



Moving Upstream

Virginia's Newsletter for the Primary Prevention of Sexual & Intimate Partner Violence

Welcome To Our 3rd Year!

Brad Perry, MA, Sexual Violence Prevention Coordinator
Virginia Sexual & Domestic Violence Action Alliance

Welcome to the first issue of our third volume of *Moving Upstream*. You might notice a slight change to the subtitle, "Virginia's Newsletter for the Primary Prevention of Sexual & Intimate Partner Violence". We have expanded the newsletter to encompass intimate partner violence as well as sexual violence. The topics for this year's issues of *Moving Upstream* will all address concepts and tools that can be of equal use to primary prevention of both sexual and intimate partner violence (SV/IPV).

This issue focuses on community development. The application of community development as a framework for planning and implementing primary SV/IPV prevention initiatives was pioneered by Gayle Stringer in the mid-1990's. Gayle, then a staff member of the Washington Coalition of Sexual Assault Programs (WCSAP), inspired a state, and eventually the entire nation with her innovative use of community development principles. Her work made WCSAP a leader in SV/IPV prevention, and heavily influenced the direction of the Center for Disease Control & Prevention's nation primary IPV prevention program, the DELTA Project.

The current Prevention Services Director at WCSAP, Lydia Guy, was kind enough to author an article about their application of community development to sexual violence prevention work. The theory outlined in her article is informed by 10 years of practice. Prior to joining the WCSAP staff, Lydia ran several local SV prevention initiatives in Washington State using the community development framework. There are few people in the world more qualified to write this article.

For readers new to the concept of community development, I hope this article is inspiring, thought-provoking, and a useful primer on the potential of this elegant framework. For readers already familiar with community development, I hope this article serves as a refresher and renews your passion for prevention work built by the people for the people.

Community Development: A promising practice for sexual violence prevention

Lydia Guy, Prevention Services Director
Washington Coalition of Sexual Assault Programs

Community development, informally called community building, is a broad term applied to the practices and academic disciplines of civic leaders, activists, involved citizens and professionals to improve various aspects of local communities. Community development seeks to empower individuals and groups of people by providing the skills they need to effect change in their own communities. Community development has been in existence from the first moment collective groups of community members attempted to change their communities through organized, collective efforts. As a distinct discipline, its origins can be traced to the early eighteenth century.

The work of the anti-rape movement during the 1970s can be viewed as community development. It was comprised of communities, primarily of women, looking at the issue of sexual violence, defining it in terms consistent with their life experiences, determining the underlying societal causes, and developing strategies. The strategies developed were both community

(Continued at the top of Page 3)

Volume 3, Issue 1
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Inside this issue:

Welcome To Our Third Year! 1

- Brad Perry

Community Development 1

- Lydia Guy

Funder's Forum: Stop It Now! Project comes to Tidewater 2

- Rebecca Odor

Promising Practice: Primary Prevention in Hampton 2

- Jenny Scherer



Funder's Forum

Stop It Now! Project comes to Tidewater

*Rebecca Odor, MSW, Director of Sexual & Domestic Violence Prevention
Division for Injury and Violence Prevention, VDH*



**Center for Injury &
Violence Prevention**

The Virginia Department of Health, in collaboration with YWCA Response of Norfolk and the Collins Center of Harrisonburg, will be supporting a Stop It Now! billboard and radio campaign in the Tidewater region in June. This campaign encourages those who suspect an adult or an older child may be touching a child in a sexual way to call the Stop It Now! Helpline. The helpline is confidential, staffed by professionals trained in handling to child sexual abuse cases, and will assist the caller in identifying options for responding. The campaign has been evaluated to be a success in the Richmond area, and was additionally run in the Shenandoah Valley and Southwest Virginia.

The Tidewater campaign will offer an additional element of a community dialog with a panel consisting of a survivor of child sexual abuse, a recovering offender, a police officer, a bystander, and a treatment provider. The community dialogue is a tremendous opportunity for victim advocacy agencies to mobilize the community around this issue. These dialogues can help reframe how to address child sexual abuse by presenting new ways to understand both perpetrator dynamics and the role of adults as agents of change, and by providing practical tools for recognizing warning signs and responding to both victims and potential perpetrators. This information has helped several sexual assault crisis centers put a new spin on public awareness about child sexual abuse, enabling them to impart the skills for recognizing risk factors and preventing child sexual abuse on a case-by-case basis. For more information about the campaign or the possibility of bringing a dialog to your community, contact Rebecca K. Odor at the Virginia Department of Health at 804-864-7740.

Promising Practices

Primary Prevention in Hampton:

Building Relationships for Work in Neighborhoods

*Jenny Scherer, DELTA Coordinator
Transitions Family Violence Services in Hampton, VA*

The Hampton Family Violence Prevention Council was initially awarded funding through the DELTA Project in 2003. Often dubbed an “experiment”, the DELTA Project of the Centers for Disease Control (CDC) funds local initiatives to prevent intimate partner violence through changing societal norms and building community partnerships. The CDC was pleased with the outcomes of our initiative at the end of the initial 3-year funding cycle, and decided to extend the project for an additional two years. This article focuses on the key element to planning and sustaining our DELTA initiative: community development.

When first presented with the opportunity to partake in primary prevention work, few members on the Hampton Family Violence Prevention Council (HFVPC) knew what to expect. Although members of the Council were involved in domestic violence prevention, our work revolved around tertiary prevention and secondary prevention as we mostly worked with victims and abusers. Primary prevention was a new concept that was hard for many to grasp. Primary prevention literally was a change in mindset on how to approach intimate partner violence.

From the onset of the DELTA Project, the CDC made it clear that community development was vital to the success of the initiative. Partnerships would have to be formed and relationships developed in order for the project to move forward. One of our initial steps was to determine a population and setting on which to base our primary prevention plan. Knowing that the City of Hampton was unique in that we had a neighborhood office, the Council decided to work with communities of color in specific neighborhoods. The HFVPC recognized the important role the Hampton Neighborhood Office would play if we selected neighborhoods as our setting.

The next step was to contact the Hampton Neighborhood Office, as they would be instrumental in helping us select a neighborhood. The Hampton Neighborhood Office was ecstatic to help us as they listened to the dynamics of the project. A representative met with us to determine the neighborhood in which the project would be most successful. As outlined in the CDC requirements, we were prohibited from selecting a neighborhood based on the prevalence of intimate partner violence. Instead, we were encouraged to select a neighborhood that is active in the community and has a strong organizational structure. The representative from the Hampton Neighborhood Office listed all neighborhoods in the city and the pros and cons to working with each. We narrowed our search down to three neighborhoods and ultimately decided to work with Aberdeen Gardens Historic and Civic Association (hereafter referred to as Aberdeen).

The Hampton Neighborhood Office suggested we focus the Delta Project in Aberdeen based on the strong, organizational structure of the neighborhood. Aberdeen is very active in the community and has won several awards for Best Neighborhood of the Year. We additionally surmised that the project would be most successful in Aberdeen based on the following factors:

- Aberdeen is mostly made up of people of color

Community Development (continued from Page 1)

specific and wide-ranging: from speak-outs to crisis lines. Over the last thirty years, certain services became defined as best practice; eventually these practices were standardized, and the current sexual assault service delivery system was developed. Many of the initial leaders of the anti-rape movement were young, formally educated, heterosexual white women, and as such many of the services that became standardized were most effective within these demographics. An unintentional outcome of the standardization was under-representation of many historically marginalized communities.

In Washington State, there was an acknowledgment of the importance of community specificity and inclusion of community development, even within the context of standardization. The 1997 Sexual Assault Prevention Plan for Washington State included the following goal: “To impact the underlying causes of sexual violence through the shifting of ownership of solution from social services to the community using a community development approach.” Based on this commitment to community ownership, resources were allocated within the state to specifically focus on sexual violence prevention utilizing a community development approach.

The specific framework chosen was William Loftquist’s interpretation of the community development framework. A decision was made to test the validity of the framework and its adaptation to sexual violence through three-year demonstration projects. At the end of the pilot period, the Office of Crime Victims Advocacy (OCVA) concluded that community development was a viable sexual violence prevention strategy and adopted it as one of the core services provided by its rape crisis centers.

Community Development Overview

The framework consists of seven steps: Stakeholder Recruitment, Determination of Underlying Conditions, Community Assessment, Plan Development, Development of Evaluation Plan, Plan Implementation and Evaluation. Although the steps are depicted as sequential, their application is more fluid.

Stakeholder Recruitment

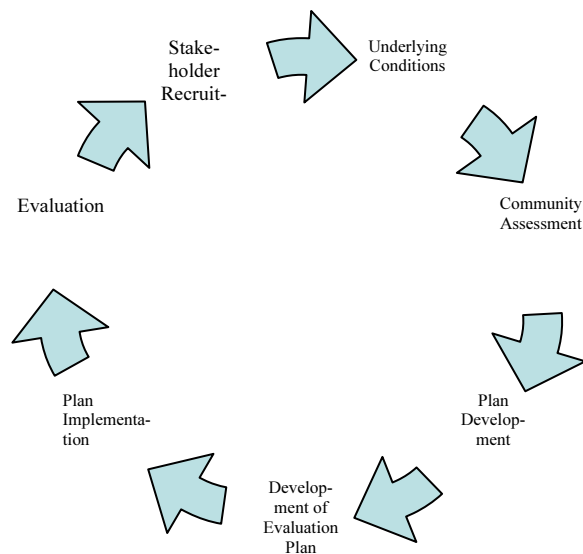
The inherent assumption in the community development process is that a community of committed people, familiar with their community and willing to enter into a process to seek a solution to a given social problem, will create the optimum intervention. The stakeholder recruitment process is the first step in encouraging this process. As a community development facilitator, your role is to identify individuals who are pivotal in the life of the community. Stakeholders may possess individual and/or institutional power – each is of equal importance. Their strength lies in their sense of community ownership and personal conviction. These individuals should not be chosen based on their ability to conform to a specific analysis of the issue, but rather on their ability to enter into a thoughtful and respectful dialogue. It is important to include stakeholders who represent the true diversity (whatever that may be) of the community.

The recruitment process can be as formal as sending invitations to attend a community meeting or as informal as meeting for coffee. However, the ultimate success of the process will depend on your ability to personally engage potential stakeholders. During the recruitment process it is very common to receive recommendations of individuals for whom it will be crucial for you to connect; these individuals may have been previously unidentified. All communities will include individuals who can help or hinder any attempts to change the dynamics within that community. The stakeholder recruitment process is the mechanism by which these individuals are identified and encouraged to participate in the process. If they are unwilling or unable to participate in the process, it will be of utmost importance to encourage them to be an ally or at the very least a benign presence.

Identification of Underlying Conditions

Interventions are often focused on fixing the “problem.” As social services providers, clinicians and rape crisis advocates, we have developed an impressive array of problem-solving techniques. Our interventions are often focused on solving problems at the micro (individual), mezzo (community) and macro (societal) levels. The focus of a community development process is to emphasize the underlying conditions, as determined by the community stakeholders, contributing to the problem as opposed to the problem itself (observable symptom). Directing the intervention toward the underlying conditions will create greater change than addressing the reoccurring symp-

“Community development seeks to empower individuals and groups of people by providing the skills they need to effect change in their own communities...to impact the underlying causes of sexual violence through the shifting of ownership of solution from social services to the community”





“How would we like our community to look, feel and behave if the given societal problem did not exist?”



“This [question] requires a leap of faith and a fundamental belief that all communities possess strengths and protective factors to enable them to enact societal controls, which can transform our communities into happy, healthful, nurturing entities.”

Community Development (continued from Page 3)

toms, much like the old adage: “Give a man a fish and he will eat for a day. Teach a man to fish and he will eat for a lifetime.”

The first step in determining the underlying conditions is to facilitate a process that creates a list of the “observable symptoms”. A group brainstorm is often the most effective tool. The theme of the question most often used to generate the brainstorm in relation to sexual violence is, “How is sexual violence currently manifested in our community?” The answers are the symptoms of the current community (sometimes referred to as condition “A”). The theme of the follow up question used to generate the underlying conditions is, “What causes each of these symptoms?” The resulting conversation should generate a complex analysis of the underlying conditions contributing to sexual violence. As a community development facilitator it is extremely important to encourage an open and honest discourse. If individuals are unable to share their perceptions of the causal conditions of sexual violence, then by definition the strategies developed will be flawed. The final step is for the group to prioritize the conditions based upon perceptions of importance and the opportunity to create change.

Community Assessment

Community development is not fundamentally about what went wrong but rather what we can make right. The first two steps in the process were about reaching consensus regarding the scope, prevalence and nature of the current situation. The needs-assessment step compels us toward a paradigm shift: How would we like our community to look, feel and behave if the given societal problem did not exist? This requires a leap of faith and a fundamental belief that all communities possess strengths and protective factors to enable them to enact societal controls, which can transform our communities into happy, healthful, nurturing entities.

To complete this task, we must facilitate a process to determine what types of things we would observe in our utopian environment, and then document these items. This list should be as specific and concrete as possible, and it should be framed as a positive, not as the lack of a negative. For instance, we would describe brightness as having the presence of light, not as the absence

of darkness. From a facilitation process this can be extremely difficult. We are encouraging stakeholders to engage in a visioning process, which can oftentimes be overwhelming. It is important to provide structure and clarity throughout the facilitation of this exercise. This state is sometimes referred to as condition “B” or, more simply, the vision of the community development initiative.

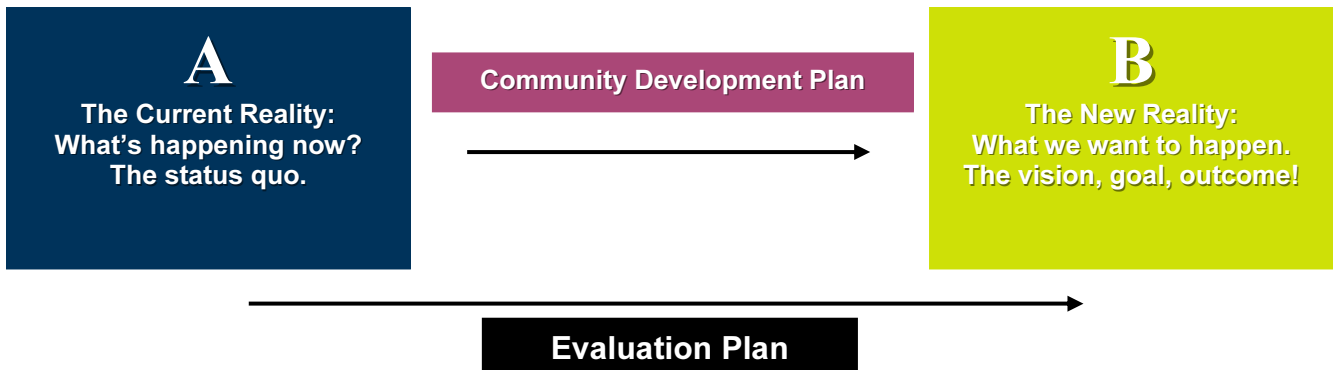
The next step is to place condition “A,” our current underlying conditions, on one end of a continuum and then place our condition “B,” our vision, on the opposite end of the same continuum. By juxtaposing conditions A and B, we ask ourselves the question, “What is it we need to accomplish to get from A to B?” This portion of the process is less about visioning and more about evaluating the underlying conditions in comparison to our stated vision; this evaluation allows us to accurately assess the community’s needs. This step marks the transition from conceptualization to actualization. As community development facilitator, it is extremely important to make sure that every identified need directly correlates with an underlying condition as well as with the defined vision.

Plan Development

Frequently we are rewarded for our ability to react quickly and decisively in a situation. For those who have worked in fields directly related to crisis intervention, it has been our ability to improvise and our capacity for action, activity, and movement that has allowed us to flourish. It is not uncommon to view planning time as a luxury. In a well-balanced community development initiative, the development of the plan is not a luxury but an absolute necessity and builds on our prior work. Typically, when we make a plan we ask ourselves the five “W”s: Who, What, When, Why and Where. Many of these components have already been addressed:

Who: The *stakeholder recruitment* process has helped us identify the active participants, as well as necessary allies. Due to the fluid nature of community process we have also most likely determined additional individuals and roles that will be necessary to enact our plan effectively.

What: The *community assessment and underlying conditions* exercises defined what we need to accomplish in broad strokes. We won’t have the specifics, but we do have a starting point, an ending point and specific items we need to address to reach our vision.



Why: *The underlying condition and community assessment* exercises have helped us create a common understanding of the scope, prevalence and underlying conditions contributing to sexual violence, along with a common vision to work toward ending it.

“When” and “Where” generate the specifics associated with creating a cohesive plan. From a facilitation standpoint this activity is by far the most difficult. Up until this point many of the discussions will have been theoretical. The development of the plan requires solidification. It will be necessary for the facilitator to encourage the stakeholders to include concepts such as practicality, resource allocation, and expediency in their conversations. As a facilitator, it is a difficult balancing act to maintain the enthusiasm of the group while moving them toward a plan that is clear, concise, and easy to follow. It is, however, essential. The effective implementation of the plan is dependent on the ability of every stakeholder to understand and communicate the plan in its entirety, and to act upon the components for which they are directly responsible.

Due to the open-ended nature of community process, the exuberance of the participants combined with the scope, nature and prevalence of sexual violence, there is a tendency to create plans that are unwieldy or over-intricate. In this case it will be necessary for stakeholders to embark upon an additional step of separating the plan into short, medium, and long-term goals.

Development of an Evaluation Tool

For many of us, evaluation tools and processes seem punitive and a misallocation of limited resources. However, evaluation in and of itself is benign. Through our avoidance of evaluation we allow others to define the parameters and type of evaluation that will take place. This disconnect has resulted in the negative experi-

ences and feelings many of us have regarding evaluation. Evaluation conducted correctly can be a positive experience. Evaluation and self reflection are integral to the community development process. They allows us to determine if we identified the correct underlying conditions, set reasonable goals, and developed effective plans. When we evaluate, we are able to see our progress from the existing condition “A” to our desired condition “B.” We can celebrate our success, as well as implement mid-course corrections, if it appears we are moving in the wrong direction. As community development facilitators, it is necessary for us to begin to embrace evaluation. There are many assessment tools. It is not necessarily important which method you choose, but that the method is integrated into your initiative.

Plan Implementation

It is almost impossible to provide direction on how to implement the plan. Each community will have different strengths, challenges, resiliencies, communication styles, interpersonal dynamics, timelines and strategies to address sexual violence within that particular community. The core belief that is necessary, however, is that you view your stakeholders and community members as valuable resources.

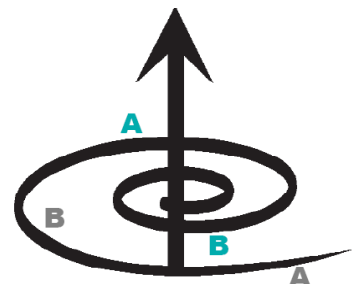
Evaluation

Evaluating a community development initiative is the process of applying the evaluation plan to the project plan. As the evaluation plan is developed, indicators are identified. These indicators are usually categorized as short, medium, or long-term goals. Evaluating progress based upon a range of indicators can provide positive reinforcement when you are heading in the right direction, as well as allow for mid-course correction if it seems we have gone off-track. In evaluation, it is important



Lydia Guy, WCSAP

“Community development is by definition a process. Healthy communities, just like healthy individuals, are always in the process of learning and growing.”



For more info about WCSAP's prevention projects, check out: www.wcsap.org/prevention



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Building Relationships for Work in Neighborhoods (continued from Page 2)

- The Hampton Neighborhood Office identified Aberdeen as the neighborhood with the strongest organizational structure
- Aberdeen has a strong reciprocal relationship with the Hampton Neighborhood Office
- The Commonwealth's Attorney, who was also Chair of the HFVPC, had established a relationship with neighborhood leaders
- Aberdeen has an annual event
- Several organizations and schools reside in the neighborhood.

Our next step was to request that Aberdeen adopt the Delta Project in their neighborhood. On the recommendation from the Hampton Neighborhood Office, Commonwealth Attorney Linda Curtis drafted a letter to Roosevelt Wilson, President of Aberdeen Gardens Historic & Civic Association. Mr. Wilson invited key members of the HFVPC to meet with representatives from Aberdeen to discuss the project further. Mr. Wilson and the Aberdeen community committed to working with the Delta Project. Sandra Cary, Director of Projects for Aberdeen, was assigned to work with us.

Aberdeen was very excited to work on this new and innovative project. Our first event was at "Deen Day" where we participated in a parade, distributed healthy relationship surveys, and spoke to residents about the project. Thereafter, a subcommittee was formed to implement each level of the prevention plan. The subcommittee meets monthly, and although participation from Aberdeen residents tends to vary, Ms. Cary remains dedicated to the project.

In June 2006, Aberdeen and the HFVPC established the first "Healthy Relationships Month" in the city of Hampton. During the course of the month, a proclamation was read at City Council and accepted by Mr. Wilson and several members of Aberdeen. We also held our first "Community Forum" where residents gathered to discuss healthy relationships and determine avenues in which we could involve each sector of the community in the DELTA Project. From the Community Forum, a relationship was established with the coaches of the Aberdeen Athletic Association resulting in a mentorship program with coaches and teen athletes planned for summer 2007.

Relationship building is, without a doubt, the most significant step in community development. In reality, each step is contingent upon the relationships formed. Relationship building is an ongoing process and must be maintained throughout the project. As DELTA focuses on healthy relationships between intimate partners, healthy relationships must also be formed within the community to be served. As in the Hampton Delta Project, relationships were first established with key stakeholders in Hampton Neighborhood Office and Aberdeen, and eventually trickled down to other residents in the community.

Community Development (continued from Page 5)

to take notice of whether or not we have implemented our plan as initially designed. A successful outcome of an evaluation can determine that a particular strategy is not effective; we can use that information to inform the next application of the project plan.

...and back to the beginning

Perhaps you were able to complete all aspects of your plan as designed and all of the components were as successful as you would have liked. However, it is more likely that some portions of your plan were successful, while other aspects were less effective than initially hoped. Either way, the intervention has changed the community in some way. You now have a new "Condition A," the current reality, and it is time to determine a new goal and vision: "Condition B." After you have implemented and evaluated your plan, it is time to begin again. Community development is by definition a process. Healthy communities, just like healthy individuals, are always in the process of learning and growing.

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- 2) *Sexual Assault Prevention Plan for Washington State, Office of Crime Victims Advocacy Department of Community, Trade and Economic Development and Washington State Department of Health* by the Washington State Institute for Public Policy. The Evergreen State College, August 1997.
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