The Violence Against Women Act reauthorization of 2013 directed state administrators of STOP funds to set aside 20 percent of their funds for programs or projects that meaningfully address sexual assault. The Sexual Violence Justice Institute (SVJI) is sharing Michigan’s experience in addressing this challenge because it offers a number of lessons for STOP Administrators to consider as they attempt to meaningfully address sexual violence in their communities.

Michigan’s experience is one of assessing the status quo and successfully shifting some well-established patterns. Shifts of this scale are never the result of a single person’s actions. Debi Cain, the Executive Director of the legislatively created Michigan Domestic and Sexual Violence Prevention and Treatment Board (the Board)¹ is clear about this point. At the same time, leadership can and does matter. By remaining adaptive and finding other strategies to address the problems she saw, Debi demonstrated that challenging the status quo can lead to meaningful statewide change.

“I didn’t anticipate it, but they freaked out, which I get now. What I was proposing would have totally changed the landscape.”

Debi Cain, Michigan STOP Administrator

SVJI.org
An Overview of the Context

In April 2011, Debi presented a proposal to change Michigan’s funding formula for distributing VAWA STOP funds in anticipation of the change coming with the VAWA 2013 set-aside. If successful, the next step would be to present it as a recommendation to the Board that would make the ultimate decision. She had expected questions and debate around her proposal, but hadn’t anticipated the strong reactions from many of the agency directors that immediately followed. The agency directors were concerned that, in a time when the state was struggling economically, an increase in funding for sexual violence services would decrease funds for domestic violence services. Considering this feedback, Debi and her staff paused and re-focused the effort on a broader question of:

How can we support, enhance, and further develop sexual assault services across Michigan?

To do so, they decided to take a step back from focusing on the VAWA 2013 set-aside and engage a small group of program directors from high quality sexual assault programs in the state and the Michigan Coalition to End Domestic and Sexual Violence (MCADSV) in a series of Sexual Assault Think Tanks. Prior to these meetings, Debi and the MCADSV leadership agreed their role would be to listen, ask clarifying questions, and take notes in order to understand where they, as leaders, needed to focus their efforts.

At the first Think Tank in June 2011, the attendees established a goal for their conversations: To support current efforts to provide sexual assault services in Michigan and support efforts to enhance and develop sexual assault services across the state. Together they generated a number of questions that needed to be considered:

Facilitating Change

- What do quality sexual assault services look like in the context of dual agencies?
- What are potential program models?
What training and guidance is needed? What is available?
Should sexual assault services be regionalized?
How can we assist anyone providing sexual assault services to be competent in crisis intervention in sexual assault?
How do we build organizational capacity and leadership to do this well?
How can we avoid the silos that our funding streams create?

In order to show their commitment to support and grow sexual assault services, Debi immediately directed her staff to start the process of changing the name of The Michigan Domestic Violence Prevention and Treatment Board that had been created by the Michigan Legislature in 1978. The Act that created the Board also provided for staffing and enumerated substantial duties, all of which were aimed at preventing and treating domestic violence. Michigan’s governor appointed the Board members to which Debi reported. While the Board had been working on sexual violence issues for many years, the name had not changed. Executive Order 2012-17 was signed into law in December 2012 and the Board became the Michigan Domestic and Sexual Violence Prevention and Treatment Board.

As they reflected on the change in 2013, Board staff said the change was more than symbolic. They believed it raised the visibility of the Board’s expertise on sexual assault, increased the focus on sexual assault issues, and made it easier to apply for sexual assault related funding. It also signaled to others in and outside of state government that the Board was officially charged with addressing sexual assault, lending additional credibility to its efforts. In retrospect, the name change aligned with the priorities that emerged at the next Think Tank meeting.

At the second Think Tank in September 2011, the attendees reviewed the themes that had been previously identified by the group, voted on priorities, and prepared to present their analysis to the larger group of agency directors in November 2011. The five top priorities became:

**Priorities**
- Building skills in addressing sexual violence in multiple contexts,
- Infusing the value of providing meaningful support to sexual violence victim/survivors at all levels of leadership,
- Reigniting passion and commitment in the movement and elevating public discourse,
- Supporting each other in the larger service community, and
- Including more specific sexual assault related information in the standards.
Steps Towards Meaningful

Out of the Think Tanks came a shared sense of purpose around supporting and enhancing existing efforts to address sexual assault in Michigan. At the same time, it quickly became clear to Debi and others that new strategies needed to precede new funding. What they learned led Debi, her agency, and the Board, to reconsider the tools they already had in place that could be used to promote more meaningful work by grantees. They identified:

Supports

- Making existing quality assurance standards explicit to sexual assault response, challenging the understanding of what is truly a dual program;
- Raising expectations of what would be looked for in proposals with regard to sexual assault; and
- Providing more technical assistance and training on sexual assault response topics.

A tangible outcome of the Think Tanks was the identification of a range of service delivery models for sexual assault services. These models established a continuum of services, ranging from full-scale sexual assault-specific services to a dual or multi-service program that responds to sexual assault within the context of domestic violence. With this information, the Board and Coalition decided to craft a short survey and administer it to agency directors across the state to illuminate the degree to which existing sexual assault programming currently fit these models, opportunities for growth, as well as barriers and needs for supporting domestic violence and sexual assault programming.

Debi and the Board also made a clear determination that providing services for sexual assault occurring in the context of intimate partner violence was part of what it meant to provide comprehensive domestic violence services with domestic violence related funding. To be a true dual service agency, funded with both domestic violence and sexual assault related funding, agencies would need to provide services for non-intimate partner sexual violence (IPSV) survivors of sexual assault as well (e.g. non-stranger sexual assault survivors, adult survivors of childhood sexual abuse, survivors of sexual assault by strangers, survivors of drug and alcohol facilitated sexual assault, etc.).
The 2011 conversations and follow-up actions sparked changes by local programs in a way that earlier projects and training across Michigan had not. At a third Think Tank held in September 2013, several agency directors commented on concrete changes they had seen or made at the local level, for example:

**Changes**
- Rethinking new service provider training to look at sexual assault.
- Increased resolve not to silo and broaden the discussion to address violence against women as a major issue.
- Reframing agency staff meetings to highlight sexual assault information.
- Being far more inclusive of male victims—especially men with disabilities.
- Reviewing case management and sexual assault referrals in-house.

By 2015, additional changes had become apparent across Michigan. In a regional tour Debi took as the Director, she noted that staff in programs not receiving sexual assault related funding were talking about the work they were doing to address sexual assault; they had taken it up on their own by using other available funding.

**A Program Impacted**
The director of the program in Alpena, Michigan, left the 2011 conversations and follow-up work with a determination to as the larger question of her staff and board, “Are we serious about providing sexual assault services?” They regrouped, renewed their commitment, and received the technical assistance they requested from MDSVPTB to help them improve. Their combined commitment to turn their program around positioned them to be selected for the Sexual Assault Demonstration Initiative eighteen months later.
Lessons Learned

Compliance with the set aside dollar amounts does not necessarily translate into the needed breadth and depth of sexual assault related work among agencies. Ronald Heifetz, Professor at the Kennedy School of Government at Harvard, makes the distinction between technical and adaptive challenges. Technical challenges are generally solved by an improvement in current practices. Adaptive challenges have no known outcomes and require a deeper questioning of fundamental assumptions and values. Solving adaptive challenges requires significantly more effort, a tolerance for uncertainty, and the presence of divergent voices. In other words, Debi had initially tried to use a technical solution (changing Michigan’s funding formula for distributing VAWA STOP funds) to an adaptive challenge (strengthening sexual violence services across the state).

The Michigan case offers a number of lessons that STOP administrators might consider in meaningfully addressing sexual assault in their communities.

1. **Make it clear that services to survivors of IPSV are an expected component of domestic violence services.**
   This was the position Debi and the Board took to help dual programs understand that meaningfully addressing sexual assault in their communities would require servicing a much wider range of sexual assault survivors in both the acute and non-acute setting. Further, Debi clarified that serving IPSV survivors was to be done with domestic violence funding.

   The Board staff also began addressing another priority goal “including more specific sexual assault related information in the standards” by revising their quality assurance and program monitoring standards to better address sexual assault. This change had significant ripple effects. Peer-based monitoring teams started looking at how well sexual assault was addressed in an agency’s mission, philosophy, values, policies and procedures. Clarifying these standards provided direction to those reviewing funding proposals as well. The Board initiated a provisional status for 5 awards that had scored the lowest in the bid process relative to sexual assault. They offered these programs technical assistance, training, and time to determine if their programs could and would provide sexual assault services in line with the new standards.
If your state or territory has a large number of dual programs in which sexual assault is being under-addressed, this may be a policy worth exploring with your state coalitions and local agency directors. Independent of this policy, you may need to assess the degree to which the unique needs of survivors of IPSV are being addressed by a given program.

2. **Don't assume that all the stakeholders know what “full scale” sexual assault services should include.**

Through the 2011 series of conversations, Board staff learned that some agency directors/programs did not fully understand the needs of victims/survivors of sexual violence beyond IPSV. This contributed to the frustration agency directors’ had when they heard Debi’s proposal. Defining the components of a “full scale” sexual assault program created a benchmark for assessing current services in a statewide survey and a broader understanding of what was missing.

3. **Give agencies a number of acceptable models for delivering sexual assault services and make sure there are adequate pathways to get there.**

Even as they defined what comprehensive sexual assault services looked like; MDSVPTB and Think Tank participants rejected an “all” or “nothing” approach to enhancing sexual assault services in Michigan. Instead, they developed and defined a range of acceptable models for delivering sexual assault services and aligned funding, monitoring, and expectations accordingly. This range allowed programs to get started on the path to improvement without losing all funding. It also helped all identify the technical assistance and training needed to fit the model selected by a given program.

4. **Lead by example.**

While Debi and her staff had been working to increase the focus on sexual assault in her agency’s work for several years, shortcomings in their efforts were some of the first to be pointed out when the discussions began. They responded by making changes. They pursued an executive order to change the Board’s name to include sexual violence, they changed how they talked about sexual assault in their training and technical assistance (and
requested the same of other statewide training providers with whom they contracted, they sought additional grants to increase their sexual assault related work, and they made specific changes in their bidding, contracting, monitoring and standards-making work. If state level leaders—funders, legislators, training providers, others—can address conditions which may be inhibiting progress toward a shared goal of improving sexual assault response, it can provide a model on how to begin the process locally. Assessing the degree to which the state/territorial agency is specifically addressing sexual assault, and then instituting meaningful changes, sends a positive signal to local programs that improving sexual assault services matters, and that the state/territory is willing to engage in the same hard work it is asking of local programs.

5. Create opportunities for interaction and critical conversation

The Think Tanks that MDSVPTB and the Coalition convened allowed the conversation Debi started in April 2011 to broaden and deepen. Together, Think Tank participants changed the main focus of the work, set priorities, and engaged additional leaders. They were invited to think beyond their own program issues and use their expertise to set a course for improving sexual assault services across Michigan. The result of their work was shared with the full group of agency directors and informed some of Board’s next steps.

Debi and her staff also introduced more sexual assault-specific conversations into meetings with both sexual assault and domestic violence agency grantees. They made strategizing about sexual assault specific work like SANE standards, sexual assault model protocol, forensic kit documentation, Clery Act provisions, trauma-informed care for sexual assault survivors, acute crisis response, and other such topics normative. Where they could, the Board also supported training opportunities for any program committed to improving its response to sexual assault survivors, whether or not they were receiving funding for sexual assault services.
Considerations in Moving Forward

State compliance with the set aside dollar amounts does not necessarily translate into meeting the need. What else might you consider before convening conversations around shifting funding formulas in your state or territory? We offer six questions to consider prior to engaging in efforts to improve state or territorial responses to sexual assault:

1. Where and when do you have these conversations? With whom do you engage?
2. How much consensus currently exists about the nature and quality of the current response to sexual assault?
3. How much flexibility currently exists in the tools you have to perform the functions of your office (e.g. outreach, training, funding, grant administration, quality assurance, technical assistance, resource development and reporting)?
4. What key features of the current approach are important to people?
5. What other context is important to consider in designing a conversation around this topic?
6. In your state/territory, what are the benefits and challenges to proposing a shift in the funding formula like Debi did in Michigan?
Michigan Timeline

April 2011  Director’s Meeting: SA funding formula change raised by Debi Cain, Executive Director of the legislatively created Michigan Domestic and Sexual Violence Prevention and Treatment Board

June 2011  Sexual Assault Think Tank 1: Articulate goal and questions to needing to be addressed in order to enhance and develop sexual assault services across the state

September 2011  Sexual Assault Think Tank 2: Review the themes the group had previously identified, vote on priorities, and prepare to present their thinking to the larger group of agency directors

October 2011  Survey of MI Sexual Assault program directors to illuminate the to which existing sexual assault programming currently fit acceptable models, what models programs may be interested in developing, and barriers and needs for supporting domestic violence and sexual assault programming

January 2012  Webinar for STOP administrators

December, 2012  Executive Order issued to change Board’s name to include SV

August 2013  The Board and MDSVPTB staff explore the types of changes achieved via interviews and the use of a structured exploration tool called the Implications Wheel™, with the support of the Sexual Violence Justice Institute (SVJI) at the Minnesota Coalition Against Sexual Assault

September 2013  Sexual Assault Think Tank 3: Collect and review actions which followed earlier Think Tanks, reflect on changes made by Board staff, and explore what’s next for the near future
Resources

SVJI explores relevant topics and provides technical assistance and training across the country for STOP Administrators, state-level leaders, and SARTs. Contact SVJI with questions or for technical assistance at: svji@mncasa.org or 651.209.9993.

To access the full report and issue briefs on critical issues go to: http://www.mncasa.org/stop-administrators-project/.

For additional information on enhancing sexual assault services in dual/multi-service programs, see:


End Notes

1. MDSVPTB has a seven-member board, a staff of just over 20 full and part-time employees and a budget of $26 to 28 million dollars that covers 14 to 16 different grant areas.

2. Thirty-eight of a possible 48 programs participated, providing a response rate of 76 percent.

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