Integrating Prevention Strategies Into Organizations That Address Intimate Partner Violence

The DELTA PREP project works with 19 state-level domestic violence coalitions

SUMMARY

From 2007 to 2012, the National Foundation for the Centers for Disease Control and Prevention (CDC), in collaboration with the CDC, implemented the DELTA PREP project to prepare 19 state-level domestic violence coalitions to address primary prevention of intimate partner violence. The project built upon the CDC’s experience with its Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA) program, initiated in 2002.

CDC staff and consultants delivered training and technical assistance to grantee coalitions to plan and implement changes that would expand their capacity for primary prevention of intimate partner violence. Ronda Zakocs, PhD, MPH, of Insight Evaluation in Portland, Ore., led a cross-site evaluation of the initiative.

Key Results

The project and evaluation team documented these key results:

- Of the 19 coalitions, 18 expanded their organizational capacity for primary prevention, and 17 served as catalysts for improving primary prevention in their states.

- The coalitions documented 309 changes in their organizational structures, functions, and practices that increased their capacity to lead and support primary prevention in their states, and 162 capacity-building efforts related to prevention at the state and community levels.

- Follow-up interviews with all DELTA PREP grantees showed that their capacity to address prevention was being sustained and built upon.
The DELTA PREP Toolkit assembled tools, guidance, and lessons learned from the project to help organizations strengthen their ability to facilitate and lead efforts for primary prevention of intimate partner violence.

**Examples of Primary Prevention Activities**

- The Texas Council on Family Violence partnered with the Texas High School Coaches Association to implement the *Coaching Boys Into Men* program, which teaches coaches how to mentor young male athletes on intolerance of violence and mutual respect in healthy relationships.

- The Kentucky Domestic Violence coalition partnered with two Girl Scout Councils to adapt a *Green Dot* bystander program for use with children ages 5 through 8. The program encourages people to choose a new “Green Dot” behavior to counter a “red dot” of violence.

- The New Jersey Coalition for Battered Women reached out to local organizations working with this underserved population to integrate primary prevention into mentoring programs for boys.

For more examples, see [Examples of Coalition Strategies to Address Primary Prevention](#).

**Funding**

From December 2007 to June 2012, the Robert Wood Johnson Foundation (RWJF) funded this project with a grant of $3,185,156.

**CONTEXT**

The term *intimate partner violence* refers to physical, sexual, or emotional abuse by a current or former partner or spouse. In 2005, more than 1,110 women and 330 men died as a result of intimate partner violence.

That same year, CDC’s Behavioral Risk Factor Surveillance System collected data from more than 70,000 adults in 16 states and two territories on intimate partner violence victimization. Findings suggest that 26.4 percent of women and 15.9 percent of men were victims of physical or sexual intimate partner violence during their lifetime.

Intimate partner violence is linked with serious health problems for women, including chronic pain, reproductive disorders, depression, and post-traumatic stress disorder. Women who have experienced intimate partner violence are more likely to engage in other behaviors, such as drug abuse, alcoholism, and suicide attempts that can harm their health.

For 2003, CDC estimated medical and other costs associated with intimate partner violence against women as exceeding $5.8 billion annually.
The DELTA Program: A Focus on Prevention

Historically, domestic violence organizations have provided services to victims and worked to reduce the number of recurring assaults, but few have made primary prevention—stopping the first-time acts of intimate partner violence—a priority.

In 2002, the CDC launched Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA), an initiative to integrate primary prevention strategies into the work being done by state and local domestic violence coalitions.

The DELTA program considers the interplay of individual, relationship, community, and societal factors influencing violence and encourages comprehensive strategies to:

- Prevent first-time perpetration and victimization
- Reduce risk factors associated with intimate partner violence
- Promote protective factors that reduce the likelihood of intimate partner violence
- Implement evidence-supported strategies that incorporate behavior and social change theories
- Evaluate prevention strategies and use results to form future plans

Through the DELTA program, CDC was funding 14 state-level domestic violence coalitions to provide primary prevention training, technical assistance, and funding to community organizations.

RWJF’s Interest in This Area

The Vulnerable Populations Program Management Team identified intimate partner violence as a priority in 2007. Based on an extensive interaction with experts, the team elected to focus on primary prevention as a means to have a major impact on the problem.

In addition to the project described here, RWJF has funded:

- A $4.5 million national program, Strengthening What Works: Preventing Partner Violence in Immigrant Communities (2009–2013) that seeks to evaluate and enhance the evaluation capacity of community-based organizations using innovative and/or promising approaches to prevent intimate partner violence in immigrant and refugee communities in the United States. See Progress Report for more information.

- A $17.1 million national program, Start Strong, Building Healthy Teen Relationships (2007–2013) that targets 11- to 14-year-olds, and seeks to rally entire communities, including teens, parents, caregivers, educators, and community leaders to re-engineer environments to support healthy relationships and ensure that violence and abuse are never tolerated.
An array of grants (2008–2011) within the New Jersey Health Initiatives program focused on spreading the Safe Dates model within schools in the state. Designed for middle- and high-school students, Safe Dates can be part of a health education, family life skills, or general life skills curriculum. See Special Report on Safe Dates.

THE PROJECT

From 2007 to 2012, the National Foundation for the Centers for Disease Control and Prevention, in collaboration with the CDC, implemented the DELTA PREP project to:

- Build the organizational capacity of domestic violence coalitions to serve as catalysts for intimate partner violence primary prevention efforts in their states and communities
- Advance national efforts for primary prevention of intimate partner violence through strategic prevention partnerships and dissemination of project resources

The DELTA PREP project awarded three-year grants to 19 state coalitions that were not part of the CDC’s DELTA project. They represented organizations and individuals providing services related to intimate partner violence. The coalitions received grants of $15,000 to $25,000 per year to cover travel to training as well as staff and leadership time dedicated to DELTA PREP activities. Initially, the project team planned to expand the DELTA initiative to include the remaining 37 state-level coalitions not previously funded by DELTA, but not all applied, and some applicants were not ready to participate, the project team learned. Grant funds were then redirected to fund an evaluation of DELTA PREP and additional activities to support national prevention efforts.

The coalitions varied in size, with annual budgets ranging from $500,000 to more than $3 million, and paid staff ranging from six to 55. (See Appendix 1 for the list of the 19 DELTA PREP coalitions.)

For the most part, the coalitions had a long history and strong support in their communities for their work to serve and advocate for victims of intimate partner violence. But few had applied funds or staff to programs aimed at preventing such violence.

“Historically, they had been working more closely with the criminal justice system, mental health, law enforcement, and certainly health care providers in order to provide support services to victims and their families,” Project Director Pamela Brown said, “but not so much looking at how to address the issue before it ever happens, before the first incident occurs.”

Refocusing on prevention was a challenge for the coalitions, but mostly a welcome one. “We’ve always been reactive,” a program staff person with a 20-year-old domestic violence agency in Kentucky noted. “We’ve been hitting our heads against the wall.
We’ve never really made an effort to end it. Prevention is that effort to end it. It’s time to be proactive.”

An Indiana coalition leader agreed. “Clearly, we saw our numbers weren’t reducing... we weren’t making any significant impact, even though we were adjusting and doing work within the systems, we (realized) that we had to get in front of the problem.”

**Changing Organizational Language and Culture**

Many of the coalitions had focused their efforts specifically on violence against women and gender inequality. The CDC and consultants provided general training and technical assistance to help coalitions see the value of a public health approach that used gender-neutral terminology.

Many of the coalitions struggled to make this shift. Would they be addressing violence against women, domestic violence, or the broader intimate partner violence? As a Kentucky coalition leader noted, “We asked, ‘What were we ready to let go of? What were we ready to compromise on?’”

The shift involved more than semantics. The coalitions were being asked to adjust their mission as victim advocates and service providers to make room for prevention. Some coalition leaders were concerned that focusing on prevention would divert already limited resources from their main work. Coalitions also reported problems meshing crisis-driven intervention efforts with the more long-term strategic planning for prevention.

The CDC and consultants provided tools and assistance to helped coalition staff and leaders to:

- Assess how primary prevention fits within the coalition’s mission and scope of work
- Develop a planning process to guide them through setting primary prevention goals and action steps in annual cycles
• Incorporate primary prevention within the coalition’s structures, practices, partnerships, and state and community capacity-building efforts

To track the changes they made, coalitions used a Web-based workstation with program management tools, including an Online Documentation Support System. The CDC team and evaluators collected and analyzed information from project participants throughout the project so that they could respond immediately to what each coalition needed in order to make progress.

CDC staff and consultants, as well as staff of previous DELTA-funded coalitions who were tapped as “coaches,” provided ongoing technical assistance and support to the DELTA PREP coalitions throughout the grant period.

**Promoting Primary Prevention at the National Level**

The DELTA PREP project also worked at the national level with other organizations and agencies, as well as state domestic violence coalitions that were not part of DELTA or DELTA PREP, to create dialogue and shared learning experiences to promote the primary prevention of violence.

• The DELTA PREP team convened a national intimate partner violence prevention leadership committee that helped to facilitate national activities among DELTA PREP grantees and other state and community practitioners engaged in intimate partner violence prevention work. (For a list of the committee members, see Appendix 2.)

• DELTA PREP and Futures Without Violence, which was managing RWJF’s Start Strong program) conducted joint webinars for shared learning among the grantees in these projects.

• The CDC invited all state domestic violence coalitions to two National Prevention Symposia in May 2011 and May 2012. The meetings provided opportunities for DELTA PREP coalition staff to network with other state domestic violence coalitions, share experiences, and participate in state-of-the-art technology supports for violence prevention work.

• The team conducted a national survey of all coalitions, state health departments, and other national partners to inform DELTA PREP national efforts for promotion and dissemination of primary prevention information and products from DELTA PREP.

• The project team at the CDC gave presentations on DELTA PREP experiences at 11 national meetings, seminars, and conferences.
**Evaluation**

Zakocs of Insight Evaluation led a cross-site evaluation of the initiative. The evaluation team collected data from the 19 sites at three time points—prior to project initiation, during the project, and six months following the end of the project.

The data sources included coalition applications, the online documentation system, feedback memos, interviews, case studies of five coalitions, and an analysis of resources provided to grantees. The CDC and the coalitions used feedback from the mid-project evaluation to improve the implementation of their primary prevention programs.

“Implementation and Evaluation of the DELTA PREP Project: State Domestic Violence Coalitions Building Organizational Capacity to Serve as Catalysts or Intimate Partner Violence Primary Prevention,” to be published in the February 2014 supplemental issue of *Health Education & Behavior*, provides an overview of the project and evaluation. See the Bibliography.

**Other Funding**

The 14 original DELTA coalitions each applied approximately $25,000 of their funding through the CDC Family Violence and Prevention Services Fund (a total of $350,000) to support peer-to-peer and shared learning activities with the DELTA PREP projects.

The CDC Division of Violence Prevention provided $20,000 to design, produce, and distribute the DELTA PREP Practitioner DVD, which contains all of the resources in the DELTA PREP Toolkit.

**RESULTS**

The project team and evaluators reported the following results to RWJF:

- **Of the 19 coalitions, 18 expanded their organizational capacity for primary prevention:**

  - All implemented some structural changes, including codification of prevention priorities into governance documents, reorganization of boards, and addition of a prevention coordinator position and/or prevention department.

  - All implemented some functional changes by including prevention in policy agendas and communications, seeking resources for prevention activities, supporting member programs in building capacity for prevention, and building partnerships for collaboration on prevention.

  - Of the 18 coalitions, 14 implemented practice changes by incorporating prevention into cross-training, staff and board members orientations, job descriptions, and meeting agendas.
Overall, the coalitions documented 309 changes in their organizational structures, functions, and practices that increased their organizational capacity to lead and support primary prevention in their states.

The coalitions implemented 162 capacity-building efforts related to prevention at the state and community levels.

Of the 19 coalitions, 17 served as catalysts for primary prevention in their states. Staffing and functional changes in the areas of communication, development, partnerships, and member programs may be the most relevant to positioning coalitions in this role, the project team reported. Of the 17 coalitions:

- Eight aligned their prevention priorities with the state sexual assault coalitions to partner on prevention activities
- Nine implemented a prevention program with one or more partners
- Eight established a state-level committee to work on prevention
- Twelve supported intimate partner violence prevention awareness campaigns

Follow-up interviews with all DELTA PREP grantees showed that the prevention capacity is being sustained and built upon.

The team assembled the project tools and lessons learned in a practitioner DELTA PREP Toolkit (available online and, by request, on DVD) for use by organizations at the state and community levels. The kit contains:

- “Prevention Inventory of Organizational Changes and State/Community Activities to Build Capacity for Primary Prevention of Intimate Partner Violence,” a guidance document that the project team adapted\textsuperscript{1} for DELTA PREP.
- “Lessons from DELTA PREP Coalitions: Insights about Building Organizational Prevention Capacity,” a report from the team’s site visits with coalitions in Indiana, Iowa, Kentucky, Missouri, and Texas.
- Other instructional/resource materials, including the Coalition Prevention Capacity Assessment Survey and the Action Planning Workbook.

**Examples of Coalition Strategies to Address Primary Prevention**

**Engaging Men**

- The Texas Council on Family Violence partnered with the Texas High School Coaches Association to implement the *Coaching Boys Into Men* program, which

\textsuperscript{1} Materials originally developed for the CDC Foundation by the Work Group for Community Health and Development, University of Kansas.
teaches coaches how to mentor young male athletes on intolerance of violence and mutual respect in healthy relationships. Jane Doe, Inc., the Massachusetts coalition, has a similar program in partnership with the Interscholastic Athletic Association.

- The Iowa Coalition Against Domestic Violence partnered with the Iowa Men’s Action Network, a multicultural group of men from a variety of backgrounds committed to building safe communities. The partners share ideas for engaging men in the workplace in the primary prevention efforts.

- The Connecticut Council Against Domestic Violence used its First 100 annual event—honoring men from the community for efforts to raise awareness about domestic violence services—to build partnerships for prevention projects. Eight additional coalitions in the state adopted Purple Tie Tuesday, which encourages men to wear a purple tie during domestic violence awareness month.

### Engaging Youth

- The Kentucky Domestic Violence Coalition launched the Teens Talk program to increase the number of teens who identify themselves as agents of change in their communities. Teens participate in “Social Change and Empowerment” workshops, take a day to implement a social change project, and create short films/digital stories about their neighborhoods.

- The coalition also partnered with two Girl Scout Councils to adapt a Green Dot bystander program for use with children ages 5 through 8. The program encourages people to choose a new “Green Dot” behavior to counter a “red dot” of violence. When completed, the program will be able to reach youth from kindergarten to college and build community capacity for bystander strategies to prevent violence.

- The Indiana Coalition Against Domestic Violence engaged youth in creating a social marketing campaign in support of prevention policies directed at decision-makers such as administrators and teachers of local schools. Teens are working to get their peers around the state involved in coordinated prevention efforts.

### Reaching out to African American and Latino Communities

- The Minnesota Coalition for Battered Women worked on the African American Domestic Peace Project, a national initiative to engage the community in prevention-oriented conversations about domestic violence. The coalition collaborated with the University of Minnesota’s Institute on Domestic Violence in the African America Community on the production of the project’s national pilot webcast video.

- The New Jersey Coalition for Battered Women aims to increase prevention awareness among Latino men and boys. Through its member agencies, the coalition reached out to local organizations working with this underserved population to integrate primary prevention into mentoring programs for boys.
Using Social Marketing

- The District of Columbia Coalition Against Domestic Violence released a flash mob video during Domestic Violence Awareness Month in October 2011 that used dance and music to highlight the importance of healthy self-esteem and relationships.

- The Connecticut Council Against Domestic Violence set up a website—www.td411.org—focused on healthy teen dating relationships. The resource provides video clips, music downloads, tips, a quiz on healthy relationships, and stories from peers. Teens can download td411 as an app for their cell phones and access the website on Facebook.

LESSONS LEARNED

1. Understand the organizational structure and practices of potential grant recipients before setting up the selection process. The CDC originally proposed expansion of the DELTA program from 14 states to the entire nation. However, not all coalitions applied, and several of those that did were not ready to participate. (Project Director/Brown)

2. Recognize that agencies dealing with intimate partner violence will experience a “culture shift” when integrating primary prevention into their traditional mission of providing services to victims. The team adjusted project activities to introduce coalition members to public health prevention concepts and a gender-neutral approach, which helped to create a common prevention language among participants. (Project Director/Brown)

3. Continually monitor the coalitions’ progress so that necessary adjustments can be made. The project team used the “data-to-action” framework of rapid feedback cycles: they collected and analyzed information from project participants on an ongoing basis and then provided targeted coaching and technical assistance as needed. (Project Director/Brown)

4. Identify “champions” in each coalition who are committed to stay the course. “Leadership is absolutely key,” Project Director Brown noted. The champions need not be “hands on,” but they must be in a position to “empower other coalition members to have the time to really move things forward around organizational change.”

   The executive director of the Indiana Coalition Against Domestic Violence recalls a board member “pushing prevention at every (board) meeting and repeating, ‘If we are going to make a difference, we really need to think about incorporating prevention into our work.’ He pushed gently, but did not stop pushing.” (Lessons from DELTA PREP Coalitions report)

For lessons learned/recommendations made by the participating coalitions to others undertaking a similar effort, see Appendix 3.
AFTERWARD

Since the end of the grant period, the federal legislation that funds DELTA has been reauthorized. In March 2013, CDC selected 10 state domestic violence coalitions to receive funding as part of its new Domestic Violence Prevention Enhancements and Leadership Through Alliances, Focusing on Outcomes for Communities United with States (DELTA FOCUS) program.

The states are Alaska, California, Delaware, Florida, Idaho, Indiana, Michigan, North Carolina, Ohio, and Rhode Island. Of the 10 states, Idaho and Indiana were recipients of DELTA PREP grants through the RWJF-funded project; the remaining states were among the first DELTA grantees.

The experiences and lessons learned from both DELTA and DELTA PREP will inform the new generation of DELTA projects, Project Director Brown said.
APPENDIX 2

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APPENDIX 3

Lessons Learned/Recommendations

In *Lessons from Delta Prep Coalition: Insights about Building Organizational Capacity*, the project team reported these recommendations from the participating coalitions to others undertaking a similar effort:

**Resource Development/Fundraising**

- Expend operating funds to cover prevention coordinator salary and benefits if external resources are unavailable
- Actively research and pursue prevention-related grants
- Incorporate prevention into existing state and federal contracts
- Make use of federal service volunteer programs
- Recruit college interns
- Collaborate with partners to pool resources

**Communications**

- Expand website to highlight prevention work
- Create prevention-related materials such as fact sheets, resource lists and brochures and incorporate prevention messages into all existing materials
- Weave healthy relationship messages into Teen Dating Violence Awareness Month materials
• Create prevention-related social media, such as blogs, Twitter, and Facebook

**Member Programs**

• Include prevention services in statewide contracts with domestic violence programs
• Incorporate prevention services into member program certifications and standards
• Require prevention activities to be included in the Volunteers in Service to America (VISTA) assignment descriptions for local programs
• Integrate prevention concepts into core advocate/service training
• Provide on-site, individualized technical support
• Facilitate peer-to-peer learning
BIBLIOGRAPHY

(Current as of date of the report; as provided by the grantee organization; not verified by RWJF; items not available from RWJF.)

Article


Toolkits

DELTA PREP Toolkit: A Resource for Building Capacity for Primary Prevention of Intimate Partner Violence. Developed by CDC Foundation in collaboration with the CDC, Atlanta GA, 2012. Available online and, by request, on DVD.