A Message From the Director
Patti Seger, WCADV Executive Director

Planning and evaluation are things we have to often do in order to satisfy requirements imposed by funders, but do we like doing it? I suspect some of us do and some of us don’t. But the process of crafting a concise plan into programming that includes evaluation can have a tremendous impact on services. It’s easy to fall into a strategy of "we’ve always done it that way and it works fine" because it takes little—or no—effort. But, a commitment to regularly evaluate what’s being done and how it’s working will provide critical input that will impact services and ultimately the safety and well-being of the people your program serves. In these days of funders requesting "evidence-based" practices and demanding "logic models" in place of more traditional activity and outcomes charts, we hope this Coalition Chronicles will provide you with tools for building evaluative practices into your daily work. For funders, it’s all about knowing that they are investing in programming that works. For domestic violence and sexual assault service providers, it’s all about ensuring that our work truly increases the safety of victims and their children. Happy evaluating!

Peace,

~ Patti Seger

Chronicle Editors:
Colleen Cox, Mary Jo Elert, Tony Gibart and Susan Ramspacher.
BEING LOGICAL BY DEVELOPING LOGIC MODELS FOR OUR PROGRAMS

THE SOCIAL NORMS THAT SUPPORT DOMESTIC AND DATING VIOLENCE.

More and more funders are asking for logic models of our programs. For many, they have become a useful tool to describe or capture their programs’ intended outcomes and impacts in one page.

But really, what is a logic model other than a bunch of words, boxes, lines and shapes?

The Program Development and Evaluation Unit of the UW Extension indicates that a logic model “displays the sequence of actions that describe what the program is and will do – how investments link to results.” Some call it a graphic representation, a road map or a picture of how your program works. Rather than separate details of outcomes, activities and other components of your program, it describes the relationships between activities and the sequence of events that bring about change. Logic models are a core of program planning, management, and evaluation activities.

Logic models are usually displayed as a flow chart, map, or table. They are usually read from left to right. As you get more familiar and comfortable with the process of developing logic models, you can also get creative with their format.

The basic components of a logic model are shown here. These components illustrate the connection between planned work and intended results.

- Inputs – materials, resources, personnel – what is needed to run the program
- Activities – events, actions, strategies conducted – what the program does to fulfill its mission
- Outputs – things that are produced, people who are changed – often expressed in numbers – the direct product of the program activity
- Short-term Outcomes – changes in participants that can be assessed soon after participation in the program (usually the focus of outcome evaluation tools)
- Long-term Outcomes – changes in participants that can only be assessed after some time has passed (often not measured by programs)
A few additional elements can be added to logic models.

a) Assumptions: the beliefs we have about the program, the people involved, and the context and the way we think the program will work

b) External Factors: the environment in which the program exists includes a variety of external factors that interact with and influence the program action.

Some people find it easier to start with resources and work toward impact. Others prefer to begin with impact and work backwards. There is no “right” way to approach logic model development. If you would like help developing logic models, feel free to contact Susan Ramspacher or Julie Andersen at WCADV.

Why develop logic models (even if funders do not ask for them)?
Because logic models serve as a “road map” for programs, they can help staff summarize complex programs in a way that promotes understanding among stakeholders. The process of developing a logic model forces staff to clarify the mission, goals, and activities, and intended outcomes of a program. The process also helps staff identify and address gaps that exist between resources, activities, and outcomes before the quality of the program is compromised.

- Summarizes complex programs
- Provides clarity to program staff
- Identifies gaps in program logic
- Builds consensus and promotes teamwork

Resources for Understanding and Developing Logic Models
As mentioned above, the Program Development and Evaluation Unit of the University of Wisconsin – Extension has an extensive webpage dedicated to logic modeling.

From the CDC Evaluation Workgroup many different logic model and planning tools can be found, including this brief which details the differences and similarities between strategic plans, logic models and work plans.

The University of Kansas Community Toolbox includes rich resources about logic modeling, including examples of logic models from the mundane to the dynamic. As they indicate, no other person’s or group’s logic model will fit you. Make it your own.

Julie Andersen and Susan Ramspacher from WCADV’s DELTA Prevention Project are happy to assist with logic modeling. Feel free to email your questions or call for help (608) 255-0539.

Resource for Comic Relief
It’s important to keep your humor and positive attitude with all aspects of planning, implementation and evaluation for our program work. We’d like to offer this logic model from the Non Profit Quarterly.
Logical Model for Creating Achievable and Sustainable Change Modalities over Time

Your search for the perfect logic model is now over!

NPQ is proud to recycle this masterful logic model – ideal for insertion into your next grant proposal. After all, it’s probably just as good as many and in terms of efficiency – well its use cannot help but save valuable time! We’d provide you with the author’s name but we can’t know it for sure and we suspect he or she has his or her career to consider.—The Editors

“I’ll pause for a moment so you can let this information sink in.”
Building Outcome Evaluation Skills

The following excerpts are from *Outcome Evaluation Strategies for Domestic Violence Service Programs Receiving FVPSA Funding: A Practical Guide* by Eleanor Lyon and Cris M. Sullivan. The paper was written in 2007 to help FVPSA (Family Violence Prevention and Services Act)-funded programs respond to federal requirements that they document their effectiveness. Wisconsin programs have already complied with these requirements by tracking the percentage of clients who report having increased strategies for safety and knowledge of community resources.

However, the paper is still very relevant. Whether you are new to domestic violence programming and evaluation or a veteran, this paper is a wealth of information and a tremendous foundation to introduce, teach and tighten up your evaluation skills and resource.

It offers an excellent introduction to the evaluation of domestic violence services, a summary of studies that show the effectiveness of services and doable evaluation methods programs can execute to optimize and validate their services. The paper is focused on adult services including shelter, support and advocacy services and support groups. Some of our favorite sections include “Problematic” Outcome Statements to Avoid, Creating a Plan with Staff for Collecting Outcome Evaluation Data and an entire chapter on Making Findings Work for You. As the authors emphasis in this final chapter the message throughout the paper is “Keep it Positive. Keep it Simple”.

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**Why We Want to Evaluate Our Work**

Although the thought of "evaluation" can be daunting, if not downright intimidating, there are some good reasons why we want to evaluate the job we are doing. The most important reason, of course, is that we want to understand the impact of what we are doing on women's lives. We want to build upon those efforts that are helpful to women with abusive partners; at the same time, we don't want to continue putting time and resources into efforts that are not helpful or important. Evaluation is also important because it provides us with "hard evidence" to present to funders, encouraging them to continue and increase our funding. Most of us would agree that these are good reasons to examine the kind of job we're doing...BUT...we are still hesitant to evaluate our programs for a number of reasons.

**Why Many Domestic Violence Programs Resist Evaluation (and reasons to reconsider!)**

“Research has been used against women with abusive partners.” It is true that people can manipulate or misinterpret research data. However, this is actually a reason why we need to understand and conduct our own evaluations. To effectively argue against the misinterpretation of other research, we must at least have a general understanding of how data are collected, analyzed, and interpreted.

[...]

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“Keep it Positive. Keep it Simple.”
“We don’t have the staff (or money) to do evaluation.” It is true that evaluating our programs takes staff time and money. One of the ways we need to more effectively advocate for ourselves is in educating our funding sources that evaluation demands must come with dollars attached. However, this manual was created to prevent every program from having to “re-invent the wheel.” Hopefully the strategies outlined in the following chapters will assist you in conducting evaluation without having to devote more time and money than is necessary to this endeavor.

[...]

Knowledge is power. And the more service providers and advocates know about designing and conducting evaluation efforts the better those efforts will be. Evaluating our work can provide us with valuable information we need to continually improve our programs.

The next chapter provides a quick description of the distinction between research and evaluation, and an overview of some of the knowledge we have gained to date from recent research....

The Difference Between Research and Evaluation

Many people find the distinction between “research” and “evaluation” to be confusing, but it’s really not complicated.

Research is a broad term that refers to collecting information about a topic in an organized, systematic way. It can answer many questions that are interesting and useful to us, such as how widespread domestic violence is in a particular country, or within a particular age group. It can answer simple questions such as these (although getting credible answers might be difficult), or much more complicated questions, such as “what are the primary factors that contribute to women’s increased safety after an episode of abuse?”

Evaluation is a particular kind of research. It answers questions about programs or other kinds of efforts to provide services or create change in some way. Again, the questions can be simple, such as “what did the program do?” or more complex, such as “how was the program helpful, and for which people?” Evaluation research, as the term suggests, tries to answer questions about a program’s “value.”

[...]

Before we turn to more of the conceptual issues involved with your local evaluation, however, we want to provide an overview of some of the useful results of recent research and evaluation... Using these kinds of research and evaluation results is what is meant by “evidence-based practice”—something that makes sense and is being urged more and more frequently. It essentially means using the best scientific evidence you can find to decide how to provide services or do other things to help people and communities affected by domestic violence, and to prevent further violence from occurring.
The Impact of Domestic Abuse Victim Services on Survivors’ Safety and Wellbeing: Research Findings to Date

It can be helpful to know what research studies have found about the effectiveness of our efforts, so that we can feel confident we are measuring the appropriate short-term outcomes that will lead to desired long-term outcomes for survivors. Unfortunately very few studies to date have examined the long-term impact of victim services on survivors over time. However, the studies that have been conducted have consistently found such services to be helpful.

Shelter programs have been found to be one of the most supportive, effective resources for women with abusive partners, according to the residents themselves (Bennett et al., 2004; Bowker & Maurer, 1985; Gordon, 1996; Sedlak, 1988; Straus, Gelles, & Steinmetz, 1980; Tutty, Weaver, & Rothery, 1999). For example, Berk, Newton, and Berk (1986) reported that, for women who were actively attempting other strategies at the same time, a stay at a shelter dramatically reduced the likelihood they would be abused again.

One research study used a true experimental design and followed women for two years in order to examine the effectiveness of a community-based advocacy program for domestic abuse survivors. Advocates worked with women 4-6 hours a week over 10 weeks, in the women’s homes and communities. Advocates were highly trained volunteers who could help women across a variety of areas: education, employment, housing, legal assistance, issues for children, transportation, and other issues. Women who worked with the advocates experienced less violence over time, reported higher quality of life and social support, and had less difficulty obtaining community resources over time. One out of four (24%) of the women who worked with advocates experienced volunteers who could help women across a variety of areas: education, employment, housing, legal assistance, issues for children, transportation, and other issues. Women who worked with the advocates experienced less violence over time, reported higher quality of life and social support, and had less difficulty obtaining community resources over time. One out of four (24%) of the women who worked with advocates experienced no physical abuse, by the original assailant or by any new partners, across the two years of post-intervention follow-up. Only 1 out of 10 (11%) women in the control group remained completely free of violence during the same period. This low-cost, short-term intervention using unpaid advocates appears to have been effective not only in reducing women’s risk of re-abuse, but in improving their overall quality of life (Sullivan, 2000; Sullivan & Bybee, 1999).

Close examination of which short-term outcomes led to the desired long-term outcome of safety found that women who had more social support and who reported fewer difficulties obtaining community resources reported higher quality of life and less abuse over time (Bybee & Sullivan, 2002). In short, then, there is evidence that if programs improve survivors’ social support and access to resources, these serve as protective factors that enhance their safety over time.

The only evaluation of a legal advocacy program to date is Bell and Goodman’s (2001) quasi-experimental study conducted in Washington, DC. Their research found that women who had worked with advocates reported decreased abuse six weeks later, as well as marginally higher emotional well-being compared to women who did not work with advocates. These findings are promising but given the lack of a control group they should be interpreted with extreme caution.
Another research study examined domestic abuse survivors’ safety planning efforts (Goodkind, Sullivan, & Bybee, 2004). The two strategies that were most likely to make the situation better were contacting a domestic violence program, and staying at a domestic violence shelter. These results provide strong support for the importance of domestic violence programs.

It is also important, though, that women who were experiencing the most violence and whose assailants had engaged in the most behaviors considered to be indicators of potential lethality were the most actively engaged in safety planning activities, but remained in serious danger, despite trying everything they could. These findings highlight the importance of remembering that survivors are not responsible for whether or not they are abused again in the future. For some women, despite any safety strategies they employ, the abuser will still choose to be violent.

[...]
Using Focus Groups as Evaluation Tool

“That’s what the child advocate did, she helped me learn that it’s OK to play cotton ball hockey on the table with my son. We think we don’t have anything and we do. We can interact and do games together.” Focus group participant, WCADV Growing Together Focus Group Project

“In the past, I think that by not hitting and scolding my children then I’m already a good father. Now, I learned that children learn many things from us parents whether good things or bad things. For that reason, us, meaning me and my wife, have to respect, help each other, love each other, encourage each other, and I as a father have to let go some of my male ego.” Focus group participant, HAWA Men’s Group Evaluation

With these two quotes, we show the rich input that can be gleaned by focus groups. Taken out of context, these statements mean little. But coupled with the results of a fruitful group, quotes connect and themes emerge that provide direction and focus for program development and evaluation.

Focus groups are a fundamental way to collect opinions, ideas and feedback. Focus groups bring together small groups to have open dialogue about a specific topic with a moderator and recorder. While focus groups elicit broad, open and varying opinions from members, they are well planned, choreographed and explicit in what they are working toward. According to the University of Kansas Community Tool Box “focus groups offer a depth, nuance, and variety to the discussion that would not be available through surveys.”

Examples of potential uses for focus groups:

A focus group of former shelter residents to discuss potential changes to shelter life. They share their ideas for how to improve relationships among residents and safety while in shelter.

Teachers from the school district brought together in a focus group to identify ways to promote healthy relationships and teen dating violence awareness.

Your agency wants to identify ways to increase use of your programs by immigrant victims. You convene a focus group of immigrant members of your community to discuss barriers and concerns about using your programs.

Your CCR seeks input from survivors of domestic violence living in your community. In conjunction with community partners, you hold a focus group to learn about opportunities and barriers for survivors trying to get systems to work for them.

The Community Tool Box provides an easy-to-use guide for conducting focus groups and identifies times when focus groups get you what you need:

- When you are considering the introduction of a new program or service.
- When your main concern is with depth of opinion, or shading of opinion, rather than simply with whether people agree or disagree.
When you want to ask questions that can't easily be asked or answered on a written survey.
When you want to supplement the knowledge you can gain from written surveys.
When you know or can find someone who is an experienced and skilled group leader.
When you have the time, knowledge, and resources to recruit a willing group of focus group participants.

Consider these steps for conducting focus groups

Check your goals
Why do I want to conduct a focus group?
What do I hope to learn?

Consider other methods -
Is the most appropriate and effective method a focus group?

Find a good leader and recorder

Recruit your members

Prepare your questions - Decide topics and write out questions

Set meeting particulars - Where, when, how long, how many groups?

Double Check -
Check to be sure that everything is set

Conduct the Group

Look at the Data -
Remember to record and elicit opinions without judgement

Share the results with the group -
What patterns emerge?
What are common themes?
What conclusions seem true?

Use the results

For more details for the steps above, visit the Community Tool Box or check out another helpful resource guide from Duke University called Guidelines for Conducting a Focus Group. This resource expands on the elements laid out above, with special attention paid to ways to identify themes and outcomes of your data.

While both these guides point to creating free-standing focus groups, domestic violence programs are continually bringing people together in groups that can be utilized to collect information. Consider conducting focused questions in women or children’s support group, with agency volunteers or board members or with your local CCR. The planning and analyzing steps still need to carefully be considered and prepared, but you will spend less time recruiting and bringing people together.
Below are two examples of recently conducted focus groups used by Wisconsin-based programs. We provide these as examples of how groups can be used (needs assessment and program evaluation) and as an illustration of how data can be reported and shared with others.

**Focus Groups for Needs Assessment**

**WCADV’s Group Together Focus Group Project**

In winter and spring of 2011, WCADV conducted six adult and two youth focus groups at DV programs in eight locations around Wisconsin. The purpose of these groups was to understand more about how DV has affected mother-child relationships and learn more about what these mothers and children need from DV programs. This project is funded by WCADV’s Growing Together Project, and the project and focus groups centered around communities of color and families in the child welfare system. There are logistical and ethical concerns about conducting focus groups with younger children. We supplemented two teen focus groups with information gathered from children in support groups in local domestic violence programs.

The reports from the focus groups and the children’s support groups are available online and the conclusion appears below. If you have questions about this project, contact Ann Brickson at WCADV, annb@wcadv.org.

**Project Conclusion**

Domestic violence has a significant negative impact on a mother’s ability to attend to the needs of her children and be the kind of mother that she wants to be. In all focus groups, mothers who have experienced domestic violence said that they felt forced to put their abusers’ needs first and sacrifice time with their children. They expressed great sadness about this, and reported that living with domestic abuse caused them to be tense, stressed and fearful. They regretted that both they and their partners had been poor role models for their children, and reported that the children were forced to take on adult roles in the family. Other effects on children reported by mothers included behavioral and mental health problems and a lack of trust in mother-child relationships.

When mothers discussed the kind of support and services they needed as victims of domestic violence, three themes emerged.
They placed a high value on the counseling and emotional support they had received from domestic abuse programs. They also valued assistance with concrete services to help them find permanent housing, employment and child care. Finally, enhancing domestic violence services with children’s programming that places a value on parent-child relationships was a desire of many mothers across focus groups. While none of the mothers in these groups requested services such as parent education or parenting support groups, those who had access to culturally-informed psychotherapy in their first language found it useful and were interested in psychotherapy for or with their children.

Overall, youth desired a family life filled with calm and peaceful togetherness. Unfortunately, domestic abuse damaged their relationships with the adults in their lives and as well as with their siblings. Teens in these groups said that they were forced to grow up too quickly and take on adult family responsibilities, and that living with domestic violence had caused them to distance themselves emotionally from other people. They also expressed anger and frustration with the adults in their lives, particularly parents and those in the legal and child welfare systems who did not hear or understand their perspectives.

All the teens in these focus groups reported very positive experiences with advocates in local domestic violence programs. They appreciated the support they received and felt that these were adults who did understand and believe in them. When youth were asked what domestic violence programs could do to help their families, many found the services that they had received to be very helpful. “Keep doing what they are doing”, one youth said. When asked what programs could “really” do to help most youth described the qualities of a non-judgmental support person located in a safe place that they could escape to from time to time. They also appreciated the emotional and logistical support that their mothers and families received from these programs.

**Children’s Support Group Project Conclusion**

With their responses, the children and youth in these support groups demonstrated the complexity of their reactions to exposure to domestic violence in their homes. For example, they expressed both sadness and anger about the abuse, and both sympathy for their mothers and a desire that she summon the strength to do more for them or to resist the abuser. In communicating their struggle with a range of complicated feelings, they demonstrated the trauma unique to exposure to violence and abuse inflicted by one adult caregiver against another. It is heartening that they also recognized the value of expressing their feelings to others whom they trust and receiving emotional support. This may be a result of their positive experiences in support group, but it is consistent with the goals of mental health services for children and youth who have witnessed domestic violence (Groves, 1999).

These children and youth were very vocal about their distress over the lack of stability that domestic violence imposed on their lives. While their emphatic advice to their mothers (move out, get a divorce) and their requests for help from programs (money, food) may reflect the concrete thinking of their developmental
stage, it is also a strong message that they know that a physically and emotionally stable home life is critical to their own well being.

**Focus Groups for Evaluation**

*Hmong American Women’s Association (HAWA) Men’s Project Focus Group*

Since 2005, the Hmong Men’s project through HAWA conducts five-week groups for men to prevent domestic violence in their community. These groups are part of a three-prong package of groups, retreats and conferences with a mission of “Bringing Families Together to Build Healthy Relationships.” The project’s goals include:

- Support Hmong men in their struggle to form healthy male identities in a culture that influences them with mixed messages
- Provide education, strategies, and support for those interacting with other Hmong males to assist them in reinforcing positive messages about respect and honor
- Transform the Hmong community’s attitudes that continue to encourage domestic violence against Hmong women and girls

To supplement their learning from pre/post surveys and letters from participants after each group, HAWA conducted a focus group with past participants in 2011. The focus group explored the following:

- What I learned about being a healthy man, husband and father
- What I learned about healthy communication
- How I, my marriage and children changed because of the program
- How I handle struggles differently because of the program
- Who would benefit from the program

To conduct the focus group, HAWA hired an outside facilitator who could communicate in Hmong and English and had experience with conducting open-ended discussions. Questions to seek insight into the five areas of interest were written in Hmong and English, and focus group participants were asked to write answers to the questions before the discussion occurred. The groups were recorded and Hmong, and English transcripts were created.

Several themes emerged that reflect the goals and outcomes of the project. Members of the group attested to making change in areas of listening and communication, expressing love to their family members and being a role model for family and community. They also shared examples of ways they were trying to understand who they are as men, husbands and fathers—being willing to change and being humble. Finally, equality and shifting their attitudes toward power came through as prominent changes for participants.

HAWA is in the final stage of their focus group report writing. If you are interested in their results, contact May Tong Chang at HAWA, maytong@att.net.
Ending Domestic Violence for All the People: Safety and Services: Women of color speak about their communities

The following excerpts are from Safety and Services: Women of color speak about their communities, a report from the Center for Family Policy and Practice (CFFPP) written by Jacquelyn Boggess and Jill Groblewski. The report summarizes findings from a series of listening sessions CFFPP held in Minnesota, Missouri, Texas, and Wisconsin, “to explore and document domestic violence service priorities as identified by: 1) women of color who are victims/survivors of domestic violence, 2) advocates of color, and 3) a broad range of community service providers. Each group was asked a similar series of questions about the kinds of services that are available to low-income women of color, barriers that get in the way of women utilizing services, unmet and outstanding needs, the kinds of services that are available for men in the community, and perspectives on providing collaborative, community-based services in low-income communities of color.” Through the listening sessions: participants expressed their perceptions related to domestic violence services; they talked about the connections between their victimization, the struggles of low-income men of color and the social service needs of their communities; and, they offered ideas on how services to their communities could be improved. Safety and Services provides many valuable insights for domestic violence victim advocates to consider. It also is an excellent example of how simple qualitative research—listening sessions with survivors and stakeholders—can help programs evaluate their work and stay attuned to the people and communities they serve.

...First, it is our understanding that many low-income women of color who have experienced domestic violence identify a need for services that extend beyond the scope of traditional programs. Of course, traditional domestic violence services (such as shelters, crisis hotlines, support groups, etc.) are vital and urgent, and those services will continue to fill a critical need for victims and survivors. At the same time, survivors in low-income communities and communities of color are expressing a need that surpasses direct intervention responses to violence and immediate security. Women express an urgent need for economic security, personal and cultural understanding, and family and community stability, and they suggest that this necessitates services, resources, and support for the fathers and men in their communities. Therefore, this project aims to contribute to the discussion regarding services for victims and survivors of domestic violence by exploring a range of issues that communities of color identify as important, including the issue of men in low-income families and communities.

“I think it should be family-centered advocacy based on the fact that women of color, you can’t find their end of the road without looking at the whole family, including the person that is acting up....They will see themselves as caregivers of a family, not just [in] a relationship with someone who is acting up. Family is not one of the people, but all of the people.”
Second,... [t]he women who participated in these listening sessions also said that they would like to see services for everyone in low-income communities. There was no suggestion—from survivors or advocates—that support services for men in low-income communities could or should be provided by advocates against domestic violence or their agencies. They did, however, suggest that advocates (and coalitions, service providers, and policymakers) should understand that providing services for men need not preclude or get in the way of providing services for women who have experienced abuse, or vice versa. In fact, most of the women in our listening sessions expressed that, in general, they believe social services for men would support individual, family, and community safety and could potentially—in and of themselves—reduce the incidence of domestic violence.

[...]

Both advocates and survivors said that while it should not be considered the cause, they believe that the stresses of discrimination and poverty contribute to the incidence of domestic violence. Women across listening sessions felt that men must be held accountable when they choose to use violence and, simultaneously, women expressed that they strongly favor community-based social services that would help all men with education, employment, and health services. Many of them expressed the belief that such support services would alleviate some of the stress and feelings of hopelessness the men experience, and that by reducing this pressure, services for men could increase women’s safety.

“I think it should be family-centered advocacy based on the fact that women of color, you can’t find their end of the road without looking at the whole family, including the person that is acting up....They will see themselves as caregivers of a family, not just [in] a relationship with someone who is acting up. Family is not one of the people, but all of the people.”

The domestic violence victims, survivors, and advocates who participated in the listening sessions felt that, overall, low-income men and women alike need a variety of programs that lead to long-term economic stability for their families and their communities. The challenge for communities is to provide support and resources for social services for both men and women and continue to provide support and resources to respond to domestic violence and promote women’s safety. Of course, individual agencies should not be charged with this broad, combined mission. Domestic violence advocates and agencies must continue to do the work of providing intervention and support for survivors and victims. However, it seems that from the perspective of the women of color who talked with us, agencies committed to supporting the survivor must also recognize her as a member of a family and a community. This, of course, is particularly important when she privileges that identity and makes decisions based on it. Across the board, listening session participants felt that all of these various services for women and men can and must co-exist in their communities, and that, in fact, providing services to men in their communities also meets the needs of victims and survivors.

[...]

Participants also supported the approach of co-locating domestic violence advocates in community settings with a variety of other services that address barriers low-income victims face. Such community settings could
house a combination of education, employment, health care (including mental health and AODA), child care, and/or other services that address the pressing needs of low-income communities (such as food pantries, utility or transportation assistance, etc.). Co-locating advocates within this kind of a community setting would further increase awareness of and access to domestic violence services and simultaneously overcome issues of stigmatization and isolation for women who are victims of abuse.

Furthermore, advocates in such settings would be in the position to provide ongoing education and outreach through their continual presence in the community. Listening session participants stressed the importance of service providers not only being located in, but also participating in low-income communities of color. Such involvement increases trust and the likelihood that women in the community will access services. Providing services in a community setting also responds to the needs of women who are not ready, able, or interested in leaving their partners, boyfriends, husbands, and/or the fathers of their children. Advocates could build relationships, provide support, and safety plan with women right where they are, without them needing to first sever their relationships. Such services would increase safety for a vast number of women.

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**Get the Most Out of Your Client Database**

Entering data? Sounds boring. However, you can put your client database to other uses besides creating funder reports.

If you record client intakes, activities and departures in the Alice database, you can access this information in various ways on reports. In particular, the report type “Departures” offers statistics on the status and destination of clients when they leave your program.

Take some time to explore different reports and you may find inspiration to think differently about how your program records client information.
What the Numbers Say: Current Sources of Wisconsin Statistics

We’ve all seen the statistics. The statistics can have a big impact. On the other hand, people can become immune to them when they are overused. Prevalence data can effectively demonstrate the extent to which violence is an enormous problem in the United States and Wisconsin, worthy of significant attention and investment in intervention and prevention strategies. We know that existing prevalence data are incomplete because domestic violence is under-reported to all systems; however, the following reports and data sets validate what we know is true from our work: Wisconsin communities must take seriously the challenge to address a widespread culture of violence and victimization. To effectively use such data it’s important to use it selectively, to set it apart visually (or orally) and to use the most recent data. Use original sources and make sure to use accurate citations.

Every year, the National Network to End Domestic Violence does a point-in-time counting of domestic violence services nationwide. In 2011, 88% of Wisconsin programs participated in the National Census of Domestic Violence Services. The 2011 Census shows that on one day in Wisconsin more than:

- 1,620 victims were served by domestic violence victim service providers;
- 913 victims were sheltered or living in transitional housing;
- 616 hotline calls were answered; and
- 270 requests for assistance went unmet because of a lack of resources.

The National Intimate Partner and Sexual Violence Survey (NISVS) is a survey of more than 16,500 adults from the Centers for Disease Control and Prevention (CDC). NISVS shows that nationally:

- 24 people per minute are victims of physical violence, rape or stalking by an intimate partner;
- One in four women and one in seven men reported severe physical violence perpetrated by an intimate partner (according to the CDC, the term “severe physical violence” includes a range of physical violence, from being kicked to a longer-term pattern of abuse);
- Women are four times more likely than men to be beaten, six times more likely to be slammed against something and nine times more likely to be strangled or suffocated;
- Female victims are approximately five times more likely to be fearful and concerned for their safety as a result of violence than male victims; and
- Additionally, female victims are 5 times more likely to need medical care and 6 times more likely to need housing services as consequences of the violence.
NISVS has specific findings for the state of Wisconsin.

- 714,000 Wisconsin women (32.4%) have been assaulted, raped or stalked by in intimate partner. This number exceeds the population of Milwaukee, the state’s largest city. Approximately half a million of these women were fearful or concerned for their safety.
- 280,000 Wisconsin women (12.7%) have been stalked in their lifetimes.

Adverse Childhood Experiences in Wisconsin: Findings from the 2010 Behavioral Risk Factor Survey analyzes the effect of Adverse Childhood Experiences (as referred to as “ACEs”) on outcomes in adult life. The Wisconsin “ACEs” study documents the long-term and generational of impact of experiencing domestic violence at an early age. Specifically, it found that:

- 16% of Wisconsin adults report having experienced reoccurring violence between adults in their childhood home.
- Adults who lived through this and other adverse childhood experiences were found to be more likely to have physical and mental health problems, engage in high risk behaviors, have a lower quality of life and be more likely to lack health care or be enrolled in Medicaid programs.

According to the 2010 Wisconsin Domestic Abuse Incident Report:

- There were 29,941 domestic abuse incidents reported to law enforcement and referred to district attorneys’ offices in Wisconsin in 2010.
- The report includes similar statistics for each Wisconsin County.

The Wisconsin Department of Children and Families (DCF) tracks the number of individuals who seek services from domestic violence victim service providers each year. Consistently, DCF finds:

- Approximately 40,000 women, children and men receive services from local programs;
- 6,500-7,000 individuals are sheltered in Wisconsin; and
- Over 1,500 requests for shelter are not fulfilled for lack of resources.

The Wisconsin Youth Risk Behavior Survey (YRBS) is conducted as part of a national effort by the U.S. Centers for Disease Control and Prevention to monitor health-risk behaviors of the nation's high school students. The Wisconsin Department of Public Instruction (DPI) has administered the YRBS every two years beginning with 1993. In subsequent years, two questions were added to the section about weapons and violence related to physical dating and sexual violence. The YRBS is administered to students in Wisconsin's public high schools.

- Female students were significantly more likely than males to report being forced, either verbally or physically, to take part in a sexual activity (16% compared to 5%).
- The rate of reported dating violence has remained unchanged since 2003 ranging from 7% -9%. This rate mirrors the national average.
Wcadv’s Annual Spring Social

The March Mingle was held on March 22, 2012 at Plan B in Madison. Guests enjoyed raffles and silent auctions and were entertained by live music featuring We Are Beatrice. The event was a great success and the money raised will benefit programs and victims of domestic violence throughout Wisconsin. We would like to thank all of our auction donors for their generosity. Without them, this event would not have been possible.

A Room of One’s Own
A Woman's Touch
Ale Asylum
America's Best Flowers
Badger Liquor Madison
Vicki Berenson
Blue Lotus Tattoo
Capitol City Tattoo
Capitol Kids
Lisa Miller Carlson
Chocolate Shoppe Ice Cream
Community Pharmacy
Costco Wholesale
Dentistry for Madison
Driftless Studio
Barb Easton
Green Bay Packers
Harley Davidson Museum
Hilton Garden Inn-Milwaukee
Hy-Vee East
Little Luxuries
Ruby Marie Hotel & Essen Haus
SARDINE
Patti Seger
Sergenians Flooring
Sweet Lips Art & Gift Gallery
Target
MadCat Pet Supply
Madison Children's Museum
Midwest Clay Project
Milwaukee Brewers
Orange Tree Imports
PDQ
Eileen Rampacher
Sweet Lips Art & Gift Gallery
Teamsters Local 695
Tyrol Basin
Ultimate Spa Salon
Verizon Wireless
Barbara Voss
Wild Birds Unlimited
Susan Denk Zuehlke

With special thanks to
Plan B and We Are Beatrice

Left-to-right: Linda Hall, ED of WI Association of Family and Children's Agencies (WAFCA) and Representative Chris Taylor.

Left-to-right: Lisa Humbert and Steve Epping and of Wegner CPAs LLP

Left-to-right: Angel Hodsdon, We Are Beatrice and DOC. Melissa Roberts, Office of the Secretary of the Department of Corrections (DOC) and Jennifer Jones, WI Children’s Trust Fund.

Thank You!
SAVE THE DATE
WCADV’S SEVENTH ANNUAL
TOGETHER WE CAN END DOMESTIC VIOLENCE LUNCHEON

Friday, September 14, 2012
11:30 am-1:00 pm
Monona Terrace Convention Center
Madison WI

Special Guest

Olga Trujillo

Olga Trujillo is an attorney, speaker, author and survivor. Her experience over the past 25 years has been as a private attorney; an attorney for the U.S. Department of Justice; a consultant to many local, state and national organizations; a nationally sought speaker and now an author.

Olga is featured in the video “A Survivor’s Story”, a documentary and training video based on her personal experience of violence. In 2006, Olga received the Bud Cramer Leadership Award given by National Children’s Alliance for her work to help professionals around the country better understand the impact of violence on children. Olga has authored a number of articles and publications. Her memoir for New Harbinger Publications entitled “The Sum of My Parts” was released in October 2011. She also co-authored a Handbook for Attorneys “Representing Domestic Violence Survivors Who Are Also Experiencing Trauma and Mental Health Challenges” which was released in January 2012. Olga currently writes a blog for Psychology Today and The Huffington Post.

Host a Table at the Event and your name will be entered to win $150 to Sundara Spa!

Contact Mary Jo Elert at WCADV for more information

maryjo@wcadv.org

Social Change Through Action and Advocacy
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Help WCADV continue to provide necessary services to victims and survivors across Wisconsin.

Visit WCADV’s secure website to make a donation

www.wcadv.org

Thank you for your support.

WCADV is a member of Community Shares Wisconsin.