Opening Our Doors:

Building Strong Sexual Assault Services in Dual/Multi-Service Advocacy Agencies
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This project was supported by Grant No. 2008-TA-AX-K043 awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.

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http://www.resourcesharingproject.org/ rural-sexual-assault-services

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Introduction

Dual/multiservice advocacy agencies are agencies that serve both sexual violence and domestic violence survivors, and may provide a wide range of community services. When we seek to create significant organization change to respond to sexual violence in the best way we can, we are often challenged with limited financial and organizational resources or resistant communities. The barriers are great, but the potential for high-quality sexual assault services in dual/multi-service organizations is greater.

Our organizational habits and policies are more powerful than we sometimes realize. Each conversation with a survivor—what advocates say and how they say it—happens within the context set by the organization. Organizational training, guidance, and expectations tell advocates how to respond at any time of the day or night. Training shows advocates how to respond to different survivors and their multifaceted needs. Continued conversation about sexual violence and guidance creates good, survivor-centered habits in all of us. Organizational structures, like policies and paperwork, support these good habits. Finally, expectations for service to sexual violence survivors cement our role as a sexual assault service provider in the community and within the organization.

This guide will explore ten components of high-quality sexual assault service in dual/multi-service advocacy agencies. These components, along with tools from the Resource Sharing Project and the National Sexual Violence Resource Center, can be the building blocks of your excellent sexual assault services. Just like many things in our work, these components do not stand alone, but overlap and inform one another. In these pages, you will find activities and reflection questions for you, your staff, and your agency’s Board or Tribal Council, and resources for further exploration and study.
1. Strong dual/multi-service agencies have a mission, strategic plan, and specific goals established for their sexual violence programs.

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9. Strong dual/multi-service agencies have ongoing dialogue about sexual violence and oppression, develop culturally relevant policies, practices, and education programs, and help survivors find vital services that are culturally relevant.

10. Strong dual/multi-service agencies have a plan that is both proactive and responsive to vicarious trauma experienced by staff and volunteers.
Strong dual/multi-service agencies have a mission, strategic plan, and specific goals established for their sexual violence programs.

Many dual/multi-service agencies report that they try new things to improve sexual assault services, but efforts fizzle out, go wrong, or get lost in the daily demands of crisis work. New projects are fragile, and we must have crucial structural support for the project to succeed. For a change to really take root, we must get support at all levels of the organization: the board, management, and direct service staff.

We can get that support by involving the Board of Directors or Tribal Council in setting the mission, strategic plan, and specific goals established for their sexual violence programs. This sets a solid base for providing services to victims who have experienced sexual violence. Many boards, Tribal Councils, or other governing bodies find it helpful to set sexual violence as a standing agenda item for meetings. Others create a sexual assault services committee.

Dual/multi-service advocacy agencies need dedicated sexual assault funding streams to adequately provide sexual assault services. Many agencies are attempting to provide sexual assault services with little to no funding for sexual assault. The management and Board or Tribal Council can make a budget for sexual violence or set specific budget lines for sexual violence services, and set specific fundraising targets for sexual assault services. The management and Board or Tribal Council can also demonstrate the importance of sexual assault services by working to ensure an equitable distribution system of unrestricted income. Do you hold local fundraisers for sexual violence services as well as domestic violence services? How do you divide state and federal funding streams, like VOCA and VAWA? Many of these streams can be used to support sexual violence survivors as well as domestic violence survivors.

Management can work to ensure that the agency has a significant percentage of its intervention and prevention work dedicated to addressing sexual violence, and that the agency has documents, policies, and procedures in place to support sexual violence work. We often forget the paperwork in our agencies, but there’s a lot of sustaining power in our paperwork. The intake forms we complete with survivors, for example, communicate our service priorities to staff every day. Job descriptions and training requirements tell new employees what the agency does. Our documents are how we tell the story of our agencies, to the outside world and to ourselves. Moreover, they tell our story to future Board members, managers, and staff. Agencies must take care not to simply add “and sexual assault” to documents that refer to domestic violence, but assess how to tailor existing services and documents or create new services and documents specific to sexual assault. For more information, see Strengthening Our Practice: Ten Essential Strengths of Sexual Violence Victim Advocates in Dual/Multi-Service Advocacy Agencies.

Review some of your agency’s documents. What story do they tell about your sexual assault services? How accurate is that story? What would you like your story to be?
Strong dual/multi-service agencies provide specific advocacy training on sexual violence and core service provision.

Our organizations can put many structures in place to support strong sexual assault services. However, sexual assault services cannot happen unless workers feel knowledgeable and comfortable providing sexual assault services. To serve sexual violence survivors fully, we must understand how multiple systems (criminal justice, advocacy, social services, and health care) operate in regards to sexual violence and possess knowledge to increase medical, criminal legal, and civil legal options for sexual violence survivors. We must give advocates training on general skills like active listening, empathy, building rapport, empowerment, and collaboration. We teach our agency’s policies and procedures regarding services for sexual violence survivors. We also share knowledge on supporting survivors of different types of sexual violence, the emotional aftermath of rape, emergency medical and legal advocacy, long-term medical and legal advocacy, and the services available in our communities. With knowledge on these topics, advocates can assist a wide range of sexual violence survivors, and build a strong base for furthering their education. We can use this base to discuss sexual violence with community partners who provide services to sexual violence survivors, such as health care, law enforcement, and educators.

Many advocates find training on these topics helpful:

- Advocacy techniques for and background knowledge on working with survivors of recent assaults, such as survivors who were assaulted by classmates, dates, or friends
- Advocacy techniques for and background knowledge on working with survivors of long-past assaults, such as adult survivors of child sexual abuse
- Emotional aftermath and healing of sexual violence, including coping with Post Traumatic Stress, flashbacks, and triggers
- Justice options, including state, federal and tribal laws on sex crimes, law enforcement procedures, prosecution procedures and options, and civil legal responses
- Safety planning after sexual violence
- Comprehensive, long-term medical care and advocacy
- Emergency medical care and forensic examinations

Your state coalition, the Resource Sharing Project, or the National Sexual Violence Resource Center can give you more information on initial advocate training.

Don’t forget ongoing education! Many advocates, especially rural advocates, get initial training on sexual violence, but they find that they don’t get enough experience with sexual violence survivors to fully integrate the information and skills into daily practice. Ongoing education helps advocates maintain their knowledge and confidence.

The agency can manifest this commitment to initial training and ongoing continuing education of all staff and volunteers in several ways. We can evaluate current training offerings for these specific topics. We can work with state coalitions and other statewide
trainers to ensure their trainings provide ongoing sexual violence advocacy training. Finally, organizations can ensure that staff have opportunities to get necessary education to aid individuals who have experienced sexual violence through national trainings, regional meetings, or online education.

So who needs to have this training? It’s good to have some experts on staff and to ensure that everyone has a good basic knowledge. Whether or not a given staff person talks to sexual violence survivors on a daily basis, they should be able to adequately and appropriately represent the full range of services of your organization to the community. All staff should understand the prevalence of sexual victimization and be able to provide current information on the general frequency and facts surrounding sexual violence across differing communities. All staff should understand the potential impact of sexual victimization. The receptionist, for example, is often the first person in your agency who a survivor will have contact with so it is important to make sure that they are trained. In multi-service agencies, it is important that all staff, not just the SV/DV staff, understand the dynamics and responses to sexual violence. Multi-service organizations are in a unique position to strengthen the community response to sexual violence because they have connections to so many different elements of the community.

In addition to this broad base of sexual violence knowledge, many dual/multi-service agencies find it useful to have some experts in the agency. Job role, not personal interests, should determine who these experts are. The agency should have institutionalized resources in the agency, such as job descriptions, for those tasked with doing sexual violence work such as medical/legal advocacy, counseling and systems advocacy. We find that when dual/multi-service agencies rely on personal interests of staff to maintain sexual violence expertise, it is difficult to maintain that expertise when staff leave the agency. If the expectation of expertise is woven into job descriptions and performance evaluations, the organization can maintain the expertise over the years.

Practice giving a five-minute explanation of services, or ‘elevator speech’. While each conversation will be different, we should feel comfortable with some basic talking points about services and survivor needs. At your next staff meeting or training, role-play the following scenarios:

1. You are at a community event, working an information table. A woman in her forties approaches you and says she was sexually assaulted as a child. What do you say to her? How will you encourage her to seek services with you?

2. You are talking with a systems professional or community member about violence in general, when they say, “Oh, I didn’t know you did sexual violence work.” What do you tell them about your services? What do you say to start a working relationship about sexual violence?

Resist the urge to say everything you know about sexual violence or all the information about services. Instead, focus on the main points. What three things about sexual violence or your services do you want this person to remember? Practice as often as is helpful.
Strong dual/multi-service agencies provide services to the full continuum of sexual violence survivors, including girls and boys, teen and adult women, and teen and adult men.

Strong dual/multi-service agencies provide services to the full continuum of sexual violence survivors, including girls and boys, teen and adult women, and teen and adult men. Strong dual/multi-service agencies also support significant others, partners, family, and friends.

The definitions of sexual violence we hold drive how we talk to survivors and community partners, and inform what options we see for survivors. Strong dual/multi-service agencies know that using comprehensive definitions of sexual violence open our services to all survivors of sexual violence, as you can see in the graphic on page 19, (Guy, L., 2006). Our definitions also open or close the range of options we have to offer. Each sexual assault is unique, with specific emotional, physical, and social consequences for survivors. In addition, there are varying medical, legal, and healing options for survivors, depending on the type of violence they endured.

Sometimes, there's a gap between our mission or sexual assault services plan and what happens day to day. This is true of many aspects of work, not just sexual assault services. There are a few reasons for this gap between our ideal sexual assault services and our reality, and there are some solutions for closing the gap.

Often, we're better known as domestic violence service providers than sexual assault service providers. We can work to balance our reputation by committing a significant percentage of our education, outreach, and prevention work explicitly to sexual violence. Most sexual violence is done to survivors under the age of 25. Therefore, we should consider our prevention audience carefully, and dedicate a significant percentage of our sexual violence educational programs and presentations on reaching adolescents, teens or young adults through schools, youth-serving groups, colleges, and other youth-focused service providers.

We also need to look carefully at the interventions we offer to survivors. What services we provide, and how we provide them, influences survivors’ decisions to seek services as well as staff responses to survivors. It's important for dual/multi-service agencies to have a significant percentage of its advocacy and counseling programs dedicated to victims of sexual violence. For example, an agency could offer support groups specific to sexual violence survivors rather than integrating sexual violence survivors into the domestic violence group. We know that support groups provide validation and connection; we also know that being with people that experienced similar kinds of violence is one of the most effective ways to provide that validation.

We must have services that meet the unique needs of victims of sexual violence that are dealing with substance abuse issues or other coping mechanisms. Partnering with local substance abuse agencies is a great way to expand your sexual violence services and reach more survivors and a broader range of survivors. For example, some adult survivors of child sexual abuse seek help for substance abuse, but have never talked about the sexual abuse. By working with substance abuse service provid-
ers, you can reach these vulnerable survivors. This partnership can also improve the substance abuse program by providing a fuller understanding of addiction for survivors.

Finally, our staff needs to be comfortable and competent in serving all survivors on the continuum. This starts with recruitment and hiring. We can screen for the ability to respond to all victims of sexual violence in our hiring protocol and documentation. You might try using these questions when interviewing job candidates:

- Please define sexual violence. Whom does sexual violence affect? What causes sexual violence?
- What does a sexual violence survivor need to heal? What is the role of the advocate with the survivor? With the survivor’s family and friends? In the community?
- Should survivors report to the police? Can you think of a circumstance in which a survivor would not want to report or should not report?
- Advocacy for sexual violence survivors includes discussing sexuality and sexual matters. Please describe a time when you discussed sexuality in a professional or job-related context. What is your comfort level in discussing sexual matters?

After staff are hired, we can use training to get them knowledgeable on the range of survivors they may encounter. For instance, the staff should be able to articulate how services may differ when working with victims who experience sexual violence outside the context of intimate partner relationships in comparison to those that experience intimate partner sexual violence. However, knowing what to do and feeling willing, able, and comfortable in serving any victim of sexual violence are two different things. There are lots of reasons we might feel uncomfortable. Some of us are nervous about working with teens, for example, because we know we’re not great at talking to teens about anything. Some folks are uncomfortable working with elders, because elderly survivors remind them of their parents or grandparents and that is emotionally difficult for them. Others might be scared of serving transgender survivors because they have never talked to a trans person and are afraid of say-
ing the wrong thing. Many of us in this work are survivors ourselves, and sometimes we are triggered by the stories of those we serve. Identifying what makes us uncomfortable or nervous is the first step to alleviating those fears.

Managers can engage their staff in frank conversations about their knowledge about and comfort level in serving:

- Girls: female child less than 13 years of age
- Boys: male child less than 13 years of age
- Teen girls: female between the ages of 13 and 18
- Teen boys: male between the ages of 13 and 18
- Adult women
- Adult men
- Transgender people
- People with disabilities (cognitive, physical, and/or developmental)
- Adults or teens using drugs/alcohol, self-injury or other such coping mechanisms to deal with sexual assault
- Adult survivors of child sexual abuse
- Significant others: partners, family, friends, etc.
- Individuals who experience sexual violence in the context of intimate partner violence

We have these conversations in training, of course, but staff meetings and other gatherings are also excellent opportunities to discuss our work with these different populations. Staff should be able to knowledgeably discuss the different needs and experiences of these groups. Perhaps you could bring role-plays to staff meetings for discussion, or assign staff to research options for some of these different groups. Think about your agency’s culture and the people in your agency. How else could you bring these conversations up? What can you do in the next month to get staff thinking about the continuum of sexual violence?

Try running some numbers to get a sense of the survivors you serve. These data can point you in new directions for outreach and service. Look at the last year of clients and consider:


2. What services and interventions did you provide? Use broad categories: emergency medical advocacy, long-term medical advocacy, criminal legal advocacy, safety planning, sexual violence-specific support group, mixed support group, short-term counseling, long-term counseling, crisis intervention. Pay special attention to the services you provided to survivors who experienced both domestic violence and sexual violence. Were the services related to the domestic violence or the sexual violence?

3. How do your numbers compare to the continuum of sexual violence? Who are you serving well? Who are you not serving?
Strong dual/multi-service agencies speak to the community about sexual violence.

Strong dual/multi-service agencies speak to the community about sexual violence clearly and often. We speak in dedicated outreach and awareness efforts, by bringing attention to sexual violence in community meetings, and by specifically discussing sexual violence in our everyday marketing of our services.

We ensure that Sexual Assault Awareness Month receives equal attention as Domestic Violence Awareness Month, with events like Take Back The Night marches, poetry slams, Clothesline Project displays, and presentations in schools, churches, and clubs. In prevention programming, we promote attitudes, behaviors, and social conditions that will reduce and ultimately eliminate the factors that cause or contribute to sexual violence. We can strengthen the community conversation about sexual violence by ensuring that our name and outreach information sufficiently reflects all services provided for all survivors. And it’s important that we clearly use the term “sexual violence,” “sexual assault,” or “rape.” In most communities, when people see the word “violence” alone in our publicity, they automatically think of domestic or dating violence. Using detailed language sends the complete message about our services.

We market our services every day in many ways: posters, brochures, word of mouth, and our name. The agency name sends a message about which survivors of violence are eligible for services. Go outside and look at the name on your building, or pull out your basic brochure about services. Think of yourself as a stranger who walks past your building or picks up your brochure. When you look at the name, what images of people come to mind? Is your name broad enough to include male and female survivors of recent or long-past assaults? Agency names are emotional, and often have a complex history. However, they are important marketing too. We must ensure that our agencies’ names and outreach information adequately reflects all services provided so that an observer would know that sexual violence services are an integral part of the agency. We must also have outreach and awareness campaigns that incorporate sexual violence. This includes our posters and brochures, as well as things like our annual reports. The annual report, and other reports, should include number of sexual violence victims served, highlights from the past year, and information on sexual violence activities.

We are often called to be the voice for victims at community meetings, such as City Council meetings, and in other forums, like letters to the editor. Here, as in our printed and web-based materials, we must carefully balance our messages. General discomfort in discussing human sexuality abounds in US society. This discomfort silences and complicates discussion of sexual violence and sexual violence survivors because many find hearing the stories of survivors too upsetting and disturbing. Law enforcement, prosecution, medical personnel and community leaders that are uncomfortable with or uneducated about sexual assault will not be able to promote or support the services of the dual agency. Law enforcement may, for example, readily refer women to the domestic violence services, but stumble on who provides sexual
assault services. City leaders know the political importance of supporting battered women and their children, but may shy away from talking about sexual assault—and funding sexual assault—during a city council meeting. It’s our job to bring the topic up. Perhaps you have an opportunity to speak to city or county leaders about domestic violence. You can use this opportunity to educate them about sexual violence as well. If you regularly write letters to the editor, you could alternate between letters focusing on domestic violence and sexual violence.

What does the community know about your sexual assault services?

Find someone who knows little or nothing about your services. Give them your website, brochures, and other publicity to review, then interview them about what your agency does. What do you learn about your image? What changes, if any, did this interview inspire you to make?

You might also try doing this with people who do know your services. You’ll be surprised at what the community knows—or thinks they know—about you. You might also find that you really enjoy talking to community members in this way. Many agencies find that, far from being awkward or negative, evaluation is an affirming and positive experience.
Strong dual/multi-service agencies provide crisis intervention services, including medical and legal advocacy that are specially tailored or created to meet the needs survivors of sexual violence.

Rape crisis service is a series of interactions and conversations between survivors and advocates, based on trust, respect, and openness. Trust is built on our consistency, skill, and knowledge. Our dual/multi-service agencies must have staff available at all times to serve victims of sexual violence with unique services that are specially tailored or created to meet the needs victims of sexual violence. Moreover, these crisis response services must be identified as sexual assault services to survivors and community partners. If survivors choose to engage the criminal legal system, the path for sexual violence survivors differs from the one for domestic violence survivors. There may be different prosecutors involved. Certainly, the legal remedies are different. While there is some overlap between the health care needs of domestic violence and sexual violence survivors, the medical response is often different.

Crisis intervention plays an important role in the support we offer to sexual violence survivors, particularly adult survivors of child sexual abuse. Many adult survivors of child sexual abuse struggle with flashbacks, nightmares, or triggers of the abuse. These crises are different than crises we may be used to in our domestic violence work. The survivor is not in any immediate danger, and may not need any immediate services. He might just need to talk, and find his way through the current emotional danger. These survivors find comfort and connection in the crisis intervention services at rape crisis centers, whether or not they seek any other type of services.

Sexual assault victim advocacy should encompass immediate and long-term work with survivors. When we think of immediate advocacy, we often picture accompanying survivors to emergency medical care or helping a survivor file a police report. Those are good options for some survivors, but we cannot limit our advocacy to those options. We know that most survivors do not seek emergency medical treatment, but wait to report or seek help. Providing a wider range of advocacy makes our services more useful to a wider range of survivors.

What should immediate advocacy and support include?
- Emotional support and crisis intervention
- Education on the aftermath of sexual violence
- Education on a range of medical options
- Accompaniment to medical treatment
- Safety planning based on the particular needs of the survivor
- The safety concerns of survivors will vary according to what kind of violence occurred and the relationship between the perpetrator and victim. Our safety planning options must be diverse enough for all survivors of sexual violence.
- Education on justice options, including, among other options, engagement with the criminal legal systems
- Links with mental health, substance abuse, shelter, and other social services as needed
- Support for significant others
- Customized interventions for teens, survivors of long-past sexual violence, men and boys, immigrants, and other survivors with special needs
Strong dual/multi-service agencies provide ongoing support services specifically designed and marketed for survivors of sexual violence, including support groups, access to therapy, and services for non-offending parents or other secondary victims.

Strong dual/multi-service agencies also provide ongoing support services specifically designed and marketed for victims of sexual violence: long-term advocacy, access to therapy and support groups, and services for non-offending parents or other significant others.

Sexual violence and domestic violence survivors have some similar needs in broad terms: advocacy, a safe place to stay, emotional support, and so forth. However, the differences in the types of violence experienced by survivors calls for differences in responses by advocates. Strong dual/multi-service agencies have unique services that are specially tailored or created to meet the needs victims of sexual violence. They have advocates that are able to assist victims of sexual violence in navigating justice options over the long term, mental health, and health care systems. And these advocates understand how these systems respond to sexual violence survivors no matter when the violence occurred. They possess the knowledge to increase all options for victims of sexual violence including appropriate civil legal and criminal justice processes.

What does long-term advocacy look like?

- Assistance with creating coping plans for triggers or flashbacks, and high-stress situations like routine medical appointments
- Education on possible long-term effects of sexual violence, especially child sexual abuse, on physical health
- Support and accompaniment to medical appointments
  - The safety concerns of survivors will vary according to what kind of violence occurred and the relationship between the perpetrator and victim. Our safety planning options must be diverse enough for all survivors of sexual violence.
- Adult survivors of child sexual abuse oftentimes have safety concerns related to ongoing or potential threats from the perpetrator, the perpetrator’s family, or the their own family, similar to survivors of recent assaults. However, adult survivors also may struggle with a global sense of insecu-
rity, based in the continuing effects of trauma or simply never having learned what safety is as a child. Advocates help survivors identify the specific safety concerns, validate the concerns, and create an individualized safety plan.

- Education on justice options, including, among other options, engagement with the criminal legal systems.
  - Many states have complicated delayed reporting statutes and complicated statutes of limitations for both criminal and civil cases. Moreover, the criminal justice system can be hostile, frightening, or confusing for adult survivors of child sexual abuse. It is difficult to navigate the laws surrounding criminal and civil options related to child sexual abuse for advocates and survivors.

- Education on options in and advocacy with educational institutions, housing assistance, and other systems that can support survivors’ healing and safety.

Ongoing support services also include:

- Links with mental health, substance abuse, shelter, and other social services as needed

- Support groups for specific populations of survivors, such as adult survivors of child sexual abuse, separate from adult survivors of recent sexual violence

- Counseling or therapy

- Holistic healing and body work, such as yoga, equine therapy, nutrition education, and survivor activism

- Support for significant others
  - Significant others—family, romantic partners, and friends—are a significant support to sexual violence survivors, and we can strengthen their support to survivors by providing them information, emotional support, and advocacy.

For more information on services for sexual violence survivors, check out Core Services and Characteristics of Rape Crisis Centers: A Review of State Services Standards (Second Edition) or Building Comprehensive Sexual Assault Services Programs.
Strong dual/multi-service agencies work with systems.

Dual/multi-service advocacy agencies are community-based services. Community. The essence of who we are as organizations tells us that we are deeply intertwined with all branches of community life. Dual/multi-service agencies can engage the community to end sexual violence and support survivors through targeted work with systems.

Strong dual/multi-service agencies work with systems to help them serve survivors better. We have many relationships in place. When we build working relationships with community partners, we need to ensure we are building relationships specifically for sexual violence work. We cannot assume that sexual violence is a part of the collaboration or communication unless we bring it up. We must think outside the usual suspects, and collaborate with partners that include a broad representation of various cultures, languages, disciplines, and diversity of services.

We can deepen existing relationships and start new ones by cross training with civil legal, criminal, advocacy, mental health, substance abuse, and health care partners. We can also solidify the community response by coordinating a Sexual Assault Response Team (SART). When you pull your SART together, try to think beyond the typical members to create a vibrant and diverse SART (look through the SART Toolkit for more info on SART development). When we write Memoranda of Understanding or other agreements with law enforcement and medical providers, we can specify sexual violence information and expectations in the agreement, or write separate agreements for the separate areas of our collaborative efforts. We can trade training with social service agencies on different issues, such as substance abuse or disabilities. Being open to training from our partners demonstrates our willingness to learn and listen.

It also gives us opportunities to listen to their needs and perspectives in a new way, opening new doors in our advocacy.

Rural work affords us many opportunities to build informal working relationships, every bit as important as our formal agreements. When you run into a law enforcement officer at the courthouse, strike up a conversation. Bring up a question about sexual violence, or give them your five-minute explanation of services. Carry brochures and giveaways with you, so you are ready to do a spot of training or institutional advocacy at the diner.

Community Rounds

Every quarter, make packets of information and agency promotional materials (pens, posters, etc). Send out individuals or teams to visit important community partners:

- every law enforcement agency
- social service providers
- grade schools, high schools, and colleges
- community health clinics, doctors’ offices, and dentists
- every hospital
- every prosecutor
- churches

Throughout the year, you can change the packets. For Sexual Assault Awareness Month, add information on SAAM activities or tips on how they can bring sexual assault awareness to their work. After the legislative session ends, prepare information on new sexual violence laws and their significance to law enforcement and prosecutors.
Strong dual/multi-service agencies listen to the community.

Strong dual/multi-service agencies listen to the community and continuously seek opportunities for community dialogue. Listening can happen through formal assessment of the community’s need for its services to victims of sexual violence, informal conversations, service evaluation, and starting dialogue with new people.

We gather, assess, and use information in our decisions every day, mostly in an informal or even unconscious manner. Deliberate and systematic data collection and use turns everyday fact collecting into productive program evaluation. With the right ingredients, community assessments and service evaluations can be powerful tools for success and growth. Sometimes it’s awkward to ask people to talk about sexual violence. Many programs find that community members have a lot to say about sexual violence, once we starting asking. As we listen to our community, we cannot assume that sexual violence is a part of the conversation unless we bring it up. Read the RSP publication, *Program Evaluation: Knowing is Half the Battle*, for more information on bringing evaluation into your work.

When we actively seek diversity in board members, employees and volunteers, we bring important and often unheard voices into the conversation. These voices bring new perspectives and strengths to our work to end violence. You might try reviewing your recruitment strategies and policies for Board members, employees, and volunteers. Sometimes our policies or strategies unwittingly send unwelcoming messages to marginalized communities. We can bring these unheard voices into our agencies first by making sure our agencies are fully welcoming and supportive of these voices.

We can also get creative in reaching new segments of the community. Pay attention to initiatives and projects led by survivors or other groups in your community. Bikers, for example, may coordinate a fundraiser to benefit your services, but they are not typically involved in our agencies. A survivor may courageously start speaking out about sexual violence or start her own organization. We may not always agree with how others speak about sexual violence, but that can strengthen the community dialogue by adding new perspectives. Sometimes, these groups and individuals, unconstrained by fiscal or legal obligations, can say things we cannot. These are great opportunities to explore new avenues of community conversation. How can we bring these voices together with ours? How can we provide harmonizing messages?

What questions about sexual violence do you want to ask your community?

What do they know about sexual violence that might be helpful to your agency?

How will you gather this knowledge in the next six months?
Strong dual/multi-service agencies have ongoing dialogue about sexual violence and oppression, develop culturally relevant policies, practices, and education programs, and help survivors find vital services that are culturally relevant.

Nobody exists outside the context of their culture or life experiences. Every day, we each have different experiences and struggles with various forms of oppression: racism, classism, homophobia, able-ism, and the like. Providing high-quality sexual assault services includes breaking down the barriers to serving survivors from underserved/marginalized/traditionally silenced communities. We do this work by having ongoing dialogue about sexual violence and oppression, developing culturally relevant policies, practices, and education programs, and helping survivors find vital services that are culturally relevant.

Our world is diverse. Every community is diverse, including rural communities. To reach survivors from all parts of the community, we must provide culturally relevant services. And we have to go to the people. We need to know what culturally specific outreach is and how to do it within or with these communities. We must actively seek diversity in our board members, employees, and volunteers.

All staff should understand the need and methods for delivering culturally relevant services. We can strengthen our advocacy by learning about culture and oppression. We can also strengthen our practice by making sure our facilities and services are accessible to everyone.

- Does your agency do specific community outreach and awareness building activities that are developed with and for traditionally underserved populations?

- Do you know what culturally relevant services look like in your community? How does your agency work with or support them?

- Do you have an awareness of the cultural diversity and demographics of your community, including communities of color, the LGBTQ community, and immigrant/refugee communities, among others?

- Do you have an understanding of prevalence, differences, risk factors and the effects of sexual violence in underserved populations in your community?

Many communities have culturally specific services: organizations that provide service to a specific population with staff members of that population. Many are private non-profit organizations, though some are part of tribal governments. These organizations or tribal governments may specifically provide services to violence survivors, or they may provide a range of community services. Mainstream advocacy organizations are not always the best service provider for every survivor. Sometimes, the best advocacy we can provide is supporting a culturally specific organization to provide their own advocacy. We can learn from their expertise while sharing our support.
Culturally competent advocates know that being an ally to marginalized or oppressed communities means showing up and being supportive. It takes time for communities to build trust with service providers, especially those of us in mainstream organizations. We can begin serving our whole community by getting to know new people. With your colleagues, make a plan to get to know new faces.

This week...
- Make a list of culturally specific organizations
- Make a list of community leaders from marginalized communities (pastors, organization managers, etc.)

This month...
- Visit one culturally specific community event (fair, meeting, religious service, etc.)
- Talk to one community leader about their community, not about your services

This year...
- Make a schedule of culturally specific community events to visit
- Redesign one practice of your agency to better suit a marginalized community (outreach techniques, hotline protocol, etc.)
Vicarious trauma is how our bodies, minds, spirits, and relationships react to and are impacted by the profound despair and pain we are witness to everyday when we work with survivors. Vicarious trauma is a cumulative process; it builds over time as we listen to the traumatic experiences of survivors. It affects our sense of safety, trust in ourselves and in others, self-esteem, ability to connect with others, and sense of control (Richardson, 2001). This work is difficult; it is important and fulfilling, but difficult. It’s no coincidence that the manifestations of vicarious trauma look very much like Rape Trauma or Post Traumatic Stress.

Many dual/multi-service agencies find that when they focus on enhancing their sexual violence work, staff are triggered by vicarious trauma in a different way than they are by domestic violence. This is totally normal. As we build our sexual assault services, it is imperative to have a plan that is both proactive and responsive to vicarious trauma experienced by staff and volunteers.

Do you have a support system in place within your agency to assist workers with any vicarious trauma they may experience? Organizational responses to vicarious trauma could include:

- Mentoring by experienced advocates
- Supervisor availability for debriefing
- Access to training
- Clear—and enforced—protocol on shifts, on-call work, and time off
- Safe working environments
- Access to self-care activities

What is your agency currently doing to prevent or mitigate vicarious trauma?

What policy on vicarious trauma would you like to institute?

What training on vicarious trauma can you offer?

The strength of advocates comes from being emotionally healthy and balanced. When we are healthy, we can bring our best self to the work every day. Individual advocates have a responsibility to manage their vicarious trauma in healthy ways. Organizations are responsible for creating policies, procedures, and a working environment that is safe and healthy for workers. For more information on organizational response to vicarious trauma, see Organizational Prevention of Vicarious Trauma. For more information on individual response to vicarious trauma, see Self-care and Trauma Work or Trauma Stewardship by Laura Van Dernoot Lipsky (2009).
Conclusion

Dual/multi-service advocacy agencies do amazing work for their community. The strategies discussed in this paper regarding organizational structure, staff training, and community partnerships will help you successfully balance programmatic needs and meet the unique needs of sexual violence survivors. By building your capacity for sexual violence survivors, you’ll be able to strengthen and deepen your amazing work and open your doors to more survivors.

With these ten organizational components, we can help survivors find their voices and reclaim their power. Just as survivors continue to grow in their strength, so too do we continue our learning and growing in advocacy.

Resources

Resource Sharing Project
http://www.resourcessharingproject.org/

National Sexual Violence Resource Center
http://www.nsvrc.org/

Strengthening Our Practice: The Ten Essential Strengths of Sexual Violence Victim Advocates in Dual/Multi-Service Advocacy Agencies
http://www.resourcessharingproject.org/rural-sexual-assault-services

Core Services and Characteristics of Rape Crisis Centers: A Review of State Services Standards (Second Edition)
http://www.resourcessharingproject.org/rural-sexual-assault-services

Building Comprehensive Sexual Assault Services Programs
http://nsvrc.org/publications/nsvrc-publications-articles/building-comprehensive-sexual-assault-programs

SART Toolkit
http://ovc.ncjrs.gov/sartkit/

Program Evaluation: Knowing is Half the Battle
http://resourcessharingproject.org/article-index/36-article-index/375-program-evaluation

Organizational Prevention of Vicarious Trauma
http://www.vawnet.org/Assoc_Files_VAWnet/PrevVicariousTrauma.pdf

Self-care and Trauma Work

References

