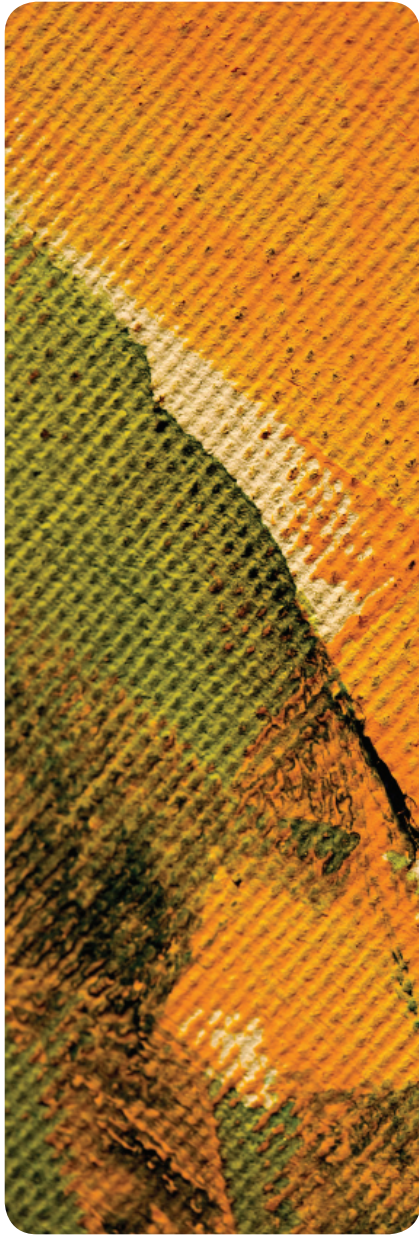




COORDINATING PREVENTION

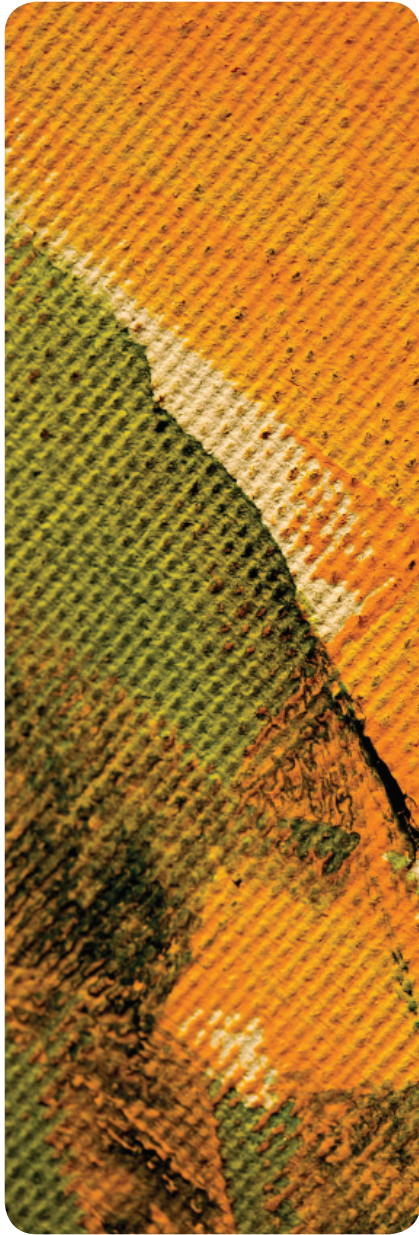
across Domestic and Sexual Violence



An Overview of Approaches to Prevention of Sexual and Domestic Violence

Introduction to This Course

This course was developed for practitioners working to prevent sexual assault and domestic violence. Our intention is to help you develop local initiatives that support primary prevention of both sexual assault and domestic violence. We have based this module on the premise that prevention is the point at which the sexual assault and domestic violence movements come together in deep and significant ways. A comprehensive prevention strategy aimed at preventing either sexual assault or domestic violence will necessarily incorporate each type of violence and will have an impact on both issues. This is due to the shared conditions (ranging from individual attitudes to societal norms) that are addressed when we focus on root causes and implement strategies that address these root causes. The intention of this course is to propose a deeper collaboration between and among organizations and programs that work in sexual assault and domestic violence for the sake of furthering a broad and effective national and international prevention movement.



While this is a call to collaborate, perhaps at deeper levels, this is not a call to merge at the federal, state, or local levels. Rather, we recognize that each community, each local organization, state coalition, and federal initiative will be more effective and far-reaching if prevention work is coordinated and collaborative. This module provides an explanation of the most prominent theories, models, and practices so that your local work can be informed by all of this work. Further, it is designed to help you, the participant, apply these concepts in your own work. We hope that it opens you and your organization to ongoing development of this work. Prevention work in sexual assault and domestic violence is relatively young as a body of theory and practice with new approaches, focused research, and practice constantly evolving. Prevention work requires a clear commitment to cultural competency and inclusion, and a clear vision of social justice and a world free of sexual assault and domestic violence. We hope that you use this module as a springboard for your own work and your organization's leadership in the efforts to build the world we envision.

To get the most from this learning module, we recommend that you review the documents in the [Prevention Overview](#) section before beginning.



Coordinating Domestic and Sexual Violence

Educational Objectives

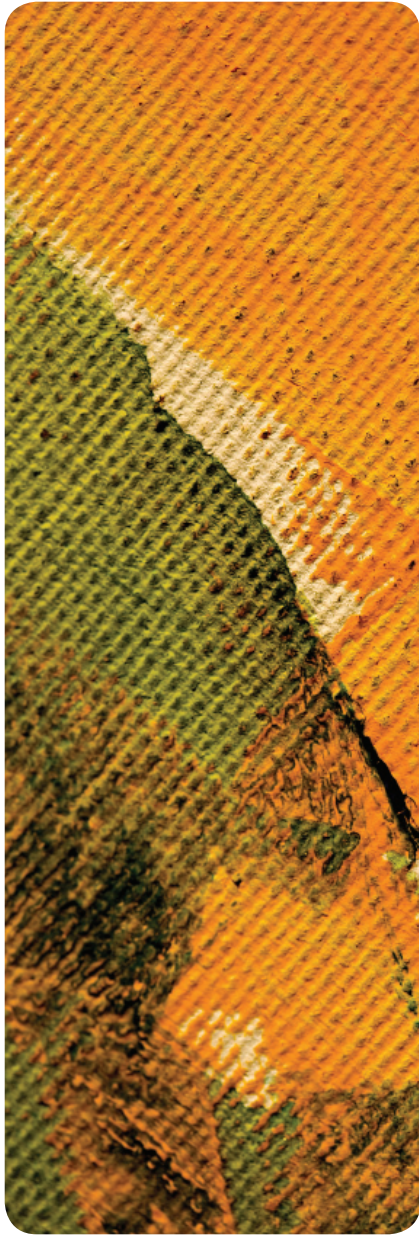
Understand the frameworks and models of primary prevention that are seen as best and developing practice in the sexual assault and domestic violence fields.

Know some of the ways that other successful prevention programs have adopted these models as a way to promote their prevention strategy.

Skill Objectives

Be able to describe and apply primary prevention to sexual assault and domestic violence work based in current theories and frameworks.

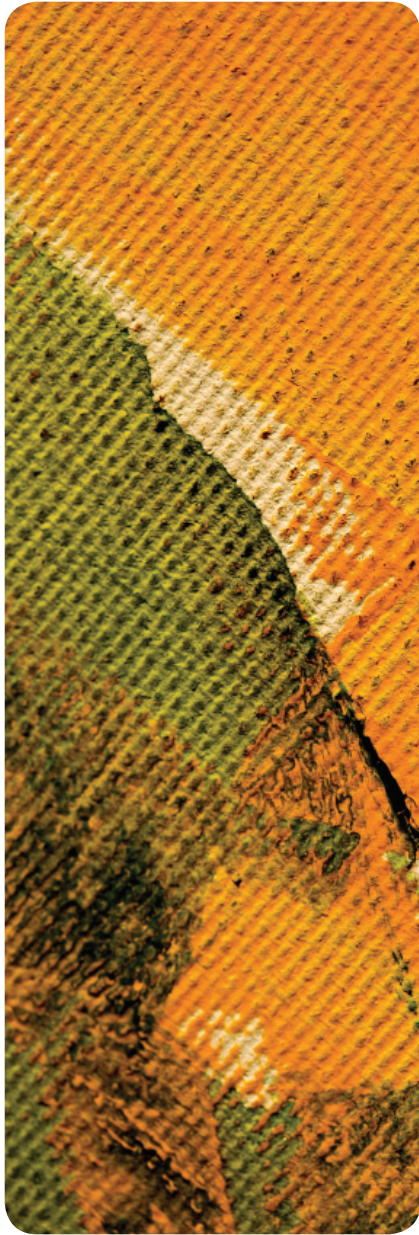
Develop locally specific strategies for comprehensive primary prevention of domestic and sexual violence in local communities and statewide organizations.



Prevention – Where does it belong?

The practice of prevention often depends on your perspective. Many cultures and faith traditions teach us about the issue of perspective with the story of the “Blind Men and the Elephant”. Based on touching the elephant, several blind men are asked to describe an elephant. The one who touched the elephant’s leg declares it to be a pillar. Another blind man who touched its tail described it a rope. Still another feels a wall (the one who touched the torso), and so on. It is a parable that teaches us openness, perspective, vision, listening, and thinking outside of the box. The elephant parable is a great metaphor for the work to end sexual assault and domestic violence.

Sexual assault and domestic violence programs often serve as the place where various people and organizations come together to contribute toward community initiatives and strategies that work toward prevention. One challenge in prevention work is to fulfill our role as convener and coordinator of the work in our communities. In order to meet this challenge, we first need to understand and appreciate the various perspectives of individuals and organizations contributing to this work, as well as their frameworks, purposes and goals.

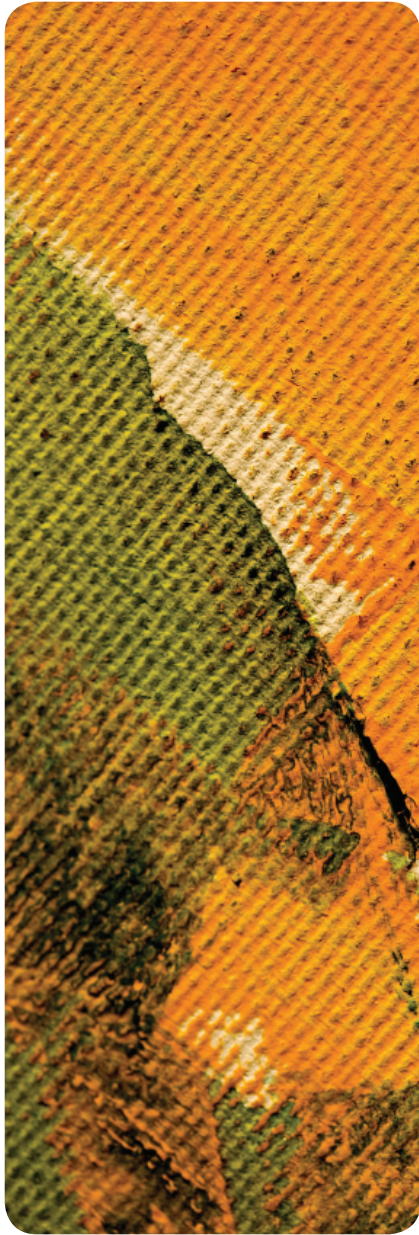


Perspectives in sexual assault and domestic violence prevention

Prevention work is informed by a wide range of perspectives and fields of study. Here's a brief description of some of the most common and relevant perspectives. Unlike the story about the elephant, each perspective is informed by the others and cannot be viewed as a separate and distinct effort and initiative. A coordinated and collaborative prevention effort may include a wide range of perspectives in a collaborative way.

Public Health

This perspective sees sexual assault and domestic violence through a public health lens, informed by an understanding of the broader health and safety impact of sexual assault and domestic violence. The impact is understood to exist at the individual, community, and societal levels. This approach has been developed nationally and internationally through the U.S. Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO). It provides evidence-based practices and frameworks that are useful in understanding, organizing, and evaluating prevention efforts. The public health approach also informs many of the evaluation and research methods used to understand the effectiveness of various prevention models while building our general body of knowledge about the issues.

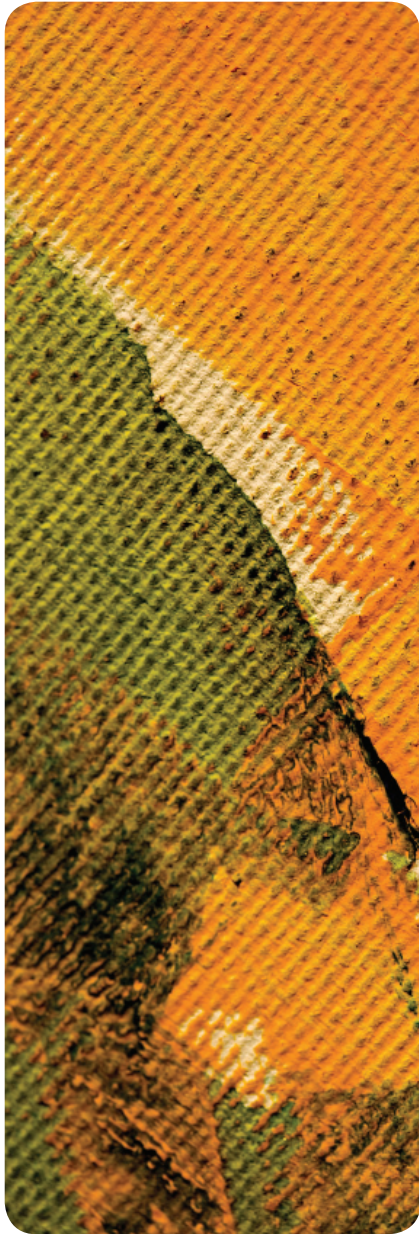


Feminist Organizing

Through a feminist-based perspective, sexual assault and domestic violence are viewed through a gender-based analysis of the conditions that exist that result in violence against women. Since sexual assault and domestic violence happen primarily to women and children, this perspective examines and challenges the societal and cultural messages that keep this violence in place. Its perspective is that sexism, racism, and other forms of oppression as contributory to the root causes of sexual assault and domestic violence, while placing the work of prevention within the work to improve the conditions of women.

Criminal Justice

This perspective views the issues of sexual assault and domestic violence primarily as criminal activities and violations of public safety. Within the criminal justice system are professionals involved in the wide range of responses to sexual assault and domestic violence as crimes and public safety issues. This includes the law enforcement response, prosecution, post-conviction, community policing, probation, and parole. The goals of public safety, offender accountability and justice for victims are primary.



Reproductive Justice

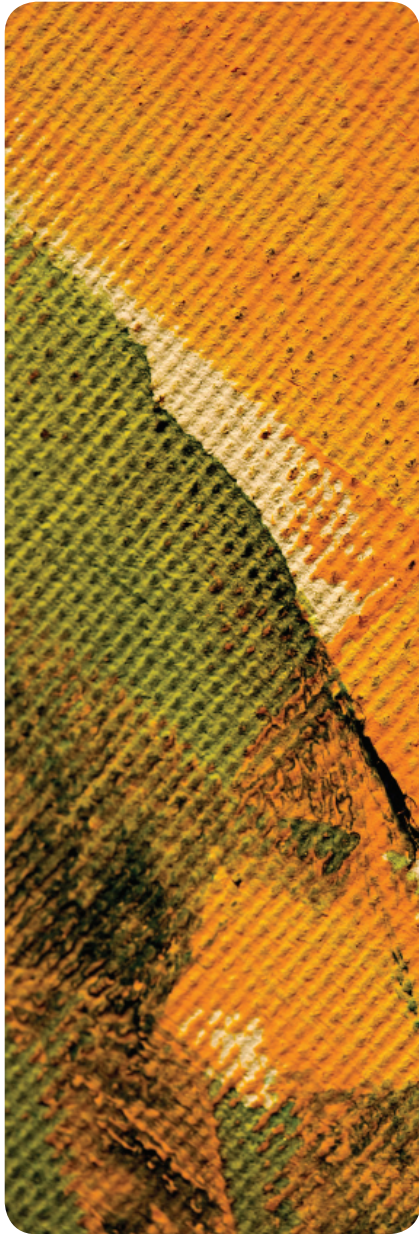
The reproductive justice movement works to create a society in which all people have the economic, social, and political resources necessary to make healthy decisions about their bodies, sexuality, and reproduction for themselves, their families, and their communities. Based on this perspective, sexual assault and domestic violence are barriers in a person's efforts to obtain the full rights and resources necessary to make independent and healthy decisions.

Human Rights

Organizations that work on issues of sexual assault and domestic violence through a human rights perspective base their work on the Universal Declaration of Human Rights. This places the work in the context of national and international efforts to work toward full realization of these universal human rights. The goals of organizations that work through a human rights lens are often focused on strengthening certain rights through education, advocacy, and community organizing in local communities.

Prevention in Action

Each of these perspectives can serve as a primary organizing framework for prevention work. As you read these examples, consider how each framework may be in place within your community.



Public Health Perspective

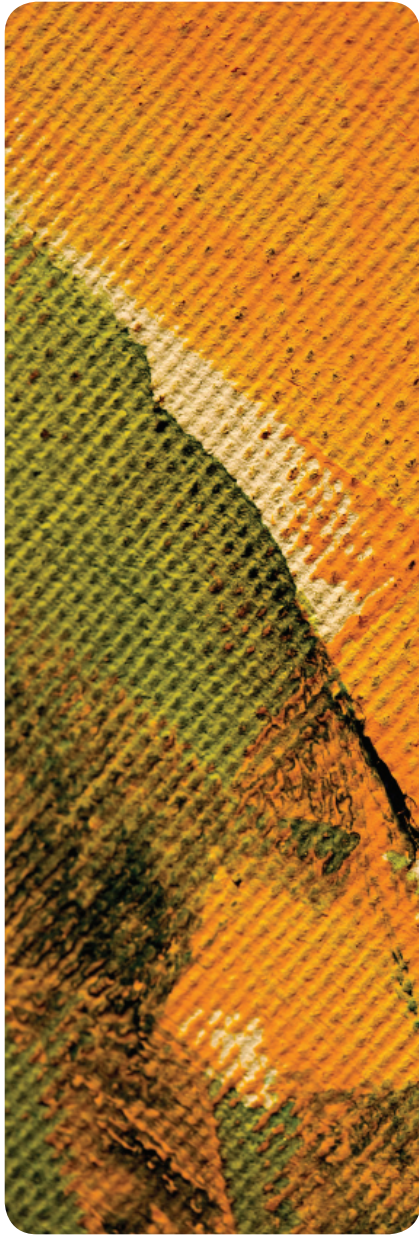
The public health perspective provides a way to organize the work to address sexual assault and domestic violence around a framework of primary prevention. In this framework, activities related to the aftermath and prevention of violence can be analyzed as a primary, secondary, tertiary, or multilevel intervention.

Primary – Before it starts

The goal of primary prevention is to act to prevent a health problem from occurring in the first place. In terms sexual assault and domestic violence, the focus is on preventing first-time perpetration. A primary prevention initiative aims to reduce the risk factors associated with potential perpetration, while increasing protective factors.

Secondary – Once the problem has begun

The goal of secondary prevention is to focus on a known risk factor and then intervene to eliminate or mitigate the risk factors for the potential problem. This approach acknowledges that the problem may have already occurred and that part of the intervention will be to prevent its recurrence and progression. In this way, the work of advocates has elements that would be considered secondary prevention as well as direct services. For example, the work to develop a safety plan or to educate professionals in a related field to screen and identify survivors can be characterized as secondary prevention.



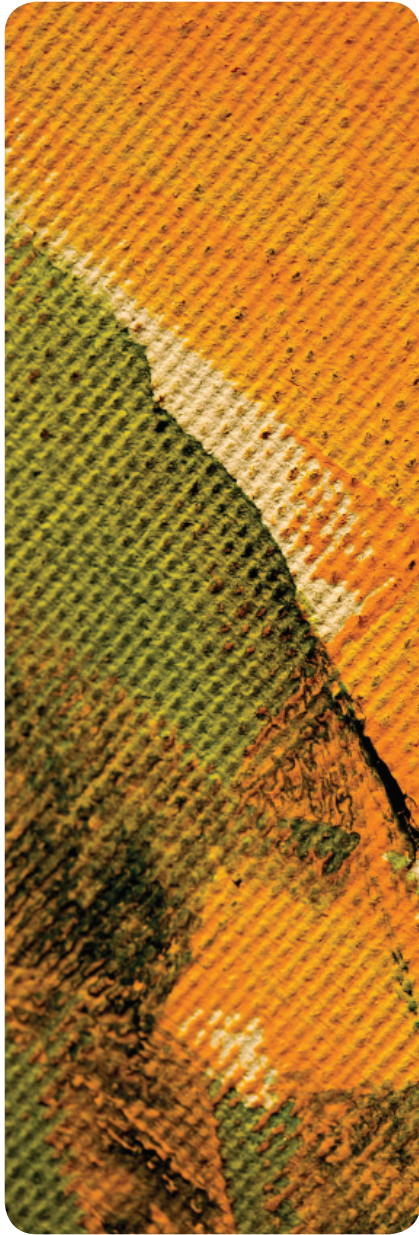
Tertiary – Afterwards

Tertiary prevention occurs in the aftermath of an incident of sexual violence or domestic violence perpetration, with the aim of addressing the negative impact on the victim, and to build and restore a sense of wellness, wellbeing, safety, and recovery.

Multilevel Prevention

Many organizations coordinate prevention approaches that work to address the multiple levels of prevention and integrate strategies at all levels.

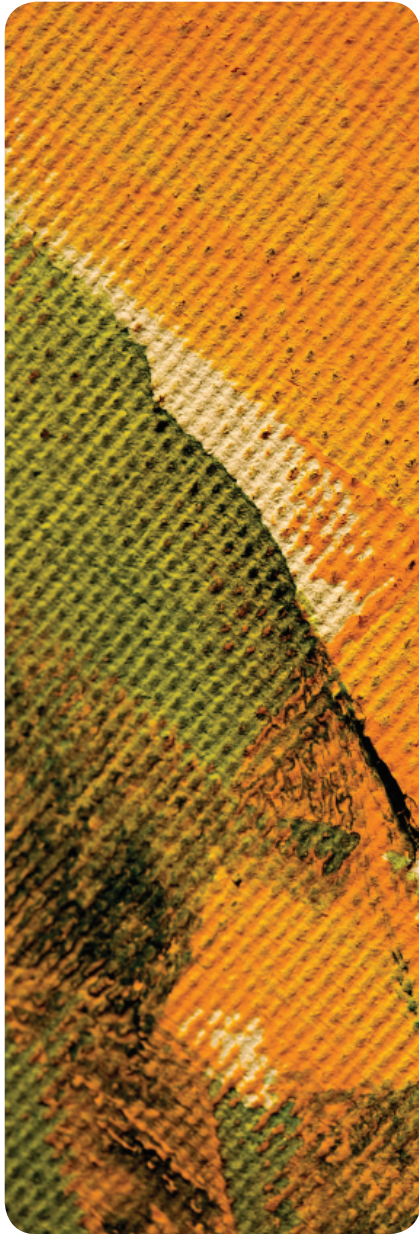
For examples of programs and initiatives that address these levels of prevention, review this article. [**A Prevention Primer for Domestic Violence: Terminology, Tools, and the Public Health Approach.**](#)



The Social Ecological Model

The Social-Ecological model can be used to further clarify the work of prevention by organizing initiatives around various social levels of intervention. The ultimate goal of primary prevention is to stop violence before it begins. Prevention requires understanding the factors that influence violence in the context of relationships and social interactions. The CDC uses a four-level social-ecological model to better understand violence and the effect of potential prevention strategies. This model considers the complex interplay between individual, relationship, community, and societal factors. It allows us to address the factors that put people at risk for experiencing or perpetrating violence.

Before moving on, please review [The Social-Ecological Model: A Framework for Prevention](#) from the Centers for Disease Control and Prevention.



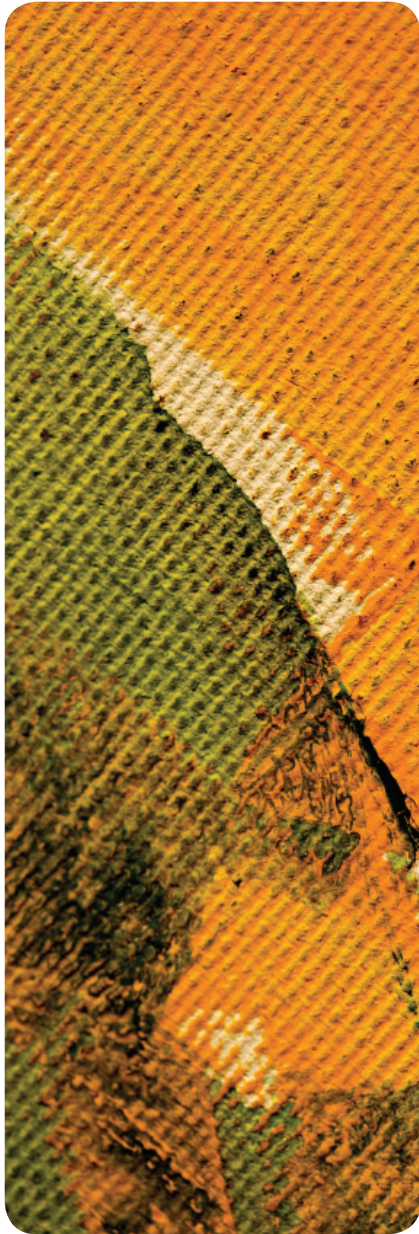
Risk and Protective Factors

Another important concept that emerges from the public health approach is that of risk and protective factors. Due to a body of research at the national and international levels, we have begun to understand what factors may place someone at increased risk for perpetrating sexual assault and domestic violence. While much of the early work in prevention focused on risk factors for victims, this research helps point to conditions that increase or mitigate the risk of someone committing an act of sexual or domestic violence. This is key to primary prevention which has, as its key goal, the prevention of perpetration.

Review these documents, which provide a summary of identified risk factors for perpetration of sexual assault and domestic violence.

[Sexual Violence: Risk and Protective Factors](#)

[Intimate Partner Violence: Risk and Protective Factors](#)



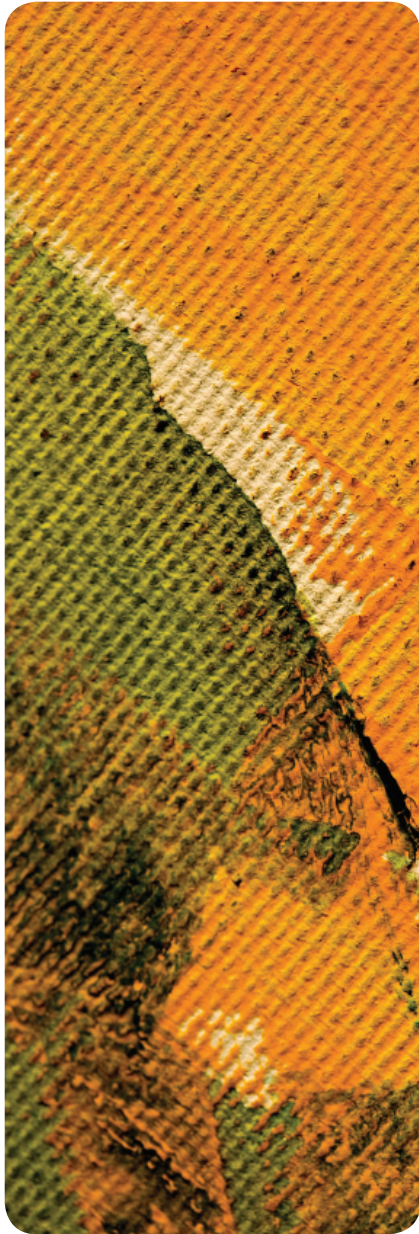
Risk and Protective Factors for Sexual Assault and Domestic Violence: A Side-By-Side View

While the risk and protective factors have been studied separately for sexual assault and domestic violence, there are consistent themes that are obvious when the risk factors are examined. Here's a summary of the risk factors that emerge as shared themes in the research.

Common Risk Factors for both Sexual Assault and Intimate Partner Violence

Individual Risk Factors

- Alcohol and drug use
- Coercive sexual fantasies and preference for impersonal sex
- Hostility towards women and hyper-masculinity
- Childhood history of sexual and physical abuse
- Witnessed family violence as a child
- Low self-esteem and low academic achievement
- Aggressive or delinquent behavior as a youth
- Antisocial personality traits
- Having few friends and being isolated from other people
- Unemployment
- Belief in strict gender roles



Desire for power and control in relationships
Being a victim of physical or psychological abuse
History of experiencing physical discipline as a child

Relationship Factors

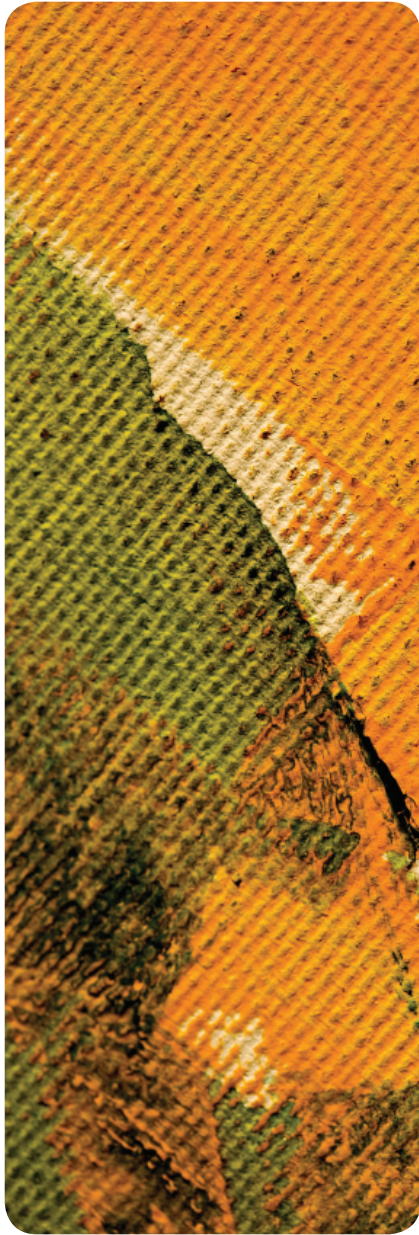
Association with sexually aggressive and delinquent peers
Family environment characterized by physical violence and few resources
Strong patriarchal relationship or familial environment
Emotionally unsupportive familial environment
Marital conflict-fights, tension, and other struggles
Dominance and control of the relationship by one partner over the other
Economic stress
Unhealthy family relationships and interactions

Community Factors

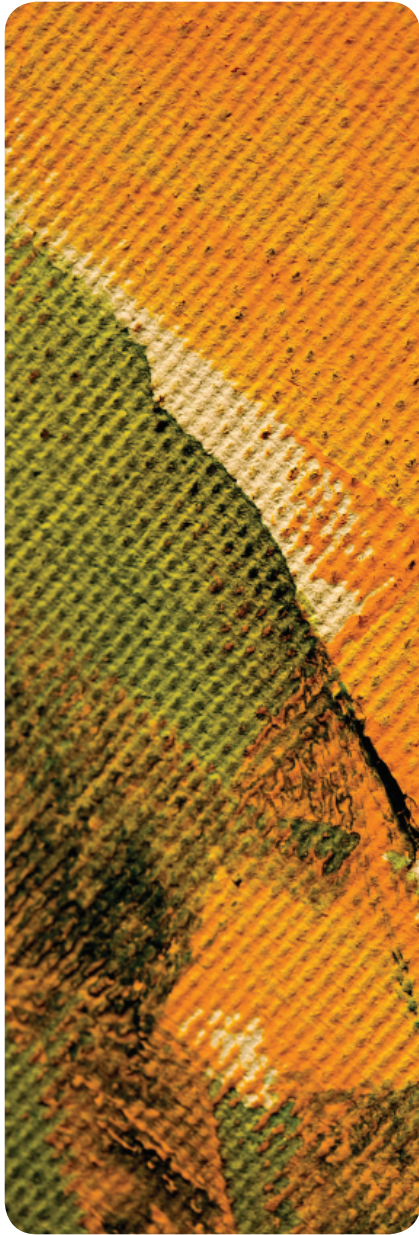
Poverty and associated factors
Weak community sanctions against sexual assault or domestic violence
Lack of employment opportunities
Lack of institutional support from police and judicial system
General tolerance of sexual violence within the community
Weak community sanctions against perpetrators

Societal Factors

Societal norms that support male superiority and sexual entitlement

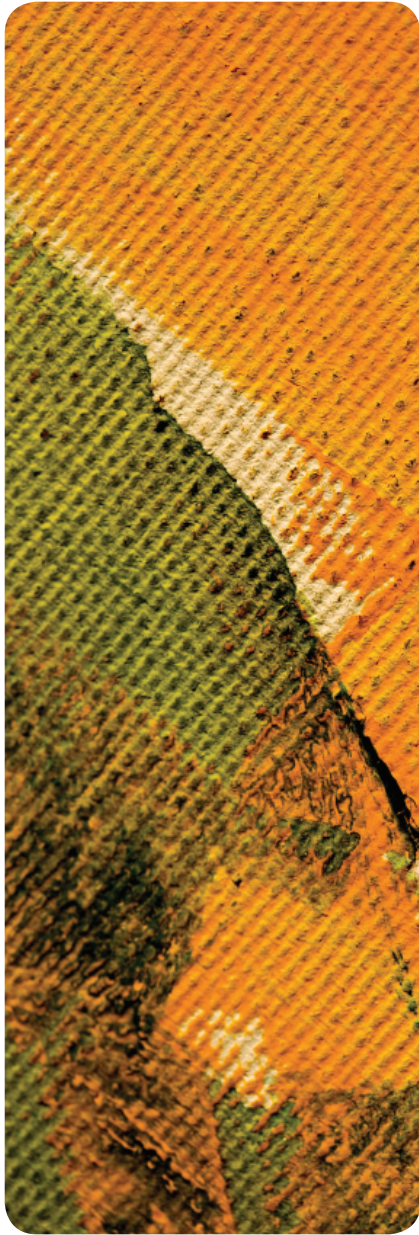


Societal norms that maintain women's inferiority and sexual submissiveness
Weak laws and policies related to gender equity
High tolerance levels of crime and other forms of violence



Violence Prevention – a Broad Context

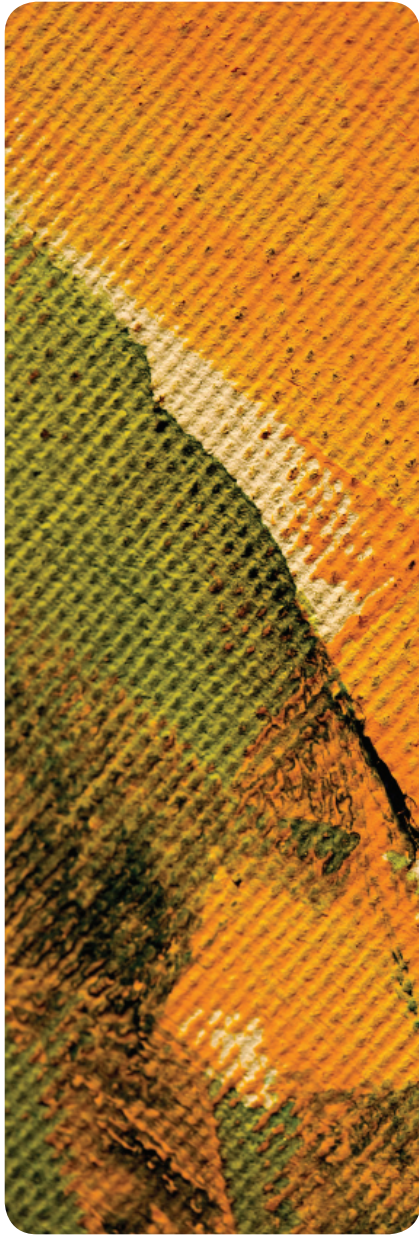
In the U.S., The Centers for Disease Control has been promoting training, research, and resources that promote an understanding and application of the public health model of violence prevention. [Veto Violence](#) is an online training and resource tool for practitioners and the general public.



Feminist Roots of Prevention of Sexual Assault and Domestic Violence

Many prevention educators have learned the basic models of prevention as described through the public health lens, yet sometimes express dissatisfaction with the overall approach because of its basis in scientific evidence within the public health discourse. Many feel that it is incomplete and difficult to translate to local and diverse communities. A gender-based analysis is essential to the feminist organizing perspective, one that can describe the societal conditions that promote men's violence against women. At the same time, it provides a framework that helps people understand the dynamics of same sex domestic violence, as well as violence perpetrated by women. A gender-based analysis also makes connections between sexual assault and domestic violence prevention and the work to promote healthy sexuality and relationships. This would incorporate a sex-positive perspective, one that acknowledges that sexuality is an important aspect of people's lives and that a vision of healthy, consensual, and equal relationships and sexuality are key to working toward and end to sexual assault and domestic violence. Review this article about the interconnections between [the public health model and radical feminism](#).

This perspective is reflected in a recent publication *Yes Means Yes: Visions of Female Sexual Power and a World Without Rape* by Jacklyn Friedman and Jessica Valenti. Review the [Yes Means Yes blog](#) for more discussion and information about this approach.



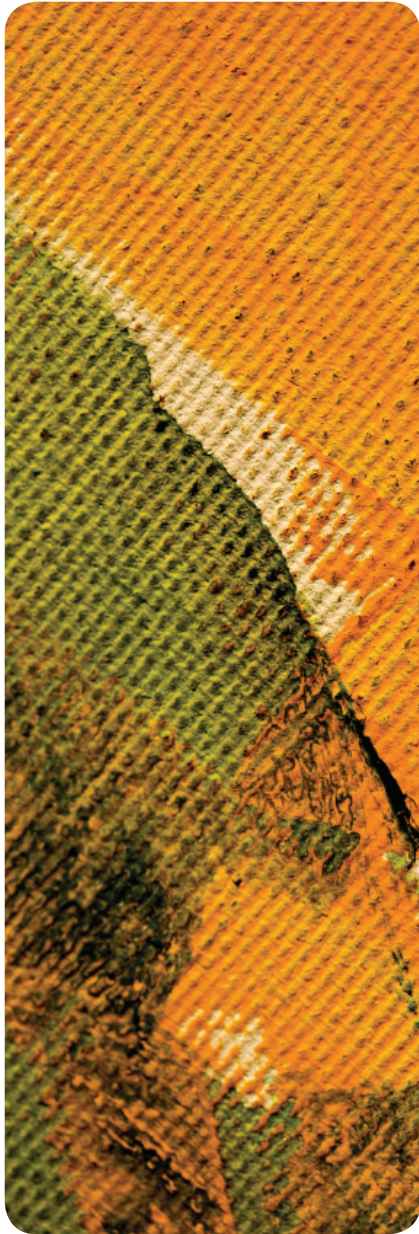
Criminal Justice Based Prevention

Levels of cooperation and coordination between sexual assault and domestic violence advocates and criminal justice professionals have grown and expanded dramatically in recent decades. One term that is widely used to describe this cooperation in action is a Coordinated Community Response. The basic concept with a coordinated community response is shared cooperation among people and organizations representing the systemic response to the crimes of sexual assault and domestic violence. While they may have different names and different approaches, these collaborations represent a trend toward building a community consensus along with analysis and evaluation of the effectiveness of various institutions in place for the protection of victims and accountability of offenders. Coordinated community responses have focused on various aspects of the work and include:

- High risk assessment teams
- DV and SA task forces or round tables
- Sexual assault intervention networks
- Sexual assault nurse examiner programs
- Sexual assault response teams
- Culturally and community specific responses

Review these articles on Coordinated Community Responses:

[**Benefits of a Coordinated Community Response to Sexual Violence**](#)
[**Evaluating Coordinated Community Responses in Domestic Violence**](#)

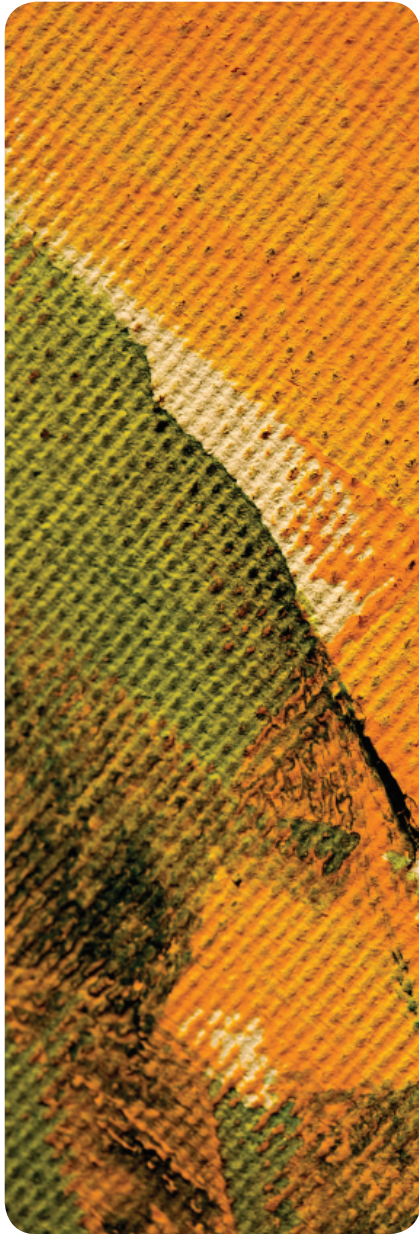


Prevention of Sexual Assault and Domestic Violence through a Reproductive Justice Framework

Proponents of the concept of reproductive justice aim to recognize that women's reproductive health is connected to and affected by conditions in their lives that are shaped by their socioeconomic status, human rights violations, race, sexuality, and nationality. (Wikipedia) Proponents argue that women cannot have full control over their reproductive lives, unless issues such as socioeconomic disadvantage, racial discrimination, inequalities in wealth and power, and differential access to resources and services are addressed. Read this overview of the Reproductive Justice movement – [Reproductive Justice: A Primer on Reproductive Justice and Social Change](#).

SisterSong defines the primary problem as Reproductive Oppression with the following organizing principles:

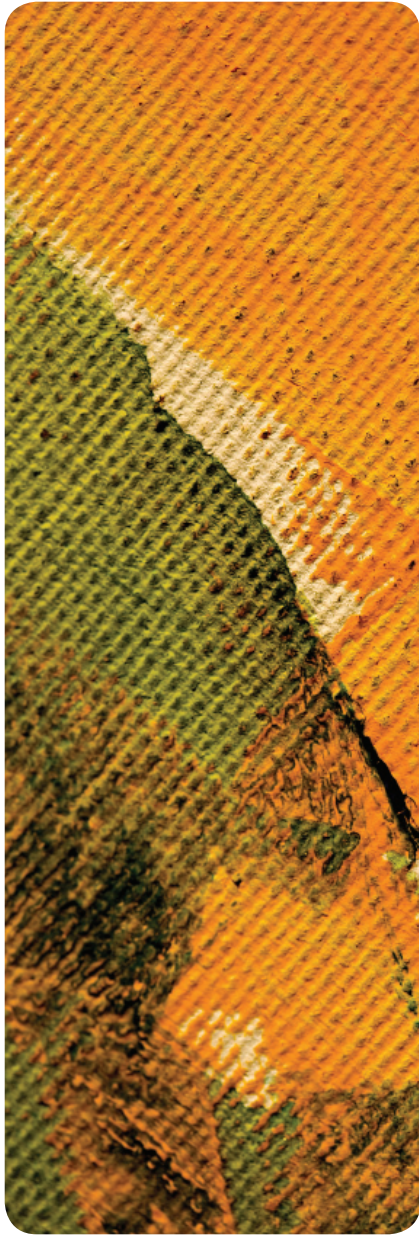
- Using an intersectional analysis
- Basing work on worldview focused on human rights
- Linking individuals to their communities
- Using organizing and advocacy to work on institutional change



Reproductive justice will be achieved when Indigenous women and women of color have the power to:

1. Protect and advance our human rights;
2. Determine the number and spacing of our children;
3. Protect our bodily integrity;
4. Protect our right to parent our children;
5. Improve the quality of the environment in which we live,
6. Obtain the necessary social supports to live healthy lives in healthy families, and in safe and sustainable communities.

A recent analysis of community perceptions of Reproductive Justice provides a more detailed description of the approach of the Reproductive Justice movement and of the potential in prevention from a communications approach. Review this article, which summarizes this analysis from [**The Opportunity Agenda**](#).



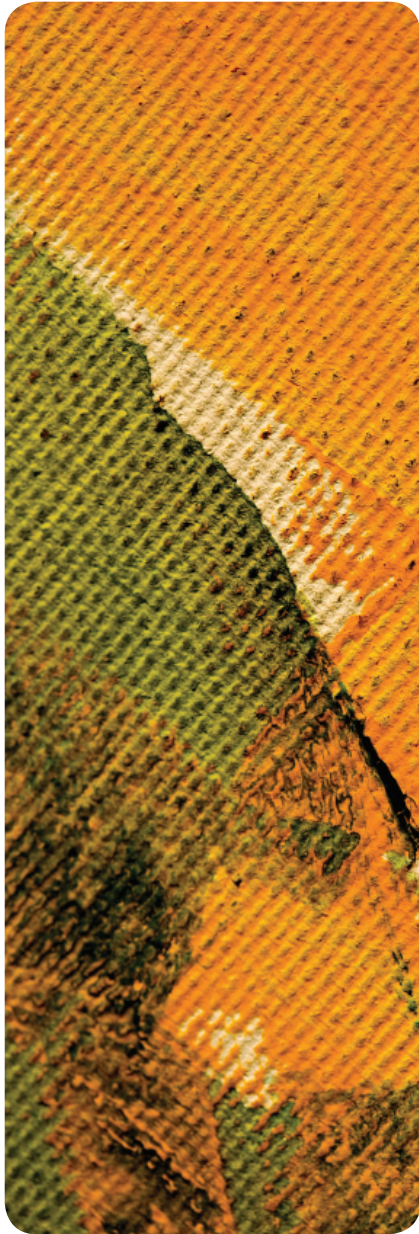
Human Rights Approach to Prevention

In 1948 the United Nations adopted the [Universal Declaration of Human Rights](#). This important and impressive document is being used as the basis for worldwide organizing efforts in a wide range of issues. It has significant relevance to the issues of sexual assault and domestic violence because of its basis in the recognition that the “inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world.”

Organizing efforts that address sexual assault and domestic violence have promoted social change in institutions, culture, and society as part of a global movement. The Human Rights approach provides a framework for promoting system reform, interconnections with economic and educational institutions, and governmental reform around the world. Review these publications for examples of this approach in action.

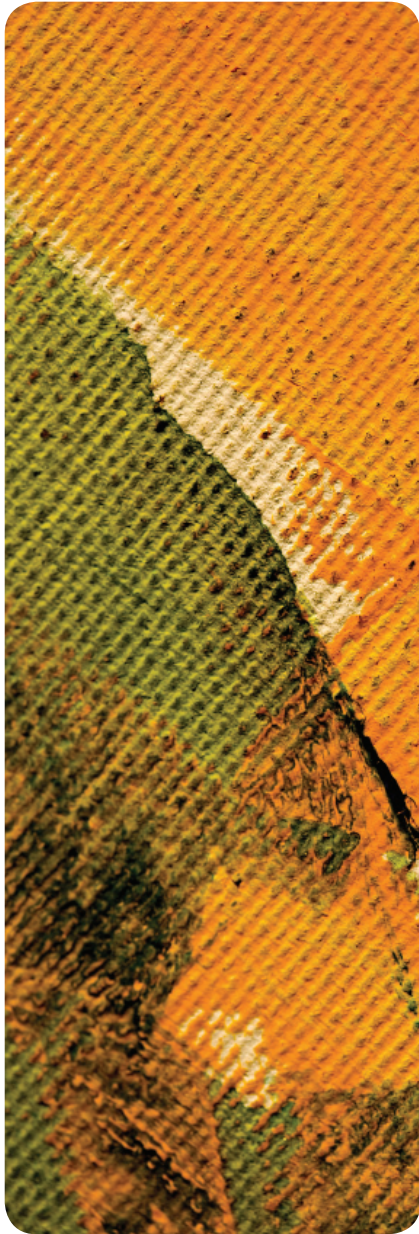
[The Issue on Violence Against Women in Human Rights Dialogue](#), by the Carnegie Council on Ethics and International Affairs.

[Ending Violence against Women and Girls](#) – Protecting Human Rights, commissioned by Federal Ministry for Economic Cooperation and Development



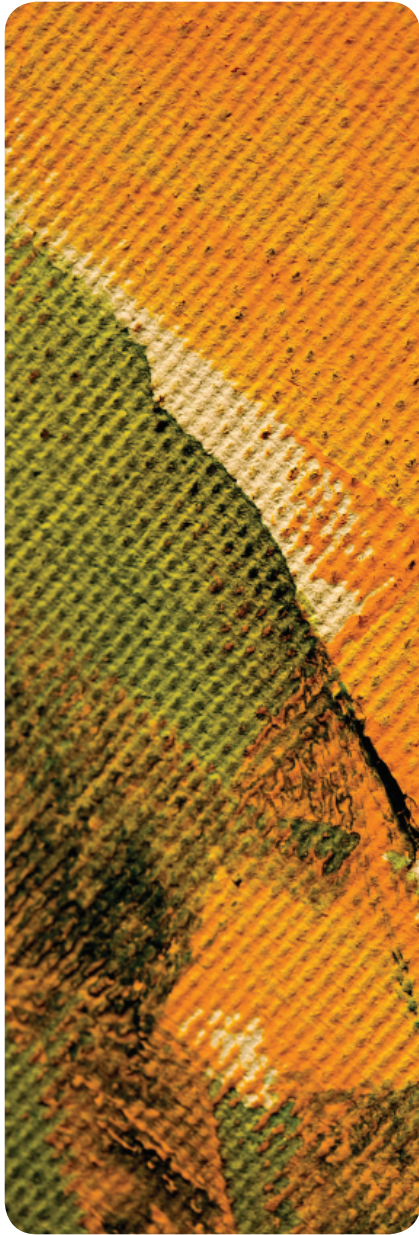
An Organizational Perspective on Integrating DV and SV Primary Prevention

In order for an organization to effectively engage in primary prevention, a wide organizational commitment is necessary. Prevention may be coordinated and organized by a key staff person or by a department, but it cannot exist on its own as a discreet and independent entity or program. Prevention messages emerge from an agency's vision and mission. It also requires an organization to have a deep understanding of the complexities and root causes associated with sexual assault and domestic violence. Finally, it requires willingness and skills to collaborate and cooperate, across agencies and disciplines.



The field of sexual assault and domestic violence prevention has changed over time and continues to evolve. In the early years of domestic violence programs and rape crisis centers, prevention may have centered on awareness raising, self-defense, rallies, and education. Research on risk factors and protective factors, as well as community attitudes and needs of multicultural communities have resulted in a deeper analysis and more intentionality of prevention. This table illustrates some general trends and how the work has changed over the past 30 – 40 years.

Where once the trend was...	Now the trend is to...
Raise awareness	Take awareness into action
Address risk of victimization	Address risk of perpetration
Provide education	Engage communities in self-learning
Market programs and organizations	Engage in building networks
Facilitate discussions	Develop leadership
Using broad-based dissemination	Target specific communities



Now it's Your Turn

Think-tank it – Why should big policy groups have all of the fun?

Primary prevention is a great topic for ongoing dialogue within an organization. It will require a clear vision and strategic plan, along with a plan for implementation and the resources necessary to carry it out. These are helpful exercises and discussions that organizations may consider before, during, and after prevention initiatives are organized. This workbook was developed as a tool for organizing and tracking these discussions.

Start with your mission

Review your mission, vision statements, purpose statements, organizational values, and other foundational documents with a group of organizational leaders. Focus on how these documents reflect and promote primary prevention. Here are some key questions:

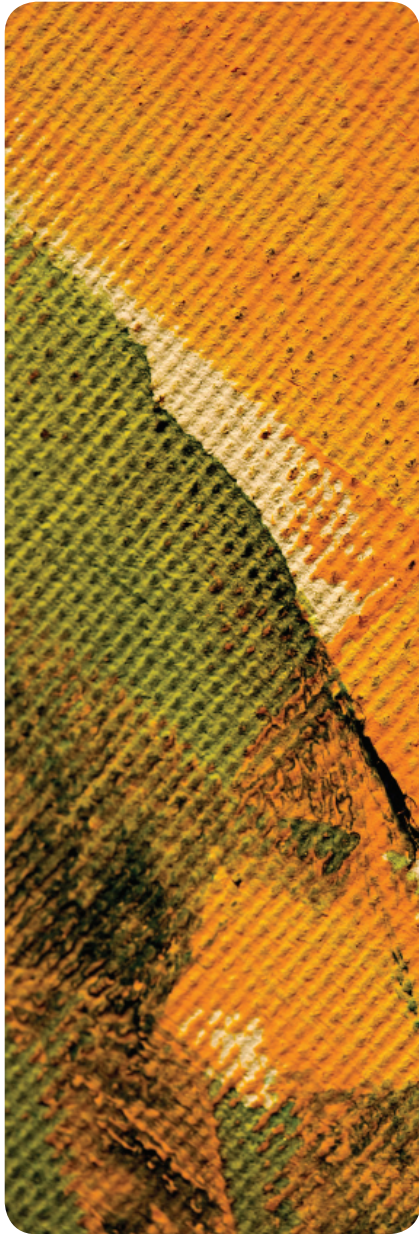
What does our mission say about prevention?

Are there frameworks that seem compatible with our overall goals and vision?

Is our mission current and relevant? Do we have work to do on improving these foundational documents?

How do we see our role in primary prevention?

Where are we now and what is our vision?



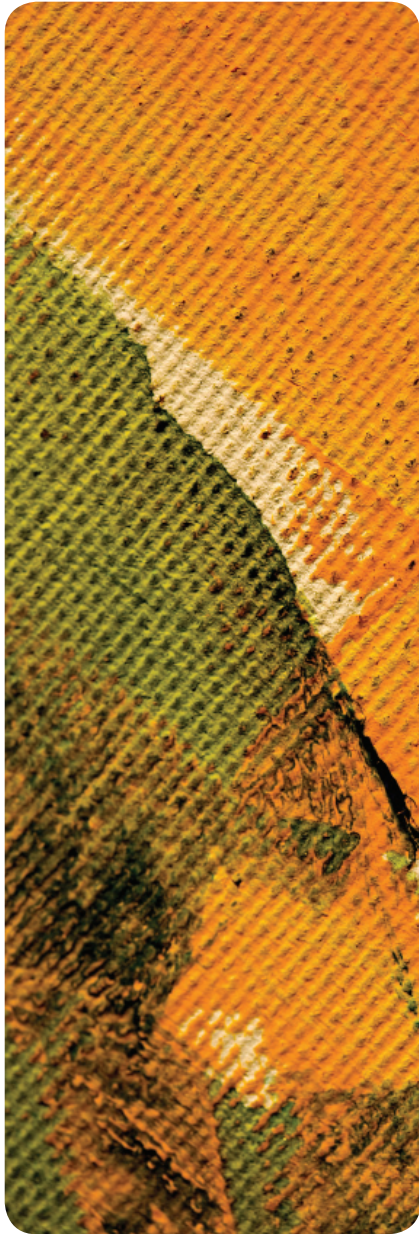
Assessing Program Activities

Try this exercise:

Get a group of staff, board, volunteers, or other key participants together to discuss and analyze your current activities. Describe the basic definitions of primary, secondary, and tertiary prevention. Then, brainstorm a list of your current activities and discuss whether each is a primary, secondary, tertiary, or multi-level intervention. Once you have mapped out your organization's activities in this way, try placing each within the social-ecological model. Then, look at them through a criminal justice, reproductive justice and a human rights perspective. Discuss whether your activities promote the concepts and goals in these approaches. This exercise can be a great beginning point for a strategic planning discussion with a focus on deepening your prevention initiatives.

Assessing Organizational Readiness

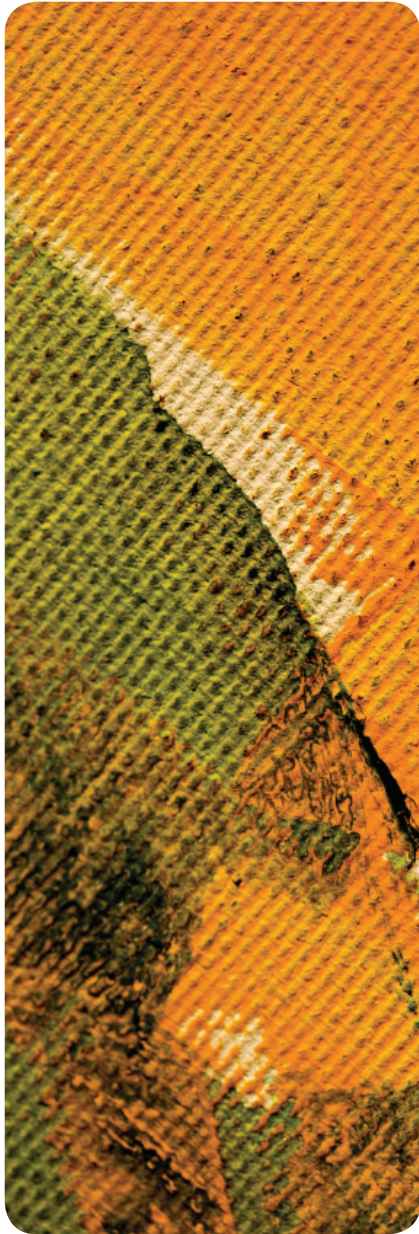
Throughout this module we have promoted the idea that organizations have a broad commitment to primary prevention. This commitment should be reflected at all levels including board, staff, volunteers, and community stakeholders. The goal of this particular discussion will be to describe and perhaps deepen the organizational commitment to primary prevention. Key questions for this assessment include:



What is our understanding as an organization of the root causes of sexual assault and domestic violence?
Is this a shared understanding?
How is it shared and developed?
What resources are currently in place to support prevention?
With whom are we currently collaborating?
What are the various community initiatives and task forces in which you participate?
Are there key stakeholders missing from our current mix of collaborators and partners?
Who in our community is working on prevention -
From the public health perspective?
From the criminal justice perspective?
From the reproductive justice perspective?
From the human rights perspective?
How do we see our role and what is our vision of prevention in our community?

Planning and Design

Once you have a clear organizational commitment and a shared understanding of the root causes of the issues, you can think through the elements of program design. Here are some key questions to address:



Population

Describe the populations within our community or service area.

Do we have a target population in mind? What is our rationale for choosing this as a target population? Have we worked with this community before?

Were there successes and challenges?

What are the characteristics of this population in terms of culture, community norms, demographics, size, and visibility?

Prevention Approach

What prevention frameworks would resonate with this population?

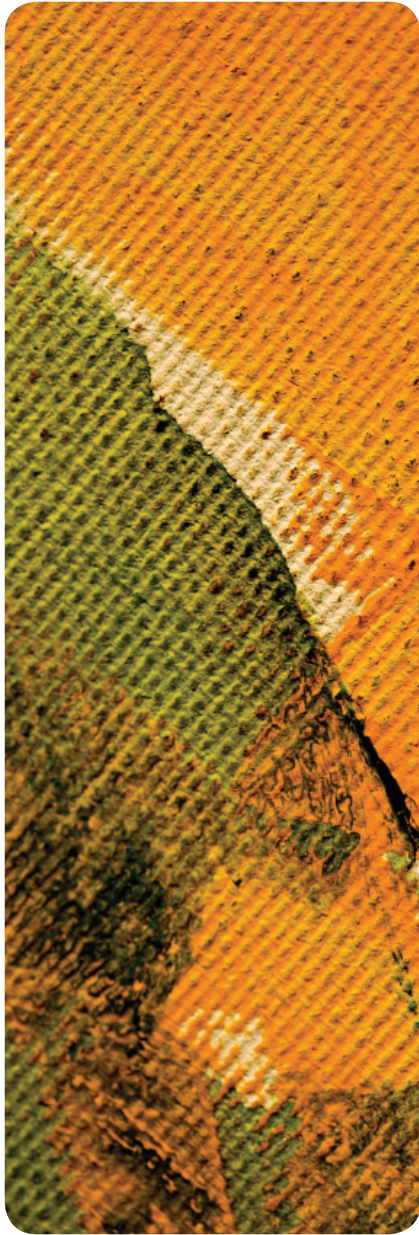
Are we equipped to utilize this framework?

Will we need training, resources, or collaborations?

Are we planning on using a developed curriculum or will we use a model that doesn't start with a curriculum?

Implementation

Once you've identified an approach and targeted population(s) you can work toward implementation. This will require putting in place the resources of staffing, training, and ongoing support that you need. It may include developing funding proposals, policy work, or collaborations that will support and help promote this work.

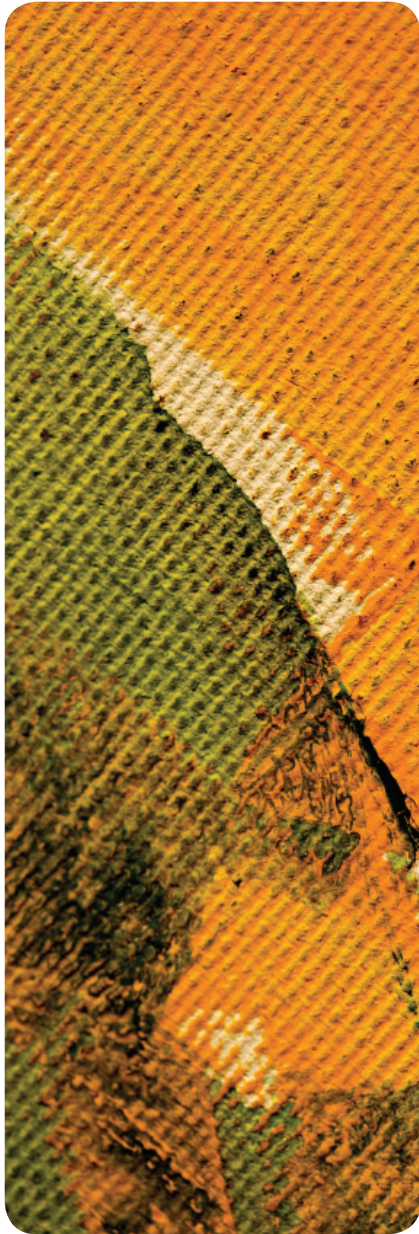


Training and Capacity-Building

Ongoing development of practitioners and of the organization are essential to maintaining an active and effective prevention effort. Think about the key people who will need ongoing professional development and training. Likewise, think about what aspects of the organization will need ongoing attention. It might be wise to establish an ongoing training and capacity building survey so that you can get regular feedback from throughout the organization that helps define your training needs.

Monitoring and Evaluation

Develop ongoing methods for monitoring your progress. Build in these evaluation methods along with your program design.



Sources and Citations

Carnegie Council on Ethics and international Affairs, Human Rights Dialogue: Violence Against Women. Fall 2003 Series 2 Number 10.

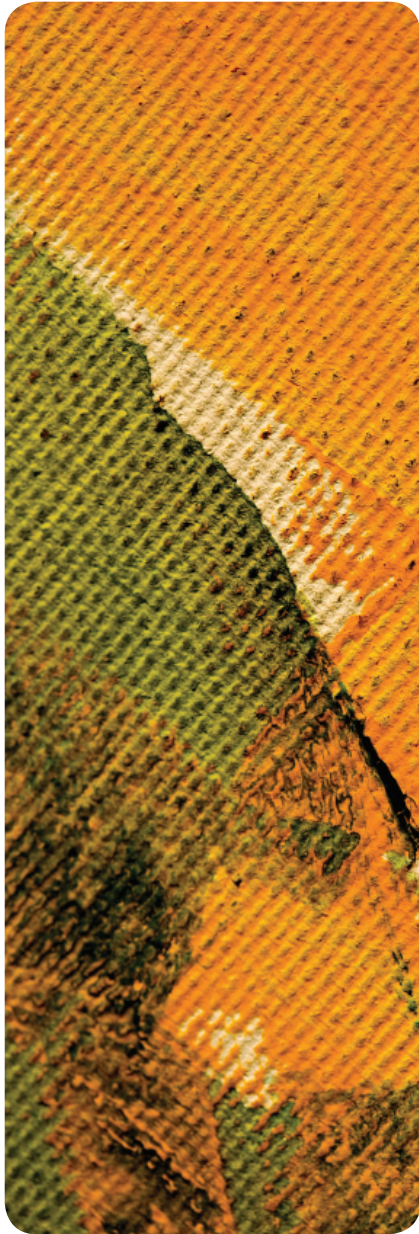
Centers for Disease Control and Prevention. Intimate Partner Violence: Risk and Protective Factors. National Center for Injury Prevention and Control, Division of Violence Prevention, Atlanta GA 2010.

Centers for Disease Control and Prevention. Violence Prevention – The Social-Ecological Model: A Framework for Prevention. National Center for Injury Prevention and Control, Division of Violence Prevention, Atlanta GA 2009.

Centers for Disease Control and Prevention. Sexual Violence: Risk and Protective Factors. National Center for Injury Prevention and Control, Division of Violence Prevention, Atlanta GA 2009.

Chamberlain, L. (2008, March). A prevention primer for domestic violence: Terminology, tools, and the public health approach. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence. www.vawnet.org

Guy, Lydia. Can Radical Feminism Coexist with the Public Health Paradigm? Washington Coalition of Sexual Assault Programs 2006.



Shepard Melanie. Evaluating Coordinated Community Responses to Domestic Violence. VAWnet Applied Research Forum. (April 1999)

United Nations. Universal Declaration of Human Rights. Adopted and proclaims by General Assembly resolution 217A (iii) of 10 December 1948.

Winters, Marianne. Making the Connections: Advocating for Survivors of Intimate Partner Sexual Violence, Washington Coalition of Sexual Assault Programs, 2008.

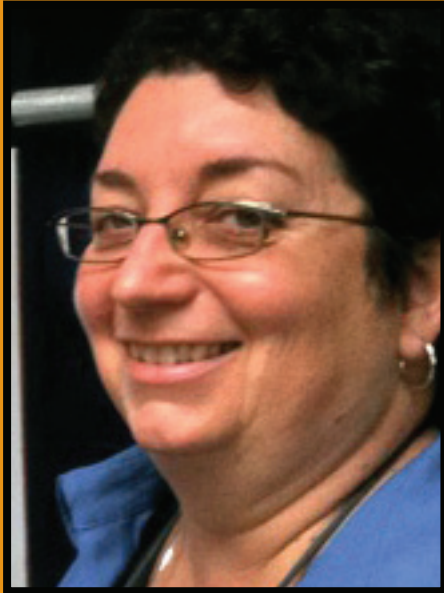
Reproductive Justice Briefing Book: A Primer on Reproductive Justice and Social Change.

Siegel, L, and edited by Eleni Delimpaltadaki, Julie Rowe, and Juhu Thukral . Reproductive Justice: A Communications Overview. The Opportunity Agenda, New York, NY 2010.

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