

Improving the response to sexual assault victims

Evaluation of three Minnesota test sites

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*Evaluation of three Minnesota test sites
Fiscal year 1999-2000*

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Contents

| | |
|---|----|
| Summary | 1 |
| Background | 4 |
| Issues addressed by protocols | 5 |
| Methods..... | 6 |
| Research results | 7 |
| Information about test site activity | 7 |
| Feedback from council members | 11 |
| Feedback from the Model Protocol advisory board members | 26 |
| Feedback from project administrators | 38 |
| Outcome data | 40 |
| Issues to consider | 66 |
| Next steps..... | 68 |

Figures

| | | |
|------|--|----|
| 1. | Number of meetings advisory board member has attended | 27 |
| 2. | Agency affiliation..... | 41 |
| 3. | Respondents characteristics | 42 |
| 4. | Professional Characteristics | 44 |
| 5. | Awareness of Sexual Assault Inter-Agency Council | 45 |
| 6. | Staff feedback on 8-step process..... | 46 |
| 7. | Type of input..... | 46 |
| 8. | Knowledge of Sexual Assault Inter-Agency Council Composition..... | 47 |
| 9. | Respondent's perceptions of system..... | 49 |
| 10. | System issues | 51 |
| 11A. | Percent of respondents who feel agency is well-equipped to respond to diverse victims..... | 52 |
| 11B. | Agency's ability to help diverse victims | 53 |
| 12. | Inter-agency communication..... | 56 |
| 13. | System-wide benefits of a shift to a victim-centered service approach to case-handling | 61 |

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Summary

Professionals who work in the sexual assault response system in Carver, Isanti, and Winona counties have spent the past three years developing and implementing victim-centered protocols for handling sexual assaults. They agreed to test an 8-Step Model Protocol Development Cycle so that other communities could learn from their experiences. They have provided the Project Administrators with valuable insights into the 8-Step Cycle and the sexual assault response system in Minnesota as a whole.

This project, known as the Model Protocol: Test Site Project, is intended to help multidisciplinary agencies work together to develop a more victim-centered protocol for responding to sexual assault victims. The guidelines of the 8-Step Model Protocol Cycle dictate that, at a minimum, test sites have to secure a commitment from four “core” provider groups: law enforcement, victim advocacy, medical, and prosecution. These groups provide services to victims of sexual assault and are responsible for implementing procedures called for in the model protocols. The Project administrators contracted with Wilder Research Center to evaluate the Cycle, as well as individual site outcomes.

Methods

The data collection methods implemented in year three are as follows:

Information about test site activity

- Observe monitoring and evaluation subcommittee or Sexual Assault Inter-Agency Council monthly meetings that cover this topic
- Review of monthly Sexual Assault Inter-Agency Council meeting minutes
- Review transcripts of monthly conference calls between site-coordinators and project leaders
- Key informant interviews with team members from each site

Training evaluation data

- Review training curriculum
- Observe training sessions
- Analysis of training effectiveness evaluation data

Baseline outcome data

- Re-administer pre-test self-administered survey with agency staff from Carver County

Additional project-level data

- Key informant interviews with 17 Model Protocol Project Advisory Board members
- Key informant interviews with project administrators

Findings

Test site accomplishments to date:

As of the close of fiscal year 1999-2000, all three original test sites have accomplished the following steps in the 8-Step Protocol Development Cycle:

- Developed a resource inventory
- Conducted public hearings or community forums on sexual assault
- Conducted victim experience surveys
- Written protocols describing local agency procedures for handling incidents of sexual assault
- Trained agency staff from participating agencies in their protocol
- Drafted or implemented plans to monitor and evaluate their protocols

In addition, some of the sites have expanded membership on their Sexual Assault Inter-Agency Councils to better encompass the range of service providers who work with victims of sexual assault in their community. All of the sites have attempted to address the issue of cultural competency in their work although they need to continue making progress in this area. Finally all of the sites have shared their experiences, both successes and challenges, with Project Administrators, Advisory Board members, and Wilder Research Center so that future sites can benefit from their efforts.

The Project Administrators have shepherded the three original test sites through three years of work. They have also supported three new sites; one urban site with a focus on communities of color, a reservation site, and another semi-urban site that initially attempted to follow the 8-Step Cycle without support, but found that they needed the guidance and administrative help of a site coordinator and the technical support of the project administrators to be effective. The Project Administrators provide technical assistance through workshops, retreats, and referrals to consultants and vendors who help the sites with Project-related tasks. They also provide moral support to individual

Council members, particularly site coordinators. Finally, the Project Administrators have taken the information that they have gained from working with the test sites to develop a Model Protocol that new sites can use to guide them through the process of improving their response to sexual assault. This document is intended to be used with the administrative and leadership support of a site coordinator and technical support from a central agency.

Conclusions

Each of the three original test sites has overcome unique obstacles to get where it is today. Some have had to deal with site coordinator turnover, some have had to overcome poor inter-agency relations between some of the members on their Councils, and some have worked with agencies' reluctance to change. While not all of the problems that they have encountered have been resolved, most have been addressed and the sites have made a great deal of progress in the 8-Step Protocol Development Cycle. The professionals at these sites have learned about their colleagues in other parts of the system by collaborating. They have a better understanding of why certain policies are in place and they have been able to suggest improvements to procedures without undermining the foundation on which different professionals base their practices. These professionals' improved understanding of one another has bred trust. Victims are likely to have greater opportunities for service because of improved referrals and better inter-agency communication. In addition, site professionals expect the lessons they have learned to be carried over to other staff in their agencies as they get trained in the protocols.

Next steps

These sites have built up momentum over the past three years, and they should all have completed the first round of the 8-Step Protocol Development Cycle by the end of fiscal year 2000-01. It will be important for these counties to continue to evaluate and refine the protocols they have developed for the system to continue improving. They will need to fully implement monitoring and evaluation plans, which will involve collecting data on how the current system is operating and sharing that information with member agencies. This will help the member agencies see if and how the protocol has improved the victim's experience with the system, as well as the system professionals' skill, sensitivity, and success at helping victims. The sites are likely to accomplish these tasks with the support of their site coordinators as well as technical support from a new central agency that is being created to continue the work of Project administration beyond the test site phase. This agency will manage the Model Protocol Project funds for fiscal year 2000-01. While funding for these entities is secure for fiscal year 2000-01, without continued site coordination and a central agency to provide technical support, it is likely that the collaborative efforts will lose momentum, or cease to exist.

Background

The Model Protocol: Test Site Project was commissioned to improve services to victims of sexual assault. The Minnesota Center for Crime Victim Services funds the Project with federal STOP Violence Against Women Act grant funds. Victim Services of Dodge, Fillmore and Olmsted Counties administers the project.

This project is intended to help multidisciplinary agencies work together to develop a more victim-centered protocol for responding to sexual assault victims. The Project Administrators have introduced an 8-step cycle for developing, implementing and evaluating protocol to guide the test sites. Anita Boles, John Patterson (Sage 1997) and others developed the 8-Step Protocol Development Cycle to help communities throughout the United States to improve their response to crime victims. The guidelines of the 8-step process dictate that, at a minimum, test sites have to secure commitment from four “core” providers of service to victims of sexual assault: law enforcement, victim advocacy, medical, and prosecution.

The 8-Step Cycle was first pilot-tested in Pine Bluff, Arkansas and Denver, Colorado and is currently being implemented in five Minnesota counties and one American Indian reservation site. This report discusses the progress of the first three test sites in Minnesota: Carver, Isanti, and Winona Counties.

All three test sites had completed the first 6 steps of the process by the end of fiscal year 1999-2000, and had begun to address the seventh and eighth steps. The steps included in the 8-step cycle are as follows:

1. Inventory of existing services
2. Victim experience survey
3. Community needs assessment
4. Write protocol
5. Renew interagency agreements
6. Train agency staff
7. Monitor protocol implementation
8. Evaluate protocol effectiveness

Issues addressed by protocols

The protocols developed by each of the three test sites are unique to the local community in terms of the agencies involved and their perceptions of how to best serve victims. However, there are some common issues that all of the sites addressed including:

- Having “first responders” such as police or medical staff contact advocates to support sexual assault victims shortly after their first contact with the victims, or at least offering victims the option of having an advocate’s support.
- Improving the response time of victim advocates, so victims receive the support they may need as soon as possible after the assault and prior to potentially invasive medical procedures, and difficult interviews.
- Training first responders so that they do not judge or blame victims.
- Ensuring that evidence collected by peace officers and medical staff is done effectively, and follows a chain of custody so that it stands up in court.
- Improving communication between prosecution staff and victims so that they are kept up to date on how the case is going and are given the opportunity to provide feedback on the process.

In addition to these types of benefits to victims, the sites expect to make their response more victim-centered by improving inter-agency relationships, thereby providing victims with more opportunities for service through increased referrals; and providing victims with a better understanding of the system as a whole, regardless of which agency they contact first.

Methods

Wilder Research Center designed an evaluation plan that included a combination of baseline and process information using both qualitative and quantitative methods. The baseline data provides a perspective on each test site's support of sexual assault victims prior to the implementation of the protocol. The process data will provide a perspective of how effective the 8-Step Protocol Development Cycle and its participants are at promoting inter-agency cooperation to improve the system's response to victims of sexual assault in a culturally competent way.

The data collection methods implemented in fiscal year 1999-2000 are as follows:

Information about test site activity

- Observe monitoring and evaluation subcommittee or Sexual Assault Inter-Agency Council monthly meetings that cover this topic
- Review monthly Sexual Assault Inter-Agency Council meeting minutes
- Review transcripts of monthly conference calls between site-coordinators and project administrators
- Conduct and analyze key informant interviews with team members from each site

Training evaluation data

- Review training curriculum
- Observe training sessions
- Analyze training effectiveness evaluation data

Baseline outcome data

- Re-administer pre-test self-administered survey with sexual assault response professionals in Carver County

Additional project-level data

- Key informant interviews with 17 Model Protocol Project Advisory Board members
- Key informant interviews with project administrators

Research results

The next section of this report details the individual progress of the three sites. While the challenges that some sites have faced are internally counter-productive, they provide future sites with valuable lessons in program implementation. The reader should note that despite these challenges, all of the sites have strengths and have made unique contributions to the project as a whole.

Information about test site activity

Wilder Research Center staff attended three to four monthly Sexual Assault Inter-Agency Council meetings and training or monitoring and evaluation subcommittee meetings at each of the sites to assess the collaborative atmosphere among Sexual Assault Inter-Agency Council members. In addition Wilder Research Center reviewed the monthly meeting minutes distributed by site coordinators and transcripts of conference calls between project administrators and site coordinators. Other data that contributed to Wilder's understanding of the sites' progress were observations of training sessions, review of training materials, and assessment – when available – of training evaluation reports. Wilder also conducted key informant interviews with team members who had been involved with the Sexual Assault Inter-Agency Council during the 1999-2000 fiscal year.

Progress in 8-Step Protocol Development Cycle

The three test site's Sexual Assault Inter-Agency Councils started the third year of the project at different levels of progress. One site had completed and finalized its protocol and was prepared to start training; whereas, the other two sites were still writing or seeking final approval of agency protocols. Sites also varied in the amount of progress they made in the 8-Step Protocol Development Cycle during this fiscal year.

The event that contributed most to delays in site's progress was site coordinator turnover. Councils rely on site coordinators to help set direction, gather needed resources, and address barriers in the process as well as the day-to-day business of scheduling meetings, compiling data into Council documents, and organizing council activities. This work helps maintain site momentum. The two sites with coordinator turnover experienced long spells of down time during which agency activities and task accomplishment languished and individual's commitment to the project may have waned. Other events that challenged the collaborative process include agency staff turnover, changes in the fiscal agent or agency that manages the grant, and differences or changes in the level of commitment of the participant agencies.

While all three test sites completed drafts of their protocols by the beginning of this fiscal year, only one produced a final version of its protocol to use in training. The other two sites faced a number of challenges. At one site, the majority of SAIC members recommended a change in their lead fiscal agency. The existing lead agency voluntarily withdrew their application for renewed funding and assisted with conversations for a new agency to submit the funding application. This turnover created close to four months of downtime for the SAIC. In addition, shortly after the previous coordinator had been hired by the new lead agency, she resigned. This site's Sexual Assault Inter-Agency Council spent a fair amount of time and energy locating a new site coordinator, and eventually hired a consultant who was familiar with the project. This professional was highly effective at getting the team re-focused on project tasks.

The other site without a finalized protocol at the end of fiscal year 1998-99 also lost its coordinator. Her replacement had a difficult time learning the position, and left shortly after she was hired. A new site coordinator was hired who also worked part-time for the victim advocacy program in the County Attorney's office. This coordinator needed to learn the responsibilities of both jobs simultaneously, which proved difficult for her, and her coordination responsibilities suffered. In the end, this coordinator proved to be ineffective at both jobs and was terminated just before the end of the grant year. The Council fell behind in their work due to the coordinator's lack of leadership, and poor coordination skills.

Training

All three sites were successful in implementing multi-disciplinary trainings, despite the challenges they faced in staff turnover. One site conducted seven trainings with law enforcement, advocacy, and the local Universities. These trainings lasted from two to four hours. A representative from each discipline presented a step by step description of their portion of the protocol to the trainees using the PowerPoint software package. The training teams also left time at the end of each presentation to answer questions about their protocols. Team members filled in when a representative from a particular discipline was not available. The trainings were not mandatory for all agency staff, although they were fairly well-attended by advocacy staff and volunteers and fairly well attended by other systems professionals from law enforcement, and the local universities. Advocates were more engaged by the presentations than other system professionals. More trainings are planned for fiscal year 2000-01.

This site's training participants were overwhelmingly positive in their feedback on the trainings. They reported that the trainings gave them a good understanding of the county's response as well as their own agency's response to sexual assault. It also provided them with a good working knowledge of the resources available to them in their

county, and how to interact with other agency staff who support sexual assault victims. These participants were also very positive about the format of the training and the presentation of the protocol. They felt that the length and content of the training was appropriate and the presenters were skilled.

According to Wilder Research Center's observations of this site's training sessions and review of this site's curriculum, the training conveyed basic information about the protocol with an appropriate level of detail. The presenters were well-prepared and did a good job of presenting the material, however, there seemed to be too little time for questions and answers. Ideally, the Sexual Assault Inter-Agency Council would increase the amount of time they can spend on training. Unfortunately that might not be realistic, given the cost in staff time. It was apparent at some of the trainings that participants were not engaged by the material, a more interactive training where the participants are asked to anticipate what will be next on the screen or break out into discussion groups, might improve the trainers' ability to engage their audience.

Another site's Sexual Assault Inter-Agency Council held four half-day trainings. Two with the Sheriff's Office and two open trainings for all other agencies' staff who might be in contact with sexual assault victims. These trainings were mandatory and the Sexual Assault Inter-Agency Council promoted attendance by notifying participants that they would receive a certificate of completion when they attended. Unfortunately some attendees received their certificates at the beginning of the session and then departed.

The training subcommittee designed the Sheriff's training to include a presentation of different agency practices as well as a video on victims' experience working with law enforcement after a sexual assault. The training for the other agency personnel substituted the video with an exercise in which small groups were asked to discuss a scenario and answer several questions about appropriate responses to that event.

According to Wilder Research Center staff observations, the trainings were generally well-received by the participants. While some participants left early, those who stayed appeared to be interested in hearing about the history of the Sexual Assault Inter-Agency Council and the philosophy of the protocol the Council developed. The trainees appeared most engaged when they brainstormed about the victim's experience and the appropriate professional response in a breakout session. They did not go over the protocols in much detail in the training sessions. Therefore, some follow-up might be required, particularly with supervisory personnel to ensure that agency staff know what they should do differently because of the protocol.

The third site's Sexual Assault Inter-Agency Council held two all-day open trainings. All of the agencies represented on the Council required staff who were likely to have contact

with victims of sexual assault to attend. The training subcommittee designed the training to include an authentic 911 call of an assault in progress, small group breakout sessions in which participants responded to scenarios, and presentations of each agency's protocol. This format is the ideal for training if the agency leadership is willing to allow that much time to be dedicated to this topic. While it is unclear which training style and length is most effective, agency leadership emphasize their commitment to the process by dedicating such a substantial amount of staff time to this issue. The participants in the all-day training were exposed to a more in-depth review of the protocol and the issues surrounding a collaborative response than training participants from counties with shorter training times.

It is interesting to note that the three sites conducted very different trainings. There are tremendous benefits to having a packaged PowerPoint training that can be conducted consistently with new employees as they enter an agency. However, training participants will probably retain more of the training information if they are more engaged in the process. Furthermore, sites that make the training mandatory for agency staff who have contact with victims will likely be more successful in protocol implementation than those that make it voluntary. Voluntary participation implies that compliance is also voluntary. Finally, time is an issue. Some agencies may not be willing to commit the staff required to provide agency staff with the best possible training. Therefore, finding innovative solutions such as offering professional credit or certification appears to help make the training more palatable to direct service staff and management.

Monitoring and evaluation

Only one of the three sites implemented a monitoring and evaluation plan in fiscal year 1999-2000. This site's Sexual Assault Inter-Agency Council developed a voluntary victim feedback form. Sexual assault response professionals provide victims with the opportunity to fill this form out whenever they have contact with a Sexual Assault Inter-Agency Council agency. The Council has not been tracking the dissemination of these forms, but the coordinator believes that three have been completed by victims and returned to agencies. In one case a victim provided feedback on an agency that was not part of the Sexual Assault Inter-Agency Council. The Council shared this information with that agency and the agency leadership asked to become part of the project. The Sexual Assault Inter-Agency Council hopes to continue improving services and expanding membership in this way.

Both of the other sites have monitoring and evaluation sub-committees. The project administrators connected the sites to independent evaluators to help them develop monitoring and evaluation plans.

Feedback from council members

The project administrators wanted to give the Sexual Assault Inter-Agency Council members an opportunity to provide feedback on their experience with the project. Wilder Research Center collected this information by conducting key informant interviews with 49 of 50 council members. Wilder agreed to interview all members who were currently considered active, and past members who had been active in the project during the past year. All participants were asked the same set of questions, and site leadership, consisting of site coordinators, Council chairs, and the heads of the agency responsible for administering the grant funds, were asked several additional questions.

Council composition and member commitment

Wilder Research Center interviewers asked Sexual Assault Inter-Agency Council members how comfortable they have been with the composition and commitment of the team members from the four core agencies (advocacy, law enforcement, prosecution, and medical). Participants were most likely to report being impressed with team members' commitment to the process, and their cooperation with other team members. A few respondents also mentioned that the core agencies were well-represented on the team, that the team has a good site coordinator and that they have been able to put together a good end product.

There were some differences by test site. One site, that had a strong coordinator and little turnover received the most positive comments about all members. Representatives from the other two test site counties were more likely to describe the commitment of specific members who helped shepherd the process during transitional periods. Several comments are included below.

Everybody has been willing to learn and to make suggestions.

Our coordinator was outstanding – good organizer, kept us on track, getting all people to be heard from.

I think that the representation from agencies has been a good blend, a good mix.

While many respondents were positive about the composition and commitment of their Council, almost as many were concerned about it. These participants were critical of specific agencies' or Council members' lack of commitment to the project. It is interesting to note that respondents were critical of all four core agencies. A few participants from test counties in which there was site coordinator turnover cited poor coordination, a few mentioned lack of representation on the Council and a few mentioned agency policy constraints. Some of their responses follow.

A few have not been responsive, volunteering to do things and not following through, saying they will be there for meetings and then not showing up, etc. We have had a problem not necessarily with the member but with a [law enforcement agency].

I have pretty much pulled back the last year. It pretty much fell apart when things were in transition for several months as the coordinator quit and a new one was hired.

We also had a growing Hispanic community base which should have been represented but wasn't. The coordinator's attitude was that she had contacted them and had invited them to attend, and if they did not choose to be at the table, that was their problem.

Adequacy of resources

Wilder Research Center interviewers asked Council members if they thought they had the resources they needed to accomplish their goals over the past year. Almost all of the Council members (42 of 44) said that they had the resources they needed, although several respondents from two of the test sites described additional resources that would have made their work easier. Nine of these respondents said that they lacked time to keep the process going, eight cited staffing issues like coordinator turnover, and insufficient representation from diverse communities, and three mentioned a lack of information. Eighteen of the respondents who felt that they had sufficient resources cited the funding they had received, 14 mentioned project level support, 10 mentioned the staff time committed to the work, eight each cited communication and sharing of information between agencies, and the help from the site coordinator, five mentioned training, and four mentioned goal accomplishment. Several of the respondents' positive remarks and descriptions of need are presented below.

Positive remarks

Working in a non-profit, it is nice to be in a situation where there are the funds to do all the pieces that need to be done. I do have to contribute my time from my agency to the process, but it is nice to not have the individual agencies having to also donate other resources – to have the money available to the project so participating agencies don't have to be expected to also do that.

We were fortunate to have our coordinator who came from the county attorney's office. She did all the groundwork of finding money, grants, resources to bring to us that helped us to be able to excel.

[project administrator] was helpful in general and especially so during the times when we were going through a lot with the changeovers.

Each department has been good about getting materials in and working together.

Needs

At one time our group was almost dissolved. We had switched team leader persons for our group. The new person didn't seem to have the training, nor the knowledge to keep the group going in the right direction.

The only resource we were lacking has been time. As the coordinator, I felt that I should have had more time for us to focus on the tasks that we had to complete.

It would have been nice to have more resources from other sites, training resources and monitoring and evaluation resources – more sharing from other test sites.

We have not had adequate time for the work on all the areas, things like the work to get better diversity representation on the Council.

Perceptions of project administrators

Interviewers asked Sexual Assault Inter-Agency Council members whether or not the project administrators have been helpful. Thirty-four of them reported that the project administrators have been extremely helpful. Twenty-nine cited their provision of invaluable technical support, 12 mentioned their accessibility, 10 mentioned how helpful they were or appeared to be to the site coordinators, and seven cited their enthusiasm. Three respondents were critical of the project administrators. One felt that they were inaccessible, one felt they were ineffective and one felt they were too controlling. Several positive remarks and one negative remark follow.

Their participation was helpful, without being intrusive. I don't know what more they could have done. They would offer suggestions or alternatives, sometimes sharing what other groups had done on the same thing, bringing things to a point.

They have been extremely helpful. They are always available to provide information and support on any issue that I might have arise, or even just with information that might be helpful to me or the team.

The coordinator has called upon them several times. They have attended several of our meetings and have shared experiences from others that have been helpful. I know their communication has been more with the coordinator.

There was a point, particularly our later phases, when we seemed to be being told how we should be doing some things, when what we wanted to do was something else. We didn't really appreciate that, and our coordinator was good at telling them to, essentially, back off, that this was our process, and that we wanted to do some things differently.

Cultural competence

Interviewers next asked survey participants if they thought the Council had done enough to address the issue of cultural competency. Most respondents (n=27) said that they felt that the Council had adequately addressed the issue of cultural competency, 14 respondents did not believe that the Council had adequately addressed this issue, and three were unsure or had mixed feelings. Those who felt that the Council had adequately addressed cultural competency were asked how they had done this. Sixteen of them cited the small size of the communities of color in their county, which made outreach difficult, and, to some degree, a wasted effort. Therefore, they felt whatever effort they had extended was enough. Seven respondents who did not feel that the Sexual Assault Inter-Agency Council had done enough also cited the small level of diversity in their community as a barrier to providing culturally competent service. However, eight respondents each felt that their Council had done a good job discussing the issue of cultural competence, and getting feedback from diverse groups or individuals from within their Council. Five respondents each reported that they get feedback from agencies that serve diverse communities, or hired cultural liaisons or interpreters to do specific translation work or to help them with outreach, and four respondents said that their protocols or trainings are culturally appropriate. Several of the respondents' comments are included below.

[Site] doesn't have much of a minority population, so I believe it has been discussed appropriately, relative to the population.

There are agencies who have been hiring staff who are members of the different cultural groups, and they have made these people available to us. But we have a lot of work to do over the coming years in this area.

They have contacted various community groups that work with different cultural groups to find out what their needs are in serving those groups and to find out how we can be of service to them.

Interviewers asked respondents who did not feel that the Council had adequately addressed the issue of sexual assault or were not sure to explain why they felt that way. Seven respondents reported that the issue of cultural competency is so large it is difficult to adequately address it in their community, particularly with the limited resources available to the Council. Six respondents felt that their Council did not make enough of an effort to address this issue, three felt that the Council itself was not diverse enough and two respondents reported that this issue was never discussed. A few of their responses are included below.

The resources do not exist in the community, so accessing those things is a challenge – things like language interpreters, etc. I can't think of anything more that could be done.

There has been beginning effort. We are aware and have studied what we should be doing. But we haven't got anyone of another culture on the committee.

We have not even made the outreach to people of color to have people available to us to review our work and help us know whether what we have done is at all appropriate for their communities. I just think that, even with a small population of people of color, there could have been more done to bring about better levels of involvement.

How to make response more victim-centered

Wilder Research Center interviewers asked respondents what else could be done to make their coordinated response to sexual assault more victim-centered. Respondents were most likely to say that they did not know how to make their coordinated response more victim-centered, as most of them felt that they had done everything they could do (n=14). However, several respondents did suggest ways to improve their coordinated response. Nine respondents suggested maintaining agency trainings, eight suggested holding the system accountable by implementing a monitoring and evaluation plan and generally reviewing the work that they are doing to make it better, five suggested improving interagency collaboration and referral, and four suggested focusing on victim's needs by involving them more in the improvement of the process and empowering them during the process itself. From one to three respondents each suggested improving their response to diverse victims, improving Council member's understanding of the term victim-centered, using advocacy support, hiring more staff, following the protocol, and expanding the Council. Several of their comments follow.

Not just to ask whether we are doing our job, but to study what we need to do to tweak the system to make changes and fix things that we need to.

Sometimes I am concerned about how the different agencies come together. Could there be ways that things could be more coordinated, so the victim wouldn't have to repeat the story 5 times to 5 different agencies. Are there ways that these things could be better coordinated.

I think the biggest thing that needs to be done is an awareness of what victim centered is. When you speak about victim centered, people initially get very defensive, because they usually feel they are already doing this.

It would be nice to have the local judges involved. They have not been involved in the process. I just feel that the judges are not up to date on the aspects of sexual assault. Not that they should have been involved in the process, but that they should be involved in the training. I think it would help for the sentencing part of it for the perpetrators.

Impact of statewide protocol

The test sites were developed in part to help the Project Administrators develop a Model Protocol that could be distributed to communities across Minnesota to help them improve their response to sexual assault. This statewide model protocol is based on the knowledge that the administrators gained from guiding the test sites through the 8-step cycle. It was released in June of 2000. Wilder Research Center interviewers asked survey respondents how they thought the release of the statewide model protocol developed by project staff would effect their site. Eleven said that it would not have any impact on their community because their protocol is already complete, seven said that the whole process is beneficial to the individual communities and to the project as a whole, and six felt that the release would create greater community awareness locally and statewide about the project. Three or four respondents each said that the release will inspire other sites to work through the process, and that it will provide them with an example to compare to their own protocol. Some respondents were not comfortable talking about the statewide model because they knew too little about it. These respondents discussed the impact that their own protocol has had in their community, or what they expect it to have. Sixteen respondents felt that it would lead to better cooperation between agencies, eleven said that the system-wide response would be more consistent, eight said that the protocol will make them more victim-centered, and two did not know what effect it would have. Several examples of their responses follow.

I think it is going to make us more responsive to the needs of victims.

The process itself, regardless of its outcome, had great value for all of us in learning from each other, as well as in getting to know each other.

It gives it continuity. It will be the same, no matter who comes in.

I don't anticipate it will affect us at all.... What matters is going through the process of developing your own, getting to know each other, healing old wounds – this is what matters. It is not the same to just get the model protocol and be expected to apply it.

I think that we will hopefully see an increase in the number of sexual assaults that are reported, due to the increased level of awareness.

Barriers to protocol development

Next Wilder Research Center interviewers asked Sexual Assault Inter-Agency Council members to describe the biggest barriers their council faced this past year, and how they dealt with those barriers. Two of the sites were challenged by staff turnover, particularly the turnover of their site coordinators. Seventeen respondents from two sites and two from the third felt that staff turnover and the effort it takes to get new members up to speed was the greatest barrier faced in the past year. Sixteen respondents described

problems with internal Council politics, 10 mentioned the problem of staying motivated, and nine mentioned the amount of time the process takes. Other responses mentioned by five or fewer respondents included poor communication, lack of support from the parent agency, the need for more training, the effort involved in revising the protocol, restrictive agency policies, resources, the lack of a uniform definition of sexual assault across agencies, trust from diverse communities and community awareness. Five participants said that they did not face any barriers this past year or could not think of any barriers. Several of their comments follow.

The change in the coordinator position. It was detrimental to the group cohesiveness and the momentum. Agencies questioned the commitment, their own commitment – is this really going to happen; is this worthwhile.

I suppose it would be working with the different disciplines as far as explaining to them what they need to know as opposed to what they might want to know.

The length of time. It dragged on. It was way too long, way too long. It moved at a snail's pace.

The meetings were primarily many more women than men, and you get a feeling like people don't want to hear what you really think, so you don't say it, and you end up wondering, then, why am I here. I think the process is a good one, and I support it, but I think this is honestly what is on the minds of a lot of people.

Resolution of barriers

The Councils were effective, for the most part, at resolving or at least addressing the barriers that they faced. Eleven Council members said that the hiring of a coordinator or the coordinators' work to keep the process going resolved several problems. Eight respondents said that Council members' communication with one another and their agencies helped to resolve some problems. Eleven respondents reported that individual team members became more committed or took on more. Four respondents each said that agencies changed their practices and the training curriculum was developed or modified to address issues. Other solutions mentioned by one or two respondents each included accepting a flexible decision-making process, accessing additional resources, doing self-evaluation or being more aware of the Council structure, applying pressure to members, and conducting cultural outreach. Finally, 10 respondents did not feel they knew enough to describe a solution, did not think they needed to address any challenges, or reported that their team did not make an effort to resolve the challenges they encountered. A few of the council members' comments are included below.

They hired an extremely competent consultant as coordinator, so we have been able to get the work done.

Just having the committee meetings, so we realize how everyone feels, getting to know the people, having a common goal helped us know that we were all working on the same thing. I am now more comfortable calling people, asking them for help, which is all due to the large group getting together.

It has taken a lot of effort on the part of a small group of people that has kept it moving, continuing to hang in there, not just bailing out.

We are trying to plow into the training the point that the protocol is not the finish, but that it needs to be strengthened.

Accomplishments

Wilder Research Center interviewers asked survey respondents to reflect on the greatest accomplishments of the Sexual Assault Protocol Inter-Agency Council during the past year. Twenty-four respondents were proud of their Councils efforts to develop and implement staff training in the protocol, and 23 cited the development of protocol itself. They were proud of having come to consensus on standard procedures for participant agencies. These procedures include the practical responsibilities of particular agency staff, collaborative expectations, and in some cases the behaviors that staff are expected to model. Fifteen respondents mentioned the team member's successful efforts in collaboration, seven were glad that their Council had managed to stay together and persevere through difficult times, two felt that their Council was more victim-centered, two recognized the value of the publicity that their work has generated, and one was pleased with the work the council accomplished in their evaluation plan. A few of their comments follow.

Getting to the point where we are actually able to teach the rest of the disciplines and/or deputies what we have learned.

I would say finishing the protocol. The manual is done, and we had the training done this week. The information is now getting to the officers, where it should be.

I think maintaining some energy, which is a part of surviving.

Setting forth a process to help people who have been in these cases, giving them the resources to resolve their own peace of mind. Or hopefully helping them to.

We have done a lot of networking with other communities not only across Minnesota but across the country, providing information for them on what we have been doing and how.

Perceptions of 8-Step Protocol Development Cycle and Test Site Project

Next, Wilder Research Center interviewers asked participants if they thought that the 8-Step Protocol Development Cycle their team has been testing is a good method for counties to use in developing a more victim-centered response to sexual assault. All 44 of the participants felt that the process was a good method for improving communities' response to sexual assault. Respondents were overwhelmingly positive about the deliberate structure of the process (n=29). They felt that it broke the work up into manageable pieces, kept meetings on track, and helped the Council develop resources and better understand the community in which they were trying to develop a better sexual assault response. Ten respondents reported that the process facilitated better inter-agency collaboration, and nine said that the development of a protocol was helpful to victims. A few respondents also made positive remarks about the initial training, just doing anything, and having the support of a coordinator. Five of their comments follow.

Because it is structured. To get this going without the structure would have been difficult – list resources, hear from survivors, the public forum. This is all there. It helps lay a groundwork for the writing, training, monitoring, and evaluation that follow. There may be other methods that could have worked, but I think it is difficult to get something like this off the ground without the structure.

Particularly with a good coordinator, it provides opportunities to meet and discuss, to iron out the wounds, to improve the process.

It forces you to engage in a process of communication. As long as you are engaged in that process, you cannot help but learn. You are engaged in both organizational and personal learning, and, as a result, cannot help but benefit from that.

Because it IS victim centered. It gets the victim involved to have a say in what goes on and what is being done about it.

While all of the survey respondents had something positive to say about the 8-Step Protocol Development Cycle, nine respondents offered both compliments and criticism. Four of these respondents felt that the Cycle was too time-consuming, three were uncertain whether or not the Cycle would lead to real change, and one or two each reported that the book, the public hearing and the victim experience survey were not useful. One respondent felt that the Cycle promoted disagreement. A few of their comments follow.

I think it was much more labor intensive for all the partner agencies than originally explained or anticipated. The original mailing seemed to indicate this would be a few meetings to discuss developing a system. When people got to the original training, it developed that this would be a few years rather than a few meetings. I, for example, put in from 16 to 40 hours per month. This was a lot more intensive than was originally expected by any of the participants.

The phone survey was very time consuming, and we didn't get any real information out of it, so it didn't really help us at all.

As far as the training issue, I saw quite a lot of one part of the process saying "THEY need training in THAT."

Interviewers asked the ten site leaders about the advantages and disadvantages of being part of the project. Five each mentioned the support of the project administrators, and funding for the resources needed to be a part of the Project. Three felt that the collaboration between county agencies was the greatest advantage, and two each mentioned that the Project provided a good systematic guide for action and that knowing what the other test site counties were doing was beneficial. A few of their comments follow.

The benefits are keeping us up-to-date on state and national events. Pointing out things to look out for, whether that be in the 8-step process, or in the grant writing, or in the budget. Keeping the site coordinators connected. And overall, just supporting us.

I am not a touchy-feely kind of person who likes to just sit and talk and get to know each other, necessarily. But the getting together and getting to know each other, who each is, who their children are, what they do – we have now become allies, and are comfortable with that label.

One has access to what has been learned from the other sites. When I have struggled with an issue which may have been contentious with the group, they have been able to share with me what has gone on at other sites, and that has been helpful.

I think the Project was a great tool and guide to learning the steps to creating and learning a protocol.

Only five members of the site leadership mentioned disadvantages to being part of the Project. Three of them felt that the process was inflexible, one said that it took too long and one said that the project coordinators were not always accessible. One respondent said that there were no disadvantages to being part of the project, in fact, this leader felt that the work would not be feasible without the connection to the Project. Two comments follow.

We had to follow closely the 8 steps of developing the protocol. If we had been left on our own, we probably would still have done all the same steps, but probably not using the same process or using the same tools that we developed.

I found the 8-step process to be kind of cumbersome. At times it was just overwhelming, because I think it was just a lot to do, a lot of steps to go through when you are just a volunteering agency. It takes a lot of time to go through those 8 steps.

Lessons learned

Interviewers asked all survey participants to describe the lessons they have learned while working on the process that would be useful to pass onto other sites. Respondents were most likely to say that they did not know (n=15). Six participants said that it is important to involve victims in the process, and five participants each identified the importance of clear communication, cooperation, and recognition that the process is time-consuming. Three respondents each recognized the need to have the support of agency leadership, being open to change, and opening up the process to new members. Two respondents felt that it was important to do outreach to publicize the work in the community, two suggested being diligent about working through the process and two mentioned the importance of following a timeline. One respondent each suggested passing on the following lessons: consistent training, remember that it is a local experience, be persistent, make the protocol user-friendly, selecting appropriate staff to represent each agency, and hiring a good coordinator. Several examples of their comments follow.

The community forum of people talking about their personal experiences and opinions, plus the survey of victims and their experiences, these were good. They were not necessarily statistically valid, but they did bring out people's experiences with "the system."

I think maybe there is a lesson learned that they didn't realize that it would, but that it DOES take that kind of time, and it has been worth it.

Errors have been made and then corrected through the group sessions.

Put a timeline on it. Anytime you put a timeline on something, you can move through things without wandering off on a tangent.

It is important to be careful about who you pick to represent your agency or department on the council, so you have to try to get the right match up front.

There needs to be something developed from the start that is more succinct for easier application by people in the field.

Staff turnover

Interviewers then asked the site leaders only about the problem of staff turnover, which has been challenging at other sites. Interviewers asked what turnover their site had experienced, what effect it had on their site and how they dealt with it. In terms of core agency representation, one site had turnover in advocacy, law enforcement, and prosecution, one site had turnover in medical and law enforcement and one had turnover in medical. Representatives reported that the greatest obstacle that turnover created was the need to get new people up to speed, which was particularly frustrating when turnover occurred at the same agency multiple times. Respondents felt most challenged by site coordinator turnover. This occurred at two sites and it proved very disruptive. While the people who replaced the site coordinators were very good at their jobs, there was a substantial amount of time that passed without coordination when very little work was done on the 8-Step Protocol Development Cycle

Effective strategies

Interviewers asked the site leadership what strategies worked best to keep team members engaged, and what strategies worked best to keep agency staff, who do not serve on the Sexual Assault Inter-Agency Council aware of the project. Respondents were most likely to report that good communication at regular meetings was the key to keeping team members engaged. They said that having a positive atmosphere, in which all people feel comfortable speaking keeps members engaged. A few participants cited the site coordinators' efforts to keep the process moving and the members engaged. The Councils kept agency staff, particularly the staff leadership engaged in the process by involving them or at least consulting with them about the staff trainings, by reporting back to them, and via communication with the site coordinator.

Advisory Board's role and understanding of site progress

Interviewers asked site leaders if they thought that the advisory board had an accurate understanding of their site's challenges and successes. They were also asked to describe what they thought was the role of the advisory board. Participants reported that the project administrators, site coordinators and site representatives who attended advisory board meetings provided the board with an understanding of what their site experienced. In addition, one respondent reported being interviewed twice by advisory board members. Most felt that the board was well aware of the major issues that sites faced, although a few were not sure whether or not the board had a detailed understanding of the work they had done. Participants felt that the Board's role was to provide information and support and keep the sites accountable to the Project.

Future goals

Interviewers asked participants what they believed to be their site's future goals. Thirty-four representatives from all three sites cited the need for ongoing improvement of their sexual assault response protocol through monitoring and evaluation (which are the seventh and eighth steps in the Protocol Development Cycle), and by maintaining the inter-agency relationships that they developed during the first round of the Cycle. Sixteen respondents felt that they would continue to train and update agency staff in the future, 13 felt that the next goal they needed to accomplish was implementing the protocol and 10 said that one of the council's future goals was to do a better job of helping victim. Five or fewer respondents mentioned the following goals: expand membership, raise community awareness, share knowledge with other sites and improve cultural competence. Several of the respondent's comments follow.

Reviewing and revisiting the overall protocol each year to continue to improve the product. To continue to have an outreach and education process to keep people informed and trained. To continue the process, because that – the process – is where the progress comes from.

Communicating the results of the process with the staff of the different agencies, as well as communicating to the public what we have accomplished.

To really implement a victim centered mentality and approach county-wide. And to figure out a way to implement that statewide or to help counties implement that on a statewide basis.

Another is to reach out to other communities and cultures. There are communities of color and cultural communities, but also other age groups, such as younger people, that probably should be included. And there are other agencies that have not been involved in the process so far but that should be involved in receiving the training and being informed on the topic.

Likelihood of goal attainment

Interviewers asked respondents how likely they thought their Council would be to accomplish their goals using a four point scale where 1=very unlikely, 2=somewhat unlikely, 3=somewhat likely, and 4=very likely. They were also asked to explain their rating choice. All of the respondents thought that their Council was very likely (n=35) or somewhat likely (n=13) to accomplish the goals they'd described earlier. Twenty-three felt that they would be able to accomplish their goals because their council members and the agencies they represent are committed to the process and 16 pointed to their past accomplishments. Two respondents each mentioned their Council's ability to work through challenges and the importance of the outcomes they are seeking. A few of these comments follow.

Everybody is dedicated to make it work. There is an interest from outside sources to see it work, too. We also have the commitment from within the community to make it work. I think other communities have seen this and will help move it along.

Because a lot of the change has already taken place. A lot of people have been influenced by going through the process and the education. There have already been some procedural changes implemented.

With all the agencies meeting together and discussing problems as they arise, we can resolve these problems and give the victim a better outcome. It is better than each agency working alone.

While all of the respondents thought that they would likely accomplish their goals, 11 gave these ratings with caveats. They were concerned about the periodic lack of leadership that they had experienced and the need for funds to support future leadership, time constraints, and agencies that might not follow the protocol because they chose not to, or were never involved in the project. A few comments follow.

I think probably the need for someone to take ownership of the lead of the protocol process and keep it before the member agencies. I think there needs to be some sort of funding for this. I don't think that any agency is going to pick this up independent of funding.

I would make it very likely, except for the time constraints. It is a lot to get done in one year, and I am not sure we will get it all done.

It takes a long time to change attitudes.

It is going to be key to get the right person in the coordinator position again.

Strategies worth recommending

Interviewers asked all participants if there were any strategies they used in implementing protocol that they felt were worth recommending to new sites working on the process. Twelve respondents mentioned the importance of keeping existing members committed and motivated, and five recommended building in future involvement for agencies so that the Cycle continues. Nine respondents each mentioned the importance of effective leadership (particularly from the site coordinator), and keeping in mind that the process needs constant refinement. Seven respondents recommended involving more agencies, six discussed the importance of effective staff training, and four cited the importance of doing outreach with diverse communities. Examples of each of these key recommendations are included below.

We need good coordination and commitment. It is not an entry level position. We need someone who is experienced. This is the key to the whole process.

The reason to keep people involved is that things are constantly changing, resources are changing, people are changing. Whenever you put something into place, it has to be refined constantly.

I guess just to not forget that it is out there and to keep fine tuning it, if need be. Just make sure that, for instance, maybe, if a higher minority population moves into the county, to get someone from that community involved in the process. To keep in mind that the victim is the reason we are keeping this going.

To have a participant from the Hispanic group. It would also be very helpful to have a representative from the judicial system. I think having a judge in our group would be very beneficial. Maybe something would change in the future in terms of the sentencing guidelines if we had a judge involved who could see all that goes into working with a victim, all that a victim goes through, and all the parts of the system that are involved.

I think it is real important that people follow through with the continued education and the refresher courses.

Survey participants made several other recommendations to other sites that take on the 8-Step Protocol Development Cycle. Three respondents each mentioned the importance of appropriate communication, appropriate agency staff representation on the team, and the need for community outreach. Two respondents each recommended moving faster through the process, being aware of control issues, and spreading the work out over time. One respondent each recommended keeping the process simple, securing multiple sources of funding, and having tangible results to show for the Council's work. A few of their comments follow.

To try to bring down the barriers. I think that is the biggest goal. To address and understand each person's role.

They could have a victim ON the council, someone who has gone through it and would be willing to be on the council to say what they think about how things could be done.

To let [the public] know that there really is something there to help them, because these are the people that will benefit from the protocol.

KEEP IT SIMPLE, therefore, making it user friendly. Then people will use it. We wanted to develop materials that were short, concise, to the point.

The political stuff – questions of where will the coordinator be, who will have the grant, who will be the supervisor, where else may the money come from – it is this political stuff that is going to kill it. For the SAIC's in general, they should be run out of the victim's services programs, which are usually either with the county attorneys, law enforcement, or corrections. It should be victim's services, because they are run from the same point of view. If the victim's services program are victim centered, they would be the logical place for the SAIC's to be.

Feedback from the Model Protocol advisory board members

The project administrators wanted to give Advisory Board members an opportunity to provide confidential feedback about their experience with the project. Wilder Research Center collected this information by conducting key informant interviews with all 17 Board members, as identified by the project administrators. All members were asked a series of 15 questions about their perceptions of the strengths and weaknesses of the project. Six of these survey participants were also test site coordinators and a few were representatives on the Test Site Councils. These participants were asked to complete two key informant interviews given their dual roles.

Respondents were asked about their participation in the process, their understanding of the 8-Step Model Protocol Development Cycle and its efficacy at producing results in the six test sites. Their comments were analyzed in the Atlas software package¹ and are presented below.

Timing of membership

The first question Wilder Research Center interviewers asked survey participants was when they joined the Model Protocol Advisory Board. Nine respondents said they began participating prior to March of 1997, near the time the project administrators established the Board. Two participants joined the Board in 1997. In 1998, two more members joined the committee. The remaining four Board members joined in 1999.

¹ ATLAS/ti is a powerful workbench for the qualitative analysis of large bodies of textual, graphical and audio data. It offers a variety of tools for accomplishing the tasks associated with any systematic approach to "soft" data, e.g., material which cannot be analyzed by formal, statistical approaches in meaningful ways.

ATLAS/ti. Version 4.2. [Computer software] (1999) Berlin, Scientific Software Development. Researchers use this tool to categorize qualitative data.

Level of participation

Next Wilder Research Center interviewers asked members to describe their level of participation; whether they attended all of the Advisory Board meetings and functions, most of them, some of them, only a few of them, or none of them. Only one member reported attending all meetings and functions. The majority of members (71%) reported attending most meetings and functions, and 24 percent said they attended some of them. Figure 1 presents these data.

1. Number of meetings advisory board member has attended

| | Number | Percent |
|--|--------|---------|
| All of the Advisory Board meetings and functions | 1 | 6% |
| Most of them | 12 | 71% |
| Some | 4 | 24% |
| Only a few of them | 0 | 0% |
| None of them | 0 | 0% |
| Total | 17 | 100% |

Reasons for involvement

Interviewers asked members of the Advisory Board why they accepted the invitation to join the Model Protocol Advisory Board, and what expectations they had when they joined. Eight responded that the Board's activities were work related, eight said that they joined the Board because of personal knowledge or interest in the field of sexual assault, and six said they were interested in improving the system's response to victims of sexual assault. Four respondents said that they joined because they were interested in helping the victims themselves, representing specific groups such as universities and county offices, or wanted to improve their personal effectiveness in working with clients who have been sexually assaulted. One respondent each said that they were interested in collaborating with other agencies, acquiring information for purposes of funding, representing the interests of child victims of sexual assault, and fulfilling a request to join the Advisory Board. Examples of the most common responses appear below.

To me, it was another way of working to get everyone on the same page....I felt that, if I was working on a larger scale with the Board, I might be able to use that with my work in my job. And I felt that I could use my experiences in my job to generate ideas on the Board.

I had been a participant in a test site and had become very interested in the project and bought into it at that point. When I changed jobs and became a part of the statewide coalition, it seemed a logical step to bring my varied experience to participation on the Board, to take it to that next level.

I was hearing all kinds of stories about women's experiences. From different counties, you have different processes for responding. My expectations were to be able to come up with something that would make sense across the Board. That there would be consistency statewide about how systems would respond.

Extent to which participation met expectations

Interviewers then asked respondents if their participation in this process as Advisory Board members met their expectations. Fourteen members indicated that their expectations had been met, while five revealed that they had not. When Wilder Research Center asked the latter group why participating did not meet their expectations, members provided four reasons. Two respondents said their dissatisfaction lay in their own sporadic participation, and did not cite reasons inherent in the structure or process of the Board itself. One of these respondents, however, did acknowledge that other members did not actively solicit the opinion of all representatives. Participants mentioned three other reasons for their dissatisfaction: job changes that precluded participation, the length of the Model Protocol process, and a lack of clarity regarding member roles; each of these responses appeared once. Examples of participant dissatisfaction follow.

I just don't feel that they really ask for university people's perspective very often. Maybe it is because some of the other elements are more verbal than I am.

Because it is still not clear to me what we are. I go to meetings. I listen to all the counties report in. We have put together our protocol for the state. But I am not sure what our role is as an advisory group. Is it to put together this statewide protocol? Is it to make sure we get more funding? I am not sure.

Benefits of participation

When Wilder Research Center probed to find out how participation in the process did meet interview participants' expectations, they responded in several ways. The most common response, expressed by seven members, was an appreciation of the other board members and the quality and productivity of their meetings. Two respondents each were particularly satisfied with how much they learned about the system and how to improve it. Three respondents mentioned the development of the statewide model protocol, and two respondents were pleased with the way that the project as a whole was run. One respondent each mentioned that their expectations had been met related to improvement in the response to sexual assault on an American Indian reservation and mileage and lodging reimbursement. Examples of these responses appear below.

I think the level of participation and commitment from all parts of the board was particularly rewarding.

It helped me to learn and understand how other entities work with victims.

They didn't just take the money and go through putting together something that would end up on a shelf. They went through all the steps and took the time to put out a product that could be used by everyone. It has enough flexibility that anyone anywhere will be able to work with it.

We were not only tapped for our individual knowledge, but we had to put it to work.

Helpfulness of Project Administrators

Wilder Research Center staff asked respondents if the project administrators were helpful to them in their role as an Advisory Board member. All 17 respondents answered affirmatively. Members provided Wilder Research Center staff with several explanations of how the project administrators were helpful. Nine members noted their ability to offer guidance and leadership to the Board, and eight members noted their thoroughness, knowledge, and insight. Five respondents said that the project administrators truly valued member input; five respondents also said they appreciated the administrators' accessibility and approachability. Between one and three members each mentioned that the administrators were friendly and helpful, effective communicators with the Board as well as with the test sites, and that they were dedicated and able to keep Board members involved. Examples of the most common responses appear below.

Because they are so passionate about this project and its benefits to victims, I believe they have been inspirational to me and to other members of the Board.

I think they have worked extremely hard to pull together a project that was a lot bigger than anyone had anticipated. I think they have been able to pass information along and guide the process in a way that has allowed us to share information and advice.

They are also such a wealth of knowledge on how this process is moving forward. They sort of "live it" and are always willing to share so much.

[Administrator] is very thorough. I have learned a lot by watching how she has gone about approaching a project, cutting it up into pieces and then fitting it back into the whole.

They were very open to giving guidance to what I could do, talking to me about the value of my input. They were always open to my point of view.

Perceptions of 8-Step Protocol Development Cycle

Interviewers asked Advisory Board members if they believed that the 8-Step Protocol Development Cycle being tested by the six project sites was a good method for counties to use in developing a more victim-centered response to sexual assault. Sixteen members said yes; one member said yes and no. When Wilder Research Center probed the latter about what made it a bad process the member said that, while the process was comprehensive, it was also too cumbersome. This response appears below.

I think it is too cumbersome in some of the steps and could be more streamlined. Certainly it is producing a good product, but I hope it will become more streamlined and more manageable.

Interviewers asked the other respondents what made the Cycle a good process. Twelve members spoke of the interdisciplinary communication and collaboration, as well as the trust this interaction fosters, as benefits of the Cycle. Nine respondents pointed out that it was a comprehensive systematic process that serves as an excellent guide, five mentioned that the process is victim-centered, and three members cited the ability of the Cycle to fit all communities' needs. Examples of responses follow.

This process really requires that people learn about each other's roles, that people look at how each supports the others in the entire process. In the past, individuals didn't often take time to learn about how the other disciplines functioned and why. This process creates a place where some good negotiating can happen and some good coordinating can start.

The step-by-step approach, it is organized and planned as far as what you have to do. You don't have to reinvent the wheel. It is there for you. You just have to follow the steps.

Finally, I think the protocol helps everyone to realize how important it is to center the victim in the process, for instance, providing open forums and follow-up interviews, which educate the system on how to develop protocols that focus on the victim that professionals can learn from to make adjustments.

Adequacy of efforts to inform Board Members of site activities

Next, interviewers asked members if they felt that they had been well informed about each test site's activities. Fifteen members said yes; two members were ambivalent. The former offered a number of comments about what worked best to keep them informed. Fourteen members said the site-specific updates and reports at Board meetings were useful. Three members said that the written reports were informative; and three members mentioned mailings between meetings. One or two board members cited the following methods of effective communication: individual Test Site or Board meeting attendance, the Model Protocol: Test Site Project website, and email. The following comments illustrate the effectiveness of the reports at Board meetings, as well as the written reports.

I think having the site coordinators and other representatives from the sites at the Board meetings has helped. We also get information in other ways. I, myself, get information through many means, but I think that the biggest help to most other Board members is through having the coordinators and representatives reporting on progress at the Board meetings.

The next most helpful way has been to have written reports from sites that didn't have anyone there at a particular meeting.

The two members who answered both yes and no suggested different ways to keep members updated on the test sites' progress. One requested more written reports; the other said written reports were insufficient. One of these comments appears below.

I think it is something that could be improved. From what I have learned about how the test sites are going, I think it hasn't always gone well. Maybe if we could be more regular in getting maybe written reports from the sites about how things have gone over the last month.

Cultural competence

Next, Wilder Research Center staff asked Advisory Board members if they believed the issue of the system's response to culturally diverse populations was adequately addressed by the sites. Seven members said yes and four members said no, while four members' responses included both yes and no responses; two said they did not know. Interviewers followed up the yes responses by asking how the Sexual Assault Inter-Agency Councils demonstrated a commitment to diverse populations. Six respondents felt that some sites did a better job of addressing the issue of cultural competency than others because of their demographic composition, or their commitment to focus on this issue. Three members voiced appreciation of the input the Councils received from minorities through Council representation and focus groups. One or two members were impressed with the amount of time the Councils devoted to diversity at meetings, and the written protocol about diversity. Three examples of these responses follow.

They were extremely conscientious about working to reflect a culturally diverse representation. It has been one of the major things discussed for at least half of the meetings I went to. They spent a lot of time and energy getting a reservation involved, for example.

I think they have just gone out of their way to include members of every group. They have looked for representative members of culturally diverse groups to sit on the councils. They have gone out of their ways to do that - which is good, which I like.

Perhaps not met in all the agencies, but the efforts are underway to do so by engaging in dialogues.

Wilder Research Center asked the members who believed the issue of the system's response to culturally diverse populations was not adequately addressed by the sites for recommendations on how to improve. Four respondents suggested an increase in minority representation on the Councils; one respondent suggested increased community accessibility through informational meetings, and one suggested greater outreach in rural areas. Their comments follow.

Many of the sites... did not have a good representation of communities of color on their group. Many said it was because they didn't have many people of color. I personally feel it is more that they didn't look. In some cases the advisory board forced the issue on local sites to be more inclusive on how they were putting their protocol together

You need to be more accessible to the groups and key people at the test sites. Holding informational meetings in those communities would be helpful.

I think it could be integrated more into areas where they are not paying that much attention to it, particularly the non-Metro

Three respondents mentioned that, although a significant amount of effort was made to address these issues, the immensity of the task precluded some of the sites' ability to address cultural competency sufficiently. Examples of these responses follow.

I think they are trying, but it is nearly impossible. You can address in the protocol that cultural sensitivity needs to be in place, but because of the great diversity, you cannot write into everything all the details of what needs to be done relative to each culture in each issue.... As a whole the protocol is doing what it is supposed to do. The protocol can look at the overall big picture, acknowledging the fact that cultural competency needs to be addressed, but it can't get into the details of what needs to be done in each area and how it needs to be accomplished.

I don't think it was a lack of effort. I just think the task is so great, as it relates to those issues that I don't think anyone got to them at the level they had hoped to.

Interviewers next asked Board members if the project administrators adequately addressed the issue of the system's response to culturally diverse populations. Fifteen members responded affirmatively, one member expressed ambivalence, and one member said no. When staff asked what strategies were particularly helpful, several items emerged. Seven members referred to the project administrators' commitment to outreach and networking with communities of color. Four pointed out the importance of the project administrators' persistent attention to the need for cultural competency to address gaps in services, and three said that the administrators did what they could to address cultural competency. Two respondents each mentioned the diversity of the Board, and

the project administrators' helpful dissemination of information through workshops and the web. Examples of these responses follow.

From what I have seen, the strategy of persistence. I think it took a long time to get a reservation site, taking long work on the part of and Native American representatives on the board.

They were very diligent to be sure they had a right mix. As far as the Indian reservation, I know they talked to a large number of groups to be sure they were talking to all the right people to get the project implemented on the reservation. I know they worked with members of the tribe to have those individual members approach the tribal groups, rather than the project administrators themselves approaching them from outside the tribe. In [the urban site], they used groups that were already working with diverse populations to work with them to assist in developing and implementing the protocol, rather than starting from scratch.

The acknowledgment that there are gaps in the system. [The project administrators] have pushed for the different components to see that there are gaps and things yet to be accomplished. They have done what could be accomplished in a sensitive way.

The respondents who said the project administrators had not adequately addressed the issue of the system's response to culturally diverse populations recommended areas of potential improvement. Both respondents pointed out a need for more diversity on the Board or the individual Councils. One suggested the need for greater community involvement. The following two quotes illustrate these suggestions.

It is not their fault. Maybe they could have put more effort into looking at the fact that there was such low participation by people of color and what they could do to boost that.

Maybe more concerted efforts to talk with key people in communities, seeking ways to get more information to and involvement from those communities. I think they would have done more.

Key accomplishments

Next, the interviewers asked participants for the two greatest accomplishments of the project so far. Fourteen of 17 members felt that the sites and the project's completion of usable, written protocols were significant accomplishments. Seven participants highlighted the interdisciplinary communication that resulted from the process, while five referred to the sustained interest of members in the project. Three participants each cited the development of diverse test sites and the possibility that the success of and publicity about the project will lead to its expansion. Finally, two respondents cited the dedication of the project administrators and one respondent felt that people's understanding of cultural competency had improved. Several examples of common themes follow.

The development of the actual document – that was an outstanding accomplishment.

In the advisory group itself, they have brought together a very diverse group – diverse in the specialists and their knowledge at the table, the different communities at the table, and the different groups (advocates, law enforcement, legal, medical) at the table.

Getting the disciplines talking to each other. That's huge! Investigating officers, responding officers, lawyers, etc. That is an area that is so territorial.

They were able to get so many test sites involved, could generate the funding, etc, that was needed, and could get an actual protocol written.

The notoriety that we have received through our contacts. This wasn't developed in a vacuum. It was developed across the state. The amount of people in this field who have been in contact and been involved.

Major difficulties

Wilder Research Center interviewers asked participants to describe the two greatest difficulties the sites faced so far. Members' descriptions of site difficulties varies, with only a few emerging notable issues. The problem identified by most Advisory Board Members (n=7) was staff turnover. Four respondents thought that implementing the protocol was or would be a challenge, and three respondents each mentioned funding, sustaining member interest, the lack of cooperation or commitment of some council members, and the challenge of organizing and marketing the process so that it can be implemented statewide. One or two respondents each described the following challenges, insufficient involvement of minority participants, unclear understanding of agency roles and responsibilities, and the time allotted to accomplish tasks like the victim experience survey and community needs assessment. Several of their comments follow.

The greatest difficulty, bar none, is maintaining a site coordinator, who is the heart and soul of the project.

I think one is how you maintain momentum in the group, when the tasks can be long and involved. Some folks want to see things move more quickly. Some systems want to see some decisions and action more quickly. How you maintain commitment and buy-in is challenging.

I know for some people it was working with such a tight budget. They could only spend what the protocol had to offer, and, for some of them, that was very difficult.

Integrating the protocol into the operational culture of the partner agencies.

I think the victim experience surveys were incredibly difficult, and also the communities' needs assessments. I think we need to figure out better ways to do this.

Expected outcomes

Interviewers then asked members what specific outcomes they expected to see because of this work. Ten members expected to see the project expand to include more communities statewide, and perhaps nationwide. Some of them mentioned that continued funding and technical support would be needed to make this a reality. Six members expected to see the test site communities implement more respectful, victim-centered responses to sexual assault, and six expected the response to be more unified and consistent, because systems professionals will be trained in how to follow the protocol. Finally, two respondents expected to see an increase in sexual assault reporting. Examples of these responses follow.

How big can my vision get? I would say that everybody on the Board would hope every community would work to develop a protocol. Realistically, we hope every community will know about it and will use every community that has developed a protocol as a resource.

I would hope, if the protocols are followed, that victims will no longer feel they are being victimized, re-victimized by the system. I am hoping that by the protocol being in place, those feelings will no longer exist. That people will feel they are being heard and believed.

Definitely a more victim-centered legal process; justice, in one word. And for more victims to come forward with expectations of being respected and being believed. That victims wouldn't hesitate to report their own victimization with the assurance that the crime committed on them be taken seriously, and that they would be included in the legal process.

I expect to see a unified approach to sexual assault in *investigation* and prosecution.

How protocols will improve community response to sexual assault

Wilder interviewers asked Board members how they expected the Model Protocol under development to be a part of improving communities' response to sexual assault. Six members noted the importance of a team response, while five stressed the importance of a framework for critique of the current system. Seven members expected that communities would benefit from having a more victim-centered system of justice. They thought that victims would not be re-victimized, but rather would be treated with respect. Three respondents felt that this might lead to increased reporting, two thought that the community would become more aware that sexual assault is a crime and one thought that it would result in better prosecution rates. Six respondents also felt that the community

professionals would benefit from the unified team response, and another six felt that the protocol development cycle would continue to improve the system because it creates a forum for discussing system-wide improvements. Several examples of member comments follow.

There is the bringing to the table of all the players to start the discussion of all the issues. The importance of all this is to get that seamless system so all people get to know each other and what is expected, what is available, what each other does. That way the finger-pointing goes down as the knowledge goes up.

If communities develop the protocol, or something close to it, they will have victim-centered justice, which means that sexual assault will be investigated more vigorously and will be prosecuted more arduously.

[The victims] will get the care and healing that they need without the intimidation and fear that they experience in coming forward to deal with the system the way it has been.

I think the experience will serve as encouragement for communities to take a look at how they function and how they can do it better. I think we will ultimately have victim experience to support the difference that this makes. I think if we can show with experience that things will work better for both the system and the victims, communities will be encouraged to use it.

Suggestions for overcoming future barriers

Wilder Research Center staff then asked participants for suggestions for ways that a future project administrator could avoid or overcome the barriers that the current administrators faced. Although three members had no suggestions, and two claimed they did not know what the barriers were, the other 12 participants voiced several ideas. Four members emphasized the need for funding and resources, and three stressed the need for awareness of the time commitment. Four felt that it was important for current administrators to share information with a future administrator by creating a central location for resources and technical assistance and facilitating interaction between different test site coordinators. One respondent each made the following suggestions: encourage buy-in from each discipline by describing the advantages to being involved in the process, remain neutral in test site politics, recruit members with firsthand knowledge of direct services, and be as committed as the project coordinators who started it. Examples of their comments follow.

The problems they have are the restrictions that were placed on them by the funding.

I think the trickiest roles they had were to work so closely with the sites without putting themselves into the politics of the individual sites. I feel that they did that well, but I don't know how they might see that themselves. That probably is a tricky spot in this work. I think they had multi-faceted roles to play.

Maybe some way of getting the test site coordinators together to kind of bounce off of each other, to support each other, so they might learn more from each other as the process is going along.... They could have done some problem solving among themselves just between the different counties.

Continued funding and resources, statewide support on all levels, and assistance for specific "buy in" for each discipline, stressing what the advantage is for each respective discipline. It is recognized that "buy in" will be difficult if it is viewed to be totally directed by victim advocacy, which is why it has been important to have multi- disciplinary participation.

Other comments

The last question interviewers asked participants was what other comments they had about the project or the people involved in the project. Five members made no additional comments, but six applauded the project administrators for their efforts. Five members expressed appreciation of the dedication, good humor, and hard work demonstrated by Board members and two called the process a "great opportunity." One member felt that the process was a great start, while two others expressed amazement with the maturation and growth of the project, and the amount of work completed in a very short period of time. Several examples of comments appear below.

Just that I think people worked really hard, from [the project administrators] to the advisory council and the local councils. This is one project I have been involved in where people stuck to it with a lot of consistency in the project.

I think they made an excellent effort in making the meetings and the work as pleasant an experience as they could. The places we met, the humor that was used when things got frustrating. I appreciated that a lot of the people on the Advisory Board felt comfortable with each other quite quickly, which made it okay to discuss issues which often have endings ranging from discouraging to devastating.

It was a lot of work. I can't believe the amount of work that went into this pilot project. They are to be commended for what they accomplished in a really short time. I was amazed by it.

Feedback from project administrators

Wilder Research Center interviewers conducted semi-structured interviews with the two project administrators who have been involved in the Model Protocol Test Site Project since its inception. The administrators were generally asked to base their responses on their knowledge of all six sites that are committed to the project. We do not identify individual sites in this analysis, but pull themes out of their comments that should help to illustrate successful administrative strategies as well as administrative challenges.

Interviewers first asked the Project administrators how comfortable they have been with the composition and commitment of the Councils or Teams, particularly in terms of the four core agency types (law enforcement, prosecution, advocacy, and medical). The project administrators felt that each of the sites had some representatives who are very committed and that representation is good in general. However, the respondents also mentioned that representation from each of the core agencies has been problematic at one or more of the six sites due to members lack of commitment, or political issues within the agency itself that might make participation from their representative difficult, in spite of the representative's commitment to the Project. One of the coordinators felt that it was important to have one of the core agencies act as the fiscal agent. This representative also pointed out that the Council or Team members have been supportive of the project as whole by participating in a video that will be used to inform other communities about the Project.

Interviewers asked the administrators how valuable the participation has been from non-core agencies, for example representatives of universities, cultural organizations or corrections. One administrator felt that the benefits varied from site to site, depending on the skills of the representative, and the perspective that the agency brings to the process as a whole. One respondent felt that it was positive because it provides the team with a more holistic perspective of the sexual assault response system, which can only be a benefit to victims who access that system.

Interviewers asked the administrators about the strengths and weaknesses of the Site Coordinators. The administrators reported being impressed by the coordinators' commitment to the process and to inter-agency cooperation, their flexibility and ability to work with many different personality types, and their good senses of humor. They pointed out that coordinators act as problem solvers and that it is important to have a support network for coordinators to turn to when they feel overwhelmed by a problem. The administrators felt that the coordinator position was very challenging because the position was new and the skills required to do the job were not well defined. They felt that one of the most challenging parts of being a coordinator is balancing the leadership

skills needed to guide the Team or Council through the process and addressing challenges such as political conflicts, without being too controlling.

Next interviewers asked the project administrators about the barriers they faced in past year, and how they dealt with them from an administrative perspective. Both administrators brought up the issue of time, and the problem of being stretched too thin. During the past year they were expected to handle the administrative duties required to support six different sites dispersed throughout Minnesota, and publish a guide book to help new sites work through the Model Protocol Development Cycle. They both felt that their workload put them in a more reactive than proactive position for providing support. They worked hard to keep the feedback loops open through telephone conferences and calls, bi-monthly rather than monthly coordinator meetings and a reduction in the number of site visits.

Interviewers asked the project administrators whether or not they thought that the sites had adequately addressed the issue of cultural competency. The administrators felt that success varied from site to site, often because of the grant mandate. Two of the six sites have culturally specific focuses, one urban site is expected to focus on communities of color and other undeserved communities as they work through the Protocol Development Cycle and another reservation-based site explicitly addresses the needs of American Indian victims. Sites representing smaller, less diverse communities, have found it more difficult to address the needs of diverse communities, particularly when they struggle with other challenges related to task accomplishment and coordinator turnover. However, these sites are aware of their weaknesses and plan to do more to address them.

Interviewers asked the Project Administrators what they felt were the most positive changes to the system or individual agencies based on the work of the original three Councils during the past year. They were most impressed with the sites' ability to put together good training curricula and implement training in a limited amount of time. Two sites in particular faced a fair amount of staff turnover including the loss of their coordinators. With the help of committed team members and a new coordinator, the Councils made a tremendous effort to complete the trainings during the 1999-2000 funding cycle. In addition, the administrators pointed to examples of increased inter-agency trust and collaboration. Two of their comments follow.

People did step forward to pull it [the training] off when they found the leadership of the coordinator lacking.

We have seen...an advocacy agency and law enforcement come together to share space.

Interviewers asked the administrators if they thought the Test Site Advisory Board had been helpful. They both said that they had. They were grateful for their support, insight in general and from reviewing documents, and the commitment they have shown to the Project by continuing to show up and be involved in helping the Project. One of their comments follows.

I think the advisory board has been like a seventh site representing both core agencies and other agencies.

Finally, interviewers asked the Project Administrators what lessons they learned in the past year that would be important to pass on to other sites that become involved in the process. They came up with several specific lessons including the following:

The process takes time; people committing to it should expect this.

Having a structured 8-Step Protocol Development Cycle is important because it provides those involved with a guide to working together and concrete accomplishments to which a multi-disciplinary team has agreed.

Councils need the support and leadership of a full-time coordinator and an external agency that can give advice and support to the teams and their coordinators.

Outcome data

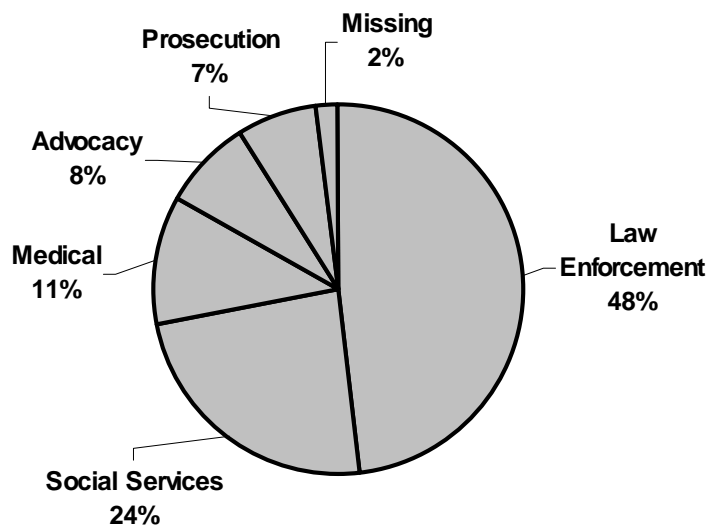
Wilder Research Center and the Sexual Assault Inter-Agency Council team members conducted a self-administered survey to assess what kind of an effect the training and initial implementation of the protocol has had on the knowledge and attitudes of agency staff. The surveys were distributed to all staff who might have contact with victims of sexual assault. These are the same staff expected to attend the protocol training sessions. All three sites distributed these surveys at the end of the second fiscal year, prior to training. However, Winona County was the only site to collect an adequate number of pre-surveys at that time to warrant a pre-post analysis. Unfortunately, the surveys that Winona collected for post-implementation analysis were destroyed by severe water damage to the Winona County Courthouse, where they were temporarily stored. Carver County's Sexual Assault Inter-Agency Council decided to re-implement the pre-test prior to their training sessions, the analysis of this data follows.

Baseline results from Carver County

Carver County's Sexual Assault Inter-Agency Council achieved a high response rate in their second attempt at gauging agency staff attitudes prior to protocol implementation. The questionnaire was distributed to 99 staff members who were not on the Sexual

Assault Inter-Agency Council.² Eighty-eight respondents completed the questionnaire, for a response rate of 89 percent. Just under half of the respondents are representatives of law enforcement (48%), including the Sheriff's Department (71%), the Chaska Police Department (26%), and, for the purposes of this report Carver County Corrections (2%) has been included in the law enforcement category. Medical staff from Ridgeview and St. Francis Medical Centers represented 11 percent of the sample, and staff from social service agencies represented 24 percent of the group. The latter group included respondents from Carver County Social Services (n=8), the Community Health Services (n=7) and Mental Health (n=6). Eight percent of the group (n=7) were advocates and 7 percent (n=6) work for the prosecutor's office. Two respondents did not identify the agency for which they work.

2. Agency affiliation



² One Sexual Assault Inter-Agency Council member completed the survey, but this survey was removed.

Figure 3 presents the distribution of the respondents' demographic characteristics by agency type and in aggregate. Percentages have been included for those agency types that have fewer than ten respondents. This can be misleading as a relatively small number of respondents can account for a large percentage.

About half of the respondents are female (53%), although most of them come from agencies other than law enforcement. Only two respondents from advocacy and law enforcement identified themselves as representatives of communities of color.

Respondents ages as of May 31, 2000 ranged from 24 to 57, with both a mean and median age of 39. However, about one-third (32%) of respondents did not include their date of birth.

3. Respondents characteristics

| | Agency type | | | | | | | | | | | |
|------------------|-------------|------|---------|------|-------------|------|-----------------|------|-----------------|------|-------|------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| Gender | | | | | | | | | | | | |
| Male | 1 | 25% | - | - | 2 | 40% | - | - | 30 | 94% | 33 | 47% |
| Female | 3 | 75% | 9 | 100% | 3 | 60% | 20 | 100% | 2 | 6% | 37 | 53% |
| Total | 4 | 100% | 9 | 100% | 5 | 100% | 20 | 100% | 32 | 100% | 70 | 100% |
| Race | | | | | | | | | | | | |
| Caucasian | 6 | 86% | 10 | 100% | 5 | 100% | 20 | 100% | 34 | 97% | 75 | 97% |
| African American | 1 | 14% | - | - | - | - | - | - | - | - | 1 | 1% |
| Other | - | - | - | - | - | - | - | - | 1 | 3% | 1 | 1% |
| Total | 7 | 100% | 10 | 100% | 5 | 100% | 20 | 100% | 35 | 100% | 77 | 100% |
| Age | | | | | | | | | | | | |
| Under 30 | - | - | - | - | 1 | 20% | 6 | 43% | 7 | 27% | 14 | 23% |
| 30 to 40 | 2 | 29% | 3 | 38% | 2 | 40% | 3 | 21% | 7 | 27% | 17 | 28% |
| 40 to 50 | 3 | 43% | 3 | 38% | 2 | 40% | 2 | 14% | 10 | 38% | 20 | 33% |
| 50 or older | 2 | 29% | 2 | 25% | - | - | 3 | 21% | 2 | 8% | 9 | 15% |
| Total | 7 | 100% | 8 | 100% | 5 | 100% | 14 | 100% | 26 | 100% | 60 | 100% |

Figure 4 presents the respondents' professional characteristics. About one-quarter of the respondents have worked for the agency they represent for one year or less (23%), slightly more have been at their agency for 1 to 5 years (27%), just under one-fifth have been at their agency for 5 to 10 years, and about one-third (32%) have worked for their agency for over 10 years. Representatives of law enforcement had the longest tenures at their agencies, with 43 percent reporting having worked at their agency for over 10 years and an average tenure of 9.6 years, followed by medical professionals who worked at their agencies for an average of 9.1 years. Respondents from advocacy and prosecution had the shortest agency tenures with average tenures of 3.1 and 4.1 respectively. Over half (57%) of the advocates had been in their position for less than one year. Social service staff had worked for their agency for 5.7 years, on average.

Respondents were also asked how many cases of sexual assault they had personally worked on in the past two years that involved a victim who was 14 years of age or older. A majority of respondents from all of the agencies had worked on one or more sexual assault cases in the past two years. Advocates reported being involved in the most cases, which is logical considering their job is to help victims of sexual assault. Thirty percent of the medical staff and a slightly lower proportion of law enforcement personnel (29%) did not work on any cases of sexual assault in the past two years. Staff from the Sheriff's department were more likely to have never worked on a sexual assault case than police staff. Social services staff were most likely to have only worked on one to two sexual assault cases in the last two years (40%).

4. Professional characteristics

| | Agency type | | | | | | | | | | | |
|---------------------------------------|-------------|-------------|-----------|-------------|-------------|-------------|-----------------|-------------|-----------------|-------------|-----------|-------------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| # years in job | | | | | | | | | | | | |
| 1 or less | 4 | 57% | 2 | 22% | 1 | 20% | 7 | 33% | 5 | 12% | 19 | 23% |
| 1 to 5 | 1 | 14% | 2 | 22% | 3 | 60% | 7 | 33% | 10 | 24% | 23 | 27% |
| 5 to 10 | 1 | 14% | 1 | 11% | - | - | 4 | 19% | 9 | 21% | 15 | 18% |
| Over 10 | 1 | 14% | 4 | 44% | 1 | 20% | 3 | 14% | 18 | 43% | 27 | 32% |
| Total | 7 | 100% | 9 | 100% | 5 | 100% | 21 | 100% | 42 | 100% | 84 | 100% |
| # cases handled in last 2 yrs. | | | | | | | | | | | | |
| 0 | 1 | 14% | 3 | 30% | - | - | 2 | 10% | 12 | 29% | 18 | 21% |
| 1-2 | - | - | 3 | 30% | 2 | 33% | 8 | 40% | 13 | 32% | 26 | 31% |
| 3-5 | 1 | 14% | 3 | 30% | 2 | 33% | 5 | 25% | 9 | 22% | 20 | 24% |
| 6-10 | 1 | 14% | 1 | 10% | 1 | 17% | 2 | 10% | 5 | 12% | 10 | 12% |
| 11-20 | 2 | 29% | - | - | 1 | 17% | 1 | 5% | - | - | 4 | 5% |
| More than 20 | 2 | 29% | - | - | - | - | 2 | 10% | 2 | 5% | 6 | 7% |
| Total | 7 | 100% | 10 | 100% | 6 | 100% | 20 | 100% | 41 | 100% | 84 | 100% |

Staff awareness of sexual assault protocol team

To assess agency staff's awareness of the Sexual Assault Inter-Agency Council and their activities, they were asked what they knew or had heard about the decision to develop a Sexual Assault Inter-Agency Council, if they had any formal or informal input into the process, and if so, what kind. Respondents' agency affiliation appears to influence their awareness of the Council. Staff from law enforcement are least likely to know about the Council with three-quarters (76%) reporting that they know little or nothing about the Council. Half of the respondents from advocacy report that they knew little or nothing about the Council followed by social service staff (44%), medical staff (25%) and finally prosecution (17%). Twenty-eight percent of all respondents reported that they had heard about the Council and its work in general, but did not provide specific information. Five percent of all respondents report that they heard about the Council from a co-worker, 7

percent offered some description of the process or its intent, and 4 percent reported hearing about the Council in a training or being updated about the Council regularly by an unidentified person.

The number of staff that each of these agencies has probably contributes to respondents' levels of awareness of the council. People who are co-located in smaller offices with only a few staff are more likely to be aware of a co-worker's involvement in this process. Agencies with more staff, volunteer staff, and staff who are not located in a central office are less likely to have conversations with their Sexual Assault Inter-Agency Council representative.

5. Awareness of Sexual Assault Inter-Agency Council

| | Agency type | | | | | | | | | | | |
|---------------------------|-------------|-------------|----------|-------------|-------------|-------------|-----------------|-------------|-----------------|-------------|-----------|-------------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| Nothing, not much | 2 | 50% | 2 | 25% | 1 | 17% | 8 | 44% | 28 | 76% | 41 | 56% |
| Heard about it in general | - | - | 4 | 50% | 3 | 50% | 7 | 39% | 7 | 19% | 21 | 29% |
| Co-worker involved | 1 | 25% | - | - | 1 | 17% | 2 | 11% | 1 | 3% | 5 | 7% |
| Specifics about process | - | - | 2 | 25% | - | - | 1 | 6% | 1 | 3% | 4 | 5% |
| Other | 1 | 25% | - | - | 1 | 17% | - | - | - | - | 2 | 3% |
| Total | 4 | 100% | 8 | 100% | 6 | 100% | 18 | 100% | 37 | 100% | 73 | 100% |

Wilder Research Center was interested in determining what measures the Sexual Assault Inter-Agency Council members had taken to gather input from staff about the process. Respondents were asked whether or not they had provided any formal or informal input into the process. Respondents were also asked to describe the input they had provided. A vast majority of law enforcement (95%) and medical (90%) representatives report that they have had no formal or informal input in the process. These results are displayed in Figure 6. Respondents from prosecution had provided the most input (83%) followed by social services (45%) and advocacy (29%).

6. Staff feedback on 8-step process

| | Agency type | | | | | | | | | | | |
|------------------|-------------|------|---------|------|-------------|------|-----------------|------|-----------------|------|-------|------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| Had input | 2 | 29% | 1 | 10% | 5 | 83% | 9 | 45% | 2 | 5% | 19 | 23% |
| No input | 5 | 71% | 9 | 90% | 1 | 17% | 11 | 55% | 39 | 95% | 65 | 77% |
| Total | 7 | 100% | 10 | 100% | 6 | 100% | 20 | 100% | 41 | 100% | 84 | 100% |

Figure 7 presents the types of input that respondents provided. One-third of those who reported providing input did so through a focus group, and by completing a questionnaire. Over a quarter (27%) had informal contact with a Sexual Assault Inter-Agency Council member, 13 percent discussed the process at a staff meeting and one person reported simply that he or she was involved in the process.

7. Type of input

| | Total | |
|--|-------|-------|
| | N | P* |
| Respondent participated in a focus group related to the process | 5 | 33% |
| Respondent completed this questionnaire and/or a previous questionnaire | 5 | 33% |
| Respondent had informal contact with SAIC member about process | 4 | 27% |
| Respondent discussed the process at a staff meeting | 2 | 13% |
| Respondent involved with SAIC unspecified | 1 | 7% |
| Total | 15 | 113%* |

* Total adds to greater than 100% because multiple responses were accepted.

To get an understanding of who respondents believed to be involved in the process, Wilder Research Center asked respondents to list the agencies they believed to be on the Sexual Assault Inter-Agency Council. Respondents were most likely to list law enforcement agencies (84%), including the Sheriff's Department, Police Department, law enforcement in general, and corrections. Respondents were next most likely to mention social services (72%), then advocacy (71%), medical (64%) and prosecution (53%). A few respondents mentioned court services (9%), and other agencies (7%) including the University, Community Action Programs, women's groups, and private citizens.

Members of most agency types were more likely to list themselves as being involved in the process than any other agencies with the exception of prosecution. All of the representatives from prosecution were aware of the involvement of law enforcement, social services and advocacy, and five of the six representatives mentioned their own involvement and the involvement of medical providers. Oddly enough, respondents from advocacy and social services were least aware of prosecutions involvement in the process and only three of the eight medical respondents listed prosecution, although only two of the prosecution staff listed medical staff.

8. Knowledge of Sexual Assault Inter-Agency Council Composition

| | Agency type | | | | | | | | | | | |
|---------------------|-------------|-------------|----------|-------------|-------------|-------------|-----------------|-------------|-----------------|-------------|-----------|-------------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| Law Enforcement | 1 | 33% | 2 | 25% | 3 | 50% | 9 | 53% | 5 | 21% | 20 | 34% |
| Police | 3 | 100% | 2 | 25% | 3 | 50% | 4 | 24% | 9 | 38% | 21 | 36% |
| Sheriff | 2 | 67% | 2 | 25% | 3 | 50% | 7 | 41% | 18 | 75% | 32 | 55% |
| Corrections | - | - | 1 | 13% | - | - | - | - | - | - | 1 | 2% |
| Any law enforcement | 3 | 100% | 5 | 63% | 6 | 100% | 13 | 76% | 22 | 92% | 49 | 84% |
| Social Services | 2 | 67% | 2 | 25% | 5 | 83% | 16 | 94% | 15 | 63% | 40 | 69% |
| Public Health | 1 | 33% | 1 | 13% | 1 | 17% | 5 | 29% | 1 | 4% | 9 | 16% |
| Mental Health | 1 | 33% | 1 | 13% | - | - | 6 | 35% | 2 | 8% | 10 | 17% |
| Any social service | 2 | 67% | 2 | 25% | 6 | 100% | 16 | 94% | 16 | 67% | 42 | 72% |
| Advocacy | 3 | 100% | 5 | 63% | 6 | 100% | 14 | 82% | 13 | 54% | 41 | 71% |
| Medical | 3 | 100% | 6 | 75% | 5 | 83% | 11 | 65% | 12 | 50% | 37 | 64% |
| Prosecution | 1 | 33% | 3 | 38% | 5 | 83% | 7 | 41% | 15 | 63% | 31 | 53% |
| Court Services | - | - | - | - | - | - | 3 | 18% | 2 | 8% | 5 | 9% |
| Other | - | - | - | - | 2 | 33% | 1 | 6% | 1 | 4% | 4 | 7% |
| Total | 3 | 567% | 8 | 313% | 6 | 550% | 17 | 488% | 24 | 388% | 58 | 433% |

Flexibility and efficacy of existing system

Wilder Research Center asked respondents several questions about their agency and the system as a whole to understand how responsive the system is to victims and how flexible their agency is to change. Figure 9 presents the distribution of their responses to the following two questions:

- How flexible do you think your agency would be to changing existing policies or procedures related to sexual assault.
- How likely is it that your agency encourages a victim of sexual assault to have input into the decision-making process about their case as it goes through your part of the system?

Respondents were asked to choose a rating from a 4-point scale where 1=very inflexible or very unlikely, 2=somewhat inflexible or somewhat unlikely, 3=somewhat flexible or somewhat likely, and 4=very flexible or very likely. Most respondents (72%) report that their agency would be somewhat flexible about changing existing policies, and 21 percent report that their agency would be very flexible. Respondents from prosecution were the most conservative about their agency's flexibility.

Advocates and social service staff were the most likely to report that they would involve the victim in the decision-making process as their case goes through the system. A majority of the respondents representing each of the agencies report that their agency is somewhat or very likely to include victims in the decision-making process.

9. Respondent's perceptions of system

| | Agency type | | | | | | | | | | | |
|---------------------|-------------|-------------|-----------|-------------|-------------|-------------|-----------------|-------------|-----------------|-------------|-----------|-------------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| Very flexible | 2 | 29% | 5 | 50% | - | - | 3 | 14% | 8 | 20% | 18 | 21% |
| Somewhat flexible | 5 | 71% | 5 | 50% | 4 | 67% | 17 | 81% | 30 | 73% | 61 | 72% |
| Somewhat inflexible | - | - | - | - | 2 | 33% | 1 | 5% | 1 | 2% | 4 | 5% |
| Very inflexible | - | - | - | - | - | - | - | - | 2 | 5% | 2 | 2% |
| Total | 7 | 100% | 10 | 100% | 6 | 100% | 21 | 100% | 41 | 100% | 85 | 100% |
| Very likely | 5 | 83% | 2 | 20% | 5 | 83% | 4 | 19% | 20 | 49% | 36 | 43% |
| Somewhat likely | 1 | 17% | 5 | 50% | 1 | 17% | 14 | 67% | 15 | 37% | 36 | 43% |
| Somewhat unlikely | - | - | 3 | 30% | - | - | 3 | 14% | 5 | 12% | 11 | 13% |
| Very unlikely | - | - | - | - | - | - | - | - | 1 | 2% | 1 | 1% |
| Total | 6 | 100% | 10 | 100% | 6 | 100% | 21 | 100% | 41 | 100% | 84 | 100% |

Wilder Research Center asked respondents the following two questions related to the system's effectiveness and flexibility:

- How well do you believe the system meets the needs of victims of sexual assault?
- How likely do you believe it is that professionals from the fields of law enforcement, prosecution, medicine and advocacy would agree to and implement changes in the way their agencies respond to incidences of sexual assault?

Respondents were again asked to choose a rating from a 4-point scale where 1=very unlikely or meets few needs, 2=somewhat unlikely meets some needs, 3=somewhat likely or meets most needs, and 4=very likely or meets all needs. Most respondents (74%) report that the four core agency types would be somewhat flexible about changing existing policies, and 15 percent report that these agencies would be very flexible. Respondents from prosecution were the most positive about the system's flexibility.

A majority of these respondents (62%) perceive that the system meets most (55%) or all (7%) of victim's needs. However, a large proportion of respondents felt that the system meets some (35%) or none (2%) of the victims' needs. Respondents for the social services, prosecution and medical were most critical of the system. It is encouraging that these respondents are critical of the system, as they are more likely to believe that change is warranted.

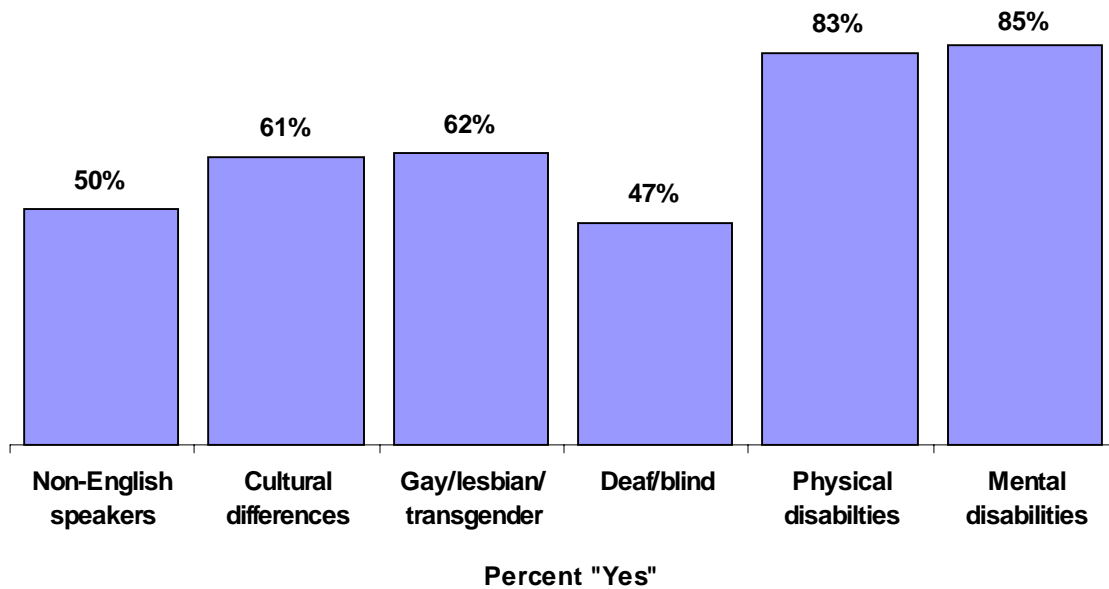
10. System issues

| | Agency type | | | | | | | | | | | |
|-------------------|-------------|-------------|-----------|-------------|-------------|-------------|-----------------|-------------|-----------------|-------------|-----------|-------------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| Meets all needs | 1 | 14% | - | - | - | - | - | - | 5 | 13% | 6 | 7% |
| Meets most needs | 4 | 57% | 5 | 50% | 2 | 33% | 6 | 30% | 28 | 72% | 45 | 55% |
| Meets some needs | 1 | 14% | 5 | 50% | 4 | 67% | 14 | 70% | 5 | 13% | 29 | 35% |
| Meets few needs | 1 | 14% | - | - | - | - | - | - | 1 | 3% | 2 | 2% |
| Total | 7 | 100% | 10 | 100% | 6 | 100% | 20 | 100% | 39 | 100% | 82 | 100% |
| Very likely | 2 | 33% | 5 | 56% | 1 | 17% | 1 | 5% | 3 | 8% | 12 | 15% |
| Somewhat likely | 3 | 50% | 4 | 44% | 5 | 83% | 17 | 85% | 31 | 78% | 60 | 74% |
| Somewhat unlikely | - | - | - | - | - | - | 2 | 10% | 4 | 10% | 6 | 7% |
| Very unlikely | 1 | 17% | - | - | - | - | - | - | 2 | 5% | 3 | 4% |
| Total | 6 | 100% | 9 | 100% | 6 | 100% | 20 | 100% | 40 | 100% | 81 | 100% |

Working with diverse victims

There are many issues surrounding sexual assault that can make it difficult for professionals to provide high quality service. In addition to the sensitive nature of this crime, there are occasions when professionals responding to an incident of sexual assault must draw on additional resources to provide quality services to victims. Victims who do not speak English, are hearing or vision impaired, have physical or mental disabilities may require translators or other support. It is also important for responding professionals to understand how a victim's culture or sexual orientation will influence their reaction to the assault. Wilder Research Center asked survey respondents if they felt that their agency is well-equipped to help sexual assault victims with the types of characteristics described above. They were also asked to explain what they did if they were well-equipped, and what they needed if they were not well-equipped. Figure 11 displays the distribution of their responses by agency type.

11A. Percent of respondents who feel agency is well-equipped to respond to diverse victims



Survey respondents felt that their agencies were best able to accommodate the needs of persons with mental (85%) and physical (83%) disabilities. A majority of respondents felt that their agencies are well-equipped to help people from the gay/lesbian/transgender community (62%), and people from different cultures (61%). Only half of the respondents felt that their agencies were well-equipped to help non-English-speaking victims and less than half (47%) felt that their agencies are well-equipped to help deaf or blind victims.

There were a few differences in the respondent's perceptions of their agencies ability to serve these victims. Respondents from law enforcement were most likely to be confident about their agency's ability to serve non-English speaking victims. Medical providers were more confident than other agencies' staff with their ability to serve people with physical disabilities and cultural differences. Advocates were most likely to be confident about their ability to serve the gay/lesbian/transgender community. A majority of advocates and staff from medical providers were confident that their agencies are well-equipped to serve deaf or blind victims, whereas one-third to 42 percent of the other agencies' staff report that they think their agency is well-equipped to serve these victims. While nearly three out of four respondents from law enforcement report that they are well-equipped to serve victims with mental disabilities, a much larger proportion of staff from other agencies (83% to 100%) felt that their agency is well-equipped to serve these victims. Figure 11B presents these results by agency.

11B. Agency's ability to help diverse victims

| | | Agency type | | | | | | | | | | | |
|-----------------------|-----|-------------|-------------|----------|-------------|-------------|-------------|-----------------|-------------|-----------------|-------------|-----------|-------------|
| | | Advocacy | | Medical | | Prosecution | | Social Services | | Law Enforcement | | Total | |
| | | N | P | N | P | N | P | N | P | N | P | N | P |
| Non-English speakers | Yes | 2 | 29% | 5 | 56% | 2 | 33% | 5 | 26% | 25 | 61% | 39 | 48% |
| | No | 5 | 71% | 4 | 44% | 4 | 67% | 14 | 74% | 16 | 39% | 43 | 52% |
| Total | | 7 | 100% | 9 | 100% | 6 | 100% | 19 | 100% | 41 | 100% | 82 | 100% |
| Cultural differences | Yes | 4 | 57% | 7 | 78% | 4 | 67% | 9 | 50% | 22 | 63% | 46 | 61% |
| | No | 3 | 43% | 2 | 22% | 2 | 33% | 9 | 50% | 13 | 37% | 29 | 39% |
| Total | | 7 | 100% | 9 | 100% | 6 | 100% | 18 | 100% | 35 | 100% | 75 | 100% |
| Deaf/blind | Yes | 5 | 71% | 5 | 71% | 2 | 33% | 8 | 44% | 15 | 42% | 35 | 47% |
| | No | 2 | 29% | 2 | 29% | 4 | 67% | 10 | 56% | 21 | 58% | 39 | 53% |
| Total | | 7 | 100% | 7 | 100% | 6 | 100% | 18 | 100% | 36 | 100% | 74 | 100% |
| Physical disabilities | Yes | 5 | 83% | 9 | 100% | 5 | 83% | 17 | 89% | 27 | 73% | 63 | 82% |
| | No | 1 | 17% | | | 1 | 17% | 2 | 11% | 10 | 27% | 14 | 18% |
| Total | | 6 | 100% | 9 | 100% | 6 | 100% | 19 | 100% | 37 | 100% | 77 | 100% |
| Mental disabilities | Yes | 5 | 83% | 9 | 100% | 5 | 83% | 19 | 100% | 27 | 73% | 65 | 84% |
| | No | 1 | 17% | | | 1 | 17% | | | 10 | 27% | 12 | 16% |
| Total | | 6 | 100% | 9 | 100% | 6 | 100% | 19 | 100% | 37 | 100% | 77 | 100% |

Respondents were asked what their agency did to help victims with these kinds of issues, and what they lacked when they reported that they were not well-equipped to serve these victims. About three-quarters (74%) of the respondents gave explanations. A majority (77%) of the 31 respondents who said that their agency is well-equipped to serve non-English speaking victims report that they use interpreters. A handful of respondents report that another agency handles these issues or that they have a diverse workforce with staff who do this work. A majority (56%) of the respondents who did not think that their agency was well-equipped to serve non-English speaking victims said that they need to have a more diverse workforce. One-third of them said that there are not enough interpreters, or that it takes too long to get their help. Six percent of these respondents report that another agency handles this, and 6 percent said that they need training.

Respondents were less likely to give explanations of what they need to do or already do to help victims with other issues. Regardless of the issue, most respondents who felt that their agency was well equipped to serve diverse victims said that their existing staff

handles it or is trained to handle it. Respondents offered other methods to help these victims including: getting help in general, using interpreters for the deaf, using cultural liaisons, having a diverse workforce, having sensitive staff or having another agency help these victims.

Respondents who felt that their agencies were not well-equipped to help diverse victims most often report that they need training or lack experience in working with diverse victims. Respondents described several other agency barriers to helping these victims including: the time it takes to get liaisons or interpreters, the conservative views of some staff, that there is not help in general, a lack of resources such as time or money, the fact that other agencies deal with these issues, or that there is no need in their community.

Respondents were also asked what additional resources might help them improve their agency's response to sexual assault. About three-quarters (74%) of the respondents answered this question, and many of those respondents said that they did not know what additional resources would be helpful. Of the 53 respondents who gave suggestions, 32 percent advised that the existing workforce be better trained, and 23 percent suggested getting specially trained workers like SARS nurses or units that deal specifically with sexual assault. Six to 17 percent of the respondents gave the following suggestions: better inter-agency communication (17%), additional workers (15%), better access to interpreters (8%), having a written protocol (11%), and having a resource book (6%). Two respondents felt that there was no need for additional resources, and one respondent reiterated what others suggested as well as offering several unique suggestions. This comment follows:

The "all mighty dollar" for education, outreach and advocacy. Medical and legal networks to aid in education, victim healing and legislation changes.

Inter-agency communication

The 8-step process is expected to improve inter-agency communication. To assess the level of inter-agency communication prior to protocol implementation survey respondents were asked about the likelihood of their having ongoing communication about cases of sexual assault with staff from the four core agencies. Figure 12 presents the distribution of their responses. In general, the results indicate that staff from these agencies already communicate regularly on sexual assault cases.

Most respondents (79%) report that they are somewhat (36%) or very (43%) likely to have ongoing communication with medical providers. All of the advocates and representatives from prosecution reported that they were likely to have ongoing communication with medical professionals; whereas some representatives from social services and law enforcement report that they would not have ongoing communication

with medical staff (one respondent from medical said that it would be somewhat unlikely to ongoing communication internally about a case of sexual assault).

Eighty-four percent of the respondents report that they are somewhat (25%) or very (59%) likely to have ongoing communication with law enforcement staff. Ninety percent of the respondents from law enforcement report being very likely to have ongoing intra-agency communication related to a case of sexual assault. Eighty-three percent of prosecution staff report that they would be very likely to have ongoing communication with law enforcement. Professionals from medical and social services were the most likely to report that they would be unlikely to have ongoing communication with law enforcement.

Eighty percent of respondents report being somewhat (27%) or very (53%) likely to have ongoing communication with staff from prosecution. Medical and social service staff were most likely to report that they would be unlikely to have ongoing communication with prosecution.

Eighty percent of respondents report being somewhat (38%) or very (42%) likely to have ongoing communication with staff from advocacy. All of the advocacy and prosecution staff reported that they would be likely to have ongoing intra-agency or inter-agency communication. Half of the respondents from medical and a few respondents from social services and law enforcement reported that they would be unlikely to have ongoing communication with advocacy staff.

12. Inter-agency communication

| How likely would you be to have ongoing communication with: | Responding agency type | | | | | | | | | | | |
|---|------------------------|-------------|----------|-------------|-------------|-------------|-----------------|-------------|-----------------|-------------|-----------|-------------|
| | Advocacy | | Medical | | Prosecution | | Social Services | | Law enforcement | | Total | |
| | N | P | N | P | N | P | N | P | N | P | N | P |
| Medical | | | | | | | | | | | | |
| Very unlikely | - | - | - | - | - | - | 2 | 10% | 3 | 8% | 5 | 6% |
| Somewhat unlikely | - | - | 1 | 13% | - | - | 4 | 19% | 7 | 18% | 12 | 15% |
| Somewhat likely | 5 | 83% | 1 | 13% | 4 | 67% | 12 | 57% | 7 | 18% | 29 | 36% |
| Very likely | 1 | 17% | 6 | 75% | 2 | 33% | 3 | 14% | 23 | 58% | 35 | 43% |
| Total | 6 | 100% | 8 | 100% | 6 | 100% | 21 | 100% | 40 | 100% | 81 | 100% |
| Law Enforcement | | | | | | | | | | | | |
| Very unlikely | - | - | 2 | 22% | - | - | 3 | 14% | 1 | 3% | 6 | 7% |
| Somewhat unlikely | 1 | 17% | 2 | 22% | - | - | 4 | 19% | - | - | 7 | 9% |
| Somewhat likely | 2 | 33% | 3 | 33% | 1 | 17% | 11 | 52% | 3 | 8% | 20 | 25% |
| Very likely | 3 | 50% | 2 | 22% | 5 | 83% | 3 | 14% | 35 | 90% | 48 | 59% |
| Total | 6 | 100% | 9 | 100% | 6 | 100% | 21 | 100% | 39 | 100% | 81 | 100% |
| Prosecution | | | | | | | | | | | | |
| Very unlikely | - | - | 3 | 38% | - | - | 2 | 10% | 1 | 3% | 6 | 8% |
| Somewhat unlikely | 1 | 20% | 3 | 38% | - | - | 6 | 29% | - | - | 10 | 13% |
| Somewhat likely | 2 | 40% | 1 | 13% | 1 | 25% | 9 | 43% | 8 | 20% | 21 | 27% |
| Very likely | 2 | 40% | 1 | 13% | 3 | 75% | 4 | 19% | 31 | 78% | 41 | 53% |
| Total | 5 | 100% | 8 | 100% | 4 | 100% | 21 | 100% | 40 | 100% | 78 | 100% |
| Advocacy | | | | | | | | | | | | |
| Very unlikely | - | - | 3 | 38% | - | - | - | - | 6 | 15% | 9 | 11% |
| Somewhat unlikely | - | - | 1 | 13% | - | - | 2 | 10% | 4 | 10% | 7 | 9% |
| Somewhat likely | 2 | 33% | 3 | 38% | 2 | 33% | 14 | 67% | 13 | 33% | 34 | 42% |
| Very likely | 4 | 67% | 1 | 13% | 4 | 67% | 5 | 24% | 17 | 43% | 31 | 38% |
| Total | 6 | 100% | 8 | 100% | 6 | 100% | 21 | 100% | 40 | 100% | 81 | 100% |

It is interesting to note that staff from different agencies have different perceptions of their inter-agency communication. If one considers the average (mean) ratings of respondents from different agency types, it reveals the level of contact that agency representatives have with one another, rather than the proportions of respondents who would be somewhat or very likely to have contact with representatives from other agencies. Representatives from advocacy, law enforcement, and medical reported having the highest level of ongoing communication with staff from their own agency. Besides their own agency, law enforcement officers reported being most likely to have ongoing contact with prosecution, and representatives from prosecution were most likely to communicate with law enforcement. Social service professionals are most likely to have contact with advocacy. Police were more likely to report having ongoing communication with other professionals than staff from the Sheriff's Office. Representatives from public health were less likely to have contact with prosecution, law enforcement and medical than representatives from other social service agencies.

Perceptions of existing and proposed case-handling practices

One of the goals of the project is to change the involved agencies' response from case-centered to victim-centered. Wilder Research Center gathered baseline information about staff's attitudes about what the terms case-centered and victim-centered mean.

Respondents reported that the term case-centered means that the focus is on winning the case, victims are treated like numbers, there is a disregard for victims' wishes, and showing a more positive viewpoint, that a case-centered response is a collaborative response. Examples of their responses follow.

Thirty-seven respondents from law enforcement (n=12), advocacy (n=2), prosecution (n=3), medical (n=6), social services (n=13), and one respondent without agency identification said that a case-centered service approach treats victims like numbers, with all cases of sexual assault handled the same. Several examples of their comments follow:

Treat each case like the other

Case comes first, victims feelings are not a concern.

Considering the case as a number ("another one"). Dealing with the situational facts only – not addressing the victim.

Very anonymous, secretive, and a number is used in identification.

Thirty-two respondents from law enforcement (n=21), advocacy (n=2), prosecution (n=3), medical (n=2), social services (n=3), and one respondent without agency identification described the term case-centered as a service approach that focuses on the successful

prosecution of the case and punishment of the suspect. Several examples of their comments follow:

- Pure evidentiary, tactical concerns – how do I influence the jury?
- Focus on winning the case no matter the cost to the rights/needs of victims and society.
- Prosecuting the case to the fullest extent of the law.
- Everything revolved around criminal case – what is needed to solve case and apprehend suspect
- Focus on bringing perpetrator to justice.

Eight respondents from law enforcement (n=4), advocacy (n=3), social services (n=1) say that a case-centered service approach disregards the wishes of victims. Several examples of their comments follow.

- Systems decide how to process cases, very little choices for survivor.
- Victim has little input.
- Processing case with little regard to victim.

In contrast to case-centered, respondents reported that the term victim-centered means that the focus is on addressing victim's needs, giving victims choices, putting the victim first – before the case, showing concern for the victim, connecting the victim to services, communicating directly with the victim, and avoiding doing things that re-victimize the victim. Examples of their responses follow.

Thirty respondents from law enforcement (n=14), prosecution (n=1), medical (n=6), and social services (n=9) said that a victim-centered service approach meets the needs of the victim. Several examples of their comments follow:

- Needs of client (victim) first.
- Personalize with needs of victim and the effects of the assault.
- Dealing specifically with victim and their needs.
- Victim needs dictate courses of action taken by agencies involved.
- Catering to the emotional needs of the victim.

Twenty-three respondents from law enforcement (n=12), advocacy (n=4), prosecution (n=2), medical (n=2), and social services (n=3) described a victim-centered service

approach as one that empowers victims and gives them choices. Several examples of their comments follow:

Making the process personal to have the optional outcome for the victim.

Include victim's wishes – what's in the best interest of victim.

Letting the victim be more part of investigation if they want and to reflect their wishes.

Twenty-two respondents from social services (n=10), medical (n=5), law enforcement (n=3), advocacy (n=2), and prosecution (n=2) described a victim-centered service approach as one that puts the victim first and treats the first like an individual. Several examples of their comments follow:

Focusing on the actual persons involved.

Since services are created to assist victims, it is logical that they be responsive to victims, rather than agencies and procedures.

Person involved is number one priority – case number two.

How does this case and prosecution effect the victim?

Sixteen respondents from law enforcement (n=6), social services (n=5), medical (n=1), advocacy (n=2), and prosecution (n=2) felt that staff using a victim-centered service approach would show concern and sensitivity to the victim. Several examples of their comments follow:

Try to make the case revolve more around how it will respect the victim.

The services will be sensitive and meet the needs of the person not the needs of the courts, perpetrator, etc.

More concentration placed on providing support, education and guidance to the victim in order to help with healing process and healthy survival.

Respect the emotional and physical needs of the victim to build an excellent case.

Eleven respondents from law enforcement (n=7), social services (n=3), and medical (n=1), report that staff using a victim-centered service approach would refer victims to additional resources. Several examples of their comments follow:

Focusing on follow-up care for the victim.

Orientated to assist victim from beginning (call for service) to the end (counseling).

...offering additional resources as appropriate.

Six respondents from law enforcement (n=1), and advocacy (n=5) report that staff using a victim-centered service approach would maintain ongoing communication with victims and keep them informed about their case. Several examples of their comments follow:

Keeping victim informed as to status of case. Allowing for victim input. Maintaining constant communication with victim and offering additional resources as appropriate.

Assist the victim with the court process along with answering questions and following up with the needs of the victim.

...assist victims in obtaining information related to their case, refer them to additional assistance.

Three respondents from advocacy (n=1), social services (n=1), and one respondent without agency identification described the term victim-centered as a service approach that does not re-victimize sexual assault victims. Their comments follow:

Victim decides how to proceed given empowerment choices, not re-victimization choices.

Reduce number of times victim has to repeat story – share information – with victim consent fewer people.

Help victim by not making them feel it was their fault.

Wilder Research Center asked survey participants to describe the benefits they thought would result from making a shift from a case-centered service approach to a victim-centered service approach. Respondents felt that the shift would help victims heal, fulfill their needs, and empower them. They also suggested that victims would be less likely to feel mistreated by the system, victims would be more cooperative and therefore, better witnesses. In addition respondents felt that the shift would improve collaboration and eventually increase the proportion of victims who report. A few respondents felt that the shift might not be beneficial or necessary.

Thirty-one respondents from law enforcement (n=12), medical (n=5), prosecution (n=3), advocacy (n=2), social services (n=8), and one respondent without agency identification felt that the system would be able to do a better job of meeting victims' needs if it made a shift from a case-centered service approach to a victim-centered service approach. Staff are able to do this by working with victims as they go through the system, connecting them with resources, and helping them with the healing process. Several examples of their comments follow:

More adequately meet the needs of the client and more quickly respond.

Obtaining optional outcome for the victim. Looking at long-term goals with available resources to help them through a most difficult time.

Using my definitions above [get emotional support], I think the victim will be better able to move on with their life and not dwell on the incident.

More tailored to meet the victims needs.

More client satisfaction and support – promotes health and healing.

Eighteen respondents from law enforcement (n=10), medical (n=2), prosecution (n=2), advocacy (n=1), and social services (n=3) felt that the new victim-centered service approach would empower victims of sexual assault. Several examples of their comments follow:

Victim feels part of process instead of on outside.

Giving power to the client.

Initially, empowerment of the victim, and with time, a more effective healing process.

Involve the victim – give them choices, inform them.

Nine respondents from law enforcement (n=1), medical (n=2), prosecution (n=4), advocacy (n=1), and social services (n=1) felt that the system would avoid re-victimizing people if it were victim-centered. Three examples of their comments follow:

Would allow the process for the victim to be easier and not to be victimized again.

Victim may feel has more power over situation – won't feel as "blamed" – victimized, etc.

A less hostile situation for victim.

Many respondents reported ways that shifting to a victim-centered service approach would improve the sexual assault response system. They suggested that victims would be more motivated to report incidents of sexual assault; that victims would be more cooperative with agency staff and, in turn, become better witnesses; and that this service approach would improve inter-agency collaboration. Figure 13 presents the distribution of responses by agency type. Several examples of their comments follow:

13. System-wide benefits of a shift to a victim-centered service approach to case-handling

| | Advocacy | Law enforcement | Medical | Social services | Prosecution | Total |
|--------------------------------|----------|-----------------|---------|-----------------|-------------|-------|
| Increase in reporting | 1 | 4 | 1 | 1 | 0 | 7 |
| Better witness, help | 0 | 4 | 0 | 0 | 1 | 5 |
| Improved collaboration | 1 | 0 | 1 | 3 | 0 | 5 |
| More cooperative victim | 0 | 0 | 1 | 2 | 0 | 3 |

More survivors feeling safe to come forward and disclose.

Making the situation more livable for a victim might encourage reporting of offenses by other victims.

More assistance to victim makes a more cooperative witness.

Better coordination between departments

Systems supporting other systems and providing correct information about what they expect and not expect.

A more happy victim and having the victim feel more confident about the justice system and law enforcement.

I think the victims would be more willing to cooperate with medical staff if their needs were well met.

Victim is more likely to assist agencies involved to “solve their case” if they feel they have some control/input.

Finally, five respondents, all from law enforcement were somewhat skeptical of the benefits of making this kind of a shift. These officers suggested that their agency might not benefit from the shift, although the victim might benefit, or that there were limited or no benefits to the shift. Four of their comments follow.

None for the department, this would help the victim deal with the situation.

I think that there are both advantages and disadvantages. Advantage is more victim friendly, more apt to report and hopefully less emotional trauma later. Disadvantages – one I can foresee is less consistency.

We are already victim centered.

Disadvantage is the criminal case could suffer.

Disadvantages of shifting from case-centered to victim-centered service approach

Wilder Research Center asked respondents to describe the disadvantages they expected to encounter in making a shift from a case-centered service approach to a victim-centered service approach. Survey participants' were most likely to report that existing agency policies would make this shift difficult. In addition, they suggested that inadequate resources, and issues particular to victims could disrupt a shift in approaches to helping victims of sexual assault. There were a few respondents who felt that there are no barriers to moving from a case-centered approach to a victim-centered approach.

Survey participants gave 54 descriptions of system barriers that might hamper a shift from a case-centered to a victim-centered response to incidents of sexual assault. The most frequently mentioned system barrier was staff or agency trepidation about change in practice. Nineteen respondents from law enforcement (n=5), medical (n=6), social services (n=7), and advocacy (n=1) suggested that concern about change would be a barrier to making the shift from a case-centered to a victim-centered response to incidents of sexual assault. Several of their responses follow:

Many agencies have responsibilities that are case-centered – sometimes victim-centered approaches may contradict the job expectations and responsibilities.

Required duties of prosecution and law enforcement may need certain things from a victim which they do not want to do.

Victim can't dictate everything. Laws, criminal procedure, etc., are fixed. Judges also have to play, or it has no value.

Every professional is entrenched in their own process.

Change is always difficult.

Fifteen respondents suggested moving from a case-centered to a victim-centered approach may impede the prosecution process. This would be in direct conflict with several of the agencies' goals. Respondents from law enforcement (n=11), prosecution (n=4) and social services (n=1) voiced the concerns that follow:

That we don't sacrifice receiving a good case and the offender goes free to go after other victims.

Loss of cases, victim being unwilling to prosecute.

We have to remember that if there is a prosecution, the interests of the public must always be considered. These interests must be considered along with the interests of victims. The victim should not control the prosecution.

Respondents also mentioned several other issues related to the existing system's response to sexual assault, including the unlikely commitment of particular agencies with inflexible policies (n=7), the complexity of the legal system (n=8), the difficulty of collaboration between agencies that may not share a common philosophy about how to respond to a sexual assault (n=8), and the need to include judges in this process. Several of these comments that come from all of the agencies follow:

Coordinating the efforts of all the fields to agree on an approach.

This issue of data privacy could also be a barrier in some cases, i.e., juvenile involvement.

In our current system justice cannot be achieved with this approach. Victims rights must be trampled to not only prosecute the accused, but worse still, to protect the rights of both accused and known perpetrators of sex crimes.

Victim can't dictate everything. Laws, criminal procedure, etc., are fixed. Judges also have to play, or it has no value. Egos, politics, interagency territorialism.

Staff/agencies cannot be totally flexible. Experienced staff may be aware of problems victims do not recognize; able to prevent or at least predict and respond in timely, appropriate manner.

Victim has low knowledge.

Lawyers interfere, want victim on stand.

Eighteen survey participants felt that it would be difficult to shift from a case-centered approach to a victim-centered approach to responding to sexual assaults because of resource limitations. They felt that insufficient time (n=10), training (n=5), and staff (n=3) would be barriers to making this shift. Several of their responses from representatives of all of the agencies follow:

It could possibly slow things down if you have to let all parts or everyone know what is going on at all times.

One barrier is the issue of a deeper time commitment. Depending on caseload this could be a barrier.

Time restraints. Some victims need more time to work through the process.

Communication between agencies is time consuming and takes effort of all players.

Need money and time for training of all staff involved.

Need more people, resources and time. More training needed.

Need more staff to look at people individually where a case may be able to be lumped into a category of other cases with same problem.

Getting SARS program should help that by making nurse more comfortable in the evidence taking process

Some people from other disciplines are not trained in working from where the client is coming from and hard shift but possible.

Three survey participants felt that there might be instances when a victim would be opposed to the shift from a case-centered approach to a victim-centered approach to responding to sexual assaults. They felt that insufficient time (n=10), training (n=5), and staff (n=3) would be barriers to making this shift. Several of their responses from representatives of all of the agencies follow:

Victim/survivors have not felt safe in the past.

More personal approach. Although, some victims may not want this.

People falling through the cracks.

Issues to consider

While the project administrators would like to see the three original test sites be successful in their efforts to improve the system's response to sexual assault victims in their community, these sites are also in the somewhat awkward position of being experimental subjects. The project administrators pay a great deal of attention to each of the test site's unique efforts so that they can model the successful practices and avoid wasting time on activities that are less effective. All three original test sites have contributed a great deal to the project's understanding of what makes collaboration in the criminal justice system work, and what agency practices within this system can be improved.

The activity in which the three sites were most involved in during fiscal year 1999-2000 was training agency staff. Based on observations of trainings, review of training curricula, and some feedback from participants Wilder Research Center draws the following conclusions:

- Packaged training (for example a PowerPoint presentation) that can be conducted consistently with a few new employees as they enter an agency is valuable.
- Training participants are more likely to be engaged by an interactive process, than a strictly proscriptive training.
- Sites that make the training mandatory for agency staff who have contact with victims will likely be more successful in protocol implementation than those that make it voluntary. Voluntary participation implies that compliance is also voluntary.
- Finding innovative solutions, such as offering professional credit or certification appears to help make the training more palatable to direct service staff and agency management.

In addition to training agency staff in site protocol, which is the sixth of eight steps in the 8-Step Protocol Development Cycle; one site had implemented a monitoring and evaluation plan and the other two had drafted plans for monitoring and evaluating the protocols that they are implementing. All of the sites have attempted to expand membership on their Sexual Assault Inter-Agency Councils to better encompass the range of professionals who serve victims of sexual assault in their community. All of the sites have attempted to address the issue of cultural competency in their work although they need to continue making progress in this area. Finally all of the sites have shared their unique local experiences, both successes and challenges, with Project Administrators, the

Test Site Advisory Board, and Wilder Research Center so that future sites can benefit from their efforts.

Following are the most significant lessons that these test sites have shared in the past year:

1. Consistent support from a site coordinator with both administrative and leadership skills is essential to a site's progress in the 8-Step Protocol Development Cycle. Specifically the site coordinator helps provide the following support to sites:
 - Leadership in helping team members reach consensus and make decisions related to their progress in the 8-step process.
 - Administrative support in terms of scheduling meetings, setting agendas, following timelines, and in some cases helping to manage the grant.
 - Outreach to the community – ideally the coordinator will seek the support of relevant agencies or populations so that the Sexual Assault Inter-Agency Council represents the diversity and professional scope of the local community.
 - Respond to requests for information from agencies and the public – the coordinator serves as a central source of communication and information about the Council and its work.

Council members tend to rely on site coordinators to keep the process moving. If the site coordinator lacks the skills to make this happen, others within the Council should be prepared to take action. Sites can accomplish this by designating one or more members as chairs of the council. These chairs could then take on the leadership challenges if a site experiences coordinator turnover. They could also be responsible for holding the site coordinator accountable if it appears that the coordinator is not up to the job.

2. Support from a central agency external to the three original sites can be extremely helpful to site coordinators and teams in working through the process. Specifically a project-wide administrative staff helps provide the following support to sites:
 - Technical assistance or consultation on strategies to work through the 8-Step Protocol Development Process.
 - Referrals to consultants or vendors of services related to each site's work or needs.

- Administrative and moral support to coordinators and team members when they go through transitions in leadership.
- Funding for special projects, consultation, or workshops, and exposure to statewide or national information on positive responses to sexual assault.

Next steps

These sites should all have completed the first round of the 8-Step Protocol Development Cycle by the end of fiscal year 2000-01, including protocol implementation at each of the member agencies and implementation of a plan to monitor and evaluate these protocols. The next step in the 8-Step Protocol Development Cycle is to prepare for another iteration of the Cycle, which will involve reviewing the results of their monitoring and evaluation data, and refining their practices to reflect the needs that are uncovered in the evaluation data. They may also need to expand or refine their evaluation process. Sites must gather information directly from victims to truly determine how effective this process has been. Developing a strategy to gather this information in a manner that does not re-victimize victims, and maintains their confidentiality is an important next step.