

Key Project Concepts*

SVJI's National Technical Assistance Sites



Four multidisciplinary teams working to improve their community's response to sexual violence are being sought by the Sexual Violence Justice Institute @ MNCASA for their National Technical Assistance Project. Application materials are available at <http://www.mncasa.org/svji.html> and the submission deadline is October 3rd, 2008. The information that follows provides an overview of the project's key concepts. Other details about the project are available at the above website or by calling 800-964-8847.

Sexual Violence Justice Institute's Core Intervention Principles

Sexual Assault Response Teams¹ work to improve a community's response to sexual violence by designing multidisciplinary, victim-centered interventions. Through various tools and training, these teams influence the response patterns of participating members and their agencies. The team's goal is an adaptive and self-correcting system which seeks good case outcomes through a victim-centered approach. A victim-centered approach attends to victim agency (supporting victims in a way that helps them to make their own best decisions), victim safety, offender accountability, and changing community norms which blame and silence victims. Assumptions underlying our work include:

1. **Victims/survivors are not to blame for being sexually assaulted.** They did not 'provoke' the abuse or assault. Interventions should focus on changing the offender's behavior and/or improving the system and community response, not changing the victims/survivor. When they DO report, cases should be vigorously investigated.
2. **Victims/survivors best know what decisions are right for themselves in the context of the unique circumstances of their lives.** Assistance should be geared to providing information and support to help in decision-making relative to the victims/survivor's own goals of establishing safety, healing, and seeking justice. Informed decision-making means the victims/survivor knows what could be gained or lost in the options available to him or her. While all responders should facilitate victim agency, victims/survivors should have repeated access to free and confidential advocacy services to help guarantee it.
3. **Recognize that sexual violence affects each individual differently.** Responders should be especially aware of the differential impact that sexual violence has

¹ These teams are known by various names including, Sexual Assault Interagency Councils (SAIC), Sexual Assault Multidisciplinary Response Teams (SMART), Sexual Assault Response Team (SART) and sometimes Coordinated Community Response teams.

on non-majority community members. Responders should consider specific ways to increase safety and accessibility that account for these differences.

4. **Each responder has a unique role to play in the response.** A coordinated interdisciplinary response that supports and recognizes these roles—including that of victim advocates—is good for victims/survivors AND for community and public safety. Victims/survivors are best served when responders fulfill their roles with high degrees of skill, compassion, and coordination/collaboration with other responders.
5. **Interdisciplinary teams need to learn** about the current response, **design** interventions, and **monitor and evaluate** their interventions **together**. The overall process must involve times when the *team solicits information and insight from those outside the team—including victims/survivors themselves* and the people they most often turn to in a community.

Those teams selected to work closely with the Sexual Violence Justice Institute as part of the National Technical Assistance Project will work with the above principles in the context of their team's efforts. The following information is designed to give an overview of the structure of this joint project.

The Multidisciplinary Sexual Assault Response Team

The five primary disciplines involved in sexual assault cases--law enforcement, medicine, prosecution, corrections, and victim services--are the primary disciplines represented on the multidisciplinary team. It is a multi-disciplinary/interagency, victim-centered group responsible for the following:

- Formalizing the Multidisciplinary Sexual Assault Response Team;
- Defining the "victim-centered" approach to protocol development;
- Developing a shared vision and defining the team's mission;
- Identifying the shared desired outcomes of protocol implementation;
- Performing an 'Inventory of Existing Services' within the community;
- Conducting a 'Community Needs Assessment' for responding to sexual assault;
- Developing a work plan for protocol adaptation and implementation; and
- Creating evaluation tools for assessing the effectiveness of protocol adaptation and implementation.

In accordance with Violence Against Women Act funding goals, the team must strive to increase women's safety; and develop or improve the delivery of services for

American Indian women and other racial, cultural, ethnic, and language minorities throughout all aspects of their work.

Benefits of Community Participation in Protocol Development

The concept of sexual assault as a community concern serves as the starting point for transforming the criminal justice system's response to sexual assault. In the context of community responsibility for addressing the issues of sexual assault, the set of respondents may be enlarged beyond the traditional criminal justice system. By extending the responsibility for sexual assault response to the *community*, criminal justice agencies expand the resources they may mobilize to assist victims.

A victim-centered system begins with a core of criminal justice agencies, health care facilities and victim service organizations, with appropriate linkage to other service providers in the community. A victim-centered system is also one prepared to provide an effective response to anyone who is victimized. Therefore, efforts must be made to ensure accessibility and cultural competency in developing or improving the delivery of services. Because each community is unique in its matrix of services, the composition of the multidisciplinary sexual assault response team will reflect the uniqueness of the areas being served.

Examining Critical Concepts - Sexual Assault and Protocol

In order for each multidisciplinary team to create their protocol for addressing the problem of sexual assault, members of each team must understand a common definition for sexual assault and what defines protocol. The project suggests that a broad definition of sexual assault be used by teams to protect victims from a wide spectrum of unwanted sexual behavior. The team's definition of sexual assault should incorporate the following elements: gender neutrality, specification of proscribed acts, protection of the individual's right of choice, and preservation of privacy and confidentiality of victims.

Whenever the word *protocol* is used in the program, it means the product of negotiations in which agreements are made and documented to create guidelines and assign roles and responsibilities for participating agencies represented on the team. This definition incorporates several elements: product, negotiations, agreements, documentation, guidelines and roles.

Interagency Council Protocol Development

This describes the systematic process of information collection, analysis and consensus building under the leadership of the team. It also describes protocol development as an eight step-process:

1. **Inventory of Existing Services** to catalog all of the services available to assist sexual assault victims.
2. **Victim Experience Survey** to determine how victims feel about their experiences with the available services.
3. **Community Needs Assessment** to provide the team's analysis of the needs of sexual assault victims is derived from the Inventory of Existing Services and Victim Satisfaction Surveys as well as from information obtained from the Public Hearings.
4. **Writing Protocol** to identify the:
 - Shared desired outcomes;
 - Interactions and processes needed with respect to information, personnel, and resources in order to achieve the desired outcomes;
 - Tasks necessary to achieve these outcomes;
 - Procedures for carrying out specific tasks;
 - Primary parties responsible for these tasks; and
 - Secondary roles other agencies will have, if any.
5. **Renew Interagency Agreements** which were reached when the team was created to commit each agency and organization to fulfilling its responsibilities as specified in the protocol.
6. **Training** to prepare all agency personnel affected by the protocol to implement their responsibilities and work collaboratively.
7. **Monitoring** protocol implementation to determine the experiences of sexual assault victim/survivors as they move through the system and to determine the protocol's impact on the agencies providing services to victims/survivors. Do system personnel understand how their role contributes to the team's vision, and do they align the performance of their duties with this understanding? How are relationships developing to ensure movement toward the desired outcomes? Is

information that is needed to accomplish the desired outcomes being shared throughout the system?

8. **Evaluation** by the team to assess the impact of the protocol on reaching the desired outcomes. Has the protocol produced better results in the system?
Does the system continue to learn and improve from the feedback received?
Can it provide flexibility to allow the system to adapt and change as needed?
Will it sustain continual improvement?

Protocol development is a cyclical process with the results of monitoring and evaluation of each completed cycle used during the next cycle as the basis for making adjustments to the protocol.

Implementation Issues for the Team

The key to implementation is to organize around the shared vision and mission. With this focus organizational structure will emerge with task groups to address training, monitoring and evaluation. There are specific implementation strategies such as pilot programs, system phase-in, geographic implementation and “just doing it.” Irrespective of the implementation strategy (or combination of strategies) selected by the team, the need for a step-by-step plan with target dates for full protocol implementation is critical.

Training for implementation of the multidisciplinary team protocol is also important. The focus should be on developing the specific skills and knowledge necessary to create and maintain an interactive system which can implement the protocol.

Another set of implementation issues are those related to the evaluation of the protocol’s impact. The team needs to learn ways to measure and evaluate all aspects of its work to determine the effectiveness of the protocol in moving toward its shared vision. What the team learns from this on-going evaluation can be used to consistently improve the system response, supporting its ability to adapt and evolve to face the new and growing challenges every system encounters as it strives to keep women safe.

*Based on information found in *Looking Back, Moving Forward: A Guidebook for Communities Responding to Sexual Assault*, Grant No. 91-DD-CX-K038, made possible by a grant from the U.S. Department of Justice, Office for Victims of Crime and Bureau of Justice Assistance. Information is also found in *Improving Community Response to Crime Victims: An Eight-Step Model for Developing Protocol* (Boles & Patterson, Sage 1997).