eligible for benefits. The value of assets and vehicles are not used when determining your eligibility for SNAP.

Waivers of DWP and MFIP rules

If you or your child is a victim of past or current domestic violence, you may be eligible for a Family Violence Waiver in DWP and MFIP. When you are on DWP, once you have an approved Family Violence Waiver, your family will transition to MFIP where:

- You may not need to follow all employment rules
- You will be exempt from the 60-month time limit while you have this waiver.

To get a Family Violence Waiver you must:

- Tell your county worker you want an MFIP Family Violence Waiver
- Provide one of the following items:
 - A statement from a battered women's or sexual assault advocate
 - A statement from a professional, like a doctor, nurse, clergy, counselor or social worker who knows of the abuse
 - A sworn statement from a neighbor, family member or co-worker who knows of the abuse, and a sworn statement from yourself
 - A police report
 - A copy of a restraining order, order for protection or a harassment order.

If you need help getting any of these items, talk to a domestic violence advocate or your county worker.

- Develop and follow a plan that includes activities to keep you safe.

What is a plan?

Your plan is developed with a person trained in domestic violence prevention and a job counselor or county worker. The plan will take your situation into account and include activities to help you become employed.

The plan will:

- Make the safety of you and your children a priority
- Include only safe work and training activities.

It is imperative that your plan and goals are realistic and can work for you. The plan does not guarantee your safety. If you need to change the plan or cannot follow it, contact your county worker as soon as possible.

Other important things to know

- If you do not follow your plan and do not notify your job counselor or case manager, your MFIP grant may be reduced or closed.

- If you have questions about the MFIP Family Violence Waiver, call the Minnesota Coalition for Battered Women at 866-289-6177 or the Minnesota Day One Emergency Shelter and Crisis Hotline at 800-223-1111. If you are in crisis, call **651-646-0994**.
- If you are denied a waiver, or if your waiver is canceled, you can appeal.
- You may be able to get legal advice or help with an appeal from your local legal aid office. To contact your local legal aid office, call 888-354-5522.

If you have questions

For questions about the MFIP Domestic Violence Waiver, contact your local county worker.

For TTY and Speech-to-Speech relay service, use your preferred relay service.

How do I appeal?

If you do not agree with the action the county takes on your application, ask your county worker for an explanation on the action.

You may see the policy manuals, rules or laws that give the reasons for the action. If you still do not agree, you may appeal. Your county worker will help you ask for an appeal hearing, or contact:

Minnesota Department of Human Services
Appeals Office
P.O. Box 64941
St. Paul, MN 55164-0941
Metro: 651-431-3600 (Voice)
Greater Minnesota: 800-657-3510 or use your preferred relay service
Fax: 651-431-7523

You should bring any facts to the hearing that will help you explain why you do not agree. If you want a lawyer, ask your worker for information about free legal services. You may bring people to the hearing to give information about the facts. After you and the county have talked about your case, a human services judge will decide the case and you will receive the decision in the mail.

If you are still not satisfied, you have 30 days to appeal to the state district court.

Your right to privacy

Generally the facts asked for by the human services office are called "private." This means that you may see facts about yourself, but they are not open to the public. Certain other government agencies may see them too. You have the right to question what you think is wrong in your file.

For more facts about data privacy, ask your county worker or write the Minnesota Department of Human Services.

Civil Rights Notice

Discrimination is against the law. The Minnesota Department of Human Services (DHS) does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- marital status
- age
- disability
- sex
- political beliefs

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by a human services agency.

Contact **DHS** directly only if you have a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North, Suite 201
St. Paul, MN 55104
651-539-1100 (voice) 800-657-3704 (toll free)
711 or 1-800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.mdhr@state.mn.us

U.S. Department of Health and Human Services' Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion

Contact the **OCR** directly to file a complaint:

Office for Civil Rights
U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue Suite 240
Chicago, IL 60601
Customer Response Center:
Toll-free: 800-368-1019 TDD Toll-free: 800-537-7697
Email: ocrmail@hhs.gov

U.S. Department of Agriculture

You have the right to file a complaint with the USDA, a federal agency, if you believe you have been discriminated against because of race, color, age, sex, national origin, disability, religious creed or political beliefs in the administration of SNAP.

In accordance with Federal civil rights law and **U.S. Department of Agriculture (USDA)** civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

1. mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
 2. fax: (202) 690-7442; or
 3. email: program.intake@usda.gov.
- This institution is an equal opportunity provider.

Attention. If you need free help interpreting this document, ask your worker or call the number below for your language.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اطلب ذلك من مشرفك أو اتصل على الرقم 1-800-358-0377.

သတိ။ ဤစာရွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ သင့်လူမှုရေးအလုပ်သမား အားမေးမြန်း ခြင်းသို့ မဟုတ် 1-844-217-3563 ကိုခေါ်ဆိုပါ။

ຄំណត់ສໍາຄານ ၁ ၊ ပြီးမှန်ကုသမှုအတွက်အကူအညီပေးခြင်းအတွက်အကူအညီပေးခြင်း၊ လူမှုဆွေမျက်နှာပြင်ကူညီရေးအဖွဲ့အစည်းများ၊ ပုဂ္ဂိုလ်ရေးနှင့် ပုဂ္ဂိုလ်ရေးအဖွဲ့များအား 1-888-468-3787 ၊

請注意，如果您需要免費協助傳譯這份文件，請告訴您的工作人員或撥打1-844-217-3564。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, demandez à votre agent chargé du traitement de cas ou appelez le 1-844-217-3548.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntauv no pub dawb, ces nug koj tus neeg lis dej num los sis hu rau 1-888-486-8377.

ဟ်သုတ်ဟ်သးဘၣ်တက့ၢ်. ဝဲန့ၢ်လိၣ်ဘၣ်တၢ်မၤစၢၤကလိၤလၢတၢ်ကကျိးထံဝဲဒၣ်လိၣ် တီလိၣ်စိတခါအိၤန့ၣ်.သံက့ၢ်ဘၣ်ပုၤဂုၤဝဲအပုၤမၤစၢၤကလိၤလၢနီၤမ့တ မ့ၢ်ကိးဘၣ် 1-844-217-3549 တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 담당자에게 문의하시거나 1-844-217-3565으로 연락하십시오.

ໂປຣຕຊາບ. ຖ້າທ່ານ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພໍດີ, ຈົ່ງຖາມພະນັກງານກຳກັບການຊ່ວຍເຫຼືອ ຂອງທ່ານ ຫຼື ໂທໂທ 1-888-487-8251.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, hojjettoota kee gaafadhu ykn afaan ati dubbattuuf bilbili 1-888-234-3798.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, обратитесь к своему социальному работнику или позвоните по телефону 1-888-562-5877.

Digniin. Haddii aad u baahantahay caawimaad lacag-la' aan ah ee tarjumaadda qoraalkan, hawladeenkaaga weydiiso ama wac lambarka 1-888-547-8829.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, comuníquese con su trabajador o llame al 1-888-428-3438.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi nhân viên xã hội của quý vị hoặc gọi số 1-888-554-8759.

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For accessible formats of this information, ask your county worker. For assistance with additional equal access to human services, contact your county's ADA coordinator. ADA4 (2-18)