National Sexual Violence Resource Center

Prevention Assessment

Year 2 Report: Innovations in Prevention

9 January 2012

Prepared By:
Stephanie M. Townsend, PhD
Program Evaluator & Consultant
8 Locke Drive, Pittsford, NY 14534
stephanie.townsend@earthlink.net
(585) 690-9315

Submitted To:
National Sexual Violence Resource Center
123 N. Enola Drive
Enola, PA 17025
&
PreventConnect
1215 K Street, Suite 1100
Sacramento, CA 95814

This publication was supported by Cooperative Agreement Number 5VF1CE001751-02 from The Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of The Centers for Disease Control and Prevention.

NSVRC
national sexual violence resource center

Table of Contents

Acknowledgements

Much gratitude is extended to all of the prevention programs that were nominated to be included in this assessment and to those agencies and individuals who agreed to be interviewed. **Your hard work and inspiring vision are the heart and strength of the movement to end sexual violence.**

Special thanks to:

- **Berks County Women in Crisis**, Reading, PA
- **Cleveland Rape Crisis Center**, Cleveland, OH
- **Indiana Campus Sexual Assault Primary Prevention Project**, Purdue University, West Lafayette, IN
- **Klamath Crisis Center**, Klamath Falls, OR
- **Network of Victim Assistance**, Jamison, PA
- **New England Learning Center for Women in Transition**, Greenfield, MA
- **New York City Alliance Against Sexual Assault**, New York, NY
- **Peace Over Violence**, Los Angeles, CA
- **Pittsburgh Action Against Rape**, Pittsburgh, PA
- **SafePlace**, Austin, TX
- **Sexual Trauma Services of the Midlands**, Columbia, SC
- **Vermont Network Against Domestic and Sexual Violence**, Montpelier, VT

Executive Summary

In Fall 2009 the National Sexual Violence Resource Center embarked on a three-year process of assessing the primary prevention training and technical assistance needs of coalitions, Rape Prevention Education (RPE) coordinators and local rape crisis programs.

The purpose of the three-year project is to:

- Assess and prioritize primary prevention **training and technical assistance needs**, including identification of facilitators and barriers of high quality primary prevention
- Develop recommendations for **future strategic directions** to measure primary prevention capacity among individuals, organizations and systems
- Assess the need for **resources in Spanish**
- Document and analyze **changes** that occur over the three year period, particularly in regard to organizational capacity to do primary prevention.

While the project is intended to identify training and technical assistance needs, it is equally important that strengths and accomplishments also be documented as they can provide important guidance for future work. Understanding what is working well is critical for expanding the reach of promising innovations.

This report provides a summary of the findings from the second year of the assessment. With additional support from PreventConnect to augment the assessment and include an examination of how innovations diffuse, the Year 2 assessment focused on prevention programs that are exemplars of innovation in primary prevention. These innovators served as case studies in prevention. As detailed in this report, the major activities of the Year 2 assessment were:

- The completion of **interviews** with representatives from innovative programs
- A **diffusion survey** to document how those and other innovations have spread throughout the field
- The implementation of a new **satisfaction survey** for NSVRC technical assistance.

While the specific activities of these innovators are described, the emphasis in this assessment was on how programs are thinking about primary prevention and the processes that allowed innovation to develop. Major findings include:

- The catalyst for these innovations primarily came from internal motivations and community needs, not from external funding priorities.
- These innovative programs emphasize working with and mobilizing youth, men and boys, and communities to engage in prevention.
- These innovative programs view prevention as social change, as distinct from community education, and as needing to be tailored to the community.

Summary

- A distinct emphasis on anti-oppression work was a hallmark of many of these innovations.
- Innovative programs have institutionalized prevention in their missions and strategic plans and actively use these documents to guide their work.
- Strong administrative leadership was critical to the development of these innovations.
- Qualities of effective prevention educators that were identified focused on individual personality and philosophy rather than on formal education or technical skills.
- These innovative programs retain their staff for long periods and reported that staff retention was critical to the development of innovative approaches to prevention.
- These innovations are supported through a variety of funding sources, including the allocation of substantial discretionary and general operating funds.
- Innovators have concerns with how funding requirements sometimes impose unintentional and unnecessary limitations on innovation.

The NSVRC and PreventConnect are vital leaders in shaping the movement to prevent sexual violence and to change the rape culture in which we live. Strengthening the support for these national technical assistance providers can help them build on the energy, experiences and progress that has been made throughout the nation.

Methodology

Evaluation Questions

The three-year assessment is designed to answer questions in five key areas:

- **Organizational Capacity for Prevention:** What are the core components of capacity? What is the capacity at this time? What do programs need to build their capacity? What can national technical assistance providers do to support growth and sustainability? How does capacity change over the next three years?

- **Partnerships:** What are the facilitators of and barriers to effective collaborations between RPE coordinators and coalitions? What other partnerships are needed for community-wide responses? What are the facilitators and barriers of those partnerships? How do partnerships change over the next three years?

- **Primary Prevention:** How do programs define prevention? How have those definitions changed in recent years? What are the most common primary prevention strategies and/or activities being used? What challenges and successes are programs experiencing? How are programs working with diverse cultural and linguistic communities? What is their ability/likelihood of using multilingual resources? How do primary prevention strategies and activities change over the next three years?

- **Diffusion of Innovations:** What are exemplars of innovative prevention at the local and state or territory levels? How did those innovations come about? How and to whom are innovative practices spreading? What are the facilitators of and barriers to diffusion?

- **Evaluation and Research:** How are programs evaluating their primary prevention work? What skills and resources do they need to do more useful and/or rigorous evaluations? How much access does the field have to research related to sexual violence prevention? What skills do they need to critically analyze and use research? How can synthesis and translation of research be most useful to the field? How do evaluation and use of research change over the next three years?

The Year 2 assessment activities specifically sought to document:

- The **nature of innovations** (e.g., types of activities or strategies used, how the innovations fit the needs and context, potential for adapting the innovation to other contexts, etc.)

- How the innovations **developed** (e.g., catalysts, development process, key contributors, changes over time, use of theory or evidence, etc.)

- Components of **organizational capacity** that were critical to the successful development and/or implementation of the innovations

- The role of **partnerships** in the development and/or implementation of the innovations

- How, if at all, the innovators **share** their programs, models, resources, etc. with other organizations

Table 1. Evaluation Design

	Year 1	Year 2	Year 3
National Survey	X		X
Focus Groups	X	X*	
Interviews		X	
Diffusion Survey		X	
Satisfaction Surveys		X	X

Evaluation Design and Methodology

Evaluation is best when it is based on **multiple sources of information** and **multiple methods** of measurement. This triangulation process reduces the propensity toward measurement error and strengthens the validity of findings (Rossi, Freeman, & Lipsey, 1999). By using multiple methods and informants, we can be more confident in drawing conclusions about complex social systems (Singleton & Straits, 2009). To answer the evaluation questions, five methods are being used over the three years. A summary of how each method fits in with the overall evaluation design is found above in Table 1. Three of these methods were used in Year 2 and are described below.

Survey

Surveys are useful when the focus is on a set of predetermined questions and the answers will be coded using numeric or a very narrow set of codes (Singleton & Straits, 2009). Self-reported information such as organizational characteristics, activities engaged in, and attitudes are well-suited to a survey format. However, it must always be remembered that there may be differences between reported and actual behaviors.

The Year 2 diffusion survey was designed to document how innovations spread (or diffuse) through the field. This was a national survey distributed to all rape crisis programs and coalitions for whom the NSVRC had email contact information.

Additionally, during Year 2 a revised satisfaction survey was developed and used to assess user satisfaction with training and technical assistance they received from the NSVRC. This survey will be continued during Year 3.

Interviews

Interviews can provide a rich understanding of participants' experiences and beliefs. Because they are conducted on a one-on-one basis, it is possible to go in more depth and to explore experiences and issues that an individual might be reluctant to share in a group setting. Because of their in-depth and interactive nature, interviews are an effective way of checking the validity of conclusions that the evaluator may draw from other sources of data (Singleton & Straits, 2005).

Interviews were used in Year 2 for an in-depth exploration of exemplar innovations in primary prevention. Taking a case study approach, organizations at the local and state/territory levels that are especially innovative and/or that seem to have overcome many of the challenges faced in the field were studied to better understand what has supported their innovations and how they solved any problems or challenges they encountered.

Year 2 focus groups were conducted as part of the Multilingual Access Project.

Archival Review

Archival review refers to the examination of existing records or materials. Archival review has a number of advantages. The documents used are produced prior to the evaluation so they are not impacted by people's awareness that they are participating in an assessment (Singleton & Straits, 2005). Archives also offer direct insight into organizational behavior rather than individuals' behaviors, beliefs and attitudes (Singleton & Straits, 2005).

In the Year 2 assessment, archival review was used to examine curricula and other documents from the prevention programs that participated in the interviews.

Procedures

Interviews with Innovators

The interview procedures and protocol were developed collaboratively by the NSVRC, PreventConnect, and the Centers for Disease Control and Prevention (CDC) and the evaluator.

The goal for selecting programs was to have a sample that included programs in each of the following categories:

- Culturally specific
- Implemented within school settings in ways that allows for intensive, developmentally appropriate skill building
- Implemented outside of school settings
- Reflective of programmatic innovation
- Reflective of organizational innovation

Programs were selected using a uniform nomination form and rating criteria (see Appendix A).

Nominations of innovative programs were solicited in three ways. First, in a meeting with **NSVRC staff** nominations were solicited based on the knowledge staff had of programs throughout the country. Second, representatives from the **CDC and PreventConnect** were asked to identify programs that they thought were exemplary. Third, an **announcement** was posted on the PreventConnect listserve and the NSVRC's prevention email list soliciting nominations (including self-nominations) from the field.

This process resulted in **34 programs being nominated**. The majority (73%) of the nominations came from the field.

Those nominations were then **reviewed** by three NSVRC staff and by the evaluator. Each program was **rated** on 18 dimensions that described what the team considered as constituting "innovation" : 11 items assessed programmatic innovation (theoretically based, multiple strategies, varied methods, high intensity, culturally/contextually specific, mobilizes community, addresses intersectionality of oppressions, replicable, feasible, outside school setting, and systematically assessed) and 7 assessed organizational innovation (organizational commitment, integration of prevention, social change orientation, active collaboration, structure reflects values, systematic leadership development within agency and within community). Programs did not have to meet all criteria to qualify.

The NSVRC staff individually reviewed the nominations and then, based on the ratings, developed three lists: programs that were exemplars of innovation, programs that might be worth considering, and programs that they did not wish to consider. Independent of the NSVRC, the evaluator also rated each program.

The NSVRC's and evaluator's lists were then compared. A clear consensus emerged. This resulted in the identification of:

- 15 programs (44%) to be invited to participate in the assessment

- 11 programs (32%) that were promising but about which there were some reservations due to replicability or other issues
- 8 programs (24%) that would not be considered due to their not demonstrating sufficient levels of innovation (although they may be doing solid work)

Finally, those lists were **shared** with PreventConnect and the Centers for Disease Control and Prevention for their final input. From that point forward the identities of programs that elected to participate and those that did not were kept confidential.

The programs that were not invited received a letter from the NSVRC notifying them of their nomination, commending them for their work, and explaining that due to the scope of the project we would not be able to highlight them. (See Appendix B). They also received a token of appreciation from the NSVRC.

The 15 programs that were invited to participate in the assessment were **contacted directly by the evaluator via email**. (See Appendix B.) They were congratulated for their nomination, the project was explained, and they were asked to either accept or decline participation. Of the programs that were invited, 13 (87%) chose to participate. However, one of these programs did not follow through with scheduling interviews so the final sample consisted of **12 programs, yielding an 80% participation rate**.

Interviews were conducted May through July 2011. (See Appendix C for the interview protocol.) They were conducted via telephone or web-based videocall, whichever the participant preferred. Interviews lasted between 30 and 75 minutes with the average time being 61 minutes.

The list of participants and the content of the interviews were kept **confidential**. Only the evaluator had access to this information. It was only with the permission of the organization's Executive Director that the name of the participating organization was included in this report. No quotes in this report are linked to the source.

Archival Review

Prior to the interviews, programs were asked to send any documents related to their prevention work that might help the evaluator understand their prevention initiatives. Typical documents provided included:

- Written curricula
- Strategic plans
- Campaign materials (e.g., posters)
- Evaluation measures and reports
- Descriptions of prevention programs (e.g., brochures, flyers, press releases)
- Agency websites

The review took part in two stages. First, prior to the interviews the materials were examined to help orient the evaluator to the agency's activities and to develop agency-specific questions to be explored during the interviews. Second, following the initial analysis of interview data the materials were examined a second time to see whether the documents confirmed the conclusions drawn from the interviews.

Diffusion Survey

The diffusion survey was developed collaboratively by the NSVRC, PreventConnect, and the evaluator. (See Appendix D).

The survey was intentionally designed to be very short in order to garner more responses. An invitation to take the 5-7 minute online survey was emailed to all coalitions and rape crisis programs for whom the NSVRC had a valid email address. Announcements were also made during the National Sexual Assault Conference in Baltimore in September 2011. All responses were collected online.

TA Satisfaction Survey

The technical assistance (TA) satisfaction survey and procedures were developed collaboratively by the NSVRC and the evaluator.

The goal of the procedures was to obtain feedback from as many TA recipients as possible and to have that feedback be of a nature that would shed light on how recipients were using the TA in their work and their satisfaction with what they received from the NSVRC. Beginning in March 2011, the satisfaction survey was emailed or mailed to every TA recipient following the provision of technical assistance. Survivors who called for personal support or advocacy were not considered to be receiving technical assistance so were not sent the survey.

The survey was sent either electronically with a link to the online survey or with a self-addressed, postage-paid return label. The method used depended on the availability of an email address and any preference the recipient had indicated for future contact. When possible, electronic distribution was preferred.

Due to the relatively short time this survey has been in use, the results will be analyzed in Year 3 when there are more responses available.

Measures

Interviews

The protocols were semi-structured (Bernard, 1995). This method is ideal in situations where the evaluator anticipates having only one opportunity to interview an individual. The protocol includes specific areas to be covered and questions to be asked, but the evaluator is able to probe for more detail, to pursue lines of inquiry that spontaneously emerge, and to allow for a conversational tone. This method introduces a structure to the interview while still allowing people to express themselves in their own terms. It also allows for unanticipated experiences to be raised and explored.

The protocols covered four main areas:

- What the organization is **doing** in their prevention work
- How their prevention efforts **developed**
- What it has been **like to do the work**
- How their prevention work fits with other services the organization may provide and with their overall **mission**

Diffusion Survey

It was narrowly focused on two questions: (1) have programs heard of certain approaches to preventing sexual violence, and (2) during the past 12 months have they used materials from those approaches.

The list of approaches included 20 discrete curricula and campaigns that were developed by the innovative programs included in the interview portion of this assessment plus a few curricula and campaigns that have been highlighted by PreventConnect in their webinars and podcasts.

Whether or not programs have heard of the approaches were answered dichotomously with Yes/No responses.

Whether or not programs have used materials from the approaches during the past 12 months was answered with a 4-point scale. The scale was designed to capture varying levels of use ranging from:

- No use
- Not used, but the program has taken ideas or inspiration from the approach
- The program has used some materials
- The program has used the full approach/program

In addition to these questions, the type of agency was identified as well as the state(s) or territory where they work.

TA Satisfaction Survey

The TA satisfaction survey is found in Appendix E. The survey included nine questions: five closed-ended and four open-ended. The survey assessed three main areas:

- **Perceptions** of how valuable contact with the NSVRC was (i.e., usefulness, change in knowledge, change in ability to take action)
- Reports of how the information or resources were **used** and how many people the caller shared the information or resources with
- General **satisfaction** with the assistance (i.e., likelihood of calling again, likelihood of recommending the NSVRC to others, and additional feedback including anything the caller was looking for that was not provided)

Data Analysis

While the specific activities of these innovators were described, the emphasis in this assessment was on how programs are thinking about primary prevention and the processes that allowed innovation to develop. Toward this end, each of the sources of information was analyzed using methods appropriate to the type of data. Specifically:

- Archival materials providing background on the interviewees' prevention work were analyzed using content analysis
- Interviews were analyzed using analytic induction
- Diffusion Surveys were analyzed using descriptive statistics
- TA Satisfaction Surveys will be analyzed in Year 3.

Each of these analytic methods is described below.

Content Analysis

Conventional content analysis (Hsieh & Shannon, 2005) describes a phenomenon, in this case participants' prevention materials and responses to technical assistance. Archival materials and open-ended responses on the survey were reviewed, codes were developed to describe and organize their content, and those codes were subsequently sorted into meaningful themes.

Analytic Induction

Analytic induction (Erickson, 1986) emphasizes the development and testing of explanatory assertions. In this approach the evaluator develops a preliminary set of **assertions** that address core evaluation questions. Those assertions are then tested against the data, looking for five types of **evidentiary inadequacy:** inadequate amount of evidence, inadequate variety in the kinds of evidence, faulty interpretative status of evidence, inadequate disconfirming evidence, and inadequate discrepant case analysis. Assertions are then **revised or eliminated** based on their evidentiary adequacy until there is a well warranted set of assertions.

Statistical Analyses

Closed-ended survey responses were analyzed using appropriate descriptive statistics. Analyses were run using Microsoft Excel.

The remainder of this report presents the findings from the interviews and diffusion survey. It concludes with recommendations for training, technical assistance and systems advocacy at both the national and state/ territorial levels.

Findings: Innovations in Prevention

Who Participated?

The sample of programs interviewed included 12 programs located in **10 different states** (see Figure 1). The sample included:

- **6 programs in the northeast**
- **2 programs in the midwest**
- **2 programs in the south**
- **2 programs in the west**

Although the northeast part of the country was more heavily represented, it was not expected that this would bias the results due to the fact that prevention funds are administered by state and not by region.

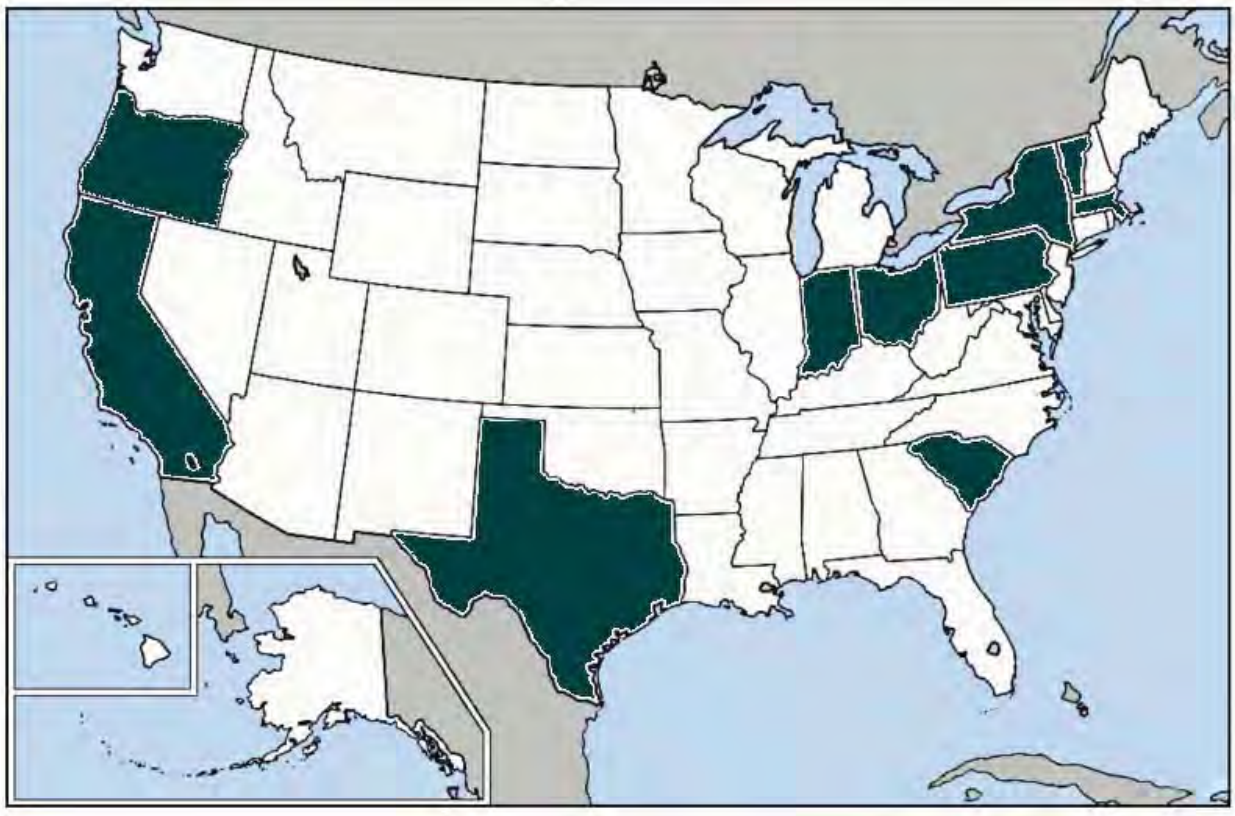
The programs reported serving a variety of settings with their prevention initiatives*:

- **42% suburban communities**
- **33% rural communities**
- **33% urban communities**
- **25% small cities**
- **25% colleges**

Consequently, this sample is a **good reflection of multiple community settings**. This strengthens the generalizability of conclusions drawn across interviews and is a strength of this assessment.

The agencies interviewed were all well established. The agencies had been in operation from 10 to 40 years with the average being **30 years of operation**.

Figure 1. Geographic Distribution of Programs



* Percentages do not total to 100% due to the fact that most programs serve multiple settings and are represented in more than one category.

Agency staff were also asked about how long their agencies had been engaged in any type of prevention work. Prevention was not defined at that time. Rather, what we were seeking was their self-described definition of their work. Participants described their agencies as being involved in prevention for between 10 and 40 years with the average being **20 years of prevention work**. Four programs said they had been doing prevention work since the inception of their agency. The others started as victim services programs and later added prevention work to their mission.

The procedures called for interviewing at least one **prevention educator** and one **administrator** from each program. In most cases this was achieved. In a few cases multiple prevention educators or multiple administrators were interviewed. In selected cases **community members** who were heavily involved in the development and/or implementation of the initiative were also interviewed.

In all cases, those interviewed had in-depth knowledge of the programs and at least one person from each agency had knowledge of the history of the prevention program.

Separate interviews were done for each position (e.g., prevention educators were interviewed separately from administrators) so that each member could speak freely about their experiences. One interview included two staff who were in similar positions being simultaneously interviewed and another was a group interview with multiple community stakeholders.

The resulting sample included 26 interviews held with 32 individuals. The interviews represented:

- **40% prevention educators/ directors**
- **37% executive directors or other administrators**
- **23% community members**

This sample resulted in good representation of multiple perspectives on the prevention programs. However, findings in this report are reflective of the programs that participated and should not be interpreted as a nationally representative sample of all prevention programs. With this representation in mind, we can now turn to the themes heard in the interviews.

What Was the Catalyst for Innovation?

For these agencies, their **prevention initiatives were driven largely by their own frustrations with the limitations of community education and the desire to have greater impact.**

More than half of the programs specifically cited internal or community-based motivations for shifting to primary prevention and/or for specific prevention initiatives. (See Figure 2.) For example:

> *"[We were looking for] a more genuine, authentic response to [students'] experiences."*

> *"There was a mind shift among our staff because we were getting tired as a team of doing the same work in schools and feeling like we did not make a difference."*

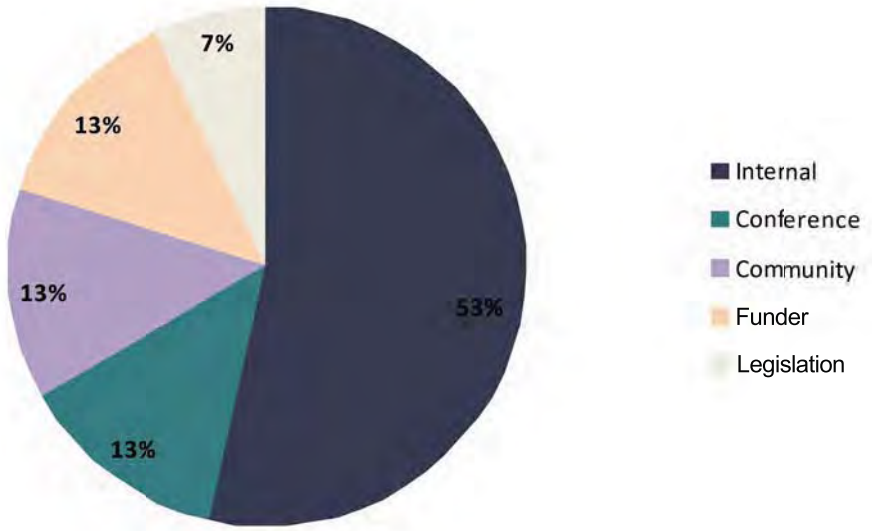
> *"The catalyst was our own knowledge of public health evidence plus perspectives from social justice...It helped when the funders started taking a public health perspective, but we were already there."*

For some agencies, interacting with internal motivations were **requests from the community** for specific types of programs, programs for specific populations, or help with school policies.

Only two agencies attributed their shift to using principles of primary prevention to the direct influence of funders. Even then, although the funder was a catalyst, there was pre-existing receptivity to the idea:

> *"Within the first training we were like, 'Wow! This absolutely makes sense.' So it wasn't a hard sell for us like it was for some agencies."*

Figure 2. Primary Catalyst for Primary Prevention



> *"I'm glad the CDC is doing what it's doing. I was one of the biggest resisters. But when I looked at what the benefits are, I could see how we can pull from its strength...That came from seeing a more global perspective beyond my own community… But it's funny how we talk about how what we're doing is new, but it's really what we've been doing all along."*

Largely, the emphasis of federal and state funders on primary prevention was described as providing *"external validation"* and support to what agencies were already thinking and doing. As one agency explained, when their funder first started talking about primary prevention their reaction was, *"Wow! You're singing our tune...We did not need convincing...We were validated...It energized and sped up our planning, but we were already there to begin with."*

Freedom to Innovate

The Vermont Network Against Domestic and Sexual Violence has developed a prevention initiative focused on positive sexuality. WholeSomeBodies (formerly called Joyful Sexuality) is a curriculum that is shared through a train-the-trainer model. It seeks to promote community norms for talking about and affirming healthy, consensual sexuality. By promoting positive sexuality it is actively promoting an alternative to coercive, exploitative and violent sexual behaviors.

WholeSomeBodies started with a conversation at a coalition prevention conference about *"the paradigm shift of how we view sexuality and what sexuality is."* Out of that conversation, which took place in 1999, a work group formed. The work group *"started as a think tank with no concrete task."* They met monthly for about three years before they started writing the activities that would become WholeSomeBodies.

The absence of any grant funding in the beginning was described as pivotal. *"There was no model and no requirement for a discrete product. That let them think in new directions."*

This creative process continues today as they work to create more tools for parents and for adults that work with youth that are more action oriented and to address heteronormity more completely. Still funded solely through discretionary funds, the revision process can proceed on its own timeline and in its own direction.

What Are These Innovative Programs Doing?

The programs included in this assessment have developed a wide variety of prevention initiatives. **To a remarkable degree, these programs shared two common goals: working with youth and mobilization.** Specifically, there were four categories that almost every initiative fell into:

- **Curricula that aim to build specific youth skills** such as empowering them to intervene as bystanders in rape culture and high risk situations, developing their skills to critically analyze rigid gender roles and media, and developing skills for healthy relationships (42% of agencies)
- **Youth leadership and mobilization** where programs work with small groups of youth to build their skills for engaging in anti-violence work in their own schools and/or communities and where they support youth-led projects (42% of agencies)
- **Mobilizing men and boys** in their communities to challenge sexism, promote positive masculinities, engage in prevention work, and change systems (42% of agencies)
- **Mobilizing communities** to develop their own prevention initiatives that are led by community coalitions or organizations and that create new approaches to prevention and/or that create new settings that are intended to be free of violence (33% of agencies)

Further details on each of the programs highlighted in this report are found in Appendix F.

What Kind of Curricula Are Being Used?

While the school-based curricula being used by these programs are varied in content and objectives, they share some characteristics that may ought to be emulated in other curricula.

First, these are **multi-session curricula and the learning objectives are appropriate for the number of sessions**. The curricula range from 4 to 24 sessions with an average of 10 sessions.

It is important to note that there is a difference between a 10-session curriculum where the sessions build on one another, versus 10 single lessons that can be presented sequentially but where each one is designed and delivered as a separate topic. These curricula attain the goal of being multi-session curricula and not sequential single sessions.

Part of why these agencies have been successful at getting multi-session curricula adopted by schools may be due, in part, to the explicit mapping of their learning objectives onto the relevant state learning standards. Demonstrating that the prevention educators can meet academic goals means the program does not take away from academic instructional time.

Of course, many schools still struggle to give up teaching time and so may request shorter programs. Some of these agencies are resolutely committed to delivering only their full curricula, whereas others will modify the curricula to accommodate briefer periods of time. **Regardless of the stance they take, what was striking about these programs was the fact they make their decisions based on principles of what makes for effective prevention (balanced with maintaining community relationships) and do not simply comply with any request.**

In Touch With Teens:
A Relationship Violence Prevention Curriculum

In Touch with Teens **is a 16-20 hour curriculum for adolescents developed by Peace Over Violence in Los Angeles, CA. The curriculum is based on the belief that violence is preventable, teenage relationships must be taken seriously, sexism and racism affect relationships, and young people are capable of taking responsibility for creating violence-free relationships.**

The eleven units of the curriculum are each divided into two parts: The Basics provide the facilitator with background information and The Activities are interactive exercises that build skills and give youth hands-on experiences reflection and discussion.

Units include: Roots of Violence, Power and Control, Recognizing Unhealthy Relationships, Bullying, Breaking the Cycle of Violence, Creating Healthy Relationships, Sexual Assault and Coercive Control, Respectful Sexuality, Sexual Harassment, Media Impact, and Choosing Peace Over Violence.

Mobilizing Youth — Youth360

Youth 360 is a new initiative of the Cleveland Rape Crisis Center in Ohio. It is a youth leadership program that works with a select group of youth to develop their knowledge and skills about sexual violence. The youth then develop their own projects to prevent sexual violence and foster social change in their own schools and communities.

Philosophically, Youth360 is primarily about building relationships with teens that tap into their core resiliency and leadership. The monthly gatherings are held throughout the school year. Youth are paid a stipend for their participation. Although some students were recruited through school counselors or teachers, the project runs independently of schools.

Through interactive activities and discussion, they explore issues such as: cultural differences, social and systemic oppression, resiliency, gender roles and stereotypes, media literacy, personal strengths, activism, and leadership.

What is Mobilization?

The emphasis on **mobilization** warrants further explanation. How is mobilization envisioned and enacted?

These programs envision prevention as a process of infusing prevention work throughout the community. Through their mobilization efforts, these programs are **prompting other people and organizations to actively engage in prevention, sometimes independently of the rape prevention program.**

The process of mobilization, while complex and varied, was typically described as including three overlapping stages, each with increasing levels of mobilization: serving the needs of other organizations, meaningful coordination, and active collaboration.

Serving Others' Needs

The process described by these programs usually began with the rape crisis/prevention program attending the meetings of other organizations, supporting other organizations' efforts on their own issues, and infusing prevention thinking and prevention work in the work of others.

At this stage, it was about the prevention program **engaging in the community as participants**. This might include attending events and forums hosted by other agencies, participating in public meetings, and sitting on other organizations' advisory boards.

Mobilizing Men in Rural America

The Klamath Crisis Center is a dual agency in rural southwestern Oregon. Working in a community that is politically and socially conservative, the area is not one where men being involved in the prevention of sexual violence would be expected. However, the crisis center has worked with a core group to mobilize men to prevent sexual and domestic violence.

This work began with county-wide mobilizing and networking which included community research and talking with area partners. Partners were then organized and engaged to keep them interested and involved.

The collaboration between the agency and male leaders led to the development of a new project: PAWS for Change. "PAWS" stands for Prevention, Awareness, Wellness and Strength. The project engages men and boys to stop rape and end all violence.

The project's activities include a Community Youth Action Team and a Men's Academy that works with men and boys to end violence. The project runs groups for boys and their male mentors. The groups are a 6-week process that occur outside of school settings. They include both joint gatherings and separate groups for the men and boys. The sessions focus on violence and gender socialization. They are intentionally strengths-based.

"We want to make sure when young men go home and they want to have a conversation about their experiences there is someone — a father, uncle, brother — available to them."

This was described not as about serving the needs of the rape prevention program, but about **serving the needs of the community and of other organizations**. As one executive director said, *"We must be ingrained in the community...For it to really matter, you have to be a part of the community you're working in."*

Meaningful Coordination

The next level of mobilization was assessing community efforts and thoughtfully deciding how to coordinate and avoid duplication. **Meaningful coordination allows agencies to expand community-wide support** for prevention of sexual violence *"by tapping into what already exists while still maintaining the integrity of what we do with supporting women...If you're not acknowledging work people already are doing to address violence in any form, it's a disservice. You'll never get buy-in because they won't feel valued."*

Additionally, coordination can increase the investment of community partners by **acknowledging the overlap in social issues**. For example, one program that runs groups with youth has found that schools are willing to give the prevention program extensive access to students because the services may also *"impact the academic environment and academic outcomes in a positive way. "*

Another way that meaningful coordination was manifest, for some agencies, was the decision to **train others to do the more general rape awareness and risk reduction work.** Agencies that have taken this approach described the work others took on as being the one-session awareness presentations that focus on basic facts about sexual violence, debunking myths, tips for supporting survivors, and information on available support services.

For agencies that have trained others to do the awareness work, the decision was based on two factors: recognition that basic awareness education was still needed in the community and realizing that the more the

Coordinating in a Rural Community

A striking example of meaningful coordination is seen in the efforts of Klamath Crisis Center. The agency was considering changing their approach to prevention.

Before developing any plans, the executive director visited every program in the community that had any interest in violence prevention. She talked with them about how they saw prevention, how they got into the schools with their programs, what their two to five year plans were, what would happen if their funding disappeared, and what materials they were using that related to violence prevention.

The crisis center then reviewed all the notes and materials, looking for common threads. What they found was that there was a lot of work related to violence against women and promotion of respectful relationships, even if it was not explicitly about violence against women. Additionally, many programs were already working in the schools.

However, the missing ingredient was that all the programs targeted girls and there was no male involvement. This led the center to make two decisions: to bring men into the work in a sustainable way and to work outside of the schools.

prevention educators did that piece, the less time they had available for initiatives that were focused on primary prevention. As one prevention director explained, they are *"building the capacity of other agencies to do that first step...It's not about us as experts and it frees us to do the primary prevention."* Some agencies that had taken this approach trained their own volunteers or other staff to do the presentations, whereas others trained people from other organizations and agencies (e.g., teachers, school counselors, social service providers, youth leaders).

It is worth noting that training others to do foundational awareness work may be a powerful way of changing community norms. When this information comes from other community leaders, it says to the community that it is not only the rape crisis program that is concerned about the issue. By having information come from multiple stakeholders, it strengthens the message that sexual violence is not condoned in the community.

Active Collaboration

Beyond coordination was active collaboration with community partners on prevention efforts. All of the programs interviewed reported active, project-oriented collaborations, although they took many different forms.

The benefits of building collaborative efforts was best described by one prevention educator: *"It's not just me anymore...It's all grassroots orientation in a real way. That changes how we do the work. It's not just our agency."*

What Does it Take to Mobilize?

Mobilization — whether it be of youth, men and boys, or an entire community — is a daunting task for many programs. When asked about what it takes to engage in that process, the most common response was that

Project ENVISION: Community Mobilization in NYC

The New York City Alliance Against Sexual Assault has increased their impact by using a community mobilization approach.

The project began four years ago with initial planning, community readiness assessment and community selection. Following that two year process, community coalitions were established within each of the selected neighborhoods and the coalitions conducted a neighborhood strengths and needs assessment. Those assessments used Participatory Action Research to gather community level data on the scope and root causes of sexual violence and the opportunities for prevention. From there each coalition developed prevention plans.

The prevention projects are each unique. One incorporates anti-sexual violence work into other service agencies. Another is doing outreach to increase parents' skills for communicating with children about sexuality and gender. The third is working with young men and boys to prevent sexual harassment.

By coming together and mobilizing the resources within the neighborhoods, these initiatives can have far greater impact than the Alliance or the rape crisis centers could have alone. While the Alliance developed and initiated Project Envision, and continues to provide rape crisis programs with support and technical assistance, the project is equally "owned" by the city's rape crisis programs who work together in the three community coalitions. The project was made possible by the 11 New York City rape crisis programs coming together to pool their resources and collaborate on primary prevention, rather than work in isolation.

it **requires letting go, trusting the community, and trusting the process.**

One agency that engaged the community in developing a county-wide prevention plan explained: *"We gave them free rein. They kept wanting to bring up everything because this was the first real community conversation about sexual violence. They were frustrated when we tried to limit them to prevention."* So the agency stopped trying to limit them and allowed the time to explore how rape prevention related to other issues and needs in the community. As a consequence, the prevention plan *"ended up being a more comprehensive plan."*

This experience was echoed by another program that described community mobilization as something that *"...requires letting go of control and going to places where people are talking about violence and relationships and safety, even if it's not about sexual violence explicitly."*

In addition to relaxing control of the process, community mobilization also requires the rape prevention program to redefine its own role and identity. As an executive director explained, *"The approach is a very humble one, a very open minded one...We listen. We don't come in and say we're this big organization and we're going to tell you how to fix this...We want to be a part of the community."*

How Do Innovative Programs Think About Prevention?

Innovation in prevention can be seen not only in what prevention programs do, but also in how they think about prevention. Among these programs, three common themes cut across the interviews: prevention as social change, prevention as distinct from community education, and the importance of taking a community-specific approach.

Prevention as Social Change

Social change was frequently and spontaneously emphasized by those who were interviewed as the framework or driving force of their work. For example:

> *"We are a social change organization. If we're going to continue to be a social change organization then this is what we have to do."*

> *"It's part of our mission to do anti-oppression work...Anti-oppression work is always core to our agency."*

> *"There has to be a social justice perspective. You have to bring in an analysis that acknowledges that not everyone experiences sexual violence in the same way."*

Additionally, in reviewing the written mission and vision statements of these agencies, half of them explicitly reflected a commitment to social change. For example:

> *"...to change societal conditions that allow oppression, especially domestic and sexual violence, to exist"*

> *"...supports survivors of sexual violence, promotes healing and prevention, and creates social change"*

> *"...to end sexual and domestic violence through safety, healing,*

prevention and social change"

"...a feminist organization committed to eradicating domestic and sexual violence through advocacy, empowerment and social change"

"...to end domestic violence and sexual abuse, ensure human rights and create social change."

In addition to these explicit organizational statements about social change, it was striking the extent to which the programs **explicitly address the intersectionality of multiple forms of oppression**. Two-thirds (66%) of the programs were engaged in prevention in a way that considered the intersectionality of oppressions.

Forms of oppression addressed included:

- Sexism
- Heterosexism
- Racism
- Classism
- Adultism
- Ableism

Addressing the intersectionality of oppressions is not without its challenges. As one prevention director explained, some funders *"don't understand why we're talking about other –isms and why this is prevention."* Some local United Ways were specifically cited as a problem because they are looking for specific outcomes: *"If you do X, then Y people will do this."* This simple cause-and-effect thinking does not adequately capture the complex process of anti-oppression work.

For those taking an anti-oppression stance, the level of commitment was striking. Even in the face of funding challenges, there was no indication of anyone wavering from this commitment. It was clearly a deeply ingrained value.

Preventing Violence by Confronting Oppression

Camp PeaceWorks is a project of Berks Women in Crisis in Reading, PA. This 5-day summer day camp develops youth as leaders in anti-oppression work. Each year 35-40 youth between the ages of 13-17 years participate. During camp, youth explore social justice issues as the roots of violence in our society.

Using an anti-oppression framework, the camp builds critical awareness of racism, sexism, adultism, classism, and heterosexism. It also develops skills for intervening in oppression at school, home and in the wider community. Youth leadership is cultivated with the expectation that campers will develop and carry out anti-oppression and violence prevention initiatives in their own schools and communities.

Throughout the school year, monthly meetings are held to extend the camp experience, provide peer support and help youth leaders carry out their projects.

Prevention as a Distinct Endeavor

In the interviews, program staff also described **prevention as distinct from community education**. Community education was generally understood as raising awareness about sexual violence and available services and decreasing the acceptance of rape myths and victim blaming. In contrast, prevention emphasized developing skills and changing behaviors, social norms, and/or systems in ways that prevent sexual violence and change rape culture.

In three agencies this distinction was institutionalized by there being designated staff for community education and outreach separate from those designated for prevention.

This is not to say that prevention and community education were seen as unrelated. When talking about challenges they face, a common one was the lack of basic awareness and the persistence of rape myths and victim blaming. However, these programs had a well-developed framework that drew clear distinctions between prevention and community education or outreach. They recognized the necessity of education and outreach as it contributes to survivors accessing services and the reduction of revictimization. However, they were clear that education and outreach are not a replacement for prevention.

Community-Specific Approach

The final idea that cut across interviews, and in fact was expressed by 100% of programs, was that **prevention requires taking a community-specific approach as opposed to an approach that is pre-packaged or driven solely by the rape prevention program.**

Even when programs had developed their own prevent curricula and actively share them with others, pre-packaged curricula were not the focus:

> *"Most of our success has come not when we try to implement a curriculum, but when we work on community development...There is never going to be the perfect curriculum...You have to have flexibility in how you get out the main messages."*

> *"You can't expect them to fit one specific model...It's about building relationships with them, not preaching to them."*

> *"[Programs should] meet people's needs on all levels, including friendship, spiritual needs, relationships and community...We're making the community we really want to have."*

Taking a community-specific approach was also reflected when programs were asked about the lessons they had learned or advice they had for other programs that might want to adopt a similar approach to prevention:

> *"...you need to connect with the culture of the community."*

> *"Change your approach to fit their capacity."*

> *"You have to look at each community and address them individually."*

> *"We used what was appropriate for us to use."*

The need to let go that was seen in the discussion of mobilization came up again in regard to community-specific prevention:

> *"My goal is if [our staff] are out in the community, what we do will be driven by the community. We want to respond to what the community*

needs, not do something that we think is a good prevention program but that the community doesn't want."

"The community is the expert on their own experience."

Tailoring Systemic Change on College Campus

Even when a program has a structured framework for prevention, it can still be tailored to local needs and interests. The Indiana Campus Sexual Assault Primary Prevention Project is a statewide initiative to build the capacity of college campuses to prevent sexual violence.

They have a six-component model for comprehensive prevention. It includes coalition building, policies, data collection, bystander intervention, male involvement, and social marketing.

Originally they required participating campuses to implement all six components. However, they found that was a barrier. Now campuses are allowed to choose which components they implement (coalition building is always required). This allows campuses to start slowly so they do not get overwhelmed or burn out. Additionally, the technical assistance the project provides can take into account history and context, which allows them to give *"tailored suggestions within an overarching framework, but nothing is generic."*

How "Big" Does Prevention Have to Be?

The descriptions of these innovative programs — with the emphasis on mobilizing communities, prevention as social change, as distinct from awareness raising and outreach, and as specific to the community — could lead to the false conclusion that innovation is only accomplished by large agencies. This is not true.

These innovative programs represented a wide range of agency size and budget.

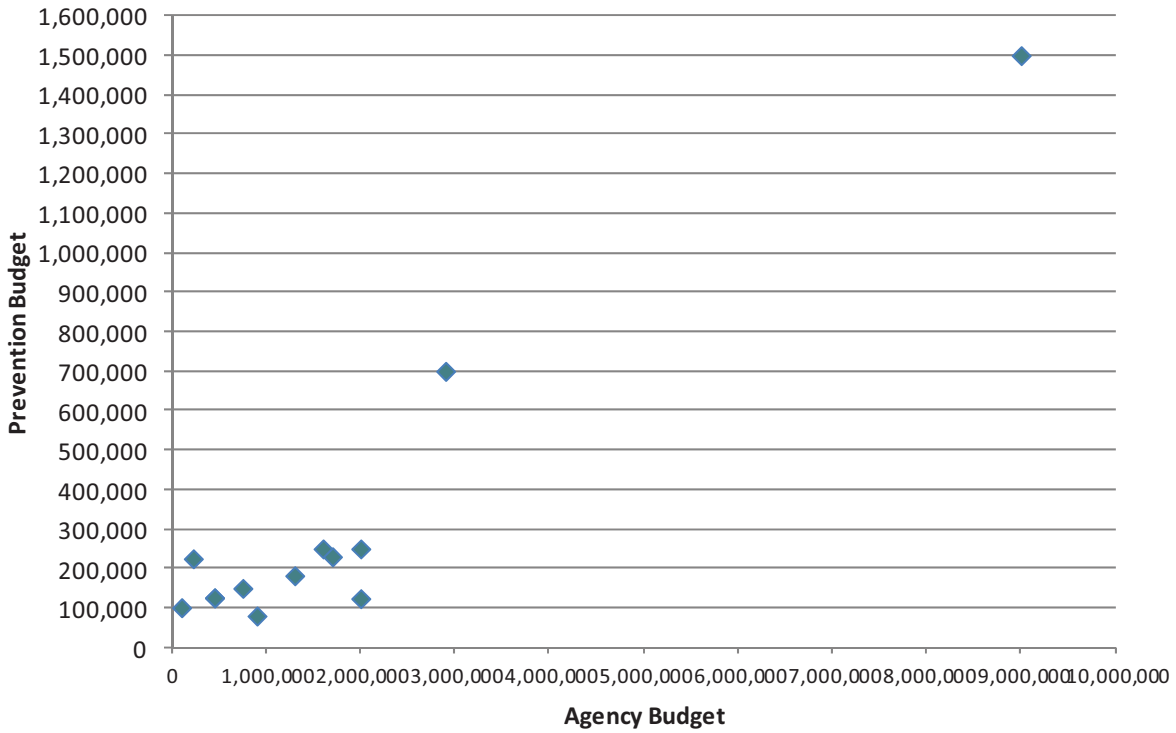
- **Agency budgets** ranged from $101,000 to $9 million with a median of $1.3 million
- **Prevention budgets** ranged from $80,000 to $1.5 million with a median of $182,000

Figure 3 shows the breakdown of agency and prevention budgets and illustrates that **innovation is found in small and large agencies alike.**

No relationships between size of agency and type of prevention work were found. This indicates that **innovative prevention work is possible regardless of agency size**.

The fact that the sample represents programs working in urban, suburban, rural and college settings also indicates that **the type of community served is not a barrier to innovation**.

Figure 3. Agency and Prevention Budgets



Small Agency — Deep Community

The New England Learning Center for Women in Transition (NELCWIT) in Greenfield, MA, is a small dual program that is engaged in expansive prevention work with the local Native American communities. Led by the Visioning Balance, Equality and Respect Circle (Visioning BEAR Circle) , the goals are far reaching: promoting healthy relationships, changing attitudes about gender roles, using restorative justice to promote accountability, and training service providers.

All activities are grounded in cultural practices and leadership is shared among the council. The council includes one staff member, but otherwise is made up entirely of community members.

Although NELCWIT has chosen to focus on a particular community, its prevention work within that community is expansive.

Large Agency — Specific Focus

SafePlace in Austin, TX, is a large agency that has invested heavily in a few key prevention strategies. They are most well known for Expect Respect, a school-based program for preventing teen dating violence and promoting safe and healthy relationships in middle and high school.

Expect Respect has three components: (1) support groups (24 sessions) for vulnerable youth to build their relationship skills and improve personal safety and self-esteem; (2) youth leadership development through training (8 sessions) and support for creative, youth-led projects including youth theatre, assemblies, videos, PSAs and other media; and (3) school and community engagement and capacity building through policy development, teacher training, parent workshops, and partnerships with after-school programs, health care providers, and extended community collaborations.

By investing intensely in the Expect Respect program, a program targeting prevention efforts at youth, SafePlace is able to capitalize on its resources. Additionally, SafePlace reaches out into the community through Community Advocacy, Dialogue and Education and its Disability Services.

Large Agency — Many Strategies

Peace Over Violence in Los Angeles, CA, has developed a wide variety of prevention strategies and curricula.

Youth curricula include:

- ***In Touch with Teen:*** **a 16-20 hour relationship violence prevention curriculum**
- ***Be Strong — From the Inside Out:*** **a 4-session, asset-based health promotion and violence prevention curriculum empowering young women**
- ***Theater Peace:*** **a 3-day interactive curriculum that builds healthy relationships**

Youth leadership and mobilization includes:

- ***Violence Free Teens:*** **an annual youth-adult partnership conference**
- ***Students Together Organizing Peace:*** **school-based youth movement groups**
- ***Men of Strength Clubs:*** **school-based groups to develop leadership of young men**
- ***YouthLEAD:*** **leadership program for select high school youth to promote social activism**
- ***Peer2Peer:*** **high school peer counseling**

Programs with high risk youth include:

- ***High Risk Youth Services:*** **prevention and early intervention for youth in the juvenile justice system**
- ***Juvenile Impact Program:*** **16-week program for youth in the juvenile justice system to develop self-worth and discipline**

Systems-level work includes:

- ***Teen Dating Violence and Sexual Violence Prevention Policy Project:*** **for school districts to develop effective policies**
- ***Youth Center:*** **the agency is now launching development of a youth center**

Summary: Innovations in Prevention

This sample of rape prevention programs revealed a number of trends in innovative approaches to prevention. There was a clear emphasis on working with youth and mobilizing others to engage in prevention. Three hallmarks were seen in how these programs think about prevention:

- **Prevention as social change**
- **Prevention as a distinct endeavor from community education**
- **Prevention as tailored to the community.**

Implications for the National TA Providers

When working with youth, these innovative programs have successfully implemented time-intensive curricula and leadership development programs. Some of these are implemented within schools, whereas others are implemented outside school settings. When thinking about how to foster similar innovations in the field, the national TA providers may want to explore ways to meet the following needs:

- **Resources to explain how prevention of sexual violence can improve learning environments and academic performance**
- **Skills to identify if curricular integrity can be maintained in abbreviated versions, to negotiate with schools about full-length versus modified curricula, and to effectively refuse requests for shorter programs**
- **Diverse models for working outside of school settings, including practical strategies for recruiting and facilitating voluntary youth participation**
- **Resources on learning theories that can be used to develop curricula based on solid pedagogical principles**
- **Skills for curriculum development, including alignment of learning objectives with learning activities**

The extensive reliance on various forms of mobilization indicates that this may be an approach for which the national TA providers can provide more training and technical assistance. To expand the number of programs using this approach, they may want to provide:

- **Resources to explain the theory and process of community mobilization**
- **Examples of successful mobilization, including rich descriptions of how the process unfolded over time**
- **Assessment tools to help programs and communities understand their strengths, needs and readiness to mobilize**
- **Evaluation tools to document community change over time**

Given the social change orientation of these innovators, promoting more widespread innovation in the field may require fostering social change perspectives and more clearly defining the prevention of sexual violence as a social change movement. Some ways to accomplish this include:

- Infusing social change messages in TA providers' own branding and definition of their work
- Incorporating anti-oppression perspectives in their initiatives
- Facilitating national, ongoing dialogues about oppression through the National Sexual Assault Conference, regional events and online forums

The community-specific nature of these innovations speaks to the necessity of providing community-specific technical assistance. While there are many resources a TA provider can develop that will have widespread utility (e.g., technical assistance bulletins, resource packets, trainings, etc.), it is important to remember that for many agencies effectively using those resources will require follow-up assistance that is hands-on and that walks through the process with them. As an illustration, providing a tool for assessing community readiness for prevention may be met with great interest and the intent to use it. However, actually collecting, analyzing and interpreting data may require individualized assistance to strategize how to use the tool in the specific community, to problem solve as situations arise, etc.

Finally, while these particular agencies are focused on four strategies — youth curricula and mobilization of youth, men and boys, and communities — it is important that the TA providers NOT limit their training, technical assistance and other initiatives to only these approaches. These are clearly approaches that resonate with many agencies, but at this juncture it would be premature to focus on a narrow set of strategies.

Implications for Coalitions and RPE Coordinators

The alignment of prevention strategies with learning standards is a task best accomplished at the state/territory level. Having statewide alignment can save time for local programs. It can also provide leverage to advocate for systems-level change in education. Coalitions and RPE coordinators have the visibility and credibility to work with their departments of education. Such state/territory-level advocacy is critical as an adjunct to the school– and district-level advocacy being done by local programs.

Coalitions may also want to examine their own efforts to incorporate anti-oppression perspectives in their initiatives and to facilitate dialogue in their own states/territories about oppression.

Findings: Fostering Innovation

Knowing what innovative programs are doing and how they think about prevention is not enough to foster more innovation in the field. Two additional concerns that were explored in this assessment were the conditions that support innovation and practical steps innovative agencies take that allow innovation to develop.

How Is Prevention Institutionalized?

A striking characteristic across these agencies was the fact that **100% of them have institutionalized prevention in their missions and/or vision statements**. References to preventing, eliminating and eradicating sexual violence and to building communities free of violence were found on every agency's website.

Another source of institutionalization was seen in strategic plans. Although not every agency's strategic plan was reviewed for this assessment, it was striking how staff described the **importance of strategic plans in guiding prevention work**. Strategic plans were used to:

- Set explicit goals for prevention work
- Increase collaboration between different agency departments, including forging connections between prevention and survivor services
- Foster integration of prevention throughout the entire agency

Unfortunately, mission and vision statements and strategic plans are sometimes relegated to file cabinets and annual reports. This was not the case for these agencies. Executive directors, department directors and prevention educators talked **spontaneously and with great passion about how important these statements were in guiding their work.** For example:

> *"If you have prevention and social change in your mission, it all starts there."*

> *"[Prevention being part of the mission] creates a culture and makes it easier to do what we do."*

It was especially striking how **agency mission and not funding was described as the driving force behind prevention work.** For example:

> *"We believe as an agency in what we're doing and that this will make a difference...We will do this work whether or not we get [the grant]."*

> *"Because there's no prevention money specifically for this [intervention], it let us create our own priorities."*

> *"Of course we wouldn't back down from our mission because that wouldn't accomplish the change we want."*

> *"[Our executive director] would not expect or support us in compromising to get funding."*

These comments should in no way be interpreted to mean that funding is not important. As will be discussed later (see pp. 45-47), both the level of funding and restrictions imposed by funding requirements were cited as substantial barriers to

innovative and widespread prevention programming. Increased funding levels are vital to the success of prevention programs.

What these quotes illustrate is that the driving factor for these innovative programs was the ways they **actively use their missions and strategic plans,** not requirements that are externally imposed. This reflects an **organizational culture that is mission-driven** and in which mission and planning are actively used on a daily basis. It is not merely a matter of having a mission statement or strategic plan that mentions prevention or social change, but rather it is a matter of how those documents are used.

The institutionalization of prevention was found not only in the written documents, but also in how the staff described their work. For example:

> *"[Prevention] has historically been a part of our core services. It's never been an extra piece. It's core to what we do...If we truly are a comprehensive center then we have to do prevention in the community."*

> *"We are a community organization and one of the things we are charged with is helping to eliminate sexual violence. If we're not doing it, who would?"*

This last quote was particularly striking because it came in the context of talking about how rape crisis centers approach prevention in different ways, with some agencies doing little to no prevention work aside from community awareness presentations. This response indicates that there is some tension within the field between agencies that have made a clear commitment to prevention and those that have not.

How Is Prevention Integrated in the Agencies?

In light of how important missions and vision statements and strategic plans were to these agencies, it is not surprising that they described **intentional efforts to integrate prevention throughout their agencies.** This integration was especially notable in light of concerns in the field about prevention being in a "silo" and there being difficulties balancing prevention and direct services in light of scarce resources.

There was a strong sense of prevention being of equal importance to direct services. This commitment was most poignantly described by one executive director:

> *"Prevention is equal with supporting survivors. It's not just something we do if we have extra money, like it is with some other agencies."*

Many of these agencies described prevention and direct services as integrally connected. This was expressed as an agency-wide philosophical commitment. For example:

> *"[Prevention and services] both live in [our program] so it doesn't require giving up one for another."*

> *"We're trying to get people away from 'This is what I do' and focus more on the mission of the agency and here's what I can do to support it."*

> *"There's a marriage between prevention and intervention. At our agency it goes hand in hand…[Integration] is part of who we are."*

Agencies also identified specific mechanisms by which this integration is achieved. These included:

- All staff being given opportunities to influence and define what prevention looks like
- Requiring all departments to speak to how they fulfill the agency's mission and/or strategic plan, including how their work contributes to prevention
- Agency-wide trainings on prevention
- Routinely asking staff for personal examples of how they engage as bystanders in their professional and personal lives
- Conscientious inclusion of prevention activities and issues in agency newsletters, websites and other publications
- Inviting all staff to experience the prevention programs as participants in order to foster understanding across departments of the prevention programs
- Cross-departmental staffing of prevention programs

It is interesting to note that for two of these agencies the concept of integration extended beyond prevention and direct services. For them, there was also an expansion beyond thinking about only sexual and domestic violence. As one of these agencies explained:

> *"[We have] moved beyond being identified only as a DV/SA agency...moved us out of the corner and made it more possible for other partners to join in. Healthy relationships aren't only [our] issue, although we're the experts."*

Becoming a Prevention-Oriented Agency

Pittsburgh Action Against Rape (PAAR) has a long history of being a trauma-informed agency. Over years they have ensured that all of their work takes into account the impact of trauma, interpersonal dynamics, and paths to recovery including an emphasis on empowerment of survivors.

They are now embarking on a similar three-year strategic process to become a prevention-oriented agency where prevention will be a part of all staff roles and will infuse all agency endeavors.

This process began with a two-day staff training (one day with the administrative team and one day with all staff) on prevention and reflection on how each staff role can support prevention. Since then there have been three follow-up staff meetings, promotion of bystander interventions among staff, and practicing "elevator speeches" about prevention.

Integration across social issues that were named included:

- Healthy relationships
- Gang violence
- Bullying (specifically connecting to sexualized bullying and homophobia)
- Promoting tolerance
- Teen pregnancy

Fostering Cross-Department Collaboration

The Network of Victim Assistance (NOVA) of Bucks County, PA, has three standing committees: victims rights week, diversity and staff morale. Every staff member serves on at least one standing committee. Sign ups occur each year.

Those committees have been *"critical for building cross-team collaboration and building relationships that then carry over to other work,"* precisely because the committee tasks supersede direct services, prevention or any other departmental function.

How Important is Administrative Support?

In every agency **administrative support was a critical factor that allowed these programs to develop innovative approaches to prevention**. Executive directors, other administrators, prevention educators, and community partners all described administrative leadership, especially of the executive director, as critical to the possibility and success of innovative programming. Support was described as coming in four ways.

First, **executive directors provide critical leadership and foster the leadership of others**. The connection between leadership of executive directors and innovative prevention programming was most succinctly described by one prevention educator:

> *"If I didn't work for a place that had a good strategic planning process and a visionary director, this would have been dead in the water."*

In the words of another prevention educator:

> *"[The administrators] have a vision and we look through their lens, including how we take prevention to the next level, what are new frontiers, and how we respond to the needs of the community."*

Equally important to executive directors' own leadership was how they foster the leadership of their staff. This was recognized by executive directors themselves. For example:

> *"[The field doesn't] look inward enough at what skills we need to develop in ourselves...We need to focus more on leadership development."*

"One thing I feel very strongly about is fostering leadership by women of color. That has been a key part of what has made us successful..People can be authentically themselves and make the leadership skills and opportunities their own."

When asked what leadership skills need to be developed and supported, executive directors named skills such as:

- How to communicate with different stakeholders
- How to present oneself in community meetings
- How to manage employees so they are playing to their strengths
- Succession planning

Notably, one executive director spoke about how fostering leadership among staff sometimes includes the staff disagreeing with and holding the executive director accountable:

"You need somebody who is going to make prevention and social change their mission…[The prevention director] is willing to take it on and even battle with me. You need someone who will advocate for the program even within the organization."

Second, administrative support was described in terms of the **tangible aid staff are given to carry out their work**. Examples of aid included:

- Release time and tuition support to participate in leadership development opportunities outside of the agency
- Setting realistic priorities and goals
- Establishing realistic time frames for program development, implementation and evaluation
- Time and opportunities to learn about related fields that impact the prevention initiatives

Making Time for Program Development

The Network of Victims Assistance (NOVA) in Bucks County, PA, provides an illustration of how important time for program development is.

In developing their 10-session prevention program for students with Autism Spectrum Disorders (ASD), the staff were delving into a new arena.

Their development process included:

- **Formation of an advisory committee**
- **Observing in schools, talking with students and parents**
- **Attending the Autism Support Coalition conference and an ASD support group**
- **Participating on an ASD listserve**
- **Reading literature on ASD**
- **Having two ASD support teachers review the curriculum**

"The way things work around here is that we're given what we need to do our work within the confines of the grant...They took everything else off our plate."

Third**, administrators were described as trusting their staff and having confidence in them**. When one prevention educator pitched a new idea to the prevention director, *"Her response was 'Let's do it yesterday.'"* When the two of them then took the idea to the executive director, she said she *"knew it was based on really good principles, so I was all for it."* In other interviews staff used phrases such as *"free rein", "they trust us,"* and *"confidence in me"* to describe their relationships with administrators.

As a consequence of this trust, a fourth form of administrative support was frequently described: **the autonomy for staff to do their work in the way they see fit and to build on their individual strengths**. This was a common and recurring theme that was echoed in the reflections of executive directors and prevention educators within the same agency. For example:

> **Prevention Educator:** *"Staff have a lot of freedom to go where our own strengths lie and there is room for employees to figure out what they are good at and to go there."*
>
> **Executive Director at that same agency: "***My approach is to let them define opportunities for themselves and to facilitate making that happen."*
>
> ———————-
>
> **Prevention Educator:** *"We're allowed to bring our ideas to the table and allowed to run with our ideas and make things happen...This allows facilitators to dig into their passion."*
>
> **Executive Director at that same agency:** *"I tell my staff that I pay them to think. I don't pay them to come to work and be automatons."*

Summary: Fostering Innovation

These innovative approaches to prevention were supported by fact that they had institutionalized prevention in their missions and strategic plans and they actively used these documents to guide their work. Additionally, they used a variety of means to integrate prevention throughout the agency. This was all made possible by strong administrative support for prevention. Executive directors provided leadership, fostered the leadership of others, provided tangible aid to prevention staff, created a culture of trust, and gave staff autonomy to play to their strengths.

Implications for National TA Providers

When promoting primary prevention, it is important that agency capacity for engaging in this work be considered. National TA providers can play an important role in this by:

- **Assessing agency strengths, needs and capacity for prevention (or for specific prevention strategies) when providing technical assistance to programs and tailoring the assistance to the agency's capacity**
- **When applicable, including recommendations for different levels of capacity in technical assistance packets and other publications or resources the that are developed**
- **Disseminating models and developing resources to strengthen skills for articulating missions and developing strategic plans**
- **Providing resources on theories and strategies for creating empowering cultures within organizations**
- **Disseminating models for integration of prevention and direct services**
- **Facilitating national, ongoing dialogues about agency integration**

Implications for Coalitions and RPE Coordinators

Coalitions and RPE coordinators may want to look at the successful programs in their own states/territories to identify key characteristics that distinguish them from programs that struggle more with prevention. It is worth attending to: how prevention is addressed in mission statements and strategic plans, the percentage of an agency's budget dedicated to prevention and their willingness to allocate discretionary funds to prevention, the longevity of prevention staff, clarity in distinguishing between community education and prevention, and how prevention work is integrated throughout the agency.

Once a clear state/territory-wide picture is obtained, the information can be used to identify agencies in need of targeted technical assistance, to define training agendas, to set realistic expectations of grantees, and to make decisions about the allocation of resources.

Additionally, coalitions are in a good position to support strong executive leadership by:

- **Providing leadership development opportunities tailored for executive directors**
- **Ensuring all new executive directors are oriented to the principles and practices of primary prevention**
- **Facilitating networking opportunities for executive directors**
- **Offering technical assistance to agencies when they are searching to hire a new director**

Findings: Staffing Innovations

Having these insights into the variety of innovations in the field and what has fostered those innovations, the practical question remains of how innovative programs are staffed. Some findings from this assessment may shed light on the human resources required to be innovative.

How Are These Innovative Programs Staffed?

The high level of fiscal commitment these innovative programs have made to prevention (see pp. 45-46) means that **most of the programs are operating with multiple prevention staff.** The number of full-time employees (FTEs) dedicated to prevention work ranged from 1—7 with the average being 2.8 FTEs.

In addition to dedicated prevention staff**, half of the programs also reported having additional personnel who directly contribute to their prevention work.** These included:

- Counselors
- Outreach staff
- Youth advocates
- Interns
- Volunteers
- Administrative assistants
- Outside consultants

Examples of the contributions made by these people included:

- Staffing information/outreach tables at community events, thereby freeing up prevention staff to run the community events with a focus on prevention
- Doing one-session awareness and outreach presentations, again freeing up prevention staff to devote their time to other prevention activities
- Counselors co-facilitating multi-session prevention programs along with the prevention educators
- Prevention educators facilitating specific sessions of support groups along with counselors in order to bring prevention into those groups
- Providing logistical support for prevention events
- Taking care of reporting requirements
- Data entry and analysis for evaluating prevention programs

Who Can Be an Effective Prevention Educator or Director?

More important than the number of staff, programs were asked what skills or qualities they look for when hiring prevention staff. **The skills they emphasized focused more on person-oriented traits and philosophy than on formal educational background or technical skills.**

The most frequently named qualities required for this work were:

- Passion for social justice, sexual assault and/or prevention
- Ability to build collaborative partnerships
- Willing to take risks and not be afraid to make mistakes
- Good organization skills
- Ability to learn and to integrate new information
- Realistic expectations and patience

While many of these qualities are important in any profession, they take on a particular necessity when doing prevention work. For example, one prevention educator noted that prevention theory, evidence and practice has *"exploded"* in the past few years. Therefore, prevention educators must be able to integrate new information on a constant basis.

Another prevention educator reflected on organization skills by comparing the work to juggling: *"You have lots of balls in the air and some will magically disappear if you lose sight of them."* This requires a balance between being *"very visionary and micro-oriented"* and the ability to *"attend to the immediate needs while working long term."*

When engaging with community members, leading presentations or facilitating curricula, prevention educators also frequently run into controversy and opposition. Sexual violence is a highly charged issue in our society and one about which there is still active denial and resistance to accountability. This means that good presentation skills are not simply about being able to speak clearly and coherently, make eye contact, use body language, etc. Public speaking in this area also requires being able to *"start difficult conversations", "handle a difficult subject", "stand their ground", "find common ground",* and *"respect other opinions without compromising our stance."*

How Do Programs Hire for These Skills?

One executive director described hiring for prevention as being about *"hiring for attitudes more than for skills."* This sentiment was echoed in many of the interviews. However, this raises the question of how to screen for those qualities.

Some programs offered specific questions they ask during interviews to screen for the desired attributes. These included:

- Tell me about a specific mistake you made and what you learned from it.
- Describe a challenge you faced and how you handled it.
- How do you define social change?
- Tell me about a time when you felt successful.
- How have you grown in the past five years?
- Can you think of a time when you interrupted oppression in some way?
- Which –ism would be hardest for you to address and why?

While there is no "right" answer to these questions, common characteristics these agencies look for include:

- Answers that reflect a team approach or relying on others versus someone who is very individualistic
- Being comfortable with talking about making mistakes and seeing them as opportunities to learn and improve, including being open to constructive criticism
- Being willing to admit to one's own limitations and strategies for how to work with others to complement strengths

- Awareness of multiple forms of oppression and willingness to identify one's own privilege
- Ability to integrate immediate and long-term visions
- Passion for relevant issues and concerns
- An analysis of issues that incorporates multiple levels of analysis

In addition to interview questions, many programs also reported that the interview process for prevention educators includes the applicant giving a presentation either on something related to prevention or on any topic of their choosing. One agency even has the children of staff serve as the audience for these presentations.

In addition to basic communication skills, programs reported using these presentations to look for qualities such as:

- Creative, interactive approaches versus reliance on presentation/ lecture
- Ability to connect with the audience
- Ability to handle challenging questions
- Flexibility and spontaneity
- Ability to handle the complexity of the issue without over simplifying it
- Reflection of the agency's values

In contrast to these explicit and structured ways some programs approach hiring, other programs rely more on a "we know it when we see it" approach. While this is often times successful, these programs reported wanting a more systematic approach to hiring.

How Do Innovative Programs Handle Staff Turnover?

Staff turnover is a clear barrier to innovation due to the long-term nature of prevention work. In contrast, for these programs, **staff turnover was <u>not</u> a substantial barrier due to the striking longevity of staffing.**

Programs reported that **most staff stay for at least 5 years** and many of them reported having staff who had been with the program for 10 or more years.

This stability was seen not only as a positive characteristic of the agencies, but as integral to their ability to develop and carry out innovative work:

> *"If we didn't have the people we did on staff, we wouldn't have gone in this direction."*

> *"If we did not have [low turnover], we would still be where we were 8 years ago."*

> *"[Low turnover] is key to the growth in our prevention work. It lets you move beyond the basics. Longevity is key to program growth."*

This **low staff turnover was attributed to a variety of agency characteristics**, most of which fell into four categories:

- **Compensation:** pay scale that values employees, health and pension benefits
- **Family friendly workplaces:** flexible scheduling, policies to compensate overtime, release time, flexible leave, child care
- **Positive work environment:** camaraderie, interpersonal validation, tokens of apprecia-

tion, staff lunches, staff social outings, training/support to prevent burnout

- **Meaningful work:** feeling like staff are making a difference, ever evolving work, and being able to play to one's strengths and passions

Preventing Burnout

At Sexual Trauma Services of the Midlands in Columbia, SC, the administration is very mindful of the stress staff are under. To prevent burnout, they use a variety of strategies:

- **Staff are strictly limited to a 37.5 hour work week and immediately go on flex time if they exceed that limit**
- **A psychologist provides quarterly staff trainings aimed at preventing burnout**
- **Quarterly half-day social outings are regularly scheduled — these are strictly social events (e.g., pool party, movies, etc.)**
- **Staff have weekly lunches together that all staff attend**

Summary: Staffing Innovation

These innovative programs were staffed by 1—7 FTEs. The qualities of effective prevention educators the programs identified as most important focused on person-oriented traits and philosophy. These programs demonstrated remarkable longevity in their staffing. That longevity was identified as integral to their ability to do innovative work and attributed to fair compensation, family-friendly workplaces, positive work environments, and having meaningful work.

Implications for National TA Providers

Recognizing that many administrators of small non-profit organizations have little formal training in human resources, national TA providers can support them by providing:

- **Training and resources on staff recruitment that is based on practices from human resources and informed by the needs and values of the field**
- **Identifying and disseminating models for fair compensation, family-friendly policies, and cultivating a positive work environment**

While staff may leave an agency for a variety of reasons, given what is known about burnout among people who work in trauma fields and the importance of staff longevity and continuity, it is important to consider how national TA providers can support efforts to prevent burnout among prevention educators. Some possibilities include:

- **Facilitating national, ongoing dialogues about self-care, including the promotion of self-care strategies through offerings at the National Sexual Assault Conference**
- **Raising awareness of the causes and consequences of burnout and secondary trauma**
- **Providing training and other resources on strategies to prevent burnout and secondary trauma**

The finding that these innovative programs typically rely on multiple prevention educators also speaks to the need for funders to consider how to fund for success. Despite increases in funding for sexual violence work in general and prevention in particular, there is still an ethos of relatively low funding relative to the comprehensive change that is being called for by funders. There is a need to align expectations and funding levels. National TA providers can support local and state/territory efforts to educate funders about what comprehensive prevention work requires. The NSVRC, especially, is in a position to influence national funders such as major foundations about the need to align program expectations with staffing levels and to increase funding for more prevention staff.

Implications for Coalitions and RPE Coordinators

When funding rape prevention programs, it is important to consider their staffing resources. This is not only a question of the number of staff, but also retention. Expecting agencies with high staff turnover to achieve the same comprehensiveness in their prevention programs as those with stable, experienced staff may be unrealistic.

Coalitions, especially, can play an important role in preventing burnout and promoting self-care by encouraging organizational practices and policies that create a positive working environment.

RPE coordinators are an especially important ally in efforts to align programming expectations and staffing levels. They can educate legislators about the need for increased funding if meaningful and substantial impact is to be achieved. Additionally, in their own roles they can set programming expectations that are commensurate with staffing levels.

Findings: Funding Innovations

How Do Innovative Agencies Fund Prevention?

There were a number of trends in how these agencies have funded their innovative prevention work.

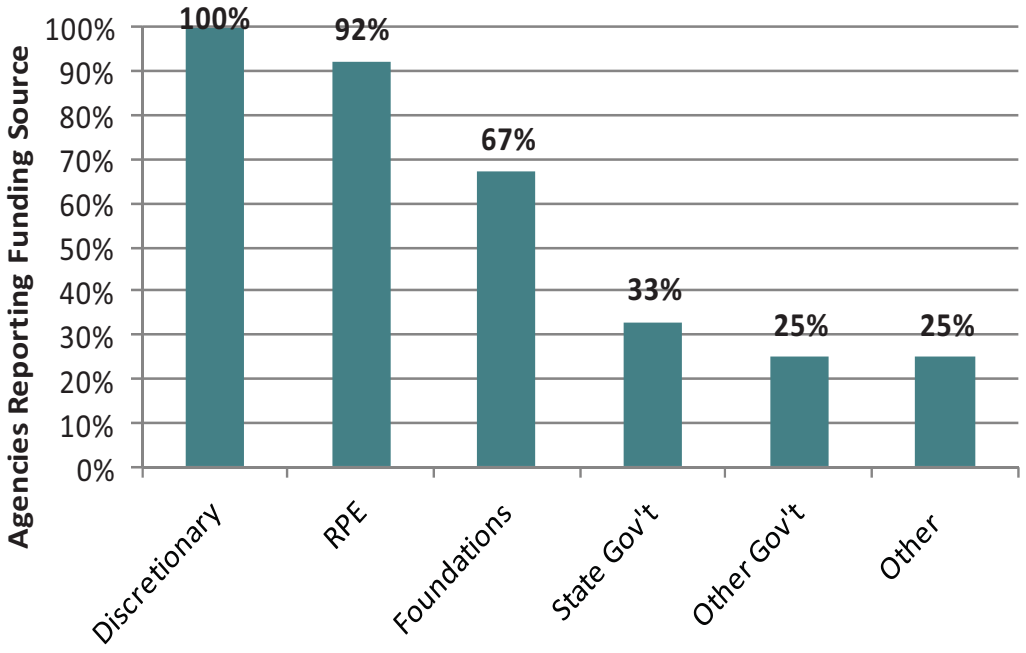
Most striking was the fact that **all agencies reported using discretionary or general operating funds for their prevention work.** This was a conscious choice made as part of a commitment to prevention. In the words of one executive director:

> *"We would be totally irresponsible to this community if we didn't put substantial money toward prevention."*

In the case of one agency that had funded its most innovative work solely through unrestricted funds, they directly attributed their innovative work to being free of grant requirements and restrictions:

> *"[Relying on unrestricted funds] is a blessing because we're not confined to grant objectives...We're more free with what we do and with our timeline...Because there's no prevention money specifically for this, it lets us create our own priorities."*

Figure 4. Funding Sources for Prevention Work



In part due to the use of discretionary or operating funds for prevention, these programs have **dedicated a substantial portion of their budgets to prevention.**

As a function of total agency budget, prevention budgets ranged from 6% to 100% with the **average prevention budget being 33% of the total agency budget. The majority of agencies devote 10-29% of their agency budget to prevention.**

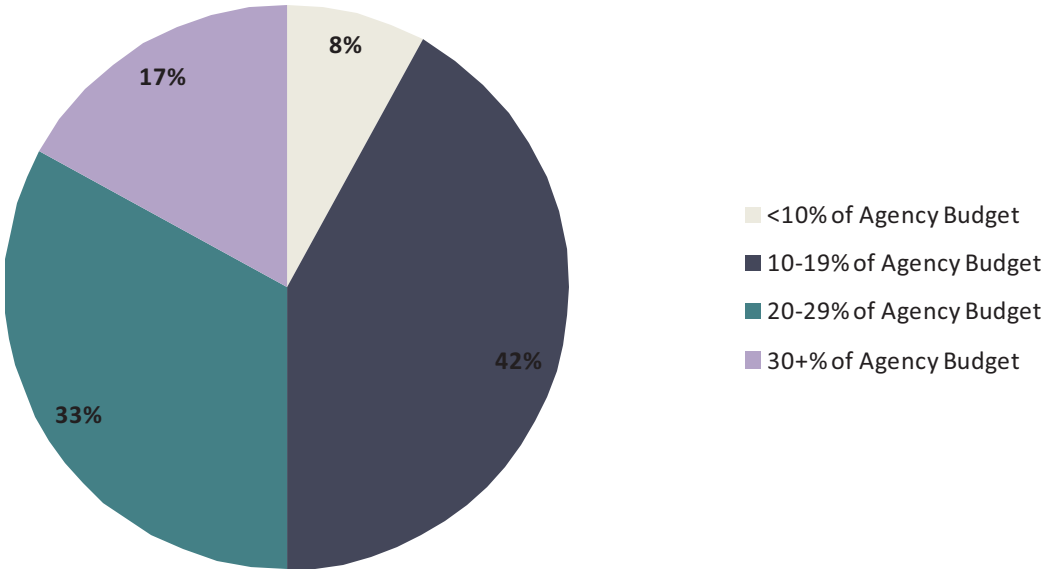
Additionally, **most agencies reported support for their prevention work coming from multiple types of sources**. The average was three types of funding sources.

How Do Innovators View Funding Requirements?

There were **concerns expressed with funders' conceptions of prevention**. These criticisms applied not only to the way federal RPE funds are administered, but also to United Way and foundation funding. Specific concerns included:

- **Funders being too restrictive in a way that artificially limits programs** and that is not sufficiently mindful of how empowerment of women can be primary prevention

Figure 5. Percentage of Agency Budget Dedicated to Prevention



- **Too much emphasis on the development of new programs** and insufficient funding for sustaining existing programs
- **Limiting funds to "evidence-based" practices** with a narrow definition of evidence that is not appropriate given the scant research that has been done on the prevention of sexual violence
- **Requiring that the number of people who are served be reported** when this simplistic counting does not match the ways leadership development and community mobilization are delivered or how they can change a community
- **Funders requiring measurable, immediate impact in the form of reduced prevalence** of sexual violence without understanding the intermediate outcomes and time necessary for this type of impact
- **Unfunded mandates to evaluate programs** and/or insufficient funding, training and technical support for evaluation
- **Emphasis on public health models to the exclusion of other applicable theories** such as youth leadership development, community development, social justice, criminal justice, anti-oppression ideologies, restorative justice, liberation ideologies, and theories of social change

It is worth taking note of a few comments that especially conveyed the ways agencies wrangle with the **mismatch between prevention in action and funders' expectations**:

> *"[Funders] don't see how valuable the work is because they can't count the number of people in chairs...The way it's funded and reported on colors their vision of their own success."*

> *"[Funders] function in their own orbits and that's a huge problem...They need to stop putting up these hard barriers that feel like it's about their own turf."*

> *"Our funding is not about our mission...and that's a problem for us."*

> *"Discussions about prevention are too academic and separated from real lives."*

> *"When people first learn about [primary, secondary and tertiary prevention] a light bulb goes off in the brain because we love categories, but categories are silos. We like lists, boxes, and neat little categories...It's troubling to me that people think this is solid and real. It's not. It's a concept, an idea, a theory. It's not the thing itself. So we've been pushing back a bit because it's too limited and limiting."*

The substantial funding from multiple sources that these agencies put toward prevention should not be mistaken as indicating that they do not struggle to fund their prevention work. **All agencies reported substantial, ongoing challenges with obtaining sufficient and stable funding for prevention. Innovation occurs in spite of these struggles.**

Summary

These innovations were made possible in part by the allocation of substantial discretionary and general operating funds. Additionally, most of these agencies support their prevention work through a variety of funding sources. While funding is a necessary resource, for most of these agencies the innovative ideas did not come from external funding priorities. Rather, innovation was driven by internal motivations and community needs. These programs expressed concerns with how funding requirements can unintentionally and unnecessarily limit innovation in prevention.

Implications for National TA Providers

National TA providers can be a vital force in educating national and international funders about sexual violence prevention. Particular attention should be paid to creating collaborative relationships with United Way Worldwide in order to influence the practices of community-based United Ways so they can more consistently and effectively support local prevention initiatives. Major foundations and state/territory governments should also be educated about how to fund sexual violence prevention programs in a way that increases the likelihood of success and comprehensive change.

Such education must go beyond raising awareness about the need for prevention funds. A number of fundamental misunderstandings need to be corrected, including:

- **The nature of multi-level, intergenerational prevention; reasonable short-term, intermediate, and long-term outcomes; and realistic time frames for seeing impact on the prevalence of sexual violence**
- **The integral connections between prevention and anti-oppression work, leadership development, policy change, and social change**
- **How reporting requirements that request data such as the number of people who participate in prevention programs can send mixed messages about how prevention is conceptualized and funded**
- **The paucity of empirical evidence on sexual violence prevention and evidence-based prevention strategies and strategies for evaluating proposals within that context**
- **Aligning expectations for evaluation with existing evaluation capacity and strategies for increasing that capacity**

Implications for Coalitions and RPE Coordinators

While national TA providers can work nationally on educating funders, this same education needs to occur with major funders in each state and territory. Additionally, RPE grantees and pass-through agencies should examine their own funding practices to ensure that requests for proposals, monitoring requirements and allocations account for the ways primary prevention is different from community education and risk reduction.

Findings: Diffusion of Innovations

The diffusion of innovations refers to how an innovation or intervention spreads so that the community becomes saturated with new ideas or principles and new norms emerge (Rogers, 1995). In this context, what we are talking about is how innovations in prevention practice spread through the professional community of rape prevention educators so that the field adopts new approaches to prevention.

For an innovation to be adopted widely, it is believed that it must have certain characteristics (Rogers, 1995). It must be:

- Perceived as **new**
- Perceived as **superior** to the previous practice
- **Consistent** with existing values and past experiences
- Not too **complex** to understand
- Able to be **tried out** on a limited basis
- Have **results** that are observable

In addition to these characteristics, the diffusion process also requires (Rogers, 1995):

- Effective **communication channels** by which the innovation is spread from one person or program to another
- **Time** for the process to unfold
- A **social system** through which the innovation can spread; these may be people or organizations that are interrelated, engage in joint problem solving, and are focused on a common goal

The available resources for the Year 2 assessment did not allow for a comprehensive evaluation of national diffusion processes in rape prevention. However, it did afford the opportunity to take a first glance at how the innovations described in the interviews, as well as some selected innovations that have been highlighted through the work of Prevent Connect, are beginning to spread through the field. A total of 20 innovations were included. (See Appendix D for a list of all innovations included on the survey.)

The diffusion survey was completed by 210 coalitions and rape crisis/prevention Programs in 42 different states and territories. Of those who responded:

- 12% were state/territory/tribal coalitions
- 18% were rape crisis centers
- 18% were comprehensive victim services or comprehensive social services agencies
- 52% were dual rape crisis / domestic violence agencies

How Widely Known Are These Innovations?

The first question this assessment sought to answer was how well known the 20 innovations are in the field. As shown on the following page, **the percentage of respondents who had heard of each innovation varied widely**. When all respondents were considered together, **as little as 3% and as many as 72%** reported knowing about each innovation.

When the data were examined based on the type of agency the respondent worked for, an interesting difference emerged: **A greater proportion of coalitions were aware of more of the innovations.** These data do not allow for definitive conclusions to be drawn about why this was the case. However, drawing from the diffusion of innovations theory, it

may be that coalitions have more effective communication channels and are more organized social systems than the national network of locally-based programs.

A second striking pattern was that respondents were **much more likely to have heard of innovations in which resources have been invested to distribute the curriculum or campaign nationally.** For all types of agencies, they were **three times more likely to have heard of the nationally disseminated innovations than they were to have heard of those that were developed for local or state level usage.** This was true even when the local and state level developers have presented their programs at national conferences, posted materials on their websites, and done other things to share their work with a national audience.

Percentage of Respondents Who Have Heard of the Innovation

	All Agency Types	Coalitions	RCCs	Dual Programs	Comprehensive Centers
Range for **ALL** Innovations	3% - 72%	0% - 96%	0%—68%	4% - 76%	0% - 71%
Average for **ALL** Innovations	28%	40%	26%	28%	24%
Average for **Nationally Disseminated** Innovations	58%	82%	57%	57%	48%
Average for **State/Local** Innovations	18%	26%	16%	18%	15%

Expecting that state/local innovations may be more well-known in their own states, the data were also examined for geographic patterns. Due to unequal responses between states, data were only considered for states that had 5 or more programs respond to the diffusion survey. This resulted in geographic distribution being considered for:

- 11 of the 42 states/territories that were represented in the diffusion survey responses
- 9 of the specific curricula or campaigns developed by agencies that were interviewed

Based on these data:

- 44% of the curricula or campaigns were most well known **in their own states**
- 56% of the curricula or campaigns were most well known **in a state other than their own**

Given the unequal responses across states/territories, these findings must be interpreted with great caution. However, they were surprising and raise interesting questions about how programs find out about innovative practices.

An additional way of considering geographic diffusion is to look at each state that had 5 or more respondents to the diffusion survey and to consider how many innovations those programs were aware of. As shown below, there are some interesting differences between states. It must be stressed that these findings are not a reflection on these states. These findings are about diffusion patterns.

Three main diffusion patterns are seen here:

- The first three states showed a **bimodal distribution** which indicates that innovations are either widely known OR little known. In these states there were very few innovations that were known by only a moderate number of agencies.
- The next two states showed a **more even distribution** where, although approximately half the innovations were not well known, the other half were known by either a moderate or large number of agencies.
- The remaining states showed **little awareness** of these innovations by any agencies.

Number of Innovations Heard of by State

	# of Innovations		
	Endorsed by 60% or more of Respondents (High)	Endorsed by 30% - 59% of Respondents (Moderate)	Endorsed by less than 30% of respondents (Low)
State A	8	2	10
State B	7	3	10
State C	5	0	15
State D	5	5	10
State E	4	4	12
State F	3	1	16
State G	2	5	13
State H	2	4	14
State I	2	7	11
State J	1	4	15
State K	1	4	15

There are innumerable reasons these innovations may be more or less known in a given state. Possibilities include the degree to which coalitions and funders promote or require particular strategies, the choices they have made about highlighting these or other innovations, whether innovators have done training in the state, the degree of autonomy given to programs, the frequency of networking opportunities focused on prevention, etc. While these patterns do not speak to the causes, they do highlight the need for further exploration.

Who Uses these Innovations?

In addition to asking if respondents had heard about each innovation, they were also asked whether they had used the innovation during the past 12 months. Recognizing that there are different ways programs may use a curriculum or campaign, use was divided into four levels: *no use, taking ideas or inspiration from the innovation, use of some materials, use of the full approach/program*.

As shown below, there was **much less adoption of the innovations than awareness of the innovations.** Similar to the earlier findings, **those innovations that have been nationally disseminated and promoted had higher adoption rates** than those that were developed and primarily disseminated at the state or local levels.

Percentage of Respondents Who Have Used the Innovation — All Agencies

	Not Used	Taken Ideas or Inspiration	Used in Part	Used in Full
Range for **ALL** Innovations	49% - 99%	1% - 22%	0% - 21%	0% - 12%
Average for **ALL** Innovations	85%	8%	6%	2%
Average for **Nationally Disseminated** Innovations	64%	17%	14%	6%
Average for **State/Local** Innovations	91%	5%	3%	1%

It is interesting to compare the percentage of respondents who have heard of these curricula and campaigns versus those that have used them.

- On average 58% of respondents have heard of the nationally disseminated innovations, but only 37% have used them in any form
- On average 18% of respondents have heard of any of the state/local innovations, but only 9% have used them in any form.

There are many valid and important reasons for the differences between knowing about an innovation and adopting it. However, these differences underscore the question of what leads agencies to adopt or not adopt a prevention curriculum or campaign.

Finally, adoption of these innovations can be looked at by agency type, as shown on the following page. Three interesting patterns emerge.

First, when considering all of the innovations together, **coalitions and rape crisis centers were approximately twice as likely to adopt** at least some parts of the curricula and campaigns than were dual agencies or comprehensive centers.

Second, **coalitions were more likely to report that they either took inspiration from or adopted at least some parts of the national curricula and campaigns** than were community-based organizations.

That, on average, slightly more than one-fourth of coalitions reported using innovations may indicate that some coalitions are taking a direct and active role in prevention. This has clearly been seen in a few states/territories where there have been prevention initiatives implemented state/territory-wide under the leadership of the coalition. Yet, in other states/territories the coalition may leave prevention programming entirely to local programs. The different roles coalitions take in prevention programming are worth further investigation.

Third, **very few respondents said they adopted curricula or campaigns in full**. Of those that did, they were slightly more likely to be rape crisis centers, but the differences between types of agencies were minimal.

Percentage of Respondents Who Have Used the Innovation — By Type of Agency

	Not Used				Taken Ideas or Inspiration				Used in Part				Used in Full			
	Coali-tions	RCCs	Dual	Comp.	Coali-tions	RCCs	Dual	Comp.	Coali-tions	RCCs	Dual	Comp.	Coali-tions	RCCs	Dual	Comp.
Range for **ALL** Innovations	35% - 100%	42% - 100%	48% - 99%	52% - 100%	0%—30%	0%—30%	1%—24%	0% – 18%	0%—35%	0%—24%	0%—18%	0%—27%	0%—5%	0%—10%	0%—13%	0%—9%
Average for **ALL** Innovations	80%	84%	85%	87%	9%	7%	8%	6%	10%	11%	5%	6%	1%	3%	2%	3%
Average for **Nationally Disseminated** Innovations	48%	60%	55%	71%	24%	16%	17%	10%	26%	15%	11%	14%	2%	8%	6%	5%
Average for **State/Local** Innovations	91%	92%	91%	92%	4%	4%	5%	5%	5%	5%	3%	3%	0%	1%	1%	1%

Summary

The percentage of survey respondents who have heard of the 20 listed innovations varied widely with innovations that have been distributed nationally being much more well known than those that were developed for state or local use. Coalitions were more likely than community-based programs to be aware of more of the innovations. Surprisingly, innovations were not more well known in the state in which they were developed. There were clearly different patterns between states with some having far more respondents who were aware of more of the innovations and others having very few respondents saying they were aware of the innovations. There was much less adoption of the innovations than awareness of them. Again, nationally disseminated innovations were more likely to be adopted. Coalitions and rape crisis centers were approximately twice as likely to adopt at least some parts of the innovations than were dual agencies or comprehensive centers.

Implications for National TA Providers

While this diffusion assessment was only a first glance, it raised some interesting questions that are worth further exploration in the Year 3 assessment.

- **The fact that coalitions were more aware of more of the innovations than community-based programs raises questions about the relative strength of communication channels and networks. It may be helpful to learn more about how community-based programs learn about prevention strategies, sources they see as credible, and the degree to which they feel they are a part of state, regional and national networks.**
- **The three distinct diffusion patterns at the state level raise questions about the different roles and approaches coalitions and RPE coordinators take in prevention training, information dissemination, and promotion of curricula and campaigns. Further exploration of these patterns and identification of what is happening in states where there is high awareness of a wide variety of innovations may provide insight into how to distribute or promote innovations more effectively.**
- **In addition to the ongoing assessment of the strategies prevention programs use, it may also be useful to explore in greater depth how they make their decisions when choosing strategies, curricula and campaigns. This information can help when marketing innovations.**

More broadly, these findings provide preliminary evidence that coalitions are more well networked than community-based programs and, consequently, innovations diffuse more easily to coalitions. The NSVRC and PreventConnect are key leaders in networking all programs. However, this is a daunting task at the national level. Increased resources

and new approaches to developing a national network of prevention educators may help, especially in states where innovations have diffused less widely.

Additionally, national TA providers may want to reflect on their roles as the promoters of prevention innovations. The differences between nationally disseminated and state/local innovations was striking in terms of the field's awareness and use of the innovations. This is not surprising, but it does raise the possibility that important and potentially effective innovations that are developed at the state or local levels may not reach their full potential nationally because they lack a platform to be shared. Given greater resources for national dissemination, the NSVRC and PreventConnect could play a greater role in promoting specific strategies, curricula and campaigns. However, this is a role that should be undertaken only with due consideration to its broader ramifications.

On a more specific note, the fact that coalitions and rape crisis centers were approximately twice as likely to adopt at least some parts of the curricula and campaigns included on the survey than were dual agencies or comprehensive centers raises questions about how different types of agencies engage in prevention networks. When the surveys from the Year 3 assessment are analyzed, potential differences by type of agency will be examined in greater depth.

Implications for Coalitions and RPE Coordinators

These findings also raise interesting, albeit preliminary, implications for coalitions and RPE coordinators. First, the greater awareness of these innovations on the part of coalitions versus community-based programs raises the possibility that there is an information gap with innovations reaching coalitions but then not spreading to the local level. Assessing which local programs are aware of and/or use specific strategies, curricula and campaigns and how they learn about them may help state/territory/tribal leaders strategize more effective dissemination methods.

Second, coalitions and RPE coordinators also may want to reflect on their roles as the promoters of prevention innovations. Allowing autonomy of programs to meet their communities' needs and work in ways that are consistent with their communities' values is vital to successful prevention. However, coalitions and RPE coordinators are also entrusted with a quality assurance role and are leaders of the movement. Balancing autonomy and leadership is challenging and requires ongoing dialogue among coalition, RPE staff and local programs.

Concluding Thoughts

This report has included specific suggestions for the NSVRC and PreventConnect around training, technical assistance and other efforts to address:

- Development of youth curricula
- Community mobilization
- Prevention as social change
- Community/agency-specific technical assistance
- Broadening prevention strategies
- Agency capacity for prevention
- Human resource needs
- Prevention of burnout
- Education and advocacy with funders

In addition to those suggestions, there are three additional directions the NSVRC may want to consider.

Building Evaluation Capacity

A glaring silence in this assessment was in the area of program evaluation. This is because these agencies acknowledged the importance of evaluation, expressed desire to engage in evaluation, but reported having little to no experience, skill or resources for formal outcomes evaluations. There were only two agencies that were an exception.

This silence around evaluation speaks volumes to the need for resources, training and assistance to build evaluation capacity.

Evaluation capacity is not merely about knowing how to design an evaluation and write evaluation measures such as surveys. Rather, it is about building knowledge, skills and attitudes about evaluation; building organizational capacity that supports evaluation as a routine part of operations; and engaging in evaluation in a way that is sustainable (Preskill & Boyle, 2008).

Areas that contribute to evaluation capacity include (Preskill & Boyle, 2008):

Knowledge, Skills and Attitudes:

- Motivations to evaluate
- Assumptions about evaluation
- Expectations for evaluation
- Evaluation design and measurement
- How to implement evaluation

Organizational Capacity:

- Leadership
- Culture
- Systems and structures
- Communication

Sustainable Evaluation Practice:

- Evaluation policies and procedures
- Strategic plan for evaluation
- Resources for evaluation
- Technical evaluation skills
- Integrated system to manage evaluation data and findings
- Use of evaluation findings
- Continuous learning about evaluation
- Shared evaluation beliefs and commitment

When trying to build the capacity of the field for evaluation, it is important to remember that this is not merely a matter of explaining what evaluation is or even of holding workshops where specific evaluation skills are developed. Rather, building evaluation capacity requires engaging an agency-wide commitment to evaluation. When addressing the technical aspects of evaluation, hands-on support as agencies walk through their first

evaluations is often needed.

This is not to say that there is no role for conference workshops, online trainings, evaluation toolkits, etc. It is merely to underscore that multiple approaches are needed in order to have the greatest, sustainable impact. Strategies for building evaluation capacity include (Preskill & Boyle, 2008):

- **Written materials** such as technical assistance bulletins, toolkits, etc.
- **Technology** such as web-sites, webinars and e-learning modules
- **Meetings** that provide time and space to discuss progress on evaluations and share ideas
- **Learning circles** where agencies can network with one another, share evaluation experiences and practices, and learn from one another (in person or online)
- **Trainings** such as conference workshops and institutes
- **Involvement** in the evaluation process, whether conducted by the agency or done collaboratively with an external evaluator
- **Technical assistance** received from someone experienced in evaluation
- **Coaching or mentoring** where there is an ongoing relationship with someone who has expertise in evaluation and who provides individualized technical and professional support
- **Internships** where a staff person participates in a formal evaluation course or structured experience with a practical component

The NSVRC and PreventConnect have important roles to play nationally in promoting and supporting evaluation in the field. As resources for both coalitions and community – and campus-based organizations, they can provide a level of training and technical assistance that surpasses most local resources.

To do this, the NSVRC's and PreventConnect's own capacities for evaluation must be strengthened. Funding from federal agencies and national and international foundations is needed to support a comprehensive, national approach to building evaluation capacity in the field.

Generating Practice-Based Evidence

In addition to building the capacity of coalitions and rape prevention programs to conduct their own evaluations, the NSVRC and PreventConnect can bring a national perspective, resources and energy to generating practice-based evidence.

Often times individual agencies are limited in their ability to conduct the most rigorous evaluations. Even if they have evaluation capacity, they may not have enough participants in a specific program, access to a comparison/control group, etc. However, when multiple agencies are using the same curriculum or strategy there is the potential for pooling their data together, accessing additional external resources such as research grants, and conducting an evaluation of the curriculum or strategy that can generate robust evidence about prevention practices. The NSVRC and PreventConnect can play a leading role in facilitating this type of effort.

National Sexual Assault Conference

One unfortunate finding of this assessment was that innovative prevention programs are often well-kept secrets. The question of how to create a more efficient network to diffuse not only prevention innovations but also

other information and resources throughout the field will be explored further in the Year 3 assessment.

At this time, one avenue for both the diffusion of innovations and the facilitation of national dialogues is the National Sexual Assault Conference.

It may be worth while for the NSVRC/PCAR, CalCASA, and the other rotating sponsors of NSAC to select together strategies that can be used each year to capitalize on opportunities NSAC represents for showcasing innovation.

To start the brainstorming, the following ideas may be worth considering:

- Setting aside slots for invited workshops by programs that have developed innovative approaches to prevention or in some way represent a promising direction
- Ensuring that the prevention track of the conference always has workshops that address specific domains (e.g., healthy relationships, community mobilization, media literacy and advocacy, anti-oppression approaches to prevention, etc.)
- Exploring ways to offer in-depth (half-day, full-day or multi-day) institutes on specific innovations and prevention strategies for participants who want more comprehensive training in a specific area
- Establishing guidelines for plenaries and keynote speakers to ensure that at some time during each conference innovative prevention and anti-oppression work are highlighted
- Other ways of showcasing innovative prevention work, such as special showcase tables in the vendor area, networking events, and other creative approaches that draw attention to innovative work

The strength of rotating conference sponsors is that each sponsor can bring its unique perspectives and shape each conference in different ways. However, given the importance of this conference in defining the field, having some consistent approaches across conferences could strengthen the promotion of innovation.

Role of the NSVRC and PreventConnect

The NSVRC and PreventConnect can and should play a pivotal role in promoting and supporting innovation in prevention. This is a movement with many leaders. That diversity of skills, experience and perspectives is what makes it possible for coalitions and programs to do so much with so few resources.

However, because of the scarcity of resources it is even more important that there be a strong, visible national presence that can access national and international level support. The NSVRC and PreventConnect can:

- Bring together the energy and drive of coalitions and local programs
- Synthesize the experiences and wisdom that this movement represents
- Support existing leadership and innovation
- Create the structures, networks and opportunities necessary to support innovation and effectiveness
- Define a national agenda for prevention
- Mobilize a national, multi-disciplinary effort to prevent sexual violence

Next Steps

As described in the Methodology, the activities and findings reported here were the second year of a three-year assessment. With the information and insights gained from the interviews and diffusion survey, the assessment can move forward into the final phase.

Year 3 is designed to focus on three evaluation activities:

- Follow-up national survey
- NSVRC technical assistance survey
- NSVRC training survey

National Survey: Year 3

The national survey is intended to follow up on the Year 1 survey. The original plan was to duplicate the survey, thereby giving a second snapshot of the field and allowing for comparisons to be drawn between Year 1 and Year 3.

In light of what was learned in both the Year 1 and Year 2 assessments, it is recommended that some changes be made to the Year 3 survey. At this time, it is recommended that the Year 3 survey include:

- **Endorsements of prevention principles with more detailed exploration of how the principles are implemented:** As may be recalled, the Year 1 survey found very high endorsement of all prevention principles. Therefore, substantial change is not expected on those ratings. However, discussions with stakeholders following the Year 1 survey raised questions about how programs actually implement the principles. For example, while multiple dosages of prevention messages and skills was highly endorsed, how many dosages do programs think are sufficient or ideal and how many do they actually achieve?

- **Definitions of prevention:** In light of the fact that only 52% of rape prevention programs gave definitions of prevention that were consistent with those advanced by the CDC and other leaders in the field, it is recommended that their definitions again be assessed not only for consistency but also for changes in themes and emphases.

- **Beliefs about prevention:** While substantial increases in positive beliefs about primary prevention were seen from a retrospective baseline to Year 1, there was still room for further positive change in attitudes. Additionally, it is possible that as programs have engaged more in primary prevention their beliefs could change in a negative direction. Therefore, this assessment should be repeated on the Year 3 survey.

- **How coalitions and programs learn about specific strategies, curricula and campaigns:** Not assessed on the Year 1 survey, it is recommended that questions be added to the Year 3 survey to assess how programs learn about prevention strategies and the sources they see as most

credible. Specific consideration should be given to when and how they turn to leaders such as the NSVRC, Prevent Connect, state/territory/tribal coalitions, and CDC project officers.

- **How coalitions and programs make decisions about prevention strategies:** Not assessed on the Year 1 survey, it is recommended that questions be added to assess how programs choose strategies, curricula and campaigns.

- **What coalitions and programs are doing for prevention, including prevention partnerships:** The Year 1 survey asked about involvement in specific types of prevention activities and partnerships. These questions should be asked again to see if there have been any changes.

- **Facilitators of and barriers to prevention work, including organizational capacity:** Like in Year 1, facilitators of and barriers to prevention work should be assessed to look for any changes in the patterns. Additional questions should be added to assess organizational capacity for prevention in greater depth.

- **Evaluation:** While evaluation methods and outcomes measured were assessed on the Year 1 survey, there is some concern that the information gathered was too broad to be actionable. In order to provide more detailed insight into what is needed to build evaluation capacity, it is recommended that this section be expanded.

- **State/territory/tribal prevention structures:** The focus groups conducted during Year 1 revealed great diversity in how prevention funds are administered and the roles coalitions and RPE coordinators take in shaping prevention strategies. A more systematic understanding of the different prevention systems can help the NSVRC and other national leaders respond better to specific contexts.

Methodologically, a few considerations should be kept in mind:

- The proposed additions will make the survey longer. Balancing **survey length** with depth of information will be a challenge.

- The Year 1 survey was **cross-sectional** and identifying information was not collected. Therefore, the Year 3 survey will also need to be cross-sectional (as opposed to matching Year 1 and Year 3 surveys from the individual respondents). This will impact the ability to draw conclusions about change at the agency level.

Technical Assistance and Training Surveys

In addition to the national prevention survey, the Year 3 assessment will also analyze data from the NSVRC's Technical Assistance and Training surveys. These will allow a direct assessment of these services provided by the NSVRC.

Multilingual Access Project

In addition to these prevention-oriented assessment activities, the NSVRC's Multilingual Access Project will also be continuing their assessment of the training and technical assistance needs to support multilingual information, resources and services.

Timeline

A proposed timeline for Year 3 assessment activities is found on the following page.

	Assessment Activities
November 2011	**Planning meeting with NSVRC staff and stakeholders** • discussion of Year 2 results • discussion of and planning for Year 3 assessment **Ongoing collection of TA and Training survey data**
December 2011—February 2012	**Draft and finalize Year 3 national prevention survey in collaboration with NSVRC and national stakeholders** **Ongoing collection of TA and Training survey data**
March—April 2012	**Post and print national prevention survey** **Ongoing collection of TA and Training survey data**
May—June 2012	**Send out invitations to participate in national prevention survey to all RPE coordinators, all coalitions and sample of RCCs** **Collect national prevention survey data** **Ongoing collection of TA and Training survey data**
July 2012	**Compile and analyze national prevention survey data** **Prepare summary of Year 1—Year 3 comparisons for RPE meeting** **Ongoing collection of TA and Training survey data**
August 2012	**Share summary of findings at RPE meeting and NSAC** **Ongoing collection of TA and Training survey data** **Preparation of Final Project Report**
September 2012	**Submission of Final Project Report to the NSVRC**

References

Bernard, H. R. (1995). *Research methods in anthropology: Qualitative and quantitative approaches.* New York: Altamira Press.

Erikson, F. (1986). Qualitative methods in research on teaching. In M. C. Wittrock (Ed.), *Handbook of research on teaching* (3rd edition) (pp. 119-161). New York: Macmillan.

Hsieh, H., & Shannon, S. E. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research, 15,* 1277-1288.

Minkler, M., & Wallerstein, N. (2003). *Community-based participatory research for health.* San Francisco: Jossey-Bass.

Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd edition). Thousand Oaks: Sage.

Preskill, H., & Boyle, S. (2008). A multidisciplinary model of evaluation capacity building. *American Journal of Evaluation, 29,* 443-459.

Reinharz, S. (1992). *Feminist methods in social research.* New York: Oxford University Press.

Rogers, E. M. (1995). *Diffusion of innovations* (4th edition). New York: Free Press.

Rossi, P. H., Freeman, H. E., & Lipsey, M. W. (1999). *Evaluation: A systematic approach* (6th edition). Thousand Oaks: Sage.

Singleton, R. A., & Straits, B. C. (2009). *Approaches to social research.* New York: Oxford University Press.

Appendix A: Interview Nominations and Rating Criteria

National Sexual Violence Resource Center

Selection of Exemplar Programs

January 11, 2011

Nomination Process:

- Project announced via NSVRC and Prevent Connect listserves with nominations and self-nominations solicited
- Nominations from NSVRC and Evaluation Advisory Groups

Listserve Announcement:

As part of its ongoing work to document what is happening nationally in the prevention of sexual violence, in the coming months the National Sexual Violence Resource Center (NSVRC) will be interviewing representatives of prevention programs about their work. If you know of a prevention program (yours or another) that is doing what you think is innovative or cutting edge prevention work, please let us know. We are especially interested in programs that are doing creative work with intensive school based programs, programs outside of schools, culturally-specific programs, and/or community mobilizing. We also are interested in agencies that have infused prevention throughout their organizations and/or that demonstrate exemplary organizational leadership around prevention.

If you know of a program or organization that you would like the NSVRC to consider inviting to participate in these interviews, please fill out the attached Suggestion Sheet. Due to resources, a limited number of interviews will be able to be done but every effort will be made to include as many programs/organizations as possible. Please make your recommendations by February 15, 2011 by sending your Suggestion Sheet to Jennifer Grove at jgrove@nsvrc.org or at NSVRC, 123 N. Enola Drive, Enola, PA 17025.

National Sexual Violence Resource Center

Suggestion Sheet for Innovative Prevention Programs and Agencies

Suggested Agency Name: _____

Suggested Agency Address: _____

_____

Suggested Agency Email: _____

Suggested Agency Phone: _____

What is this program/organization doing to prevent sexual violence?

Why do you think their work is unique?

Is the prevention work of this program/organization designed to (check all that apply):

_____ be culturally specific
_____ be implemented within school settings
_____ be implemented outside of school settings
_____ develop specific skills
_____ rely on community mobilization
_____ address multiple forms of oppression

To your knowledge, has the program/organization assessed its prevention work or somehow captured its impact?

_____ Yes
_____ No
_____ Don't Know

— Continue on next page —

How would you describe the leadership in the program/organization around prevention issues and prevention resources?

If possible, please provide examples of how prevention work is integrated throughout the agency.

Is there anything else we should know about this program/organization or anything else that makes it unique in the field of sexual violence prevention?

Thank you for your suggestion.
Please return this form to Jennifer Grove at the NSVRC:
jgrove@nsvrc.org
123 N. Enola Drive, Enola, PA 17025

Criteria for Selecting Exemplar Programs

	Not reflective of program 1	2	3	4	Very reflective of program 5	Unknown
Programmatic Innovation						
Based on a theory of change						
Uses multiple strategies						
Uses varied methods						
High intensity/Dosage						
Culturally/contextually specific						
Relies on community mobilization						
Addresses intersectionality of oppressions						
Able to be replicated						
Implemented on a feasible budget						
Outside school setting						
Prevention work systematically assessed for impact						
Organizational Innovation						
Demonstrated organizational commitment to prevention work						
Integration of prevention throughout agency						
Social change orientation						
Active collaboration with community partners						
Organizational structure that reflects agency's values						
Systematic leadership development for prevention within the agency						
Systematic leadership development for prevention within the community						

Appendix B: Interview Recruitment

Dear

The National Sexual Violence Resource Center is currently documenting innovative work being done to prevent sexual violence. As part of that project, your program was nominated (by another agency or as a self-nomination) as an example of an innovative and effective approach to sexual violence prevention.

On behalf of the NSVRC, I am pleased to invite your program to participate in this project. The NSVRC is especially interested in learning about {2-3 sentence description of the specific program of interest}. Additionally, if there are other aspects of your prevention work that you think are important to your mission, I would be delighted to learn about them as well.

By participating in this project you will make an important contribution to our national efforts to end sexual violence. By understanding how innovative, cutting edge programs such as yours develop and succeed, we can better help other communities mobilize to prevent sexual violence. Your program can serve as a model of how to overcome the challenges that often limit what we do for prevention. As such, your participation will provide important leadership to the movement to end sexual violence.

What this project entails is very simple:
I would ask that you share with me any written materials that are central to your prevention work and that will help me understand what you are doing in your prevention work. These might include copies of your prevention curricula, social norms campaigns, PSAs, strategic plans or logic models for your prevention work, newspaper articles about your work, evaluation findings, etc.

Then I would like to interview representatives of your program about your work to learn more about what you are doing, how you developed your prevention strategies, what it has been like to do this work, and how prevention fits with other aspects of your organization's mission and with your community.

I am specifically interested in interviewing (as applicable), (1) a prevention educator, (2), a program administrator, and (3) your executive director. Each interview will take approximately 45 minutes. All interviews will be confidential. They will be arranged at a time that is convenient for you and will be done by either telephone or online videocall, whichever you prefer. I would like to hold the interviews in May and June.

The next steps for this project are:

1. Please reply to this email and let me know if you are willing to participate.
2. Mail to me any materials related to your prevention work. If at all possible, I would ask that these materials be mailed by April 15th.
3. After I have reviewed the materials I will be in touch with you about scheduling interviews in May and June.

If you have any questions or would like additional information about this project, please ask. I am the

independent evaluator whom the NSVRC has contracted to carry out this project. I have worked in the movement to end sexual violence for twenty years and am in tune with the issues faced at the local, state, and national levels. You can reach me at:

Stephanie M. Townsend, PhD
stephanie.townsend@earthlink.net
(585) 690-9315
8 Locke Drive, Pittsford, NY 14534

You can also direct questions to the NSVRC by contacting Jennifer Grove at jgrove@nsvrc.org or calling her at (717) 909-0710.

I hope you will choose to participate in this project. Your experiences and perspectives will be an important contribution.

Sincerely,
Stephanie Townsend, PhD

Letter to Send to Programs NOT Receiving Invitation

16 March 2011

Name
Agency
Address
City, State ZIP

Dear

The National Sexual Violence Resource Center is currently documenting innovative work being done to prevent sexual violence. As part of that project, your program was nominated (by another agency or as a self-nomination) as an example of an innovative and effective approach to sexual violence prevention.

We received many nominations of programs we could highlight. This is a good thing as it shows that the movement to end sexual violence is strong and growing. Unfortunately, we are not able to highlight all of the programs that were nominated. Due to limitations on the scope of this project, we will not be able to highlight your program.

We want to commend you for the work you are doing to end sexual violence. It was our pleasure and privilege to learn about your program. It is through the efforts of programs such as yours that we are making a difference in communities all throughout the nation.

If the NSVRC can assist you in any way, please be in touch. We serve as the nation's principle information and resource center regarding all aspects of sexual violence. Our national leadership, consultation, technical assistance, and information on sexual violence intervention and prevention are available to you. We are a resource for you and will be happy to help you in any way we can.

Thank you, again, for all that you do.

In Solidarity,

Karen Baker
Executive Director

Appendix C: Interview Protocols

National Sexual Violence Resource Center

Interview Protocol for Exemplar Programs *January 24, 2011*

Rape Prevention Program Interview

Date of Interview: _____

Start Time: _____

End Time: _____

Elapsed Time: _____

ID: _____

Role: _____ Prevention Educator

_____ Executive Director

_____ Board Member

_____ Other

_____

Thank you for taking time out of your schedule to talk with me. As I explained when I contacted you, I would like to talk with you as part of an assessment I am doing for the National Sexual Violence Resource Center. For this project I am interviewing people associated with approximately 12 rape prevention programs. All of these programs, including yours, have been identified as particularly innovative or as leaders in the field. We hope to learn about what has made it possible for your program to do creative, innovative prevention work.

So you know where we are headed, there are four main areas I want to talk with you about: what you are doing in your prevention work, how your prevention efforts developed, what it has been like to do the work, and how your prevention work fits with other things your organization may do. The NSVRC hopes to use what we learn to better understand what is working and, more importantly, why and how it's working. Those lessons can help the NSVRC and other leaders in the field figure out how to help more programs do innovative and effective prevention work in their own communities.

Most of the questions I have are open-ended so this interview will be very conversational. What's most important is that I hear what you have to say. So at any point if something we're talking about brings up thoughts for you on a related topic, feel free to tell me about it.

Finally, before we get started, there are a few practical things I need to let you know. This interview is confidential. While I know who you are, in no way will you or your program be identified to the NSVRC in the report I write for them. For the most part, I will be describing the common themes I hear across the interviews. If I do use a quote from an interview it will only be to illustrate a point and the source will not be identified. If at any point you want to go off the record or you don't want to answer a particular question, let me know.

To start, it will help me to know a bit about your agency in general.

1. Can you give me a short summary of what kind of agency it is and briefly tell me about its history?

Type of agency:
_____ Rape crisis only
_____ Dual rape crisis/Domestic violence
_____ Child advocacy center
_____ Dual rape crisis/child advocacy center
_____ Multi victim services, including: _____
_____ Multi social services, including: _____
_____ Rape prevention only
_____ Multi issue prevention, including: _____
_____ Other: _____

Agency operating since: _____ (year)

Rape prevention work since: _____ (year)

Area(s) served:
_____ Urban
_____ Small city
_____ Suburban
_____ Rural

Number of counties served: _____

Inception:
_____ Community-based, single entity
_____ Community coalition
_____ Large NGO
_____ Governmental
_____ Educational Institution
_____ Other: _____

Current:
_____ Community-based, single entity
_____ Community coalition
_____ Large NGO
_____ Governmental
_____ Educational Institution
_____ Other: _____

Notable/unique aspects:

Now I would like to talk specifically about your prevention work. So you know, the part of your work that stood out to the NSVRC was _____. So while I am particularly interested in talking about that part of your work, if there are other aspects of your prevention work that you think are important, feel free to tell me about them as well.

2. Can you tell me about your prevention work? What are you doing?

Description of Innovation:

Type(s) of innovation:

_____ School-based
- _____ Curriculum
- _____ Youth leadership
- _____ Adult leadership
- _____ Other: _____

_____ Non-school community setting
- _____ Curriculum
- _____ Youth leadership
- _____ Adult leadership
- _____ Other: _____

_____ Community mobilization
Focus: _____

_____ Social norms campaign

_____ Organizational/policy change

_____ Other: _____

2. Can you tell me about your prevention work? What are you doing? (***continued)***

Who is involved:

_____ Youth
_____ Educators
_____ Adults who work with youth
_____ Adults
_____ Social service organizations
_____ Other community organizations
_____ Businesses
_____ Legal System
_____ Medical System
_____ Neighborhoods/specific communities
_____ Culturally specific communities: _____

_____ Small group, self-selected
_____ Small group, recruited
Basis/How: _____
_____ Large group, self-selected
_____ Large group, recruited
Basis/How: _____
_____ General population

Roles of those involved:

Who else is influenced

_____ Youth
_____ Educators
_____ Adults who work with youth
_____ Adults
_____ Social service organizations
_____ Other community organizations
_____ Businesses
_____ Legal System
_____ Medical System
_____ Neighborhoods/specific communities
_____ Culturally specific communities: _____

How others are influenced:

3. In practical terms, how do you carry out this work?

   How is it staffed?
   - Number of staff/volunteers: _____
   - Roles of staff/volunteers?
   - Roles of community partners?
   - External "consultants"?

   What skills does it take to use this approach?

   How do you ensure that people involved with the effort have those skills?
   - Hiring/selection?
   - Training/TA?

   How do you handle staff turnover vis-à-vis this work?
   - Have you had any problems come up due to staff turnover?
   - If so, how have you handled those challenges?

4. How is this prevention work funded?
   - _____ RPE
   - _____ State funds: _____
   - _____ Other government sources: _____
   - _____ Foundation grants
   - _____ Discretionary funds
   - _____ Other: _____

   Funding Amount: _____
   Funding Cycle: _____
   Competitive: Yes / No

5. How did this innovation(s) develop?

What was the catalyst?

Where did the idea(s) come from?

Did you borrow ideas, strategies, materials from elsewhere? If so:
- What did you borrow and where did it come from?
- How did you find out about it?
- Why did you think it would be useful?

How did your agency first respond to the idea of taking this approach?
- Who was supportive and why?
- Who was reluctant and why?
- Have those attitudes changed over time? If so:
  - How have they changed?
  - What has brought about the changes?

Who at your agency was primarily involved in developing the strategy? What were their roles?

Even if they weren't primarily involved, were there people whose support was critical to its development?
- Who? Role?
- How supported?
- What do you think would have happened without their support?

5. How did this innovation(s) develop? ***(continued)***

Were there people or groups outside of your agency who were important in the development of the approach?

Who? Role?
How supported?
What do you think would have happened without their support?

How long did it take to develop this approach?

Were there specific milestones along the way that were critical to its development?

What challenges did you encounter when developing it?

How did you handle those challenges?

Did the challenges or anything else change the direction of where you ended up going? In other words, if what you're doing now looks different than what you first imagined it would be, what made those changes happen?

What types of evidence did you use when developing the approach?

What did you learn or need to know about community or context to develop the approach?

6. How did you go about implementing this approach to prevention? In other words, what has it been like to carry out this work?

    How has the community responded?
        Interest?
        Support?
        Challenges?

    What support have you needed from the community?
        If you have received support, in what ways?
        If you have not, what do you think the reasons have been?
        How has the support (or lack thereof) affected your work?
        What have you done when you did not receive the support you were looking for?

    What support have you needed from people in your own agency?
        If you have received support, in what ways?
        If you have not, what do you think the reasons have been?
        How has the support (or lack thereof) affected your work?
        What have you done when you did not receive the support you were looking for?

    How has your work developed over time?
        If there have been changes, why and how did they happen?
        How does what you are doing compare with what you hoped to do?

    How long did it take to get your work started?
        What influenced that timeline (made it shorter or longer)?

    What types of evidence do you use to get the community to buy into the approach??

    What did you learn or need to know about the community to help implement the approach?

Now that I understand about what it is you do, I would like to talk about the impact it is having.

7. What successes have you had with this prevention work?

   How do you know when you have been successful? What do you look for?

   What do you think has been most important to your success?

8. What has not gone as you had liked or what has been disappointing about this work?

   How have those experiences affected what you are doing?

   What have you learned from those disappointments?

   What might you do differently in the future or what lessons would you share with other communities thinking about taking a similar approach to prevention?

9. How have you assessed your work?

Type(s) of Assessment:

_____ Pre-post outcomes surveys, behavioral
_____ Pre-post outcomes surveys, knowledge/attitude
_____ Satisfaction/feedback surveys
_____ Interviews/focus groups
_____ Observations
_____ Archival data
_____ Informal feedback
_____ Other: _____

_____ Internal, agency-led evaluation
_____ Evaluation with TA from consultant
  _____ RPE coordinator
  _____ State coalition
  _____ Local resource
  _____ Hired consultant
  _____ Other: _____

_____ External evaluator
  _____ Hired
  _____ Volunteer
  _____ University faculty/staff
  _____ Graduate student/intern
  _____ Other: _____

What have you learned from your assessments?
How have you used what you learned?

What have you not learned that you wish you knew?
How would that information/knowledge be useful?

10. How have you shared your work with others in the field?

Modes of dissemination:

_____ None
_____ Respond to inquiries
_____ Share with state coalition
_____ Share with RPE coordinator
_____ Share with PreventConnect
_____ Share with NSVRC
_____ Newsletters: _____
_____ Conferences: _____
_____ Other: _____

What are your reasons for sharing your work?

What are others most interested in learning about your work?

If you haven't shared your work, why not?

Were you surprised that you were identified as an important innovation by the NSVRC?
If so, why?

Finally, I would like to come back to your agency as a whole and talk about how prevention work like what you have described to me fits in with its mission and work.

11. What about in your own agency? How aware are others of your prevention work?
    - How do they learn about it?
    - How do they respond?

12. Who within your organization provides leadership or vision to your prevention work?

    How does their leadership enrich the work?

    Who do you wish was more involved in or more supportive of your prevention work?
    - What would you like them to do?
    - How would their involvement enrich your efforts?
    - What have you done to try and get them involved more? How did they respond?
    - What do you think keeps them from being more involved?

13. If there was staff turnover in your agency, how would that affect your prevention work?
    - Have you or your agency done anything to ensure continued support?
    - What about steps you've taken to ensure that strategies and lessons learned are not lost?

14. What kind of support have you received for developing your own leadership around prevention?
    - How has that helped your work?

15. How integral is prevention to your agency's mission?
    - Can you offer some examples of how people other than prevention educators support your work?
    - How is prevention a part of what <u>they</u> do as well?

16. If you could change one thing about what your agency does in regard to prevention, what would it be? Why?

17. Is there anyone else, within or outside your organization, you think I need to talk to so I can better understand your prevention efforts?

18. Is there anything else we haven't talked about that you want me to know?

Thank you very much for taking time out of your busy schedule to talk with me. Your insights and feedback are very valuable. If you think of anything else you want me to know, feel free to give me a call or send me a message.

I will be sharing my report with the NSVRC at the end of September. They will be sharing it with the field, so you can look for it in the fall on their website or contact them to request a copy of it.

Best wishes to you in your work.

National Sexual Violence Resource Center

Interview Protocol for Exemplar Programs *May 19, 2011*

Executive Director/Administrator Interview

Date of Interview: _____ ID: _____

Start Time: _____ Role: _____ Prevention Educator

End Time: _____ _____ Executive Director

Elapsed Time: _____ _____ Board Member

_____ Other

_____

Thank you for taking time out of your schedule to talk with me. As I explained when I contacted you, I would like to talk with you as part of an assessment I am doing for the National Sexual Violence Resource Center. For this project I am interviewing people associated with approximately 12 rape prevention programs. All of these programs, including yours, have been identified as particularly innovative or as leaders in the field. We hope to learn about what has made it possible for your program to do creative, innovative prevention work.

As an Executive Director/Administrator, what I am interested in is the broader picture of your agency's prevention work and how it fits with your agency's mission. So you know where we are headed, there are four areas I would like to talk about: administrative considerations when doing prevention work, how the community has responded, what you may have learned from assessing your work, and how prevention fits with your agency's overall mission.. The NSVRC hopes to use what we learn to better understand what is working and, more importantly, why and how it's working. Those lessons can help the NSVRC and other leaders in the field figure out how to help more programs do innovative and effective prevention work in their own communities.

Most of the questions I have are open-ended so this interview will be very conversational. What's most important is that I hear what you have to say. So at any point if something we're talking about brings up thoughts for you on a related topic, feel free to tell me about it.

Finally, before we get started, there are a few practical things I need to let you know. This interview is confidential. While I know who you are, in no way will you or your program be identified to the NSVRC in the report I write for them. For the most part, I will be describing the common themes I hear across the interviews. If I do use a quote from an interview it will only be to illustrate a point and the source will not be identified. If at any point you want to go off the record or you don't want to answer a particular question, let me know.

To start, it will help me to know a bit about your agency in general.

1. Can you give me a short summary of what kind of agency it is and briefly tell me about its history?
ONLY ASK IF DO NOT HAVE INFORMATION ALREADY FROM PREVENTION EDUCATOR

Type of agency:
_____ Rape crisis only
_____ Dual rape crisis/Domestic violence
_____ Child advocacy center
_____ Dual rape crisis/child advocacy center
_____ Multi victim services, including: _____
_____ Multi social services, including: _____
_____ Rape prevention only
_____ Multi issue prevention, including: _____
_____ Other: _____

Agency operating since: _____ (year)

Rape prevention work since: _____ (year)

Area(s) served:
_____ Urban
_____ Small city
_____ Suburban
_____ Rural

Number of counties served: _____

Inception:
_____ Community-based, single entity
_____ Community coalition
_____ Large NGO
_____ Governmental
_____ Educational Institution
_____ Other: _____

Current:
_____ Community-based, single entity
_____ Community coalition
_____ Large NGO
_____ Governmental
_____ Educational Institution
_____ Other: _____

Notable/unique aspects:

Now I would like to talk specifically about your prevention work. So you know, the part of your work that stood out to the NSVRC was _____. So while I am particularly interested in talking about that part of your work, if there are other aspects of your prevention work that you think are important, feel free to tell me about them as well.

2. What skills do you look for when hiring people to do prevention work?

How do you ensure that people involved with the effort have those skills?
- Hiring/selection?
- Training/TA?

How do you handle staff turnover vis-à-vis this work?
- Have you had any problems come up due to staff turnover?
- If so, how have you handled those challenges?

3. How is this prevention work funded?

_____ RPE
_____ State funds: _____
_____ Other government sources: _____
_____ Foundation grants
_____ Discretionary funds
_____ Other: _____

Funding Amount: _____
Funding Cycle: _____
Competitive: Yes / No

4. How has your agency's approach to prevention changed over time, if at all?

What was the catalyst for your current approach to prevention?

What role, if any, do staff besides the prevention educators, play in shaping or carrying out your agency's prevention work?

- Counselors?
- Advocates?
- Administrators?

How do you, as the director, communicate those roles?

How did your agency first respond to the idea of taking your current approach to prevention?

- Who was supportive and why?
- Who was reluctant and why?
- Have those attitudes changed over time? If so:
  - How have they changed?
  - What has brought about the changes?

5. What challenges does your agency face when developing prevention strategies?

How do you handle those challenges?

Diothe challenges or anything else change the direction of where you ended up going? In other words, if what you're doing now looks different than what you first imagined it would be, what made those changes happen?

What types of evidence do you use when developing the approach?

What did you learn or need to know about community or context to develop the approach?

6. How has the community responded to your agency's prevention work?
   - Interest?
   - Support?
   - Challenges?

What support have you needed from the community?
- If you have received support, in what ways?
- If you have not, what do you think the reasons have been?
- How has the support (or lack thereof) affected your work?
- What have you done when you did not receive the support you were looking for?

What types of evidence do you use to get the community to buy into the approach??

What did you learn or need to know about the community to help implement the approach?

Now that I understand about what it is you do, I would like to talk about the impact it is having.

7. What successes have you had with this prevention work?

   How do you know when you have been successful? What do you look for?

   What do you think has been most important to your success?

8. What has not gone as you had liked or what has been disappointing about this work?

   How have those experiences affected what you are doing?

   What have you learned from those disappointments?

   What might you do differently in the future or what lessons would you share with other communities thinking about taking a similar approach to prevention?

9. What have you learned from your assessments?
How have you used what you learned?

What have you not learned that you wish you knew?
How would that information/knowledge be useful?

What are others most interested in learning about your work?

If you haven't shared your work, why not?

Were you surprised that you were identified as an important innovation by the NSVRC?
If so, why?

Finally, I would like to come back to your agency as a whole and talk about how prevention fits in with its mission and work.

10. How integral is prevention to your agency's mission?
    Can you offer some examples of how people other than prevention educators support your work?
    How is prevention a part of what they do as well?

11. If you could change one thing about what your agency does in regard to prevention, what would it be? Why?

12. Is there anyone else, within or outside your organization, you think I need to talk to so I can better understand your prevention efforts?

13. Is there anything else we haven't talked about that you want me to know?

Thank you very much for taking time out of your busy schedule to talk with me. Your insights and feedback are very valuable. If you think of anything else you want me to know, feel free to give me a call or send me a message.

I will be sharing my report with the NSVRC at the end of September. They will be sharing it with the field, so you can look for it in the fall on their website or contact them to request a copy of it.

Best wishes to you in your work.

National Sexual Violence Resource Center

Interview Protocol for Exemplar Programs *May 19, 2011*

Community Stakeholder Interview

Date of Interview: _____ ID: _____

Start Time: _____ Role: _____ Prevention Educator

End Time: _____ _____ Executive Director

Elapsed Time: _____ _____ Board Member

_____ Other

_____

Thank you for taking time out of your schedule to talk with me. As I explained when I contacted you, I would like to talk with you as part of an assessment I am doing for the National Sexual Violence Resource Center. For this project I am interviewing people associated with approximately 12 programs that work to prevent sexual violence. It was suggested by [rape prevention program] that you might have important insights into the work they have been doing in your community.

What I am interested in in hearing about your experiences working with [rape prevention program]. So you know where we are headed, there are _____. The NSVRC hopes to use what we learn to better understand what is working and, more importantly, why and how it's working. Those lessons can help the NSVRC and other leaders in the field figure out how to help more programs do innovative and effective prevention work in their own communities.

Most of the questions I have are open-ended so this interview will be very conversational. What's most important is that I hear what you have to say. So at any point if something we're talking about brings up thoughts for you on a related topic, feel free to tell me about it.

Finally, before we get started, there are a few practical things I need to let you know. This interview is confidential. While I know who you are, in no way will you or your program be identified to the NSVRC in the report I write for them. For the most part, I will be describing the common themes I hear across the interviews. If I do use a quote from an interview it will only be to illustrate a point and the source will not be identified. If at any point you want to go off the record or you don't want to answer a particular question, let me know.

To start, it will help me to know a bit about your agency/school in general and how you started working with [rape prevention program].

1. Can you give me a short summary of what kind of agency/school it is?

   Type of agency:
   _____ Public school, grades: _____
   _____ Private school, grades: _____
   _____ Youth recreation
   _____ Youth/family services
   _____ Faith community
   _____ Law enforcement
   _____ Other: _____

   Services provided:

2. To your knowledge, how long has your agency/school been working with [rape prevention program]?

3. Can you tell me how the relationship started?

   Who initiated the relationship?

   What was the catalyst for working together in the beginning? Did your agency/school have specific issues that you were looking for help addressing?

4. Did your agency/school have any concerns or reservations about addressing sexual violence as part of your work? Or did you have any hesitations about taking on the issue of sexual violence?

   How did [rape prevention program] handle those concerns?

Now I would like to talk specifically about what you are doing with [rape prevention program] So you know, the part of your work that stood out to the NSVRC was _____. So while I am particularly interested in talking about that initiative, if there are other things you are doing with [rape prevention program] that you think are important, feel free to tell me about them as well.

5. What is valuable to you about your work with [rape prevention program]?

   How do your clients/students/community benefit?

   How do your staff benefit?

6. What is most important to you about this work or about your relationship with [rape prevention program]?

   What makes this partnership work well?

   What, if anything, would you like to change about your partnership?

7. Can you think of a time when there was a difference of opinion or a disagreement between your agency/school and [rape prevention program]? Tell me about how that situation was handled.

8. When you think about other schools/agencies like yours and the fact that not all of them have partnerships like you do with [rape prevention program], what do you think makes your school/agency willing to do this kind of work whereas others may not?

If you left your position today, would you be confident that this partnership would continue? Why or why not?

What is needed to guarantee that this partnership will continue?

9. If someday [rape prevention program] was not available to do this work, would your agency/school be able to continue it on its own?

What would you need to continue this work?

Do you think there would be interest in your agency/school to continue this work?

10. Finally, what advice would you have for another agency/school that was concerned about sexual violence? What can they do to make a difference?

11. Is there anything else we haven't talked about that you want me to know?

Thank you very much for taking time out of your busy schedule to talk with me. Your insights and feedback are very valuable. If you think of anything else you want me to know, feel free to give me a call or send me a message.

I will be sharing my report with the NSVRC at the end of September. They will be sharing it with the field, so you can look for it in the fall on their website or contact them to request a copy of it.

Best wishes to you in your work.

Appendix D: Diffusion Survey

NSVRC Diffusion Survey

Welcome

This survey is being done by the National Sexual Violence Resource Center (NSVRC) to document how approaches to prevention spread throughout the nation. The survey will take 5-7 minutes to complete. You will be given a list of prevention curricula/campaigns and asked (1) if you have heard of them and (2) if your agency has used them in the past 12 months.

The survey is anonymous and voluntary. Your computer's IP address will NOT be saved. The survey is being sent to all coalitions and rape prevention programs for which the NSVRC has email addresses. If you know of other programs that have not received this survey, feel free to forward it on to them. All surveys must be completed by September 16th.

We ask that ONLY ONE PERSON PER AGENCY complete the survey. Please choose the person whom you think is most knowledgeable about your agency's prevention work. In most cases, the best person is a prevention educator or director of prevention programming.

Your participation will help the NSVRC develop new ways to share promising innovations. If you have any questions about this survey, please contact Jennifer Grove at the NSVRC at jgrove@nsvrc.org or contact the independent evaluator, Stephanie Townsend, at stephanie.townsend@earthlink.net.

Thank you for your time and for all you do to create a nation free of sexual violence.

NSVRC Diffusion Survey

1. In what state(s)/territory does your agency do prevention work?

2. What type of agency do you work for?

- ◯ State/territory/tribal coalition
- ◯ Freestanding rape crisis/prevention agency
- ◯ Dual rape crisis/domestic violence agency
- ◯ Comprehensive victim services agency

Other (please specify)

NSVRC Diffusion Survey

Have You HEARD of These Approaches?

Rape prevention programs are using a wide variety of curricula and other strategies. To learn how approaches to prevention spread from one program to another, we have selected a sample of curricula and campaigns that represent the diversity of practice.

These are not necessarily recommended curricula or campaigns. They simply reflect different kinds of strategies.

3. Have you HEARD OF the following approaches to preventing sexual violence?

	No	Yes
Be Strong: From the Inside Out	◯	◯
Boys to Men	◯	◯
Bringing in the Bystander	◯	◯
Camp PeaceWorks	◯	◯
Expect Respect	◯	◯
Got Consent? Campaign	◯	◯
Indiana Campus Sexual Assault Primary Prevention Project	◯	◯
In Touch with Teens	◯	◯
Men of Strength Clubs	◯	◯
Mentors in Violence Prevention	◯	◯
My Strength Campaign	◯	◯
Personal Safety Curriculum for Children with Autism Spectrum Disorders	◯	◯
Project ENVISION	◯	◯
Students Together Organizing Peace (STOP)	◯	◯
Vermont Consent Campaign	◯	◯
Violence Free Teens	◯	◯
Visioning Bear Circle	◯	◯
WholeSome Bodies/Joyful Sexuality	◯	◯
Youth 360	◯	◯
Youth Violence Prevention Program (YVPP)	◯	◯

NSVRC Diffusion Survey

Have You USED These Approaches?

4. During the past 12 months has your agency USED materials from the following approaches to prevention?

	No	No - But we have taken ideas/inspiration from it	Yes - We use SOME materials	Yes - We use the FULL approach/program
Be Strong: From the Inside Out	◯	◯	◯	◯
Boys to Men	◯	◯	◯	◯
Bringing in the Bystander	◯	◯	◯	◯
Camp PeaceWorks	◯	◯	◯	◯
Expect Respect	◯	◯	◯	◯
Got Consent? Campaign	◯	◯	◯	◯
Indiana Campus Sexual Assault Primary Prevention Project	◯	◯	◯	◯
In Touch with Teens	◯	◯	◯	◯
Men of Strength Clubs	◯	◯	◯	◯
Mentors in Violence Prevention	◯	◯	◯	◯
My Strength Campaign	◯	◯	◯	◯
Personal Safety Curriculum for Children with Autism Spectrum Disorders	◯	◯	◯	◯
Project ENVISION	◯	◯	◯	◯
Students Together Organizing Peace (STOP)	◯	◯	◯	◯
Vermont Consent Campaign	◯	◯	◯	◯
Violence Free Teens	◯	◯	◯	◯
Visioning Bear Circle	◯	◯	◯	◯
WholeSome Bodies/Joyful Sexuality	◯	◯	◯	◯
Youth 360	◯	◯	◯	◯
Youth Violence Prevention Program (YVPP)	◯	◯	◯	◯

NSVRC Diffusion Survey

Thank You

Thank you for taking time to complete this survey. Your input is valuable.

We are available to provide resources, training and technical assistance to coalitions and rape crisis centers. You can visit our website at www.nsvrc.org.

Please also visit our partner organization, PreventConnect, at www.preventconnect.org.

Appendix E: TA Satisfaction Survey

Service Evaluation Form

NSVRC
national sexual violence resource center

www.nsvrc.org

Thank you for your recent contact with the NSVRC. We are asking for your feedback on that experience as a way to help us improve the information and resources available on sexual violence. The survey should take approximately 2-5 minutes of your time.

What was <u>useful</u> about your contact with the NSVRC? (Check all that apply)

_____ Quality of information
_____ Quality of samples or model materials
_____ Referrals to programs
_____ Increase in networking opportunities
_____ Access to research or evidence base
_____ Help with problem solving or strategizing
_____ Other: _____

How did you use the information or resources?

As a result of contacting the NSVRC, I was able to….

How many people did you share the information/resources with?

How much did your <u>knowledge</u> of the issue you contacted us about change?	No Change	I Know a Little More	I Know Moderately More	I Know A Lot More
How much did your <u>ability to take action</u> on the issue change?	No Change	I Can Do a Little More	I Can Do Moderately More	I Can Do A Lot More
How likely are you to call the NSVRC again for information or assistance?	Not at all Likely	A Little Likely	Moderately Likely	Very Likely
How likely are to recommend the NSVRC to others?	Not at all Likely	A Little Likely	Moderately Likely	Very Likely

What were you looking for that we did <u>not</u> provide? Do you have any additional feedback for us?

Thank you!

Appendix F: Program Details

Program	Phone	Major Primary Prevention Initiatives
Berks County Women in Crisis	(610) 373-1206	• **Camp PeaceWorks**, a summer day camp and monthly gatherings to mobilize youth to prevent violence through social change and anti-oppression work
Cleveland Rape Crisis Center	(216) 619-6194	• **Youth 360**, a youth leadership program that works with a select group of youth to develop their knowledge and skills about sexual violence and to support them as they engage in peer influence and action for social change
Indiana Campus Sexual Assault Primary Prevention Project	(765) 494-9355	• **Training and Technical Assistance** to college campuses to help them become a model campus for sexual violence prevention; includes coalition building, policies, data collection, bystander intervention, male involvement, and social marketing
Klamath Crisis Center	(541) 850-8939	• **County-wide prevention plan** • **Men's Academy**, including a 6-session program for boys and their male mentors • **Community Youth Action Team**
Network of Victim Assistance	(215) 343-6543	• **Prevention Curriculum for Students with Autism Spectrum Disorders**, a 10-session prevention program that addresses defining personal boundaries, types of touch, assertiveness skills, public vs. private distinctions, and disclosure skills
New England Learning Center for Women in Transition	(413) 772-0871	• **Visioning BEAR Circle**, a community-led initiative to prevent sexual violence in Native American communities by promoting healthy relationships, changing attitudes about gender roles, using restorative justice to promote accountability, and training service providers
New York City Alliance Against Sexual Assault	(212) 229-0345	• **Project ENVISION**, a community mobilization initiative in three neighborhoods that includes community coalitions, neighborhood strengths and needs assessment, and development of community-led prevention initiatives

Program	Phone	Major Primary Prevention Initiatives
Peace Over Violence	(213) 955-9090	• **In Touch with Teens**, a 16-20 hour relationship violence prevention curriculum • **Be Strong—From the Inside Out**, a 4-session, asset based curriculum empowering young women • **Theater Peace**, a 3-day interactive curriculum to build healthy relationships • **Violence Free Teens**, an annual youth-adult partnership conference • **Students Together Organizing Peace**, a school-based youth movement groups • **Men of Strength Clubs**, school-based leadership development for young men • **YouthLEAD**, a leadership program for high school youth • **Peer2Peer,** a high school peer counseling program • **High Risk Youth Services** for youth in the juvenile justice system • **Juvenile Impact Program**, a 16-week program for youth in the juvenile justice system • **Teen Dating Violence and Sexual Violence Prevention Policy Project** for school districts
Pittsburgh Action Against Rape	(412-531-5665	• **Parenting Program**, a 4-workshop series for parents to prevent child sexual abuse • **Middle School Social Norms Campaign** to measure youth norms and promote positive social norms • **Got Consent? Campaign** for college campuses • **Bystander Campaign**, a 2-year social norms campaign for college campuses • **Train-the-Trainer** to build capacity of others to do sexual violence reduction and awareness education

Program	Phone	Major Primary Prevention Initiatives
SafePlace	(512) 267-7233	• **Expect Respect**, a comprehensive prevention strategy that includes 24-week support groups for vulnerable youth, youth leadership development, and school-wide prevention (policy, staff training, parent engagement) and capacity building among community partners • **Start Strong Austin (www.startstrongaustin.org)**, a collaboration of school and community partners to prevent dating and sexual violence and to promote healthy teen relationships. This national initiative funded through RWJF (www.startstrongteens.org) educates youth in and out of school; engages parents, teachers, nurses and other youth influencers; works on changing policy and environmental factors; and uses social marketing to impact social norms. • **Disability Services ASAP**, a training for disability services providers and others to prevent victimization of persons with disabilities • **Community Education** provides outreach and education to help individuals learn how each of us plays a role in the process of ending sexual and domestic violence. Among other awareness events, Community Education organizes Men Rally for Change, a collaboration of men, women and youth speaking out against sexual and domestic violence, while speaking up for safe communities and healthy relationships
Sexual Assault Trauma Services of the Midlands	(803) 790-8208	• **Youth Violence Prevention Program**, a 6-session school based curriculum that addresses the root causes of sexual violence including rigid gender roles and consent and promotes bystander interventions
Vermont Network Against Domestic and Sexual Violence	(802) 223-1302	• **WholeSomeBodies**, a leadership development program to promote community norms for talking about and affirming healthy, consensual sexuality • **Consent Campaign**, a school-based curriculum to teaching active consent skills

Appendix G: Evaluator's Background

Stephanie Townsend, PhD, has worked in the movement to end sexual violence as both a practitioner and researcher. She began by working for community-based rape crisis and prevention programs in Michigan, California and Texas. During that time she also served on the boards of directors of the National Coalition Against Sexual Assault, the California Coalition Against Sexual Assault, and on the advisory board of the Texas Association Against Sexual Assault.

She completed her doctoral work in community psychology at the University of Illinois at Chicago. Her research has focused on community-based rape prevention programs and Sexual Assault Nurse Examiner programs. She has conducted global, national, state, and local research and evaluation projects. She is a member of the American Evaluation Association, American Psychological Association, Society for the Psychology of Women, and Society for Community Research and Action.