**Teal Talk, S2:E7 – The Connection Between DV, SV, and Brain Injury with
Rachel Ramirez & Kasey Holderbaum of the Ohio Domestic Violence Network**

**Taylr Ucker-Lauderman**Welcome to Teal Talk, a podcast brought to you by the Ohio Alliance to End Sexual Violence – that’s OAESV for short. We’re your hosts, Taylr

**Laurie Hamame**and Laurie

**Taylr Ucker-Lauderman**and each episode, we speak with professionals in the field to dive deep into the intersectional issuesthat affect survivors in Ohio.

**Laurie Hamame**Before we begin, we want to give a content warning that we will be discussing sexual violence and otherissues that may be upsetting and triggering. If you need help, please feel free to call our resource line at888.886.8388 during regular business hours, or the Ohio Sexual Violence Helpline 24/7 at 844.644.6435.Please take care of yourself.

Hello, hello, and welcome to our seventh episode of Teal Talk. My name is Laurie Hamame. I'm the Communications & Content Coordinator. Taylr, can you believe it's already October?

**Taylr Ucker-Lauderman**I really can't. This year has flown by. And I think partly because we've all been so busy and been doing so many great projects and great things. And I'm really excited that also for this episode, we get to hear a little bit more from our guests and what they've been doing this year. I'm Taylr, I'm the Chief Officer of Communications & Engagement at OAESV.

**Laurie Hamame**Yeah, so while April is our big month with SAAM, just six months later, we get to learn all about domestic violence. And we're doing that today. And we're learning about the crossovers with two wonderful guests from the Ohio Domestic Violence Network.

**Taylr Ucker-Lauderman**
So domestic violence and sexual violence are very connected as are other forms of violence because they're both rooted in oppression and the abuse of power. And because there is a lot of crossover. It's clear that violence perpetuates violence. And bringing awareness to these connections allows us to educate and to further prevent the cycles of both forms of assault. This is especially important this month because October is Domestic Violence Awareness Month.

**Laurie Hamame**
It's my pleasure to introduce two guests today. First, we have Rachel Ramirez. She is the Director of Health and Disability Programs and the Founder of the Center on Partner-Inflicted Brain Injury at The Ohio Domestic Violence Network (ODVN). Her focus is on supporting professionals and systems to better understand traumatic stress and the impact of brain injury, which translates into more accessible and effective services. She provides extensive statewide, national, and international training, technical assistance, consultation, and program support. Rachel has co-authored several peer-reviewed journal articles and has been featured on National Public Radio as well as in The New York Times Magazine and The Washington Post. Rachel is a licensed independent social worker and a registered advocate with senior standing and has been with ODVN for 16 years. Hi Rachel!

**Rachel Ramirez**Thank you so much for having us. I've been in Ohio for a long time and then lots of projects with OAESV over the years. I actually was at ODVN before there was an OAESV. So it's always wonderful to be able to continue to build our relationships and to be able to talk about all the ways in which our works intersect and connect. So thanks so much for having us.

**Laurie Hamame**Awesome. And next we have Kasey Holderbaum, the Health & Disability Project Coordinator with ODVN. She facilitates the COSTS project, working with the Forensic Nursing Network and Brain Injury Association of Ohio to strengthen pathways and services and eliminate barriers for survivors of violence. Her background is in victim advocacy, shelter case management and prevention education in Colorado and Texas. She is currently working to obtain a Master’s of Public Administration from Ohio University, where she also earned a BA in Psychology in 2013. Hello, Kasey!

**Kasey Holderbaum**Hi, thanks for having us here. Really excited to talk about these intersections and the importance of domestic violence coming up for DVAM.

**Taylr Ucker-Lauderman**Okay, so with October being Domestic Violence Awareness Month, I would love for you all to tell our audience a little bit more about some of the focus areas that you all are working on this October. And also if you want to say a little bit more about your specific teams and projects that you're working on when it comes to the disability and brain injury.

**Rachel Ramirez**So October is Domestic Violence Awareness Month, and we're excited to have this focus on this as a part of your podcast. We will be celebrating our annual Domestic Violence Awareness Month Press Day on October 11 at the Statehouse, of course, everybody is invited, and we would love to have you join us. One of the things that we will be doing is we will very much be celebrating our line item and the state budget. For those of you who might not have been aware, it wasn't until very recently that Ohio provided any kind of funding for domestic violence programs. It wasn't until about four years ago that there was any money at all for domestic violence programs in the Ohio budget, which left domestic violence programs heavily underfunded, heavily dependent on federal funding. So we're very excited about the funding that is able to support the 76 member programs across the state. Another thing that we will be doing at the Statehouse is every year we release our annual fatality counts, that really details the lives that have been lost to domestic violence every year in Ohio. I think for me, it's always, you know, talk so much about how the stakes couldn't be much higher. But really, what can we learn about our fatalities? What can we understand? And how can we really help do that work that we need to do upstream to really prevent people from losing their lives to domestic violence. The other piece we will definitely be talking about, as many of you might know that Ohio is the 50th and last state to have felony strangulation legislation of something that's very close to Kasey and my heart. We'll be talking about a little bit later about the connection between domestic violence, sexual violence, and brain injury. But we also will be highlighting that and providing the Croucher Family Violence Award to some leaders who have really made a difference in the domestic violence services this year. So we're very excited to be doing all of that.

**Kasey Holderbaum**Yeah, I think Rachel really covered kind of what we're preparing for for October and Domestic Violence Awareness Month.

**Taylr Ucker-Lauderman**Kasey, do you want to talk a little bit more about your role and the projects that you're working on?

**Kasey Holderbaum**As Laurie mentioned, I facilitate what's called our COSTS collaboration, and that stands for the Collaboration on Strangulation and Traumatic Brain Injury Survivorship. So it is a collaboration between ODVN, the Forensic Nursing Network, and the Brain Injury Association of Ohio. So we received an OVW Disabilities Grant where we are working to really break down silos and strengthen services and pathways and resources for survivors who have experienced domestic violence, sexual violence, and brain injury. So what's been really cool is that I've been with ODVN for a little over a year now, and so I jumped in where our needs assessment was happening, and so, I got to really learn about the needs of this work in Ohio, and the prevalence of strangulation, sexual violence, and domestic violence services. And so coming together to really bring attention to domestic violence in the sexual violence space, the brain injury space, bringing brain injury into the sexual violence, domestic violence space, and same as sexual violence into brain injury and DV. So we've worked on creating new resources, we've worked on creating new policies, and really just to bring a disability and brain injury lens to the resources and the programs that we're working with.

**Taylr Ucker-Lauderman**Thank you so much. And we know that a lot of that collaboration is really needed, and that these are areas of the work that many people don't know about. So I did want to give the opportunity for you, Rachel, if you wanted to add anything. I know that looking at the impact of brain injury is very much your area of expertise. So if you have anything you want to add, please.

**Rachel Ramirez**Seven years ago, if you had asked me what brain injury had to do with domestic violence, I would have said, "I don't know." Maybe I'll give a little bit of a backstory to how the work of Kasey came to be. ODVN was awarded a grant in 2016 to look at how we can make domestic violence programs more accessible to survivors of disabilities. And we picked a couple of focus areas for very, very different reasons. We picked a focus area related to mental health, because I'm sure people who work in sexual violence also know trying to really effectively meet the needs in a trauma-informed way of survivors who are struggling with lots of other issues, including mental health, can be very challenging. We know that domestic violence, sexual violence, and any type of violence has a significant impact on people's overall health and mental health and well-being. You know, there are certain areas of work that we do that we will always be able to grow in, that we will always be able to learn more, that I don't know if we'll ever kind of master, if that makes sense -- not in a good or bad way, but just due to the complexities of the survivors that we're working with, we are always going to need to be open to new ideas and new ways and how we're working with survivors on an individual basis because people just need different things. So we knew mental health was difficult and hard and we always want to do a better job on that. Then the brain injury piece was kind of the opposite. It was something that we didn't know much about. It was something that, even with all of the years that we had providing training and program support, we had never talked about it at our organization. It wasn't a part of any of our training. We didn't have relationships in those fields, and it was something that when you hear about it, I think a lot of people are kind of like huh, that seems kind of obvious to certain extent like nobody is shocked that domestic violence victims are assaulted in the head, neck, or face, or strangled. That's not the new information. The new information is like, wow, it could lead to a brain injury, which could continue to impact survivors for, you know, days, months, weeks, years, for years and years and years, with very little awareness of what that was. So when we talk to survivors at our programs, over 80% had pretty extensive head trauma. But we asked, you know, what do you know about brain injury, it was kind of like us, like pretty much, not a lot, next to nothing. And even survivors themselves haven't ever really connected how their head trauma could cause a brain injury, and kind of what that is. So we partnered closely with agencies and developed a framework called CARE, which is an acronym for Connecting, Acknowledging, Responding, and Evaluating. We have a bunch of more information about that on our website. But one of the things that was really interesting, and one of the reasons why I'm so excited you invited us to join this podcast is because when we were talking to our domestic violence programs that we were working with, you know, we're asking them who else needs this information? Who else needs to know about that? They said, people who do sexual violence work. I actually remember an advocate sharing a story about a sexual violence survivor, who was in a support group and was very frustrated and kind of felt like she should be doing better than she was, now that some time had passed. She just kind of felt like, it's been this long, and I'm still having these problems. What am I doing wrong? What should I be doing differently? Something that we learned from our dual programs, of which we have many in Ohio, really showing how that sexual violence and domestic violence aren't separate things. Dual programs were talking about brain injury with sexual violence survivors, and a lot of times, it's not that people forgot they were hurt in the head. But when you think about all that can happen in the context of a sexual assault and what you're thinking about, that's an easy piece to kind of get missed. And, you know, she was feeling fuzzy and I can't focus, and I can't think and I'm having a hard time at my job, and being able to have a context for that, and just kind of realizing that, oh, you know, I was hurt in the head as a part of my assault. This could be one of the reasons and it's not because I don't want it enough. It's not because I'm stupid. It's not because I'm not putting enough effort into this. It's because my brain was hurt. You know, I always say like, when our brains are hurt, it doesn't do things as well, or what our brains are made to help us think and process and manage our emotions and do all those things. So just like when you twist your ankle, you don't walk as well, like when our brains are hurt, we can't do some of those things as well. So I think that that's one of the things that we realized was how important this collaboration with other fields was, even though we don't totally have everything figured out. We all have opportunities to help kind of put some of this framework on the table. And what we really learned as survivors find this information very, almost relieving that again, it's not me. I think that's one of the other big huge connections between domestic violence and sexual violence, that focus on providing trauma-informed services, but it's bringing that brain injury awareness to trauma-informed services and being able to say like, A. I can't want this more and try harder. And B. this is because somebody hurt me. It's not because something's wrong with me. And we think, you know, trauma-informed care, it's not what's wrong with you. It's what happened to you. After this initial project, we were like, we have to do this with other systems and with other organizations because it touches so many people's lives. You know, another piece we're really excited about learning from the sexual violence field. As you know, you all have done a lot more work in health care, we need to be doing health care, we need to be thinking about that and working with that and learning from all the amazing work that you all have done.

**Laurie Hamame**That was a lot of really insightful information.

**Rachel Ramirez**I can ramble. Sorry.

**Laurie Hamame**I love a good rambler. When you even think of the phrase, or the word or the crime, sexual violence, the name itself, you know, it's pretty straightforward: sexual violence, violence of a sexual nature. And it almost, not intentionally, omits this whole portion of other kinds of violence that can be experienced while you're experiencing sexual violence. So I can very much understand how a sexual violence survivor would be like, wait, I had a head trauma? I didn't even realize.

**Rachel Ramirez**Mm hmm. I mean, there's obviously a lot going on when somebody is sexually assaulted. You know, it was interesting that I was talking to a forensic nurse... when we think about forensic exams for sexual assault. And you know, how you kind of have to have a little bit of a sense of humor when you do this work? A lot of the focus has been on the waist and below, and I would say, probably in domestic violence, our focus has been on the waist and above, but I wouldn't say in domestic violence us talking about the sexual coercion, about some of the sexual violence that can be a part of that domestic violence. I think that in the domestic violence field we're a little bit less comfortable about that. I mean, again, we know it's there. But there's all these other things that are kind of bigger and we have more practice talking about and you know, those of us who do the domestic violence work, we're like, oh, you know, are we prying? I think that that's something else that can kind of be, not an intentional afterthought, but there's so many other things going on, it's easy for that piece to get lost.

**Kasey Holderbaum**Yeah, one thing that came to mind, as you were talking, Rachel, is like increasing that comfort to talk about it. You know, before any of us got into the field of advocacy or into domestic violence or sexual violence work, we didn't have that language to talk about it. It's only after learning and experience that we really become comfortable and knowledgeable about those things. So frequently, we talk about the silos in the work that we do. So you know, as an advocate, if you hear sexual violence, sexual assault, brain injury, strangulation, what is that comfort level for an advocate to be able to respond to that? It can become very overwhelming to not only ask those questions, or perhaps have those conversations, but also not knowing what the answer will be, and not knowing if we're equipped to respond. That was something that came to mind when you were talking, Rachel, about how just enhancing the skills and capacity of providers to understand how these are connected can really benefit survivors and their access to services.

**Rachel Ramirez**We're working with a whole person. And I don't think that we're doing anybody any favors when we divide certain types of abuse and coercion, or whether we're looking at certain parts of the bodies. We're all of us, you know, and I think that we have so much to teach each other, but also so much to learn from each other. I do think that we know that there's a lot of hesitancy to talk about things we're not comfortable talking about. You all know, is more than anything, kind of some of those myths around what sexual violence is and what it looks like. And a lot of times in domestic violence, if we were to say, you know, have you been raped? Have you experienced sexual violence? Many people would say no. I mean, most of us, if you were to sit next to us and start to talk to someone about any type of sex you've ever had, like, this is not something that we talk about. And often what we're asking survivors to do is to trust us with very, very, very intimate details of their lives of which we'd never share with anybody. People might not be open and forthcoming for a lot of really good reasons, and really recognizing that we need to earn survivors' trust, and be open to what they say. And that all starts in building those connections with survivors, which is, the first component of care is really connecting effectively, and really thinking about what relationship building looks like with people who have experienced trauma and betrayal, which is what sexual violence and domestic violence is.

**Taylr Ucker-Lauderman**Thank you, you know, you were referencing how sexual violence can be hidden, but it's so common and a complex aspect of domestic violence, and the sexual violence piece can become normalized within the context of an abusive relationship. But can you tell us what are some additional challenges you've seen faced by survivors that are experiencing both SV and DV?

**Rachel Ramirez**I think that there are a lot of survivors who experience sexual violence and domestic violence and wouldn't call it either of those things. You know, domestic violence isn't always like a Lifetime movies about domestic violence is, like super scary, really, really awful chasing you around all the time. Like, that's not what domestic violence looks like. And we know from sexual violence, most sexual violence isn't the person hidden behind the bushes that breaks into your house in the middle of the night and does these terrible awful things to you. I don't know how important it is whether a survivor calls it sexual violence. I feel like that's not my job to convince them what it is or what it's not. But, you know, if I have an organization like the Ohio Domestic Violence Network, and I don't identify what's happening to me as domestic violence, of course, I'm not going to reach out to you, you know what I mean? So, you know, I think that there's a huge difference between any type of violence if you're experiencing violence with a person that you know. Particularly, in domestic violence, a lot of times one of the additional complexities that we had was that people whose finances might be very commingled, people who have children together, people who have family and friends together, people who have lives together. And the $64 million question or whatever is how do we hold people who use violence accountable without that also negatively impacting the lives of the survivors? If I am assaulted, and somebody goes to jail and loses their job and their life doesn't directly impact mine, I'm not going to care much. If that person is my partner, and I get all of the implication and it's, again, I have family with them, that could be all of the finances, all of the kids, all of that stuff -- that just has a very different impact. And I think that that's, you know, another thing that can be very, very different is the kind of the depth and breadth of that relationship. And kind of all of the ways in which lives are intermingled and very, very difficult to figure out, how do I kind of safely separate this without it really screwing up my life as a survivor of abuse?

**Taylr Ucker-Lauderman**That's a really an amazing point. Yeah, that's extremely complicated. And so many people look at both domestic violence and sexual violence in that kind of like black and white way of, that's just a bad person, you just need to cut all ties, you just need to get away from them. And it's much more complicated than that, in most situations.

**Rachel Ramirez**Yeah, I wouldn't have to have this job. If all people who use sexual violence are these like terrible, horrible, awful people all the time, and that they walked around intimidating people and scary and yelling, and doing all those course of things like people aren't like that. People don't fall in love with people, or develop those deep ties with people when they're abusive, that's just not part of that, that process. And I think that that's something that can, again, make it very, very difficult. I think one of the things that I've also been thinking about when we talk about, you know, sexual violence and sexual coercion, and what that all looks like, and even, you know, talking about strangulation, something that we've also heard is how we see some normalization of violent sex, particularly, you know, on the internet, in social media, in movies and kind of mainstream shows. I know, as the mother of an almost 16 year old, just even the whole contact, you know how normal it is, we were going somewhere the other day, she was like, oh, pull out our phone, let me check and see who else is going to be here? Because they all know where they are all the time? You know, I do think that the whole, like, what does healthy sex and what does consent look like in? Where are those lines, I think that's just a whole different conversation that we are having now just because of access to information and social media and all that. I mean, I think even talking about strangulation and strangulation being kind of this sexy thing that sexy people do, and you know, kind of what that is, and what that look like and not really having an understanding behind that. How many text messages is too many messages and how many snaps is too many snaps, like, it's just so different. I personally am very, very glad I was not a teenager at this time. And there's a lot of things that I'm glad probably all of us on this floor like I am sure glad that we didn't record everything that we did when we were through 16. And that's all gone. And nobody has anything but it's just I think it's a very, very different world that is unlike any time any of us have ever experienced and really kind of knowing like, what even does that coercion mean and look like ovenware some of those lines.

**Laurie Hamame**So when you mentioned that most people on the street day to day are thinking about domestic violence and thinking that means someone that you're in relationship with. Conversely, when people think sexual violence, like you mentioned, they think of a person hiding behind a dumpster or in a parking garage. And we've discussed the crossover between DV and SV in a sense that SV is a common and complex part of dv in a lot of cases. But I think something that makes them different is that yes, sexual violence most often does occur by someone you know, it also can be that scary person in the parking garage, where domestic violence you know, definitionally isn't. So I think that perfectly segues me into our last question. At OAESV, we believe the root causes of sexual violence are oppression and the misuse of power. So how do you see this come up in domestic violence?

**Kasey Holderbaum**Well, that is the crux of what domestic violence is. It is based on power and control. And it wouldn't exist if somebody wasn't trying to get power and control over somebody else are trying to have that ownership or anything like that.

**Rachel Ramirez**When we look at the roots of domestic violence, it's really thinking about how do we learn about what relationships are supposed to be, what they're supposed to look like, what am I entitled to in certain roles? What should sex look like? What is on the table? What is off the table? And I think that those all come from very, very deeply rooted long messages of us being a society where for many, many, many, many hundreds of years, and we could even argue now like certain groups of people were supposed to have power and other groups of people weren't. And that was the natural way that you can break those groups based along biological sex based along race based along socioeconomic status based on religion, ability and disability, there's so many different ways one group is supposed to be in charge, and other group isn't. But and I know that we've seen, you know, some incredible changes in the past couple of decades and even you know, talking about kind of where does it come from? Or it's kind of like, okay, and permitted and kind of supposed to be that way that me as a member of this group, which often again, we don't choose, we're all born different races, different biological sex and different, you know, family circumstances in different countries, but there's certain privileges or rights or advantages that I should have. And it's supposed to be that way. You know, I remember the opportunities, I've had to talk with people who work with abusers and work with people who use violence, and how one of the reasons why it's so hard for that stuff to be changed is kind of it's an entitlement and a right. And it's a framework of thinking and thinking that there are certain things that I'm owed and how many, you know, domestic violence, people who use violence, say things like, well, it wasn't my fault. I did that because the victim broke a rule. And if they had just followed a rule, you know, but like, where does that whole idea that rules? Like, where does that come from? And again, you know, we are in a country where for several 100 years, it was legal to own other people, and it was legal to sell other people's children. And it was good, you know what I mean? Like, that's the the history that we come from, and women in this country have only been voting for 100 years. So that whole idea of it, one group should have power over another. And that's just the way it's supposed to be. I think it's something that we see replicating itself on an individual level, and also what we're trying to shift. And it really is kind of that larger issue of this hierarchy in this group was up here, this group was down here. And that's how it's supposed to be.

**Laurie Hamame**Yeah, that definitely was not meant to be a trick question. Of course, of course, there's an overlap there. Because in all those scenarios that you just described, it's like, yeah, that's also how sexual violence thrives. You know, we use language like I was putting someone in their place, or, you know, while they deserved it, I have power over them, etc, etc. And I feel like because of this, understanding, this overlap can better help us to prevent both forms of violence, because if we're saying that violence perpetuates violence, and that both DV and SV are interconnected, I feel by working to prevent one, we can also be preventing the other. And it's just helpful to recognize these connections and consider the survivor and the context of all the environments that they could be in the larger community, their family structures, their neighborhoods. So this has been a really insightful conversation, you've brought up a lot of points that I really hadn't considered and also solidified a lot of points that I knew were true.

**Rachel Ramirez**As always this kind of a good conversation when you're like, oh, I hadn't thought about it. But like who I was, I was right about that.

**Laurie Hamame**Yes, cross collaboration is important.

**Rachel Ramirez**Any opportunity that we have, or domestic violence advocates to really think about sexual violence and sexual coercion as a part of our work? And how are we becoming, as Kasey said, more comfortable in addressing that more comfortable building those relationships and those connections? I think for sexual violence survivors, also thinking about how does that relationship change things, if it's somebody that I know, and have all these relationships with all these connections with that could really, really change things. So Ellen Pence always said, “we all have something to learn, and we all have something to teach in every interaction that we have,” and that is with each other on this podcast, that is when we're working with survivors, that is when we're advocating and working with other professionals. But we all have to just make sure that we're open to teaching and open to learning and hearing other people's experiences.

**Laurie Hamame**Definitely. And I love that you've reiterated that point about the difference between a stranger versus
someone in your life, the impact would be different and also how it's viewed is so different, like the stigma there, you know, if it's a stranger on the street, people are probably going to feel a lot worse for you or feel much different way then, you know, but you have kids and think about this and think about the family. It's a lot.

**Kasey Holderbaum**Yeah, it almost becomes like easier to talk about because it's less taboo, right? It's easily a crime. Somebody harmed me. There's an easy process for that. Not all the complications of life.

**Laurie Hamame**Definitely. It's been so wonderful to chat with you both today and I'd love if we could wrap up by sharing how folks can get involved this October.

**Rachel Ramirez**We will have a calendar on our website of local domestic violence events. Many of our 76 member programs cover all 88 counties in Ohio, many of them have local events that they are doing, from trainings to ceremonies, to walks to lunches -- there's lots of different events. So you can go to our website to check that out to see kind of what might be close to you in your area of Ohio. Last year, the national theme of Domestic Violence Awareness Month was "Everyone Knows Someone," and I think that that's just another piece. A lot of people think, oh, domestic violence is something -- same thing, I think, with sexual violence -- "Oh, it's something that happens over there with these type of people or in these neighborhoods," or you have somebody in your life that has been touched by domestic and sexual violence, the vast majority of people disclose it, discuss and share about that with people that they know and people that they trust. You being able to remember to be somebody who is aware and supportive. One of the things that's most important is making sure you provide unconditional support to them, it is very, very hard to escape an abusive relationship. And being non judgmental, making sure you're listening to people, making sure that you're sending messages like "people deserve to be safe in their relationship," and that "it's not anybody's fault, because they're doing this." It's very, very hard to leave a relationship, or to escape a relationship, as I often like to call it. Abusive relationships often increases danger. Really having people that are there knowing about who your local domestic violence agency is or sexual violence agency is and learning more about that everybody listening to this has an enormous role to play in supporting survivors of domestic violence, and sexual violence, because they're not totally separate things.

**Kasey Holderbaum**I just want to piggyback off of that. One thing that I've learned from Rachel, in starting work with her a little over a year ago, is that we can't all do everything, but everyone can do something. So this domestic violence month, we can all do something. We all have a role to play in this, whether it's talking about it, educating people, sharing resources and connections, or listening to this podcast.

**Laurie Hamame**I very much agree with that, especially wrapping back around with technology comments we made earlier, and how many movies and books and shows all cover abusive relationships and maybe not always in the most accurate way. I think it's important to also be able to tell the truth behind how this actually shows up. It's not always the exploitive way that Hollywood shows it, right? It's most often not.

**Rachel Ramirez**
And that's what makes it so hard to identify. Yeah. Because people are like, mine doesn't look like this. Well, maybe it was me; maybe I didn't do something; maybe if I did something differently, you know, but yeah, I think that everybody can do something.

**Laurie Hamame**
Awesome. Thank you so much. Bye.

Thanks for listening to Teal Talk. We hope you enjoyed our deep dive into intersectional issues affecting survivors in Ohio. If you like what you heard, subscribe and leave us a five star rating and review, recommend us to a friend, and follow us on Instagram and Facebook at @OAESV and Twitter at @OhioAllianceESV. If you'd like to learn more about us and the services we offer, sign up for our email list or read a transcript of this episode visit oaesv.org

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